

Problematising participation as the policy solution to 'combat loneliness'



Summary

- This report presents findings on how loneliness is a key concept to how people understand their well-being.
- The presence of loneliness - and the imperative to manage it – were key emerging findings from Dr Oman's PhD research.
- This report reflects on two research projects: 1 cultural studies research into a particular policy moment of loneliness (2014-2016); 2: data collected in 2014 from 14 discussions with groups of people across the UK who participated together in a social activity.
- Despite the fact that these groups of people all participated in social activities together, many experienced loneliness, thereby suggesting that the relationship between loneliness and participation is more complex than assumed.
- This in turn problematises the policy solution of prescribing social and cultural participation 'to combat loneliness'.
- The PhD thesis reflects on loneliness being profiled as a social policy problem in the media, with particular charities and advocacy organisations mobilising it as a public health policy problem to which they could provide a social solution.
- The PhD also reflects on social prescription as a universalising solution to experienced loneliness which is experienced in different ways.

Being forced to subscribe to a particular idea of social activity was actually seen as bad for well-being, especially for those already marginalised, owing to their class, sexuality or disability, for example.

- Media profiling of the 'age of loneliness' may have contributed to the internalisation of responsibility, which manifested in the need to manage loneliness, arguably worsening the effects of feeling lonely in spite of personal efforts to combat it. Furthermore, it led to judgements of the right and wrong ways of being social and good and bad leisure.

Background

‘Loneliness is one of the greatest public health challenges of our time’, stated current Prime Minister, Theresa May, as she launched the first cross-Government strategy to tackle loneliness, 15 October 2018 (UK Government 2018). The Government’s first loneliness strategy arguably follows media pressure to address this social issue, which in turn draws on academic evidence. A particular body of evidence has gained traction through medicalising loneliness; calling it an epidemic (Gill 2014), contagious (Cacioppo, cited in Adams 2016) stating it is more dangerous than obesity (Sample 2014) and smoking (Holt-Lunstad et al 2010). May’s emphasis was that ‘all GPs in England will be able to refer patients experiencing loneliness to community activities and voluntary services by 2023’ (UK Government 2018). This practice is known as social prescribing and has been advocated by some policy sector groups for some time (e.g. APPGAHW 2018).

This report summarises research conducted in 2014, and reflects on the state of research and the media and policy context of that time. In so doing it reveals that assumptions driving the current policy solutions may be mis-placed.

The Age of Loneliness is killing us

(George Monbiot 2014)

‘[This is the Age of Loneliness](#)’, and it’s ‘killing us’, George Monbiot dramatically declared back in October 2014. He went on to explain that this ‘clear social change marks out our time from those that precede it’, pointing the finger at ‘heroic individualism’ as the cause of this ‘disease’. Moving forward to January 2016, three things came into the public eye in the same week, which suggest that this policy moment requires attention. For, if we are to understand how loneliness is experienced, we must also understand how ideas of what loneliness is and how it is experienced are distributed.

For a start, on Wednesday 7 January, the BBC aired its documentary on [The Age of Loneliness](#) which was brimming with heart-breaking interviews with people who had found themselves feeling lonely. Ten days later, [Arts Council England](#) claimed that new research indicates that loneliness can be tackled through the arts (Henley 2016), and in the week following, the [Local Government Association](#) published its [Combating loneliness](#) report in Association with the Campaign to End Loneliness: Connections in Older Age. These three events direct attention away from Monbiot’s hypothesis, indicating that it is not individualisation, as it manifests in selfishness or personal greed which is to blame for our loneliness ‘plague’ (Gill 2014), but that there is growing reason to look at the life course to understand how, why and when people become lonely. More importantly, this means we are overlooking the ways that people’s lives are affected by loneliness – how it is felt and experienced.

Instead of concentrating on the headlines, the documentary [The Age of Loneliness](#) captured the attention – and hearts - of the nation through personal stories. Rather than criticising the lonely, or society at large, it celebrated those ‘brave enough’ to confess loneliness and share their experiences. The documentary makers took time and care in revealing how the

phenomenon can affect anyone from people in their late teens, through to old age, and for a series of reasons. Triggers were often social: lack of money, poor physical or mental health, moving away from hometowns for jobs or education, having children, your children having their own families, divorce, bereavement, or never finding that person you might want to be your life partner in the first place (BBC 2016).

Essentially, the programme explained that contrary to popular belief, many of us can expect to experience loneliness at some point in our lives, not just in old age. This was corroborated more recently by the BBC Loneliness Experiment, a survey of 55,000 self-selecting participants (University of Manchester). 'The Age of Loneliness' made for a successful documentary because, as one tweet expressed, people could recognise themselves in the situations on screen. In fact, in a twitter poll inspired by the programme, 45% of respondents were 'always lonely'; 55% were 'rarely lonely', and shockingly '00%' were 'never lonely'¹.

While 'loneliness now appears as an objective problem', explains Will Davies in his recent book, [The Happiness Industry](#), a deeper understanding of the issue is limited by the statistics, which are focused on its financial implications for governments (Davies 2015). So, while it is a good thing that loneliness is on the radar of politicians, their focus tends to bypass the majority through an invisible process which translates perceived risk into projected health costs. This can result in reprimands for selfishness, rather than action, [as the Health Secretary's recent comment on elderly care exemplifies](#) (Hunt 2013). His criticism of the way British families 'personally treat our own parents and grandparents', was in fact a thinly veiled argument to reduce expectation for future care provision in local and national services.

The national [Campaign to End Loneliness](#) has made great strides in raising the profile of the loneliness problem, but they were focussed on 'older age' <http://www.campaigntoendloneliness.org/wp-content/uploads/downloads/2014/05/FINAL-Age-UK-PR-response-02.05.14.pdf>. Professor Christina Victor of Brunel University has indicated that loneliness is not a recent health problem; that we have in fact known the public health problems of loneliness since the 80s. Victor was asked in this interview for [BBC Inside Health](#), 'Are the public health effects limited to older people?'. She replied:

Oh I wish I knew the answer to that. Regrettably, because we think that loneliness is particularly a problem with older people, we haven't really looked at how the effect of loneliness might impact upon young adults... So we've looked at the effect of loneliness and a range of health outcomes and a range of older adults, but as far as I'm aware no-one has done that for younger adults, and that would be a very interesting question to answer. (Christina Victor)

This feature on the [Inside Health radio show](#), highlights how, until recently, we have a surprising lack of understanding with regards to the impacts of loneliness throughout the life-course. This might well be as a result of the obvious costs to public health services, when loneliness earlier in life may not have not been highlighted as a costly policy problem yet. However, Professor Victor also explained that there are hopes for resolution through future research. She explained that 'group activities look like the best for loneliness, but we don't really understand it enough to understand how best to alleviate it'.

¹ [@DewsburyHello Jan 8](#). This account is now protected, and therefore the tweet cannot be cited in full.

Advocacy for group activities to 'combat loneliness'

Returning to January 2016, two pieces of advocacy research were published. The [Combating loneliness report](#) from the [Campaign to End Loneliness](#) and [Local Government Association](#) (LGA) stated that, 'key risk factors for loneliness include being in later old age (over 80 years), on a low income, in poor physical or mental health, living alone or in isolated rural areas or deprived urban communities' (LGA 2016). The report explains that 'there are many general activities and services which can help address isolation (cultural activities, drop in centres etc)'. While 'the guide focusses on older people' the authors 'anticipate that the recommendations will be beneficial to other age groups'. So, while there may not necessarily be obvious health cost implications of loneliness in younger people as yet, charities concentrating on loneliness in elders are beginning to discuss and present solutions for across the life-course, even if the health researchers are yet to look into it.

A week following the LGA report, the current [Chief Executive of the Arts Council England](#), [Darren Henley](#), revealed 'new research on the importance of the arts for elders'. Based on a recently commissioned survey, Henley explained that it '[highlights how arts and cultural activities could potentially help to tackle key social issues such as loneliness and isolation](#)' and that 'with research showing that engagement in the arts tails off as people get older, we need to get cleverer about how we engage older people and tackle the barriers to taking part.' He continued to explain that new funds will be made available for arts organisations to 'enhance engagement with the older population.'

When you actually look at the [research Henley refers to \(by ComeRes\)](#), 'half (51%) say that [the arts and culture] is important in helping them to feel less alone', which suggests that half (49%) do not. Similarly, only around half say they do less cultural activities now than they did in their teens, twenties and thirties. This is corroborated by [Dr Mark Taylor of the University of Sheffield's](#) findings from his analysis of data from the government's own annual *Taking Part* survey. These show that Henley's premise that participation in arts and cultural activities simply falls off at 65 is questionable; that while this may be true for some activities - attending exhibitions in both arts and crafts, for example - it isn't for others. There is no such decline in working with textiles, reading for pleasure and going to the Christmas panto, while the numbers of people painting, playing a musical instrument and going to the cinema fall consistently from early adulthood.'

In fact, ComRes' findings indicate that the key thing that would encourage older people to go to an arts event is having someone to go with. In other words, changing the kind of arts events that a organisations offer won't change people from lonely people to happy people. So, while we are told certain kinds of activities are the kind to improve well-being, lonely people are encouraged to behave less like lonely people behave statistically, by engaging in the activities that people tend to go to with friends or family. Therefore, upping the dosage of art won't cure the [deadly disease of loneliness](#), because the barrier to visiting a gallery is not having the right people to go with in the first place.

Understanding the meaning of well-being through fieldwork with groups of people who do social activities together

In early 2014, I hosted 14 group discussions with people from 14 to over 80 across the UK. The conversations took place in the various spaces and places that these people already had been participating in a social or cultural activity together. They were all asked to discuss the meaning of well-being in these groups. I encountered many stories of loneliness, but counterintuitively, while none of my participants demonstrated embarrassment in discussing their own loneliness with their peers, there was a certain judgement of others who were lonely – or themselves if they remained lonely.

Killing Time

Despite the fact that Ron, a retired rural GP in his 70s admitted to being lonely, he was very happy to judge others' ways of spending time. Particularly those he would visit as a GP in their homes:

sit [ting] there with a newspaper that they've read front to back, adverts and all, watching Jeremy Kyle and those sort of programmes on the telly... If it got like that all I want to do is now take a bottle of whisky and a few tablets and finish it because it's not worth doing, you know, that's the end.

Ron's comment feels that these people are killing time in a way that is not valuable. Perhaps they weren't doing enough to 'get out there' in the right way. That the onus was on people, *personally*, to fill their lives with things to do which were endorsed as being good for you, rather than sitting at home and watching what one participant called 'those kinds of programmes'. In the same way that Hunt pushed the onus onto families for not supporting their elders as he saw fit, there seemed to be a feeling that people should address their loneliness correctly, and with the sorts of activities others would approve of.

Ron admitted he had only attended the focus group because he was lonely and this was a familiar story across the focus groups. Ron's account of being isolated triggered a striking reaction in Peter, in particular, who responded,

To feel you're alone and there's nobody else in the world must be a terrible thing because it's not something I've ever felt because a) I've been sort of part--, I wasn't an only child and there was always my brothers, there's always been there, and my mum and my dad and I've never really felt that, I honestly can't understand how that feels... But I may have to face it in years to come, I don't know...

Peter moved through these conceptualisations of isolation as a state, as something he had never felt, but recognised it was something he might have to 'face' emotionally and strategically.

...whatever you get involved in, so loneliness isn't something that I understand. I understand there are people that do feel lonely, but I think that's where the community has to come in,

Peter seems to claim he does not understand loneliness as a feeling, even if he comprehends it as a state. As outlined previously, participation in group activities is assumed to generate empathy, which is why it is believed to be good for social well-being. However, while the conversation introduced these ideas to Peter, he moved his encounter with the idea into a vision of a possible future for himself, rather than understanding how Ron felt. By way of comfort to his future lonely self, Peter projected the idea of community as an institution through which people could resolve this social problem.

Peter's resolve that the community *has to* intervene then weakened to, 'we know perhaps we need to do something about that'. A few minutes later, Peter mused,

Peter: *If you want something done you ask a busy person because you know they'll find time.*

Jane: *To come up and help Sheila when her door breaks, getting the coal in.*

Peter: *Well yeah, I know I was thinking the other way around, I was thinking the things that Sheila does, she does the family history, she does the gardening, she gets involved in all these other things, and like she said she doesn't really feel loneliness. Maybe that's because she doesn't have time to be lonely.*

Therefore, for Peter, loneliness as a social problem in which the community must intervene shifted to the onus being on the individual to 'get involved' themselves: to create a way of life for themselves where they fill time in order to not feel lonely.

Filling Time

Even when people can structure their time, and are able to access their desired activities, they can still be overpowered and find themselves with an unhappy ending; or in Maureen's case (below) a frightening one. Maureen, a retired teacher from a social enterprise in the Midlands tried to manage her well-being through structuring her time with activities, as she described below:

I'm a widow, and life gets very lonely so you fill the hours with clubs and church and things, but there's still at times this overwhelming feeling of loneliness because when you walk in that door when you've been out and you lock that door behind you, you won't see anybody until the next morning and it is sometimes a bit scary, yeah.

Maureen explained that she actively sought to counter loneliness, by way of membership of communities and social activities. Despite Maureen's efforts, however, these forms of participation did not solve her feelings of loneliness, and its wider affective ramifications. As Maureen reached the end of her explanation, it was as if she was reassuring herself; that she was in a meaningful place of participation, rather than locking herself in, away from others, bravely facing loneliness. It is clear that people using participation to fill time and bring purpose to life does not solve the problem of loneliness.

Telling people that they'll be less lonely if only they headed for a museum or theatre can only compound the pains of loneliness when have no-one to go with, or cannot leave the house for other reasons. This is corroborated by the ComRes data which shows that having someone to go with was the biggest barrier to arts participation for some age groups (ComRes 2015). Furthermore, for those who do fill their life with social activities, the disillusionment they feel when they return to the house they live alone in, arguably exacerbates ill-being. The issue at hand then, is not really a decline in attending arts events, or changing the offer of museums to get people in them. It is also not social prescribing. But instead, more should be done to help get people out and about wherever *they* want to go, with other people who also want to do similar things. This is in contrast to where they are wanted to be by the largest national funder of the arts. Conversely, more could be done to bring cultural and social participation into people's homes, if poor health limits this. This resonates with those in the Age of Loneliness documentary (BBC 2016).

Experiences of loneliness as shared in the TV documentary, The Age of Loneliness

Many of the people I spoke to in my research agreed to participate because it gave them something to do 'to combat the loneliness'. I was reminded of this as I watched the Age of Loneliness, as the words I'd heard so many times while researching well-being, were echoed by Ian on the programme. Ian's 'loneliness had been with him on and off for all his adult life', we are told, and for the last ten years, depression and lack of money trapped him in his flat for weeks at a time:

I think I'd only need someone to just come to see me for just a couple of hours, maybe once or twice a week. It really helps if there's something to look forward to, you know.. One of the reasons I'm so happy to be doing this (show) is 'cause of the company, you know? It's nice to have people here.

Ian's only solace without companionship were his computer games, which provided him with 'highpoints, you know? They let me feel like I am achieving things; they occupy my time so I don't have to think about how shit stuff is'.

Similarly, one of the stars of the show, 100-year-old Olive, had been widowed five years and found the amount of hours she spent 'here on my own', 'day-after-day', difficult. She called herself a resident of 'lonely street', but the charity, [Contact the Elderly](#) had enabled her to attend tea parties, 'not for the tea, for the company, I never get any company' she said. When asked what she would really like, she explained, 'I would like for somebody to come in and give me a chat'. As the documentary's director, Sue Bourne, explained on [Woman's Hour](#), what a lot of the people on the programme missed or lacked was 'someone to do nothing with'. In other words, that doing something to ease loneliness is not necessarily always about finding someone to go out with, but is having someone to stay in and watch Gogglebox with.

Conclusion

So, while the arts may make some of us happy, lonely people, too; the evidence on which existing government agencies, funders, charities and advocacy groups are building their practice to intersect with the Government's loneliness strategy is problematic. Loneliness and participation have a more complex relationship than accounted for at present. Not all social and cultural activities can alleviate loneliness in the way the Chief Executive of the Arts Council implied in his 2016 press release. In bringing together cultural studies research from 2016 and my fieldwork from 2014, I want to bring peoples lived experiences of loneliness in the context of their lives into discussion with the new Government strategy to combat loneliness (2018).

The BBC documentary showed - and I found when I travelled the UK - that loneliness is differentiated across the population in a way that is not currently accounted for. It is also an additional pressure to do the right thing, and you are frowned upon if you kill your time, rather than fill it. Even those who are filling their time are not escaping loneliness, they return to loneliness when they return home. Furthermore, in visiting groups of people who had been participating in social and cultural participation for some time, I witnessed its *lack* of effect through admissions of loneliness, or comments, such as 'we've never really chatted before, I enjoyed getting to know you'. Blanket assumptions are being made about the qualities of social interaction happening in participation spaces that are not universal experience.

Furthermore, we make blanket assumptions that participation is good for all. Those who more successfully use social and cultural participation included an agoraphobic man in his thirties who 'found' stand-up comedy; an elderly lady who visits her local library to simply watch the daily interactions of others and young men in a prison theatre project that reconnects them with their children. All of these activities were things these people found for themselves and elected to do.

These group discussions talked as much about how the removal of local centres had ripped the heart from their community, and their hope, as much as they did their personal loneliness or how they were 'personally treated by their own children and grandchildren' (to quote Jeremy Hunt again). Others talked of reduced transport services, or the fact that they couldn't afford to take their kids to things which had 'gotten too expensive', or how changes to the Disability Living Allowance had compromised their freedom to get around and see people. Arguably, therefore, the best thing we can do to alleviate loneliness is address the lack of social infrastructure that was caused by austerity policies (Oman 2017).

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Dr Susan Oman

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Additional information

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