Heritage and Loneliness

Jessie Clarke

Heritage and Wellbeing Team

Heritage and Loneliness

Jessie Clarke

2024

The Research Report Series incorporates reports by Historic England's expert teams, their predecessors and other researchers. Many Research Reports are interim, to make available the results of specialist investigations in advance of full publication. Although subject to internal quality assurance, they are not usually refereed externally and their conclusions may sometimes have to be modified in the light of information not available at the time of the investigation. Where no final project report is available, readers should consult the author before citing these reports.

For more information email Res.reports@HistoricEngland.org.uk or write to:

Historic England, Fort Cumberland, Fort Cumberland Road, Eastney,
Portsmouth PO4 9LD

Opinions expressed in Research Reports are those of the author(s) and are not necessarily those of Historic England.

Summary

Current research argues that loneliness should be considered one of the most critical health concerns of our society. It is linked to shorter life spans in the same categories as obesity and smoking. Whilst loneliness is often considered in light of the ageing population, young people between 16-24 have reported being the loneliest in society. The loneliness crisis, therefore, covers the entire population age range.

The Department for Digital, Culture, Media and Sport (DCMS) set up a loneliness strategy in 2018. The arts and cultural sector have been instrumental in creating schemes within this to alleviate and prevent loneliness. Levels of loneliness have further increased since the beginning of the Covid-19 pandemic. As the need for support increases, multi-agency work across the sector will be needed to meet this demand.

The value of the heritage sector in preventing loneliness has not always been showcased to its full extent due to a lack of robust, demonstrable evidence. Taking on board lessons from across the cultural and heritage sectors, and outside organisations, could assist in promoting the valuable role the historic environment and wider heritage sector has in this area.

Contributors

Acknowledgements

Archive location

Historic England Archive, Engine House, Fire Fly Avenue, Swindon, SN2 2EH.

Date of research

Research was carried and the report written in 2022.

Contact details

Historic England, The Engine House, Fire Fly Avenue, Swindon SN2 2EH.
Res.reports@HistoricEngland.org.uk

Contents

Illustrations

Executive Summary

Current research argues that loneliness should be considered one of the most critical health concerns of our society. It is linked to shorter life spans in the same categories as obesity and smoking. Whilst loneliness is often considered in light of the ageing population, young people between 16-24 have reported being the loneliest in society. The loneliness crisis, therefore, covers the entire population age range.

The Department for Digital, Culture, Media and Sport (DCMS) set up a loneliness strategy in 2018. The arts and cultural sector have been instrumental in creating schemes within this to alleviate and prevent loneliness. Levels of loneliness have further increased since the beginning of the Covid-19 pandemic. As the need for support increases, multi-agency work across the sector will be needed to meet this demand.

The value of the heritage sector in preventing loneliness has not always been showcased to its full extent due to a lack of robust, demonstrable evidence. Taking on board lessons from across the cultural and heritage sectors, and outside organisations, could assist in promoting the valuable role the historic environment and wider heritage sector has in this area.

Existing research

Loneliness is experienced by many people over the cause of their life. It is not just being alone but is about feeling disconnected or isolated from other people. For most people this is likely to be transient. However, for some, chronic loneliness severely affects their quality of life. There can be many causes:

- Age: those reporting to be the loneliest are found amongst the youngest (16-24) and eldest (65+) of the adult population. There was some change in this over the pandemic with a significant increase in reported loneliness for 16–30-year-olds.

- Ethnicity: ethnic minorities have a higher risk of loneliness, especially first-generation immigrants

- Gender: women generally report feeling lonelier than men.

- Life Milestones or 'trigger events': these could include losing a partner, becoming a new parent, children moving out or a change in employment status which all increase a risk to loneliness

- Sexuality: LGBTQ+ communities are more likely to report chronic loneliness.

- Health: people with long term health conditions or those with less overall good health are more at risk of being lonely.

These causes are not exhaustive or mutually exclusive (BBC, 2018; Jones, Jopling and Kharicha, 2021, p.29; Salway, Sarah et al., 2021).

Loneliness can be divided into social loneliness and emotional loneliness. Social loneliness is a lack of a social network to give a sense of belonging and community. Emotional loneliness is a lack of support figures or people to turn to. It is important to note that whilst linked, loneliness and social isolation are not the same. Social isolation is an objective situation when a person has few or no social connections (Salway, Sarah et al., 2021). This is not always considered problematic for a person, but it does increase the risk of loneliness (Jones, Jopling and Kharicha, 2021, p.8).

Research has shown that chronic loneliness poses the same level of health risk as obesity and smoking. It suggests that as humans are fundamentally social beings, addressing loneliness in society needs to be considered a serious public health concern (see for example Hawkley and Cacioppo, 2010, p.219; Salway, S. et al., 2020). Consequently, if not properly addressed, loneliness is costly to wider society, impacting quality of life, mental and physical health, and mortality (DCMS, 2022a; Jones, Jopling and Kharicha, 2021, p.8).

There is also considerable research to show that there is a high level of stigma around loneliness. Many people experiencing loneliness also feel shame (Campaign to End Loneliness, 2020). They are therefore less likely to seek advice or support, perpetuating the cycle, as depicted in the below figure from the Campaign to End Loneliness' report (Campaign to End Loneliness, 2020).
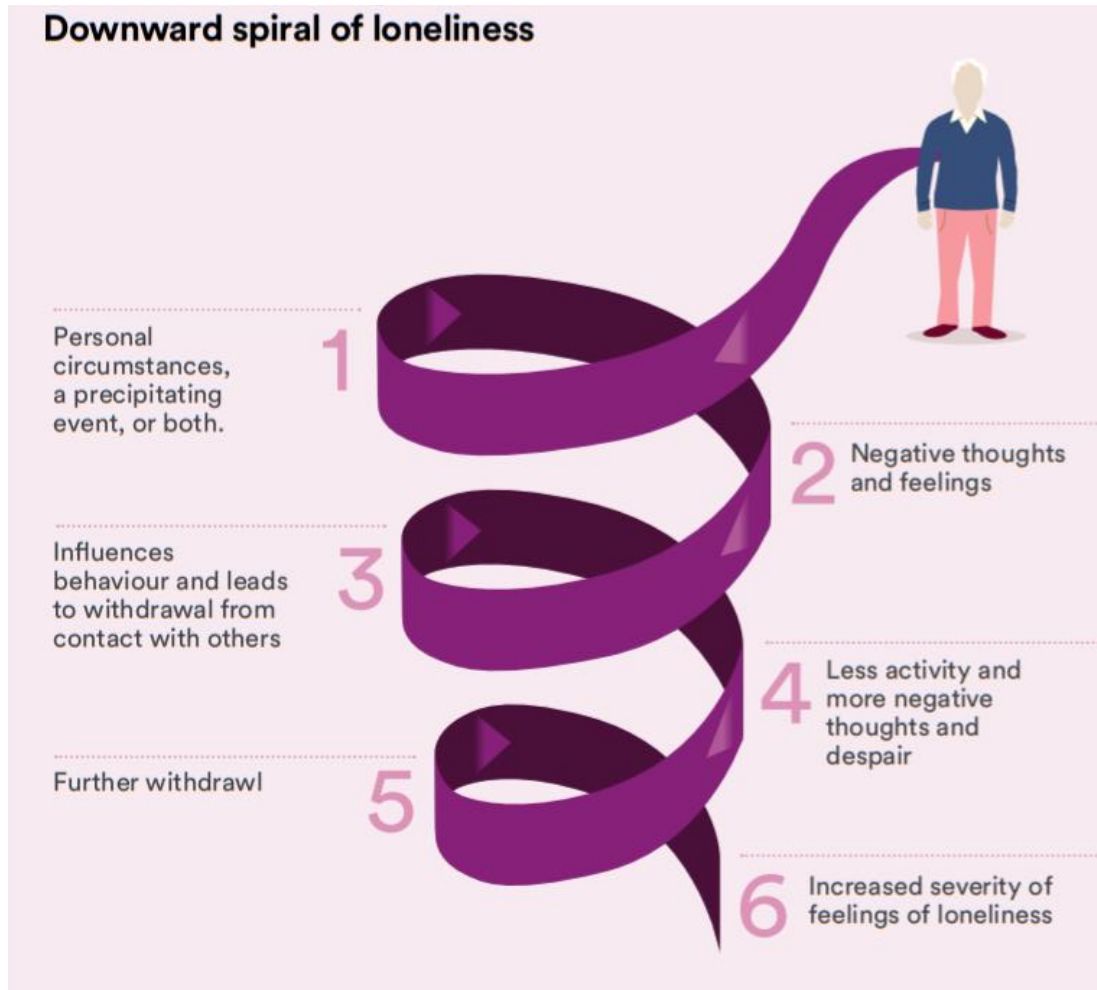
Figure 1: Graphic showing the downward spiral of loneliness from Campaign to End Loneliness' *The Psychology of Loneliness: Why it matters and what we can do* (2020). [© Campaign to End Loneliness]

The impact of Covid-19

The lockdown restrictions over the past two years have clearly impacted levels of loneliness. The Campaign to End Loneliness identified several key lessons to learn from lockdown:

1. Chronic loneliness increased over the pandemic: one million more people became chronically lonely.

2. There was a "significant variation" in the impact of the pandemic across different societal groups. At risk groups became lonelier. In particular young people, those living alone, those unemployed or on low incomes and people with a mental health condition.

3. 'Trigger points' – such as bereavement or unemployment – increased, whilst the ability to seek support decreased. There is evidence that people, especially those from at risk groups, are finding it harder to recover from the loneliness experienced in the pandemic. Chronic loneliness is therefore likely to continue at higher than pre-pandemic levels.

4. Disadvantaged groups suffered disproportionately from a lack of pre-existing resources and support networks.

5. As restrictions eased, concern around the risk associated with the virus combined with pre-existing social anxieties have had significant psychological impact for at risk groups (Jones, Jopling and Kharicha, 2021).

Fig two shows a breakdown by age of the reasons people attributed to feeling lonely because of the pandemic (Dinic, 2021). These reflect known pre-pandemic causes of loneliness which were heightened during lockdowns. This also reflects the trend that all age groups were hit by the removal of social support. The Campaign to End Loneliness found that pre-existing factors were exacerbated leading to deeper and more severe loneliness (Jones, Jopling and Kharicha, 2021). They predict there is a structural shift in the demand for help, as people experiencing chronic loneliness may find it harder to overcome it alongside wider societal experiences of loneliness.

Loneliness is known to be long lasting and enduring. It can take up to nine years to recover from mental illnesses. Therefore, there is an urgent need to work to combat the increase in loneliness that is seen across society (Rowland, 2022). This is especially true

for the most at risk and disadvantaged groups who have already experienced years of underfunding. This includes the provision of youth centres, long term health funding and working ethnic minorities and those who are unemployed or on lower incomes (Rowland, 2022).

There also needs to be a continued review of how loneliness is tackled (see The Campaign to End Loneliness' Promising Approaches framework below, fig three). Digital and remote access projects are useful solutions in some cases, for example video call befriending schemes. However, digital exclusion must be considered. This relates to both those who lack the skills – including, but not exclusively, older members of society- and resources – in particular lower income households (Ingram, 2022; Leonnet, 2022). It is imperative to work with the community when delivery support to ensure that it is accessible. Moving on from Covid -19, projects must consider a wide variety of options and stakeholders.

How have Britons experienced loneliness since March?

Which of these comes closest to the kind of loneliness you experienced? (% of those who said they had felt lonely to some extent since March 2020)
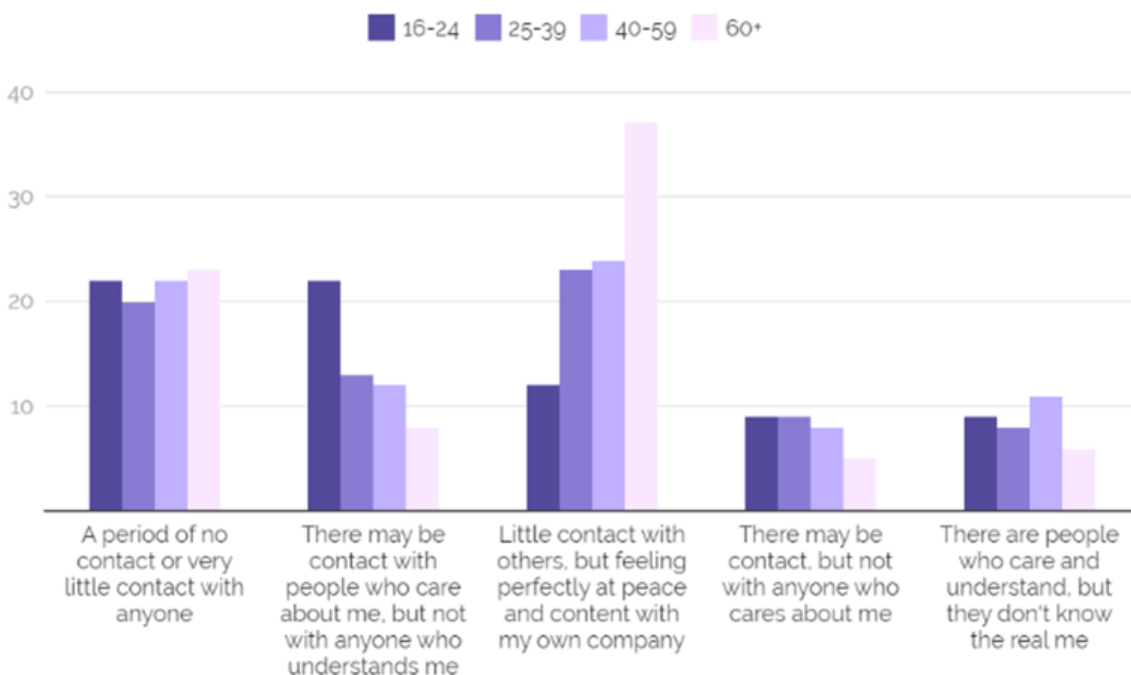
Figure 2: Chart showing how people expressed feeling lonely during Covid-19 lockdowns by age (Dinic, 2021).
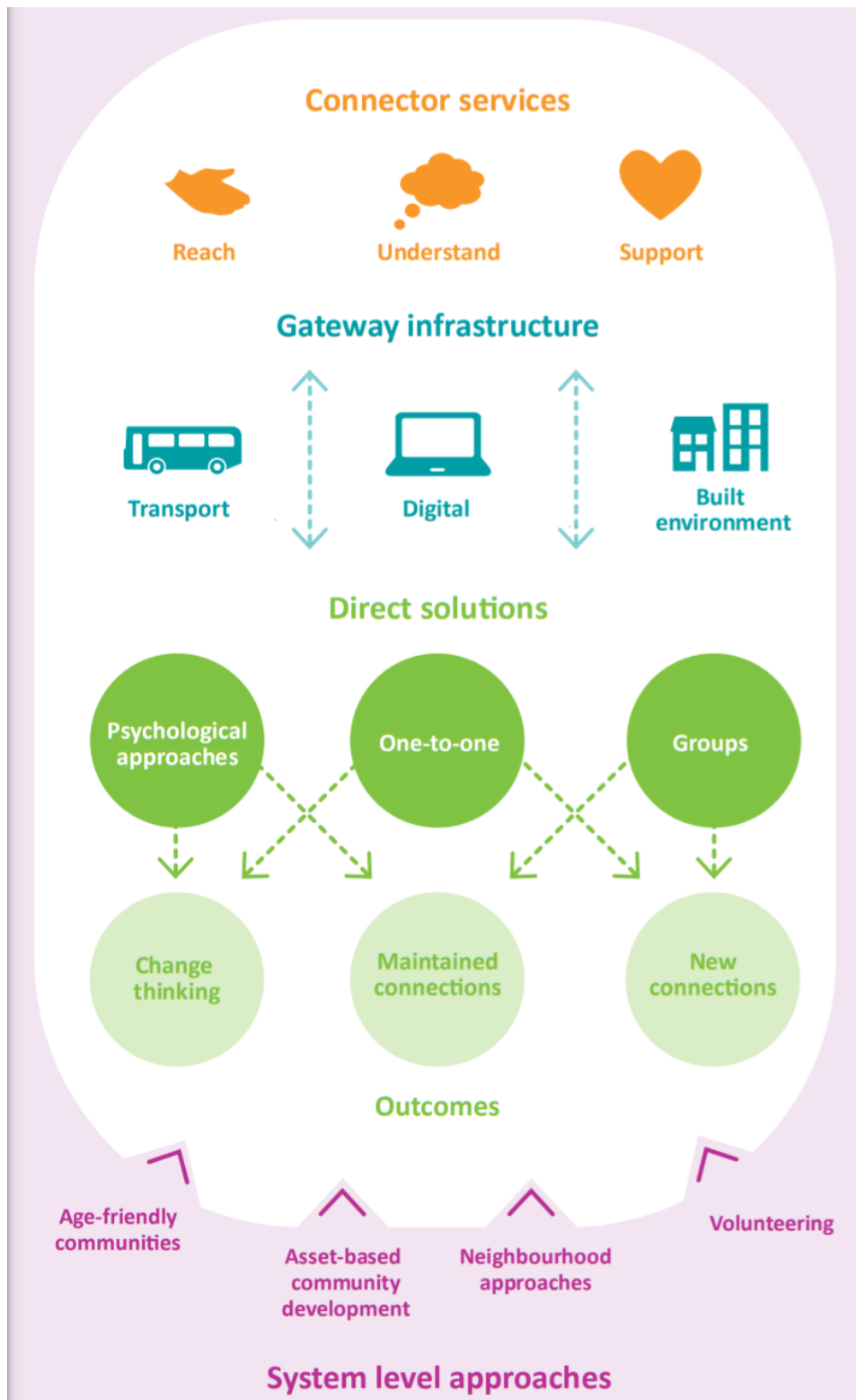
Figure 3: Campaign to End Loneliness Promising Approaches
Framework to address Loneliness (Jones, Jopling and Kharicha, 2021).
[© Campaign to End Loneliness]

Government Policy

Department for Digital, Culture, Media and Sport

In 2018 the UK was the first country in the world to appoint a loneliness minister and has had a loneliness policy action plan since then (What Works Wellbeing, 2020). This appointment came directly off the back of the work of the Jo Cox commission, which continues to undertake work to promote loneliness alleviation in government policy (The Jo Cox Foundation, 2022). The minister sits within DCMS. Loneliness policy sits within the Civil Society and Youth cross government agenda (Verdi, 2022). Loneliness is a key policy priority for DCMS (DCMS, 2021b). The Department undertakes continued research into loneliness and promotes multi-agency work and ongoing projects (DCMS, 2022a). Whilst a priority area before Covid-19, the pandemic has further highlighted the importance of combatting chronic loneliness. Since 2020 three separate funds have been made available for projects which target loneliness. This includes the recent work with the Department for Transport to provide funds to improve accessibility; the Covid-19 Recovery Fund and the Community Support Fund (DCMS, 2021c; DCMS, 2022b; Dinos, 2021; Verdi, 2022).

The government has also created a 'Tackling Loneliness Network' as part of their plan to combat loneliness during Covid-19 (DCMS, 2021a). The aim of this network is to enable action plans to be established and accomplished by the government and partner organisations. The network has set up a loneliness hub in order to share best practice. It also enables charitable organisations to share knowledge with other partners who may wish to embed loneliness in their outcomes but who traditionally have not had the specific expertise in this area. Historic England is a part of this network.

In a 2020 policy report undertaken with the Campaign to End Loneliness specifically looking at loneliness in older people, three ways in which loneliness could be targeted were highlighted.
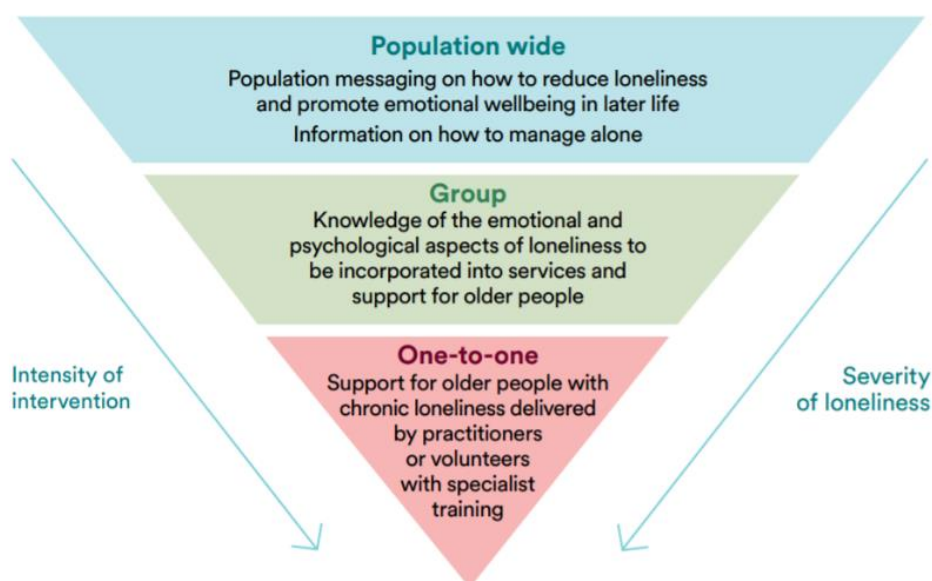
Figure 4: Image from Campaign to End Loneliness' *The Psychology of Loneliness: Why it matters and what we can do* (2020). [© Campaign to End Loneliness]

These are at a population wide, group and one-to-one level. When considering the ways in which the heritage and cultural sector have already engaged with loneliness these generally fall into the first two categories (see below).

DCMS undertakes a loneliness evidence review yearly. This highlights current evidence, evidence gaps, existing projects and future goals. The most recent was publish in January 2022 (DCMS, 2022a).

NHS

The NHS recognises that loneliness is a long-term health concern. The updated long-term plan for the NHS published in 2019 includes a recognition of the need to combat loneliness. NHS long term plans to work with outside partners to create better spaces and community work. Its focus is on prevention not reaction (NHS, 2019). This links directly to their existing social prescribing work with partners such as the National Academy for Social Prescribing (National Academy for Social Prescribing, 2022; NHS, 2022; SQW, 2020).

The NHS, in conjunction with DCMS, have recently run the 'Every Mind Matters campaign' due to end March 2022. The recently released toolkit highlights the new 'lift someone out of loneliness' (DCMS, 2020). Whilst a part of the wider loneliness campaign, it is particularly in response to Covid-19 and the increased levels of loneliness felt across society.

The Heritage and Cultural Sector

In 2018 Historic England published "Wellbeing and the Historic Environment" which demonstrated how Historic England's core work could directly link to improved wellbeing outcomes. Historic England research has also demonstrated how living near or engaging with heritage is associated with a better quality of life (Reilly, Monckton and Nolan, 2018 see also Historic England, 2020; Monckton, 2021a). 'Wellbeing and the Historic Environment' identified six routes into wellbeing through heritage:

- Heritage as Process
- Heritage as Participation
- Heritage as Mechanism
- Heritage as Healing
- Heritage as Place
- Heritage as Environment

Figure five below shows how these six routes relate to wellbeing outcomes, whilst figure six demonstrates the strategic model for Historic England to achieve these aims. Tackling loneliness needs to address either a lack of social connection or a lack of a trusted network. All of these routes can help counteract or prevent loneliness. Highlighted in each route are

the most obvious examples that can do this. Since this report was published, Historic England has worked on several wellbeing projects and partnerships (discussed below). Historic England wellbeing and heritage strategy therefore has the capacity to highlight existing projects within a loneliness strategy and build on previous work to enhance a loneliness strategy.

Moving forward from Covid-19 Historic England's 2020 'Heritage and Society' report once again highlights the opportunities heritage can provide for wellbeing recovery. The major themes identified include how engagement with heritage can improve the quality of place; create a sense of belonging; improve social identity and belonging; create social cohesion; empower active and skilled citizenship; improve mental and physical health; stimulate minds and supporting older people and empowering younger people (Historic England, 2020). Once again many of these outcomes can also be seen to combat loneliness or prevent chronic loneliness amongst at-risk groups.

The 'Heritage and Society' report notes the general high levels of public engagement with heritage. It also highlights that the public in general wants the historic environment to be cared for and preserved (Historic England, 2020). More broadly, wider research has shown that as lockdowns lifted, many people visited heritage sites as a way to reconnect in a safe way (Sofaer et al., 2021). The historic environment therefore provides a vast array of opportunities to achieve wider wellbeing, but also combatting loneliness, aims.
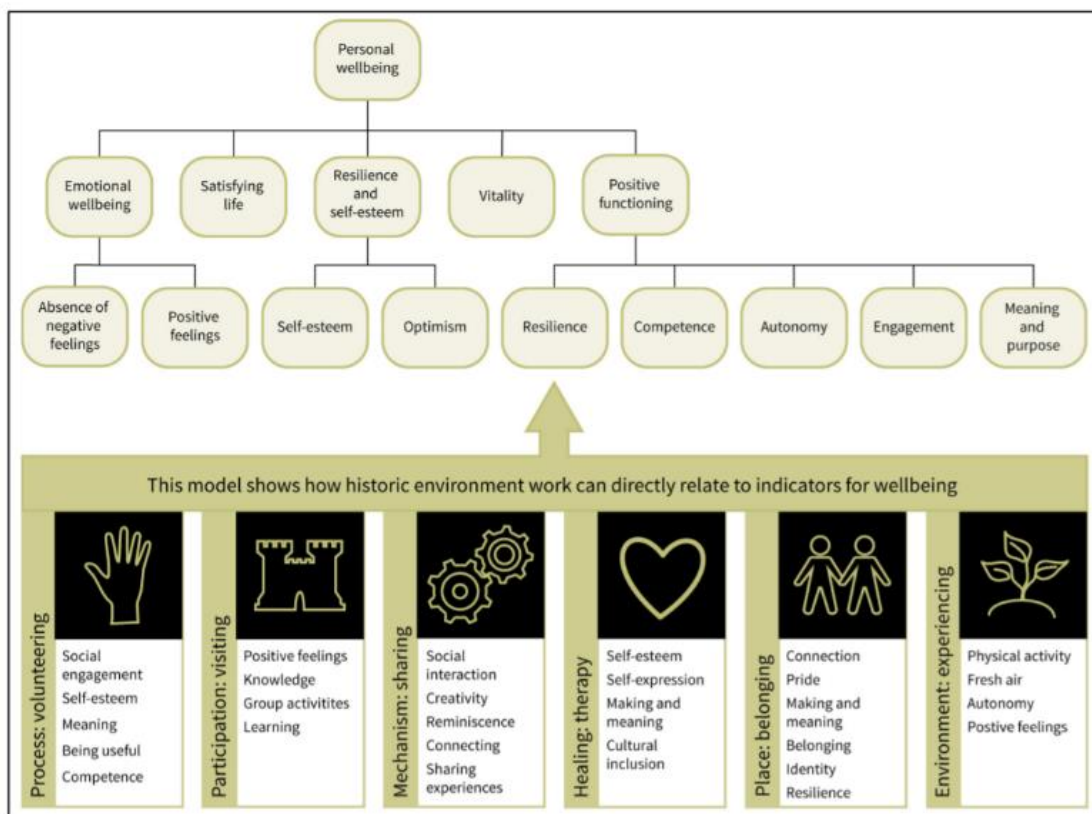
Figure 5: Six routes into wellbeing through heritage in Reilly, Monckton and Nolan's *Wellbeing and the Historic Environment* (2018). [© Historic England]

The Heritage Alliance also compiled a report in 2020 highlighting the wider importance of heritage for wellbeing outcomes: "Heritage, Health and Wellbeing" (The Heritage Alliance, 2020; see also Daykin et al., 2021). This is a case study-based report and covers broader wellbeing aims. It identifies that loneliness is an important consideration in the recovery from Covid-19. It stresses the value of the heritage sector if proper funds and resources are given. Similarly, it notes the ability of the sector to adapt to the pandemic, citing examples of remote access heritage, which allowed at-risk peoples to continue to engage with heritage during lockdowns (The Heritage Alliance, 2020, p.79).

As the report notes, if loneliness and other wellbeing aims are met then there is reduced risk to anxiety and depression. It also highlights the potential within the wider heritage sector to meet these aims. These vary from access to the historic landscape through to object handling, volunteering, and learning new skills on archaeological digs (The Heritage Alliance, 2020, p.11).

Figure 6: Five ways to wellbeing, from the New Economics Foundation in Reilly, Monckton and Nolan's *Wellbeing and the Historic Environment* (2018). [© Historic England]

The Heritage Alliance report also set out a number of recommendations for wider wellbeing aims going forward, particularly moving out of the pandemic. This includes showcasing wellbeing work in existing projects; building and continuing partnerships with local communities; ensuring wellbeing is embedded in organisational aims; considering evaluation at the start of projects including the sustainability of such projects and sharing expertise through training (The Heritage Alliance, 2020, p.81).

Existing Projects

Historic England's Wellbeing and Heritage strategy has included a number of projects that have already combatted loneliness. This includes work with social prescribing. Whilst these may not explicitly state loneliness as an explicit aim, they do all aim to connect people.

Through providing social connections, learning opportunities and safe spaces, loneliness can be alleviated. They can therefore be seen as having contributed to the prevention of chronic loneliness.

The Red Cross have published work on how social prescribing is an effective tool in tackling loneliness. They identify the complex needs of loneliness and the possible pathways into social prescribing which can directly alleviate loneliness. This includes social activities, sport activities, bereavement support or peer support. Despite this opportunity with social prescribing, they also note that loneliness may not be addressed as effectively as possible with social prescribing (British Red Cross, 2019a). There is therefore a clear link to the work already being undertaken by Historic England and the alleviation of loneliness (Monckton, 2021a).

The spreadsheet in Appendix A summarises 20 wellbeing projects. It details their aims and objectives, any evaluation undertaken and how this can be linked to Historic England's frameworks. These include Blenheim Palace Estate social prescribing scheme; local history cafes and wellbeing projects as part of Kirkham High Street heritage Action Zone. Appendix one includes an in-depth consideration of four of these projects, providing further insight into how the historic environment and heritage values have been utilised to combat loneliness.

These are just a few examples of the existing work of Historic England and the wider heritage sector. The success of these projects indicates the opportunities Historic England can offer to combat loneliness. All of these projects to some extent contain elements of connecting people. Therefore, in future combatting loneliness could perhaps be enhanced if this aim was highlighted from the beginning of the project.

Beyond the Cultural Sector

As highlighted above, there are already many projects which are run in the cultural sector which aim to combat loneliness. Beyond the cultural sector there are major national, as well as smaller local, charities who aim at targeting loneliness across all sectors of society. The Marmalade Trust is a charity with the specific aim to raise awareness of loneliness (The Marmalade Trust, 2022). Moreover, other charities target loneliness within their wider remit. These include Sense; The Cares Family; Mind; Age UK; The Befriending Networks; The Red Cross and the Jo Cox Foundation (Age UK, 2022; Befriending Networks, 2022; British Red Cross, 2022; Mind, 2022; Sense, 2022; The Cares Family, 2022; The Jo Cox Foundation, 2022). All of these organisations run initiatives to work with people experiencing loneliness. Many are involved in DCMS loneliness hub.

Some of the projects that they have run include art projects; singing for the mind; buddying schemes; holidays and gardening alongside working with the National Academy for Social Prescribing (National Academy for Social Prescribing, 2022). Age UK has also produced a loneliness heat map indicating the relative risk to loneliness across the country. Figure eight below shows an example area (Age UK, 2016). It states on this website that the data should be understood as risk only and not empirical evidence.
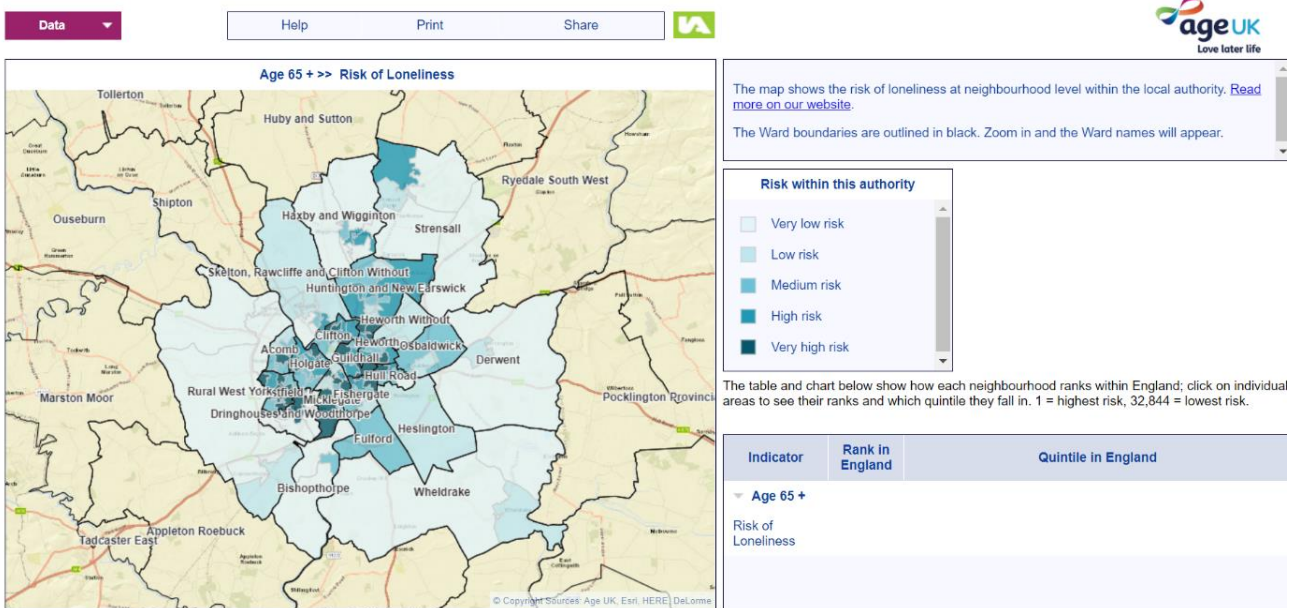
Figure 7: An example area from Age UK's loneliness heat map (Age UK, 2016).

These projects do not show an immediate heritage link. However, some projects take place in historic settings which enhances the impact they have (Historic England, 2020, pp.32-35). Or they may engage with historic items or history. Many include invoking a 'sense of the past' or 'nostalgia'. For example, a project run by Manchester Cares (part of The Cares Family) involved collating pictures or photographs from a person's past. This is a link to both a personal and a wider cultural, intangible heritage (Maddern, 2022). Historic England's work on the protection of cultural heritage could therefore bring valuable insight to such work. In turn the work of charities and organisations working on loneliness can benefit and demonstrate the value of cultural heritage.

Similarly, the current work with the Department for Transport to provide access to green spaces can have a heritage aspect. The aim of the project is to help provide better accessibility across society. Transport is important to enable people to access projects which may have cultural heritage links. It is also the case that sense of place and familiarity in landscape can all be considered elements of a person's cultural heritage (Historic England, 2020). Many of these projects are considering how to adapt green spaces, high streets, and meeting places. Whilst tangential, it is possible that Historic England's Heritage Action Zones and similar projects may have related aims.

Methodologies and Evaluation

A 2019 review paper identified several areas of weaknesses in the methodologies and evaluation of wellbeing projects (What Works Wellbeing, 2019b). These included the wide range of evidence used in current research with few robust methodological studies. This reduces the impact and demonstrable outcomes of such work. The review contained studies from a range of sites including visits to heritage assets (castles, stately homes etc) and museums to health care settings and educational outputs such as object handling sessions or volunteering. As this report, and many other papers note, evidence is often anecdotal (Everill, Bennett and Burnell, 2020). It identified a need to consider comparisons between different groups in society, particularly different socioeconomic groups, and a wider geographic range across the country. This is particularly important when considering loneliness projects as these groups are the most at-risk groups. Once again without robust evidence and evaluation, the demonstrable value of culture and heritage to help alleviate loneliness is weakened.

The positive benefits highlighted included a greater sense of belonging and identity; social connectivity; pride of place and empowerment through skills learnt and employability gained (Daykin et al., 2021; What Works Wellbeing, 2019b). Whilst wellbeing projects may not have loneliness as a specific aim, these are all factors which can decrease the risk of loneliness. Therefore, any project which targets these areas intrinsically help alleviate or prevent loneliness. This is especially true if they are working with at risk groups. In order to best showcase the value of heritage projects in targeting loneliness it is important that these outcomes are recognised as being positive contributions to various wellbeing aims.

Several organisations, including Historic England, have created frameworks to help design, implement and evaluate wellbeing projects. For example, What Works Wellbeing has put together a short guide to help measure loneliness for charities and social enterprises (What Works Wellbeing, 2019a). For heritage organisations, in a joint project between Historic England and Wessex Archaeology, an evaluative framework was created. This project also included working with local NHS and community groups. This allowed participants to consider several museum objects, engage with them and consider and discuss objects in group sessions. An evaluation framework was then created to allow a meaningful assessment of the wellbeing aims (Wessex Archaeology, 2021; The Museum Association also created another similar framework specifically for Museum projects Museums Association, 2017). Once again, this project demonstrates the success of multi-agency collaboration. The methodology also provides a template for future projects to embed, assess and demonstrate wellbeing value, including combatting loneliness.

When considering measuring loneliness there are many measurement scales that could be used. The British Red Cross suggests using the De Jong Gierveld Scale or the UCLA loneliness scale (figs twelve and thirteen, below). Both of these scales do not explicitly mention loneliness. This can help get a more robust picture of a person's experiences due to the stigma around expressing a feeling of loneliness (Aiden, 2016). Everill, Bennett and Burnell employed three different measures to evaluate Operation Nightingale. These were Patient Health Questionnaire-8 to measure depression; Generalised Anxiety Disorder-7 to

measure anxiety and the Warwick Edinburgh Mental Wellbeing Scale to measure mental wellbeing (Everill, Bennett and Burnell, 2020, Tennant et al., 2007) for discussion on the efficacy of the method. These are all rooted in psychological methods of evaluation. Utilising one of these as a method of evaluation could prove a useful way for future wellbeing projects to demonstrate robust findings. The Campaign to end Loneliness provides a short guide on considerations for the best scale for a project (Campaign to end Loneliness, 2015). Ensuring that a strong evaluation using a proven scale would also ensure that projects are comparable to other loneliness research.

UCLA loneliness scale (version 3)

A 20-item scale designed to measure one's subjective feelings of loneliness as well as feelings of social isolation.

Participants rate each item as O ("I often feel this way"), S ("I sometimes feel this way"), R ("I rarely feel this way") or N ("I never feel this way").

Scoring: O=3, S=2, R=1, N=0

Total scores range from 0, meaning never lonely, to 60, a high degree of loneliness.

1.	I am unhappy doing so many things alone	O	S	R	N
2.	I have nobody to talk to	O	S	R	N
3.	I cannot tolerate being so alone	O	S	R	N
4.	I lack companionship	O	S	R	N
5.	I feel as if nobody really understands me	O	S	R	N
6.	I find myself waiting for people to call or write	O	S	R	N
7.	There is no one I can turn to	O	S	R	N
8.	I am no longer close to anyone	O	S	R	N
9.	My interests and ideas are not shared by those around me	O	S	R	N
10.	I feel left out	O	S	R	N
11.	I feel completely alone	O	S	R	N
12.	I am unable to reach out and communicate with those around me	O	S	R	N
13.	My social relationships are superficial	O	S	R	N
14.	I feel starved for company	O	S	R	N
15.	No one really knows me well	O	S	R	N
16.	I feel isolated from others	O	S	R	N
17.	I am unhappy being so withdrawn	O	S	R	N
18.	It is difficult for me to make friends	O	S	R	N
19.	I feel shut out and excluded by others	O	S	R	N
20.	People are around me but not with me	O	S	R	N

Figure 8: The UCLA scale to measure loneliness (Aiden, 2016).

When considering evaluating projects, long term impact must also be considered. Whilst long term positive impacts are often used as evaluation points, potential negatives should also be included. Participants mention concern over projects ending leading to a return to loneliness. Future accessibility should be thought about at the outset. This includes a

reliance on technology or if participants do not have the skills or resources needed for future engagement (Daykin et al., 2021). This was also highlighted in the evaluation paper for Operation Nightingale when veterans were concerned about returning to 'normal' life without the support of the project (Everill, Bennett and Burnell, 2020).

The British Red Cross has also undertaken much research into loneliness and evaluating their own work. One example is their 'Connecting Communities' scheme was part of the social prescribing network to re-connect people back to their local communities by signposting them to local groups and activities as well as providing one-to-one support. Once again, using the UCLA scale, they found that the personal level of support helped improve loneliness outcomes. 69% of participants were less lonely after engaging with the British Red Cross. This was also linked to age: those who were younger were more likely to have better outcomes than those who were older. Having just one interaction improved loneliness but there was no difference between 2 and 12 interactions. However, the end of support- if no future plan was in place – led to a return of anxiety for participants. This suggests that even short-term projects can make a significant difference, but these must be suitably planned. The evaluation also showed that the project had a social return of £2.04 for every £1 spent. These figures must be taken in the context of 2019. However, the financial and social return of social prescribing for loneliness is evident. These results show that ensuring tailored support working with local groups is important: one size does not fit all. Moreover, whilst evaluation is key, improvement across different groups will be at different rates. Loneliness arises from complex needs and multi-agency work and guidance is vital. Different outcomes must be expected, and this should be considered when designing projects (British Red Cross, 2019b).

De Jong Gierveld loneliness scales

Items of the 11-Item and 6-Item (green) De Jong Gierveld Loneliness Scales

Items	Emotional subscale	Social subscale
1. There is always someone I can talk to about my day-to-day problems		X
2. I miss having a really close friend	X	
3. I experience a general sense of emptiness	X	
4. There are plenty of people I can rely on when I have problems		X
5. I miss the pleasure of the company of others	X	
6. I find my circle of friends and acquaintances too limited	X	
7. There are many people I can trust completely		X
8. There are enough people I feel close to		X
9. I miss having people around	X	
10. I often feel rejected	X	
11. I can call on my friends whenever I need them		X

The 11-item De Jong Gierveld Loneliness Scale has proved to be a valid and reliable measurement instrument for overall, emotional, and social loneliness, while the 6-item scale may prove more suitable in large surveys.

Figure 9: The De Jong Giervald Loneliness Scale (Aiden, 2016).

As discussed above the impact of the pandemic was profound. However, the evidential review from the government's Covid-19 loneliness fund has shown the positive impact cultural engagement has had. The schemes discussed in this report were Alzheimer's Society, British Red Cross, Carers UK, Home-Start UK, RNIB, and SSAFA. These projects provided a variety support to at risk groups ranging from befriending schemes, telephone calls, online social meetings and doorstep deliveries of groceries or medication (Dinos, 2021). Once again, whilst some of these clearly have no link to heritage, some include cultural heritage links. Social group meetings may include reminiscing or the sharing of life events. Similarly, such schemes could provide a blueprint for more overt heritage schemes such as online local history groups.

Figures 10 and 11 show the decrease in people reporting 'feeling lonely often' after being involved in projects funded through Covid-19 scheme compared to the baseline before the activity took place (Dinos, 2021). Whilst still a small sample, they clearly show the value of such activities. This review does note that the level of loneliness for the service users of these funds remained higher than the general population, highlighting the vulnerable nature of at-risk groups.

However, the figures do highlight that even in a time of increased levels of loneliness, undertaking cultural activities can provide positive engagements and have the potential to alleviate loneliness.

Table 4:6	Changes in experiences of loneliness over time: Baseline to follow up two				
Question	Timepoint	Some of the time to hardly ever %	Often %	Base	P
How often do you feel lonely?	Baseline	73	27	1,748	0.000
	Follow up 2	84	16		
How often do you lack companionship?	Baseline	68	32	1,293	0.000
	Follow up 2	80	20		
How often do you feel out?	Baseline	70	30	1,268	0.000
	Follow up 2	85	15		
How often do you feel isolated from others?	Baseline	59	41	1,290	0.000
	Follow up 2	76	24		

Base: Includes data from service users with data at both baseline and follow up time point 2. "How often do you feeling lonely" includes data from three grant holders, and the other two questions include data from two.

Figure 10: Showing the results from the Covid-19 Loneliness Fund Review (Dinos, 2021).

Figure 4:1 How often do you feel lonely?

Values shown (% axis):

	Baseline	Follow up 1	Follow up 2
Hardly ever	23	25	23
Some of the time	51	57	61
Often	27	17	16

■ Hardly ever   ■ Some of the time   ■ Often

Base: includes all seven grant holders at baseline (3,561) and follow up 1 (2,126), but only three grant holders at follow up 2 (1,893).
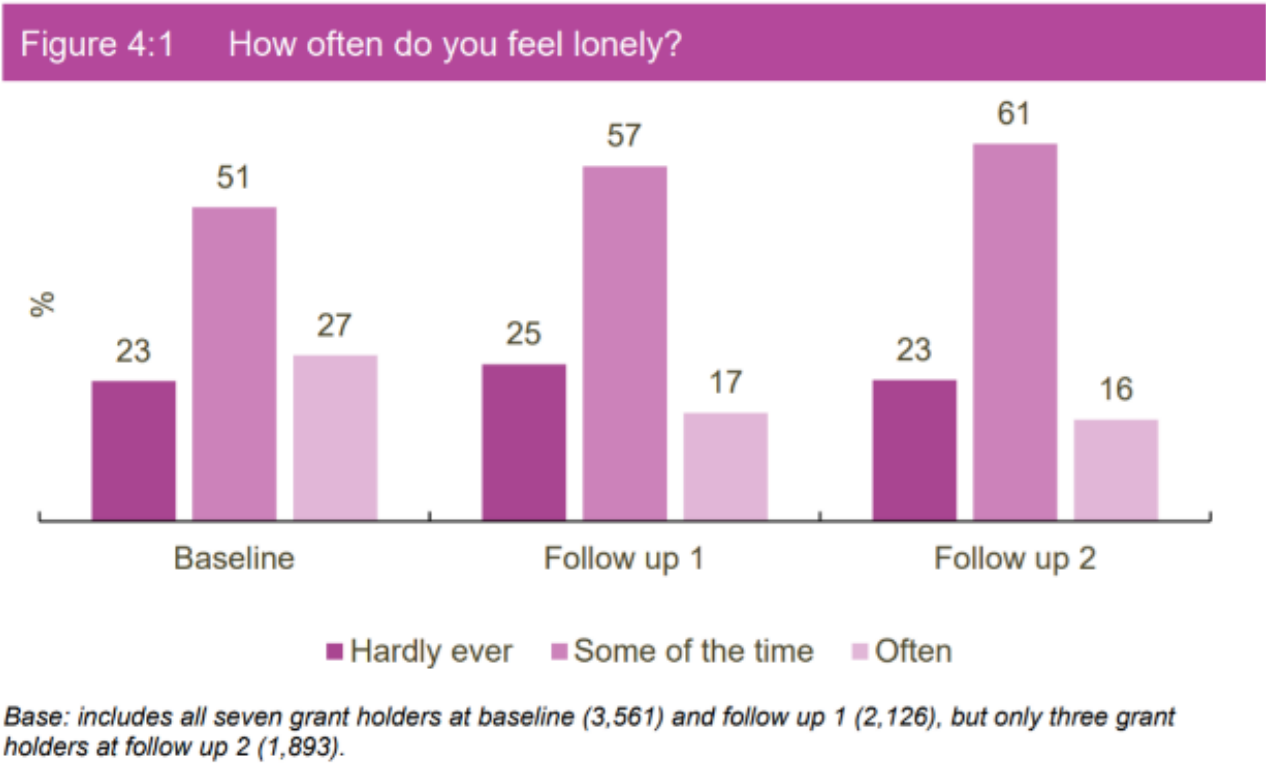
Figure 11: Showing the results from the Covid-19 Loneliness Fund Review (Dinos, 2021).

However, the figures do highlight that even in a time of increased levels of loneliness, undertaking cultural activities can provide positive engagements and have the potential to alleviate loneliness.

Alongside the pre-existing measurements suggested by cultural organisations, this method-ology also provides a useful way to consider impact for other wellbeing projects aimed at combatting loneliness going forward. This is potentially a useful way to showcase value, as future work can be directly compared to projects which have already been measured by DCMS criteria. It must be considered alongside the other loneliness scales and the stigma around loneliness.

Historic England moving forward

Historic England's wellbeing and heritage strategy already aims to promote combatting loneliness (Historic England, 2022b). As seen above, the wellbeing project run with Wessex Archaeology helped create a methodological approach and evaluation framework. Similarly, the strategy framework going forward lists loneliness as an important factor for the wellbeing and inclusion team (Monckton, 2021a; Monckton 2021b; Reilly, Monckton and Nolan, 2018).

Historic England already has wide-reaching wellbeing projects. Ways to combat loneliness are already being met within these. Promoting these and embedding these aims at the beginning of any future projects would further highlight the important role of heritage in combatting loneliness.

Key considerations moving forward could include:

- Recognising that loneliness outcomes can be hidden. Prevention of social isolation, improving a sense of identity and belonging, pride of place and enabling skills are all preventative measures against chronic loneliness even if the participants do experience loneliness when they take part. Many of the wellbeing projects Historic England are currently engaged with can be seen in this light. This is particularly important when considering the aims of the NHS to prevent rather than just react.

- Heritage outcomes can be hidden. Many of the projects highlighted above contain a sense of the past. This can be described as cultural or intangible heritage. Even if these do not take place in heritage sites, they are heritage interactions. Working with sector partners can enhance the ways that Historic England can enable their work on cultural heritage to help alleviate loneliness. Providing good, clear definitions of 'heritage' to non-heritage organisations is key.

- Cross-agency work is crucial. As the demand for help increases, there is a need for enhanced collaboration. This can already be seen in social prescribing work (SQW, 2020). Lessons from this can be used to show how Historic England can work with both sector partners and wider organisations to deliver meaningful work.

Appendix: Case Studies

Kirkham High Street Heritage Action Zone

What

As part of the High Street Heritage Action Zone projects, the regeneration of Kirkham High Street aims to physically rejuvenate the high-street whilst making it more accessible and create a sense of local pride in the identity and heritage of Kirkham. A part of this programme is to improve the health and wellbeing of Kirkham residents through engagement with heritage projects, including social prescribing projects (Chatterjee and Shearn 2022, Kirkham Futures 2022; Historic England 2022a).

Who

Historic England, Flyde Borough Council, Kirkham Town Council, Lancashire County Council, University of Central Lancashire and Phoenix Rising.

When

Since 2019.

Figure 12: The Cotton heritage dance performance by the About Time Dance Company in Kirkham October 2021. © Jenny Reeves (About Time Dance Company).

Aims

This project is part of the wider physical rejuvenation of Kirkham High Street. This project has the aims to restore and re-purpose key buildings; improve the visual appearance of shops and streets; introduce new and more uses including further employment, training opportunities and diverse leisure offers and ensure high quality urban design to ensure the centre is more attractive to families, shoppers and visitors. A key strand in these aims is to ensure the history and heritage is at the core of this regeneration. A social prescribing project has been set up to tackle through engagement with these heritage regeneration projects specifically tackling those with one or more long term health condition; loneliness; people who need mental health support and people with complex social needs.

Evaluation

Currently a feasibility study has been undertaken led by Phoenix Rising. This involved undertaking a series of pilot activities with local partners and working the NHS services. Activities included mindfulness heritage walks; art and cooking classes; horticultural workshops and physical activities within or inspired by the local historic environment. The study also worked closely local heritage organisations such as local history museums and archives and devised schemes such as digitising resources as part of the ongoing wellbeing project. This study identified four local themes which could be used to plan wellbeing and heritage events.

Figure 13: Alison Gough, Mandala CIC leads an introduction to mindful heritage walking for the Phoenix Rising pilot programme in Kirkham 2021. © Sue Flowers.

Link to Historic England Work

This project is being undertaken jointly with Historic England and has had direct input from Dr Linda Monckton and Dr Desi Gradinarova in the Wellbeing and Inclusion Strategy department.

This project very clearly shows the clear opportunities for partnerships across Historic England (staff working on HSHAZ and wellbeing strategy) and with outside agencies in delivering social prescribing schemes.

This successful example of local authority, national agency, academics and health services reflects the possibilities of heritage engagement in improving wellbeing outcomes and in particular combatting loneliness.

Blenheim Palace Natural Health Service: Social Prescribing

What

Blenheim Palace have launched a wider wellbeing strategy linked to their land strategy. Their social prescribing scheme was a six-week project which opened up walks in the grounds and mindfulness activities on the estate of Blenheim Palace. Focussing on the estate of Blenheim Palace, it utilises the natural environment as part of an 'Internet of Things' project to promote wellbeing. This means physical objects which are connected to the internet which allow data collecting and remote sharing. Examples include 'smart' home technology or wearable technology such as Fitbits (Blenheim Estate 2022b).

Figure 14: Image of a Walk for Wellness in the Blenheim Palace grounds. © Blenheim palace

Who

The Blenheim Palace Estate Trust; Aspire - an Oxfordshire based charity focussing on homelessness and disadvantaged individuals; The University of Oxford and The Eden Project. It was funded by Research England.

When

Since 2020.

Aims

Since 2020. The pilot had two distinct aims:

- To improve participants overall wellbeing and physical activity due to the Covid-19 pandemic and lockdowns.
- To assess whether an Internet of Things approach can be a feasible approach with social prescribing.
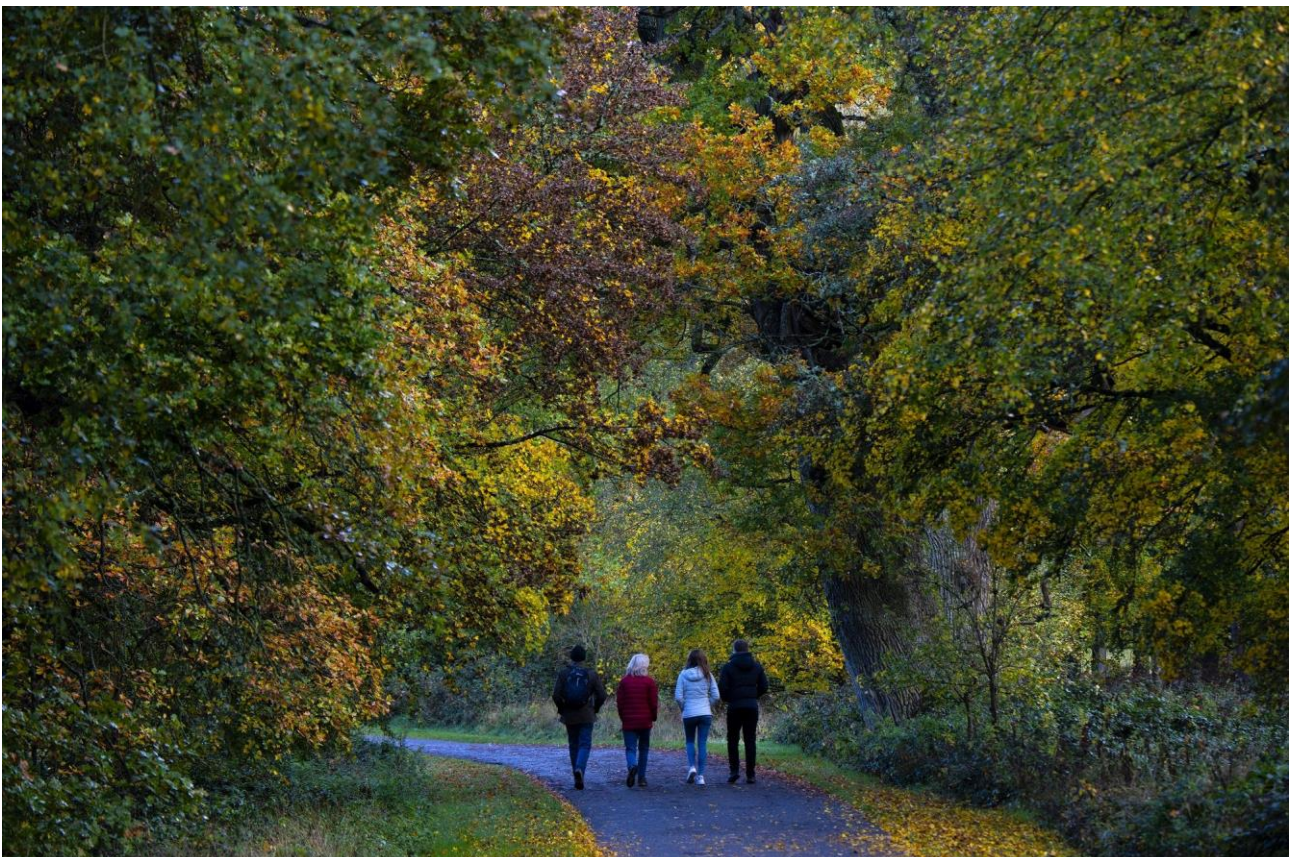

Figure 15: Image of a Walk for Wellness in the Blenheim Palace grounds. © Blenheim palace

Evaluation

The pilot study used Fitbits and participant surveys pre and post activity to measure wellbeing outcomes. Data collected from Fitbits was gathered and sent to a database remotely. Participants were also asked to complete an ONS4 survey at the beginning and end of the pilot as well as provide verbal feedback at the end of each session. This showed an increase in physical activity and overall wellbeing. Overall, participants reported a 12% increase in step count, a 20% increase in life satisfaction, an 8% increase in happiness and a 19% reduction in anxiety (Blenheim Estate 2022a).

Links to Historic England work

This project was more specifically to the natural landscape and nature. However, it took place within the historic environment. This landscape is both place of history and a place which is familiar to local residents. It therefore has clear intangible heritage values. The use of social prescribing also reflects the work of Historic England on similar projects. This research shows the clear value of social prescribing. Their methodology, including the internet of things, and evaluation techniques could be possibilities to be replicated.

HumanKind at Calke Abbey

What

This project was a series of installations at Calke Abbey charting the history of mental illness within the owners and residents of Calke Abbey. Through a series of exhibits, visitors were encouraged to consider how loneliness can manifest itself and how people can combat it within the present day. Installations included a mental outdoor frame based on the childhood drawings of the 'recluse' Baronet in which visitors could sit. Videos in the Hall charted the life of the family reflecting how they were portrayed during their lifetimes and how a modern audience might understand them. In the servants' area, exhibits included questions surrounding living away from home and working in such an environment (National Trust and The University of Leicester, 2019).

Who

The National Trust at Calke Abbey and Research Centre for Museums and Galleries at The University of Leicester.

When

2018-2020.

Aims

The aim of the project was to show how loneliness can affect anyone and to consider how heritage engagement can help highlight the stigma around the issue. It aimed to approach

this project through engagement with staff, volunteers and visitors alongside thorough academic research. It also hoped to promote better engagement with issue amongst visitors.

Evaluation

An evaluation undertaken by The University of Leicester utilised several methods of evaluating the success of the initial stages of the project. The purpose of the evaluation was to consider whether the project had encouraged reflection around loneliness and self-isolation and secondly whether it had led to changing working practices at the National Trust, especially at Calke Abbey. This was evaluated through comment cards left by visitors, interviews, visitor feedback generally gathered online, staff self-evaluation and feedback gathered from staff and volunteer briefings. The results show that sites such as Calke Abbey could play a significant role in these conversations. Visitors overall had positive feedback, with 81% leaving positive feedback. Many commented that they were pleased to have a place to reflect on these issues and 33.7% stated that they felt that addressing these issues was highly relevant for organisations such as the National Trust. Qualitative evidence went on to expand to show that many reflected that an environment such as Calke Abbey was an appropriate setting to allow space for people to reflect. Similarly, staff and volunteers had mostly positive feedback of cross-departmental and agency approach to the project (MacLeod et al., 2020).

Figure 16: Installation of HumanKind. © Suzanne Macleod.

Links to Historic England

This project highlights how the historic environment can be used to engage visitors with ideas of loneliness. In this instance the historic environment was used to explain loneliness whilst at the same time providing a mechanism through which modern day loneliness could be combatted. The evaluation shows a good level of support for heritage organisations to engage in these types of projects.

Figure 17: Installation of HumanKind. © Suzanne Macleod.

When

2018-2020.

Aims

The aim of the project was to show how loneliness can affect anyone and to consider how heritage engagement can help highlight the stigma around the issue. It aimed to approach this project through engagement with staff, volunteers and visitors alongside thorough academic research. It also hoped to promote better engagement with issue amongst visitors.

Evaluation

An evaluation undertaken by The University of Leicester utilised several methods of evaluating the success of the initial stages of the project. The purpose of the evaluation was to consider whether the project had encouraged reflection around loneliness and self-isolation and secondly whether it had led to changing working practices at the National Trust, especially at Calke Abbey. This was evaluated through comment cards left by visitors, interviews, visitor feedback generally gathered online, staff self-evaluation and feedback gathered from staff and volunteer briefings. The results show that sites such as Calke Abbey could play a significant role in these conversations. Visitors overall had positive feedback, with 81% leaving positive feedback. Many commented that they were pleased to have a place to reflect on these issues and 33.7% stated that they felt that addressing these issues was highly relevant for organisations such as the National Trust. Qualitative evidence went on to expand to show that many reflected that an environment such as Calke Abbey was an appropriate setting to allow space for people to reflect. Similarly, staff and volunteers had mostly positive feedback of cross-departmental and agency approach to the project (MacLeod et al., 2020).
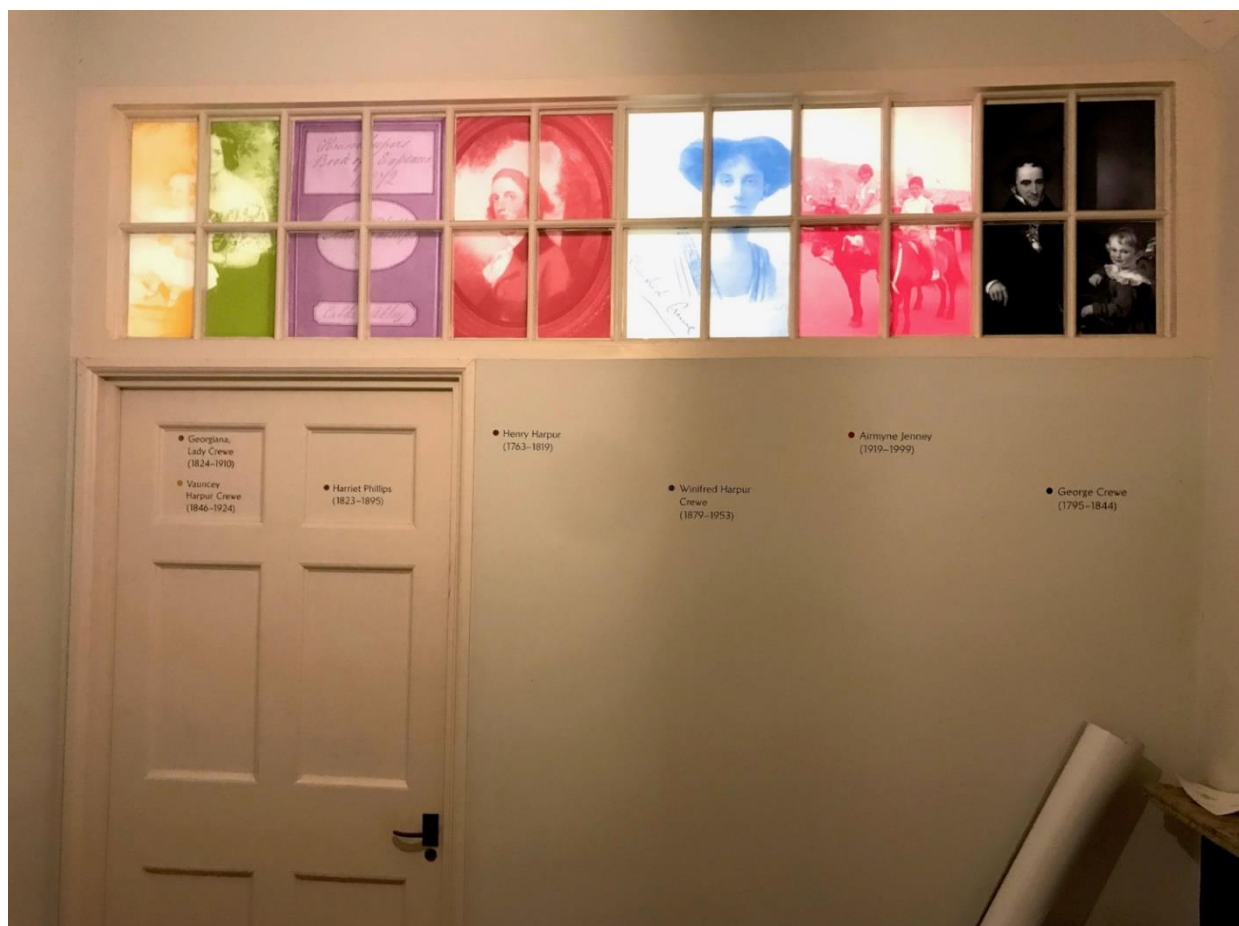
Links to Historic England

This project highlights how the historic environment can be used to engage visitors with ideas of loneliness. In this instance the historic environment was used to explain loneliness whilst at the same time providing a mechanism through which modern day loneliness could be combatted. The evaluation shows a good level of support for heritage organisations to engage in these types of projects.

Local History Cafes

What

This project was begun by a Midlands charity Crafting Relations, which aims at bringing people together through creative activities. This particular project was aimed at over 50s. Visits were arranged to sites of local history interest with a café. A talk on local history is given followed by a discussion. Sometimes another activity takes place such as object handling or visiting an exhibition outside the café (Crafting Relationships, 2022).

Who

Crafting Relations, a local art charity; local partners running heritage sites and cafes; De Montford University.

When

Since 2016. These projects had to change significantly during the lockdowns and moved online. These are starting up again as restrictions have ended although they have taken a different shape. Local History Cafes are also in the process of setting themselves up as an independent charity from Crafting Relations.

Figure 18: Participants at the Sir John Moore Foundation's Local History Café from Brown et al. *Local History Cafés: An Evaluation of the Initial Programme* (2019).

Aims

This project's aims were to combat social isolation and loneliness within the participants through a heritage and wellbeing programme. They also aimed to help heritage and community organisations learn new skills to address these issues and support a cross-community and multi-agency approach across sectors when considering wellbeing issues.

Figure 19: Participants from Erewash Museum's Local History Café from Brown et al. *Local History Cafés: An Evaluation of the Initial Programme* (2019).

Evaluation

An evaluation report was undertaken by De Montford University in 2019. This is part on an ongoing evaluation of the project. This report undertook pre and post engagement surveys which had 40 responses, alongside qualitative date from interviews, telephone conversations, a focus group and online data from the programme's website. The questionnaires used the De Jong Gierveld 6-Item Loneliness Scale, the UCLA 3-Item Loneliness Scale and the WHOQOL-BREF quality of life scale. Both the quantitative and qualitative date was inductively analysed for emerging themes. The researchers found that whilst the participants did not have significant increase in quality of life or loneliness there was a clear potential for the cafes to combat this. In particular when social loneliness, as opposed to emotional loneliness, was isolated this did show an increase. It was also noted that the cafes provided a safe, inclusive space. It was also particularly important to have the local aspect; both for local interest but also as a practical access consideration. Going forward the report found that better advertising for the hardest to reach people who might in most need would improve the service. In particular they wish to work closely as a social

prescribing scheme. Other areas identified for improvement include group dynamic planning, improving diversity (this could be achieved through social prescribing) and long-term planning especially for volunteers. Overall, the report found that the local history element of the cafes provided a 'hook' for people to meet and socialise, combatting loneliness and social isolation (Brown et al., 2019).

Links to Historic England

This project shows a clear potential for links to the historic environment and community engagement in local history. The desire to create a social prescribing scheme with local GPs again links to the existing work of Historic England. This project is perhaps not fulfilling its full potential as yet. However, it shows the opportunity to expand and create a successful heritage and wellbeing scheme.

Bibliography and References

Aiden, Hardeep, 2016. *ISOLATION AND LONELINESS: An overview of the literature* [Online]. British Red Cross. Available from: *file:///C:/Users/jessc/Downloads/Co-Op-Isolation-Loneliness-overview.pdf* [Accessed 21st March 2022].

Age UK, 2016. *Age UK Loneliness Heat Map York* [Online]. Age UK. Available from: *http://data.ageuk.org.uk/loneliness-maps/england-2016/york/* [Accessed 6th March 2022].

Age UK, 2022. *Age UK* [Online]. Age UK. Available from: *https://www.ageuk.org.uk/* [Accessed 6th March 2022].

Alexendra Palace, 2021. *Rhythm Stick at Alexandra Palace* [Online]. Ally Pally. Available from: *https://www.alexandrapalace.com/blog/rhythm-stick/* [Accessed 4th March 2022].

Ashford100Buildings, 2020. *Finding the Past in the Present* [Online]. Ashford100Buildings. Available from: *https://ashford100buildings.co.uk/* [Accessed 7th February 2022].

BBC, 2018. *BBC Loneliness Experiment* [Online]. BBC. Available from: *https://www.bbc.co.uk/mediacentre/latestnews/2018/loneliest-age-group-radio-4* [Accessed 6th Macrh 2022].

Befriending Networks, 2022. *Befriending Networks* [Online]. Befriending Networks. Available from: *https://www.befriending.co.uk/* [Accessed 6th March 2022].

Blenheim Estate, 2022a. *The University of Oxford & Blenheim Innovation Partnership Innovation for Health and Wellbeing* [Online]. Blenheim Estate. Available from *https://www.blenheimestate.com/assets/files/downloads/estate/innovations-project.pdf.* [Accessed 27th April 2022].

Blenheim Estate, 2022b. *We've Piloted a New Social Prescribing Scheme* [Online]. Blenheim Estate. Available from: *https://www.blenheimestate.com/news/social-prescription-programme.html* [Accessed 27th April 2022].

Breaking Ground Heritage, 2022. *Breaking Ground Heritage* [Online]. Breaking Ground Heritage. Available from: *https://breakinggroundheritage.org.uk/* [Accessed 21st March 2022].

British Red Cross, 2019a. *Fulfilling the promise: How social prescribing can most effectively tackle loneliness* [Online]. British Red Cross. Available from: *file:///C:/Users/jessc/Downloads/Fulfilling-the-promise-social-prescribing-and-loneliness%20(1).pdf* [Accessed 21st March 2022].

British Red Cross, 2019b. *Tackling Loneliness and Isolation: Findings from the evaluation of our Connecting Communities service* [Online]. British Red Cross. Available from: *file:///C:/Users/jessc/Downloads/Tackling-loneliness-and-isolation-connecting-communities.pdf* [Accessed 21st March 2022].

British Red Cross, 2022. *Adult wellbeing and loneliness resources* [Online]. British Red Cross. Available from: *https://www.redcross.org.uk/get-help/get-help-with-loneliness/support-and-resources-for-adults* [Accessed 6th March 2022].

Brown, Jayne, Brown, Katherine, Clayton, David, Mcgill, George, Padley, Wendy, De Vries, Kay, 2019. *Local History Cafes: An Evaluation of the Initial Programme.* De Montford University. Available from *https://static1.squarespace.com/static/5f81c38f8d651a23e8f86a20/t/5fce1f95f94b6402b2429f84/1607344033145/Local+History+cafe+initial+evaluation+report+Sept+2019.pdf* [Accessed 27th April 2022].

Campaign to end Loneliness 2015. *MEASURING YOUR IMPACT ON LONELINESS IN LATER LIFE* [Online]. Campaign to end Loneliness. Available from: *https://www.campaigntoendloneliness.org/wp-content/uploads/Loneliness-Measurement-Guidance1.pdf* [Accessed 17th March 2022].

Campaign to End Loneliness, 2020. *Psychology of Loneliness* [Online]. Campaign to End Loneliness. Available from: *https://www.campaigntoendloneliness.org/wp-content/uploads/Psychology_of_Loneliness_FINAL_REPORT.pdf* [Accessed 1st March 2022].

Champan, Vicki. 2018. *Ringing Remembers* [Online]. The Central Council of Church Bell Ringers Available from: *https://cccbr.org.uk/bellringing/ringing-remembers/* [Accessed 4th March 2022].

Chatterjee, Andrew and Shearn, Helen, 2022. *Kirkham: Forging a Heritage Programme as a Bridge to Wellbeing.* [Online]. Historic England. Available from *https://historicengland.org.uk/whats-new/research/kirkham-forging-a-heritage-programme-as-a-bridge-to-wellbeing/.* [Accessed 27th April 2022].

Crafting Relationships, 2022. *Core Community Initiatives.* [Online} Crating Relationships. Available from: *https://www.craftingrelationships.co.uk/work/communityinitiatives.* [Accessed 27th April 2022].

Culture Health and Wellbeing Alliance, 2020. *Case studies: How have culture and creativity been supporting people in health, care and other institutions during the Covid-19 pandemic?: The History of Ashford in 100 Buildings* [Online]. Culture Health and Wellbeing Alliance. Available from: *https://www.culturehealthandwellbeing.org.uk/sites/default/files/2021-01/Case%20study%20-%20Funder%20Films_0.pdf* [Accessed 7th February 2022].

Daykin, N., Mansfield, L., Meads, C., Gray, K., Golding, A., Tomlinson, A. and Victor, C., 2021. The role of social capital in participatory arts for wellbeing: findings from a qualitative systematic review. *Arts Health,* 13(2), pp. 134-157.

DCMS, 2020. *Loneliness: Every Mind Matters* [Online]. DCMS. Available from: *https://campaignresources.phe.gov.uk/resources/campaigns/111/resources/6132* [Accessed 6th March 2022].

DCMS, 2021a. *Emerging Together: the Tackling Loneliness Network Action Plan* [Online]. DCMS. Available from: *https://www.gov.uk/government/publications/emerging-together-the-tackling-loneliness-network-action-plan/emerging-together-the-tackling-loneliness-network-action-plan#the-tackling-loneliness-network* [Accessed 1st March 2022].

DCMS, 2021b. *Government's work on tackling loneliness* [Online]. DCMS. Available from: *https://www.gov.uk/government/collections/governments-work-on-tackling-loneliness* [Accessed 7th February 2022].

DCMS, 2021c. *Loneliness Engagement Fund* [Online]. DCMS. Available from: *https://www.gov.uk/government/publications/loneliness-engagement-fund* [Accessed 7th February 2022].

DCMS, 2022a. *Tackling loneliness evidence review* [Online]. DCMS. Available from: *https://www.gov.uk/government/publications/tackling-loneliness-evidence-review* [Accessed 4th March 2022].

DCMS, 2022b. *Tackling loneliness with transport fund* [Online]. DCMS. Available from: *https://www.gov.uk/government/publications/tackling-loneliness-with-transport-fund* [Accessed 4th March 2022].

Dementia Together, 2022. *Sporting Memories Group* [Online]. Demetia Together Suffolk. Available from: *https://www.dementia-together.com/place/116?BackEnabled=True* [Accessed 4th March 2022].

Dinic, Milan, 2021. *Lockdown blues: The impact of coronavirus on loneliness in Britain* [Online]. YouGov. Available from: *https://yougov.co.uk/topics/lifestyle/articles-reports/2021/02/04/lockdown-blues-impact-coronavirus-loneliness-brita* [Accessed 3rd March 2020].

Dinos, Alex Martin; Joe Crowley; Crescenzo Pinto; Frances Shipsey; Imogen Martin; Karen Windle; Sokratis, 2021. *Covid-19 Loneliness Fund: A process evaluation* [Online]. NatCen for DCMS. Available from: *https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1010052/Covid-19_Loneliness_Fund_Evaluation__accessible_version_.pdf* [Accessed 7th February 2022].

Everill, Paul, Bennett, Richard and Burnell, Karen, 2020. Dig in: an evaluation of the role of archaeological fieldwork for the improved wellbeing of military veterans. *Antiquity,* 94(373), pp. 212-227.

Hawkley, L. C. and Cacioppo, J. T., 2010. Loneliness matters: a theoretical and empirical review of consequences and mechanisms. *Ann Behav Med,* 40(2), pp. 218-227.

Historic England, 2020. *Heritage and Society* [Online]. Historic England. Available from: *https://historicengland.org.uk/content/heritage-counts/pub/2020/heritage-and-society-2020/* [Accessed 4th March 2022].

Historic England, 2021. *Wellbeing and Heritage Case Studies* [Online]. Historic England. Available from: *https://historicengland.org.uk/research/current/social-and-economic-research/wellbeing/wellbeing-and-heritage-case-studies/* [Accessed 21st March 2022].

Historic England, 2022a. *Kirkham High Street Heritage Action Zone* [Online]. Historic England. Available from: *https://historicengland.org.uk/services-skills/heritage-action-zones/kirkham/* [Accessed 27th April 2022].

Historic England, 2022b. *Wellbeing* [Online]. Historic England. Available from: *https://historicengland.org.uk/research/current/social-and-economic-research/wellbeing/* [Accessed 6th March 2022].

Ingram, Alison, 2022. Improving Digital Inclusion and Using Hybrid Models to decrease Loneliness: Age UK. *Tackling Loneliness Digital Conference*, 26th January 2022, Online.

Jones, Dan, Jopling, Kate and Kharicha, Kalpa, 2021. *Loneliness beyond Covid-19.* (3rd March 2022).Campaign to End Loneliness Available from: *https://www.campaigntoendloneliness.org/wp-content/uploads/Loneliness-beyond-Covid-19-July-2021.pdf* [Accessed 6th March 2022].

Leonnet, Kristina, 2022. Improving Digital Inclusion and Using Hybrid Models to decrease Loneliness: Centre for Ageing Better. *Tackling Loneliness Digital Conference*, 26th January 2022, Online.

Live Well Make Art, 2020. *Live Well Make Art* [Online]. Live Well Make Art. Available from: *https://livewellmakeart.wordpress.com/* [Accessed 7th February 2022].

Local History Cafes, 2020. *Local History Cafes: Crafting Together* [Online]. Local History Cafes. Available from: *https://localhistorycafe.tumblr.com/* [Accessed 4th March 2022].

Maddern, Hannah, 2022. Improving Digital Inclusion and Using Hybrid Models to decrease Loneliness: Manchester Cares. *Tackling Loneliness Digital Conference*, 26th January 2022, Online.

MacLeod, Suzanne, Thornhill, Alison, Dodd, Jocelyn, Sandell, Richard, Plumb, Sarah, Brouwer Ceciel and Cuzzola Cesare, 2020. *Isolation and loneliness – opening up new stories and interpretive experiences at Calke Abbey*. University of Leicester. Available from: *https://le.ac.uk/rcmg/publications* [Accessed 27th April 2022].

Mind, 2022. *Mind* [Online]. Mind. Available from: *https://www.mind.org.uk/* [Accessed 6th March 2022].

Monckton, Linda, 2021a. *Wellbeing: Participation and Engagement* [Online].Historic England. Available from: *https://historicengland.org.uk/research/current/social-and-economic-research/wellbeing/participation-and-engagement/* [Accessed 7th February 2022].

Monckton, Linda, 2021b. *Wellbeing and Social Prescribing* [Online]. Historic England. Available from: *https://historicengland.org.uk/research/current/social-and-economic-research/wellbeing/wellbeing-and-social-prescribing/* [Accessed 21st March 2022].

Museums Association, 2017. *Measuring Socially Engaged Practice: A Practical Toolkit for Museums* [Online]. Museums Association. Available from: *https://ma-production.ams3.digitaloceanspaces.com/app/uploads/2020/06/18145449/19032018-measuring-socially-engaged-practice-19.pdf* [Accessed 7th February 2022].

Museums Association, 2020. *Glasgow Museums* [Online]. Museums Association. Available from: *https://www.museumsassociation.org/campaigns/museums-change-lives/enhancing-health-and-wellbeing/glasgow-museums/* [Accessed 7th February 2022].

Museums Association, 2022. *Holburne Museum, Bath* [Online]. Museums Association. Available from: *https://www.museumsassociation.org/campaigns/museums-change-lives/enhancing-health-and-wellbeing/holburne/* [Accessed 7th February 2022].

National Academy for Social Prescribing, 2022. *National Academy for Social Prescribing* [Online]. National Academy for Social Prescribing. Available from: *https://socialprescribingacademy.org.uk/* [Accessed 6th March 2022].

National Trust and The University of Leicester, 2019. *HumanKind* [Online]. National Trust and The University of Leicester. Available from: *https://humankind.le.ac.uk/* [Accessed 7th February 2022].

NHS, 2019. *The NHS Long Term Plan* [Online]. NHS. Available from: *https://www.longtermplan.nhs.uk/wp-content/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf* [Accessed 7th February 2022].

NHS, 2022. *Social Prescribing* [Online]. NHS. Available from: *https://www.england.nhs.uk/personalisedcare/social-prescribing/* [Accessed 6th March 2022].

Reilly, Sarah, Monckton, Linda and Nolan, Claire, 2018. *Wellbeing and the Historic Environment*. Historic England. Available from: *https://historicengland.org.uk/images-books/publications/wellbeing-and-the-historic-environment/wellbeing-and-historic-environment/* [Accessed 25th August 2021].

Rowland, Mark, 2022. Reaching out to Young People at Particular Risk of Loneliness: Mental Health Foundation. *Tackling Loneliness Digital Conference*, 26th January 2022, Online.

Salway, S., Such, E., Preston, L., Booth, A., Zubair, M., Victor, C. and Raghavan, R., 2020. Reducing loneliness among migrant and ethnic minority people: a participatory evidence synthesis. *Public Health Reseach*, 8(10).

Salway, Sarah, Such, Elizabeth, Preston, Louise, Booth, Andrew, Baz, Sarah, Zubair, Maria, Victor, Christina and Raghavan, Raghu, 2021. *Reducing loneliness among migrant and eth-*

nic minority people [Online]. The University of Sheffield. Available from: *https://tacklinglone-linesshub.org/wp-content/uploads/2021/12/Reducing-isolation-loneliness-among-migrant-and-ethnic-miority-people-TOOLKIT.pdf* [Accessed 7th February 2022].

Sense, 2022. *Sense* [Online]. Sense. Available from: *https://www.sense.org.uk/* [Accessed 6th March 2022].

Sofaer, Joanna, Davenport, Ben, Sørensen, Marie Louise Stig, Gallou, Eirini and Uzzell, David, 2021. Heritage sites, value and wellbeing: learning from the COVID-19 pandemic in England. *International Journal of Heritage Studies,* 27(11), pp. 1117-1132.

Sofaer, Joanna and Gallou, Eirini, 2022. *Places of Joy: the Role of Heritage During the COVID-19 Pandemic* [Online]. Historic England. Available from: *https://historiceng-land.org.uk/whats-new/research/places-of-joy-the-role-of-heritage-during-the-covid-19-pandemic/* [Accessed 21st March 2022].

SQW, 2020. *Social Prescribing and the potential of Historic England's local delivery* [Online]. Historic England. Available from: *https://historicengland.org.uk/images-books/publica-tions/social-prescribing-potential-historic-england-local-delivery/social-prescribing/* [Accessed 7th February 2022].

Tennant, Ruth, Hiller, Louise, Fishwick, Ruth, Platt, Stephen, Joseph, Stephen, Weich, Scott, Parkinson, Jane, Secker, Jenny and Stewart-Brown, Sarah, 2007. The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): development and UK validation. *Health Quality of Life Outcomes,* 5.

The Cares Family, 2022. *The Cares Family* [Online]. The Cares Family. Available from: *https://www.thecaresfamily.org.uk/* [Accessed 6th March 2022].

The Happy Museum Project, 2021. *The Happy Museum Project* [Online]. The Happy Museum Project. Available from: *https://happymuseumproject.org/* [Accessed 7th February 2022].

The Heritage Alliance, 2020. *Heritage, Health and Wellbeing* [Online]. The Heritage Alliance. Available from: *https://www.theheritagealliance.org.uk/wp-content/uploads/2020/10/Herit-age-Alliance-AnnualReport_2020_Online.pdf* [Accessed 3rd March 2022].

The Jo Cox Foundation, 2022. *The Jo Cox Foundation* [Online]. The Jo Cox Foundation. Available from: *https://www.jocoxfoundation.org/* [Accessed 6th March 2022].

The Marmalade Trust, 2022. *The Marmalade Trust* [Online]. The Marmalade Trust. Available from: *https://www.marmaladetrust.org/* [Accessed 6th March 2022].

The University of Edinburgh, 2022. *Prescribe Culture* [Online]. The University of Edinburgh. Available from: *https://www.ed.ac.uk/information-services/library-museum-gallery/cultural-heritage-collections/museums-and-galleries/prescribe-culture* [Accessed 4th March 2022].

Tyne and Wear Archives and Museums, 2020. *Case studies: How have culture and creativity been supporting people in health, care and other institutions during the Covid-19 pandemic?:TWAM* [Online]. Culture and Wellbeing Alliance. Available from: *https://www.culture-healthandwellbeing.org.uk/sites/default/files/2021-01/Case%20study%20-%20TWAM_0.pdf* [Accessed 7th February 2022].

Verdi, Ravneet, 2022. A Connected Society- Exploring the Government's Work on Tackling Loneliness. *Tackling Loneliness Digital Conference*, 26th January 2022 Online.

Weekly Wow Factor, 2022. *Weekday Wow Factor* [Online]. Weekday Wow Factor. Available from: *https://weekdaywowfactor.com/* [Accessed 7th February 2022].

Wessex Archaeology, 2021. *A Thousand Lost and Found Stories: How to run your own wellbeing project* [Online]. Wessex Archaeology. Available from: *https://www.wessexarch.co.uk/our-work/thousand-lost-and-found-stories-how-run-your-own-wellbeing-project* [Accessed 7th February 2022].

Wessex Archaeology, 2022a. *Operation Nightingale* [Online]. Wessex Archaeology. Available from: *https://www.wessexarch.co.uk/our-work/operation-nightingale* [Accessed 21st march 2022].

Wessex Archaeology, 2022b. *Well-City Salisbury* [Online]. Wessex Archaeology. Available from: *https://www.wessexarch.co.uk/well-city-salisbury* [Accessed 21st March 2022].

What Works Wellbeing, 2019a. *A brief guide for measuring loneliness* [Online]. What Works Wellbeing. Available from: *https://whatworkswellbeing.org/wp-content/uploads/2020/02/Brief-Guide-to-measuring-Loneliness-Feb2019.pdf* [Accessed 6th March 2022].

What Works Wellbing, 2019b. *A conceptual review of loneliness across the adult life course (16+ years)* [Online]. What Works Wellbeing. Available from: *https://tacklinglonelinesshub.org/wp-content/uploads/2021/07/Loneliness-conceptual-review.pdf* [Accessed 7th February 2022].

What Works Wellbeing, 2020. *How has Covid-19 and associated lockdown measures affected loneliness in the UK?* [Online]. What Works Wellbeing. Available from: *https://whatworkswellbeing.org*

Historic England's Research Reports

We are the public body that helps people care for, enjoy and celebrate England's historic environment.

We carry out and fund applied research to support the protection and management of the historic environment. Our research programme is wide-ranging and both national and local in scope, with projects that highlight new discoveries and provide greater understanding, appreciation and enjoyment of our historic places.

More information on our research strategy and agenda is available at HistoricEngland.org.uk/research/agenda.

The Research Report Series replaces the former Centre for Archaeology Reports Series, the Archaeological Investigation Report Series, the Architectural Investigation Report Series, and the Research Department Report Series.

All reports are available at HistoricEngland.org.uk/research/results/reports. There are over 7,000 reports going back over 50 years. You can find out more about the scope of the Series here: HistoricEngland.org.uk/research/results/about-the-research-reports-database.

Keep in touch with our research through our digital magazine *Historic England Research* HistoricEngland.org.uk/whats-new/research.