

UEZ Research Report:

# Why Your Social Health Matters.



Prepared for: Games to Get

Prepared by: HBS Market Research Services,  
Hertfordshire Business School, University of Hertfordshire,  
Mosquito Way, Hatfield, Hertfordshire AL10 9AB.

## Executive Summary

### Purpose

The UEZ Project Team within the Hertfordshire Business School Market Research Services was approached by Games to Get the creator of a conversational card game called Sussed card games to conduct research relating to health and wellbeing. The specific key requirement and research aim for the Project Team was to investigate why social health matters.

An initial challenge was defining what is meant by 'social health'. Outside the field of social science and other health related disciplines, social health does not appear to have the prominence or awareness by members of the public in the same way that people have a good idea and understanding of what is meant by mental and physical health. Despite this fact, the importance of social health to our overall health and wellbeing is recognised by the World Health Organisation and takes a holistic perspective referring to health collectively as physical, mental and social wellbeing.

### Methodology

The research methodology adopted by the Project Team to investigate why social health matters was a mixed approach that included:

- a randomised survey with over 200 participants aged 18 and above divided into six age groups;
- delivery of two focus groups. Focus Group 1 were five members of an adult friendship group and Focus Group 2 was a family of four (mother, father and two children) that were observed playing Sussed card games and asked open questions;
- interviews and meetings with the Games to Get leadership;
- a review of social science and health related academic and professional literature; and
- a review of the customer feedback data on the experience of playing Sussed as a conversation game.

As a point of reference for the research, social health was defined as a person's ability to develop and maintain quality relationships with other people through positive interactions - it is about social relationships, and this includes different contexts across everyday life scenarios. This definition is supported by the literature but also notes the challenge that there is not a single definition (Cho, Park and Song, 2020). Sometimes there are references to social intelligence (Lau and NCS, 2016; Riggio, 2014) and other times to social relationships or social wellbeing (Toronto Public Health and Wellesley Institute, 2019; Umberson and Karas Montez, 2010). What is evident throughout the review of the literature is that it is about people's social interaction and the importance of that to supporting overall health and wellbeing. The body of research also suggests that a lack of social interaction has an impact on mental and physical health.

## Findings

The Project Team looked at some of the determining factors that influence social health - empathy, self-awareness, social-confidence, and conversation skills (and conversations). These determining factors are not an exhaustive list but were used to form the basis of the survey. The survey findings indicated that the influencing factors considered as part of this research are an important factor in promoting and sustaining good social health and developing social relationships. Across all participants, there was agreement more than disagreement with the survey statements that were grouped according to the determinant of social health, for example:

- Empathy: 78% of all participants either somewhat agree, agree or strongly agree, "*2. I'd like people to be better at understanding how I'm feeling*";
- Self-awareness: 87% of all participants either somewhat agree, agree or strongly agree, "*5. I'd like others to see me as I really am*";
- Social-confidence: 61% of all participants either somewhat agree, agree or strongly agree, "*7. I wish I felt more comfortable being myself in social situations*"; and

- Conversation skills: 65% of all participants either agree, agree or strongly agree, “*10. I wish I was better at coming up with different things to talk about*”.

Although these results reflect a positive position that empathy, self-awareness, social-confidence, and conversation skills are seen as important social skills that support good social health, what was also evident from the survey results, the insights from the focus groups and the review of the literature, is that social health is an integral part of our overall health and wellbeing. It also shows how our social health is interrelated with our mental and physical health. This view has become more prominent over the last 12 months with the COVID-19 pandemic and the impact that loneliness and social isolation (ONS, 2020; Killam, 2020a, b; Killam, 2018) has had because of the lockdown restrictions needed to protect public health (GOV.UK, 2021). The research suggests that social health matters because it is part of balancing overall health and wellbeing.

### Recommendations

This research excluded the socio-economic factors that may impact on good social health. For example, poverty, access to education and employment status to name a few. Also, the research survey was a randomised sample of people in the UK. The Project Team recommends further research to address these two areas that were out of scope. We suggest additional research that investigates social health (and the determining factors mentioned above) and its impact in specific contexts (public and private sectors) - care home sector, NHS, retail and tourism or professional services as examples.

## TABLE OF CONTENTS

Executive Summary .....	1
List of Figures .....	5
List of Tables.....	5
1 Introduction: Health Matters - What About Social Health?.....	8
1.1 Research Context .....	8
1.2 Aim of the Research.....	10
1.3 Research Approach and Methodology .....	11
2 Research Findings.....	16
2.1 Empathy .....	16
2.2 Self-Awareness.....	17
2.3 Social-Confidence.....	18
2.4 Conversation Skills (and Conversations).....	19
Summary: Focus Group Comments.....	22
3 A Perspective on Social Health - Why it Matters .....	24
3.1 Discussion .....	24
3.2 Conclusion.....	40
4 Recommendations .....	43
5 References.....	44
Appendix 1: Percentage of All Respondents for each Empathy Statement.....	50
Appendix 2: Percentage of All Respondents for each Self-Awareness Statement .....	54
Appendix 3: Percentage of All Respondents for each Social-Confidence Statement .....	58
Appendix 4: Percentage of All Respondents for the Conversation Skills Statement.....	62
Appendix 5: Customer Feedback - Sussed as a Conversation Game.....	64

## List of Figures

Figure 1: Doughnut Charts - Conversation Skills by Age Group .....	21
--	----

## List of Tables

Table 1: List of Online Survey Statements .....	13
Table 2: Online Survey - Number of Participants by Age Group .....	13
Table 3: Focus Group Questions .....	15
Table 4: Focus Group 1: Summary Feedback .....	22
Table 5: Focus Group 2: Summary Feedback .....	23

## Acknowledgements

We would like to thank all the participants for engaging with the survey. It provided the Project Team with some valuable data associated with the factors that influence social health and support social interaction. We appreciate the time that you gave up completing the survey.

We also thank the focus group participants who gave up their time to play Sussed card games and answer questions - it was great to see you have fun, laugh, and engage in some interesting conversations and all via MS Teams! Thank you for giving up your time to contribute to the research especially during lockdown and the lead up to Christmas.

Finally, we would like to thank the Games to Get team for their enthusiasm and commitment to support the research and the genuine interest they have as a business in social health. This reflects the support that you provide to charitable causes associated with mental health and wellbeing generally. Above all, thank you for your patience!

## The University Enterprise Zone (UEZ) Project Team

### Report Author

Colin Mattis

Visiting Lecturer, Hertfordshire Business School

UEZ Academic Project Lead

[c.mattis@herts.ac.uk](mailto:c.mattis@herts.ac.uk)

### Research Support

Shailendra Singh

UEZ Graduate Research Consultant

May 2021

## About Games to Get

Games to Get is a UK family business that produces Sussed card games.

Games to Get believes social health is a crucial part of people's wellbeing - now, more than ever!

## About Sussed Card Games

The aim of Sussed is to have fun finding out who knows who best. The idea is to spark engaging conversations people have never had.

The Sussed story began in 2011 with the first editions of Sussed. Today there is a range designed to help support the social health of adults and children.

Players get to:

- answer questions about each other
- find out how others see them
- talk about how they see others
- understand why everyone thinks or feels a certain way



## 1 Introduction: Health Matters - What About Social Health?

### 1.1 Research Context

There is often a lot of public debate associated with the importance of better health and wellbeing that focuses on individuals' physical health and mental health. Physical health and mental health are either considered independently through discussions with public and government bodies, charities and community interest groups, healthcare professionals and academics in the field of health and social sciences. Although there is a body of research that has been conducted for decades associated with social health, in public debates and discussions, social health is less talked about or seen; it may be considered as a 'poor relation' with a quieter voice than that of physical and mental health when it comes to discussions linked to overall health and wellbeing. However, it should not be, and it is not the case among researchers and practitioners in the fields of health and social care.

The World Health Organisation defines health as “a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity” (WHO, 2021). These dimensions of overall health and wellbeing - physical, mental, and social health are interrelated and intertwined. Perhaps this has been brought into sharper focus over the last 12 months so far as conversations in the media are concerned because of the COVID-19 global pandemic. For example, our loss or restricted social interactions with family, friends, work colleagues or within other social groups has not only impacted us physically but has also impacted us mentally with people facing increased levels of anxiety and depression arising from loneliness and isolation (IBIS, 2021). COVID-19 has disrupted our social relationships and our social networks in a way that has arguably disrupted our social health. That said, it has not all been negative because of the awareness that has been raised in relation to social health and individuals have tried to restore social connections using technology where perhaps they would not have previously engaged with others in that way.

The research project team (Project Team) within the University Enterprise Zone (UEZ) at Hertfordshire Business School, University of Hertfordshire, was approached by a family run company called Games to Get to conduct an independent piece of research relating to social health based on the aims set out in this Report. Games to Get is interested in understanding the role that conversations can play in building, developing, and maintaining our relationships to support and improve our social health. The

company is the creator of 'Sussed' card games.



The cards consist of thousands of real and imaginary scenarios with a choice of three supporting answers (A, B, C) that stimulate conversation and discussion helping you to get to know someone better and gets you thinking about why you or, another participant playing the game, selected a particular answer based on a given scenario. Sussed card games have different gameplays and a series of playing packs that represent different situations.

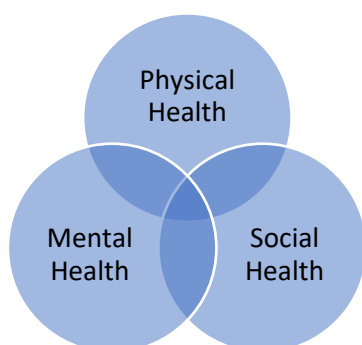
Source: Time to Change (2021a)

Games to Get supported 'Time to Talk Day' in February 2020 and 2021. Time to Talk Day was part of the 'social movement' Time to Change that campaigned and championed the much-needed action to end mental health discrimination through having conversations (Time to Change, 2021b). Time to Change's campaign was led by a partnership between national mental health charities - Mind and Rethink Mental Illness. Time to Change received funding support from the Department of Health and Social Care, Comic Relief, and the Big Lottery Fund.

## 1.2 Aim of the Research

This is an exploratory piece of research to investigate why social health matters. It also seeks to raise awareness of social health as part of overall health and wellbeing through an examination of the literature and insights from the primary data that was collected.

It is widely accepted that when it comes to our overall health and wellbeing, if people overindulge on food and alcohol, lack a balanced nutritional diet, and lead sedentary



Our Personal System of Health

lifestyles, this will increase the risks of having an impact on our physical health and, in certain situations, our mental health. It is also recognised that stress, traumatic events (Mental Health Foundation, 2021), and poor sleep hygiene, may increase the risk of suffering from mental health related issues and, in

certain situations, may also impact on our physical health. What appears to be less spoken about is the impact of what a lack of social health can do to diminish an individual's overall health and wellbeing. There are fewer specific conversations and discussions about social health. One of the challenges appears to be how social health is defined or what we mean by social health (Killam, 2020c; Lau and NCS, 2016; Riggio, 2014; Umberson and Karas Montez, 2010; Toronto Public Health and Wellesley Institute, 2019). In contrast, there are discussions and conversations on empathy, self-awareness, self-confidence, vulnerability, loneliness, psychological safety, and social sensitivity, to name a few. However, are they recognised by individuals outside of an interest in health as a practice or, the social sciences, as some of the determining factors that may influence or, impact our social health? In this research social health is defined as a person's ability to develop and maintain quality relationships with other people through positive interactions (Killam, 2020c; Lau and NCS, 2016; Riggio, 2014; Umberson and Karas Montez, 2010). Social health is discussed in section 3 of this Report.

Perhaps we should consider our health and wellbeing from a holistic perspective when looking at our physical, mental, and social health; we should view those dimensions as our 'personal system of health'. It is through this lens that the Project Team looked at the research questions described at the beginning of this sub-section to establish its research approach. As a reference point for the research, the Project Team took empathy, self-awareness, social-confidence, and conversation skills (and conversations) as the determining factors that may influence our social health. There are additional factors that others in the fields of health and social sciences believe can be attributed to social health. For this research, the focus is on the four that have been mentioned. The next sub-section briefly describes the research approach and methodology.

### 1.3 Research Approach and Methodology

The research comprised of primary and secondary research. The primary research is described in more detailed below. For the secondary research, the Project Team reviewed literature and available data from Government bodies in the UK, health bodies, academic journals and professional magazines and books from the health and social science sectors.

The primary research was carried-out to explore the aims set out in sub-section 1.2 and was conducted in the UK with a mixed method approach that included:

- sending a qualitative online survey to participants who completed it anonymously - all participants were age 18 or above; and
- two facilitated COVID-19 compliant focus groups using video conferencing - one focus group consisted of a group of 5 friends and the other focus group was a family of 4.

#### Online Survey

The survey consisted of ten short statements from which participants were asked to indicate their level of agreement by selecting on a scale whether they strongly disagree to strongly agree, with that statement. The statements were a mandatory part of the survey to answer. The statements are listed in **Table 1**, below.



The survey also included optional fields for participants to complete - 'two free-text' boxes for general comments and a field that asked participants to state the age group that related to them, ranging from 18-24 to 65 of age and above. The survey data was collected over a two-week period during December 2020. The number of participants that completed the survey statements was 202. However, of the 202 participants that opted to identify by age group, the number of participants reduced to 177. See **Table 2** below.

Note: the margin for a nominal difference between comparing the total number of participants that completed the survey to those participants that completed the survey by age group, because 25 participants elected not to indicate the age group applicable to them, means the potential impact is minor in the case of survey statement 10 (conversation skills) that included an analysis of the responses by age group. Despite this difference, when comparing the total number of responses to survey statement 10 to the number of responses by age group, the response comparisons in percentage terms still provide a good indication of whether the participants largely agreed or disagreed with the conversation skills statement when examined by age group.

Table 1: List of Online Survey Statements

Statement Category	No.	Statements
<b>Empathy</b>		
	1	I wish I was better at understanding how people are feeling
	2	I'd like people to be better at understanding how I'm feeling
	3	I know how I'd get better at understanding how people are feeling
<b>Self-Awareness</b>		
	4	I wish I had a better idea of how others see me
	5	I'd like others to see me as I really am
	6	I know how I'd get others to see me as I really am
<b>Social - Confidence</b>		
	7	I wish I felt more comfortable being myself in social situations
	8	I feel that other people are expressing their true selves around me
	9	I know how I'd get more comfortable being myself in social situations
<b>Conversation Skills</b>		
	10	I wish I was better at coming up with different things to talk about

Table 2: Online Survey - Number of Participants by Age Group

Age Group	Number of Participants
18 - 24	7
25 - 34	44
35 - 44	45
45 - 54	38
55 - 64	33
65 and over	10

## Focus Groups

Two separate focus groups were held. One focus group consisted of a friendship group of five people and the other focus group consisted of a family of four - mother and father, a teenage daughter, and a son under the age of 10. A summary of the focus group comments is listed in section 2.5 of this Report.

Each focus group was conducted via videoconferencing and lasted approximately one hour. Within that one hour each focus group had an opportunity to experience how conversations can be generated by playing one of the versions of Sussed. Each participant within a focus group had an opportunity to randomly pick a question card and ask a question. Each person did this three times.

A member of the Project Team facilitated the session and noted observations with the participants of each focus group playing the game. One member of the Games to Get team was also present for each focus group and introduced how the game should be played. To facilitate each focus group, Games to Get arranged for various packs of Sussed to be posted to each participant in advance. The Project Team member that facilitated each focus group following the completion of the Sussed experience by the participants, asked them several semi-structured/open questions. The questions that were asked are set out in **Table 3**.

Table 3: Focus Group Questions

Question No.	Questions
1	How did playing the game make you feel; what did you experience?
2	We all know what physical and mental health is. What does social health mean to you?
3	Would you say our society/country is high or low in social health?
4	Can you describe someone you think has a high level of social health - what are they doing?
5	If you were going to help someone improve their social health, are there any products you would recommend to them?
6	Having played a short game of Sussed, would you say Sussed could contribute towards having good social health?



## 2 Research Findings

This section will set out the key findings from the survey data relating to empathy, self-awareness, social-confidence, and conversation skills. The last part of this section lists high-level comments captured during the two focus groups.

### 2.1 Empathy

Empathy is a person's ability to recognise and understand what another person is thinking or feeling (Segal, 2018; Goleman et al, 2015; Petrovici and Dobrescu, 2014).

Considering the individual statements relating to empathy (see **Appendix 1: Percentage of All Respondents for each Empathy Statement**):

**53% of all participants either somewhat agree, agree or strongly agree “1. I wish I was better at understanding how people are feeling”;**

**78% of all participants either somewhat agree, agree or strongly agree “2. I'd like people to be better at understanding how I'm feeling”; and**

**61% of all participants either somewhat agree, agree or strongly agree “3. I know how I'd get better at understanding how people are feeling”.**

What is interesting is that at **78%**, individuals that participated either want to be given the space to express how they are feeling or, want to be listened to and for people to know or understand how they feel, or perhaps a combination of all these elements.

## 2.2 Self-Awareness

Self-awareness is a person's ability to recognise their own emotions and how this may impact on others and recognise what they are feeling (Eurich, 2018; Goleman et al., 2015).

Considering the individual statements relating to self-awareness (see **Appendix 2: Percentage of All Respondents for each Self-Awareness Statement**):

**74% of all participants either somewhat agree, agree or strongly agree** “*4. I wish I had a better idea of how others see me*”;

**87% of all participants either somewhat agree, agree or strongly agree** “*5. I'd like others to see me as I really am*”; and

**53% of all participants either somewhat disagree, disagree or strongly disagree** “*6. I know how I'd get others to see me as I really am*”.

There are two points to draw attention to in relation to the analysis of the data associated with the responses to the self-awareness statements.

The first is that the **87%** that represents all participants, from 'somewhat agree' to 'strongly agree', would like others to understand them and see them as they truly are. This is a significant affirmation of self-awareness statement 5 that leads us to reflect on a question - what type of conversations or interactions between individuals should, or need to happen, that allow individuals to believe and feel that they have been heard and are being listened to? In other words, how people know who others truly are and how should that be measured?

The second is that **53%** of all participants disagreed with statement number 6 - “I know how I'd get others to see me as I really am”. Although this is almost evenly split with those that agreed with the self-awareness statements, this result clearly suggests that a greater number of those participants may be searching for ways to engage with others that would allow them to understand them better.

## 2.3 Social-Confidence

Social-confidence is about trust and trust worthiness that you will be accepted and valued within a social setting where you are interacting with others (Psychologies, 2012; Manning and Ray, 1993).

Considering the individual statements relating to social-confidence (see **Appendix 3: Percentage of All Respondents for each Social-Confidence Statement**):

**61% of all participants either somewhat agree, agree or strongly agree** “*7. I wish I felt more comfortable being myself in social situations*”;

**66% of all participants either somewhat agree, agree or strongly agree** “*8. I feel that other people are expressing their true selves around me*”; and

**52% of all participants either somewhat agree, agree or strongly agree** “*9. I know how I'd get more comfortable being myself in social situations*”.

In comparison to the percentage responses to the empathy and the self-awareness statements, the responses of the participants to the social-confidence statements appear to be more evenly distributed between those that agree and those participants that disagree. It is noticeable that the participants that responded to statement 9 are close, split **48%** disagreeing and **52%** agreeing (see **Appendix 3: Percentage of All Respondents for each Social-Confidence Statement**).

Reflecting on this outcome, it would be interesting to consider the impact of the Covid-19 global pandemic. Have feelings of loneliness been exacerbated by the lockdown restrictions or had a bearing on the responses to social-confidence?

## 2.4 Conversation Skills (and Conversations)

Conversation and conversation skills is the opportunity to develop shared understanding with others; to express feelings and emotions and to acknowledge the feelings and emotions of others (Barker, 2019).

Considering the statement relating to conversation skills (see **Appendix 4: Percentage of All Respondents for the Conversation Skills Statement**):

**65% of all participants either somewhat agree, agree or strongly agree “10. I wish I was better at coming up with different things to talk about.”**

As mentioned in the research and methodology section, the responses to the conversation skills statement are analysed below by age group of the participants.

### Conversation Skills by Age Group

The responses to the conversation skills statement are visually represented for each age group by a series of doughnut charts. See **Figure 1** below. The highlights of the findings are:

- except for the age group 65 and over, each age group agrees more than disagrees with the conversation skills statement;
- only half the age groups (35-44, 45-54 and 55-64) represent a **higher** agreement percentage than the overall agreement percentage across all participants as indicated above which stood at **65%**.
- Age group 18-24 agreed at **57%** and age group 25-34 agreed at **61%** whereas age group 65 and over disagreed at 70% with the conversation skills statement; and

- the highest level of percentage agreement to the conversation skills statement was represented by age group 55-64 at **73%**.

With the clear exception of the participants in age group 65 and over, the results suggest that conversation skills, based on the question asked, are important to most individuals across all age groups that participated in the survey.

What is interesting is that at **70%**, the participants in the age group 65 and over disagreed with the conversation skills statement. This would suggest that the participants in this age group are confident when it comes to finding topics to discuss with others. Does this also suggest that this age group is more socially confident? Further research is needed to understand this result by taking a closer look at the conversation skills and approaches and attitudes that people over the age of 65 have to engaging in social interactions. With this limited survey statement it is important not to over generalise without further investigation.

Also, other than age group 18-24 that had a similar number of participants to the over 65 age group, the sample size for this age group was considerably lower than the sample sizes of the other age categories. See **Table 2: Online Survey - Number of Participants by Age Group** sub-section 1.3 above.

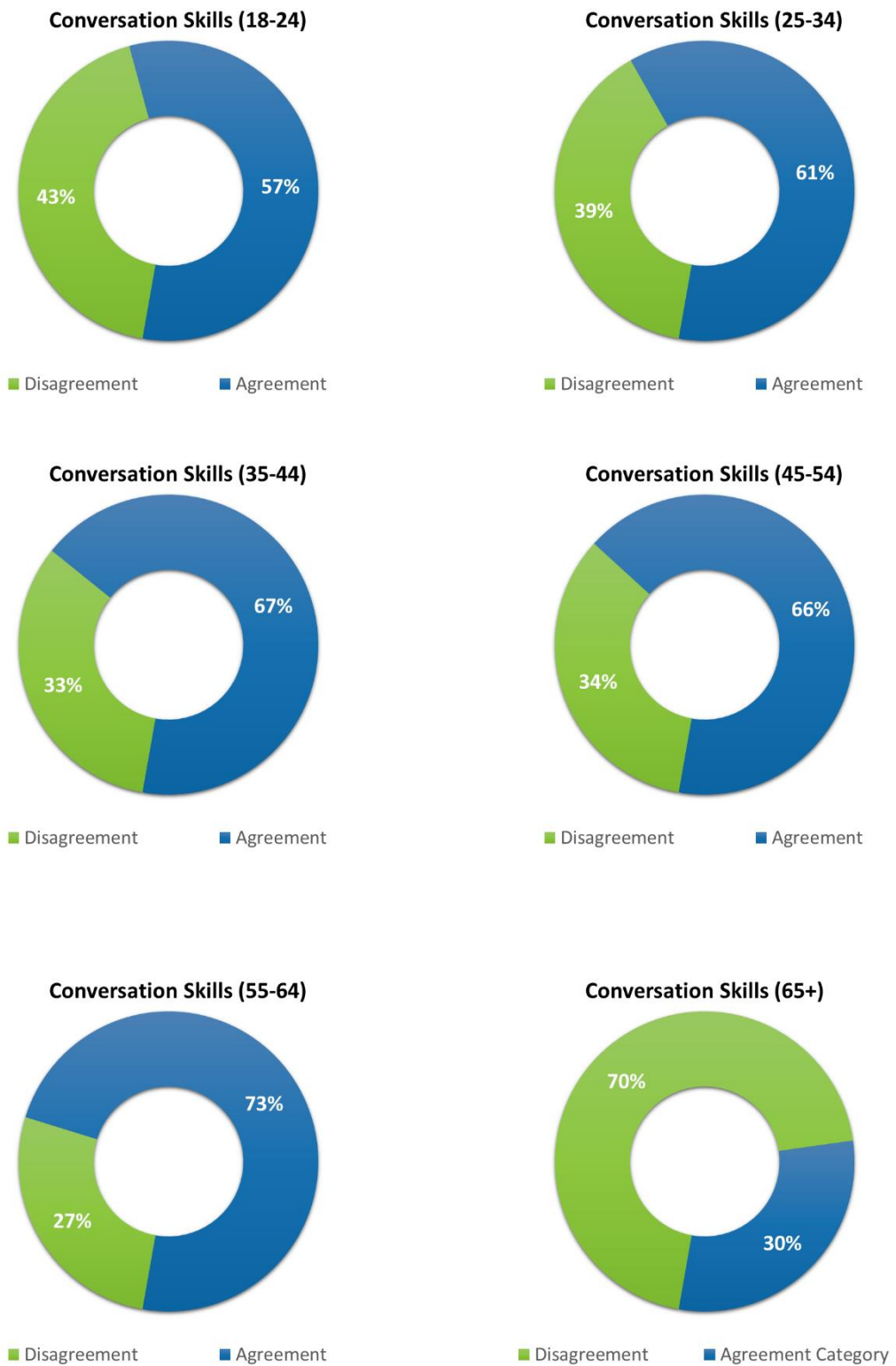


Figure 1: Doughnut Charts - Conversation Skills by Age Group

## Summary: Focus Group Comments

High level summary of the feedback from the focus groups. Focus Group 1 consisted of the adult friendship group and Focus Group 2 consisted of a family (two adults, a teenager, and a child below 11).

Table 4: Focus Group 1: Summary Feedback

	Questions	Focus Group 1
1	How did playing the game make you feel; what did you experience?	<p>It's a good icebreaker particularly if you are meeting up with new people so really cool game.</p> <p>I'm quite wide-awake because the interaction, fun, and laughter has energised me a lot more.</p>
2	We all know what physical and mental health is. What does social health mean to you?	<p>Community.</p> <p>Social health to me is the social aspects of one's life and getting to know people better and becoming closer to them which is important because it's one of the aspects that makes life enjoyable is having close companions.</p> <p>I like hugs; I'm a hugger and without that and without going out and being able to see my friends, it's been awful.</p> <p>It's about love and having friends. Knowing people around you that they are...</p>
3	Would you say our society/country is high or low in social health?	<p>I think social health is low because I think that more people socialise through technology rather than face-to-face. I know we've got videoconferencing but it's not quite the same. It can be very tiring and stressful [using technology to communicate] there isn't that human element.</p> <p>I actually think that with COVID and with zoom interactions, I think that side of things [social health] has probably gone up.</p>
4	Can you describe someone you think has a high level of social health - what are they doing?	<p>Networking I think I'd say.</p> <p>Someone who, even though we have COVID and we cannot interact with people.... will try and find ways to maintain the same lifestyle that they had by using online [sources].</p> <p>For me, if someone has high social health, they would find it easy to mix with people but also instigate that social contact.</p>
5	If you were going to help someone improve their social health, are there any products you would recommend to them?	<p>I always find that one of the best ways to get me feeling happier is to meet up with my mates and play again; We have regular game nights. games that are really easy to play online at the moment I'd recommend anything like that to anyone.</p> <p>Anything that can help with an icebreaker; the challenge of that for example like myself I don't like small talk because you don't really know what to say.</p>
6	Having played a short game of Sussed would you say Sussed could contribute towards having good social health?	<p>Sussed, it brings up questions that you may not have even thought about yourself so you can explore yourself a little bit; so get other people within the game learning more about you.</p>

Table 5: Focus Group 2: Summary Feedback

	Questions	Focus Group 2
1	How did playing the game make you feel; what did you experience?	<p>I felt connected to you all; and it interested me what you all said. It made me think back in time and how you have changed. It made me reflect on how you have changed. As the years have gone by how you may have answered things are different from how you have answered them now. Reflection and connection.</p> <p>I think that it's a good thing that some of the questions were dependent on the situation because it creates a lot more discussion. So even though there's not a specific answer you think that sometimes I'll do this, sometimes I'll do that. That creates more fun.</p> <p>Yes. It's quite good. It prompts conversation doesn't it. Yes, a feeling of being connected and enjoyment really. My mother would absolutely love this; lots of probing questions.</p>
2	We all know what physical and mental health is. What does social health mean to you?	<p>It's about love and having friends. Knowing people around you that they are there.</p> <p>When I think about social health, I think it's about when you think how people will react to different situations; it's about connection and about how you think other people will react in different situations.</p> <p>The questions are teasing out what you're like and what you like but also a bit about empathy.</p> <p>We are missing the interaction and connections with the wider family so are trying to do more things. I assume we are recognising the importance of that trying to connect.</p>
3	Would you say our society/country is high or low in social health?	I think it's making time for people and listening to them so that they feel valued.
4	Can you describe someone you think has a high level of social health - what are they doing?	<p>Older people come to mind and I think the importance of interaction through activity my dad does his bowling.</p> <p>Social media can be great, but it can also be a nightmare.</p> <p>It's going to be very interesting. Ultimately, I think there is no substitution for actually being with people for something; there's all that stuff about body language and non-verbal cues.</p> <p>With social health how can you help someone who is unable to talk or can't?</p> <p>Conversations is all bound up with mental health.</p>
6	Having played a short game of Sussed would you say Sussed could contribute towards having good social health?	<p>Even if you are someone who is not that open or not talkative, you can still engage and contribute because of the set questions. There is always something new to discover about people.</p> <p>It guides you. It gives you three choices for an answer so even if you were not that confident, it prompts you a little bit.</p> <p>I think is very good the way that it's structured; I think that it's quite cleverly design.</p>



### 3 A Perspective on Social Health - Why it Matters

#### 3.1 Discussion

The purpose of this research was to investigate “why social health matters”. Should it matter to individuals as much as mental health and physical health? We approached the research by looking at some of the determinants of social health which, in the field of social science, academics and practitioners have referenced and studied several. This makes it challenging to settle on an exhaustive list of factors that influence social health, due in some part to the subjective nature of the topic (Segrin and Taylor, 2007; Umberson and Karas Montez, 2010; Lau and NCS, 2016; Cho, Park and Song, 2020). In the context of this research what is meant by the determinants of social health are:

- those social skills that individuals possess in differing quantities from one another under different scenarios, circumstances or, in different environments;
- that help to develop, grow, and maintain the quality and success of social relationships;
- the personal satisfaction of individuals.

As part of this research, over 200 individuals above the age of 18 responded (see Section 1.3: Research Approach and Methodology and Section 2: Research Findings). The determinants of social health that formed the basis of the research survey were ‘Empathy’, ‘Self-Awareness’, ‘Social-Confidence’ and ‘Conversation Skills’. These social skills will be discussed below, drawing on insights from the survey findings, comments and observations from the focus groups that were conducted, as well as feedback from Games to Get customers that had purchased a version of Sussed card games. Consideration will also be given to the literature and views of academics, health and social science practitioners and other health and wellbeing commentators that have referred to this subject.

## What is Meant by 'Social Health'?

In this Report we define social health as a person's ability to develop and maintain quality relationships with other people through positive interactions. Defining social health is not a simple proposition, despite “social wellbeing” forming part of the constitution of the World Health Organisation when defining health (WHO, 2021). This view is also supported by Cho, Park and Song (2020). According to Cho, Park and Song, despite the holistic definition provided by the World Health Organisation, health incorporates a balance of physical, mental, and social health. The field of social health research is yet to establish an official (unifying) definition or measurement of social health and suggests that social health should be a “unique component of a health model”. In other words, the importance of social health should have as much emphasis and focus given to it as mental and physical health. Further they suggest that social health and its determinants have been neglected at the expense of a clinical model of health, which hinders a collective/holistic response to health risks. The definition of health is shifting in the direction of people-centred experiences - what is a healthy life is increasingly dynamic.

We acknowledge through consideration of academic and the professional practice literature associated with health, that social health (Killam, 2020b) is often referred to in different ways, such as social intelligence (Lau and NCS, 2016); Riggio, 2014), social relationships (Umberson and Karas Montez, 2010), social wellbeing or social capital (Toronto Public Health and Wellesley Institute, 2019). What appears to be more consistent is the acceptance that there are several determinants that give meaning to what may constitute social health, particularly at an individual or community/society level.

According to Umberson and Karas Montez (2010), the quality and quantity of social relationships have an impact on mental health, social health, and our behaviour towards health in general. Individuals that are more socially connected through quality relationships are healthier and live longer than those that are lonely and feel more isolated. The determinants of social health and other health related discussions have arguably gained more prominence during the COVID-19 pandemic.

Umberson and Kara Montez (2010) considered what is meant by social relationships, and as part of their research they looked at social isolation, social integration, and the quality of relationships. They referred to:

- **social** isolation as “... the relative absence of social relationships”;
- **social** integration as the “... overall level of involvement with informal relationships, such as having a spouse, and with formal relationships, such as those with religious institutions and volunteer organisations;
- **quality of relationships** as the “... positive aspects of relationships, such as emotional support provided by significant others, and strained aspects of relationships, such as conflict and stress”; and
- **social** support “... emotionally sustaining qualities of relationships (e.g. a sense that one is loved, cared for and listened to)”.

The research by Umberson and Karas Montez (2010) also suggests that social support plays a role in having a positive effect on health by enhancing mental health, by reducing stress levels or by fostering a sense of meaning through social interactions as an integral part of everyday life.

During the focus group sessions, the participants were asked - **what does social health mean to you?** The following are some of the comments.

“Social health to me is the social aspects of one’s life and getting to know people better and becoming closer to them which is important because it’s one of the aspects that makes life enjoyable is having close companions”

(Male participant from the friendship focus group)

“Community”  
(Female participant from the friendship focus group)

“It’s about love and having friends. Knowing people around you that they are there”

(Female participant from the family focus group)

“I like hugs; I’m a hugger and without that and without going out and being able to see my friends, it’s been awful”

(Male participant from the friendship focus group)

The sample of comments from the focus group participants demonstrate a sense of togetherness, companionship, and the need for social interaction as part of the building blocks to good social health. The comments bring to life the findings in the social science literature and reflects the thoughts of Umberson and Karas Montez (2010) with references to social integration, quality of relationship and social support. Friendship too plays an important role in social health, which is evident in the sample comments from the focus groups. A summary of the comments from the focus group participants are referenced at section 2.5 of this Report. The opposite of friendship, according to Dunbar (2021), is loneliness. Dunbar refers to the fact that “friendship and loneliness are two sides of the same social coin”. He also acknowledges that there is a growing body of medical research that highlights the impact happiness (or lack of it) has on our “health, wellbeing and how long we live. We do not cope well with isolation”.

In an Office for National Statistics bulletin (ONS, 2020), the ONS has been conducting an analysis of loneliness in Great Britain during the COVID-19 pandemic. The ONS highlighted these main findings:

- 5% of people in Great Britain (2.6 million adults) reported feeling lonely “often” or “always” between 3 April and 3 May 2020;
- of those asked, 30.9% (7.4 million adults) reported that their wellbeing had been affected due to feeling lonely in the past 7 days; and
- working age adults living alone were more likely to report loneliness both “often or always” and over the past 7 days, than the average adult.

The need to improve social health has been a challenge for many during the COVID-19 pandemic. As we continue to understand and make sense of what this actual impact has on our social health - both in terms of positive and disruptive influences, we are trying to find different ways to navigate through the various conundrums and unpredictable circumstances that occur. The dynamics of our social relationships have changed. In reality, social relationships have always been dynamic by their very nature but what may be different is speed and depth at which relationships have been impacted - it has impacted our social health, mental health, and physical health. Put

another way, it could be argued that the usual social norms, the way we socialise, build, and develop relationships in different contexts - home life, school life, social life and work-life has, at a conscious and sub-conscious level, 'collapsed'.

Context collapse refers to the collapsing of social context and social norms - individuals find themselves in situations that have become blurred 'from one world to the next' (Patel and Phillips, 2021; Schrage et al., 2021; Davis and Jurgen, 2014). For example, during COVID-19, parents have become teachers with home-schooling (Gallagher, 2021; Brockes, 2020), NHS staff have become 'soldiers on the front line' in the fight against the coronavirus (Mackintosh, 2021) and schools (and schoolteachers) have become 'health practitioners' helping to coordinate students' COVID-19 lateral-flow tests (NEU, 2021).

Social health has an important place alongside mental and physical health in pursuit of improving our health and wellbeing. COVID-19 has brought about even greater challenges. Context collapse in this regard brings a different need, the need for different conversations. A mixture of the same individuals interacting but moving in and out of different social contexts. Arguably, the very social skills required to support these different social interactions between individuals - empathy, self-awareness, social-confidence are the same determinants that help to support and maintain social health.


What do the survey results reflect for each of the determinants that formed part of this research?

## Empathy

“Walking in the shoes of others” (Segal, 2018). Is empathy really an important determinant of social health when it comes to supporting and building relationships with others? Empathy is a person’s ability to recognise and understand what another person is thinking or feeling (Segal, 2018; Goleman et al, 2015; Petrovici and Dobrescu, 2014).

Without empathy, are the necessary conversations needed to develop and maintain social interactions and relationships from a social health perspective, relegated to guess work or psychological biases? Based on the survey findings, 78% of all participants either somewhat agree, agree or strongly agree with the statement 2 - “**I’d like people to be better at understanding how I’m feeling**”. Overall, the results for empathy indicate that empathy is an important aspect of social health based on the participants’ responses. Refer to section 2.1 of this Report for more detail on the empathy findings.

Segal (2018) defines empathy as interpersonal and social and states “being skilled in interpersonal and social empathy means that a person is more likely to successfully navigate social situations, and in the process feel a sense of well-being”.



**Interpersonal Empathy:** “the ability to understand what another person is feeling and thinking”.

**Social Empathy:** “the ability to understand people from different groups by perceiving or experiencing their life histories and situations” - walking in other people’s shoes.

This perspective of empathy is also supported by Goleman (2020). However, he describes empathy as existing in different parts of the brain that reflect the active (thinking) and emotional (feeling) aspects of being empathic:

- Cognitive (thinking): “I know how you think”;
- Emotional (self-awareness of others’ emotions): “I know how you feel”;
- Empathetic concern (emotional support): “I care about you”.

According to Bregman (2020), “our relationships truly are our most important assets”. Taking the time to understand how someone is feeling so that it is expressed in a way that can be felt as ‘genuine’ care and concern by another, is one of the building blocks of creating relationships. Bregman also suggests that individuals are more productive when the quality of relationships are high - in other words successful, when compared to relationships that are strained. Evidence shows that diminished relationships can lead to reduced productivity in individuals - in personal, social, and work-related settings. As discussed earlier, a breakdown in social interactions can lead to an impact on overall health and wellbeing, affecting social health, mental health, or physical health and, in certain cases, all three in some individuals. It is accepted that the extent of the impact is subjective and is influenced by macro socio-economic factors such as poverty levels, access to education, lifestyle behaviours and employment status. The consideration of these factors is outside the scope of this research.

However, if empathy plays a significant role in the development and maintenance of relationships, it follows that it is important to understand what part if any, self-awareness plays as an individual’s guiding compass that helps people to know and be aware how others are truly feeling. This leads to the discussion on self-awareness, another determinant of social health that formed the basis of this research.



## Empathy Takeaways

- Empathy - a person's ability to understand what another person is thinking or feeling
- Empathy can be thought of as interpersonal and social empathy
- Empathy helps us to navigate successfully through social situations
- An understanding of empathy helps to support relationships which is an important social asset
- 78% of all participants surveyed would like people to better understand how they are feeling

## Self-Awareness

Self-awareness is a person's ability to recognise their own feelings and emotions and how this may impact on others and the ability to recognise what others are feeling (Eurich, 2018; Goleman et al., 2015).

Based on the survey results, 87% of all participants either somewhat agree, agree or strongly agree with the statement 5 - "I'd like others to see me as I really am". This indicates that the people that the participants are interacting with are not recognising how the participants that agreed with that statement are feeling. Conversely, it may be that the participants are not picking up on emotional insights or cues from others displaying empathy. What type of conversations need to take place to help rectify any misalignment? More empathetic listening should be encouraged (Hardy, 2020). Refer to section 2.2 of this Report for more detail on the self-awareness findings.

In the findings for self-awareness, there was also disagreement by the participants at a percentage of 53% in relation to question 6 - "I know how I'd get better at understanding how people are feeling". This indicates just over half of the participants would welcome support on how to improve their self-awareness. According to Eurich (2018), if we understand our emotions and feelings and those of others more clearly, confidence and creativity improves; better decisions are made, communication becomes more effective, and relationships get stronger. Eurich describes this as two types of self-awareness - **internal self-awareness**: how we perceive our own self-awareness (feelings, emotions, values, attitudes, behaviours, strengths, and weaknesses) and, **external self-awareness**: how we are viewed by others in respect of the same traits. If you can understand how others see you, the research suggests that you are likely to be more skilled at empathy (Eurich, 2018). Empathetic listening - conversations where the focus is on listening with empathy to engender understanding and trust allowing social interactions to flourish, will help to improve your self-awareness (Hardy, 2020).

Although the importance of self-awareness has been described as “the capacity to focus attention on oneself” (Silvia and O’Brien 2004) that helps provide individuals with an ability and a need to have perspective on other people’s points of view, exercising constraint and self-control, it has been negatively linked with detrimental health concerns such as anxiety, depression and suicide (Eurich, 2018; Silvia and O’Brien 2004). Existing research suggests that an over examination of how we think and feel versus the need for self-reflection and perspective is what Silvia and O’Brien (2004) referred to as the “human dilemma” may be partly to blame. If the body of research suggests that the positive and negative connotations associated with self-reflection and introspection versus the need to take different perspectives onboard is part of developing ‘good’ self-awareness, it follows that it should be a question of balance for individuals seeking to improve their self-awareness.

According to Eurich (2018), the issue is not with practising self-reflection and introspection that is wrong it is how it is being practised. Eurich suggests that instead of asking “why” questions, people should be asking “what” questions.

For example picture the scenario of someone attending a team meeting at work and during that meeting the person gets annoyed and senses that their colleagues are aware of this. Instead of that person attending the meeting thinking, “why do I always feel upset at work in team meetings” that person should reframe the question and ask, “what is occurring in that situation that keeps making me feel upset”. The research conducted by Eurich (2018) and her colleagues found that it is difficult for people to access their unconscious thoughts and feelings when asking questions about trying to understand their feelings and emotions - our rational and irrational mind together with our biases interfere with our confidence of what the right reasons are in certain situations. Perhaps it is a question of judging when to reduce the level of subjective self-reflection and introspection? Based on the research findings, Eurich (2018) says that ‘what’ questions “help us stay objective, future-focused and empowered to act on our new insights”. Therefore, is it necessary to determine what type of questions can help people engage in healthy perspective taking? The importance of the types of

conversations that we have may also support individuals' needs when seeking to gain perspective during social interactions to improve self-awareness.

### Self-Awareness Takeaways

- Self-awareness can be thought of as internal and external - **internal self-awareness**: a person's ability to recognise their own emotions and feelings and the impact of their emotions and feelings on others and, **external self-awareness**: a person's ability to understand how others view them in terms of the same factors above
- Over examination through self-reflection and introspection should be balanced with a wider sense of perspective - the "human dilemma"
- Asking more 'what' questions rather than 'why' questions may help reduce any negative aspects associated with self-reflection and introspection
- 87% of all participants surveyed would like people to see them as they really are

## Social-Confidence

Social-confidence is about trust and trust worthiness that you will be accepted and valued within a social setting or social group where you are interacting with others (Psychologies, 2012; Manning and Ray, 1993). If you are socially confident in one situation, it does not automatically follow that you will be socially confident in all scenarios. Different people, different social settings, a person's capability to do the task or job or an activity, has an impact on how socially confident a person is. For example, preparing for and attending an interview, evokes different emotional responses and feelings than if you are going on a first date or preparing to give a wedding speech or delivery of a presentation to senior executives. Social-confidence is also about the level of competency a person has in a certain social setting engaging with different tasks or activities - this often drives different emotions and feelings and, whether a person will be accepted by others.

Based on the survey findings, 66% of all participants either somewhat agree, agree or strongly agree with the statement 8 - **"I feel that other people are expressing their true selves around me"**. This would indicate that more people who participated allow others to feel comfortable, trusted and are socially accepted by them. This may also inform the level of empathy and external self-awareness that they have.

Within social-confidence, there is almost an even split on responses. Unlike the responses from participants under empathy and self-awareness, the percentages for statement 9 are close at 52% agreeing and 48% disagreeing with the statement. - **"I know how I'd get more comfortable being myself in social situations"**.

Refer to section 2.3 of this Report for more detail on the social-confidence findings.

## Social-Confidence Takeaways

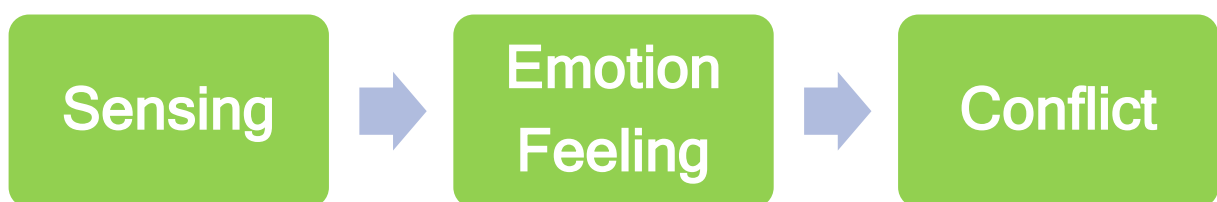
- Social-confidence - a person who has confidence interacting with others in social situations
- Trust and trustworthiness are important aspects of confidence in social situations
- Social-confidence is not an absolute - people may be confident in one social setting or context but not in another
- A person's competency in a social situation or context may help to improve their social-confidence
- 61% of all participants surveyed would like to feel more comfortable being themselves in social situations

## Conversation Skills

Conversation and conversation skills is the opportunity to develop shared understanding with others; to express feelings and emotions and to acknowledge the feelings and emotions of others (Barker, 2019).

According to Petrovici and Dobrescu (2014), social intelligence “involves verbal and non-verbal communication skills, collaboration skills, conflict management skills, promoting team spirit, respecting others and being respected”. In some respect, good communication skills are important to maintain and develop new relationships. Arguably conversation skills are what help to navigate changes in social settings and groups, solve issues and bind together the other determining factors that influence social health. At the same time, the other determinants of social health act as a barometer to help regulate and calibrate the output of conversations. Conversations can be tough and lead to difficulty where there is a lack of empathy, self-awareness or social-confidence.

The elements of difficult conversations start with **sensing**, **emotion** and then leads to **conflict**. Barker (2019) states, first we sense that something is not right and do not know how to respond - we try to rationalise the behaviour of others or our own - unable to make sense or cope with uncertainty. Emotion can cloud our judgement leading to no response or an inadequate response, then a tough conversation may develop leading to conflict.



Building empathy, self-awareness and social-confidence into conversation skills and related training programmes, is the key to productive and successful relationships that support better social health (Petrovici and Dobrescu, 2014).

Based on the survey findings, except for the age group 65 and over, each age group agrees more than disagrees with the conversation skills statement with an aggregate percentage of 65%. There was only a single statement aligned to conversation skills in this research. The highest percentage was in relation to question 10 - “I wish I was better at coming up with up with different things to talk about”; this represented a percentage response of 73% in the age group 55-64. This indicates that participants in this age range want to find different topics to discuss. Increasing conversation is more likely to improve your conversation skills and enhance other social skills. What cannot be determined from research of the data, is whether the high percentage rate suggesting the need to talk about or discuss new things, is a consequence of loneliness, and therefore is indicating a susceptibility to poor social health that may impact mental and physical health (British Heart Foundation, 2020; Killam, 2018; Killam, 2020a, b, c). What is interesting is that the adjacent age group - 65 and above disagreed with the question 10 statement at a percentage of 70%. It is hard to determine without further investigation if this is age related or associated with some other social context.

Refer to section 2.4 of this Report for more detail on the conversation skills findings.

### Conversation Skills Takeaways

- Conversation skills include a person’s ability to initiate, manage and develop conversations in different social situations
- Conversations (and conversation skills) support the development of shared understanding between others
- Good conversation skills help with conflict management and collaboration
- Building empathy, self-awareness and social-confidence into conversation skills and training programmes help to support social relationships
- 65% of all participants surveyed would like to be better at finding different things to talk about



### 3.2 Conclusion

Why our social health matters has been evident for many years among researchers and practitioners within social science and other health related disciplines (Cho, Park and Song, 2020; Killam, 2020c; Riggio, 2014). Research by Segrin and Taylor (2007) suggests that “social skills were consistently and positively associated with all indicators of psychological wellbeing” and other social health related benefits.



If togetherness, sense of community and social interaction is what is needed to help cultivate social health then, if left unattended, loneliness and social isolation is what will impact good social health. There are many unknowns concerning the outcome of the pandemic on our health and wellbeing, from the effect of long COVID (British Heart Foundation, 2020) to the issues that loneliness (Mind, 2019; Sullivan, Victor and Thomas, 2016) is likely to cause, as a by-product of the lockdown measures that were needed to be put in place to protect public health. As we start to emerge from the restrictions under the UK Government’s roadmap out of lockdown (GOV.UK, 2021), future research is likely to address questions on the impact of the pandemic on different aspects of health and wellbeing. What is clear, is the consequence that

loneliness can have on social health through social isolation (Killam, 2020b; Killam, 2018; 2020; Umberson and Karas Montez, 2010). What is less clear is the overall impact it may have on mental health (Mental Health Foundation, 2020) and physical health. If this can be attributed to a reduction in good social health, particularly over the last 12 months, the challenge is how can the impact be accurately measured?

This research garnered insights from a survey, focus groups, data representing feedback from the customers of Games to Get and conversations/interviews with the Games to Get leadership, to investigate why social health matters. The approach was to take a closer look at some of its determinants - empathy, self-awareness, social-confidence, and conversation skills (and conversation). What the findings of the research indicate is that all four determinants examined are interrelated and are present to a greater or lesser extent in most social interactions at a conscious or sub-conscious level. What is shown is the prominent role that conversations have in supporting the other determinants (Bregman, 2020; Baker, 2019) and social interactions, in addition to social health, mental health and physical health. An example of customer feedback (see Appendix 5: Customer Feedback - Sussed as a Conversation Game) on Sussed cards that helped facilitate conversation and social interaction said:

**“Played the game with my daughter and loved it, it really gets you thinking how well you know someone. Brilliant game for conversation starter. Highly recommend. Great quality cards”.**

Conversation appears to be at the intersection of social engagement and understanding and being aware of the feeling of others; the importance of quality conversations is perhaps taken for granted at times (Bregman, 2020). Learning and practising conversation (and listening) skills that support and develop empathy, self-awareness and social-confidence, can help alleviate the impact of loneliness and social isolation if it arises. Conversation can also have the benefit of developing social relationships but conversely, can be destructive if conversations take place devoid of empathy and self-awareness (internal and external self-awareness). Just as empathy can be learnt (Segal, 2018) so too can the ability to hold empathetic conversations (Hardy, 2020) with techniques explored by Adam Grant called

motivational interviewing. This starts with “an attitude of humility and curiosity” (Grant, 2021) or games such as Sussed, that help to exercise and stretch our understanding of empathy, self-awareness and social-confidence through conversation, based on an analysis of customer feedback on Sussed and the observations from the focus groups.

Is it time that social health is promoted to the same status and with the same importance as mental and physical health (Cho, Park and Song, 2020)? Social health functions with mental and physical health and at times, this relationship may be less obvious to some than others. Individuals should consider the holistic nature of health as a ‘personal health system’ by recognising that if social health is misaligned with mental or physical health or vice versa, any imbalance may affect overall health and wellbeing. This holistic approach is supported by the World Health Organisation through its acknowledgment that health is “a state of complete physical, mental and social well-being” (WHO, 2021). Ultimately, the research indicates that striving for a good balance between all aspects of health and wellbeing is why our social health matters.

## 4 Recommendations

As part of this research the consideration of socio-economic factors such as poverty, access to education and employment status was out of scope. The survey sample was a randomised selection of participants, although age groups were taken into consideration as part of the data capture exercise and subsequent analysis.

With the interest that Games to Get has in social health and wellbeing generally, the Project Team recommends further research that investigates why social health matters, including its determining factors in specific contexts. That way more comparative analysis can be undertaken to determine which parts of our society have different requirements and needs to develop better social health that supports and advances overall health and wellbeing. Additional research could be conducted to focus on the following target segments:

- social care (including care homes) and the NHS;
- retail, tourism, and leisure sectors; and/or
- professional services sector.

The suggested areas for further social health research reflect a diverse landscape that incorporate those sectors that contribute and form part of a functioning society.

## 5 References

Barker, A. (2019). *Improve Your Communication Skills: How to Build Trust, Be Heard and Communicate with Confidence*. Kogan Page Limited, Fifth Edition 2019

Bregman, P. (2020). Productive Conversations Take Real Empathy. HBR.ORG, 4 March 2020 [*online*]. Available at <https://hbr.org/2020/03/productive-conversations-take-real-empathy> [Accessed on 16 February 2021]

British Heart Foundation (2020). Long Covid: What are the Symptoms and How Long Does It Take to Recover. Heart Matters Magazine, BHF 17 December 2020 (Updated 1 April 2021 [*online*]). Available at <https://www.bhf.org.uk/information-support/heart-matters-magazine/news/coronavirus-and-your-health/long-covid> [Accessed on 2 April 2021]

Brockes, E. (2020). After Just Half a Day of Home-Schooling, I am Officially in Awe of All Teachers. The Guardian, UK Edition 20 March 2020 [*online*]. Available at <https://www.theguardian.com/commentisfree/2020/mar/20/home-schooling-teachers-child-coronavirus> [Accessed on 24 March 2021]

Cho, S.M., Park, C.U. and Song, M. (2020). The Evolution of Social Health Research Topics: A Data-driven Analysis. *Social Science & Medicine*, 265, p.113299.

Davis, J. L. and Jurgenson, N. (2014). Context Collapse - Theorizing Context Collusions and Collisions. *Information, Communication & Society*, Vol.17, (4), pp 476-485

Dunbar, R. (2021). *Friends: Understanding the Power of our Most Important Relationships*. Little, Brown 4 March 2021

Eurich, T. (2018). What Self-Awareness Really Is (and How to Cultivate It). HBR.ORG, 4 January 2018 [*online*]. Available at <https://hbr.org/2018/01/what-self-awareness-really-is-and-how-to-cultivate-it> [Accessed on 5 March 2021]

Gallagher, T. (2021). 'Make Room for Fun' - Home-Schooling for Parents. Queen's University Belfast. 2021 [*online*]. Available at <https://www.qub.ac.uk/coronavirus/analysis-commentary/make-room-for-fun-homeschooling> [Accessed on 24 March 2021]

Goleman, D. (2020). What People (Still) Get Wrong About Emotional Intelligence. HBR.ORG, 22 December 2020 [*online*]. Available at <https://hbr.org/2020/12/what-people-still-get-wrong-about-emotional-intelligence> [Accessed on 5 March 2021]

Goleman, D., Boyatzis, R.E., McKee, A. and Finkelstein, S. (2015). HBR's 10 Must Reads on Emotional Intelligence. Harvard Business Review Press

GOV.UK (2021). COVID-19 Response - Spring 2021 (Summary): Roadmap Out of Lockdown. GOV.UK. 22 February 2021 [*online*]. Available at <https://www.gov.uk/government/publications/covid-19-response-spring-2021/covid-19-response-spring-2021-summary> [Accessed on 25 February 2021]

Grant, A. (2021). Think Again: The Power of Knowing What You Don't Know. Penguin Random House, UK

Hardy, B. (2020). Personality Isn't Permanent. Penguin Random House

IBIS World (2021). Learning Disability, Mental Health & Substance Abuse Facilities in the UK. IBIS World Report January 2021(Industry Report Q87.200)

Killam, K. (2018). To Combat Loneliness, Promote Social Health. Scientific American, 23 January 2018 [*online*]. Available at <https://www.scientificamerican.com/article/to-combat-loneliness-promote-social-health1/> [Accessed on 5 February 2021]

Killam, K. (2020a). In the Midst of the Pandemic, Loneliness has Levelled Out. Scientific American, 18 August 2020 [*online*]. Available at <https://www.scientificamerican.com/article/in-the-midst-of-the-pandemic-loneliness-has-leveled-out/> [Accessed on 5 February 2021]

Killam, K. (2020b). How to Prevent Loneliness in a Time of Social Distancing. Scientific American, 12 March 2020 [*online*]. Available at <https://www.scientificamerican.com/article/how-to-prevent-loneliness-in-a-time-of-social-distancing/> [Accessed on 5 February 2021]

Killam, K. (2020c). How's Your Social Health? Psychology Today 3 May 2020 [*online*]. Available at <https://www.psychologytoday.com/gb/blog/social-health/202005/how-s-your-social-health> [Accessed on 13 February 2021]

Lau, J. and NCS (2016). Social Intelligence and The Next Generation. Report, King's College London and National Citizen Service, March 2016 [*online*]. Available at [https://www.basw.co.uk/system/files/resources/basw\\_64326-4\\_0.pdf](https://www.basw.co.uk/system/files/resources/basw_64326-4_0.pdf) [Accessed on 18 December 2020]

Mackintosh, T. (2021). Covid: 'Young Medics Have Seen More Deaths than Some Do in a Career'. BBC News, London. 22 March 2021 [*online*]. Available at <https://www.bbc.co.uk/news/uk-england-london-56286593> [Accessed on 24 March 2021]

Manning, P. and Ray, G. (1993). Shyness, Self-confidence, and Social Interaction. Social Psychology Quarterly, pp.178-192.

Mental Health Foundation (2020). [*online*]. Available at <https://www.mentalhealth.org.uk/publications/impact-traumatic-events-mental-health> [Accessed on 21 February 2021]

Mind (2019). Loneliness. Mind for better mental health, July 2019 [*online*]. Available at <https://www.mind.org.uk/information-support/tips-for-everyday-living/loneliness/about-loneliness> [Accessed on 19 December 2020]

NEU (2021). Coronavirus: Testing in Schools and Colleges. National Education Union, 22 April 2021 [*online*]. Available at <https://neu.org.uk/coronavirus-school-testing> [Accessed on 23 April 2021]

ONS (2020). Coronavirus and Loneliness, Great Britain: 3 April to 3 May 2020. Office for National Statistics: Statistical Bulletin, 8 June 2020

Patel, M.S. and Phillips, C.B. (2021). COVID-19 and The Moral Imagination. *The Lancet*, 397(10275), pp.648-650

Petrovici, A. and Dobrescu, T. (2014). The Role of Emotional Intelligence in Building Interpersonal Communication Skills. *Procedia-Social and Behavioral Sciences*, 116, pp.1405-1410

Psychologies (2012). Improve Your Social Confidence. *Psychologies*, 1 March 2012 [*online*]. Available at <https://www.psychologies.co.uk/self/social-confidence.html> [Accessed on 13 February 2021]

Riggio, R. E. (2014). What Is Social Intelligence? Why Does It Matter? *Psychology Today* 1 July 2014 [*online*]. Available at <https://www.psychologytoday.com/gb/blog/cutting-edge-leadership/201407/what-is-social-intelligence-why-does-it-matter> [Accessed on 13 February 2021]

Schrage, M., Pring, B., Kiron, D. and Dickerson, D (2021). Leadership's Digital Transformation: Leading Purposefully in an Era of Context Collapse. MIT Sloan Management Review: Research Report January 2021 [*online*]. Available at



<https://sloanreview.mit.edu/projects/leaderships-digital-transformation> [Accessed on 1 February 2021]

Segal, E. (2018). *Social Empathy: The Art of Understanding Others*. Columbia University Press

Segrin, C. and Taylor, M. (2007). Positive Interpersonal Relationships Mediate the Association Between Social Skills and Psychological Well-being. *Personality and Individual Differences*, 43(4), pp.637-646

Silvia, P.J. and O'Brien, M.E. (2004). Self-Awareness and Constructive Functioning: Revisiting "The Human Dilemma". *Journal of Social and Clinical Psychology*, 23(4), pp.475-489

Sullivan, M. P., Victor, C. R., & Thomas, M. (2016). Understanding and Alleviating Loneliness in Later Life: Perspectives of Older People. *Quality in Ageing and Older Adults*, VOL. 17 NO. 3 2016, pp. 168-178

Time to Change (2021a). Time to Talk Day 2021 [*online*]. Available at <https://www.time-to-change.org.uk/resources/create-download-materials/#/~embed/resources/collection/565> [Accessed on 15 February 2021]

Time to Change (2021b). Who We Are. [*online*]. Available at <https://www.time-to-change.org.uk/about-us/who-we-are> [Accessed on 15 February 2021]

Toronto Public Health and Wellesley Institute (2019). *Promoting Health and Well-Being through Social Inclusion in Toronto: Synthesis of International and Local Evidence and Implications for Future Action*, January 2019 [*online*]. Available at <https://www.wellesleyinstitute.com/publications/promoting-health-and-well-being-through-social-inclusion-in-toronto/> [Accessed on 5 March 2021]

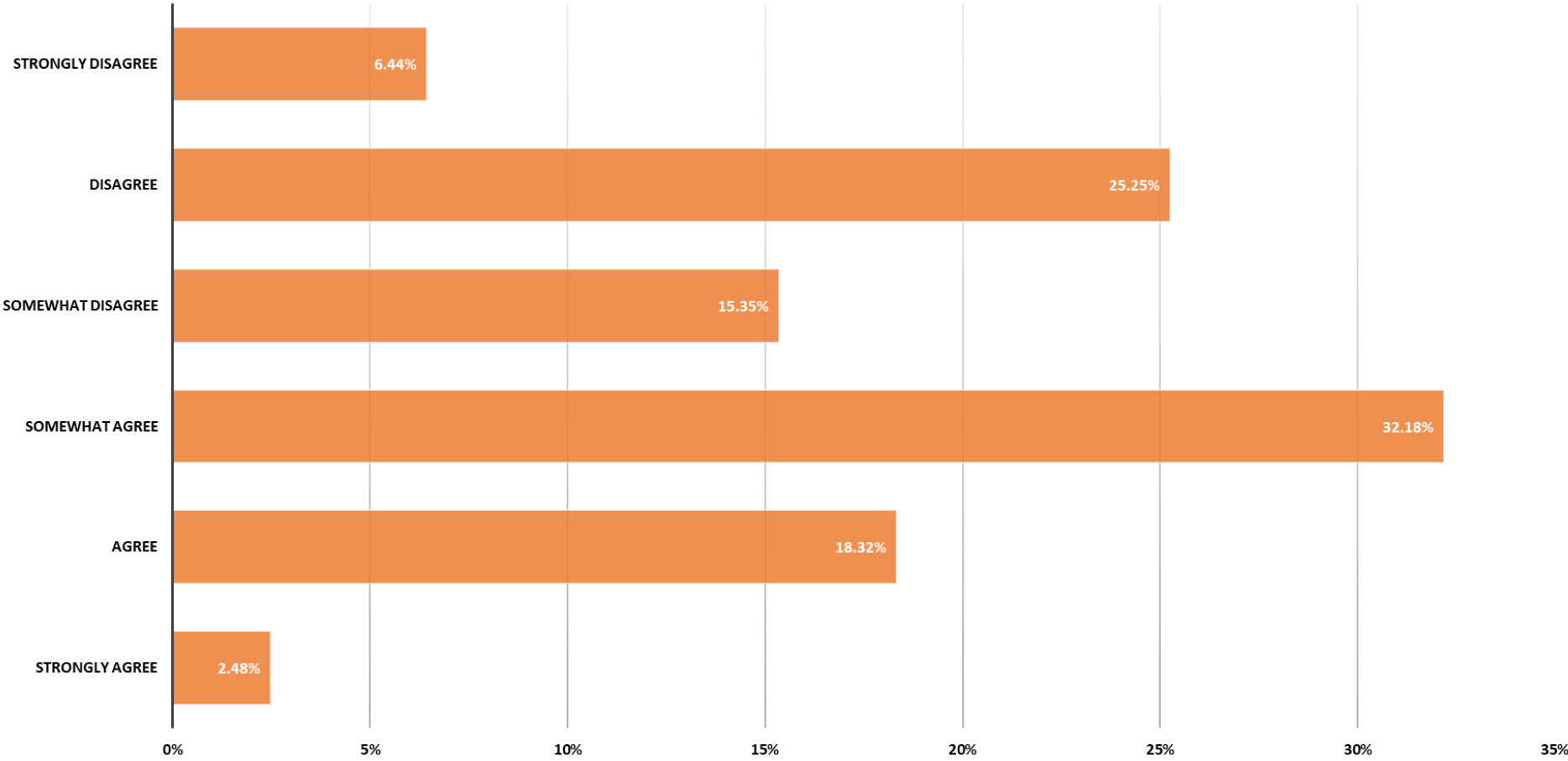
Umberson, D. and Karas Montez, J. (2010). Social Relationships and Health - A Flashpoint for Health Policy. *Journal of Health and Social Behavior*

WHO (2021). Constitution -World Health Organisation. [*online*]. Available at <https://www.who.int/about/who-we-are/constitution> [Accessed on 21 January 2021]

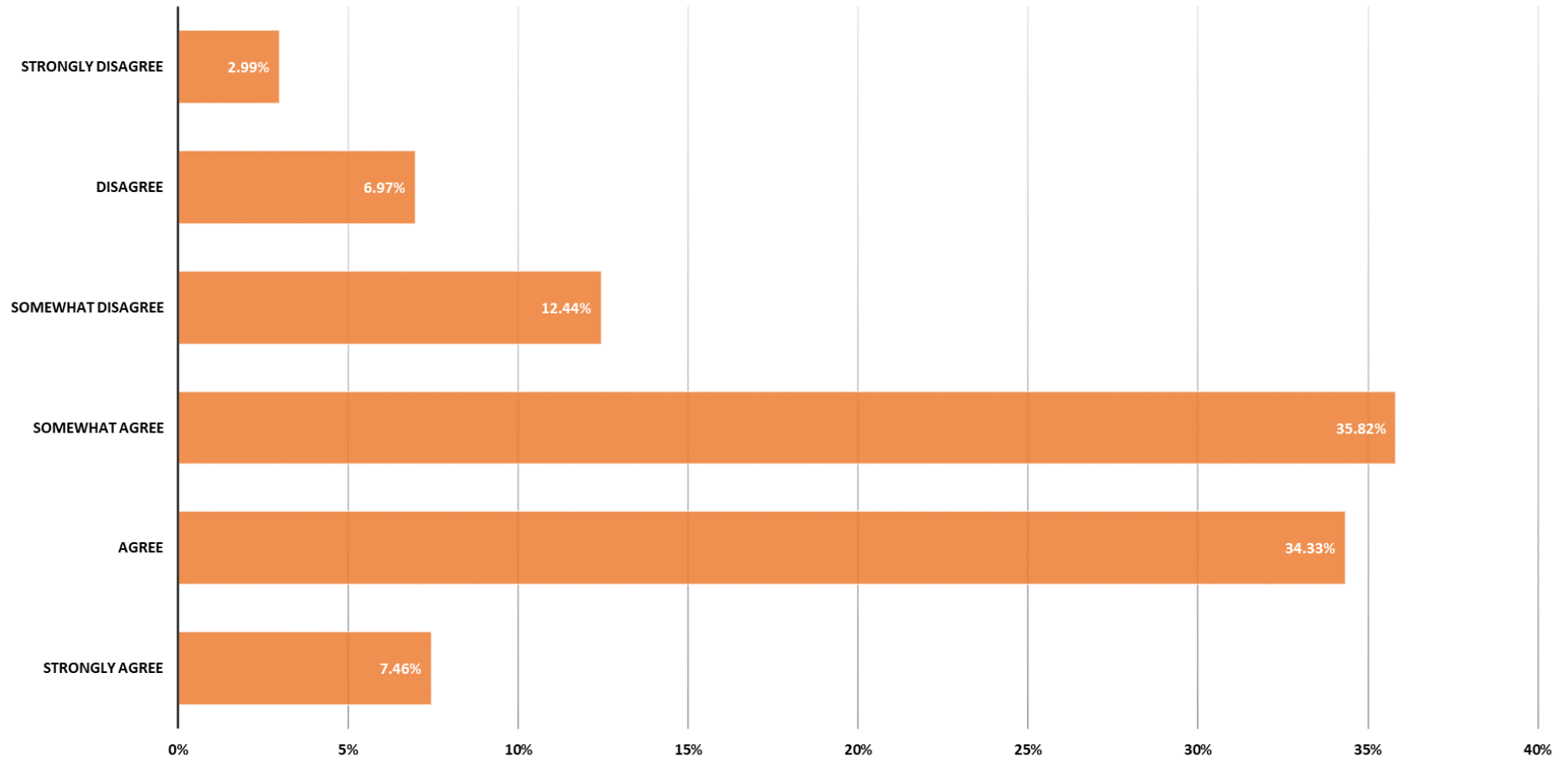
## Appendix 1: Percentage of All Respondents for each Empathy Statement

See bar charts representing the empathy responses on the next page.

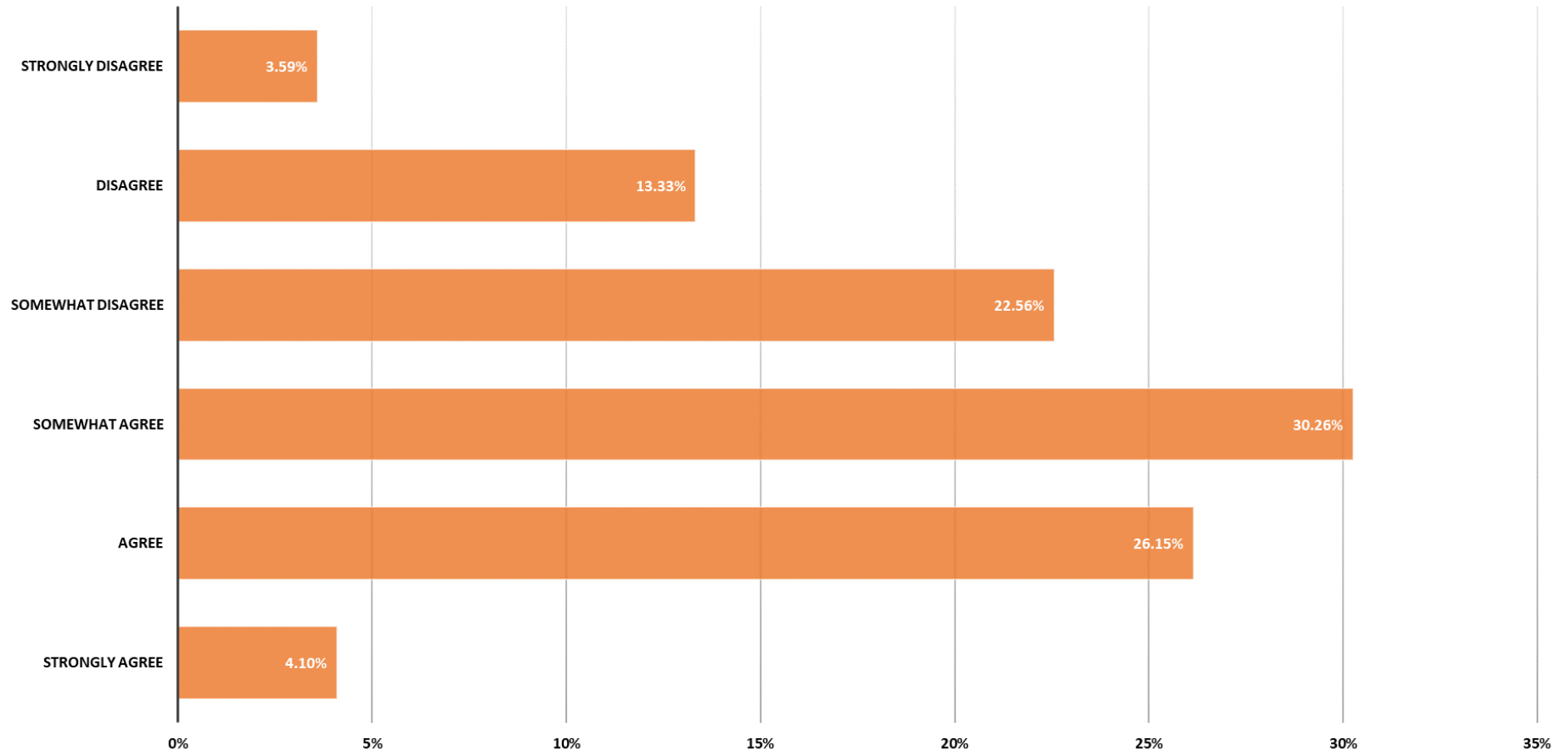
### 1. I wish I was better at understanding how people are feeling



## 2. I'd like people to be better at understanding how I'm feeling



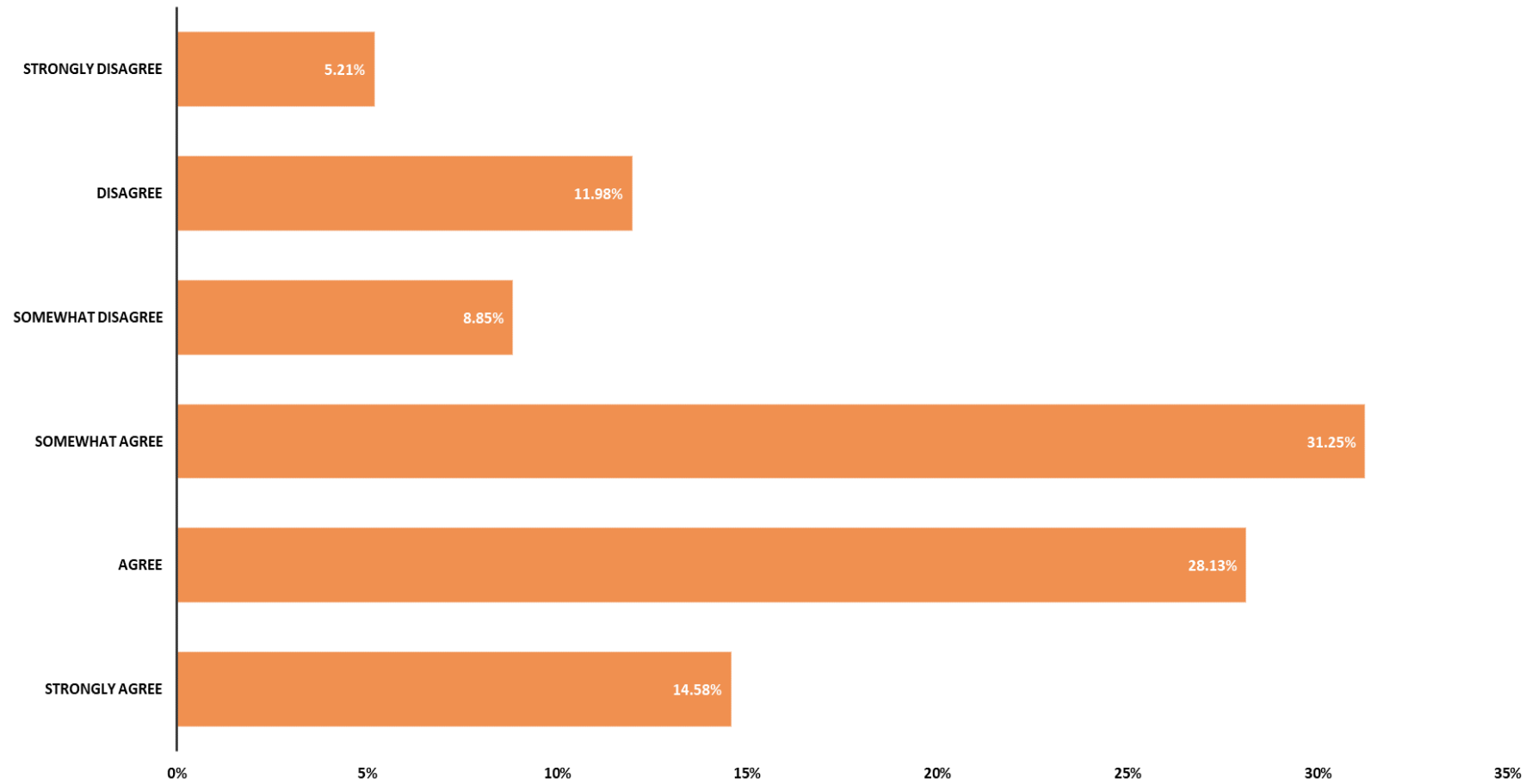
### 3. I know how I'd get better at understanding how people are feeling



## Appendix 2: Percentage of All Respondents for each Self-Awareness Statement

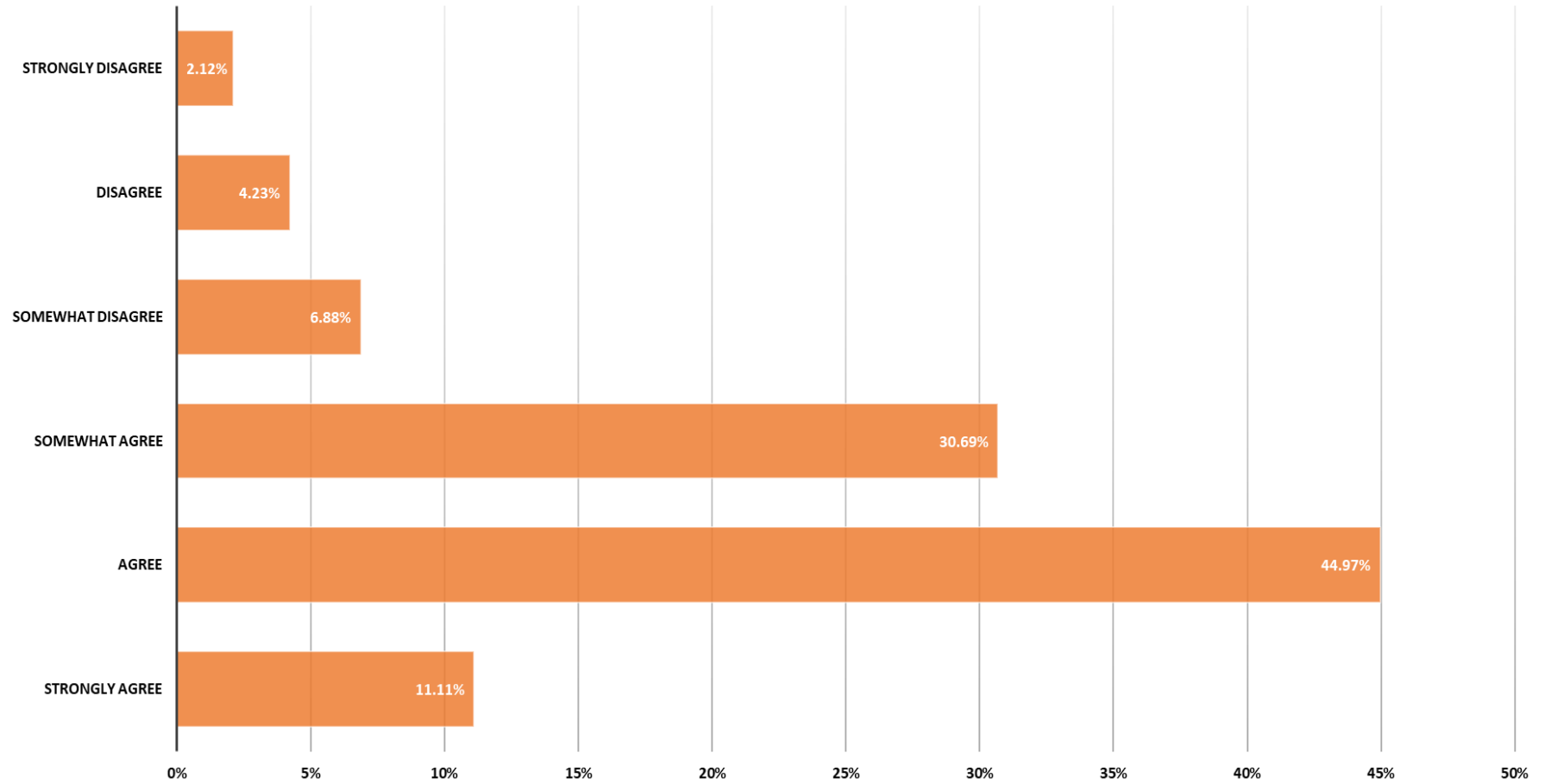
See bar charts representing the self-awareness responses on the next page

#### 4. I wish I had a better idea of how others see me

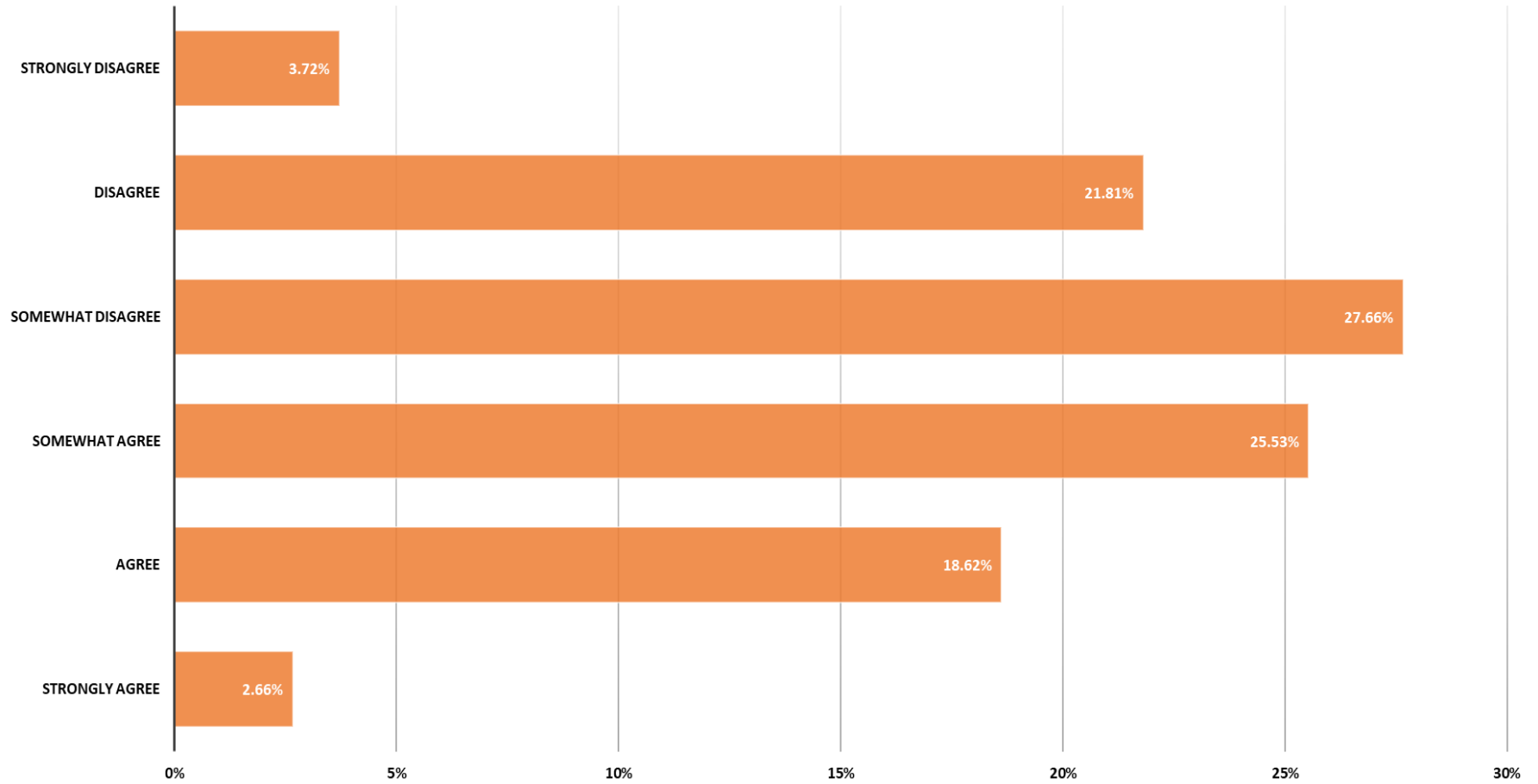




### 5. I'd like others to see me as I really am



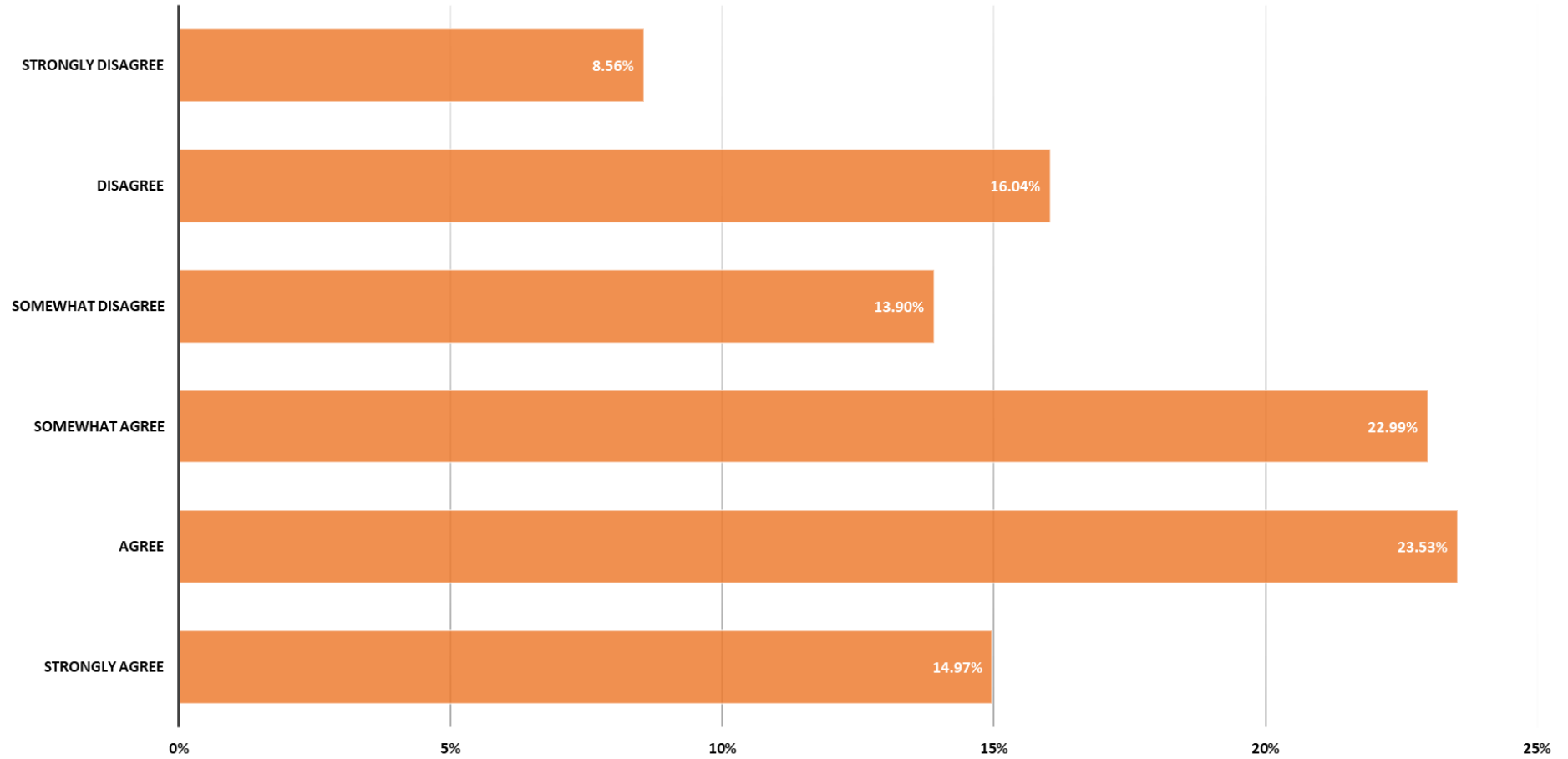
## 6. I know how I'd get others to see me as I really am



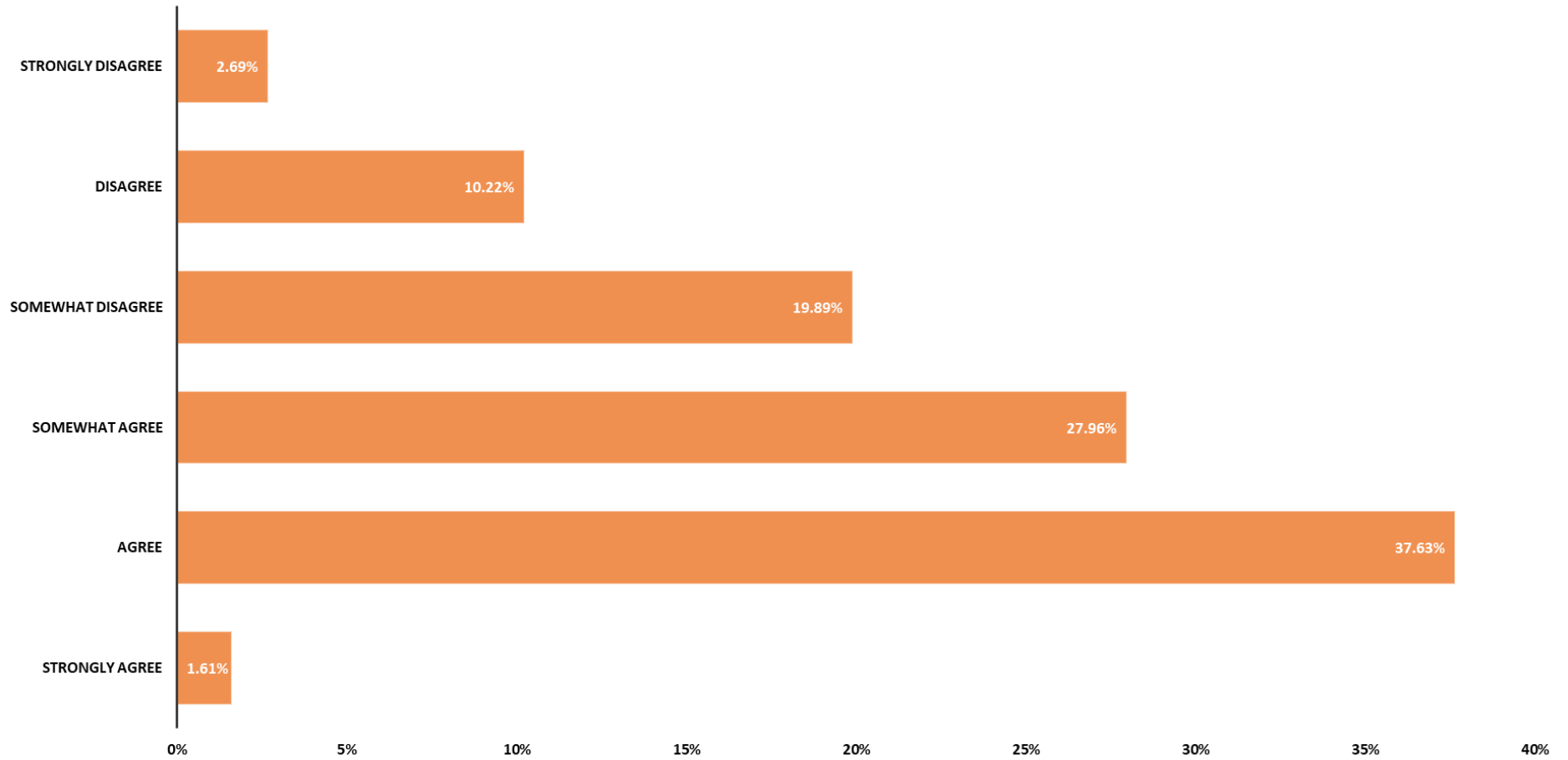
### Appendix 3: Percentage of All Respondents for each Social-Confidence Statement

See bar charts representing the social-confidence responses on the next page.

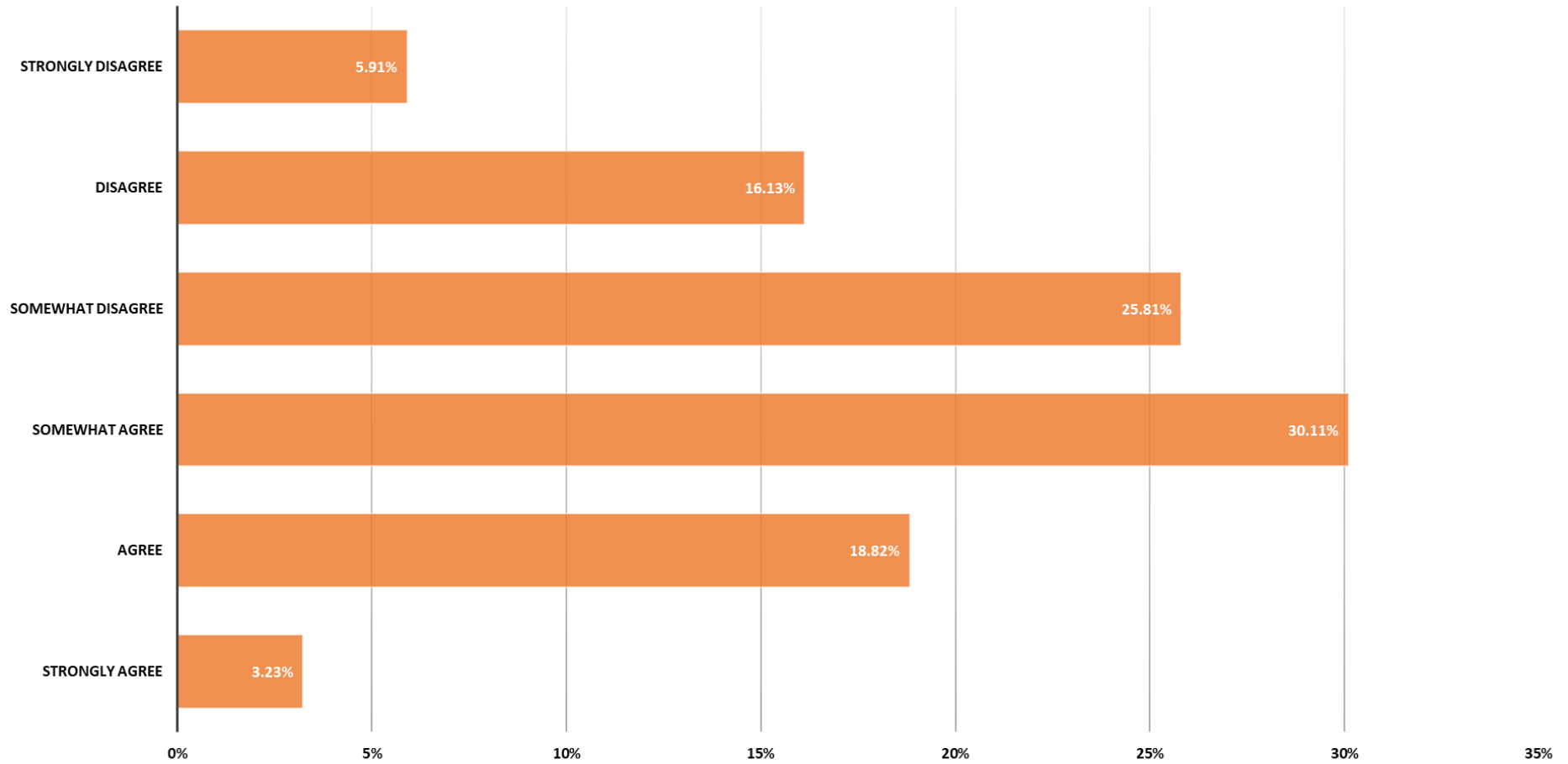
## 7. I wish I felt more comfortable being myself in social situations



## 8. I feel that other people are expressing their true selves around me



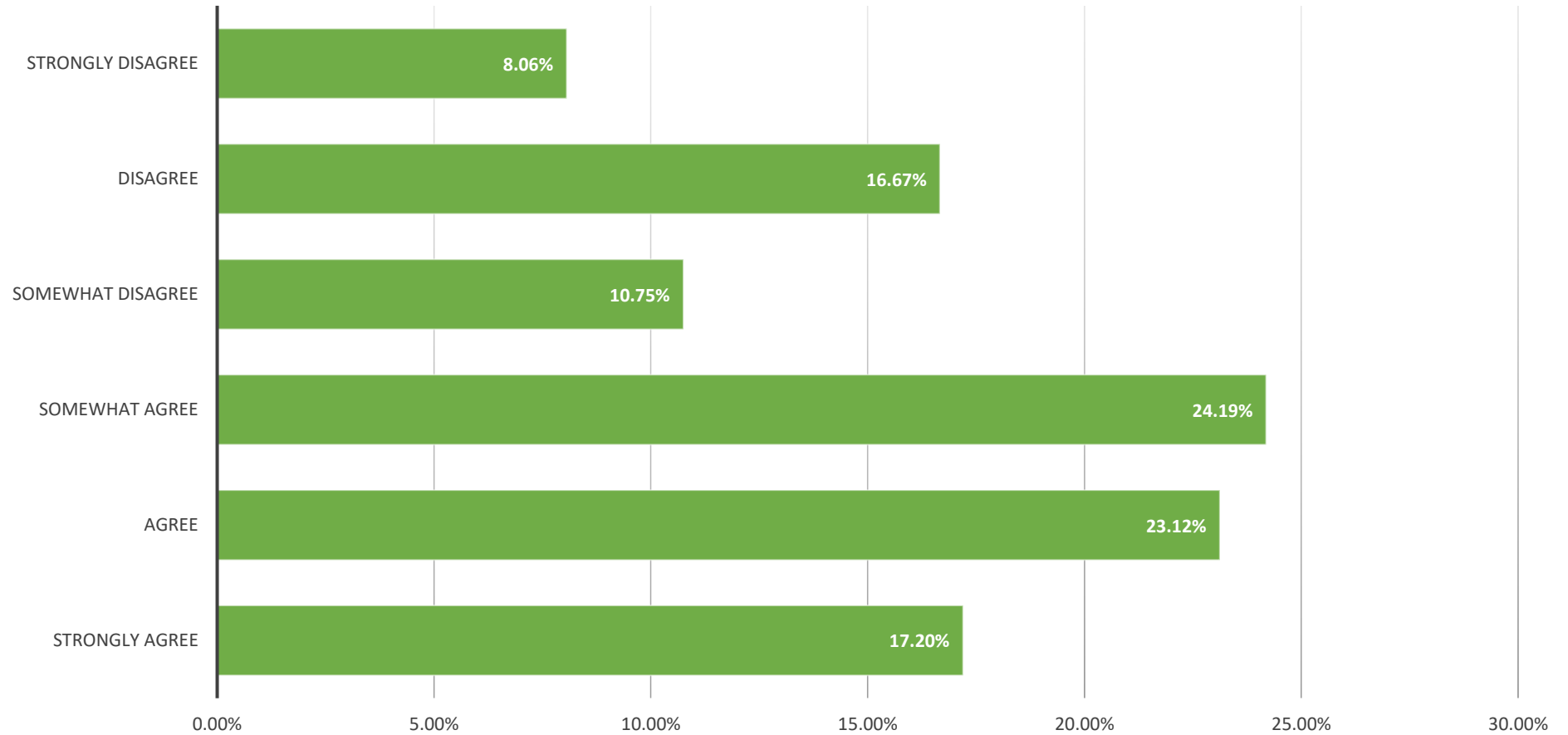
### 9. I know how I'd get more comfortable being myself in social situations



## Appendix 4: Percentage of All Respondents for the Conversation Skills Statement

See bar chart representing the conversation skills responses on the next page.

## 10. I wish I was better at coming up with different things to talk about





## Appendix 5: Customer Feedback - Sussed as a Conversation Game

Feedback from customers who rated Sussed as a conversation game via the Amazon platform. The sample feedback data in this Appendix has 24 entries. The entries cover the period between January 2019 and June 2020. This is a representative sample of feedback data and therefore is not an exhaustive list of the feedback data during the stated period.

“Great game has had us laughing and had strange conversations around this game!! Great for camping!”

“It's a great game, especially in these crazy times, would highly recommend as it's a good conversation starter as well.”

“Great game - perfect for creating really fun conversations. We didn't bother with the score paper because we just enjoyed playing the game and chatting and laughing.”

“Such a good concept. Love it. Even if you don't use the game as intended the content on the cards alone create an opportunity for discussions that may be hard to initiate otherwise.”

“Great game for starting debates and chats with friends or family. Really great for people who don't like competition or tactical games as it's super easy and fun!”

“In these difficult times when we are all trying to keep ourselves and our families occupied, we looked for something different. We found it in “Sussed.” Phones and social media banned from the room we have had incredible fun playing Sussed, different and conversation provoking fun. We have now ordered different versions to continue to help us cope with the lockdown! Thoroughly recommended!!”

“This actually a really fun game, which promotes conversation in a subtle and effective way.”

“Good to get teenagers talking”

“Great fun. I’ve played this several times with my partner and it’s a great conversation starter.”

“Excellent game. Enjoying playing it with all the family. Very interesting conversations.”

“A good group game, very simple to understand and set up and can spring up some interesting conversations and thought. Not that much like a traditional game, more of a kind of personal quiz but still fun.”

“Brilliant games for family and friends. Gets everybody talking. Good fun”

“Played this with my teenage daughter and friends. Was really easy to start and great fun we had lots of laughs and really opened up some conversations.”

“Great game, bought for a few other people since receiving our first as a gift. Get ready for some interesting debates between you and your partner and or friends! Can be played in 10 mins, or however long you want. Great for a home date night between a couple.”

“Really interesting little game to play with people you know and people you don't! Played with friends who I hadn't seen for a while and it provoked some really interesting, funny and sometimes deep conversation. I really recommend this game since it's very affordable for such a good and repayable 'game' - although I'd consider it more of an experience for bonding and laughing with others!”

“I bought this set for my youngest daughter and her family, after buying the original set for ourselves last year. We were aged 20 - 70 (with a little input from the 5 year old!), and we all had great fun. Lots of laughs and some "heated" discussions.”

“Played the game with my daughter and loved it, it really gets you thinking how well you know someone. Brilliant game for conversation starter. Highly recommend. Great quality cards”

“This card game is a brilliant idea. Great way to help communication between tween and adult with varied multiple-choice questions on dreams, reality and inspiration.”

“It's a fun way to pass the time! I use it as a way to start conversations over dinner with my son (9 years old). It makes dinner conversation more interesting than "How was your day?" "Fine". It's not a competitive game, there are no winners or losers, which is a refreshing change.”

“Firstly, the price was fantastic, delivery was super amazing, the game itself ... well, so simple but so much fun! I'm not a great conversationalist, but this game really helps my daughter and I to express ourselves!!”

“Really fun family game!! Caused lots of fun discussions!! Perfect for all ages.”

“What an interesting game, one that all age groups can play and its gets everyone talking and giving their opinions. Will definitely be purchasing others in the series.”

“We have had so much fun playing it really brings the family together, the kids love it”

“Lots of interesting questions that sparked good conversation”