



Same as it ever was: ‘Life during the pandemic was no different to normal... I’m always lonely’

Loneliness and Covid-19

December 2021

Introduction

Many of us experience loneliness at some point in our lives. For many people these feelings can be short lived, and yet for others feelings of loneliness can persist, undermining well-being and impacting negatively on their quality of life.

Loneliness is the feeling experienced when people are unable to have the meaningful conversations and interactions that they desire and need. As the pandemic and the successive lockdowns have forcibly kept family, friends, and neighbours apart, the ability to have this meaningful contact has become more difficult for many older people, bringing the experience of loneliness to the forefront of their lives. Some people have experienced loneliness caused by the pandemic but for others the conditions created by Covid-19 didn't make much difference because they were already living lonely lives, the daily reality for hundreds of thousands of older people.

Older people can be at particular risk from loneliness because of a range of factors that become more likely as we age, and which can act to reduce the opportunity and ability to engage in meaningful conversations and interactions, rather than ageing itself being the reason for loneliness. These factors may include older people being more likely to face bereavement, to live on their own or be living with disabilities or illness that affects their ability to get out and about, or be caring for a partner, limiting their chances to socialise or even leave the house. Loneliness can have a significant impact on older people's health and wellbeing and is associated with worse physical and mental health in older people.

We know from our research during the past eighteen months that older people report the pandemic has left them feeling anxious, depressed, and fearful for the future, and that these people are unlikely to recover easily from the physical and emotional impacts of the pandemic.

Before the pandemic, around 1 in 12 people aged fifty and over in England were often lonely, equivalent to around 1.4 million people¹, a number we project will increase to around 2 million people by 2026¹. The number may be even higher if the experiences of older people during the pandemic make it more difficult for them to engage in or increase levels of meaningful contact. The impact of the pandemic has been highly unequal, disproportionately affecting people with low incomes, health issues and from ethnic minorities. Our recent research has found that around a quarter (27%) of Black and South Asian older people (65+) we spoke to have experienced an increase in their feelings of loneliness since the coronavirus outbreak².

As we approach Christmas, we know how much this time of year is about being with loved ones, and yet, our research has found that almost 1.5 million over 65s said they usually feel lonelier at Christmas than any other time of year, and around 1.4 million older people are expecting to feel lonely this Christmas⁴.

Age UK is determined to tackle this challenge.



Age UK's work over many years has established that successful interventions to help people manage or lessen feelings of loneliness need to be personalised to the individual, and that they rely on

Eyes on the ground

Professionals, community leaders or trusted people in the community who are aware of the signs of loneliness and have the knowledge and confidence to engage in conversations with people who are experiencing these feelings and, if appropriate, signpost them to people who can provide more comprehensive support

Availability of services

The availability of a range of services that meet the needs of different people and can help them resolve or manage issues that are contributing to their feelings of loneliness, from 1:1 befriending schemes to informal social activities and activity groups to information & advice services (including benefit checks) to psychological services and more.

Drivers of loneliness

Loneliness is very personal, and circumstances will affect people differently but there are some key drivers of loneliness that we can identify:

Covid-19

The pandemic and the associated lockdowns created a new wave of lonely older people, who had previously been managing to avoid loneliness by keeping active and socialising, opportunities which were then taken away during the pandemic.

“Missing family and friends, I had a significant birthday in June which would have been two parties, one here and one with my siblings 80 miles away. Phone calls aren’t the same, nobody has anything to talk about because nobody is doing anything” (HI first covid report)

“I have two grandchildren born in the lockdown and I have not seen my daughter and my eldest granddaughter in 6 months and have not met my new granddaughter yet.” (HI first covid report)

A particularly cruel aspect of the pandemic was the situation for people living in care homes who were often unable to see their friends and family for months on end due to restrictions on visiting. Some

residents were only seeing their family through a window or for a fleeting visit in the garden.

“Not being able to see family for months on end - then for only 30 minutes a week has affected them badly. No sense of time, upset, confused, feeling out of control at being kept away from family and friends.” (HI first covid report)

Poor health & well-being

Difficulties with physical and mental health can reduce older people’s ability to participate in community activities and can inhibit their ability to maintain or establish meaningful relationships. This can increase their feelings of loneliness and make it challenging to manage or lessen such feelings. Furthermore, these feelings of loneliness can compound older people’s physical and mental health.

Many older people who were shielding, in poor health or simply lacking in confidence after months



of reduced contact and activity have not found the gradual return to normal life easy. Age UK's research after the first lockdown in 2020 found that:

- Two in five people feel less confident going to the shops
- Two in three are less confident using public transport
- Nearly half feel less confident going to a hospital appointment

The resilience and ability to 'bounce back' may be particularly difficult for those who face barriers to reconnection, such as mental or physical health issues. The longer-term impact of Covid-19 is likely to further embed economic and health inequalities, with more disadvantaged people more likely to be at risk of persistent loneliness.

“Isolation has been very hard to live with. I'm single and so rely on meeting friends, social and voluntary activities to keep me in touch with people. That's all gone.” (HI first covid report)

*“Just seem to be on my own all of the time”
(HI first covid report)*

*“Lack of company. Only, and thankfully, having dogs as company to talk to. Without them goodness only knows how I would survive”
(HI first covid report)*

Bereavement

While losing a loved one is always difficult, many older people who have experienced a bereavement during the pandemic have had to cope with their loss by themselves, without the support of family and friends. This has complicated the grieving process and left them feeling alone. Older people who lost a loved one before the pandemic, and may have previously been coping, also found that their grief was compounded by the lockdown and restrictions on face-to-face contact.

“Just feel like nothing matters anymore. An email friend died of the virus early on and within days and without any family with him. Hard to get over that alone.” (HI first covid report)

Income

A lack of money can reduce the opportunities of older people to participate in their community and society more widely. Many older people are on low fixed incomes which mean even relatively small costs (e.g. of transport or a lunch club) are out of reach, making it difficult for them to engage and participate in activities that can help build and maintain the meaningful relationships that are needed to help manage or lessen feeling of loneliness.

There are currently 2.1 million pensioners (18 per cent) living in poverty who are forced to make difficult choices about how to make the most of their very low fixed income; single female pensioners are at much higher risk of being in poverty than single men, and pensioners from Black and Asian communities are around twice as likely to be living in poverty as White pensioners.

Digital Exclusion

Almost without exception the services run by local organisations like the Age UK network of charities which help older people to manage and alleviate feelings of loneliness had to transform as a result of the pandemic. Telephone befriending schemes were able to continue but face to face services had to be suspended or switched to an online or telephone service. For very many older people the digital option was very positive and enabled them to keep in touch with friends and join online groups and activities. But for a significant proportion of people who were unable to go online the pandemic built a wall between them and their opportunities for meaningful contact. Among those aged over 75 two out of five (40%, around 2.2 million) do not use the internet.

“She also resents that so much is going on online and she can only be told about it as she has never had any computing device and has no Wi-fi installed. We did talk about this but frankly the whole thing would confuse her greatly and then cause stress.” (HI first covid report)

Solutions to tackle loneliness

Social prescribing

Social prescribing is often given as the solution to tackling loneliness. Social prescribing is the concept that people's health and well-being can often be improved by non-clinical interventions by connecting them to community services run by the council or a local charity. Social prescribing can very often be a great solution to help manage or lessen feelings of loneliness but will only work when there are sufficient and appropriate services for people to be referred into. Sometimes a social prescribing service can generate referrals but raise expectations of support that is not always available. There is a risk that funding sometimes goes into roles that are used to identify people who will benefit from social prescribing (social prescribers, community connectors, link workers) rather than service delivery itself, which can bottle neck the services that provide long term impact.

Our recommendation

Our work has shown that effective, community wide approaches to tackling loneliness need to combine personalised support with knowledge of community resources; the availability of a wide range of community resources; partnership working; and mobilisation of communities. Our local Age UK partners have been successful because they know their communities, and they can work collaboratively to meet their needs. Where the local community (LA, CCGs, voluntary sector etc) are working together, and where a range of services for individuals to be referred into are available then voluntary sector services and social prescribing can be an effective solution towards combating loneliness. We have found that for programmes to achieve the best results, they must take account of the needs and aspirations of the people they aim to support, to find out what their loneliness is about and help them to help themselves by providing the personalised support necessary for them to reconnect.

Volunteers

Volunteer capacity and commitment had been a challenge in lockdown and reinvigorating the workforce has affected service capacity. Several local Age UK charities have reported losing volunteers or volunteers being reluctant to do face-to-face work because of the continuing risks posed by Covid-19. Encouraging people to volunteer is a great way of addressing loneliness as they can offer peer to peer support and befrienders can befriend each other.

Our recommendation

Older people can face potential barriers when volunteering, not least the ageist policies and practices of some organisations that impose upper age limits on volunteers. There may also be physical challenges for older people with visual, auditory and cognitive impairment, ensuring covid-safe environments, or it could be something as simple as a lack of transport. A flexible and inclusive approach to developing and recruiting volunteers will help to encourage older volunteers. Many voluntary sector organisations that provide vital support to many volunteers have been hit hard by the economic climate and funding challenges created by Covid-19. National and local government should continue to support voluntary organisations to help them grow and develop their volunteer management capacity.

Voluntary sector access to sustainable funding

The Age UK network of charities provide a range of services to tackle loneliness. Befriending services are the most frequently provided services designed to manage or reduce feelings of loneliness and which local Age UK charities report being the most popular and effective. Innovative approaches to ‘befriending’ have been adopted during the pandemic e.g. walking befriending. Offering a mix of telephone and face-to-face befriending sometimes meant that the number of conversations volunteers could provide could be increased. However, some Age UKs reported their clients prefer face-to-face visits when this has been possible. There are many other services that offer meaningful social connections including groups or activities as well as home support services.

However, funded programmes supporting older people around loneliness often have targets and time limited intervention and support. Sometimes funding programmes can limit an intervention to a number of weeks. Some local charities have set their own fixed-week time limit due to managing demand and capacity which a lot of older people find difficult

as the scheme is only able to reduce their loneliness temporarily. Many local Age UK’s report that services now operate with a significant backlog and waiting lists exist across voluntary and statutory services because of groups and activities being closed during the lockdown periods. More than ever demand outstrips supply.

Our recommendation

Our recommendation is that central and local government support for the voluntary sector continues to be essential and that all funders must recognise the full costs of running services (e.g. covering recruitment, training, retention and matching specific skills of volunteers with need) and provides funding that enables support to be provided for the duration that it is required. Many local Age UK’s routinely subsidise services they are commissioned to deliver because the funding does not cover the true costs of running a service. As many of their charity reserves have been depleted during the pandemic this is becoming unsustainable.

Digital inclusion

For most older people, the best approach to gaining digital skills is through ongoing support, tailored to their needs and preferences, and delivered on a one-to-one basis using the device of their choice. Enabling older people to be safe and confident online takes time. There is a need for far greater resources to be available so that Age UK and other organisations can reach and engage with many more people and provide the ongoing and in-depth support they need to get online, and improve their digital skills, at this difficult time. While many more people could benefit from digital technology, those who cannot, or do not want to be online should be able to access services and support in a way that suits them.

Our recommendation

Our recommendation is that we should prioritise improving access to digital skills training and support, and provision of affordable smartphones, laptops or tablets to vulnerable people who are not already online. National and local government need to focus on supporting people to get online – that means both affordable access to the hardware and devices and broadband access and infrastructure as well as training and support to get online and ensuring better non-digital access to essential goods and services because there will always be some people who are not able or will not go online.

Transport & access to services

Transport plays an important role in helping people participate in society. A loss of access to affordable, reliable, and suitable modes of transport can lead to people experiencing new or deepening feelings of loneliness by making it more difficult to maintain or establish meaningful relationships and connections. Covid-19 has increased anxiety over using public transport and alternatives can be expensive or inaccessible.

Our recommendation

Access to affordable, reliable, and suitable transport is crucially important in helping older people stay engaged and connected; and concessionary travel schemes greatly help with affordability, especially for the poorest older people. A concessionary travel scheme that has flexibility to enable free travel on other modes of transport, including private hires such as taxis and not just buses, could help a greater number of people continue to participate in society. Flexible alternatives to the concessionary travel scheme do exist, such as Taxicards or free community transport, yet their availability and coverage varies widely between local authorities and is subject to local government priorities and funding.

Conclusion

As the number of older people in England continues to grow, the number of older people who are persistently lonely is also projected to increase. Before the pandemic, around 1 in 12 people aged fifty and over in England were often lonely, equivalent to around 1.4 million people, a number we project will increase to around 2 million people by 2026. The pandemic has led to an increase in some of the risk factors that drive feelings of loneliness among older people, by making it more challenging for them to maintain and develop meaningful relationships. Without further support the experiences of loneliness among older people, and thereby the adverse impact on their wellbeing and quality of life, could surpass our previous expectations and this number may be even higher if the experiences of older people during the pandemic make it more difficult for them to engage in or increase levels of meaningful contact.

We need to reinvigorate our efforts to tackle loneliness or see the successes over recent years reversed. In rebuilding our community resilience after the pandemic we must bear in mind the welcome we provide to people who are lonely. We have evidence of what works to tackle loneliness and nationally consistent ways to measure its reduction. Now we need to plan a renewal of outreach, service and place design to ensure we are able to reach and help those who feel often or always lonely.



The quotes from older people, their families & informal carers come from two online surveys promoted through Age UK networks in August 2020 and January - February 2021. Images are posed by models to protect identities.

- 1 Age UK (2018) All the Lonely People: Loneliness in Later Life. Available at https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/loneliness/loneliness-report_final_2409.pdf (Accessed: 6th December 2021)
- 2 In-person survey conducted by Agroni on behalf of Age UK during July & August 2021. Sample of 501 people aged 65 & over from Bradford, Birmingham, Greater Manchester, Leeds, Leicester & London who describe their ethnicity as Indian, Pakistani, Bangladeshi, Black African or Black Caribbean.
- 3 Age UK calculation based on data (weighted to be representative of the UK population) from Yonder online and telephone omnibus research polling for Age UK, August 2021 (sample of 2504 people aged 65+ in the UK, between 11th and 22nd August 2021) and ONS mid-year 2020 population estimates (published 25th June 2021).
- 4 Age UK calculation based on data (weighted to be representative of the UK population) from Yonder online and telephone omnibus research polling for Age UK, November 2021 (sample of 2539 people aged 65+ in the UK, between 20th and 27th October 2021) and ONS mid-year 2020 population estimates (published 25th June 2021).
- 5 Age UK (2018) All the Lonely People: Loneliness in Later Life. Available at https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/loneliness/loneliness-report_final_2409.pdf (Accessed: 6th December 2021)
- 6 Age UK (2018) All the Lonely People: Loneliness in Later Life. Available at https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/loneliness/loneliness-report_final_2409.pdf (Accessed: 6th December 2021)

About Age UK

Age UK is the country's largest charity dedicated to helping everyone make the most of later life. Our vision is to make the UK a great place to grow older. Our ambition is that all 11.8 million older people across the UK can:

- Have enough money to live without the fear of poverty in later life
- Enjoy life and feel well
- Receive high quality health and care
- Be comfortable and secure at home
- Feel valued and able to participate

Contact us

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