

VOLUNTEERING – A POWERFUL SOCIAL PRESCRIPTION

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In all communities, volunteers are vital in delivering social prescriptions, improving the health and wellbeing of their neighbours. We now have clear evidence that the act of volunteering also makes an enormous difference to the physical, cognitive, and mental health of the volunteers themselves.

In our November 2021 report those who had strong social connections reported better health and wellbeing and appeared to weather the ups and downs of the pandemic better. But what do we know about the four million who were asked to shield or self-isolate because of their clinical vulnerabilities to COVID-19 ; how did they cope with the longevity of this pandemic?

In September 2021, we surveyed a sample of 2,500 UK adults on their social relationships, health and wellbeing over the past 12 months. From this sample, 746 identified themselves as having an enduring underlying health condition. Although we do not know if these individuals were themselves shielding – it provides some useful insight into how this group has been impacted by the pandemic.

On almost all questions, those with an underlying health condition had poorer outcomes compared to those with no reported health conditions. On feelings of loneliness - more than double (12% vs 5%) stated they were 'always or often lonely'. On confidence - 43% stated they had lost confidence socialising with others since the start of the pandemic (vs 30%). And on mental and physical health the findings were most concerning - 55% stated that their mental health was worse (vs 30%) and 66% stated that their physical health was worse (vs 25%) compared with 12 months ago.

However, within this group, some appeared to be 'buffered' from declines in health and wellbeing. When we cut the data by those who stated they had 'participated in formal/informal volunteering in the past 12 months' (136) the findings are remarkable compared with those who did not volunteer (601). On almost all questions those who volunteered had better outcomes. Fewer reported being always/often lonely (9% vs 13%), greater numbers reported gaining confidence socialising with others (15% vs 5%) and improved mental health (18% vs 9%). Most significant was physical health, 35% stated that their physical health was 'much better or a bit better' (vs only 8% of non-volunteers).

These differences can't be explained away by these volunteers being more affluent or living in better neighbourhoods. Just under 40% are from social grades C2 and DE, and almost half (50%) of those volunteering came from the most deprived areas of the country.

Furthermore, this data is supported by other research; in a survey of the NHS Volunteer Responders programme (n=12,019), those who were ‘shielding’ (but volunteering for ‘Check In and Chat’) had much higher scores on the Office of National Statistics wellbeing measures compared to a similar population sample of those with underlying health conditions (and not volunteering).

The pandemic has enabled us to measure the impact of volunteering in ways we couldn’t do before – because so many people stepped forward. The benefits associated with volunteering are now well documented within the medical science literature. As we look ahead to improving population health and wellbeing, we should view volunteering as a key public health intervention and a potentially powerful social prescription tool for those struggling to manage their long-term conditions.