



Supporting

BritishRedCross



Barriers to belonging

An exploration of loneliness among people from Black, Asian and Minority Ethnic backgrounds

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Foreword

Where do you feel like you belong? It is such a fundamental question – but in our day-to-day life, it is something we rarely consider.

What is more likely to cross our radar is that uneasy, pit-of-the-stomach feeling that we do not belong: at a crowded work event, walking down an unfamiliar street, the moment we open the door to the playgroup or exercise class we have never been to before.

Often, we only realise where we belong – or where we do not – by looking at others around us. Are they like me? Do I feel safe here? Will these people accept my religion, sexuality or race? Do we have anything in common? If the answer to any of those is no, chances are we will not feel that sense of belonging – and that can be really lonely.

We know this because we see it every day.

British Red Cross and Co-op provide Connecting Communities services across the UK that help adults who are experiencing or are at risk of loneliness and social isolation. Our support is designed around the individual person and tailored to their needs, interests and abilities. It's about putting people in touch with the communities they live in and connecting them to those around them.

We also know that for some people, reaching out can be a challenge that comes with additional barriers. Language barriers, a lack of time, money or poor access to public transport can get in the way. A fear of discrimination as we open that door. This can make loneliness so much harder to overcome.

With social prescribing being rolled out under plans by NHS England, and similar plans in Northern Ireland, Scotland and Wales, it is essential that support to overcome loneliness is welcome to and accessible for people of any gender, ethnicity, sexuality and ability.

This research puts a particular focus on the experiences of loneliness among people from Black, Asian and Minority Ethnic (BAME) backgrounds – but there is so much more to be done.

We hope this report is just the start in making sure everyone gets the help they need to overcome loneliness, regardless of their background or experiences.

Because wherever people feel a sense of otherness, we must work even harder to help them connect and regain the sense that they belong.



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Executive summary

OUR RESEARCH

What is this research?

This research explores the experiences of loneliness among people from BAME backgrounds in the UK. Are people from these backgrounds more vulnerable to the factors we know cause loneliness? Do they face greater barriers in getting help to overcome it?

Who has done this research?

British Red Cross and Co-op have commissioned this research from the Centre for Loneliness Studies at the University of Sheffield and the Runnymede Trust, a race equality think tank.

Why has this research been done?

A lot of research has been done into the scale of loneliness, its broad causes and its consequences, but there has been little exploration of how loneliness impacts people from BAME backgrounds. We want to understand these experiences and make sure that everyone who is lonely gets the support they need.

We hope these findings drive conversations and create meaningful change that improves support for people vulnerable to loneliness. We aim to use them to forge improvements in our own services as well as those across the sector.

Who took part?

This research draws from:

- 952 survey respondents (69 per cent reported they were from a BAME background).
- 22 interviews and focus groups with people from BAME backgrounds.
- 42 interviews with people, from both White British and BAME backgrounds, experiencing or at risk of loneliness and coping with bereavement, a health condition or both.
- 40 interviews with representatives from loneliness and BAME support groups.
- 221 loneliness services mapped.

OUR FINDINGS

Our research highlights the causes of loneliness and the barriers that people can face in getting help to overcome it.

It shows that people from BAME backgrounds are more at risk of experiencing certain factors that cause loneliness, like feelings of not belonging, and discrimination.

It also shows that people from BAME backgrounds often face greater barriers to

accessing help to join community activities, making social connections and creating a sense of belonging.

When we feel we belong, we feel less alone

The research finds that belonging to your community – by feeling valued, included, safe and able to join in community activities – helps to tackle loneliness.

- Sixty-seven per cent of all respondents who felt they did not belong in their community said they were always or often lonely, compared with just 16 per cent who felt they did belong.
- Feeling a sense of belonging with our friends and family – by being able to open up and ask for help, feeling accepted and feeling able to talk about loneliness – also helps to tackle loneliness.

Just 18 per cent of people who said they were able to talk to family and friends about loneliness said they felt lonely, compared with 63 per cent who said they didn't know what to do when they felt lonely.

Of those who said they were “very dissatisfied” with their family relationships, 73 per cent reported being always or often lonely; compared with just 11 per cent of those who were “very satisfied” with their relationships.

Discrimination, bullying and disrespect increase loneliness

The report shines a spotlight on additional triggers of loneliness that have, to date, often been overlooked by service providers, researchers and policymakers, such as racism, discrimination and xenophobia.

- Almost half of people (49 per cent) who had experienced discrimination at work or in their local neighbourhood reported being always or often lonely, compared with just over a quarter (28 per cent) of people who hadn't.
- Just 31 per cent of Black African respondents had not experienced any type of discrimination, compared with 74 per cent of White British respondents.
- Forty-six per cent of those who felt they had been treated with less respect because of their ethnicity said they were always or often lonely. Other factors contributing to being treated

with less respect included disability (57 per cent who felt they were being treated with less respect due to disability felt always or often lonely), religion (49 per cent) and gender (41 per cent).

People from BAME backgrounds often feel less able to access community activities and support

The research found that all minority ethnic groups were more likely than the White British group to report “not having enough free time” and “affordability” as barriers to participating in activities or accessing services that might help to tackle loneliness.

- For all ethnic groups, the top two barriers to joining community activities were cited as “lack of confidence” and “not feeling welcome”. However, White British respondents were far less likely to feel unwelcome or as though a service was “not for them”.
- At the most extreme, some interviewees reported experiencing racist or anti-immigrant attitudes when attempting to participate in groups, activities and services.

Loneliness and stigma

Almost 60 per cent of all survey respondents admitted they didn't feel confident talking about loneliness, with a third more saying they'd never admit to feeling lonely.

Large proportions of all ethnic groups in the survey worried what people would think if they told them they were lonely. Levels were a little lower for the White British (60 per cent), Black Caribbean (55 per cent) and Black African (48 per cent) groups, while 76 per cent of the “other BAME” group and 70 per cent of the Pakistani group said they would worry what others thought about their feelings of loneliness.



Image © Simon Rawles/BBC.

SUMMARY OF OUR RECOMMENDATIONS

So that everyone gets a chance to feel like they belong and feel less alone, we are making a number of recommendations to the UK government, local authorities and organisations providing services to help people overcome loneliness. These aim to remove emotional or physical barriers to getting help, and reduce the stigma around loneliness and the causes of loneliness.

Our recommendations include:

1. Sustainable funding

- Government to guarantee significant and sustained financial commitment to tackle loneliness.
- Funders' and civil society organisations' investment in community integration projects, co-designed with people from BAME backgrounds.

2. Equality of access and feeling welcome

- Educational materials to teach about loneliness focused on celebrating and understanding difference and co-designed with people from BAME and other backgrounds, to support new school curriculum requirements.
- Employers to take action to address discrimination and bullying in the workplace.
- Collaboration between central and local governments to eliminate structural barriers to accessing support and building connections, such as a lack of free public spaces, community provision and transport.
- Service providers to prioritise taking steps to better reflect the community they aim to serve. This should include recruiting a diverse range of volunteers and staff, co-production and active outreach.

3. Raising awareness and tackling stigma

- Government to dedicate a strand of its loneliness awareness campaign to tackle stigma among people who experience particular difficulties or challenges, including people from BAME backgrounds.

4. Conducting further research

- Further collaboration between government and the Office for National Statistics (ONS) to:
 - Develop guidance on using the University of California, Los Angeles (UCLA) measure of loneliness across different cultures and languages.
 - Carry out a large-scale, nationally representative quantitative study exploring the prevalence of loneliness among people from BAME backgrounds as well as the intersectionality with other characteristics, such as socio-economic background.

Introduction

This report explores the relationship between ethnicity and experiences of loneliness. Since some ethnic groups appear to be at greater risk of feeling lonely, it is vital we redress the balance, so that every person experiencing loneliness gets the support they need.

Loneliness is a normal human emotion. But chronic loneliness – when people always or often feel this way – can be damaging. And it can be prevented. Loneliness is now known to affect millions of people in the UK. Its links with poor health are well established: people who are always or often lonely have higher rates of depression, dementia, dysfunctional sleep, cardiovascular disease and cancer – the effects of lacking social connection have been compared to smoking 15 cigarettes a day.¹ But there are ways to protect against loneliness – and an emerging truth seems to be that when we belong, we feel less alone.

British Red Cross, in partnership with Co-op, has been providing Connecting Communities services across the UK. We offer human connections that can break the silence of loneliness. Together, in 2016, we published *Trapped in a bubble* – an important report shedding light on the scale and perceptions of loneliness, as well as some of its causes and consequences.²

We have helped put loneliness on the political agenda. The government has committed to almost all of the final calls outlined by the Jo Cox Commission on Loneliness, including a minister dedicated to tackling the issue, a loneliness strategy, fund, and a programme of measurement and evidence. As core members of the

Commission, the British Red Cross and Co-op partnership were tasked with making sure change happens. To do this, we have been convening the All-Party Parliamentary Group on Loneliness as well as the Loneliness Action Group, comprising over 50 national public, private and voluntary organisations.

A review of existing research and assessments of our front-line work reveal a crucial question that still needs to be answered: what is the impact of a person's ethnicity or cultural identity on their experience of loneliness?

Across the sector, as well as within government, we know things like income and neighbourhood safety affect people's experiences of loneliness. The relationship between ethnicity and health, social and financial disadvantage is well known – in fact, the Cabinet Office's Race Disparity Unit was set up to support government departments to address these sorts of ethnic inequalities.³ But we need stronger evidence of just how people's risk of loneliness is really being affected and the additional barriers people from certain ethnic backgrounds will face in getting the support they need. We hope that the insight we uncover here will further conversation and research, and create positive change.

Loneliness *noun*: a subjective, unwelcome feeling of lack or loss of companionship, which happens when there is a mismatch between the quantity and quality of the social relationships that we have, and those that we want.⁴

1 Holt-Lunstad J, Smith TB & Layton JB (2010). Social relationships and mortality risk: a meta-analytic review. *PLoS Medicine*, 7(7)

2 Kantar Public (2016). *Trapped in a bubble: an investigation into triggers for loneliness in the UK*. London: British Red Cross & Co-op. Available at: www.redcross.org.uk/about-us/what-we-do/action-on-loneliness

3 Victor CR, & Bowling A (2012). A Longitudinal Analysis of Loneliness Among Older People in Great Britain, *Ethnic Identity*. *The Journal of Psychology: Interdisciplinary and Applied*, 146(3), (pp. 313-31); Jivraj S & Simpson L (2015). *Inequalities in Britain*. Bristol: Policy Press. For more on the Race Disparity Unit see: www.gov.uk/government/organisations/race-disparity-unit. See specifics on health, work and other types of social disadvantage at www.ethnicity-facts-figures.service.gov.uk/

4 Drawing on Perlman D & Peplau LA (1981). *Toward a Social Psychology of Loneliness* in Gilmour R & Duck S (Eds.), *Personal relationships*. 3, *Personal relationships in disorder* (pp. 31-56). London: Academic Press

Our research

We commissioned three pieces of research, and this report brings together the insights from each.

The Centre for Loneliness Studies at the University of Sheffield did two qualitative studies:

- Barriers to loneliness service take-up, examining the increased or particular barriers people from BAME backgrounds can face: *Understanding barriers faced by BAME community members in accessing loneliness services*⁵ reviewed 221 services across Islington, Oldham and Newcastle. The research study draws on: interviews with 24 stakeholders who were representatives of service providers aiming to tackle loneliness and social isolation, and support BAME communities; and interviews and a focus group with 22 people from BAME communities experiencing varying degrees of loneliness and social isolation and from various ethnic backgrounds (including Bangladeshi, Chinese, Iranian and Pakistani).
- Barriers to connection during key triggers of loneliness: *Understanding barriers to connection for people experiencing loneliness at key life transitions*,⁶ which involved in-depth interviews with people from both BAME and White British backgrounds. The research study draws on: interviews with 16 stakeholders representing service providers aiming to tackle loneliness and social isolation, and who support BAME communities; as well as interviews with 42 people from White British and BAME backgrounds experiencing varying degrees of loneliness and social isolation, who had either a long-term health condition or had experienced bereavement. Fifteen of the interviewees self-identified as

being from a BAME background, and were from various ethnic backgrounds, including Black African, Black Caribbean, Indian and Pakistani.

Leading race equality think tank Runnymede Trust did a quantitative survey:

- *Understanding more about the nature and experience of loneliness among Black Asian and Ethnic Minority communities*.⁷ It surveyed 952 respondents across the UK, using an extensive network of community groups to reach people. Sixty-nine per cent of respondents who declared their ethnicity were from BAME backgrounds,⁸ with most respondents having lived here for at least ten years.

Behind the figures

The combination of these qualitative and quantitative studies gives us a rich insight into a range of experiences of loneliness among people from BAME backgrounds. Runnymede's survey was distributed through their extensive network of community groups, allowing them to reach respondents who are often digitally or socially excluded, and therefore under-represented in traditional, nationally representative surveys. It's important to note, though, that no conclusions about the national prevalence of loneliness among different ethnic groups should be drawn from this report, as the research sample is not nationally representative. Given the huge diversity within the broader

⁵ Wigfield A (2019). *Understanding barriers faced by BAME communities in accessing loneliness services*. London: British Red Cross & Co-op

⁶ Wigfield A, Turner R & Clayton D (2019). *Understanding barriers to connection for people experiencing loneliness at key life transitions*. London: British Red Cross & Co-op

⁷ Haque Z, Taylor H & Mompelat L (2019) *Understanding more about the nature and experience of loneliness among black and ethnic minority communities*. London: British Red Cross & Co-op

⁸ Seventeen per cent of respondents chose not to declare their ethnicity or other demographic details. Respondents were given a choice of 18 ethnic categories to describe themselves by, but an additional option was given to self-describe. Among the respondents who specified their ethnicity, 31 per cent identified as White British, 11 per cent as Black Caribbean, 11 per cent as Indian, 8 per cent as White Other and 9 per cent as Pakistani. An unusually high number of Gypsy, Roma and Irish Traveller respondents (27 respondents) also completed the loneliness survey.



BAME category, some particular groups are represented by small numbers (for example, we heard from 27 respondents who described themselves as Gypsy, Roma and Irish Traveller, 20 Bangladeshi and ten Chinese in the survey).

In our search to interview people from BAME backgrounds, we came up against some big barriers, which are important to highlight for future research. It was difficult to determine whether people were lonely before and during the interviews. Some of these barriers were the very obstacles we've begun to reveal in the coming pages: a lack of trust, language barriers, feeling like a service is 'not for you', or stigma around admitting loneliness or asking for help. In some cases, for example where people were dealing with mental health crises or bereavement, it was not possible or appropriate to do the interviews.

We also saw some indication that established measures of loneliness themselves may be excluding some groups. Experiences of loneliness were assessed in a number of ways with interviewees, using a range of different prompts and questions. Through the studies, we used the three-item University of California, Los Angeles (UCLA) loneliness scale, recommended

for use by the Office for National Statistics. However, some problems were identified with the language used in these questions, which ask how often the respondent "lacks companionship", "feels left out" and "feels isolated from others". Response choices are "hardly ever", "some of the time" and "often", which are assigned a score from one to three. If a respondent's total score is six or more, they're categorised as lonely. Although the UCLA scale has been validated for use in some different languages, many interviewees – particularly, but not exclusively, from BAME backgrounds and even those with a good level of English – needed further discussion of the meaning of the words used, especially "companionship" and "feeling left out", to be able to give their answers. One Arabic-speaking woman said that "feeling left out" would be translated as "being forgotten about". These findings show the need for more guidance on using these measures among people from a range of backgrounds. Our researchers emphasised the need to explore people's experiences of loneliness in a more qualitative way alongside the use of the UCLA scale in future research studies to help overcome some of these barriers.⁹

⁹ The UCLA three-item loneliness scale was used to assess experiences of loneliness alongside a single direct question ("how often do you feel lonely?") and through a series of questions and prompts.

More likely to be lonely?

Key insights from this chapter

Much of our evidence confirms and adds depth to our existing understanding of loneliness. It reiterates that triggers of loneliness can affect people of any age or background – things like loss of work or income, lack of funds, lack of a sense of belonging, physical and mental health problems, or big life changes like bereavement.

But these studies also shine a spotlight on additional triggers of loneliness that have, to date, largely been overlooked, such as racism, discrimination and xenophobia.

Triggers that can be magnified:

- **Discrimination, bullying and disrespect**

Nearly three-quarters – 74 per cent – of White British respondents had not experienced discrimination at work or in their neighbourhood, compared with just 31 per cent of Black African respondents. The research suggests a relationship between discrimination, bullying and a feeling of not belonging and loneliness.

- **Lack of money or unemployment, poor health and bereavement**

General well-being can, unsurprisingly, help protect us from loneliness. Our review of past studies showed people from BAME¹⁰ backgrounds are more likely to live in poverty and are at greater risk of unemployment. These factors affect well-being, and can increase the impact of physical and mental health problems.

- **Being alone versus being lonely**

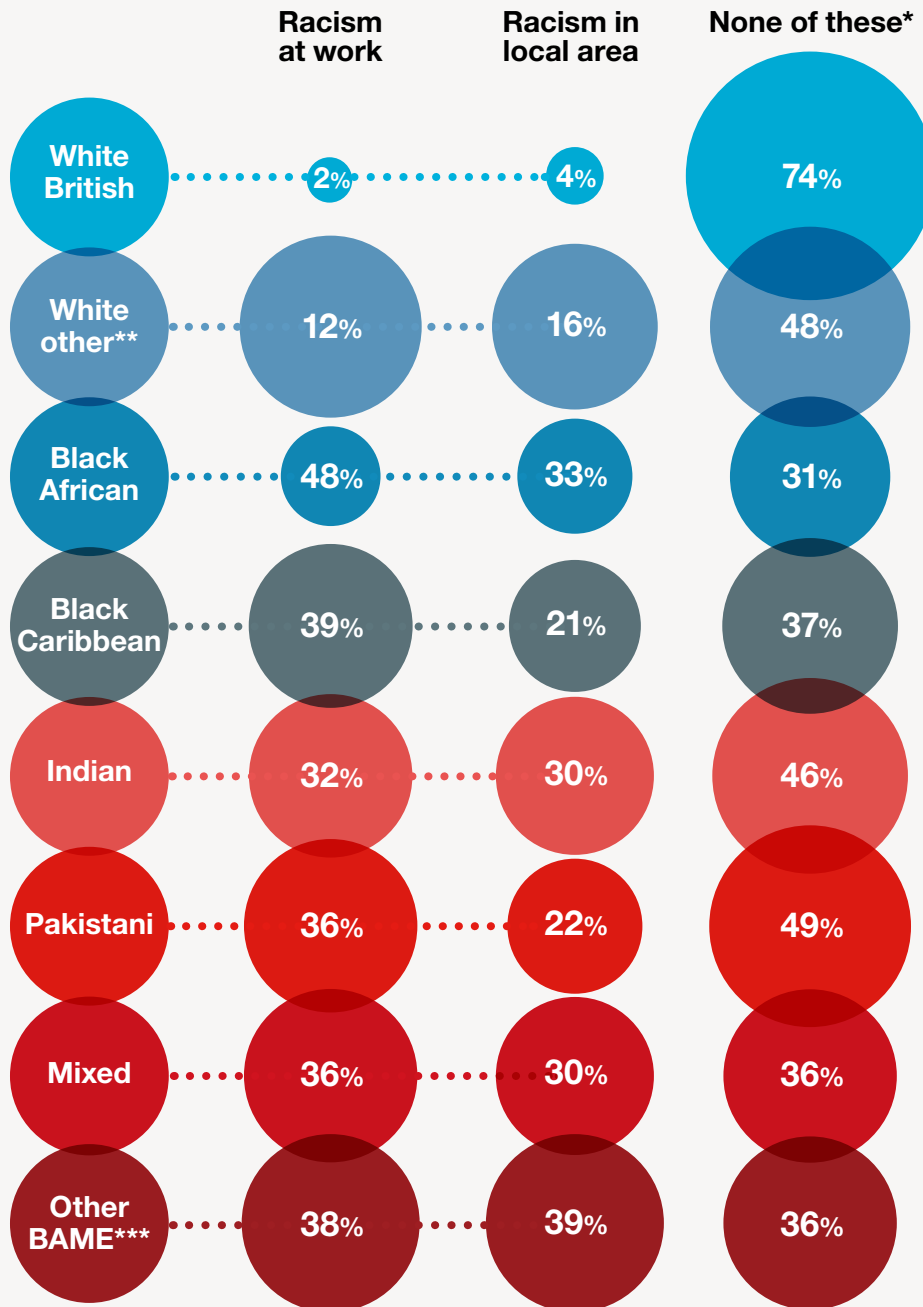
The testimonies we gathered reveal individual nuance, reminding us that every experience of loneliness is different. Assumptions and preconceptions about loneliness, and about some BAME groups, can be harmful. For example, there is a common perception that some ethnic minority households enjoy greater protection against loneliness because they live in larger, intergenerational households. Having family around us can of course protect us from loneliness, but it's not always the case. Simply being with people is not an automatic protection from loneliness¹¹ – living with or near others, where relationships aren't supported to remain meaningful, can even compound the issue.

¹⁰ Joseph Rowntree Foundation (2018). UK Poverty 2018: A comprehensive analysis of poverty trends and figures. Available at: <https://www.jrf.org.uk/report/uk-poverty-2018>

¹¹ Indicative, small-scale research reveals there may be 'hidden loneliness' among BAME communities (for example, young mothers who have recently arrived in the UK, people with poorer fluency in English) regardless of household sizes. See, for example: An insight into loneliness within Southampton's BME Communities – A summary of feedback provided, available at: www.southampton.gov.uk/modernGov/documents/s31714/Appendixpercent201.pdf

Who experiences racism?

Have any of the following things happened to you in the last few years? Please tick all that apply.



Number of respondents White British: 246, White other: 73, Black African: 52, Black Caribbean: 84, Indian: 87, Mixed: 67, Pakistani: 67, Other BAME: 56.

*People who said they had experienced none of the following: bullying at work, racism at work, racism in local area.

**White other comprises any other White groups and White Irish groups.

***Other BAME comprises any other Black groups, Arab and any other Asian group.

Of the 27 Gypsy, Roma and Irish Traveller respondents, 16 had experience of racism/racial discrimination at work, and 19 of racism/racial discrimination in their local neighbourhood.

Discrimination, bullying and disrespect

That important sense of belonging we all need is dependent on being treated with respect. Experiences of discrimination, racism and xenophobia at work and in people's neighbourhoods, and of being treated with less respect due to level of English skills, disability, religion or ethnicity were prevalent among non-White British respondents. Perhaps unsurprisingly, these kinds of experiences appear to be connected to loneliness.

Almost half of the survey respondents (49 per cent) who had experienced discrimination at work or in their local neighbourhood reported being always or often lonely, compared with just over a quarter (28 per cent) of those who had not.

“I experienced racism a lot... People posted abusive messages through the door. I felt very unwelcome, and that was why I was so lonely and depressed when I lived here.” (Interviewee from Oldham, African woman in her 50s)

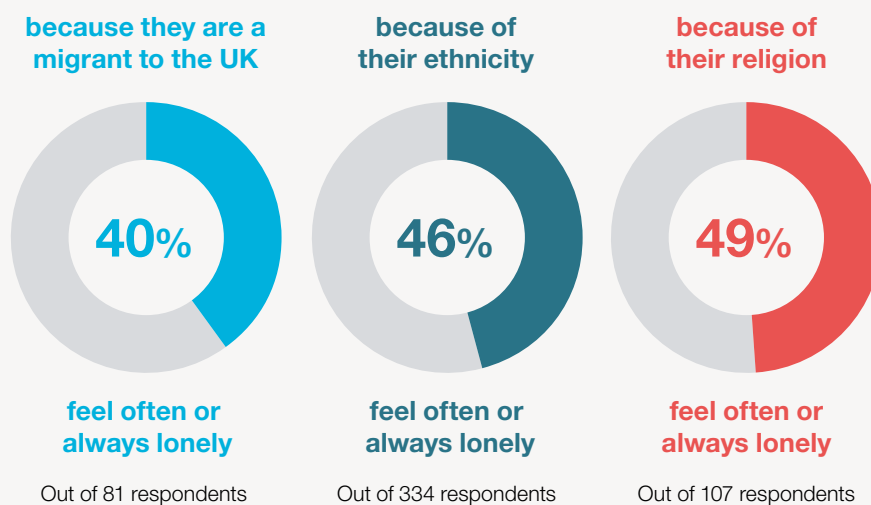
Experiences of discrimination can have a lasting impact. Several interviewees from BAME backgrounds felt as though they could not take up services with predominantly white people because of memories of racist remarks in their earlier life.

One Bangladeshi woman in her 30s living in London said in her interview:

“For me, because my parents migrated to England in the 50s, when I was growing up, the area was 98 per cent White English, and we struggled with a lot of racism. Even though I was born in England and I have a very English accent, I faced lot of racism growing up. I had major issues with violent behaviour going on in the area with ethnic minorities. The only issues I have experienced with other ethnicities is probably just with White British people.”

This has affected her ability to form relationships with White British people, despite reflecting that racism is “a little bit more subconscious” now, and she went on to say that these experiences

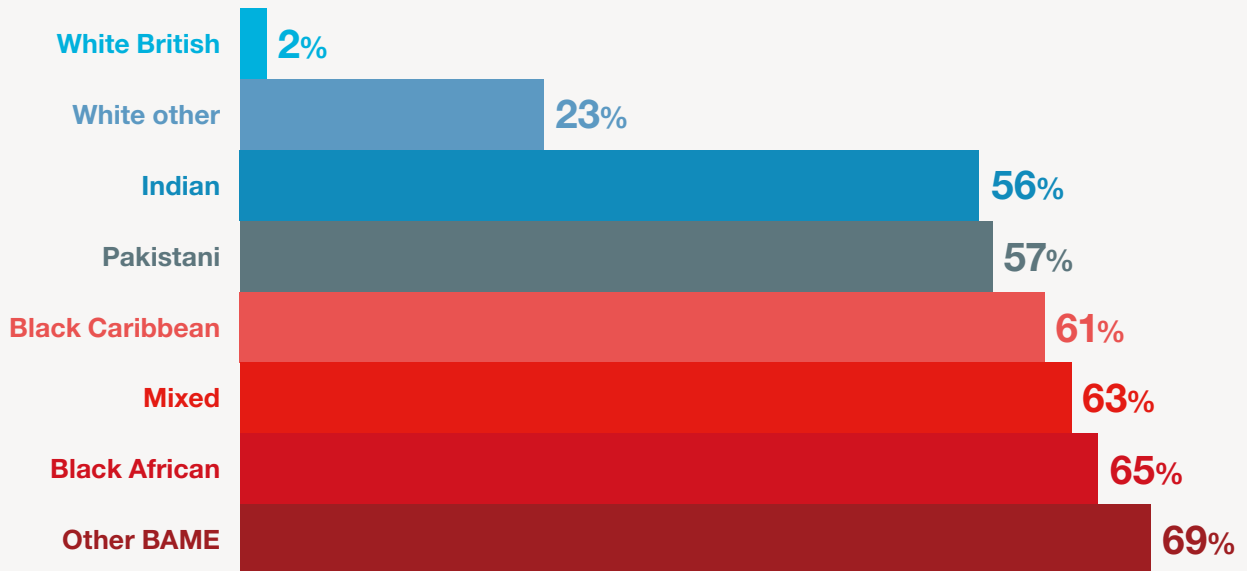
People who feel they are treated with less courtesy or respect...



Ethnicity, religion and respect

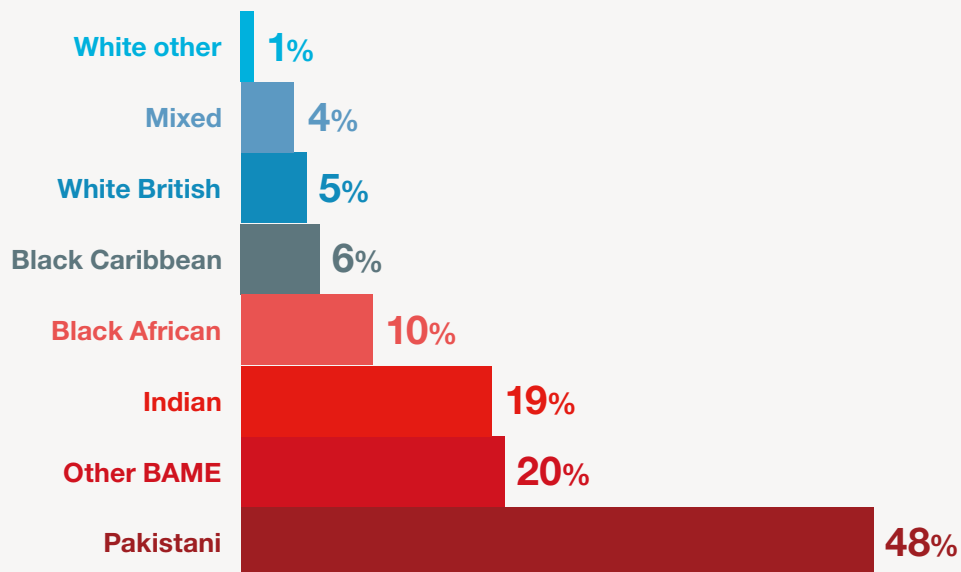
In your day-to-day life, do you feel any, or more than one of these things below?

I AM TREATED WITH LESS COURTESY OR RESPECT THAN OTHER PEOPLE BECAUSE OF MY ETHNICITY



24 out of the 27 Gypsy, Roma and Irish Traveller respondents felt they were treated with less courtesy and respect than other people due to their ethnicity.

I am treated with less courtesy or respect than other people because of my religion



Number of respondents White British: 246, White other: 73, Black African: 52, Black Caribbean: 84, Indian: 87, Mixed: 67, Pakistani: 67, Other BAME: 56.

have been compounded by feelings of inequality at school and at work.

A lack of money

Low income can exacerbate loneliness, with 60 per cent of those who do not have enough money to meet their or their family's needs reporting they are always or often lonely, compared with 32 per cent of those who do have enough money for basics.

A lack of funds can also affect more than practicalities: 53 per cent of those who felt they were treated with less respect because they did not have much money said they always or often felt lonely.

Importantly, BAME survey respondents were more likely to report not having enough money to meet their needs than White British respondents. This finding is consistent with national figures that show people from BAME backgrounds are more likely to live in poverty.

Effects of employment

Work – or a lack of work – is also a factor. Among people in full-time work, 31 per cent reported feeling lonely always or often, compared with 61 per cent of those who were unemployed.

It's worth noting that seven per cent of respondents were unemployed, which is almost double the national unemployment rate.¹² It is also important to note that in 2017, while just under four per cent of white people were unemployed, the figure was eight per cent among people from all other ethnic groups combined.¹³

Of course, every experience is different: we cannot assume that work is always a protective factor. In fact, discrimination at work was one of the themes raised through free-text comments offered in the Runnymede study and within the survey itself. Forty-nine per cent of respondents who experienced discrimination at work or in their local neighbourhood reported being lonely, as did 43 per cent of those who said they had experienced bullying at work, whereas the figure was 28 per cent for those who had not had any of these negative experiences.

“I feel the loneliness more in my work environment. The team that I work with does not make me feel accepted, they block me from engaging with them and it makes me feel there is no diversity as I’m Black British and they seem to do it subtly.” (Survey respondent of Black Caribbean origin)

“Discrimination at work and daily makes me lonely because I can’t turn to my family for support due to homophobia. I also feel unsafe and there are virtually no community spaces for BAME LGBT people. I also get discrimination from the white LGBT community.” (Survey respondent of Indian origin)

Living alone

Lack of adult company at home came through as a risk factor. The number of children in a household didn't seem to have much bearing on feelings of loneliness, but those who lived with no other adults had the highest levels of loneliness (45 per cent). Nearly three-quarters of those living alone (72 per cent) scored highly on the UCLA loneliness scale.

However, simply living with people is not enough to combat loneliness. Feeling close to the people you live with had a large impact, with 26 per cent

¹² Office for National Statistics. Unemployment: UK unemployment figures. Information on the labour market, young people and workless households. Available at: www.ons.gov.uk/employmentandlabourmarket/peoplenotinwork/unemployment

¹³ UK Government. Unemployment. Available at: <https://www.ethnicity-facts-figures.service.gov.uk/work-pay-and-benefits/unemployment-and-economic-inactivity/unemployment/latest#by-ethnicity> (Accessed 13/06/2019)

of respondents who reported being “very close” and “somewhat close” to those who they lived with feeling lonely always or often. This was in sharp contrast to 61 per cent of respondents who felt they were “very distant” and “somewhat distant” to those they lived with and reported feeling lonely always or often.

Large households

While living alone was a risk factor, so was living in larger households. Those who lived with four or more other people also had high levels of loneliness (39 per cent). Those who lived with just two or three other adults gave the lowest reports of feeling always or often lonely (27 per cent and 28 per cent respectively).

This subverts a common perception that some ethnic minority households enjoy greater protection against loneliness simply because they live in larger, intergenerational households. Having family around us can of course have the potential to protect us from loneliness, but, critically, it is not an automatic protection from loneliness – living with or near others, where relationships are not maintained and supported to remain meaningful, can even compound feelings of loneliness.

The group least likely to report being always or often lonely were those who were married or in a civil partnership (23 per cent) and those who were in a relationship (26 per cent), while for those who were divorced or separated the figures were 59 per cent and 52 per cent respectively.

“I feel lonely due to not having a personal relationship. I have friends, and family, but [it] still feels lonely when I come to an empty home at night.” (Survey respondent of “any other” Black origin)

Poor health

Health problems can make going out and connecting socially much harder. Fifty-three per cent of people who described their physical health as bad or very bad were lonely, compared with 28 per cent who said their physical health was good or very good.

As people’s perceptions of their mental and physical health improved, loneliness levels (according to the UCLA scale) decreased.

Our review of past studies found a strong relationship between loneliness and sociodemographic factors, health, and limited social and material resources,¹⁴ as well as explorations of the relationship between ethnicity and health in the UK.¹⁵

Health crises can also be tied up with other triggers of loneliness, like stigma (which we look at in more detail in the barriers to overcoming loneliness section) and relationship breakdown, especially when a health condition or illness is not properly understood among someone’s support networks.

Poor health, along with its effects on confidence, can be complicated for some people from BAME backgrounds due to lack of resources, pre-existing feelings of not being welcome or respected, and particular experiences of stigma.

One service provider we spoke to, for a sight loss charity supporting a south Asian community, found that some members of this community would tend to isolate themselves from the wider community when they began to lose their sight:

14 Victor CR, Scambler S, Bowling A & Bond J (2005). The prevalence of, and risk factors for, loneliness in later life: A survey of older people in Great Britain. *Ageing and Society*, 25(3)

15 Bécaries L, Nazroo J, & Stafford M (2009). The buffering effects of ethnic density on experienced racism and health, *Health Place*, 15(3), (pp. 670-8)

“There is a lady losing her sight. She doesn’t tell anybody. People pass her by but she doesn’t say hello because she can’t see them. They think she’s so rude but she is not telling them, she is just making excuses like ‘I didn’t see you’. She hasn’t got the courage to say ‘I’m losing my sight’ ...this is causing more social isolation and loneliness.”

Our studies also revealed numerous practical and psychological barriers that make it difficult for people with poor mental and physical health to sustain social connections and take part in activities – from a loss of confidence, to not being able to leave the house, to feeling too fatigued to socialise.

The reasons for declining confidence are difficult to attribute, but some alluded to the loss of their ability and skills – like cooking, physical activities or even walking – as being important. A Black African woman in her 60s from Cardiff, living with multiple illnesses, physical and mental, said in her interview:

“I always feel inferior. I feel like I’m the worst person in the world. Even though others tell me to think of myself as the best. I look at myself and think I’m not worthy because of my health condition because I can’t get out and about.”

Bereavement

People going through bereavement are likely to experience loneliness.¹⁶ For those whose meaningful relationships are centred around a small number of people, or even just one person, loss can have a devastating and long-term effect.

“It is just extreme emotion. You have people around you who communicate based on your emotion and their emotions and then you are going through extreme emotions. You are bound to have communication breakdown, you are bound to have periods where, to avoid conflict issues, you isolate yourself, your way of coping with grief isolates you even if you have people you can talk to and will feel better when you talk to; you can’t because you are grieving and that isolates you.” (Interviewee, undisclosed ethnicity, gender and location)

Past reports have revealed how social support eventually decreases after bereavement while feelings of loneliness continue.¹⁷ A woman we spoke to in Leeds whose husband had died expressed her experience of this, explaining that although her loneliness was worse at first, at least friends and family were around to see if she was coping. After a while, people forgot or assumed she was fine. Another interviewee highlighted that within her Yemeni Muslim community in Sheffield, there was an acknowledgement to support bereaved people, but in practice this usually happened only in the short term.

This shows the need to ensure bereavement services are available not just initially, but in the longer term.

16 Wenger GC, Davies R, Shahtahmasebi S & Scott A (1996). Social isolation and loneliness in old age: review and model refinement. *Ageing and Society*, 16 (3), (pp. 333-358)

17 Utz LR, Swenson KL, Caserta M, Lund D & DeVries B (2013). Feeling lonely versus being alone: loneliness and social support among recently bereaved persons. *The Journals of Gerontology, Series B, Psychological Sciences and Social Sciences*, 69B(1), (pp. 85–94)

Losing someone close can also have a knock-on effect on relationships with other people and even places.

Some interviewees found that bereavement caused tension among friends and family. A Bangladeshi woman in her 30s from London explained in her interview how this affected her family:

“When you grieve, sometimes it can cause a divide in your family or people grieve at different paces. I have a big family. They are all very different, and people grieve differently, some get angry, some don’t want to communicate with family because it’s too painful. With my sisters it’s complicated – sometimes they argue who did so much or did so little, who wasn’t there when the person was dying, who didn’t give enough support, the stress level is very high. So I now have a very poor relationship with my sisters. Still I accept the fact that they grieve differently than I do and that’s why it takes time.”

Despite an evident need, our research, including our mapping of services and interviews, revealed a particular lack of services for people who have been bereaved. Options are often even more limited for people from BAME communities, who feel the support that is available is often not culturally sensitive or designed with their community’s needs in mind. For example, one service provider spoke about how a service aimed at a Somali community, based on a formal appointments system, failed to recognise the preference of an informal culture of “dropping in” and finding support.

“...it is very important to design and deliver the service around the lifestyle of people who are going to use the service. How are the people – what is their lifestyle like? What are their attitudes towards services? How do they move around their community? What are they used to? What are they not used to? We have to adapt to them.”



Less protected from loneliness?

Key insights from this chapter

We unpicked a number of common protective factors – the things that protect us from harmful levels of loneliness – such as enjoying relationships with people around us.

We also found that having meaningful connections to places can provide some protection. However, some factors emerged as being less attainable for people from certain BAME communities.

Protective factors that matter:

Being treated with respect and having a sense of belonging

Across all survey respondents, there was a clear relationship between feelings of belonging and loneliness. Sixty-seven per cent of those who strongly felt they did not belong in their neighbourhood reported being always or often lonely; compared with 16 per cent who strongly felt they did belong.

We asked people if there were any factors, such as their ethnicity, religion or English fluency, which they felt caused them to be treated with less respect. Fifty-four per cent of White British respondents answered no to this question, compared with just 19 per cent of Pakistani respondents and 17 per cent of Black African respondents. None of the 27 Gypsy, Roma and Irish Traveller respondents answered no.

Forty-six per cent of those who felt they had been treated with less respect because of their ethnicity said they were always or often lonely. Fifty-nine per cent of those who felt they were treated with less respect because of their English language proficiency regularly experienced loneliness.

Other factors contributing to loneliness included disability (57 per cent), gender (41 per cent) and

sexuality (about a third of the 31 people who felt they were treated with less respect due to their sexuality reported they were always or often lonely).

For comparison, 26 per cent of people who did not identify any factors that caused them to be treated with less respect were always or often lonely.

Having meaningful, trusting relationships

While “meaningful” might mean different things to different people, the quality of our relationships is key – simply having people around us is not enough. Of those who said they were “very dissatisfied” with their family relationships, 73 per cent reported being always or often lonely; compared with just 11 per cent of those who were “very satisfied” with their relationships.

Being able to cope with feelings of loneliness

Of those who said they felt always or often lonely, 63 per cent did not know what to do when they felt lonely. Some ethnic respondent groups were less likely to report feeling able to talk about loneliness. Only 18 per cent of all respondents who were always or often lonely said they could talk to family and friends about loneliness, while 46 per cent of people who are always or often lonely said they would carry on the same and hope the feeling passed.



In addition, the relationship between feelings of loneliness and loss of confidence and self-esteem is complex, regardless of a person's ethnicity, with the qualitative research showing they often compound one another.

Being in a safe community with welcoming, accessible and meaningful places and activities

Our research found that places can help people get that vital sense of belonging. Some people said that because they felt comfortable and at home in a certain place, they could be alone there without feeling lonely.

Places, such as a place of worship, sporting venue, park or café, can also help people to make human connections.

On the other hand, we cannot get that sense of belonging from any space where we feel unsafe or fearful of hostile encounters. Just 31 per cent of Black African respondents had not experienced any type of discrimination or bullying, compared with 74 per cent of White British respondents. Hostile experiences can undermine people's sense of belonging and self-worth,¹⁸ which can in turn trigger loneliness. Comments from interviewees confirm the negative and often lasting effects of these experiences.

All of this suggests the importance of the role of community in supporting and protecting people.

18 Mir G & Sheikh A (2010). 'Fasting and prayer don't concern the doctors ... they don't even know what it is': communication, decision-making and perceived social relations of Pakistani Muslim patients with long-term illnesses. *Ethn Health*, 15(4), (pp. 327-42)

A sense of belonging

When we belong, we feel less alone. Our research revealed a clear relationship between loneliness and a feeling of belonging. And it was apparent that feelings of belonging can be affected by differences of religion, ethnicity, sexuality and financial security.

Only 16 per cent of those who “strongly felt that they belonged to their neighbourhood” reported being always or often lonely, compared with over two-thirds (67 per cent) of those who “strongly felt they did not belong in their neighbourhood”. Sixty-eight per cent of those who strongly disagreed with the statement “people from different ethnic and religious backgrounds get on well with each other in my neighbourhood” felt always or often lonely, compared with 30 per cent of those who strongly agreed.

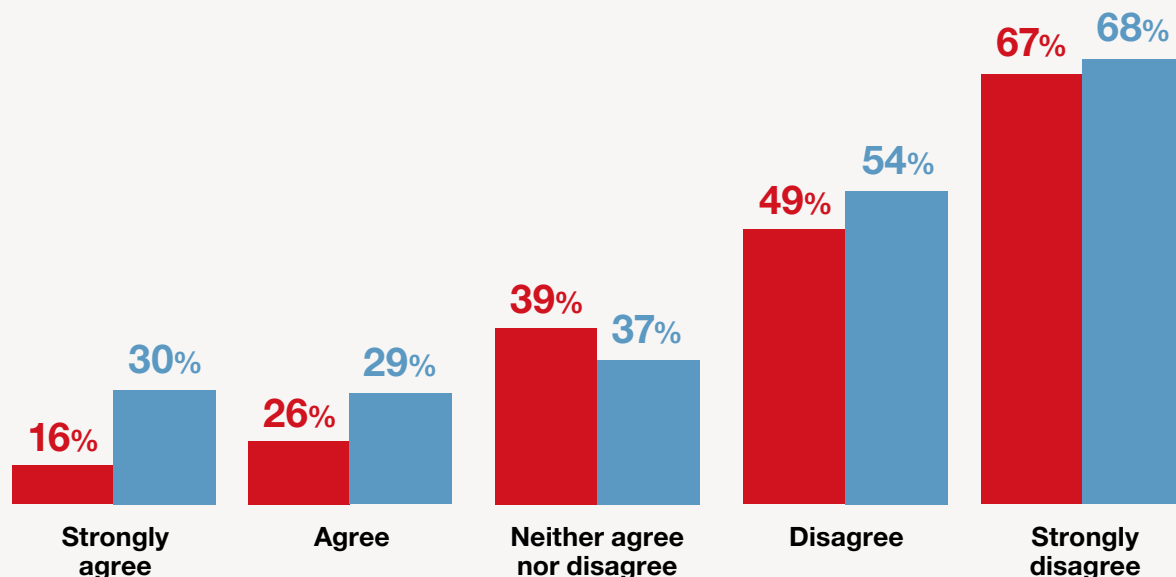
Our qualitative studies unpicked the factors contributing to a sense of belonging. These included feeling accepted and as if they fitted in, feeling able to ask for help, feeling able to interact and make social connections with others, feeling safe and secure and having family close by. Being ‘from’ a place sometimes makes people feel as though they belong – but not always.

“Probably not a sense of belonging because I have no interaction, it doesn’t have the home community feeling. I would like to live in a smaller street where you can have relationship with neighbours, where children can play outside”. (Interviewee from York, White British man in his 70s)

I’ve got family in the area, this is where all my cousins are and my uncles. Yes, in a way that gives me a sense of belonging.” (Interviewee in Cardiff, White British man)

Belonging, loneliness and integration

Proportion responding who are often or always lonely



- I feel like I belong to this neighbourhood.
- People from different ethnic and religious backgrounds get on well with each other in my neighbourhood.

Feeling safe

Feeling safe and secure in your community, so you're more able to ask for help if you need it, can protect you against loneliness. More than just liking where you live, people benefit from a deeper sense of freedom to interact and connect there, and these feelings can be affected by health and mobility issues as well as ethnic, religious and financial differences.

"I like the area where I live but I'm not able to enjoy it because everything is a struggle. When I fall, I don't shout ... I have a bathtub and I must hold onto the water heater to get out of the bathtub. I broke it and did not tell anybody it was me." (Interviewee in Cardiff, woman, undisclosed ethnicity)

"Nobody harms me and I don't harm anyone as well." (Interviewee, undisclosed location, Black African woman)

A recent report from the Institute for Social and Economic Research at the University of Essex¹⁹ says that around one person in ten from ethnic minorities in England have reported experiencing ethnic and racial harassment in a public place, and almost double that number have reported feeling unsafe or avoiding public places – both of which are associated with poorer mental health.

The role of community

Our studies suggest that diverse communities have the potential to create a greater sense of belonging for some – especially for those who might not feel they 'belong' in a more homogeneous community.

Whether communities are homogeneous or diverse, what seems to be important is that people are able to build connections and trust with those around them.

Many of those who were interviewed in Butetown in Cardiff and Burngreave in Sheffield, which both have diverse populations, said they felt a sense of belonging to their immediate locality and that this was positive in terms of their experiences of loneliness. Interacting with people from different

backgrounds at street parties and pantomimes made people feel "happy and secure" and increased people's sense of belonging.

Experiences of racism were raised in relation to living in less diverse areas.

"Social inclusion is a real issue for British-born BAME [people] who have moved from areas like Southall, west London, to the home counties. The shires may be 'nicer' but there is a big 'racism tax' to pay." (Survey respondent who preferred not to disclose their ethnic origin)

At the same time though, for some people, an ethnically homogeneous community can also act as a protective factor against loneliness.

"The good thing about Asian communities is you help each other. All my brothers live on same street with me! But can leave key next door, no issue. Lady across the road, we invited her in when she forgot key and had to wait for husband – was ten at night! Community gets together when there's an issue." (Interviewee from Oldham, Pakistani man in his 40s)

Some interviewees gave examples of tight-knit communities providing support and connections, such as the Jewish community gathering at the synagogue or the Muslim community coming together at the mosque.

In practice, the trust within tight-knit communities can help people within those groups to make wider, outside connections that can also be beneficial. In one example given by a service provider from Oldham, a successful community cohesion event made use of a trusted space to break down barriers between different groups.

"We recently held a community cohesion event in a mosque, and 60 per cent of the people who attended were white, which was big for us. This helps build better communities and break down barriers. People said it broke stereotypes, and helped them feel more comfortable in their community. In the past it's largely been Pakistani people that we have engaged with, so I hope this carries on."

¹⁹ Institute for Social and Economic Research (2019), One in ten ethnic minorities reports experiencing racial harassment. University of Essex. Available at: <https://www.iser.essex.ac.uk/2019/05/14/one-in-ten-ethnic-minorities-reports-experiencing-racial-harassment>

A meaningful connection to place

Our research uncovered the interesting role of place in easing loneliness. Some interviewees described getting a sense of belonging from places themselves, explaining that because they felt “comfortable” and “at home” there, they could be alone in that place without feeling lonely. These places included places of worship, sporting stadiums and venues, parks and other small open spaces, particular cafés or shops, and/or their home.

When a connection to a place breaks down, though, it can make loneliness worse. There are multiple reasons why this might happen: people might find they do not have the money, mobility, confidence or transport to go to those places any more, or their relationship to a sentimental place might change after a bad experience there, or if they have lost someone with whom they shared a connection to that place.

For several bereaved interviewees, their strong sense of belonging or connection to a place suddenly made them feel more lonely, because the feeling was tied up with memories of their loved ones who had passed away. Two men whose spouses had passed away described their homes as now feeling like very empty and lonely places to be.

Another two interviewees mentioned that they had moved to different accommodation to overcome these difficult associations with place, one stating “I needed to move out because I was feeling isolated and lonely”, and another saying he felt “lonely all the time” in his own home.

One Nigerian woman, whose husband and daughter had both died, said:

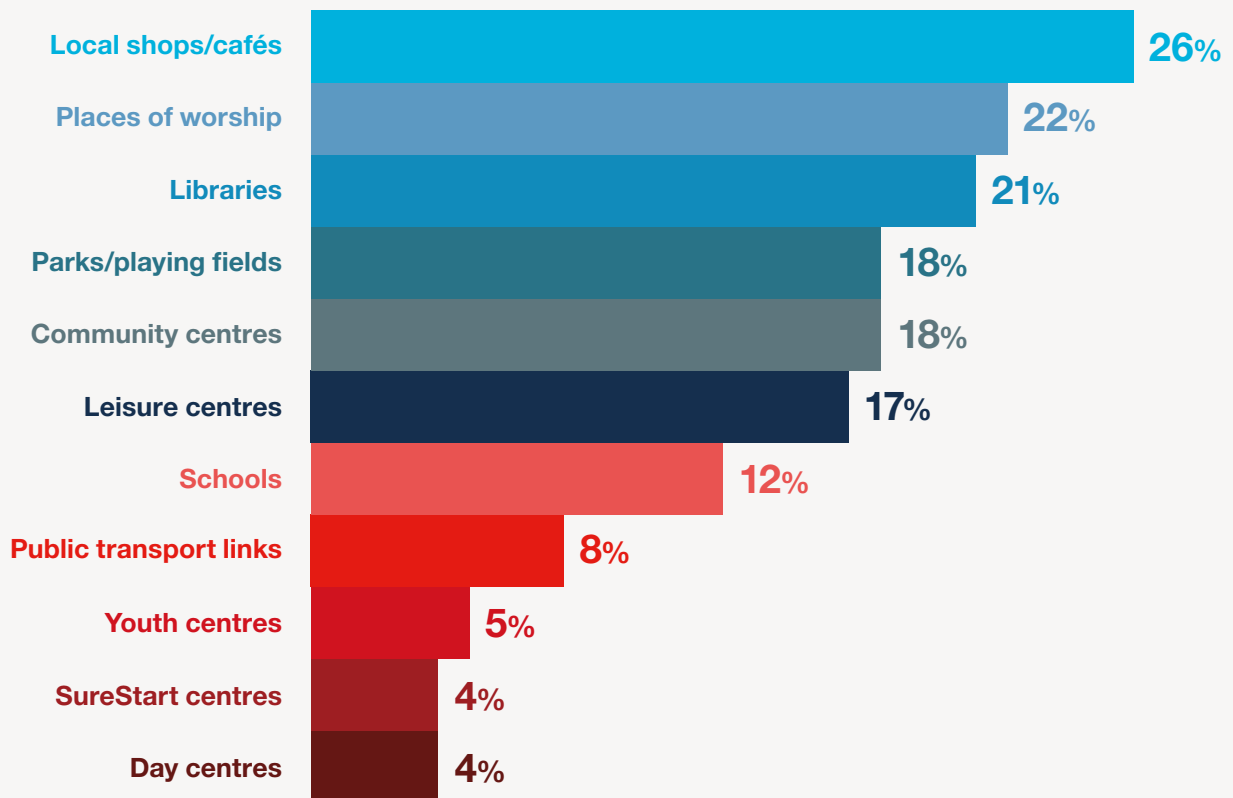
“Sometimes I ask myself why I stay home. Whenever I stay home, the evil thoughts fill my head. Sometimes I look for my husband and daughter, I expect them to come and get me. Whenever I am alone I have the feeling that they are coming to me.”

Certain places can also enable people to form meaningful human relationships, bonds and friendships. While the strength or importance of a person’s faith to them did not seem to have much bearing on their levels of loneliness (37 per cent of those for whom faith was “very unimportant” were always or often lonely compared with 36 per cent of those for whom faith was “very important”), places of worship were identified as a popular place to form meaningful relationships, bonds and friendships.

A high proportion of Black African respondents (46 per cent) reported that they would go to their local place of worship to help alleviate feelings of loneliness – higher than all other ethnic groups. Also on the list were sporting venues, parks and other small open spaces, particular cafés or shops, or people’s homes. A quarter of respondents identified local shops or cafés as places that helped them to make meaningful bonds with people, followed by places of worship (22 per cent) and libraries (21 per cent). Overall, a large number of respondents said public spaces of one kind or another were helpful to them. However, for places and spaces to be conducive to the development of meaningful relationships, they must make people feel comfortable, non-threatening and supportive.

What places help people connect?

Do you feel any of the following spaces in your neighbourhood give you the opportunity to form meaningful relationships, bonds or friendships? Please tick all that apply.



952 respondents were asked this question.

Meaningful relationships

Unsurprisingly, satisfying and trusting relationships came out as being essential in tackling loneliness. The quality of these relationships is key: relationships that lack depth or trust do not have the same power to protect people.

For some, these meaningful relationships centred around a small number of people or maybe just one person, a supportive confidant, “someone who cares”, a spouse and sometimes even a professional support worker.

Whether meaningful relationships are about having deeper conversations, physical contact, or just someone to rely on, our findings showed that simply living with or being around people was not enough to combat loneliness – feeling close to those people had a large bearing on whether people felt lonely or not. Of those who said they were “very dissatisfied” with their family relationships, 73 per cent reported being always or often lonely, compared with just 11 per cent of those who were “very satisfied” with their relationships.

“We all want someone to lean on. Just think with all the grief and the problem in my family. That made me more lonely.” (Interviewee in London, Bangladeshi woman in her 30s)

“You can’t just manufacture the family, the right people; they’re either there or they’re not. The rest of it is just coming here [a local support group], or just socialising, it’s not real. You can spend some time with some people, but then you’ve got to go back on your own. It’s not real.” (Interviewee in Cardiff, man, undisclosed ethnicity)

Of course, then losing confidants, whether through bereavement, relationship breakdown, or the closure of a service or club, can trigger loneliness. Regardless of a person’s ethnicity, life events like bereavement or poor health can hinder the ability to form and maintain meaningful

relationships. Being physically or psychologically unable to leave the house makes it difficult to socialise. A lack of understanding among friends and family can also result in relationship breakdown.

Having supportive loved ones

Those who felt able to talk to their family and friends about loneliness were much less likely to feel always or often lonely.

However, some interviewees highlighted that family support did not entirely protect from loneliness; in some cases, for example when women are expected to adopt a caring role within the family, the presence of a wide family network might actually lead to greater levels of loneliness rather than mitigate against it.

In these circumstances, women can potentially feel more lonely because they are expected to care for their family and therefore have limited ability to leave the home and interact with others.

One service provider we interviewed described her perceptions of this:

“I particularly think that there are groups of Asian women, who I know from my experience of working, who are locked into looking after their elders and cooking all day and providing for big families with not a lot of freedom and issues like not being able to speak English. Their opportunities for employment or training [are] poor. I worked with a woman who came into a children’s centre to the nursery with her children and over the years she became a part-time member of staff but she had to fight to get away from doing the chores. It was her mother-in-law, not her husband, who didn’t want her to do more. She always talked about the issues for women in her community. So there are some issues for people who are not happy or not well but maybe would like to have more richness in their lives who are not getting seen.”

Bigger barriers to overcoming loneliness?

Key insights from this chapter

We found that all minority ethnic groups were more likely to report feeling less able to access services because they felt they were not welcome, or because they had less disposable income.

While all groups can experience barriers to service use, these can often be magnified for non-White British groups.

- **Practical barriers**

Research participants across all three studies experienced language barriers as well as problems with transport, mobility and disability access. These can then be exacerbated by poor physical and mental health. All minority ethnic respondent groups were more likely to report a lack of money or free time to take up services than the White British respondent group.

Previous research has shown that, on average, people from BAME backgrounds in the UK experience higher levels of poverty, unemployment and lower wages than White British people.²⁰ People from BAME backgrounds also have a higher likelihood of living in poor housing conditions and of experiencing homelessness.²¹

- **Barriers in attitude**

Some interviewees said they felt there was a stigma attached to loneliness, or even to asking for help generally. A number of interviewees from BAME backgrounds suggested that even if they knew where and how to ask for help, they'd be reluctant to because of the stigma attached to not being able to cope.

Stigma is a recurring theme. While stigma attached to loneliness was high across all ethnic respondent groups, Pakistani and Gypsy, Roma and Irish Traveller respondents in the survey appeared to face stigma around loneliness the most; higher proportions of both groups expressed concerns about admitting to and sharing feelings of loneliness. Conversely, Black African respondents were among those most likely to admit to feeling lonely and least likely to worry what people would think about their loneliness (69 per cent of this group knew who they would talk to if they were lonely, which was the highest of all the ethnic group respondents).

Some said it might come across as a criticism of traditional family support networks to seek outside help. Others said they felt unable to mix with predominantly White British groups due to experiences with racist or anti-immigrant attitudes in the past.

- **A lack of inclusive services and support**

Our findings revealed that, for some, barriers to taking up services include a lack of age-appropriate, culturally appropriate or single-sex activities, as well as disapproval from friends and family. Some interviewees said that groups offering traditional White British food or activities (like bingo and knitting) were off-putting.

20 Joseph Rowntree Foundation (2018). UK Poverty 2018: A comprehensive analysis of poverty trends and figures. Available at: <https://www.jrf.org.uk/report/uk-poverty-2018>

21 Pleace N (2010). Immigration and Homelessness. University of York, England: Centre for Housing Policy

All minority ethnic respondent groups were more likely to report “not feeling welcome” and “racist or anti-immigrant attitudes” as barriers to accessing services, compared with the White British respondent group. Forty-eight per cent of “other BAME”, 44 per cent of Indian and 42 per cent of Black African respondents reported not feeling welcome or as though a service “isn’t for them”, compared with 23 per cent of White British respondents. Fifty-one per cent of those who felt this way, and 49 per cent per cent of those who felt unable to access services due to members’ racist or anti-immigrant attitudes, reported being always or often lonely.

Practical barriers

All minority ethnic groups were more likely than the White British groups to report “not having enough free time” and “affordability” as barriers to participating in activities or accessing services that might help to tackle loneliness.

Among people who said there was nothing stopping them taking up services and support, just 20 per cent reported feeling always or often lonely. For those respondents reporting transport issues, the figure rose to 40 per cent, for those with affordability issues it was 46 per cent, and it was 47 per cent for people facing accessibility issues.

Finances appear to play a large role, with 60 per cent of those who did not have enough money to meet their needs (or their family’s needs, if applicable) reporting being always or often lonely, compared with 32 per cent of those who did have enough money.

Crucially, around a fifth of people from BAME backgrounds reported they didn’t have enough

money. Generally, White British respondents were among those who said they had enough or more than enough money for basics, followed closely by mixed and white other groups, then Black African and Black Caribbean respondents.

Transport was another issue. Past research suggests using public transport services can be a challenge for some people from BAME backgrounds.²² Reasons include a lack of availability, health conditions, poverty, issues of personal safety and language barriers, all of which tend to be more prevalent among people from BAME backgrounds. Challenges around language, confidence, safety and availability in relation to transport came out particularly strongly throughout Sheffield’s qualitative study looking into barriers to service use.

Some of the service providers we interviewed indicated that transport could be particularly problematic for non-English speaking people, especially when long journeys were involved and passengers were not sure where to get off. They explained that the most isolated and in need of support often had to rely on public transport and could not always reach services outside their immediate locality.

Research among lonely people in Leeds, for example, has found that when people have to take more than one bus to reach a service, they’re unlikely to turn up unless it is in a central location.²³ Transport issues were uncovered again, in relation to south Asian women’s access to employability services, in research in West and South Yorkshire. Lack of confidence was found to be an issue, but one that could be quite quickly overcome if people were accompanied on their first journey.²⁴

22 Lucas K (2004). *Running on empty: Transport, social exclusion and environmental justice*. Bristol: UK Policy Press; Wigfield A & Alden S (2018). *Assessing the effectiveness of social indices to measure the prevalence of social isolation in neighbourhoods: a qualitative sense check of an index in a northern English city*. *Social Indicators Research*, 140 (3), (pp. 1017–1034); Wigfield A. & Turner R. (2016). *Mr Cameron’s new language initiative for Muslim women: lessons in policy implementation*. *Political Quarterly*, (87)3

23 Wigfield A & Alden S (2018). *Assessing the effectiveness of social indices to measure the prevalence of social isolation in neighbourhoods: a qualitative sense check of an index in a northern English city*. *Social Indicators Research*, 140 (3), (pp. 1017–1034)

24 Wigfield A & Turner R (2016). *Mr Cameron’s new language initiative for Muslim women: lessons in policy implementation*. *Political Quarterly*, (87)3



Physical and psychological barriers

Whatever your ethnicity, poor health and bereavement (which has a long-lasting effect but isn't necessarily met with long-lasting support) can hinder your ability to both form and maintain meaningful relationships.

People can be left physically or psychologically unable to leave the house, which clearly renders making and sustaining social connections challenging. Understanding among friends and family can be stretched and break down.

“My arthritis and gout means that you sometimes can't put your shoe on, so you can't go out. And the arthritis is so painful I can't go out... When I get an attack, I'd prefer to be on my own... a lot of the times then that you don't feel like talking... you just want to lie down on the bed.” (Interviewee in Leeds, White Irish man)

“When you grieve sometimes it can cause a divide in your family or people grieve at different paces. I have a big family. They are all very different, and people grieve differently, some get angry, some

don't want to communicate with family because it's too painful, some don't.” (Interviewee in London, Bangladeshi woman)

“I tend to see my family irregularly now because I get judged, because I have an invisible disability. I'm being prejudged because people don't think there might be something wrong with me, and assume that I should be doing more things and should be more active.” (Interviewee in Sheffield, woman undisclosed ethnicity)

Feeling always or often lonely often results in a lack of confidence and low self-esteem,²⁵ especially when multiple factors have contributed to a person's loneliness – for example, both bereavement and health issues.

There seems to be a close relationship between the knowledge and confidence to deal with feelings of loneliness and the frequency or magnitude of these feelings. At a glance, it might seem that those with the right tools and attitude can simply stave off potentially harmful feelings – but the relationship is likely more complex than that, with feelings of loneliness breaking down or preventing the very confidence and tools needed

²⁵ Our *Trapped in a bubble* report explores the relationship between low self-esteem and loneliness. Kantar Public (2016). *Trapped in a bubble: an investigation into triggers for loneliness in the UK*. British Red Cross & Co-op. Available at: redcross.org.uk/about-us/what-we-do/action-on-loneliness

to tackle it. A sort of vicious cycle is created, where an individual's ability and energy to maintain and improve social connections drop, amplifying their isolation, loneliness, and in turn fuelling the lack of confidence.

The extra challenges to confidence and self-esteem that people from BAME backgrounds might encounter, such as feeling a sense of not belonging, discrimination and disrespect, are likely to compound this kind of negative cycle, reducing their chances and ability to seek support, socialise, participate and connect.

Stigma

Almost 60 per cent of all respondents admitted they didn't feel confident talking about loneliness, with a third more saying they'd never admit to feeling lonely.

Large proportions of all ethnic groups in the survey worried what people would think if they told them they were lonely. Levels were a little lower for the White British (60 per cent), Black Caribbean (55 per cent) and Black African (48 per cent) groups, while 76 per cent of the "other BAME" group and 70 per cent of the Pakistani group said they would worry what others thought about their feelings of loneliness.

People can feel stigma around admitting they're lonely, about simply experiencing poor health, about asking for help and about accessing services or support.

Some of our interviewees in London and Leeds suggested the terminology around loneliness and the words "lonely" and "isolation" had their own stigma attached to them. One service provider suggested this may be even more the case among certain BAME communities, and that, to attract users, projects ought to use alternative, more positive words such as "connect":

"It is a question of identifying what the community want and the language we use. The word 'connecting' is perfect. If we are thinking of it from that angle, the question becomes how we address this from the perspective of different cultures. In terms of the service being useful for people from BAME communities, people just want to connect."

Some were "too proud" to ask for help and for some, seeking support felt like a sign of weakness.

"There's a stigma attached to asking for help...as an Asian person and a young woman, I was taught that you deal with problems yourself and no one else needs to know. After meeting [the Community Connector] I went for counselling as well... and I realised it does help... [the community connector] opened the door, saying 'there's this place, ring this person', kind of giving us the information to pass you down the right path. She showed me the way to go... and it's not done in our culture." (Interviewee from Oldham, Pakistani woman in her 30s)

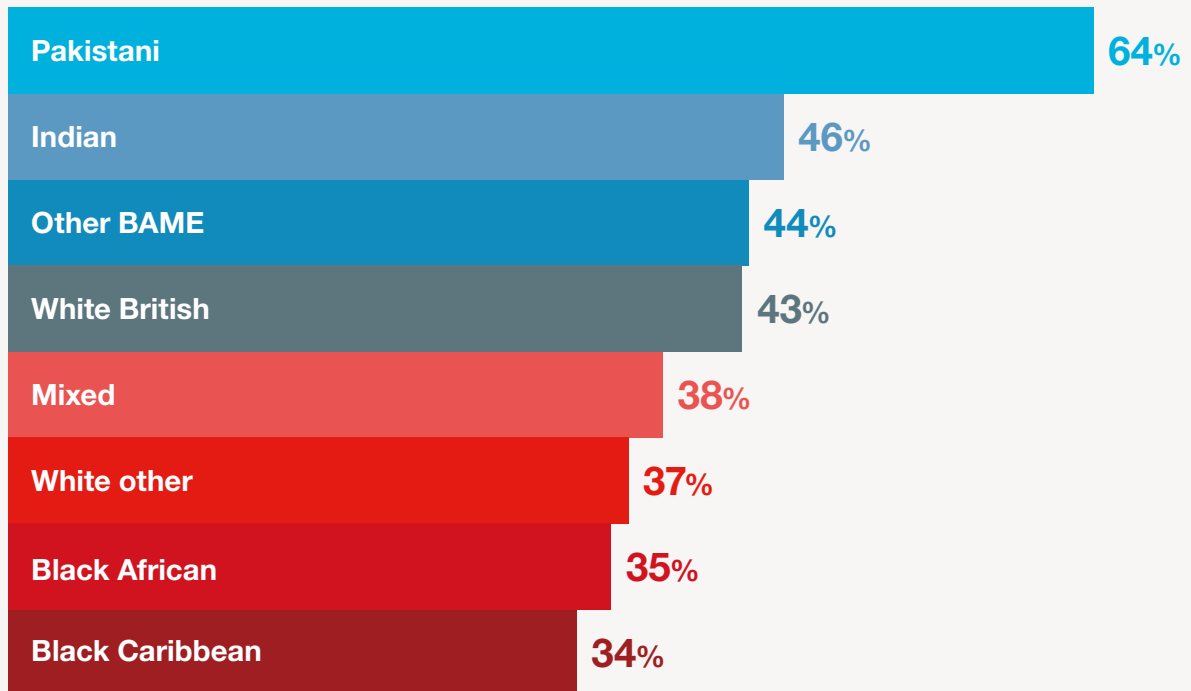
Stigma is also often attached to typical triggers of loneliness, such as mental and physical health problems, and to not being independent or able to socialise. These problems lower self-esteem, often compounding feelings of loneliness and embarrassment.

"It affects my day-to-day life. I can't get up from bed without becoming breathless and needing the pump... It takes me from seven to ten minutes of struggle to finally get up... My house smells bad and my bed is messy because I cannot do it myself... When I meet people they are talking about me, and instead of helping me they just look at me and feel sorry. I don't ask for help and try to do it myself." (Interviewee in Cardiff, Black African woman, with multiple illnesses)

Some interviewees said they had hidden their poor health and level of dependence on others. The implication was that by hiding it and avoiding the associated stigma of dependency, they were better able to maintain their social

I would never admit to feeling lonely

Proportion of respondents by ethnicity who agree they would never admit to feeling lonely



Number of respondents White British: 246, White other: 73, Black African: 52, Black Caribbean: 84, Indian: 87, Mixed: 67, Pakistani: 67, Other BAME: 56.

Of the 27 Gypsy, Roma and Irish Traveller respondents, 23 agreed they would never admit to feeling lonely; out of 19 Bangladeshi respondents ten people would never admit to feeling lonely.

standing within the community and their sense of personal identity. This, in turn, has the potential for individuals to become more withdrawn as their health condition worsens and/or becomes more difficult to hide.

Gender and cultural norms can also affect stigma. In some cases, people worry their families and friends would disapprove of the support and activities they might have otherwise got involved with.

Some people from cultural backgrounds where it's common for extended families to live together, or within a close community, can be more reluctant to admit to feeling lonely. There can be an assumption that individuals will not be lonely because extended family members are a source of support. They can be reluctant to admit to feeling lonely in case it suggests that their extended family has failed in its role in some way.

Not knowing what to do

While people apply different strategies to overcome loneliness in themselves, like making new friends, volunteering, finding enjoyable activities or hobbies and talking to friends and family, a large number of respondents (343) told us they carry on the same and hope the feeling passes when they feel lonely.

Of the respondents who reported they would talk to family and friends about their loneliness, only 18 per cent were always or often lonely, and 40 per cent were never or rarely lonely. Similarly, only 23 per cent of those who would become a volunteer felt always or often lonely. In contrast, 46 per cent of those who reported they would carry on the same and hope the feeling passed were always or often lonely.

Black African respondents were the most likely to visit their place of worship to help with feelings of loneliness (46 per cent), followed by 32 per cent of Caribbean respondents.

Pakistani respondents were the least likely to say they would find enjoyable activities or hobbies when they felt lonely. Thirty-seven per cent of Pakistani respondents reported doing this compared with 63 per cent "White other" and 60 per cent Black African.

What would you do if you were feeling lonely?

If you were feeling lonely or isolated, do you feel you could do any of the following? Please tick all that apply.

63%
of people

who do not know what they would do if they felt lonely, admitted they were often or always lonely.

Out of 134 respondents.

46%
of people

who say they would “carry on and hope the feeling passes” if they were feeling lonely admitted they were often or always lonely.

Out of 343 respondents.



CASE STUDY:

From Delhi to London – making new connections

Shuchi, 34, moved to the UK from India with her husband in April 2018. Having left behind a large network of friends and family and a successful marketing career, she experienced loneliness firsthand.

She is now a support worker for the Connecting Communities team in Barking and Dagenham, London, helping others to reconnect.

“I suddenly felt very lonely as I moved here, even though London is very welcoming, and I was able to settle down in this new environment very quickly. Back in Delhi I had a family group of around 30 people who I would interact with quite frequently and I also had a large network of friends. Having been independent from an early age, I didn’t expect moving away from my cultural framework to impact me like this.

“It was easier to make friends back home, you could meet people, start a conversation and become friends. Here in London people are very busy, it seems difficult for people to find time to invest in making new friends. That was one of the reasons I felt lonely.

“Despite the fact I would go out shopping or go to my salsa class, where I would be surrounded by people and I might talk to everyone in the class during those two hours, I would come home and still feel that I was not fulfilled.

“Back home [in Delhi] I could step out and talk to people or call my family or friends, here I didn’t have anyone like that, someone to have a deeper conversation with or even just to hang out with.

“I like to meet new people, of all different backgrounds and get to understand them.

“When I started volunteering it was just for two days a week, but I immediately felt a difference in my own mental health, it is a basic human need to interact with others and I really noticed a shift in the way I felt once I started to meet people through this role.

“My happiness improved, I was looking forward to things, I had more energy. It was just very nice to meet people from a mix of communities and backgrounds.

“In India we don’t have services like Connecting Communities. I’m sure there are lonely people in India but because we have strong family links, where parents often support children into their 40s and 50s, living together and sharing money and resources, it is maybe less likely people feel loneliness.

“Having said that, the family make-up in larger Indian cities has been changing in the last few decades and recent research shows India is also struggling with loneliness. But it seems to me that people shy away from speaking about it, due to the stigma around it.

“There is a much higher awareness and acceptance of discussing loneliness here in the UK. It is great that there are a range of services in communities which can address this issue here, and I hope that an initiative like Connecting Communities is explored in India, to tackle this seemingly universal issue.”



Image © Mimi Wolica/BBC

Barriers of attitude

Trust came up as an important factor in being able to take up services designed to tackle loneliness. It was not just trust in relation to other service users, but also in those offering a service too, whether that be trust in an individual or an organisation.

Interviewees said they'd be more likely to take up a service offered or recommended by an organisation or place they knew and trusted. The importance of trusted places, like GP surgeries, pharmacies or places of worship, in spreading the word about services and encouraging take-up came up often.

Some of the service providers suggested some people from BAME backgrounds would be less likely to take up services offered by the local authority, for fear of the authorities' potential to intervene in their lives.

Our findings also showed that diversity of staff and volunteers was important. Language barriers not only prevent people from engaging in meaningful interactions, but they can also magnify levels of distrust.

One woman thought the worst when a social worker came to her house to check and administer her medicines. After being unable to communicate, she refused to allow the person into her house because she was afraid of what the person was saying and what she might say to others.

“If you do not know the language here, they break you, play you like a ball.” (Interviewee in Cardiff, Arab woman)

This interviewee said that there is no one she talks to daily. She'll not see anybody for weeks and only talks to people a few times each month. She has neighbours, but the conversation does not exceed “hello” and “how are you?”.

“Lack of confidence” and “not feeling welcome” were two of the most common attitudinal barriers for all ethnic groups. White British respondents were far less likely to feel unwelcome, or as though a service was not for them.

Interviewees reported experiencing racist or anti-immigrant attitudes when attempting to participate in groups, activities and services. Fear for personal safety on public transport was also mentioned, with an example given by a service provider in Newcastle of a person from a BAME background who had been spat at on the bus, and was then too afraid to access their services again.

A lack of inclusive services and support

Our study exploring barriers to service use highlighted the importance, especially for people from BAME backgrounds, of being able to trust service providers – or being able to develop that trust. The findings revealed some clear potential routes to improving culturally sensitive services. Those interviewed suggested that services needed to be embedded in the community, by having a physical base and through extensive networking involving diverse community members.

Some interviewees pointed out that loneliness services appeared to be targeted almost

exclusively to older people, missing out important younger groups. Like other recent national surveys,²⁶ we found that younger people were more likely to report being lonely than any other age group. In another indication of the importance of an individual, personalised approach, some stakeholders said it was important that support could be provided by staff who understood and were part of a community, while others suggested it could be helpful to have interaction with an outsider.

Some bereaved or ill individuals may better connect with someone who understands their culture and beliefs and so will be able to support them appropriately. For others, a sensitive issue may feel easier to discuss with someone outside their community, if they feel they're less likely to be judged or have their standing in the community affected. One stakeholder argued that it's important not to assume that individuals from BAME communities will always want to discuss sensitive issues with people who have a connection to their own culture, and that all staff should have appropriate training, regardless of their ethnic identity, to understand the needs of different communities for whom they offer a service.



26 Department for Digital, Culture, Media & Sport (2019), Community life survey: focus on loneliness. Available at: www.gov.uk/government/statistics/community-life-survey-focus-on-loneliness

Through our review of 221 services across Islington, Oldham and Newcastle, 40 interviews with people delivering services for charities or public-sector providers in these areas, and dozens of interviews with people from BAME backgrounds who were experiencing or were at risk of loneliness, we have unpicked common examples of good practice. To be more inclusive, service providers:

- should market loneliness services with a focus on skills development, and work to appeal to carers and adults aged 25 to 55 years
- need support to use effective strategies and the time, resources and training for staff and volunteers to implement them
should offer culturally aware services and a range of activities and foods, and look at tailoring services for specific BAME groups in appropriate languages (ensuring sustainability by following on with other support once confidence levels have grown, including English language classes)
- need to help reduce prejudice by facilitating contact between different BAME communities and between BAME and predominantly white British communities, as well as between service providers targeting different groups
- must recruit a diverse range of staff and volunteers and work from a local base, with outreach workers providing one-to-one support so individuals become more resilient and able to create their own meaningful connections.



CASE STUDY:

Connecting with service users in Tower Hamlets, London

When British Red Cross and Co-op launched the Connecting Communities Support at Home service in Tower Hamlets, the team experienced barriers in making sure everyone in the area could get the help they needed to overcome loneliness.

Fifty-five per cent of the borough's population are from a BAME background, 32 per cent of those being people from the Bangladeshi community.²⁷

Michael Ochwa, British Red Cross service manager in London, says: "When we were supporting people at home, we had to be very conscious about culture differences. For example, in some cultures it would not be appropriate for a male staff member to support a female service user in their home. This would make it difficult to carry out the correct assessment to meet the needs of the service user.

"Loneliness can still be a stigma for some of the communities we work with. People will say 'I have a daughter' or 'I have a son', implying they therefore don't need help. Then they say that they haven't seen that daughter or son for

six months. People try to protect their relatives because they are working hard and it doesn't portray their family well [to say you are lonely].

"Many people [in the communities where we work] can keep busy by babysitting for relatives but that doesn't mean they're not lonely. It's a very complex subject. They can be surrounded by a big family but still feel lonely due to not having friends to talk to.

"Language barriers also posed a problem but we now have a team support worker who speaks four dialects of Bengali. We were very lucky that when we recruited later in the project we had four or five people at the interview who could all speak Bengali. I think making it clear on the advert that the role was based specifically in Tower Hamlets and that additional language skills would be advantageous helped with this.

"[The staff member] is able to speak to a service user's relatives and friends. If you're going to offer person-centred support it is an advantage to be able to communicate effectively and if there is a language barrier that should be taken into consideration."

²⁷ Office for National Statistics (2011). Census. Available at: www.ons.gov.uk/census/2011census

Equal chances in the face of loneliness: a conclusion

Our ethnicity, gender, religion and sexuality all affect how we move through life. It is not surprising that these elements of our identities would also affect how we experience loneliness. But it is not acceptable that these parts of who we are should put us at greater risk.

It is clear that people's risk of loneliness is being affected by their ethnicity and religion. It is also clear that there is much more to understand about how people's experiences are really being affected, and how we can offer every person the support that is right for them.

Loneliness is a problem anyone can face at any time. It is crucial that systems and support

networks are there for every one of us when we need them – regardless of our background.

What is critical now is that we build the research, the political will and the resources we have to make this kind of service available to all.

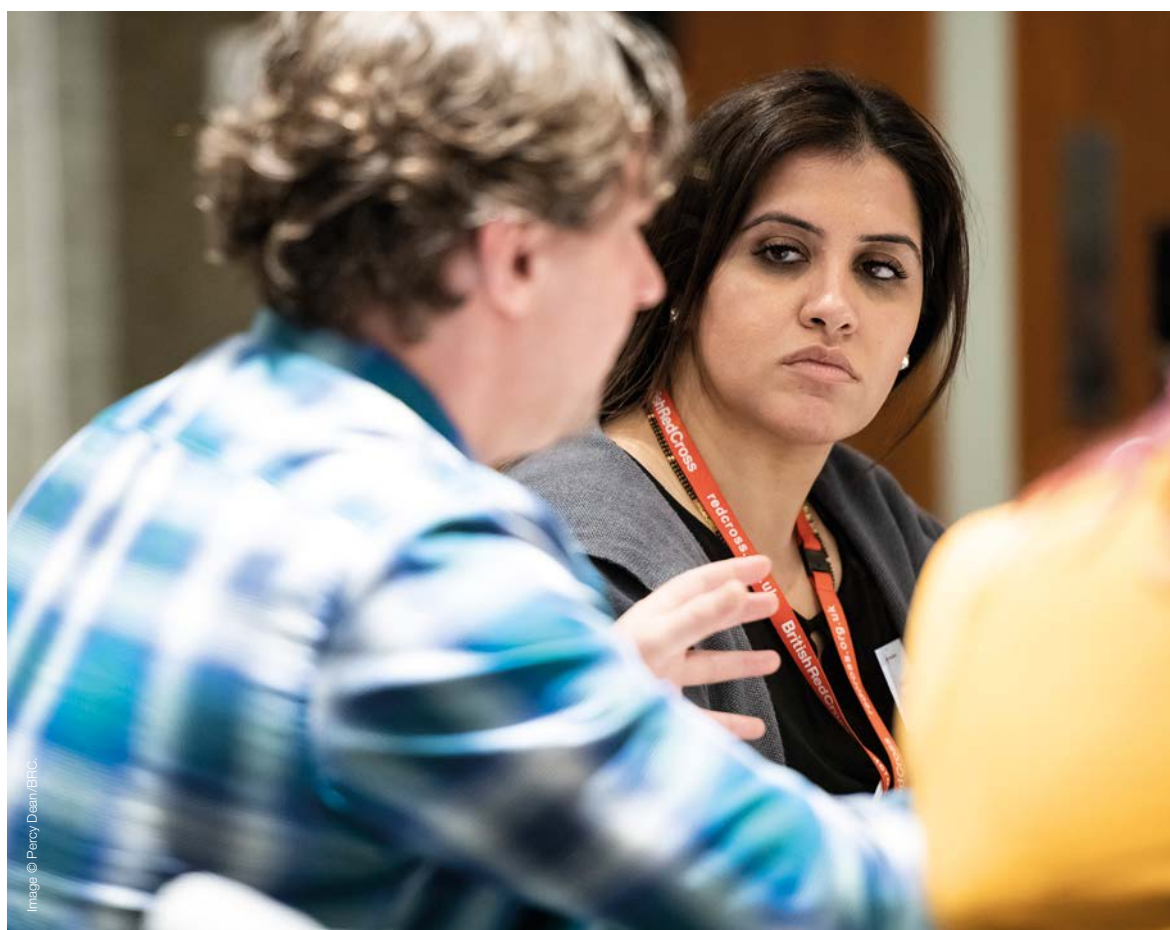


Image © Percy Dean/BFC

Our recommendations

The arguments for consistent, personalised support for loneliness are already strong – and it is clear that services, and the people providing and connecting people to them, should be affordable, diverse and culturally sensitive too. We have identified four steps to enable fair, well-targeted support to all people experiencing loneliness, no matter their background.

1. Sustainable funding

Keeping tackling loneliness as a high political and social priority

- Government should make a significant and sustained financial commitment to tackle loneliness. This should underpin action on the recommendations of this report – including reducing discrimination and tackling stigma.
- Funders and civil society organisations should seek to develop or enhance existing community integration projects, designing them with a diversity and loneliness lens to break down barriers and enable people from all backgrounds to connect.

2. Equality of access and feeling welcome

Celebrating and understanding difference

- Education: approaches to loneliness and diversity, co-designed with people from all backgrounds including BAME, should be included in the loneliness subject as part of the new, compulsory Relationships, Sex and Health Education in schools in England, with similar education included in the curriculums in Northern Ireland, Scotland and Wales.
- Workplace: the government's Loneliness Employers Network, set up to convene and support employers to tackle loneliness, should include a focus on understanding and breaking down barriers to connection and participation in the workplace, including discrimination.
- Employers should take action to address discrimination and bullying in the workplace.

Removing barriers to accessing services

- Government should invest and work with local authorities and other local partners, such as transport, to eliminate the structural barriers to accessing services, including lack of affordability, cuts to local provision and a lack of transport.
- Government should work with local authorities to protect public spaces and places that enable people to connect and build friendships, particularly in areas of deprivation, as one way to reduce the impact of poverty on loneliness.
- Service providers, including healthcare professionals and social prescribing link workers, should establish clear criteria and mechanisms that help to avoid unconscious bias in the provision of or referral to services.
- Service providers should take steps to better reflect the community they aim to serve, including through:
 - the recruitment of a diverse range of volunteers and staff
 - co-producing services that reflect the needs and diversity of communities
 - engaging with and creating trust with the local communities identified
 - ensuring services for particular communities have a base in the heart of the community and are supported by outreach workers
 - designing services to overcome language barriers.

3. Raising awareness and tackling stigma

A dedicated campaign:

Government should dedicate a strand of its loneliness awareness campaign to tackling the stigma experienced by people with particular difficulties or challenges due to loneliness, including people from BAME backgrounds. This should:

- break down assumptions about loneliness that all too often result in people not getting the support they need – such as feeling lonely being a sign of weakness or that it's insulting to family and friends to seek professional support
- recognise that stigma is often multifaceted and very often exacerbated by the stigma attached to typical triggers of loneliness, such as mental and physical health problems
- ensure that people from all backgrounds know how to respond to loneliness and are comfortable reaching out for support when they need it.

4. Conducting further research

Further collaboration between government and the Office for National Statistics (ONS):

This should seek to add to the evidence base for loneliness and diversity and help to inform the development of effective services and approaches to tackling loneliness. We suggest government and the ONS take forward large scale and in-depth explorations of the emerging insights provided by the studies in this report:

- Explore in-depth the challenges associated with the UCLA measure of loneliness experienced by different cultures and in different languages and develop guidance on how to mitigate these where possible.
- Undertake a large-scale, nationally representative quantitative study, exploring the prevalence of loneliness among people from BAME backgrounds as well as the intersectionality with other characteristics, such as religion or belief, gender, disability, age and socio-economic background.
- Begin a deep exploration of some of the experiences captured throughout these studies that provide emerging but stark insights, such as the high levels of loneliness, discrimination and a sense of not belonging among certain ethnic groups.

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Credits

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Readers are encouraged to quote and reproduce material from *Barriers to belonging: An exploration of loneliness among people from BAME backgrounds*, but the British Red Cross and Co-op request due acknowledgement and a copy of the publication.

**For more information please contact LonelinessAction@redcross.org.uk
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