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Know Your Neighbourhood Fund

A Local evaluation of Furness for You

A community intervention for loneliness and social
isolation in Barrow-in-Furness

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Glossary

DCMS: Department for Culture, Media and Sport

FFY: Furness For You

KYN: Know Your Neighbourhood

Loneliness: A subjective feeling, representing a discrepancy between the social contact someone has and the social contact they wish for.

Social isolation: An objective lack of meaningful and sustained social contact

Main messages

Furness For You (FFY) is a partnership of 10 charitable organisations working to reduce loneliness in Barrow-in-Furness. This area has a remote, coastal location and a proud industrial heritage. Defence remains the dominant industry here, BAE being the main employer. However, the region has significant inequalities with high levels of ill-health and deprivation.

In 2023, using funding from the Department for Culture, Media and Sport (DCMS) Know Your Neighbourhood Fund (KYN), FFY partners began providing a range of activities and services including social groups, crafts, one-to-one support, language classes, and volunteering opportunities. Each partner had its own specialisms and user groups (see Appendix 1). FFY partners met regularly to provide peer support, share resources, and pool expertise. Partners provided wrap-around care for each other's beneficiaries and worked on community events together to promote FFY.

In June 2024, the current evaluation was commissioned to evaluate the impact of FFY. A qualitative approach was taken to gain in-depth, contextualised insights from staff and beneficiaries. Key messages of the report are as follows:

1. Community interventions are effective in supporting social connections and reducing loneliness.
2. Beneficiary engagement requires sensitivity, patience, persistence, compassion, and skill.
3. Delivery needs flexibility to accommodate a range of needs and abilities, including fluctuations in health, finances, and availability.
4. Impact takes time as beneficiaries build trust, develop relationships, and gain skills slowly.
5. Developmental progress, including increased self-confidence, supports readiness for volunteering.
6. Partnership approaches are effective in providing holistic care for beneficiaries while increasing peer support and development for staff.

Executive summary

Background

‘Furness For You’ (FFY) was a partnership of 10 charitable organisations in Barrow-in-Furness, who were funded by the Department for Culture, Media & Sport (DCMS) to reduce social isolation and loneliness. Partners included: Age UK; Barrow & District Disability Association; Barrow Leisure Centre; Barrow Women's Community Matters; Brathay Trust; Cumbria CVS; Groundwork; Furness Multi-Cultural Forum; Stitch Ability; The Barrow Borough Poverty Truth Commission.

Beneficiaries of funding could access a range of activities, social groups, and skill development opportunities, including volunteering. The partnership approach encouraged organisations to collaborate on community events, support and develop each other, share resources, and increase visibility of opportunities. Partnership working aimed to reduce barriers to engagement by adopting a ‘right front door’ approach, which allowed beneficiaries to access holistic support from partners other than the one they registered with.

This evaluation was commissioned to assess the impact of FFY. Based on the partnership's aims and objectives, the following research questions were developed:

1. What are the barriers to volunteering for chronically lonely people in Barrow-in-Furness and how does a partnership approach help tackle them?
2. How does a right front door approach help identify and recruit chronically lonely and hard to reach volunteers and keep them engaged for longer?
3. How do chronically lonely people experience engagement with FFY and how has that engagement impacted their subjective desire for social connection and belonging?

Approach

A qualitative approach was adopted to capture the experiences of staff and beneficiaries. To support different forms of communication and participant accessibility needs, a range of methods were used, including an anonymous staff survey, staff focus

groups, beneficiary focus groups, beneficiary interviews, and written testimony from beneficiaries. Data was combined and analysed using reflexive thematic analysis (Braun & Clarke, 2022).

Findings

In response to question 1: There are multiple barriers to volunteering and to becoming a beneficiary of services within Barrow-in-Furness. There are barriers to becoming aware of opportunities (e.g. IT literacy, reading skills) and barriers to attending, such as: psychological factors; health and wellbeing; care responsibilities; financial resources; and logistical factors such as transportation. Beneficiaries explained that volunteering requires greater skills and self-esteem than attending activities. Some beneficiaries said they hoped to volunteer in future, others said, as a result of FFY, they had gained the confidence to start volunteering. The partnership approach helped to raise the profile of activities and opportunities through word of mouth, presence at events, and social media advertising. Sharing of resources between partners supported attendance (for example, sharing premises in more central locations), while joint working at events encouraged social interaction between beneficiaries, enhancing a sense of community. Partners described experiences of working together as inspirational, supportive, and fun. Collaboration between organisations facilitated the sharing of expertise, promoted staff development, provided emotional and practical support of staff, and aided referrals between organisations.

In response to question 2: The right front door approach increased holistic care as partners supported each other's beneficiaries. Partnership working enhanced staff awareness of each other's skills and knowledge, strengthening working relationships between organisations. A community connector role was developed for the FFY partnership to increase engagement and help introduce beneficiaries to the right partner; however, very few introductions were made to organisations this way. Greater contact between the community connector and project staff could have enhanced the impact of the role by increasing communication of opportunities. A website was created listing

available activities and events (paid through local authority match funding); this had the potential to help partners increase engagement but was only completed towards the end of the project, thus limiting impact. The website will provide ongoing support for FFY.

In response to question 3: FFY was successful in helping beneficiaries create meaningful social connections. Beneficiaries said the number of their friendships had increased, noting the depth of these connections and the emotional support they received. Many beneficiaries described feeling cared for and valued as individuals. FFY beneficiaries were supported with a wide range of activities and events and given opportunities to volunteer. The perceived attractiveness of the opportunities on offer varied with individual needs and interests, thus, variety in content (e.g. arts and crafts, physical activities) and format (social groups, one-to-one support) was welcomed. Beneficiaries valued the compassionate approach demonstrated by partners and the non-judgmental atmosphere within groups. Many beneficiaries needed time and space to settle within groups, gradually building their skills and confidence in interacting with others.

Furness For You Evaluation Report

Context

In January 2023 The Department for Culture, Media and Sport (DCMS) launched the [Know Your Neighbourhood \(KYN\) Fund](#) with the aim of widening participation in volunteering and tackling loneliness in 27 disadvantaged areas across England. **‘Furness For You’ (FFY)** is a partnership of 10 charitable organisations that secured funding to tackle loneliness and social isolation in Barrow-in-Furness.

Social isolation and loneliness are distinct; social isolation refers to an objective lack of meaningful and sustained social contact (Poscia et al., 2018), whereas loneliness is subjective, representing a discrepancy between the social contact someone has and the social contact they wish for (Perlman & Peplau, [1981](#)). The importance of addressing loneliness as a societal issue, rather than an individual struggle, has been emphasised by the World Health Organisation (WHO). Their 2025 report highlights the need for community strategies in social connection and calls for further evidence of the impact of these approaches. Evaluation findings from FFY align to this call, contributing to the development of an international body of knowledge.

Barrow-in-Furness, located in the Furness peninsula of Cumbria, is a town of striking contrasts, where industrial heritage meets natural beauty, and community resilience coexists with deep-rooted social challenges. Challenges and opportunities of this area are outlined in a needs analysis report (Cumbria Community Foundation, 2021): Despite strong local identity and a tradition of neighbourliness, Barrow faces significant issues around health, poverty, and isolation. The area has one of the highest rates of health deprivation in England, with parts ranking among the 1% most deprived nationally.

Loneliness is a growing concern, particularly among older adults and younger people living alone. Age UK’s heat maps identify several Barrow wards – including Hindpool, Risedale, and Walney North – as “**very high risk**” for loneliness. These challenges are compounded by limited transport, digital exclusion, and economic hardship. Yet, Barrow’s

vibrant third sector and community spirit offer hope. Initiatives like FFY build on this strength, aiming to reduce isolation through compassionate, inclusive, and locally rooted interventions.

The development of the FFY partnership was facilitated by the local authority; collaboration between the local authority and the third sector gained momentum when the 'Community Poverty Working Group' (previously the 'Community COVID Recovery Group') rebranded as the Community Prosperity Partnership, expanding both its membership and scope. This initial partnership focused on addressing community needs arising from the pandemic and the ongoing cost of living crisis. While no funding was available, it created a better working relationship between the sectors, which subsequently enabled them to work together to apply as the FFY partnership when the KYN funding became available. FFY partners include: Age UK; Barrow & District Disability Association; Barrow Leisure Centre; Barrow Women's Community Matters; Brathay Trust; Cumbria CVS; Groundwork; Furness Multi-Cultural Forum; Stitch Ability; The Barrow Borough Poverty Truth Commission. While the local authority was not a FFY partner, they continued to work closely with the partnership, for example, a local authority officer chaired the quarterly partnership meetings.

Together, the FFY partners sought to engage and support local people who were experiencing social isolation and loneliness, including those who are harder to reach. A partnership approach meant FFY staff meeting regularly, collaborating on community events, sharing best practices, and creating closer working relationships. The hub, an accessible community space in a central location, was also funded where partners could run activities like social groups. A range of activities were offered across the partnership, which varied by organisation, to reach different beneficiaries and meet varying needs. Delivery included active sessions (e.g. Line dancing, archery, boccia, chair-based exercise), craft (sewing, printing techniques), art (diamond art), a lived experience commissioning project (experiences of poverty), outdoor activities (boating, gardening), one to one sessions (counselling), language skills development (English lessons), social groups (youth social group, chinwaggers group), wellbeing support (sleep advice),

practical support (community laundry), and volunteer care (access to gym and swim facilities for all partner volunteers). Beneficiaries had access to different activities depending on the partner they were working with. Across the partnership, there were volunteering opportunities which included supporting some of the above activities.

Beneficiaries had a range of ways to access FFY; they could directly approach partners or might be referred by stakeholders such as health and wellbeing coaches. Schools were able to refer children to Brathay, as were parents. To increase referrals into the partnership, a community connector role, hosted within Cumbria CVS, was created to act as a central directory point with an overview of the services and opportunities within the partnership. This role aimed to connect with the wider community, raise the profile of FFY and help to direct potential beneficiaries and volunteers to the most appropriate partner, thus reducing the extent to which individuals were 'bounced around' organisations.

The FFY partnership adopted a 'right front door' approach, providing a collaborative approach to delivery. This meant i) helping beneficiaries identify and register with the right organisation, and ii) recognising that many had a range of needs requiring support of multiple organisations, while ensuring they did not have to retell their story. Consequently, FFY organisations could work with beneficiaries who were not necessarily their own.

Based on the FFY aims and objectives, the research questions for this evaluation were constructed as follows:

1. What are the barriers to volunteering for chronically lonely people in Barrow-in-Furness and how does a partnership approach help tackle them?
2. How does a right front door approach help identify and recruit chronically lonely and hard to reach volunteers and keep them engaged for longer?
3. How do chronically lonely people experience engagement with FFY and how has that engagement impacted their subjective desire for social connection and belonging?

Approach

With agreement from the University of Cumbria ethics committee, this evaluation sought initial feedback from project staff in order to develop methods and materials. A qualitative approach was adopted to allow participants to share detailed accounts of their experience, provide contextualised answers, and to allow the complexity of projects to be captured.

A range of methods were used to give participants choice about how to engage with the evaluation. FFY partners invited beneficiaries to contribute to the evaluation and beneficiaries were able to self-select how or if they wished to participate. Data collection included:

- Individual in-person semi-structured interviews with beneficiaries x 5 (see Appendix 2 for questions).
- Focus groups with beneficiaries x 9 (See Appendix 2 for questions).
- Written stories of change from beneficiaries x 7 (see Appendix 3 for questions).
- Staff focus groups x 4 (see Appendix 4 for questions).
- An anonymous staff survey (Appendix 5 for questions).

In total, 109 participants aged 16+ took part in the evaluation across the beneficiary focus groups (n=60), individual beneficiary in-person interviews (n=5), written beneficiary stories (n=7), staff focus groups (n=17), and the staff survey (n=10). To protect the identity of the participants in this evaluation demographic information is not provided, data has been amalgamated across the partnership and identifying content removed. For some partners the number of participants was small and therefore, details about specific activities or projects would have been identifying. It was beyond the scope of the evaluation to compare projects, furthermore, each project had a different focus in terms of characteristics of the beneficiaries they worked with, so it would not have been possible to draw meaningful conclusions.

Limitations of this evaluation include the self-selecting sample of FFY beneficiaries who participated. These are i) beneficiaries for whom engagement with FFY was successful, ii) those who were still engaged with FFY at the point of data collection; We

cannot ask those who did not engage with FFY why they did not engage, nor can we ask those who stopped engaging why this was the case.

Additionally, participants were those who felt able to participate in the evaluation and had the availability, resource, and health to do so. To reduce barriers to engaging in the evaluation a range of methods was adopted to maximise accessibility; it was recognised that beneficiaries and staff had differing needs, preferences in communication, and varying levels of confidence.

The data were combined, and reflexive thematic analysis (Braun & Clarke, 2006; Braun & Clarke, 2019; Braun & Clarke, 2022) was used in six phases: familiarisation with the data; coding; generating initial themes; developing and reviewing themes; refining, defining and naming themes; writing up. This was a data-driven, non-positivist, semantically themed, qualitative approach that acknowledged subjectivity in the interpretation of data. Where possible, themes are presented in chronological order to help communicate the narrative from a beneficiary perspective.

Beneficiaries of the funding included those who attended activities and services within FFY, and those who volunteered; within the findings, 'beneficiary' refers to everyone who engaged with funded work. For data collection and analyses beneficiaries and volunteers were treated as one group because it was not meaningful to separate them. Individuals often flexed between the two categories (e.g. receiving support such as English lessons, and contributing skills such as painting) or, over time, progressed from being a beneficiary to becoming a volunteer (this development is described within results). Capacity, resource and readiness for volunteering were described by beneficiaries; barriers to attending activities and services were also barriers to volunteering.

Results

Findings from the evaluation are presented below, these describe 1: The engagement of beneficiaries, 2: Suitability of activities, 3: Sensitivity of delivery, 4: Impact of engagement, 5: Development of partnership working.

1. The engagement of beneficiaries

This theme describes the ways in which beneficiaries were engaged by the partners, including how they heard about the activities on offer, what barriers they faced in becoming involved, and how the partners helped to encourage and support engagement.

1.1 Communication and awareness of opportunities

Participants in this evaluation explained that communication is an essential aspect of engagement, however, overall, there is no single mode of communication which is best. For some beneficiaries, social media was their preferred way of communicating, preferring social media channels like Facebook rather than websites.

Other beneficiaries noted that social media content allowed them to find out more about the activities on offer and judge whether they would be accepted: **“I was like, can I fit in here?... so just stalked them on social media.”** Social media, however, may not reach everyone: **“If you don't really use the Internet, you don't know about these things.”** (Beneficiary). Staff noted that within messaging and marketing the use of the term ‘lonely’ or ‘isolated’ could be problematic. **“Many people who access this project, while actually are incredibly socially isolated or lonely, do not identify as being so, or have gotten so used to being alone do not see themselves as being eligible to attend.”** (Staff).

Printed information in advertising activities was helpful (for example, leaflets and notice boards). Staff noted that for beneficiaries who did not read, verbal information was important, whether this was through a friend, family member, or another service, highlighting the benefits of working with external partners to support referrals into the

partnership (for example, health and wellbeing coaches, schools, or GPs). However, referrals from other services required referrers to understand the services on offer and to be able to identify who would benefit from the service. Staff noted that lonely and isolated people are often “invisible” and that lots of referrals can be missed “**through a lack of either understanding or awareness**” in the referrer. Although education may be helpful in overcoming lack of understanding, interpersonal interaction is needed in order to ‘see’ whether someone is lonely and would benefit from referral. Referrer interactions with clients are less frequent and more superficial as workloads increase, which means that capacity and staffing impact the identification of beneficiaries. For example, school referrals of children to FFY partner Brathay are less likely where the ratio of pastoral staff to children is stretched.

Outreach work was undertaken by the community connector to generate referrals into the partnership; this included strengthening existing links with stakeholders such as social prescribing teams, health and wellbeing coaches, and food banks. In addition, community events and open drop-in spaces were attended to increase visibility; this was welcomed by partners. However, there is a lack of evidence to demonstrate the impact of these outreach activities; there was very limited evidence of successful referrals directly into the partnership from the community connector. Impact of outreach may not have been visible where i) it generated interest in volunteering with organisations outside the partnership; ii) beneficiaries were referred to the partnership from external stakeholders but this was not attributed to the outreach work: “**I was dragged by my health and well-being coach**”; iii) beneficiaries decided to approach the partners directly rather than going through the community connector for referral. Future work may be enhanced by relationship building between partners and the community connector so that existing opportunities can be more easily communicated and promoted, or new opportunities developed.

1.2 Economic and practical barriers

Financial barriers to engagement were highlighted by project staff as a key issue in engagement, firstly in hearing about opportunities and activities as beneficiaries might not have had a phone or internet. This could extend to not having an address or method to be contacted.

Poor weather deterred beneficiaries from walking to activities. Partners had sought to deliver activities in accessible places where possible, which included finding places on a bus route, however, those who sought public transport often found it unreliable or unavailable. Issues of transport highlight the ways in which delivery was impacted by factors outside the partner's control. **“We’re like the 105 mile cul-de-sac joke... we don’t have a decent public transport service to even get us anywhere.”** (Beneficiary). Staff also noted that using public transport requires personal resource: **“Have you got the confidence to jump on the bus? I don't know.”** This was supported by beneficiary testimony: **“I couldn’t even get outside the front door. Couldn’t walk 6 foot up the garden path before we started.”**

It was highlighted that attending activities often required money for transport or other expenses which may be unavailable. Beneficiaries explained that they might be on benefits or fluctuating income and that travel and admission costs were a barrier, so making activities free was important because: **“You don’t feel guilty about having spent money that you could be using for other things.”** (Beneficiary).

While employment could ease financial pressure for beneficiaries, this could become a barrier to availability. Staff recalled testimony of a beneficiary who told them: **“I am extremely lonely. I only exist between work and walking the dog,”** illustrating that there may be people experiencing loneliness despite social connections. Evening activities have the potential to increase accessibility, but some beneficiaries explained that evening sessions deterred them from engaging when **“it's cold, it's raining, it's too dark.”**

There were examples of beneficiaries helping each other with car share, and how helpful it was if someone **“... gives me a lift ‘cos it’s a bit far to walk... I suffer with a heart**

problem.” As this quote illustrates, health was described as a significant barrier to attendance: **“I literally could not stand up. I couldn’t get out in the wheelchair which is in the shed.”** (Beneficiary). This represents an important issue in Furness as long-term illness rates stand at 23.5% (Cumbria Community Foundation, 2021).

Further barriers to engagement were caring responsibilities that impacted availability to attend sessions: **“Sometimes I think when you’re mums and grans... sometimes that can be quite an isolating experience.”** (Beneficiary). These demands could fluctuate, making planning more difficult, so flexibility in attendance and not having to book in advance helped: **“It was really just drop-in, I didn’t have to make a commitment to be there every week... I wouldn’t be able to do it without the flexibility.”** (Beneficiary).

1.3 Guiding expectations and overcoming psychological barriers

Beneficiaries told us that, after learning about FFY, it could take months or years for them to attend the activities and services on offer. They told us that they needed time to seek information, become familiar with organisations, overcome fear, form intentions, and plan action. During this period, some beneficiaries had contact with FFY through social media, telephone or e-mail; this allowed partners to encourage beneficiaries, structure their expectations and build trust. A significant amount of work and high levels of skill was demonstrated by FFY partners in supporting beneficiaries and putting them at ease.

Beneficiaries were candid about the psychological challenges they faced in joining new groups or attending activities. This included feeling afraid: **“It’s the fear, I think. You want to be around people but you’re just so fearful.”** Beneficiaries described their anxiety about coming to groups and the time they took to build themselves up: **“I did hover behind the front door, least half an hour, but pacing the floor.”** Feelings of fear included concern about being judged, for example, because of disability: **“Now I’m walking with a walking stick and I think... are people sort of going to judge me?”** (Beneficiary). Fear of judgement relating to age, appearance and clothing were shared: **“I thought, well, am I too old? Am I too old to come?”** (Beneficiary).

Staff acknowledged beneficiaries' fear of attending a new group and explained that their work included trying to reassure people and challenge negative expectations: **"It's like [they] don't want to go to social group because no one will talk to [them]... having never been there."** Project staff worked hard to help prospective beneficiaries gain familiarity with their project, including the physical environment. Beneficiaries described the positive effect this had: **"I got an email and they said what they did and things. So, I knew what I was sort of like coming to."** In addition to email, other methods of contact were chosen by beneficiaries: **"I chatted quite a bit on messenger with them before I came."** Some beneficiaries welcomed the opportunity to visit the project outside of group time, **"They let me look around and see what I felt."**, while one project had **"a 360 video"** for those who did not feel able to attend so they could view remotely.

Beneficiaries described concerns about attending a group for lonely people: **"I wasn't sure what I was walking into. What the group would be like... you know, is everybody going to be very morose and miserable?"** Staff also had to work to structure the expectations of stakeholders who could refer beneficiaries into FFY, for example, emphasising the confidential nature of counselling. Several beneficiaries described the importance of support in attending an activity for the first time: **"My wife, my son, keep saying to me 'no, you need to go'."** Courage was noted by a number of beneficiaries, and that they had needed to take a chance in trying something new and that this took effort: **"I do have to make myself [go] sometimes."** Beneficiaries acknowledged that **"the only person that can actually get you onto that doorstep is yourself."**

Once a prospective beneficiary had decided to engage with one of the organisations, some found it difficult to put their plan into action. Hesitancy was described, including people getting to the meeting place but not going inside: **"I've had people that I've met who, you know, have waited five steps down outside the door."** (Staff). This aligned with beneficiary experiences, with one describing how difficult it was to get out of the car and go inside: **"In the first couple of weeks, I couldn't make it... I drove here and I got to the car park, and I was like, I can't do it. I can't go in... Yeah, I got really, really anxious and agoraphobic through COVID. So, it was just – I just couldn't get myself in. And then I tried**

again the next week and I just sat and cried in my car and didn't come in again. And then the next week, I was like, I have to go. I want to go so bad.” Importantly, this can be experienced by beneficiaries even after successful initial engagement. The barriers are **“actually fighting against yourself, basically.”**

Support from stakeholders such as health and wellbeing coaches was experienced as really helpful in taking first steps: **“They kept ringing me up and saying, well, then why don't you just try coming along and I'll meet you there. You don't have to go in on your own.”** (Beneficiary). Others described going with friends because **“coming on my own, it would have been a bit daunting.”** Project staff noted the support required to help someone attend an activity could be extensive: **“It could take like a year's work to get them to social group.”** Beneficiaries talked about feeling glad that they had overcome their fear and attended groups: **“I was very down and depressed, but more anxious than anything... this group actually helped people with anxiety... I thought I'm on my own. I have to get out. I have to do something and it's the best thing they ever did.”**

It was noted that it helped to be able to share experiences: **“You're not on your own, people have been through the same...”** (Beneficiary). The ability of staff to welcome and reassure beneficiaries across FFY was highlighted: **“You just feel so welcome... It kind of helps and distracts you”** (Beneficiary).

1.4 Process and paperwork

When beneficiaries joined an FFY project they were asked to complete a partnership registration form along with an initial quantitative survey (unrelated to this qualitative evaluation), which included questions about loneliness and mental health. The purpose of this was to help provide evidence on the effectiveness of funded activities. To provide context, in 2022, the public accounts committee published a report that concluded it is essential to know if government spending is making a difference: the quantitative surveys aimed to provide this data. However, completion of paperwork requires comprehension, communication skill, and for beneficiaries to be in an appropriate state of physical and mental health. This is pertinent given the psychological barriers noted in 1.3 above, and

that beneficiaries included those with English as an additional language, chronic health conditions, impairments, and cognitive differences. Paperwork was therefore experienced as a barrier to joining FFY.

Staff reported that **“several lengthy questionnaires have been very off-putting for vulnerable people,”** and that beneficiaries had found it **“quite intrusive,”** particularly where they included questions about loneliness and isolation. Staff noted the stigma of receiving support: **“They don't like to admit that they're struggling,”** and that **“mental health challenges like depression and anxiety... initially may be concealed by beneficiaries.”** Supporting beneficiaries to fill in the survey took staff time so there were **“constraints in terms of completing required paperwork.”** Staff explained that paperwork was seen by some beneficiaries as a sign of authority, which introduced a power dynamic that beneficiaries experienced as anxiety-provoking. Often, beneficiaries had bad past experiences of completing forms, for benefits, for example, or the home office. So, forms for volunteering were experienced as **“a very official process.”** (Staff).

Although project staff understood the rationale for signup paperwork and a quantitative baseline survey, they explained how it forced beneficiaries to be labelled as someone seeking help, and that it was uncomfortable for people to say **“I'm lonely can I come into your group.”** Staff noted that the stigma of seeking help may lead to feelings of shame: **“People would... in my opinion, be embarrassed by the fact that they don't have that regular social connection.”** In addition to the stigma of loneliness, paperwork presented a communication barrier to those unable to read, leading to feelings of embarrassment.

Beneficiaries disclosed feelings of shame, either relating to their loneliness or other underlying issues. They indicated that they were reticent to share their feelings with strangers: **“I think it's just talking about it in general, it's just. It's like being ashamed... you don't want to discuss it with strangers.”** Some had not even shared their feelings of loneliness with their families: **“You want to keep it from your family so you don't upset them.”**

An additional issue identified with paperwork was sensitivity over the timing of completing it. Regarding loneliness and isolation for example, it is not appropriate **“in the middle of a crisis to ask a lady to fill out a survey.”** Nor was it seen as appropriate to ask questions before trust and rapport had been established with beneficiaries: **“The time to ask that question is when you've built the relationship.”**

2. Suitability of activities

This theme describes how appealing activities and opportunities were, noting subjectivity in preferences of beneficiaries.

2.1 Attractiveness of activities and opportunities

Beneficiaries were attracted to different activities. Some preferred wellbeing activities such as mindfulness while others noted the appeal of physical activity: **“It’s invigorating really.”** Whether an activity was attractive or subjective, for example: **“There are some of the activities that I don’t come to... the chair-based exercise... it’s just a personal taste really.”** Staff also noted that variety helped keep beneficiaries engaged as it might be boring **“doing the same thing”** all the time. Some beneficiaries highlighted that the actual activity did not matter as much as the social connection. Nonetheless, the activity made them less self-conscious and conversation less awkward: **“Having the activity gives you something to talk about;” “There was something to focus on as well which made it easier.”** Activities also provided beneficiaries with opportunities to have fun: **“We all have a good laugh.”**

For some beneficiaries it was just the social connection that encouraged them to attend, rather than the project itself: **“The main thing for me was actually knowing that you're not alone.”** For those with children it offered adult company: **“I need to talk to other women and other people.”** Some beneficiaries indicated that joining FFY projects felt like joining a community: **“When I arrived, I was alone... so, I came to this community.”**

Many beneficiaries took up volunteering activities within FFY, describing how they were glad of an opportunity to give something back. A range of opportunities were available within FFY, for example: community commissioners shared lived experiences of poverty; craft activities, such as sewing, allowed volunteers to contribute within a social enterprise; social groups within several projects were facilitated by volunteers. However, feedback from staff suggested volunteering opportunities in FFY partners could be extended in future to include more outdoor activities, including environment-focused projects for beneficiaries seeking something **“outdoorsy... conservation,”** for example.

Staff comments on overall low volunteering numbers in FFY included a reflection that it’s **“just how society is at the moment.”** Furthermore, staff highlighted that the barriers to engagement are amplified for volunteering compared to general participation because, generally, the psychological demands placed on volunteers are greater.

2.2 Accessibility

Staff and beneficiaries described ways in which activities were made accessible for people with mobility issues, chair-based exercise for example: **“Whether... your mobility’s affected or not, you’re still welcome and you can still do it.”** (Beneficiary). Inclusive group activities were also helpful: **“We get into teams... Boccia is accessible for anyone... being seated for that activity probably makes that a lot easier.”** (Beneficiary). Accessibility also included sensory requirements and the importance of quiet spaces were noted by staff: **“I’ve got a breakout room as well for when people are struggling... when it gets noisy.”**

For visual impairments, support was provided in arts, for example: **“With the diamond art... you can get a lightboard,”** and aids were available to support dexterity: **“When teaching knitting, we have special needles. And we also have special crochet hooks.”** (Staff). Beneficiaries highlighted the importance of disabled parking.

3. Sensitivity in service delivery

This theme describes the manner in which activities and opportunities were delivered, including the importance of a compassionate, non-judgmental atmosphere, and flexibility to accommodate different needs.

3.1 Compassion

The non-judgmental approach to delivery was very clear in the testimony of beneficiaries: **“It doesn’t matter... who you are, what you are, where you’ve been, where you’re going, there’s no judgement.”** In addition to having space to talk, beneficiaries felt staff **“listen as well.”** Beneficiaries described feeling accepted as they are: **“They might have had problems in their life with whatever, drugs, drink, homelessness, could be absolutely anything. But when we come to this group, we’re in a way, I suppose, a bit like a family in the end.”**

As the above statement notes, the non-judgmental atmosphere goes beyond the staff and extends into the group. Setting up these dynamics was a key part of delivery. Partners worked to set a tone of compassion and kindness by, for example, displaying words of positivity and encouragement on the walls (Appendix 6). Across the partnership the dynamics within groups were said to be respectful, supportive, and confidential: **“It’s very open but it’s also very confidential at the same time.”** (Beneficiary). Beneficiaries mentioned that there were no cliques: **“I thought it might be clicky but it hasn’t been.”**

Food and drink were welcomed by several participants as this made them feel cared for: **“Just having a cup of tea offered... It’s a human thing... I think people appreciate, you know, to recognise somebody’s suffering a bit and to try and ease that suffering.”** In addition to the care from individual partners, all those undertaking formal volunteering activities were offered free gym passes at Barrow leisure centre, these were taken up and appreciated. Staff noted: **“It gives them something to do outside of volunteering and [it means they are] rewarded for offering their time to help us out.”** Beneficiaries also noted that gym memberships had a significant impact on their health: **“I lost weight. I’m so happy!”** (Beneficiary).

Across settings and activities, beneficiaries explained that they could talk if they wanted to, that they had choice: **“It’s never pushy,”** but that the offer of support was always there: **“They’re just saying, oh, well, if you need anything or need anybody, you know, we’re here.”** The compassionate atmosphere made it easier for beneficiaries to share thoughts and feelings: **“If you do have anything on your mind, then you can just talk to them.”** While activities were not pushy, encouragement helped: **“You’re getting that little encouragement. It all feeds into your self-esteem.”** Beneficiaries described how they did not feel they needed to pretend or mask their mood, this made attendance less demanding: **“It’s a nice and welcome place and you know, like you don’t have to basically put a lot of effort on yourself, just be confident. You’re able to be yourself.”**

3.2 Offering flexibility in delivery

Staff had worked hard to be flexible and to make sure everyone was included and felt valued. Beneficiaries explained that **“they know us as individuals... individually we feel important to them.”** Beneficiaries talked about the ways that their past experiences had led them to seek control of their spaces and this was acknowledged by project staff. Some staff described rooms being set up so that people had a choice about how to engage in activities: **“There’s like different areas set up. So, there was a sofa with the television on... and then a station set up for the sewing and then another table where everybody meets up.”**

Group size was something that mattered to beneficiaries and offering a range of groups with different dynamics was appreciated. Large groups were experienced by some beneficiaries as overwhelming: **“There’s 40 people in there and I ran out. I just legged it... I was scared. Because I have really bad social anxiety, really bad, and I haven’t been out of the house for 10 years, so I haven’t seen anybody. So, to see... all that noise as well? No, I was petrified.”** Smaller groups were easier for those just starting to socialise again: **“It was nice just to get weaned into it.”** Staff highlighted the impact of group size on dynamics as smaller groups made it easier to form relationships with beneficiaries: **“We need to know the people that we’re working with.”** Group size also impacted

beneficiaries' ability to establish trust and manage privacy. Several partners offered groups that were designated as quiet; this allowed beneficiaries to engage in activities without the noise or the demands of managing conversation. Wanting contact while avoiding overwhelm was highlighted as particularly important beneficiaries with autism: **"Like most autistic people, I spend a lot of time on my own, so it's just trying to find ways of doing things without actually doing too much."**

Project staff worked hard to engage beneficiaries by responding to their needs and interests and asking them what they wanted, whether they wanted individual support for example: **"If you want to go to one-to-ones first, you do one-to-ones."** For some partners this also included asking beneficiaries what activities they wanted within groups: **"I quickly asked them what do you want to do next week? Oh! can we do some more cooking? What do you want to cook? Oh, can we do pancakes?!"**

Aiding communication was highlighted by both staff and beneficiaries, in both encouraging expression and in supporting information processing. For example, describing flexibility in counselling approaches: **"It's really good to use sand or figures because if they're struggling verbally to talk to you, you know they can use them to help get that across to you."** Flexibility, patience and care in giving instructions was highlighted as supporting engagement with activities. Beneficiaries with ADHD noted just doing one thing at a time was important: **"They show us step by step how to do stuff and that's how I learned better."**

Finally, flexibility in time commitments was something that beneficiaries who were volunteering highlighted as important and this helped them re-engage after taking a break: **"I'm always told just do what you can whenever it suits you, whenever it's convenient for you."**

4. Impact of engagement

This theme highlights the significant ways engagement impacted the lives of those involved in the FFY partnership.

4.1 Timelines

Timelines are an important aspect in outlining the impact of FFY because these can help to describe the developmental path taken by beneficiaries. Progress was often noted as being gradual because it took time for beneficiaries to gain familiarity, learn coping strategies, and build trust with the project staff and other beneficiaries. The time taken to accept an invitation to attend initially could be months or years: **“It took me a year. It took me a year to actually accept it.”**

Staff agreed that some beneficiaries needed weeks of support to attend a group and emphasised the individual variation in the extent of psychological scaffolding needed but noted: **“If you look at the quantitative data, one person is one person.”** Engagement work could have a significant impact on a beneficiary: **“Just turning up on the first day is the biggest success they'll have,”** and represents significant progress. Partners also described how much work was needed to help some people stay engaged: **“One person might turn up and not come back.”** It is therefore important to acknowledge the amount of work partners did with beneficiaries they saw only once, transient populations, for example, or those who had been moved out of area by the home office. It isn't possible to measure impact for these beneficiaries.

For some beneficiaries, one-to-one support was an important first step in becoming ready to socialise, staff noted: **“We're here to put strategies in place to help emotions, to help coping strategies.”** Beneficiaries described this: **“When I started coming to the one-to-ones, it kind of got me to think about the group sessions as well.”** As noted here, the one-to-one sessions aided progression to groups. Joining social groups was for some beneficiaries something that needed time to build confidence and familiarity, being dropped off: **“Just for that half an hour to start with... and then built him up.”** (Staff). Beneficiaries said how groups got easier with time: **“I was a bit nervous on the first visit.**

Second visit, it got better;” “I was a bit shy at first... Yeah, I wouldn’t talk to anybody when I first came.”

Beneficiaries frequently described this process as allowing them to gain trust, something that took time because of bad past experiences: **“I’ve had my trust broken numerous times.”** Consistency and time were needed to help: **“I think over time when you come for a while, and you realise... they’re not suddenly going to start criticising you. It never happens.”** (Beneficiary). While beneficiaries talked generally of positive impact, they noted how sharing past experiences could be painful and that caution was needed.

Gaining confidence was described by beneficiaries as being gradual: **“I’m taking my own time. Little by little until I get, like a bit more confident,”** and it was noted that progress was not always linear: **“Sometimes them dips happen.”** Some beneficiaries described how they were gradually working towards volunteering: **“I do want to go further. I want to, like, start volunteering... but that's just something I've got to build up to.”**

Readiness and progression to volunteering were noted by staff as being something that beneficiaries may need to work towards: **“It's a huge journey for some individuals, you know, to get to that stage.”** Even once someone decides they want to volunteer, it can take time to get to the point of **“actually doing it.”** Some described how, over time, being a beneficiary had enabled them to become volunteers: **“I've never volunteered before in my life. I've never felt I was good enough actually... I couldn't have gone there if I hadn't been here.”**

An important aspect of the developmental timeline will be the impact of project termination; this was discussed as part of the developmental journey of beneficiaries and the trajectory they had. Sadness was expressed at the prospect of the projects ending, and beneficiaries described how they felt they had to disengage or find alternative groups to join in order to manage this: **“I just hope this place is or something like it carries on. Because I have come to quite depend on it for company and I keep thinking you must look elsewhere, broaden your horizons a little bit.”** Some beneficiaries did not know what their next steps would be: **“If that was taken away. I don't know what will happen.”**

Project ending was experienced as upsetting by some beneficiaries: **“It’s cruel to take it away again. You can’t keep doing that.”** Staff echoed concerns about the impact of projects ending: **“I feel the sense of responsibility that we’ve actually come to the point where we’ve created in our community an expectation.”** These quotes emphasise the importance of understanding the impact of project termination, or transition, if services change.

4.2 Experience of engagement

For many beneficiaries, a clear impact of engagement was the way it enhanced their mood and relieved distress: **“You go away feeling better about life and yourself. You wouldn’t think that most of us in here have got anxiety, would you?”** Consequently, beneficiaries described a decline in mood if they did not attend: **“I think my mental health’s dipped a lot because I’ve not been coming out as much.”** Different types of activity created different moods, being calming, for example: **“The diamond art is, it’s very relaxing,”** or mentally stimulating: **“It keeps the brain going,”** while exercise was noted as being invigorating. Relaxation therapy was experienced as effective with beneficiaries describing: **“Walking out and you’re like, dee de dee in a daze, having a happy day.”** Staff noted that relaxation helped people to talk: **“No one likes to be put... in a corner and have someone say, ‘right, tell me your problems’.”**

Activities helped beneficiaries deal with other life events, such as bereavement. Many reported that activities provided a welcome distraction: **“I’m not sat at home moping and upset, basically.”** One described how: **“It gets your mind away... you know, you focus on the craft.”** Beneficiaries also described missing the groups when they were not able to attend and some noted the importance of getting out of the house: **“It would literally be so easy just to sit or even stay in bed all day.”** Having activities to attend also provided structure: **“I have to have a routine,”** and something to look forward to: **“I hate the weekends, but I get through the weekend because I know I’m coming here on Monday... do still get very lonely because the future stretches out ahead... you know you’re on your own.”**

The timetable of the activities provided a schedule which gave people motivation to: **“Go and have a shower, get dressed, and go.”** Without the activities, beneficiaries described a tendency to ruminate: **“I can struggle with my head in privacy of my own home.”** Activities felt like an accomplishment: **“Doing the chair-based exercise... you do get a sense of achievement.”** Achievement was echoed by those undertaking volunteering activities: **“There's a real sense of purpose, and it's absolutely brilliant.”** Working together created a sense of unity and mental focus. Project staff acknowledged the importance of celebrating achievement: **“Receiving a certificate at the end of the term. Is like them winning an Oscar.”**

4.3 Personal growth

A prominent aspect of the impact described by beneficiaries was personal growth. As the above themes have noted, confidence was an important aspect of this, but closer examination shows this to be confidence in specific areas such as social skills and practical skills which ultimately led to greater independence: **“It's helped me improve my confidence a lot, talking to people and socialising.”** For some beneficiaries, the extent of this development was marked, explaining that they had avoided socialising for decades: **“When I came to this, I hadn't really been out. Well, 30 years really... shut myself away because I was just a failure... I do I look forward to coming here... I've come out of myself a little bit. I'm a different person.”**

Practical skill development was described by numerous beneficiaries, for example sewing skills: **“It's so enjoyable. Yeah. To learn a new skill.”** It was noted that FFY had broadened learning aspirations: **“Different things which I would not have even dreamt of doing that before.”** Beneficiaries described feeling proud of their achievements: **“It's like a product that I finished, like I did it by myself. Like, just like this, I made it by myself, without anybody's help. Like, I feel proud of it. And we sold it at the weekend.”**

Social skills were also highlighted as key areas of development. **“I was more quiet and reserved and quite unsure of myself... this, this has changed my life... being able to properly communicate with people.”** Skill development included, for some beneficiaries,

language skills through English classes: **“Language is very important... you must start learning and explaining yourself.”** These classes had helped beneficiaries connect with others. Across the partnership beneficiaries described increased independence: **“We can help ourselves; we can help other people as well.”** The increase in confidence and independence had led beneficiaries to be able to undertake training and some had successfully sought employment: **“Places like this have given me the confidence to come out and I’ve even got a job now and everything.”**

Impact on wellbeing was described by beneficiaries who had become more active, and that this had improved their health: **“I’ve lost lots of weight by just going to this activity.”** Mental health changes were described: **“I used to be agoraphobic.”** Improvements to self-esteem were outlined from volunteering: **“My experience is that it's massively helped me because when you retire you feel that you're not useful anymore.”**

4.4 Social connection and community

Throughout interviews and focus groups testimony of the creation of community and personal relationships were prevalent and highly valued. Beneficiaries noted that people would check in on them if they missed a session: **“If I don't show up at some point?... They always contact me, see if I'm OK.”** This made them feel valued: **“People notice when you’re not here.”** This went beyond staff checking up and included group members looking out for each other: **“We do take notice that so-and-so didn’t turn up today and we try to check on them.”** Some volunteers described how they had been sent gifts after they were unwell: **“It made me feel like as if I was quite special.”** Sharing experiences helped beneficiaries feel supported and cared about, they described no longer feeling alone: **“There's a lot of people I talked to that are very kind of withheld because of their previous experiences with life and people and isolation. And I think just talking about things sometimes... oh, yeah, I was like that and you realise, you know that you're not alone with that thought.”**

The changes to social connection and belonging were described by beneficiaries. The changes for some were striking, one beneficiary reflected how things were before **“that**

isolation... I had no-one in Barrow to talk to at all. I would find myself going shopping just to speak to someone at the till.” For those with social connections outside of the group new friendships were still important: “Often it’s the only time I see different people other than family.” Several groups described feeling like a family and they appreciated caring gestures: “He makes really nice cakes.” Some noted ways in which they kept in touch outside of activities: “We have a WhatsApp group;”, “We have a Facebook group;”, “I let them know via Messenger whether I’m coming or not or if I’m going to be late.” Closeness was described by some beneficiaries, including physical contact: “That can mean a lot as well. Just getting a hug off somebody.”

4.5 Gratitude

Beneficiaries expressed sincere gratitude for the help they had received: “To be helped by someone who doesn't know you is emotional.” In return, many expressed a desire to give back: “I can help other people. I learned I want to give.” When partners ran events, the beneficiaries wanted to help: “You have to be there to do something you know, because of what they've done for us.” One beneficiary was adamant that “anytime when they need us, we will be there for them or if they need that, they need us to volunteer somewhere. We will avail ourselves.”

5. Development of partnership working

This theme describes the impact of partnership working and ways in which this approach supported the delivery of FFY. Staff acknowledged the challenges of working together, including logistics, but described how the partnership evolved with time.

5.1 Relationship building

A key benefit of the FFY partnership was reported to be the relationships that had been built between the partner organisations. Some partners felt that physically getting together was important: “The most beneficial meetings we've had were when we're all together.” Joint events were described as an important mechanism to “bring the

partnership together.” But further than this they had been enjoyable and uplifting: “I've never had so much fun!” so although the events had an important function, “it's been more than just something to share promotion. I think it's been about emotional connections and friendships.”

Over time partners got to know each other better, including “the individual people within those organisations... it's created more of a shared understanding.” Stronger relationships included trust and a sense that the partnership was “non-judgmental and it's a safe place. And we've been able to talk freely.” Partners described how knowing each other better had enhanced communication and being able to support each other: “If you don't know something, just ask.” The project staff described how they could always “pick up the phone” to each other.

Partners explained that a legacy of FFY would be “an established partnership of connections and friendships,” and the knowledge that people in the partnership “really care.” Staff emphasised the trust they had in each other and how important this was as a foundation of their working relationships. One achievement of the partnership was a sense that “we've done it together and it's been a great movement and a great shared experience.” Knowing each other better had raised the profiles of organisations with each other and meant that partners could “learn from each other.” For example, one partner described how they had “learned from the other organisations and how they create the relationships with the beneficiaries” and another that they listened in meetings to see “what are the people doing, how they're doing it, can we apply it?”

5.2 Resourcing

As the partners got to know each other they learnt more about each other's skills and knowledge so they were able to benefit from that expertise. Partners described this as a shared resource: “I've asked if it's within somebody's remit... so, if it's been about a beneficiary, (and) I'm not quite sure whose is the right front door.” Staff noted that dedicated resourcing, explicitly for relationship building and communication would have been helpful, and it would be beneficial to visit each other at the start “and feel the

programme that they're running.” However, partners had differing amounts of time and budget for their contribution to FFY and saw this as a barrier. While some organisations were entirely focused on the FFY, for others it was a small fraction of their work which limited availability for meetings. The capacity of partners to offer volunteering placements was also noted as something which could be expanded; this would require more resource to scope what volunteers could do and how they would be supported.

The right front door approach was described by staff as the provision of wrap-around care: **“Holistic support for each other's clients... has just been amazing.”** Peer support such as sharing of skills and knowledge was also valuable to staff, noting that FFY partners were **“there when we've needed it.”** It also helped beneficiaries because **“a person can enter one door and be open to all the services available.”** The relationships between staff reinforced **“that personal knowledge of what those people are like and their names”** so that beneficiaries could be introduced in a more personal way. This approach also helped support beneficiaries as their needs or eligibility changed, for example, as they moved from youth to adult. Furthermore, within families, **“the needs of the young people can be mirrored in parents and older siblings,”** therefore a partnership approach meant that whole families could be supported. However, referrals between partners were more difficult where partners had tighter inclusion criteria (i.e. age), restricting the ability to introduce someone.

A benefit of the FFY brand was the increased visibility this gave individual partners at events and a chance to work together for recruitment and referrals. Shared resources included mechanisms to drive referrals into the partnership. However, there had been confusion about the community connector role, with partners having a **“different idea about what the community connector should be doing.”** One partner noted that the role had needed clarification as connecting external stakeholders into the partnership rather than connecting the partners to each other. A key element of learning would therefore be that partners need to check shared understanding of resources and roles. Staff highlighted that the community connector role was part-time, and this made it more difficult to attend meetings or events.

Through local authority match funding, a website was constructed that helped to collate and organise the activities and opportunities within the partnership. Without the website, the task of sharing events and volunteering placements had been more difficult because timetables changed often and frequent communication between partners was needed to ensure events did not overlap. The website was described as **“an amazing tool,”** and its benefits included 24hr availability of publicly accessible information, although, website development was delayed, which reduced its impact so far. It will continue to be updated, thus being an important legacy that will support projects going forward.

A further benefit of the FFY partnership was the sharing of facilities and this included the hub, a meeting space in a central, accessible location in Barrow. Other shared facilities included leisure centre facilities, involving gym and swim passes for volunteers and showers for those needing them. Funding also provided pedalo boats at the leisure centre outdoor lake, which was an additional activity for FFY beneficiaries (see appendix 7). However, delays in publicly announcing the funding (Nov 2023), meant that FFY was unable to promote the activity to the community in a timely manner, limiting early engagement and awareness over the summer period. **“We couldn't put the boat in the water until mid-September... It's not exactly the nicest weather to be on a pedalo.”** Delays also impacted outreach work: **“Several months of project were lost because we were not officially allowed to have any communication.”** This quote highlights the time needed to advertise opportunities in advance of activities and services starting.

Summary

Overall, FFY was successful in engaging beneficiaries and helping to increase their sense of social connection and belonging. Beneficiaries described how, gradually, they had developed skills and confidence and had gained trust in staff and other beneficiaries. Participant testimony demonstrates the high levels of perseverance, skill and sensitivity shown by project staff in engaging beneficiaries and supporting them to attend the activities and services on offer. Beneficiaries had a wide range of needs and FFY projects worked hard to accommodate them, offering a variety of activities using a range of formats.

Overall, the partnership approach provided peer support and strengthened working relationships between FFY organisations; these relationships will be an enduring benefit of the funding.

Conclusions and recommendations

Staff and beneficiaries of FFY have provided in-depth insights about community strategies for building social connections. The following conclusions and recommendations can be made:

1. Long durations are needed for loneliness interventions to have an impact.

Due to the psychological barriers to engagement, it may take months or years for beneficiaries to engage, then longer to gain familiarity and trust as they build relationships with staff and each other.

2. Multimodal communication is needed to promote activities and services (e.g.

print, telephone, online content) to reduce barriers to engagement such as reading ability, visual impairment, or tech poverty. Information and encouragement help beneficiaries prepare by building their familiarity with projects and staff. Positively framed messages can make projects more inviting, reducing perceived shame in help seeking.

3. Sign-up paperwork should be minimal. Potential beneficiaries may be embarrassed to ask for support with loneliness or feel self-conscious receiving help. Paperwork can deter engagement because it prolongs the requesting of help and thus increases discomfort.

4. Alternative formats for sign-up may reduce barriers to engagement.

Beneficiaries may be unable to read or write or lack confidence in doing so. They may need support with physical and visual impairments or cognitive differences; lengthy questionnaires may be overwhelming or time-consuming and require staff support. This reduces independence and increases the visibility of difference.

5. **Questionnaires measuring social connection should be positively framed.**

Those in a vulnerable state may find questions about loneliness invasive and upsetting. Stigma may also encourage underreporting of loneliness.

6. **Measurement of the impact of loneliness interventions needs to take into account the work required to support a beneficiary to the point of joining a project.**

Furthermore, an important proportion of work may be single encounters, for example, i) one off activities and events, ii) supporting someone to join a different project, or iii) supporting someone who is already part of a different project. These types of support are important and should be recognised.

7. **Preparation for volunteering needs scaffolding.** Initially, volunteering may not be suitable for beneficiaries who are socially isolated or lonely; first steps may be one-to-one sessions or attending small groups where they can develop self-esteem and confidence in their wider abilities.

8. **Considerable skill is needed in the delivery of interventions for social connection.** Sensitivity and awareness of the needs and vulnerabilities of beneficiaries is essential. Compassionate, gentle interactions give beneficiaries space to communicate what they need and participate in activities in a way that is right for them. Acts of kindness, like being given a drink, can help beneficiaries feel cared for and welcome.

9. **To engage people with different interests, choice is needed** (e.g. physical activities, arts and crafts, language classes). Activities can provide a distraction from difficult thoughts and feelings. Structure and routine from attending activities or social groups can be important in increasing independence, while contributing to group endeavours can provide meaning and purpose.

10. Quiet activities should be provided to help beneficiaries who need to manage sensory overwhelm and decrease the pressure on social interactions. Large groups can be intimidating; breakout spaces may help beneficiaries manage anxiety.

11. Activities must be accessible and inclusive to encourage social interaction.

Delivery needs to be responsive to individual needs; flexibility is required to accommodate fluctuating health and finances, different abilities, availability, access to transport, and readiness for groups.

12. Connecting with group members who can't attend is important. This communicates that individuals matter and that they are valued as a person. Communication preferences need to be established so that contact is managed appropriately.

13. A partnership approach to delivery increases project visibility, staff support, and resource sharing thus reducing barriers to engagement. Relationship building between organisations needs dedicated time for communication and collaboration.

Further research

This qualitative evaluation has sought experiences at the end of the project; retrospective reflections are important but may not capture the nuances of experiences along the way due to memory or reporting biases. Future research may therefore seek to capture experiences at key points during delivery or use methods such as diary studies to chart progress over time.

Creative methods (such as scrap booking) may be a way to do this within projects to create memories and encourage reflection, while providing insights into developmental journeys. Such approaches would complement any quantitative measures that were taken before and during the project by providing explanation and context that could shape data interpretation.

Several beneficiaries and staff shared concerns about projects ending, stating that facilitated activities were essential in maintaining social connections. The potential negative impact of withdrawing support from beneficiaries at the end of a project needs to be fully acknowledged, and exit strategies monitored. Longitudinal follow-up is recommended for projects such as FFY to explore beneficiary outcomes after the project end.

Acknowledgements

Thank you to all of the staff and beneficiaries who gave their time and spoke so openly about their experiences. We are so very grateful for your insights.

Additional resources

Readers of this evaluation may find the following resources helpful:

The British Red Cross: provides support, information and guidance. This includes support for loneliness: <https://www.redcross.org.uk/get-help/get-help-with-loneliness>

Campaign to end loneliness: provides resources and sources of support along with information and research about loneliness: <https://www.campaigntoendloneliness.org>

Mind: provides advice and guidance. Mind also provides support services including a range of helplines: <https://www.mind.org.uk/>

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Appendix 1

Summary of activities and services

Organisation	Activities
Age UK	Delivered physical and social activities for people aged 55+, including chair yoga, walking football, games hubs, and coffee mornings. These sessions promoted movement, social connection, and routine.
Barrow Leisure Centre	Provided gym and swim access for FFY volunteers and ran seasonal pedalo sessions on the lake. Activities supported physical health and offered recreational volunteering opportunities.
Barrow Poverty Truth Commission	Engaged volunteers with lived experience of poverty in a community commissioning project, enabling them to share insights and influence local decision-making.
Barrow District Disability Association	Offered inclusive craft and social sessions, one-to-one support with benefits and housing, and wellbeing activities such as mindfulness and singing. Created safe spaces for disabled people and carers.
Brathay	Supported young people through counselling, one-to-one sessions, and youth social groups. Activities included baking, crafts, and light exercise. Also ran a youth leadership programme with residential experiences.
Cumbria CVS	Hosted the Community Connector role, helping people find the right support or volunteering opportunity across the partnership. Promoted FFY at community events and supported referrals.
Groundwork	Managed the overall partnership and the Furness 4 U Connect Hub, offering drop-in support, creative workshops (e.g. diamond art, wool crafts), chair-based exercise, and access to a community laundry.

Furness Multicultural Forum	Provided English language classes and tailored support for refugees and asylum seekers. Activities included football sessions, cultural events, and one-to-one guidance on housing and employment.
Stitchability	Created a safe, sensory-aware space for carers and neurodivergent individuals. Delivered sleep support, crafts, and one-to-one sessions. Led community kindness initiatives and supported volunteering.
Women's Community Matters	A trauma-informed organisation offering gender-responsive programmes. Activities included quiet and larger social groups, drop-ins, and creative sessions. Supported women to build confidence and transition into volunteering.

Appendix 2

Beneficiary semi-structured interview/ focus group questions

Broad questions were kept simple to aid communication. Prompts were tailored to beneficiary responses and to meet communication needs. More prompts were used in interviews than in focus groups.

Q1 How did you become involved with [X project]?

Example prompts:

- How did you become aware of [project]
- What do you do with [project]
- Have you done anything like this before? What was that like?
- What sorts of things did you do with your time before your involvement with [project]?
- Why did you get involved with [project]? Reasons for involvement
- Were there any challenges that might have prevented you being involved?
Barriers to involvement – physical/psychological

Q2 What has it been like to be involved in this project?

Example prompts:

- What's been good/not so good?
- Will you continue being involved at [project] or at other places?

Q3 In what ways has the project helped you?

Example prompts:

- What have been the benefits?
- Social connections
- Purposeful activities to do

Q4 Is there anything else you want to add about your experiences of working with [project]?

Appendix 3

Beneficiary stories of most significant change

We would like to ask you about the most significant changes you have experienced because of your work with [X] project.

Write as much as you would like.

- What do you do with [Org name]?
- What were the reasons why you started working with [Org name]?
- What has changed for you because of your involvement with [Org name]?
- What happened to make the changes come about?
- Which of the changes you have described is most significant to you and why?

Appendix 4

Project staff focus group semi-structured questions

1. In what ways have you worked together in the partnership?

Prompts:

- What have been the benefits of working together?
- What factors help you to work with other partners in F4Y?

2. In what ways has working in partnership with the other organisations helped to overcome barriers to engaging beneficiaries?

Prompts:

- What difference has this made to beneficiaries?

3. Is there any best practice you would like to share from working with/ engaging beneficiaries who are experiencing loneliness?

Prompts:

- How have you overcome barriers to engagement for beneficiaries?
- How have you seen loneliness change in beneficiaries?

4. What would you do differently if you were planning to work in a similar partnership in future?

5. What will be the long-term or wider impact of FFY?

6. Is there anything else you want to add?

Appendix 5

Staff survey

About you:

How would you describe your role in Furness for you? (tick all that apply)

- Project delivery
- Administration
- Lead
- Other (please specify)

About your beneficiaries:

- Please tell us about your Furness for you beneficiaries: Who have you been aiming to recruit/ engage? What have you been aiming to do with them?
- What are the barriers to engaging this group of people?
- How has loneliness in your beneficiaries been impacted by the activities they have undertaken with Furness for you?

Partnership approach:

- In what ways do you collaborate with other partners? (e.g. how do you work together? what support do you give or receive?)
- How has the partnership helped overcome barriers to volunteering/ engagement? (e.g. visibility, word of mouth)
- What has been your experience of the 'Right front door' approach? (has this helped engage beneficiaries?)

Learning from partnership working:

- What have been the challenges of working in this partnership?
- What would help you to work more with other partners in the future?
- What has it been like to work with a community connector/ community champion (CVS)?

Overall

- Is there anything else you would like to tell us?

Appendix 6

Image 1



Alt text: image shows a patchwork squares which contain positive messages such as 'smile' and 'trust'. A large centre square says 'care, compassion, kindness, love'.

Appendix 7

Image 2



Alt text: image shows two blue pedalos in an urban lake. The sky is grey and cloudy; there are green trees and a grassy bank.