Social Isolation

Impacts on Health and Wellbeing

Points for consideration

- Proven **correlation between social isolation** (and/or loneliness) **and health & wellbeing**.
- **Agencies need to be cautious of over-dependence on digital services**. Barriers are not just IT literacy – also include income, access, slow rural broad-band, literacy levels.
- **Men are often more reluctant to recognise and admit that they are isolated**. New thinking is needed to engage with and support men at specific 'trigger times'.
- **Shortage of volunteers, particularly younger volunteers**. Potential major impact on future service provision, particularly in the voluntary sector.
- **Short term thinking and funding** often means that interventions **don't have a chance to prove their efficacy.**
- Cheap and **innovative solutions** are being introduced elsewhere e.g. casserole clubs. We need to identify and learn from them.
- It's **not** necessarily the people who are **most at risk** of social isolation that are **being reached** by current services.

Background

Action Hampshire was commissioned by Mid Hampshire Better Local Care to investigate social isolation in Mid Hampshire. The study was carried out in two parts: a literature review, and a series of qualitative interviews with expert not-for-profit organisations and individuals.

What is social isolation?

Social isolation occurs when a person is separated from social contact, community involvement or access to services. It also includes having poor quality social contacts.

Impact on health and wellbeing

There is a clear correlation between social isolation and relatively poorer health and wellbeing. Proven impacts:

- higher mortality – effect is comparable to obesity;
- greater risk of breast cancer recurrence;
- increased likelihood of coronary heart disease and stroke;
- earlier admission to residential or nursing care;
- greater risk of emergency hospital admission.

Risks

Individual factors
eg. sexuality, ethnicity, age, personality

Health, wellbeing, disability
eg. sensory impairment, physical or mental ill health

Life transitions
eg. new parenthood, school experiences, becoming a carer, bereavement, acquiring a disability, moving to a new area

Social issues
eg. domestic violence, unemployment, poverty, transport, housing

Who is at risk?

- Men living alone
- New, young or lone parents
- Elderly aged 80+
- Young people not conforming to peer norms
- People with physical/ mental health issues
- Long term unemployed
- LBGT community
- Informal carers
- Recent migrants
- Ex-offenders

Factors contributing to social isolation

Barriers to benefitting from existing provisions

- Feeling you don't fit in with social/cultural norms;
- Struggling with interpersonal situations;
- As a result of disability, finding communication difficult;
- Informal carers being unable to leave their loved one alone;
- People worrying about how they are perceived if they take up services.

External Circumstances

- Major transitional life events e.g. moving house;
- Difficult residential environment e.g. shortage of social spaces;
- Mental illness and associated stigma;
- Being excluded e.g. The mother of an autistic child being shunned by school community due to child's 'bad behaviour'.

Rurality

- Transport and thus access to support and services is a major challenge;
- Frail or disabled people may be isolated because they are unable/unwilling to walk on busy or un-lit country lanes;
- For some, being 'visible' in a small community can be problematic e.g. child receiving free school dinners.

Transport and mobility

- Giving up driving;
- Accessing public transport is particularly challenging for some e.g. people with a learning disability, visual impairment, or anxiety;
- The cost of public transport can be prohibitive;
- Lack of flexible transport can prevent people from accessing social opportunities.

Not accessing what is available

- Unaware of services;
- Pride, independence or not recognising own need;
- Low mood, anxiety, lack of confidence or lethargy;
- Barriers such as technology, language or culture;
- Unsuitable or inappropriate services (particularly for men).

Summary

Social isolation can occur at any age, life-stage or social situation. However, some clear themes emerged about people who are particularly vulnerable to social isolation.

Men

Men (of any age) who live alone are particularly vulnerable to social isolation. They can be more susceptible to isolation due to established gender roles and norms, and then less likely to address the problem.

Mental Health

Social isolation can be both a cause and a consequence of poor mental health. Mental health issues may affect a person's ability to make or maintain relationships, leading to withdrawal from everyday human contact. Conversely, someone who starts to become isolated may find themselves becoming depressed or susceptible to harmful behaviours.

Informal Carers

Informal carers can become very vulnerable to social isolation. Their changing role, and the challenges of their day-to-day responsibilities can reduce opportunities to maintain social contact. Informal carers often do not identify themselves as needing support.

Rurality

Social isolation may be less prevalent in rural areas due to village support networks. However, isolation may just be more hidden in rural area, with people guarding their privacy more fiercely. It is important to recognise the changing nature of some rural areas, as they become less 'communities' and more dormitory settlements.

Action Hampshire