

How non-health charities address the social determinants of health



Friends and communities

Friends and communities enable us to develop social networks and relationships that improve our health and well-being. Loneliness and social isolation have significant health implications—and are both more likely without friends and the social networks we develop within our communities.

Evidence summary

Pages 37–43 of the [Evidence Review](#) discuss in detail the evidence that suggests the following:

- Having friends and participating in community and social groups can have a positive effect on both physical and mental health; both through psychological factors such as reducing stress and promoting feelings of purpose, and through lifestyle factors such as more encouraging physical activity and improving nutrition.
- Social isolation and loneliness increase the risk of poor physical health such as coronary heart disease, and the risk of cognitive decline, mild cognitive impairment and dementia.
- A sense of community can lower blood pressure, reduce ageing and improve immune systems. A strong community enables people to feel they have influence over decisions that impact them—improving health.
- Social exclusion has a negative impact on health.

Social isolation and loneliness are associated with 50% excess risk of coronary heart disease, similar to the excess risk associated with work-related stress.



Key evidence link: Poor housing, unemployment and money problems, can all prevent social interaction and lead to social isolation and loneliness.

Case Study: [South London Cares \(SLC\)](#) is a community of young professionals and their older neighbours who share time and socialise together. The charity aims to tackle social isolation and loneliness by brokering meaningful interactions between people who wouldn't ordinarily meet.

Loneliness is increasingly recognised as a health hazard, and the charity can see from qualitative input from participants that through involvement with their programmes, their wellbeing benefits. SLC finds that measuring health outcomes for this type of work is not always appropriate, and may have a negative impact on its beneficiaries—so the charity does not currently conduct health-based impact evaluations.

But the link between loneliness and health is still relevant. Loneliness can be an abstract, intangible concept. Explaining the link between health and social connections contributes to an understanding of loneliness, gives it a physical context for someone who may not have experienced it themselves, and help funders to understand the tangible and significant impact possible through interventions like SLC. To make this link, SLC uses existing evidence on the impact social connections have on loneliness and on health from other sources—such as that published by the Campaign to End Loneliness. The charity has developed outreach partnerships with pharmacies, GP surgeries, hospital discharge teams and CCGs to reach particularly isolated older people but does not receive any direct funding from health services. Wider knowledge of the impact social connections have on health would help the charity mobilise further partnerships, support and funding opportunities.

One of South London Cares' key challenges is using evidence of the impact of social connections where it's known that every person has a different need when it comes to feeling less lonely or isolated.

Challenges

Barriers to gathering and using evidence

- A lack of strong social relationships can affect everyone at different stages of life, and is not necessarily linked to other determinants. Interventions cover a broad area—older people, young mothers, and carers for instance—and so there are a broad range of different interventions for each. This creates two key challenges:
 - External evidence may not be relevant to each type of intervention.
 - Creating a substantial body of evidence of the positive impact of these interventions difficult.
- The quality of social networks and relationships is more subjective and difficult to define, than say, the quality of housing. This makes measurement of change in outcomes more difficult.
- Social isolation is closely related to other factors, such as poverty, debt and housing. These different drivers also make measurement—particularly understanding the impact of one intervention—complex.

Barriers within the sector and wider environment

- Many of the organisations in this sector are small, community organisation with limited resources to link their work to health outcomes.
- A lack of friends or social connections is often perceived as a challenge for older people, whereas it is a determinant of health that can affect people at any age.

Opportunities

Opportunities for gathering evidence

- As with many of the determinants, the reverse link with health is also true—poor health can impact on our relationships. This can be another way for charities to link their work to health, as an ‘enabler’ of their wider goals. NPC and Relate’s joint report [The best medicine: The importance of relationships for health and well-being](#) looks at the evidence for this.

Opportunities within the sector and wider environment

- Recent research and news headlines mean that awareness of the importance of friends and social connections for our health is increasing.
- There are tools already out there to measure the link between health and friends, relationships and communities. For example, the [ONS well-being measure](#), or NPC’s [well-being measure](#), which was used to measure different aspects of well-being, including relationships with friends and satisfaction with community. NPC’s report [That awkward age](#) analyses this data and looks at how relationships impact on well-being for young people.
- There are strong charity sector campaigns already working on this issue, which have gained the attention of the health sector, for example the [Campaign to End Loneliness](#) provides guidance for the health sector on reducing loneliness.
- There is currently an interest in community resilience and well-being from local government, of which the link between health and friends and communities plays a part.

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