1 Introduction
1.1. Inclusion Scotland is a network of disabled peoples' organisations (DPOs) and individual disabled people. Our main aim is to draw attention to the physical, social, economic, cultural and attitudinal barriers that affect disabled people’s everyday lives and to encourage a wider understanding of those issues throughout Scotland.

2 Social Isolation
2.1 Social isolation affects a disproportionate number of disabled people and adversely impacts on their health. Although increased social isolation is associated with aging it can be experienced by disabled people at all stages of their lives – as children, adolescents, adults and older people.

2.2 Social isolation is not identical to loneliness though the two are often linked. For example a disabled person living in a residential unit, or being seen by their care worker three times a day, may not, technically, be classed as “socially isolated” however they might remain lonely in both settings.

3 Prevalence of social isolation in urban and rural settings
3.1 Research by the University of York\textsuperscript{1} found that disabled children and young people had very limited opportunities to access inclusive leisure activities. Disabled children and young people reported that bullying or fear or bullying spoilt their experiences of, or stopped them accessing, inclusive activities or using local leisure and recreation facilities.

3.2 Research by the Institute of Education\textsuperscript{2} found that primary school pupils in England with special educational needs (SEN) were twice as likely as other children to endure persistent bullying. The study found 12% of seven-year-olds with special needs felt bullied all the time, compared with 6% of non-disabled peers. Even when other factors such as cognitive ability, age & socio-economic background were taken into account, disabled children were still at a higher risk of being bullied. Bullying can be both a cause and a consequence of social isolation from other children – children with few friends are more easily picked on and bullied children are less able to make and maintain friendships.

\textsuperscript{1} Improving the wellbeing of disabled children and young people through improving access to positive and inclusive activities, B. Beresford & S. Clarke, Social Policy Research Unit, University of York, Centre for Excellence & Outcomes in Children & Young People’s Services, 2009

\textsuperscript{2} Bullying experiences among disabled children and young people in England: Evidence from two longitudinal studies S. Chatzitheochari, S. Parsons & L. Platt, Department of Quantitative Social Science, Institute of Education, University of London, 2014
3.4 At age 16 disabled school-leavers are twice as likely to be NEET (Not in Education, Employment or Training) as their non-disabled peers and three times as likely by age 19. Thus the social isolation which young disabled people experience at school is exacerbated by their exclusion from work, apprenticeships and education.

3.5 In 2009 the Life Opportunities Survey\(^3\) asked 18,000 people about the "social barriers" they faced in key areas of life and found that many disabled people were socially isolated and struggling to participate in normal activities.

- Almost a fifth of disabled adults felt so stressed that work was beyond them – compared with just 4% of the general population.
- One in eight impaired adults felt so insecure they would not venture to take a long-distance train, compared with just one in 50 able-bodied people.
- At least some of the social isolation experienced by disabled people arose out of their exclusion from the workforce and lack of income.

3.6 The Life Opportunities Survey also found that 12% of adults with impairments experienced difficulty "accessing rooms within their home or difficulty getting in or out of their home" compared with just 1% of adults without impairments. Thus, because of inaccessible, unsuitable housing, a significant proportion of disabled adults were not only isolated from wider society but potentially even from socialising with other members of their own households.

4 Austerity Cuts and social isolation

4.1 The issue of social isolation cannot be examined in a vacuum. Care services, day centres and employment should enable disabled people to overcome social isolation by allowing them to interact with wider society, their peers or workmates.

   "Right across Scotland we are hearing of day care centres, often the only regular social life that many older people enjoy, being closed, public conveniences shutting, libraries operating reduced hours and funding for community transport initiatives being cut or completely pulled. These all enable older people to leave their homes and meet and interact with their peers, and as a result, an increasing number of older people are now hidden away behind closed doors struggling to cope on their own." – Age Scotland

4.2 All that Age Scotland said about loss of services and increased social isolation amongst older people 2 years ago applies equally to disabled people of working age - except that in the interim the scale of cuts to jobs and services has increased.

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\(^3\) Life Opportunities Survey, Wave One results 2009/11, Office for National Statistics, 2011
4.3 The UK Government closed all of the Remploy factories which provided supported employment (mainly to blind and learning disabled people). Similarly local authorities have increasingly been withdrawing financial support from supported workplaces, leading to the closure of Blindcraft and the Engine Shed in Edinburgh. Yet no alternative employment is readily available to those made redundant. More than half of ex-Remploy workers are still unemployed and there are proportionately less Scots disabled people in employment today (43%) than six years ago (49%).

4.4 Disabled workers who have lost their jobs have also their ability to maintain friendships and social connections with their work-colleagues and have moved from being relatively included to almost totally socially excluded.

4.5 Cuts to welfare benefits have also reduced tens of thousands of Scots disabled people’s ability to participate in wider society. Over half of all the cuts to welfare benefits fall on disabled people and their families with the average loss being £2000. When you can barely afford to eat because of cuts to benefits or sanctions then your ability to participate in social life virtually ceases.

4.6 The political rhetoric and stigmatising media coverage surrounding Welfare Reforms are also acting to further exclude disabled people and increase their social isolation. A 2012 survey by the disability charity Scope found that nearly two-thirds (64%) of the disabled people responding had experienced aggression, hostility or name calling whilst out in the community. A year later, after the positive images conveyed by the Paralympics, more than 80% believed that attitudes towards them had worsened over the intervening 12 months.

4.7 These surveys are in line with research carried out by the Glasgow Media Group for Inclusion London that found that negative portrayal of disabled people in the media had increased significantly since the introduction of Welfare Reforms under the previous Labour Government. This coverage had impacted on non-disabled people’s negative perception of disabled people as benefit cheats and increased disabled people’s fear of verbal and/or physical attack. Obviously if disabled people are fearful of going about their everyday business this greatly increases their social isolation within wider society.

4.8 However the cuts to welfare benefits have been accompanied by cuts to Local Authority budgets. These have also fallen disproportionately on disabled people in the form of rationing of social care services and the imposition of increasingly unaffordable social care and associated charges.

4.9 The Learning Disability Alliance estimate that between 2007 and 2013 twenty thousand older, physically impaired and learning disabled people who would in the past have qualified for support in having their social care needs no longer receive support to help them to manage. This is due to the imposition of increasingly stringent entitlement

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4 Bad News for Disabled People, Glasgow Media Group & Strathclyde Centre for Disability Research for Inclusion London, 2011
5 20,000 Lose Out, 1 in 7 lose Social Care Due To Changing Eligibility For Support Services in Scotland, Learning Disability Alliance, 2014
criteria that restrict social care to “life and limb” cover – which means that it is not being made available to enable disabled people to interact with friends, family and wider society.

4.10 Meanwhile the revenue that Local Authorities are deriving from charging disabled people for their social care has risen by 22% in just 3 years from £40,322,000 to £51,610,000. This has led to some disabled people going without care that they cannot afford whilst others in 23 out of 32 Local Authorities are left with an income well below the poverty line.

4.11 As well as higher entitlement criteria and care charges disabled people in most authorities are now charged for their travel costs to Day Centres, their Blue Badges and, in some, for their Taxi-cards. All these additional costs and subsequent self-rationing to reduce expenditure, reduces disabled people’s ability to participate in community and family life and increases their existing social isolation from wider society. The closure of Day Centres will also tend to further isolate some disabled people unless they receive social care budgets sufficient to allow them to continue to interact with others.

5 Impacts of social isolation, for instance loneliness, ill-health

5.1 According to research conducted by Contact a Family\(^{6}\) nearly three quarters of families with disabled children have experienced anxiety, depression, isolation or family breakdown. The survey, found that almost half had asked their GP for medication or counselling.

5.2 Almost two-thirds (65%) of families said they felt isolated frequently or all of the time. One in five said feelings of isolation had even destroyed their family or marriage. Over half of those responding (56%) said their feelings of isolation were due to a lack of support from social services and the education system, while 57% believed it was because they could not work as much as they wanted to and 54% blamed a lack of both time and money.

5.3 An analysis of 148 different studies\(^{7}\) of social interaction found that on average socially isolated individuals were twice as likely to die prematurely. The increased mortality risk is comparable to that from smoking and social isolation is about twice as dangerous as obesity. Social isolation impairs immune function and boosts inflammation\(^{8}\), which can lead to arthritis, type II diabetes, and heart disease. In disabled people with chronic pain conditions social isolation tends to increase the amount of pain experienced.

\(^{6}\) Forgotten Families, Contact a Family, 2011


5.4 As many as one-third\(^9\) of visually impaired people may experience depression arising, at least in part, out of their social isolation. Visually impaired people suffer low self-esteem arising out of loss of abilities to participate and control their own environment; negative attitudes to blindness and low levels of self-acceptance of the impairment (i.e. when vision gradually or suddenly declines).

5.5 A UK survey conducted by Specsavers in 2009 found that nearly two out of three Britons with hearing loss feel socially isolated because of their condition, yet one in ten of the 700 people surveyed said they would not wear a hearing aid due to the stigma attached to it. Similarly a 1999 US survey of 2,300 hearing impaired adults aged 50 and older found that those with untreated hearing loss were more likely to report depression, anxiety, and paranoia and were less likely to participate in organised social activities, compared to those who wore hearing aids.

5.6 Several research studies have shown that the combined loss of vision and hearing has a greater impact than that of either impairment alone, since the person affected cannot use one or other sense to compensate. People who have managed to adjust to a hearing impairment may, for example, lose the ability to lip-read as their sight fails.

5.7 Similarly individuals with a visual impairment may lose the ability to hear clearly. In both instances, there is likely to be increased isolation arising from the loss of not only essential information and interactive routes like conversation, but also more solitary leisure activities such as reading, listening to the radio or watching television.

5.8 As well as those with physical & sensory impairments those with learning disabilities are more likely to experience social isolation. People with learning disabilities are 58 times more likely to die before the age of 50 than non-disabled people. However more people with learning disabilities are living longer – the average life expectancy of a child born with Down’s Syndrome was just 7 years in the 1930s but has risen to the high 50s today.

5.9 Older people with learning disabilities face many of the same experiences of aging as others but also face specific challenges and disadvantages e.g. stigma, discrimination, hate crime, etc. Most people with learning disabilities also live with their parents and as these families grow old together there is a huge risk of increased loneliness and social isolation for the learning disabled “child” when their parents die\(^10\). The higher incidence of anxiety & depression amongst virtually all impairment groups means that they are also at risk of increased levels of heart disease and strokes.

6 **Best practice and ideas**

6.1 The Scottish Commissioner for Children & Young People’s Office published a report on bullying of disabled children in 2012. It concluded that bullying, and the fear of it,

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\(^9\) Journal of Visual Impairment and Blindness, 306–310, Dodds & Ferguson, November 1994

\(^10\) BILD Factsheet: Older people with a learning disability, Cally Ward for British Institute of Learning Disabilities, Oct 2012
excluded disabled children & young people and leads to their increased social isolation. It recommended that -

- **tackling the social and economic disadvantage facing disabled children should be prioritised, and**

- **an education and awareness raising campaign about disability equality should be established and lead by Scottish Government.**

6.3 Tackling the social economic disadvantages facing disabled children and their families certainly does not seem to be a priority of local authorities who are rationing care services for disabled children by raising entitlement criteria and failing to carry out assessments for children and their carers. Nor are we aware of any national education and awareness campaign aimed at children having been established.

6.4 Glasgow Disability Alliance’s (GDA) “Pathways for Change” project worked with three distinct groups of disabled people – young, working age and older disabled people to overcome exclusion and isolation.

- GDA worked with all groups to build their confidence and increase their self-esteem and provided safe, supportive environments where they could share experiences, learn new skills, make new friends and build social networks.

- Worked with parents and carers of young disabled people, to pass on information about self-directed support and how it could assist in making Independent Living a reality for young disabled people and their families.

- Linked, introduced and developed pathways to organisations that could offer volunteering, further learning and employability support to disabled people.

6.5 Community transport schemes are of huge importance in rural and semi-urban Scotland as the public transport system does not adequately serve the needs of older or disabled people. Community transport not only connects people to essential services but also provides a link into the community enabling people to overcome social isolation.

6.6 The 2012 report of the English Longitudinal Study of Ageing (ELSA) suggested that focussing public health intervention efforts on less wealthy, less healthy older people and on improving access to public and private transport for the over-50’s is likely to have the greatest impact in alleviating social isolation. Yet as we have seen these are the very groups likely to be suffering the triple whammy of reduced incomes from welfare benefits, reduced access to social care and increased charging for services.

7 **Potential ideas for improvement and influencing policy**

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11 *It Always Comes Down to Money: Recent changes in service provision to disabled children, young people and their families*, Prof. K. Stalker, for the Office of Scotland’s Commissioner for Children & Young People, Sept. 2013

12 *Pathways for Change*, Glasgow Disability Alliance, [http://www.gdaonline.co.uk/fileuploads/pathways_for_change_final-0053.pdf](http://www.gdaonline.co.uk/fileuploads/pathways_for_change_final-0053.pdf)
7.1 **Recommendation:** That a national review is conducted by Scottish Government on the cumulative impact of austerity cuts (cuts to welfare benefits, service reductions, rationing via raised entitlement criteria, charging etc.) in terms of the increased social isolation of disabled people and the likely impacts on the mental and physical health of disabled children, adults and older people. Without such a review existing health inequalities between disabled and non-disabled people will rise as will the subsequent demand on, and costs to, NHS and social care services.

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