Executive Summary
This paper connects to a discussion on loneliness in Tower Hamlets at the meeting of the Health and Wellbeing Board on the 20th of February.

Since then, the Mayor of Tower Hamlets has stated a commitment to establishing a taskforce on addressing loneliness.

At the Board meeting on the 17th of July it was agreed that establishment of the taskforce should be one of the 18/19 deliverables of the Communities Driving Change priority of the Health and Wellbeing Strategy.

The paper sets out background, context and proposed next steps

Recommendations:
The Health and Wellbeing Board is recommended to:

1. Discuss the approach set out for 2018/19

2. To provide advice on who could represent the organisation/department represented at the proposed Taskforce Steering Group
1. **REASONS FOR THE DECISIONS**

1.1 The purpose of the taskforce is to drive collective action to address loneliness in Tower Hamlets.

2. **ALTERNATIVE OPTIONS**

2.1 If the taskforce was not established, there is a risk that approaches to addressing loneliness in the borough would not be strategic and opportunities for sharing good practice and using resources wisely would be lost.

3. **DETAILS OF THE REPORT**

**What is the issue?**

3.1 The Board discussed the issue of loneliness in Tower Hamlets at the meeting on the 20th of February. This prompted a rich discussion of how organisations represented around the table could contribute to addressing loneliness in Tower Hamlets.

3.2 The impact of loneliness is also highlighted in the Mayor's manifesto which set out a commitment to set up a taskforce on addressing loneliness.

3.3 At the Board Meeting on the 17th of July, it was agreed that establishing the loneliness taskforce should be one of the 18/19 deliverables of the Communities Driving Change priority of the Health and Wellbeing Strategy.

3.4 Addressing loneliness links to a number of 'I statements' in the Tower Hamlets Together shared outcomes framework, including 'I play an active part in my community', 'I have a good level of happiness and wellbeing' and 'I feel safe from harm in my community'.

3.5 The Jo Cox Foundation and the Campaign to End Loneliness have highlighted at national level the importance of connection in people's lives and the levels of loneliness in our society.

3.6 The Great Get Together in June 2018 provided evidence of how people enjoy connecting with each other across generations and societal divides when the conditions are in place.

**Why is this important?**

3.7 Feeling connected is a core human need. When this is not met, it impacts profoundly on physical and mental health and wellbeing. This is a particular

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2. https://www.jocoxfoundation.org/
3. https://www.campaigntoendloneliness.org/
issue for Tower Hamlets where there is a higher level of risk factors for loneliness: living alone, ethnicity, poor health and income deprivation.

3.8 Most importantly, through collective action we can do more to help people who are experiencing loneliness become more connected in their lives. This is evident both through local experience and the emerging evidence base nationally.

What are we doing currently?

3.9 A joint strategic needs assessment on loneliness was completed in 2016 summarising the local data and evidence base at the time\(^5\).

3.10 A community participatory project exploring the experience of older people in the borough that engaged with 600 local residents was also published in 2016\(^6\).

3.11 A project addressing loneliness in care homes was conducted between 2015 and 2016 in which volunteers and school student were paired with residents\(^7\). The evaluation identified positive impacts on wellbeing of both volunteers and residents.

3.12 A stakeholder event was conducted in November 2017 bringing together the findings of this work and exploring next steps\(^8\).

3.13 Reducing isolation and loneliness is a key theme of the Ageing Well Strategy\(^9\). This highlights the role of existing services, particularly in the voluntary and community sector, to reduce isolation and loneliness as well as of specific programmes such as the outreach element of Link Age+.

What else do we need to do?

3.14 The work outlined above highlights that through collective action we have the power to make an impact. It has provided evidence of the appetite for action from a wide range of partners and communities. This is an issue that people want to talk about and work together to address. The challenge is how we harness these assets to make a tangible difference to people's lives.

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5 https://www.towerhamlets.gov.uk/Documents/Public-Health/JSNA/Lonelinesss_and_Isolation_in_older_people.pdf
What are the next steps?

3.15 The proposed next steps are as follows:

1. Discussion at Health and Wellbeing Board - focus on what a taskforce would look like who would need to be involved? (October)

2. First meeting of taskforce (December) - focus on reflection on work so far and planning summit

3. Summit on addressing loneliness (Jan/Feb) - how can Tower Hamlets be a place where people can connect more easily to improve their quality of life?

Questions for Board Member

1. What are your thoughts on this approach?

2. If there is one person from your organisation/department who could provide great representation at the taskforce who would that be?

4. **EQUALITIES IMPLICATIONS**

4.1 This proposal is about addressing deep drivers of health inequalities in Tower Hamlets. The risk factors for loneliness are highest in the most deprived neighbourhoods in the borough.

5. **OTHER STATUTORY IMPLICATIONS**

5.1 The proposal links to making the best use of partnership resources and assets. It also links to agendas such as crime and fear of crime as well as safeguarding issue as well as social cohesion.

6. **COMMENTS OF THE CHIEF FINANCE OFFICER**

6.1 There are no direct financial implications arising from this report. Any service expenditure incurred in delivering the proposed next steps will be funded through existing resources.

7. **COMMENTS OF LEGAL SERVICES**

7.1 S.195 of the Health and Social Care Act 2012 requires the HWB to encourage those who arrange for the provision of any health or social care services in their area to work in an integrated manner. Section 1 of the Care Act 2014 places a general duty on the Council when exercising its functions under the Care Act to promote that individual’s well-being relating to a number of areas including participation in work, education, training or recreation; social and economic well-being; and domestic, family and personal relationships. The
recommendation to discuss the approach and membership of the taskforce to address loneliness within the Borough is consistent with these duties.

Linked Reports, Appendices and Background Documents

Linked Report
Online links to related resources are set out in footnotes.

Appendices
• NONE

Local Government Act, 1972 Section 100D (As amended)
List of “Background Papers” used in the preparation of this report
List any background documents not already in the public domain including officer contact information.
• NONE

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