1. **What is the most important issue for the Committee to consider when embarking on this inquiry investigating social isolation?**

What is the current scale of social isolation amongst older people in Scotland and crucially what more needs to be done to reduce its occurrence and alleviate its effects?

We all know it exists and we all know current services cannot meet the need of all affected individuals (whether formally identified or unidentified) or the present demand. In order to plan effectively for change, a better understanding of the scale of the issue needs to be established first.

2. **What groups of older people do you think experience isolation and its negative impact? And, what experience do you have of social isolation amongst the groups you work with?**

I would say any older person who:

- doesn’t have close-knit family and friends, e.g.
  - individuals who become widowed can often lose confidence living on their own, especially when there has always been someone else there to share the load and share experiences with…some people don’t even see the point in carrying on without their spouse.
  - in today's world, many people have children but who live too far away to visit often
  - some areas of the country have high numbers of older people who retire to these picturesque areas then find a few years down the line that poor health takes over and are stuck far from family and friends
  - Some older ‘older’ people will have gradually lost most people close to them – outlived family/ friends/ close neighbours. This can be particularly true for people with no offspring.

- has health issues which affect their ability to get out and about independently and/or to communicate (e.g. loss of hearing/ sight/ mobility, continence issues etc.) and hence their ability to take part in relevant social activities

There is often talk of people in rural areas being more socially isolated than those in urban areas, but in our experience, geographic location makes little difference for the older generation. Older people living at the end of a dirt track in the country are just as isolated as the person living in a block of flats in Glasgow who can’t get out, has no family coming to visit and no contact with neighbours –
the person in Glasgow may see more people from their window but there is still little interaction.

3. **What is the impact of social isolation on mental and physical health? Are there any other impacts?**

At a basic level, it can be said that lack of interaction/stimulation for older people leads to boredom/lethargy/sleepiness, this can lead to a reduced appetite, this can lead to malnutrition/dehydration, and this in turn leads to other health complaints, including dizziness/confusion, which itself can lead to increased falls and other injuries.

As part of the inquiry, the economic impact of all the above has to be considered. i.e. could a small investment in more and better community services to meet the social contact needs of older adults actually save the country money in reduced health and social care costs (reduced GP visits, reduced hospital admissions, reduced prescription costs, reduced personal care, reduced home adaptations etc)?

4. **Are there examples of good practice in helping to combat social isolation among groups of older people?**

There are various befriending initiatives across the country and day centres/lunch clubs, etc. which are examples of good practice. It is important to remember here though that there are certain people for whom social gatherings, such as befriending clubs or day centres, do not appeal. They are actually happier being in their own home, in their own environment, but if they reach a stage where they are not able to visit friends/family or those friends are unable to visit them anymore, then they become isolated and lonely.

From our point of view, we are very proud of what Food Train does in this area. While we have our ‘Food Train Friends’ befriending service aimed specifically at those identifying themselves as socially isolated, we also offer a number of low-level support services, which while ‘reducing social isolation’ is not their main purpose, it is most definitely a major benefit of the service for many service users. Food Train’s services which all support older people to remain independent at home once age, frailty, illness or disability make daily activities difficult, all have an ‘increased social contact’ element to them and include:

- **Food Train** - our weekly grocery shopping delivery, providing two volunteer visits per week, shopping delivery, silent monitoring and signposting/referral to additional services as necessary.
- **Food Train EXTRA** – our regular household support service for labour intensive jobs which have become too difficult (e.g. cleaning out cupboards, defrosting freezers, cleaning inside windows, changing curtains, turning mattresses, changing bedding, removing pet hair from rugs, etc), combined with a cuppa and a blether!
- **Food Train Friends** – our befriending service, offering group activities, 1-to-1 pairings and telephone befriending.
• Outreach Library Service – provided on behalf of West Lothian Council, our volunteers visit housebound older people regularly to deliver books and have a chat.

• Meal Makers – our new national community meal sharing project. We connect people who love cooking and want to be active in their community (Cooks), with older neighbours (Diners) who would appreciate home cooked food delivered to them every now and then. We aim to tackle social isolation and the growing problem of malnutrition by helping older adults who no longer find it easy to cook for themselves to enjoy freshly home cooked food. We also aim to strengthen connections within communities and provide a flexible way for people to volunteer their time and skills locally in a way which suits them.

While many people don’t see social contact as the main benefit of these services or their reason for accessing a service, when asked about what difference the service makes to their lives, they will tell us how they don’t know what they do without it, how they feel more able to stay in their own home and how much they look forward to the volunteers’ visits!

A quote from one of our customers who uses our shopping service puts it into perspective:

“Without Food Train I could not have stayed at home. The friendliness of the volunteers is welcome interruption to solitude, and reassurance to my family that someone is keeping an eye on me.”

5. **What kind of questions should the Committee ask during its inquiry?**

What is the current scale of social isolation amongst older people?

What is currently being done to alleviate this?

What needs to change to further alleviate social isolation?

As the population ages, what can be done to tackle the issue head on and try to avoid social isolation before it occurs?

6. **What could the Scottish Government and others do to tackle social isolation?**

Scottish Government could make funding available to third sector organisations to expand their current provision of community activities/services for older people to better meet the demand.

There needs to be better identification of social isolation amongst health and social care staff to initiate referrals to third sector providers. In many cases, a lot of older people won’t be in contact with any other service, but the one service they will usually have some interaction with will be their GP. Information regarding available local services should be passed on routinely to allow older people themselves to consider their own self-help solutions.
A simple information pack about local older people’s services issued to all older people via their GP annually would go some way to avoiding isolation – a lack of access often stems from a lack of knowledge.

But for this to work, there needs to be sufficient funds for services to be able to meet the demand and avoid the old trap of waiting lists, while people continue to struggle. There would also have to be some onus on GP practices to verbally encourage use of the local services promoted in the pack, as well as provide support to access services for less confident individuals.

If people have relevant information about suitable services, they may even reduce their annual GP visits. For many, one of the few things they feel they have to talk about are their ailments - the GP always listens and the trip to the surgery gives a purpose to the day.

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The Food Train
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