



## Loneliness in the Lockdown

Loneliness and social isolation have a significant impact on public health and well-being. Social distancing to slow the spread of the coronavirus simultaneously increases the risk of loneliness and social isolation and rules out most of our existing approaches to tackling them.

To make matters worse, research shows that feelings of loneliness are heightened at times of significant change in our lifestyles such as many are currently experiencing.

Tackling loneliness was already a priority. Now it is of greater concern than ever before. The challenge is how those at risk can be supported at a time when direct social contact must be avoided, and public services are under severe strain.

This note examines possible approaches to tackling loneliness during the lockdown. It:

- Provides an overview of approaches to strengthening social contact, including those enabled by digital technologies.
- Highlights lessons from previous approaches that have reduced loneliness and social isolation among groups who have long felt socially distanced, such as carers, new mothers and lone parents, those with physical mobility restrictions and those with mental ill-health.
- Suggests ways that public services in Wales and elsewhere can adapt these strategies to support communities through the pandemic.

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<sup>1</sup> The 2018-2019 National Survey for Wales did not include questions on loneliness and social isolation.

## The Challenge

Loneliness and social isolation are related, but distinct concepts. Loneliness is a measure of a person's feelings about the quality of their relationships. Social isolation focuses on the quantity of relationships (de Jong Gierveld et al., 2006).

The 2017-18<sup>1</sup> National Survey for Wales reported that 16% of the Welsh population identified as being lonely. Addressing this means increasing the quality of people's social contacts.

In February 2020, the Welsh Government launched its [Loneliness Strategy](#), supported by a £1.4 million fund over the next three years. This will support community-based organisations to test, scale up and deliver innovative approaches to tackling loneliness and social isolation.

However, most of our existing approaches rely on face-to-face contact to link people to initiatives, groups and services and to deliver them. Social distancing means that we need to come up with effective interventions that do not exclusively depend on these direct social contacts.

## How technology can help

Technology – including social media platforms – provides valuable ways for people to connect with each other. It also offers public services ways of identifying and meeting communities' and individuals' needs.

Research shows that using technology can relieve feelings of loneliness and social isolation, where it is used to augment and



enhance social relationships rather than displace social interaction (Nowland et al., 2018). Technology is not an adequate replacement for face-to-face contact because key aspects of communication, such as attentive silence and active listening, are more difficult on-line (Lawson et al., 2014), the effective conveyance of emotion can be impeded (Kruger et al., 2005), and important features of face-to-face interaction, such as eye contact, body language, hugs, cries and kisses, are diluted or absent (Nie, 2001: 432).

However, the Covid-19 pandemic means that, for now, technology-enabled interventions may be an important option for those who are most at risk from Covid-19 and for the public services seeking to support them. Therefore, it is important to be aware of what is already known about how technology can be used to mitigate loneliness and how best to support people in its use.

## Identifying Loneliness and Social Isolation

Technology can help to identify those experiencing loneliness and socially isolation. For example, the [loneliness mapping in Monmouthshire](#), which also enables matching residents to activities or groups and provides a means to connect people to local initiatives.

A number of organisations are also working together, through the [Voluntary and Community Sector Emergencies Partnership](#), to improve coordination at national and local level to address loneliness and identify needs during this period. Drawing on soft and hard data, they are building upon the existing [Red Cross Vulnerability Index](#), which identifies vulnerable areas and groups at a local authority and neighbourhood level across the UK.

## Reducing Loneliness under lockdown

Both the [Campaign to End Loneliness](#) and [Age UK](#) advocate simple ways of using technology to reduce loneliness during the lockdown by:

1. Calling friends, colleagues and relatives regularly on the phone;
2. Creating WhatsApp groups with neighbours, family or friends;
3. Using Facebook or Twitter to keep up to date and keep in touch; and
4. Offering to help with shopping or running errands (Campaign to End Loneliness, 2020).

TV and Radio have also played an important role. A partnership between radio stations, manufacturers, retailers and charities is offering [free DAB radios](#) to vulnerable people, and Age UK suggests that friends watch the same TV programme and then call for a chat about it (Age UK, 2020).

There are new networks (such as the [NHS volunteering programme](#)), online classes and events, third sector organisations and community Facebook and WhatsApp groups. And there are thousands of community based [Covid-19 Mutual Aid](#) groups in the UK, which support vulnerable people in their local areas.

There may also be much to learn from technology-enabled initiatives that facilitate community connections that pre-date the Covid-19 pandemic.

[Circle](#) supports members aged 50+ to build and sustain strong social bonds and take care of their practical needs. The aim is to enable them to maintain independence, social connections and a sense of purpose. It offers phone meetup groups, centred on a common interest, such as music, current affairs and languages, and the results are impressive. An evaluation in 2014 found that it had enabled



85,000 new social connections and that 70% of members increased their participation in social activities, 15% reported feeling less unwell, and 13% visited their GP less frequently (Cottam and Dillon, 2014).

Apps and initiatives such as The [Breathe Life](#) Campaign, [Bookey](#), and [Speaking Exchange](#) support the lonely to become involved in providing support and guidance to someone else thereby reducing their own sense of isolation.

## Overcoming issues of access and design

Inadequate internet access or a lack of the skills to use it are key challenges for some of the most vulnerable and isolated individuals. Digital exclusion and social exclusion are linked (Martin et al., 2016). 10% of the UK adult population do not use the internet and almost a fifth (19%) of the population of Wales have zero basic digital skills (ONS, 2019). Only two-thirds of the Welsh population currently use digital technology to support their health, e.g. to find information, self-diagnose or manage medication (Davies et al., 2019).

Even with basic digital skills and good internet access people may find it difficult to navigate unfamiliar platforms (Campaign to End Loneliness, 2020). In normal circumstances, they might call on assistance from family, friends and IT classes, but social distancing makes this difficult.

Easy-to-use and friendly technological devices (e.g. [SpeakSet](#), [Mindings](#), [No Isolation](#)) are designed for users who are tech-shy or have no previous digital experience. An early evaluation of SpeakSet found that older

people and their befrienders were able to use the device after a single demonstration, 75% felt that their relationships have been significantly enhanced and 80% of older users met new people through the network (Campaign to End Loneliness, 2014).

The [Loneliness in the Digital Age](#) (LiDA) project mapped the responses of different groups to episodes of loneliness and explored the potential for creative digital interventions to help manage those experiences. The team stressed the importance of engaging with the group that will use the technology and not designing it 'for' them.

They developed a device called [ChatR](#) with carers, recognising that the transition to becoming a carer often means having to withdraw from professional and social networks. Working with a group of carers, they identified the needs that they had that the device was designed to meet. Carers expressed a need for technology to support: (1) transition by encouraging awareness of loneliness and facilitating peer support; (2) talking and on-going conversation; (3) a sense of group belonging; and (4) escaping – by providing private, safe spaces, where people can connect based on common interest or experience. ChatR was designed to remotely connect carers through an audio-based network. It allowed carers to access channels with different content, to share stories, offer advice as well as listen to and acknowledge the contributions of others (Long et al., 2017, Vasileiou et al., 2017).

Other work in the LiDA project focused on first time mothers – another transition that can be associated with loneliness. This highlighted the value of using existing technologies to connect - using instant messaging could provide new mothers with a means to connect



with each other and reassurance that they are not alone (Lee et al., 2017).

## Some Priorities for Public Services

Many public service organisations already deliver services aimed at addressing loneliness and social isolation and will be considering how to adapt them in light of the Covid-19 crisis. Others may be looking to develop new services to respond to emerging needs or seeking to form new partnerships or learn from organisations with experience in the field.

A key challenge for all public services will be to understand how Covid-19 is changing needs in their areas. Key questions include:

- Who is most at risk and what kind of services should be prioritised?
- How can we use existing data to identify vulnerable individuals and groups?
- How do needs vary across different groups and localities?
- How can technology be used to support opportunities for social connection that meets the particular needs of different groups and localities?
- How will increased isolation during the lockdown affect demand for social care, primary care and mental health services?

Research shows the high value that those at risk of loneliness and social isolation place on opportunities for active engagement with others and in particular meaningful activities with like-minded individuals and groups. This points to the need for interactions that are focused on purposeful activities such as hobbies or learning new skills.

Emerging networks of support, including local mutual aid groups and volunteering through the NHS, may provide opportunities for some people to take an active role in building new

connections with others. However, many of these opportunities will not be accessible to those in high-risk groups who are unable to leave their homes during the lockdown. For them, telephone and technology-based volunteering may provide an alternative.

A key lesson from research and existing successful initiatives is that technology-enabled means of tackling loneliness should be designed with the group that will use it, in order to ensure it is adapted to meet their needs. Clearly, this presents particular challenges at a time when social distancing is necessary. But it is important to explore the potential of technology to tackle loneliness and social isolation both during the lockdown and into the future.

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April 2020**

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