



Age and loneliness in Wales

Loneliness is a widespread issue, with surveys suggesting that one in six of the Welsh population is lonely (Office for National Statistics, Welsh Government, 2020; Welsh Government, Office for National Statistics 2020a; 2020b). Loneliness has a significant impact on health and wellbeing and is linked to increased risk of depression and early mortality (Campaign to End Loneliness, 2021). There are different types of loneliness: emotional loneliness (absence of close relationships), and social loneliness (absence of broader social networks). 'Overall' loneliness incorporates both (De Jong Gierveld and Van Tilburg, 2010).

Tackling loneliness and social isolation has been identified as a priority by the Welsh Government (Welsh Government, 2020a) and is one of the ways Wales measures progress towards the Well-being of Future Generations (Wales) Act 2015 goals. Key to addressing loneliness is understanding who in Wales is lonely and how loneliness affects different groups.

This is part of a series of insights on loneliness in Wales based on bespoke analysis of the National Survey for Wales (NSW). The series is designed to provide policy makers and public services with a greater understanding of who is lonely so that funding and interventions to tackle loneliness can be designed and delivered most effectively.

Previous research has found that levels of loneliness are associated with various socio-demographic characteristics (Welsh

Government, 2018, 2020b; Office for National Statistics 2021, Centre for Thriving Places, 2021) but there is limited evidence on how factors associated with loneliness intersect to produce more or less lonely groups. The first insight in the series reports levels of loneliness among different groups (Goldstone et al., 2021). It finds that loneliness varies according to individual characteristics such as age, gender, and ethnicity, and personal circumstances such as marital status, household composition, deprivation, and general health. But individuals do not experience these characteristics in isolation, and the way these characteristics intersect to shape levels of loneliness has not been explored in detail.

This data insight combines three years' worth¹ of NSW data to identify levels of overall, emotional, and social loneliness among different groups and explore how age interacts with other characteristics to show which groups are especially vulnerable to loneliness. It highlights the acute risk of loneliness faced by people experiencing multiple forms of disadvantage and the importance of targeted policy and public service funding and interventions to support them.

We present these findings using Decision Tree analysis, a method that identifies statistically significant differences between different groups within the data and displays them as tree diagrams. This method was chosen to explore loneliness because it enables an intersectional approach to be taken to understand how those

¹ We have pooled the most recent NSW datasets on loneliness (2016/17, 2017/18, and 2019/20), involving a total of 30,912 unique responses. Questions about loneliness were not asked as part of the 2018/19 NSW.

who share different characteristics are affected and what proportion of the population these represent. Further details about the methodology can be found in the accompanying appendix (Hodges et al., 2021a).

Summary

- Younger people are lonelier than older people, especially those aged 16-24. Those aged under 64 are significantly more socially lonely than older age groups.
- For all age groups, higher deprivation translates into higher levels of loneliness.

Those aged 16-24 living in the 20% most deprived areas of Wales are the loneliest.

- Among those aged 25-64, people from ethnic minority backgrounds are lonelier than those who identify as White British.
- Those with a long-term illness, disability or infirmity, across all age groups, are lonelier than those without.
- Having a poorer level of general health means higher levels of loneliness across all age groups.

Read the other data insights in this series

Goldstone, R., Hodges, H., Durrant, H., and Taylor-Collins, E. (2021). **Who is lonely in Wales?** Cardiff: Wales Centre for Public Policy.

Hodges, H., Goldstone, R., Durrant, H., and Taylor-Collins, E. (2021). **Health and loneliness in Wales.** Cardiff: Wales Centre for Public Policy.

Goldstone, R., Hodges, H., Durrant, H., and Taylor-Collins, E. (2021). **Loneliness in Wales during the Coronavirus pandemic.** Cardiff: Wales Centre for Public Policy.

Hodges, H., Goldstone, R., Durrant, H., and Taylor-Collins, E. (2021). **Loneliness data insights: Methodological appendix.** Cardiff: Wales Centre for Public Policy.

Findings

Age and loneliness

Our analysis finds that age is negatively associated with levels of overall loneliness, with a similar trend observed for emotional and social loneliness (Table 1 and Figure 1).

Table 1: Levels of loneliness, by age group

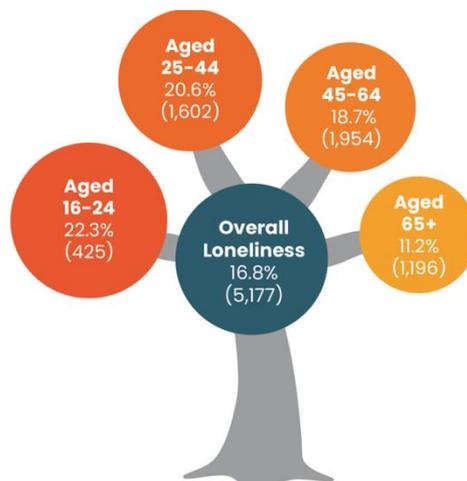
Age	Sample N (%)		Overall loneliness		Emotional loneliness	Social loneliness
			Sometimes lonely (1-3)	Lonely (4-6)		
16-24	1,908	(6.2%)	54.5%	22.3%	30.1%	36.1%
25-44	7,764	(25.2%)	50.6%	20.6%	23.1%	35.5%
45-64	10,429	(33.9%)	53.1%	18.7%	20.9%	35.4%
65-74	6,217	(20.2%)	53.7%	11.7%	16.8%	26.3%
75+	4,460	(14.5%)	54.1%	10.5%	19.8%	19.6%
All ages	30,868	(100%)	52.8%	16.9%	21.1%	31.5%

Source: The pooled dataset consists of responses from 2016/17, 2017/18 and 2019/20 NSW where respondents answered questions related to loneliness and each of the pertinent socio-demographic characteristics considered within this insight (N=30,778) (Office for National Statistics, Welsh Government, 2020; Welsh Government, Office for National Statistics 2020a; 2020b).

Overall, 16.8% of respondents are lonely.² However, 22.3% of those aged 16–24 are lonely compared to 10.5% of those aged 75+. This shows that **the youngest age group (aged 16-24) is loneliest**, with loneliness gradually reducing in the older age groups.³

Figure 1 summarises the proportions reporting overall loneliness given in Table 1 as a ‘Tree’ with the headline figure at the centre. This is then broken down by age group in the second level – the branches. The approach used identifies where there are statistically significant differences between categories or levels. In this instance, levels of loneliness amongst four of the five age groups are found to be statistically significantly different to each other, with the proportion who are lonely decreasing progressively as age increases. However, there is no statistically significant difference between those aged 65–74 and those aged 75+; therefore, these two categories are presented as an aggregate group.

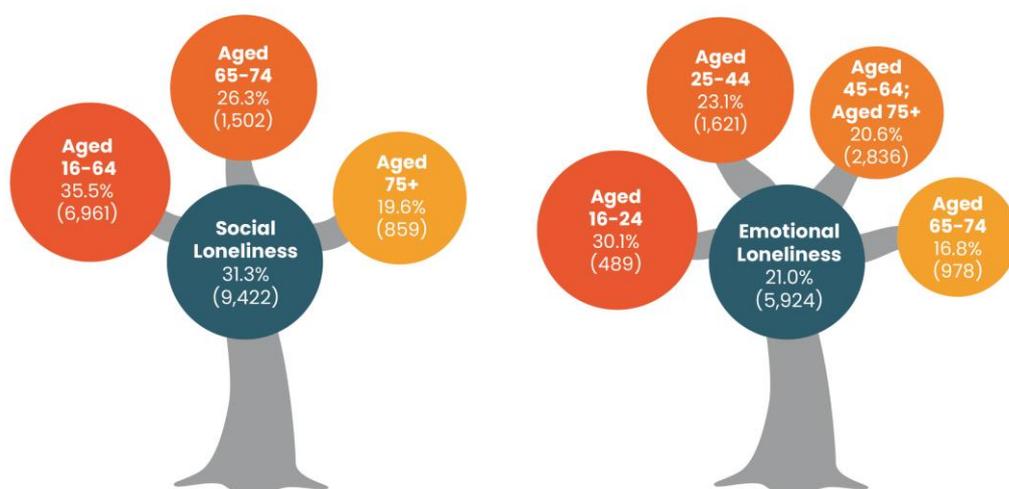
Figure 1: Levels of overall loneliness by age group



Source: Pooled dataset, all respondents; % = proportion that are lonely. () = number of respondents in the category reporting being lonely.

When we explore differences by type of loneliness, we find that **both social and emotional loneliness are generally higher among younger age groups than older** (Figures 2 and 3). For social loneliness (Figure 2), there are no statistical differences between those aged 16-64; 35.5% of people in this age range are socially lonely. Social loneliness reduces with age, with those aged 75+ typically less socially lonely than those aged 65-74. Similarly, amongst those aged 74 and under, the proportion of people reporting feeling emotionally lonely decreases with age. However, those aged 75+ report similar levels of emotional loneliness as those aged 45 to 64, hence why these two groups have been reported together in Figure 3.

Figures 2 and 3: Levels of social and emotional loneliness by age group



Source: Pooled dataset, social loneliness n=30,072, emotional loneliness n=28,219; % = proportion that are lonely. () = number of respondents in the category reporting being lonely.

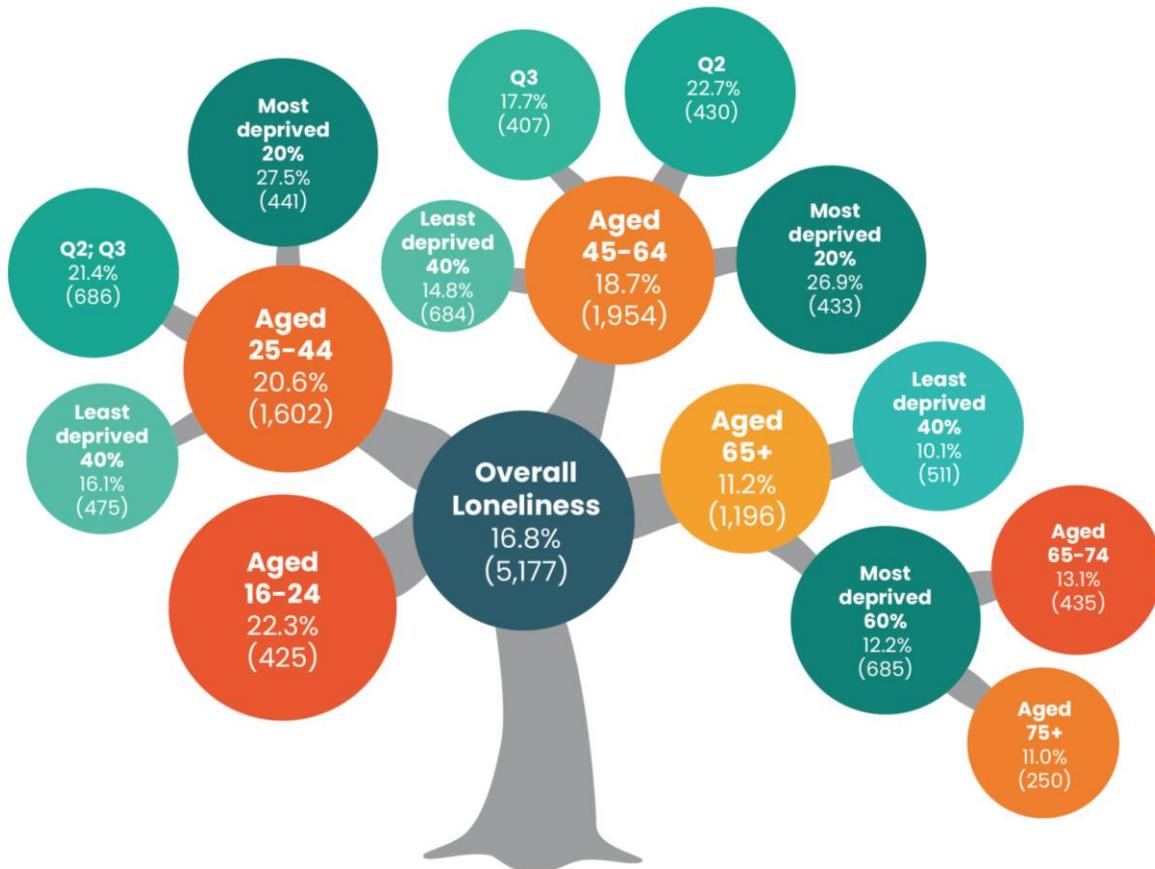
² This is slightly lower than the average reported in the insight on ‘General health and loneliness’ (Hodges et al., 2021b) since the sample is based only on those who provided responses to the questions on loneliness, age and other pertinent questions. Taking into account missing data, this insight is based on fewer responses (30,778 compared to 30,868).

³ There is a need for further investigation of loneliness among respondents aged 18-30. This was not possible in this data insight series, given the limited sample of respondents aged 18-30 in the NSW even after pooling three waves of survey data.

Age, deprivation, and loneliness

Age also interacts with other characteristics in relation to loneliness. For example, as the relative level of deprivation in an area increases⁴ so do levels of loneliness across the majority of age groups. In general, **those who are younger and live in the most deprived areas are lonelier than older people in similar circumstances**: more than one in four (27.5%) of those aged 25-44 living in the 20% most deprived areas are lonely, compared to almost one in nine (11.5%) of those aged 75+. Among those aged 16-24, we did not find significant differences in reported loneliness by deprivation.

Figure 4: Levels of overall loneliness by age group and deprivation (WIMD)



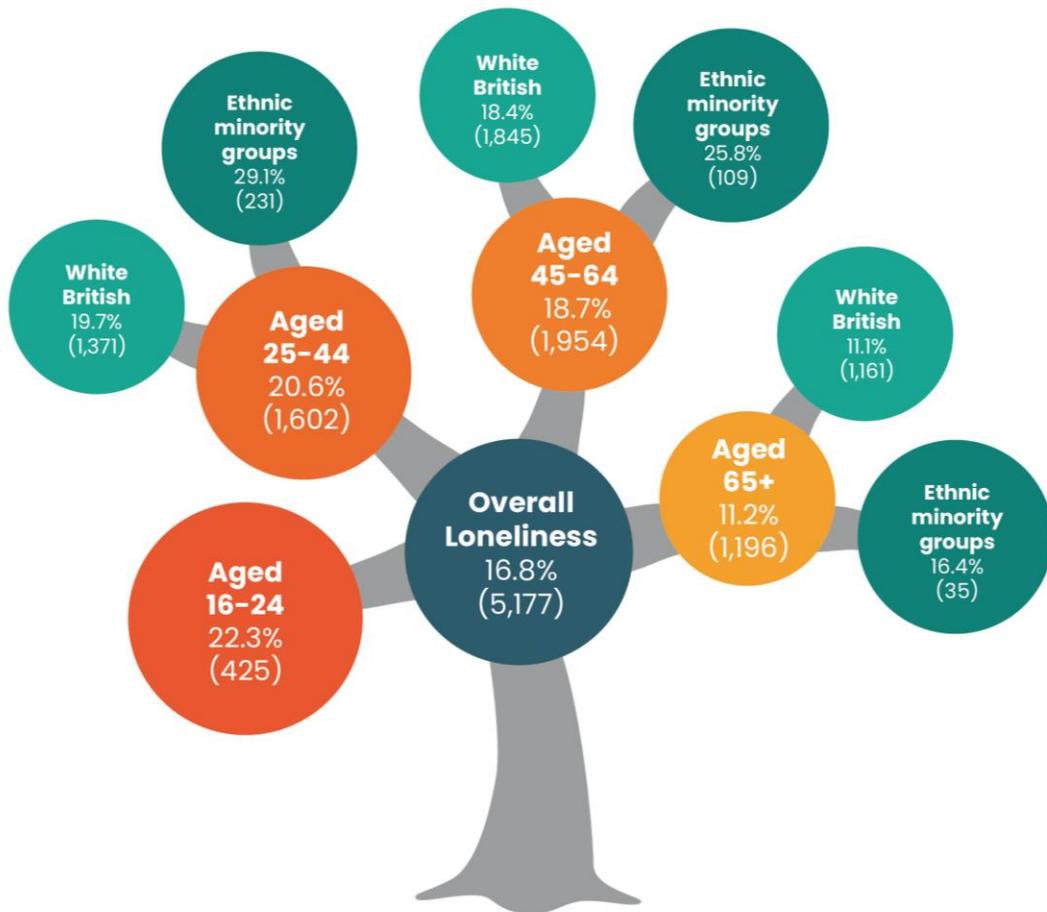
Source: Pooled dataset, all respondents; % = proportion that are lonely, () = number of respondents in the category reporting being lonely. Q1 comprises of the 20% most deprived areas within Wales whilst Q5 reflects the 20% least deprived areas.

⁴ Quintiles of the Welsh Indices of Multiple Deprivation (WIMD) have been used within NSW as a measure of area-based deprivation. Further information about WIMD 2019 including differences between this and WIMD 2014 (which would have been used in the first two waves of the NSW) can be found here: <https://gov.wales/welsh-index-multiple-deprivation>.

Age, ethnicity, and loneliness

Age group and ethnicity also interact in relation to loneliness (Figure 5). Statistically significant differences in loneliness between White British and ethnic minority groups are observed among those over the age of 25. (The number of people aged 16-24 who identify as belonging to an ethnic minority group in this sample is too small to enable a robust analysis). **Higher levels of loneliness are found among those from ethnic minority backgrounds.** For example, among those aged 25-44, one in five (19.7%) of White British respondents is lonely compared to more than one in four (29.1%) of those from a minority ethnic group. A similar pattern is observed among those aged 45-64 and those aged 75+.

Figure 5: Levels of overall loneliness by age and ethnicity

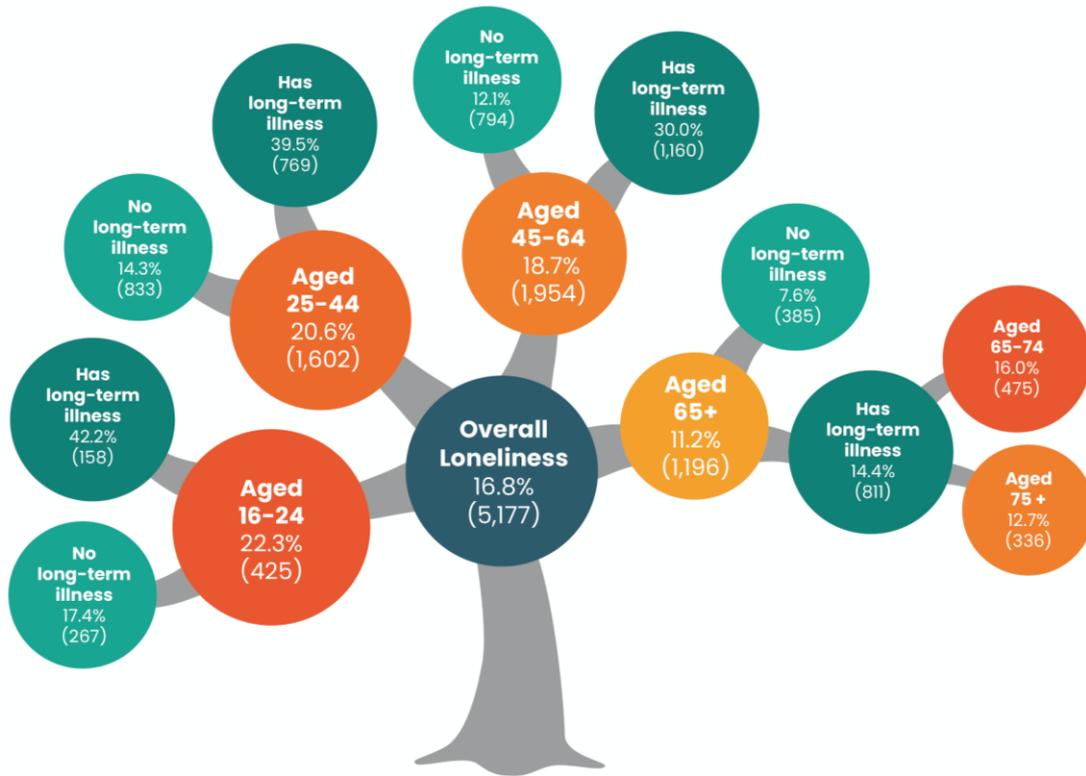


Source: Pooled dataset, all respondents; % = proportion that are lonely. () = number of respondents in the category reporting being lonely.

Age, long-term illness or disability, and loneliness

Having a long-term illness, disability or infirmity also interacts with age to produce significant differences in loneliness in all age groups, with the biggest differences among younger groups (Figure 6). For instance, those aged 16-24 with a long-term illness, disability or infirmity are substantially lonelier than those without; 42.2% compared with 17.4%. There is a smaller, but still statistically significant, increase in loneliness among those aged 65+ with a long-term illness, disability or infirmity, compared to those in the same age group without. Only 7.6% of those aged 65+ without a long-term illness, disability or infirmity are lonely. This is significantly below the national average.

Figure 6: Levels of overall loneliness by age and whether respondent has a long-term illness, disability or infirmity



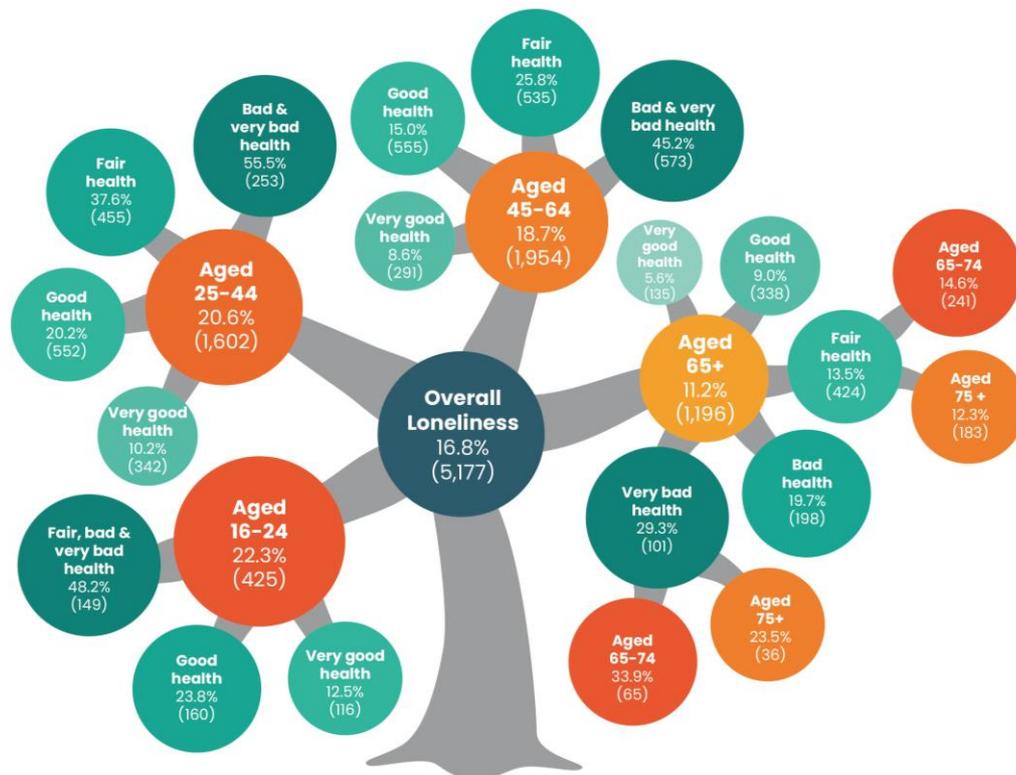
Source: Pooled dataset, all respondents; % = proportion that are lonely. () = number of respondents in the category reporting being lonely.

Those who are oldest (75+) are less lonely than those aged 65-74, even where both have a long-term illness, disability or infirmity (12.7% compared to 16.0%).

Age, general health, and loneliness

Poorer levels of general health⁵ interact with age in relation to loneliness (Figure 7) across all age groups.

Figure 7: Levels of overall loneliness by age group and level of health



Source: Pooled dataset, all respondents; % = proportion that are lonely. () = number of respondents in the category reporting being lonely.

Among those aged 16-24, there is no statistically significant difference in loneliness among those in fair, bad or very bad health. However, people in worse health are significantly more likely to be lonely (48.2%) compared to those with good (23.8%), or very good (12.5%) health. Indeed, those aged 16-24 in worse health are almost three times lonelier than the national average.

For those aged 65+ there are statistically significant differences in reported loneliness between all general health groups, with those in very bad health being the loneliest (29.3%). Differentiating between those aged 65-74 and those aged 75+ in very bad general health we find that reported loneliness reduces with age; 23.5% of those aged 75+ in very bad health report being lonely compared to 33.9% of those aged 65-74 in very bad health. In contrast, those aged 65+ in very good or good health are significantly less lonely – only 5.6% and 9% respectively report feeling lonely, considerably below the national average.

Among the other age groups (those aged 45-64 and 25-44), those in bad or very bad health do not have significantly different levels of loneliness and are therefore grouped together. Again, among those aged 45-64, those in bad or very bad health are lonelier (45.2%) than those in fair (25.8%), good (15.0%) or very good (8.6%) health. Those aged 25-44 in bad or very bad health are even lonelier; 55.5% are lonely, which is more than three times the national average.

⁵ This variable is based on respondents' self-perception of their general health and the limitations of self-reported health measures should be considered in interpreting findings. For brevity we report this as 'health' rather than 'general health' throughout this insight.

Reflections

This data insight has used NSW data to investigate the relationship between age and loneliness in Wales. Findings show that younger people report feeling lonelier than older people and highlight the interaction between age, other socio-demographic characteristics and loneliness. Those living in higher levels of deprivation, identifying as any other ethnicity than White British, with a long-term illness, disability or infirmity, and reporting lower levels of health, are typically lonelier than their peers in the same age group.

By taking an intersectional approach, it is possible to see beyond the headline figures for loneliness in each age group. For instance, younger people with a long-term illness, disability or infirmity are 2.5 times lonelier than the national average. By comparison, for those younger people living in the least deprived areas or in very good health, levels of loneliness are significantly lower. Older age groups are typically less lonely. However, this is not the case for those in very bad health. This group is significantly more likely to be lonely than the average and when compared to those in good or very good health in younger groups. Within all age groups where sample size allows for analysis, those from ethnic minority backgrounds tend to be lonelier than those who identify as White British.

These findings challenge commonly held perceptions that loneliness is an issue faced only by older people. Rather, this insight shows that significant numbers of younger people can also feel lonely, though that loneliness is likely to manifest differently for particular groups. Understanding more about the qualitatively different experiences of loneliness among these groups, and how these might be affected by characteristics associated with increased levels of loneliness – having a long-term illness, disability or infirmity, living in deprived areas, and being from an ethnic minority background – has important implications for how interventions are designed and delivered to tackle loneliness. Interventions based on age alone, rather than on cohorts within particular age categories, may not reach the people who need them.

Authors: Dr Helen Hodges, Ross Goldstone, Dr Hannah Durrant, Emma Taylor Collins

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Appendices

Table A1: Measures used in the models included in this data insight

	Age group					TOTAL
	Aged 16-24	Aged 25-44	Aged 45-64	Aged 65-74	Aged 75+	
WIMD						
Q1 (Least deprived 20%)	1.4%	5.2%	5.2%	2.7%	1.9%	16.4%
Q2	1.3%	5.0%	6.1%	3.5%	2.5%	18.3%
Q3	1.3%	5.4%	7.5%	4.6%	3.0%	21.8%
Q4	1.3%	5.3%	8.3%	4.9%	3.8%	23.6%
Q5 (Most deprived 20%)	0.9%	4.3%	6.8%	4.5%	3.3%	19.8%
Ethnicity						
White (Welsh, English, British etc.)	5.6%	22.6%	32.5%	19.8%	14.2%	94.7%
White – other	0.2%	1.2%	0.6%	0.3%	0.2%	2.5%
Any other ethnic group	0.4%	1.4%	0.7%	0.2%	0.1%	2.8%
Long-term illness, disability, or infirmity						
Yes	1.2%	6.3%	12.6%	9.7%	8.6%	38.4%
No	5.0%	18.9%	21.3%	10.5%	5.9%	61.6%
General health						
Very good	3.0%	10.9%	11.0%	5.1%	2.7%	32.8%
Good	2.2%	8.9%	12.0%	7.3%	5.0%	35.3%
Fair	0.8%	3.9%	6.7%	5.4%	4.8%	21.7%
Bad	0.1%	1.1%	2.9%	1.8%	1.5%	7.4%
Very bad	0.0%	0.4%	1.3%	0.6%	0.5%	2.8%
TOTAL	6.2%	25.2%	33.9%	20.2%	14.5%	100.0%

Source: The pooled dataset consisting of responses from 2016/17, 2017/18 and 2019/20 where respondents answered both the questions on loneliness and their general health (Office for National Statistics, Welsh Government, 2020; Welsh Government, Office for National Statistics 2020a; 2020b). N = 30,778.

Table A2: Contextual variables

	Age group					TOTAL
	Aged 16-24	Aged 25-44	Aged 45-64	Aged 65-74	Aged 75+	
Gender (N = 30,772)	6.2%	25.2%	33.9%	20.2%	14.5%	100.0%
Male	2.9%	10.6%	15.3%	9.3%	6.2%	2.9%
Female	3.3%	14.7%	18.6%	10.9%	8.3%	3.3%
Marital Status (N = 30,774)	6.2%	25.2%	33.9%	20.2%	14.5%	100.0%
Single, never married or registered a same-sex civil partnership	6.1%	12.6%	6.5%	1.6%	0.6%	27.4%
Married or in registered same-sex civil partnership	0.1%	10.4%	18.3%	11.3%	5.4%	45.4%
Separated but still legally married or in a same-sex civil partnership	0.0%	0.8%	1.1%	0.4%	0.1%	2.5%

Divorced	0.0%	1.3%	6.5%	3.4%	1.3%	12.5%
Widowed		0.1%	1.5%	3.4%	7.1%	12.1%
Sexual Orientation (N = 30,658)	6.2%	25.2%	33.9%	20.2%	14.5%	100.0%
Heterosexual	5.6%	23.8%	32.4%	19.4%	13.9%	95.1%
Another response (incl. prefer not to say)	0.6%	1.5%	1.5%	0.8%	0.5%	4.9%
Household Type (N = 30,778)	6.2%	25.2%	33.9%	20.2%	14.5%	100.0%
Single pensioner (no children)			0.3%	7.6%	8.6%	16.5%
Married couple pensioner (no children)			0.3%	8.6%	4.8%	13.7%
Single person, not a pensioner (no children)	0.5%	4.0%	9.7%	0.2%		14.4%
Two adult household with children	0.6%	10.7%	3.1%	0.1%	0.0%	14.5%
Two adult household (up to one pensioner) without children	1.3%	4.8%	13.4%	2.2%	0.4%	22.0%
Single parent household	0.4%	3.3%	0.8%	0.1%	0.0%	4.6%
Other households	3.5%	2.5%	6.3%	1.4%	0.6%	14.3%
Can speak, read, and write Welsh (N = 30,774)	6.2%	25.2%	33.9%	20.2%	14.5%	100.0%
No	4.8%	20.8%	29.2%	17.6%	12.3%	84.8%
Yes	1.4%	4.4%	4.7%	2.6%	2.2%	15.2%
Religion (N = 30,175)	6.1%	25.2%	33.7%	20.3%	14.7%	100.0%
No religion	4.3%	14.8%	13.6%	5.4%	2.6%	40.7%
Christian	1.6%	9.4%	19.3%	14.5%	11.9%	56.7%
Other religion	0.2%	1.0%	0.8%	0.4%	0.2%	2.6%
Highest Educational Qualification (N = 30,682)	6.2%	25.2%	33.9%	20.2%	14.5%	100.0%
Higher degree / postgraduate qualifications	0.2%	3.5%	3.8%	1.4%	0.7%	9.6%
First degree	0.6%	5.7%	5.3%	2.7%	1.2%	15.5%
Diplomas, etc.	0.7%	3.8%	4.9%	2.3%	1.2%	12.9%
A/AS levels	1.7%	3.1%	2.6%	1.1%	0.5%	9.0%
Trade apprenticeships	0.1%	0.7%	1.5%	1.4%	0.9%	4.7%
O Level / GCSE grades A-C, etc.	1.7%	3.9%	6.4%	3.1%	1.7%	16.8%
O Level / GCSE grades D-G	0.3%	1.0%	1.4%	0.5%	0.2%	3.5%
Other and Foreign qualifications / No Qualifications	0.8%	3.5%	8.0%	7.7%	8.0%	27.9%

Source: The pooled dataset consisting of responses from 2016/17, 2017/18 and 2019/20 where respondents answered both the questions on loneliness and their age (Office for National Statistics, Welsh Government, 2020; Welsh Government, Office for National Statistics 2020a; 2020b).

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For further information contact:

Hannah Durrant

Hannah.durrant@wcpp.org.uk

Wales Centre for Public Policy

Cardiff University, 10/12 Museum Place, Cardiff CF10 3BG



www.wcpp.org.uk



029 2087 5345



info@wcpp.org.uk



@WCfPP

