

## Community

*The informal assets and resources that communities possess perform a key role in supporting the health and wellbeing of local people. A person's social networks can have a significant impact on their health and the actions of local community and voluntary organisations have many practical, social and psychological benefits. Social relationships and networks also contribute towards the resilience of communities, that is, their ability to cope with adversity. The JSNA process is ongoing and aims to include an enhanced focus on the human and physical assets of our communities. This section of the JSNA shares some of the initial work we have pulled together around the community. It is very much a starting point and is something we intend to build on in the community section of Inform Gloucestershire over the coming years.*

There are a wide variety of **physical assets** in Gloucestershire that enhance the ability of individuals, communities and populations to maintain and sustain health and wellbeing. These assets can be anything from GP surgeries, schools, village and community halls and libraries to sports facilities, children's play areas and allotments. There is also a wealth of **community activity** taking place across Gloucestershire in neighbourhoods, villages and through clubs, interest groups and community organisations. Some of these activities take place with the support and involvement of the public sector in Gloucestershire; even more thrive through the enthusiasm and commitment of their own members and the creativity and drive of local people. Information on Gloucestershire voluntary and community groups can be found, amongst others, on the Gloucestershire Healthwatch website, the Gloucestershire VCS Alliance website and the "You're Welcome" website run by Barnwood Trust. The latter is part of an asset-based community development programme run by Barnwood Trust which aims to build strong, inclusive and welcoming communities across Gloucestershire.

**Volunteers** play a huge role in meeting the needs of people in Gloucestershire. Nationally in 2013/14 48% of people volunteered in some way at least once a month and 74% at least once a year<sup>1</sup>. Customer segmentation data has been used to help develop a better understanding of where volunteers may live in Gloucestershire. Results suggest levels of volunteering are likely to be lower in the main urban areas and around market towns, as well as in areas bordering the River Severn. The St Paul's area of Cheltenham, has the lowest likelihood of volunteering, while conversely Painswick in Stroud has the highest likelihood of volunteering<sup>2</sup>.

**Carers** are a valuable asset within our communities, providing not just voluntary, unpaid care to assist the person they care for to remain independent, but also love, friendship, reassurance and connection. Research published in 2015 suggested that the economic value of the contribution made by carers in the UK is now £132 billion per year. This is close to the total annual cost of health spending in the UK, which was £134.1 billion<sup>3</sup>. According to the 2011 Census, 10.5% of Gloucestershire's population were recorded as carers, with 25% or 15,600 carers aged 65 and over<sup>4</sup>. This number is projected to rise to 22,300 by 2025<sup>5</sup>. Roles of carers are often complex with many also in full time education or employment as well as having to care for loved ones. This increased pressure in the life of a carer can have a negative impact on the health and wellbeing of the carer (a recent survey found that 6 in 10 carers had reached breaking point, and a quarter required medical treatment as a result, 63% suffered depression and 79% reported anxiety<sup>6</sup>).

Community activity can make a significant contribution to social capital. **Social capital** describes the links that bind and connect people within and between communities. Social capital provides a source of resilience, a buffer against risks of poor health. The Office of National Statistics has developed a framework for measuring social capital which covers four broad aspects rather than a single definition. These four dimensions are personal relationships, social network support, civic engagement and trust and cooperative norms<sup>7</sup>. The County Council's Strategic Needs Analysis Team has recently started using customer segmentation data to develop a better understanding of the four broad aspects of social capital at a local level. Initial results suggest the level of social capital in Gloucestershire is very similar to the national average. Many of the areas within Gloucestershire that are predicted to have the highest levels of social capital are rural, the relationship between rurality and social capital will need to be explored further before drawing any conclusions<sup>8</sup>.

The ONS measurement of social capital is part of a broader ONS programme to measure national wellbeing, which aims to supplement existing economic, social and environmental measures. In addition to social capital this programme looks at **personal well-being**. The results showed that in 2015/16 Gloucestershire had an average ranking of 7.70 out of 10 in terms of overall life satisfaction which was in line with the national average of 7.65<sup>9</sup>. At district level levels of life satisfaction are highest in Cheltenham (7.81) and lowest in Stroud (7.59)

An absence of social capital and support can lead to individuals becoming isolated. There is a growing evidence base that links loneliness and **social isolation** with poorer health as well as demonstrating that declining health or the need to provide care to a loved one can lead to greater loneliness. The Campaign to End Loneliness suggests loneliness can be as bad for our health as 15 cigarettes a day, that it can increase the risk of high blood pressure, diabetes, cognitive decline, dementia and depression and that it can therefore increase the use of health and social care services. Loneliness and social isolation is widespread in Gloucestershire but varies in intensity and impact geographically and between different social groups<sup>10</sup>. The County Council Strategic Needs Analysis Team has used customer segmentation data to explore the risk of social isolation across the county. The findings suggested that the most vulnerable areas appeared to be associated with the main urban centres and also the fringes of the more isolated market towns. There also appeared to be a cluster of areas of moderate to higher vulnerability in the south west of Forest of Dean district and the north east of Cotswold district<sup>11</sup>.

Three groups that can be particularly affected by loneliness and social isolation are carers, people with long-term health problems or disabilities and older people. The results of the 2015 Adult Social Care Service Users Survey showed 1 in 5 respondents felt they did not have enough social contact, the 2014/15 Carers Survey found 73% of carers felt they did not have enough social contact<sup>12</sup>. In addition, social isolation was the most common reason for referrals to the county social prescribing pilot service in 2015<sup>13</sup>. A number of approaches are addressing these needs in the county. Particularly important is the existing contribution of the community, for example, through befriending schemes or lunch clubs.

Quantitative data can give us an idea of the potential assets which exist within a community and the groups of people who are most vulnerable. However, a vital part of understanding the assets and needs of communities is to draw on local knowledge, to hear the **voices of the people** who live in the area. What people say about their neighbourhoods, their needs and the services they use gives

us a better understanding of the strengths of their communities and of the problems they face. For example, Healthwatch Gloucestershire gives patients and carers the opportunity to share their concerns and opinions about their local health and social care services<sup>14</sup>.

---

<sup>1</sup> Community Life Survey England 2013-14, Cabinet Office,

<https://www.gov.uk/government/collections/community-life-survey>

<sup>2</sup> Further information will be available on the community section of Inform Gloucestershire shortly

<sup>3</sup> Valuing Carers 2015 - The rising value of carers' support, Carer UK <https://www.carersuk.org/for-professionals/policy/policy-library/valuing-carers-2015>

<sup>4</sup> 2011 Census, Office for National Statistics, <https://www.nomisweb.co.uk>

<sup>5</sup> Projecting Older People Population Information System (POPPI) <http://www.poppi.org.uk/>

<sup>6</sup> Carers At Breaking Point, Carers UK, <https://www.carersuk.org/for-professionals/policy/policy-library/carers-at-breaking-point-report>

<sup>7</sup> Measuring Social Capital, Office for National Statistics

[http://webarchive.nationalarchives.gov.uk/20160105160709/http://www.ons.gov.uk/ons/dcp171766\\_371693.pdf](http://webarchive.nationalarchives.gov.uk/20160105160709/http://www.ons.gov.uk/ons/dcp171766_371693.pdf)

<sup>8</sup> Acorn, CACI.

<sup>9</sup> Personal wellbeing in the UK, Office for National Statistics,

<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/bulletins/measuringnationalwellbeing/2015to2016#methodology>

<sup>10</sup> Loneliness and social isolation in Gloucestershire, Inform Gloucestershire

<https://inform.gloucestershire.gov.uk/get/ShowResourceFile.aspx?ResourceID=129>

<sup>11</sup> Social Isolation, Inform Gloucestershire

<https://inform.gloucestershire.gov.uk/get/ShowResourceFile.aspx?ResourceID=396>

<sup>12</sup> Carers Survey and Adult Social Care Service Users Survey, Gloucestershire County Council

<sup>13</sup> Loneliness and social isolation in Gloucestershire, Inform Gloucestershire

<https://inform.gloucestershire.gov.uk/get/ShowResourceFile.aspx?ResourceID=129>

<sup>14</sup> Healthwatch Gloucestershire, <http://www.healthwatchgloucestershire.co.uk/>