1) Prevalence of social isolation in urban and rural settings

As a rural region we can point to the population density – much lower than in other parts of Scotland due to our small total population and large land mass. However, this does not necessarily mean that people in those communities feel isolated or suffer negative effects of isolation. Equally the demographic profile of the region indicates a much higher prevalence of older adults than in the rest of Scotland. These adults may become isolated due to a range of factors such as access to social/leisure opportunities and/or transport. This may or may not impact on their wellbeing depending on the level of choice/self determination they have.

However from the Wigtownshire Community Engagement exercise carried out in 2014, more social interaction was identified as the 6th highest priority amongst the respondents, with 80 individuals (27% of the sample) stating that more social interaction would benefit them quite a lot or very much. Whilst this is only indicative, it does suggest that there are a number of people in this relatively remote corner of the world who feel socially isolated.

There was no significant gender difference identified within those who felt they would benefit from greater social interaction. 60% were female and 40% male which is representative of the overall consultation (64% were female and 36% were male).

In terms of age, a higher percentage of people in their 20s, 40s and 50s felt they were more likely to benefit from more social interaction than people from the other age groups. For example, only 19% of respondents in their 70s felt they would benefit from more social interaction compared to 47% of those in their 20s.

Transport is regularly quoted as a cause of isolation. The Dumfries and Galloway Community Survey 2011 reported that we must recognise that transport problems can have a much bigger impact on people who might already have issues of isolation such as people with a disability and elderly people.

Here are some typical comments:

“The transport links in the Dumfries & Galloway region are poor at best. Very expensive and do not take notice of the peak times services are required. I have a bus stop outside my house but no bus service. I would love to use public transport but it isn’t available for me.”

Another theme that emerged was the provision of education. Comments were made by all ages about wanting more variety of courses that are accessible and affordable.

“I’m extremely disappointed that the Council has stopped funding evening classes for adults. That is such a good way for busy people to fit in some ongoing learning, increase their social circle and their wellbeing. It’s a huge gap in D&G I feel. It’s
even more important with the economic downturn to give people some options to keep them occupied, motivated and improving their knowledge and skills.”

More than 60% of disabled people who responded said that ‘There are some public services I can’t access.’

There were many comments about both remoteness from services and isolation, the obvious downside to living in a beautiful but remote region (around 1 comment in 8).

“Distance from major shopping centres and supermarkets. Distance from hospitals - 30 miles for audiology etc and transport difficulty for visiting Dumfries Infirmary lack of housing for elderly, as mentioned.”

“Isolated from centres of population with poor transport which means I have to rely on my car. Very insular mentality. Huge gap between the haves and have-nots.”

There are also issues within the independent sector. A care home provider commented;

“Nearly every new resident that now arrives in my care home suffers from some degree of social isolation. The rise of dementia sufferers combined with the fact that people are staying at home longer means that having 1 or 2 short visits each day from care at home is not sufficient to alleviate loneliness in many cases. I cannot speak for urban settings as my home in quite rural but I would imagine it’s the same”

(Dumfries and Galloway Community Survey 2011)

2) Impacts of social isolation, for instance loneliness, ill-health

Social isolation may occur across the life span due to a number of factors such as loss of routine and occupational contact in retirement, bereavement or as a consequence of chronic ill-health/long term conditions (physical & mental), or as a result of taking on caring responsibilities for a family member. As a result, being isolated can go on to affect the individual’s physical, mental health and wellbeing.

With regard to children and young people there are a number of situations which may lead to feelings of social isolation;

- living in very small communities with little opportunities to interact with peers out of school hours. This may lead to young people having difficulty adjusting to secondary school/further education where groups are much larger.
- suffering from complex/chronic physical or mental health conditions (e.g. renal failure, cancer, autism, anorexia, cerebral palsy, cystic fibrosis) are likely to lead to absence from school and peers due to extended periods of ill health or shorter but more frequent absence related to attendance at hospital appointments/clinical trials etc. Young people can therefore miss out on interaction and building long term friendships.
- living in poverty may reduce the opportunities for leisure/play and the consequent development of peer networks
• living in chaotic circumstances e.g. substance misusing households, households where parents are affected by significant mental health issues can lead to a spectrum of behavioural difficulties
• becoming a “young carer” taking on responsibility for older siblings/parents which can result in young people missing out on opportunities to build life experiences

As stated in the SCIE Research Briefing (http://socialwelfare.bl.uk/subject-areas/services-client-groups/older-adults/scie/131316briefing39.pdf) older people can suffer from loneliness and isolation as a result of bereavement, ill health or loss of mobility. Research has shown this can lead to increased blood pressure and its subsequent consequences. See also appendix 1

3) Best practice and ideas that could be shared across Scotland, including examples of targeted support or initiatives (including housing, health, third sector)

In D&G we are working to provide free access to sport and leisure opportunities for “looked after” children and young people, a “looked after” Champions Board is being established to ensure that their voices are heard and their needs are considered in planning services across the Community Planning Partnership.

In D&G we have a Young Carers Strategy, and a draft Children’s Services Plan that seeks to improve the life chances of vulnerable children and young people in particular. We are developing a set of performance indicators that will influence our long term strategic approach to providing the best possible lives for all of our children and young people.

Mature Driver Scheme
As a rural region, the population are heavily dependent on the use of cars as a means of transport, this is no less true for the over 70s. Often, still being able to drive is an older person’s lifeline to independence in both a practical and social sense. However, some age related conditions can increase the risk of people having an accident and hurting themselves or others. The Mature Driver Scheme is about delivering support sessions to older drivers which will make them more aware of their driving behaviours and highlight any steps they may need to take to keep themselves and others safe on the road.

Use of Youth Needs Assessments
It has been suggested that the Youth Needs Assessment, which is due to be launched in Wigtownshire, includes details such as age, gender and the town/ village in which they live in as just some of the factors explored. This will help to identify how young people of different ages, genders and from different villages etc are engaging with activities that could positively distract them and minimise social isolation out with school hours.

The Good Morning Service
Not currently run in this area, this service appears to be a very successful method of reducing feelings of isolation and would hopefully be effective in reducing pressure on other services. http://www.goodmorning.org.uk/
The service offers - a free telephone befriending and alert service for older people. Every morning, 365 days a year, they call members, whose average age is 80 years, to check on their wellbeing and for a good blether. By taking an active interest in people, they build trusting relationships, become part of someone's social network, there to listen and give emotional support in difficult times, or simply share a laugh.

They alert nominated contact persons or the emergency services to potential health problems when our call remains unanswered.

A related service – The Silver Line - which was launched nationally in November 2013 has provided support to a huge number of older people via a regular telephone contact to ensure they no longer feel alone – www.thesilverline.org.uk

Day services
A range of commissioned day services in Dumfries and Galloway support adults and older people to feel less isolated and lonely. These include day services for people with a functional mental illness; people with a learning disability as well as a range of day services which support older people right through from voluntary day centres through to generic day care and specialist dementia day care.

Ensuring older people in the advanced stages of dementia can continue to receive stimulation and support is a challenge but in Dumfries and Galloway we have piloted a special form of Sensory Day Care which focusses on people with Advanced Dementia.

Timebanking
Timebanking supports individuals to engage in their local communities and help people access services such as bus services that they would otherwise be excluded from. Two quotes from Carers demonstrate the value to Carers of the affordability and flexibility of Timebanking – but of course it is also cross generational and community asset building which is also so important:

"It's good to know that there are people nearby who can help me out with this and that without draining my finances. This is what time banking has come to mean for me - given that I am a carer but also have my own somewhat debilitating health condition."

"Time banking is something I can get involved in locally that is for ME. Not my 'cared for' husband. It also makes me feel as though I can still contribute something - given that I had to retire from my career due to my own health problems. It is also something I can get involved in at my own pace and when I feel up to it - totally none demanding, and flexible."

Supporting the development of day opportunities in local communities
Funding from the Change Fund in Dumfries and Galloway has supported the sustainable development of various low level opportunities in local communities. Day centres are not for everyone and for many, especially in the more remote areas of the region, attending a day centre would mean travelling away from their own local community and often spending quite considerable time on a day centre bus which might only be available for a maximum of one day per week.
Focussing on what can be made available within local communities and making up to £1200 available per project to kick start or expand existing day opportunities or make them more sustainable has been very successful. Often older people themselves are the ones who are involved in supporting these day opportunities through volunteering.

Examples of the types of groups which have been funded include:
- Connecting in Retirement – a number of Men’s Sheds – see below
- Milling and Baking Group – Southwest Community Woodlands Trust
- Arts groups
- “Let’s Get Sporty” group
- Heritage group
- Cardio Club / Stroke Club
- Over 60s Groups / Friends and Neighbours / Ladies Group
- Old and New Horizons – supporting activities in day centres / sheltered housing
- Silver Surfers Groups
- Furniture restoration / upcycling
- Fishing Club – funding to improve safety and accessibility for older and disabled people
- A number of new lunch clubs
- Older Adults Swimming Club for those over 65 with drug and alcohol issues.

In addition the partnership in Dumfries and Galloway is working with Community Catalysts to develop micro-enterprises in the region and many of these also support older people to be less isolated and lonely.

Supporting LGBT older people
Good care and support is about considering a person’s circumstances, life history, their family, partners, friends and those caring for them as well as their experiences of discrimination. Older LGBT people are much more likely to feel socially isolated and lonely, in part as a result of the era in which they grew up.

In Dumfries and Galloway we have worked with the local LGBT organisation to fund “Out and About” which is a social network for LGBT people, their friends, families and supporters across the region.

Men’s Shed Dumfries – Case Study
Men are at higher risk of isolation and associated co-morbidities; they are far less likely [than women] to use traditional community centres or daytime activity groups. Men’s Shed is different:
- Atmosphere of a garden shed or workshop.
- Autonomy to do/make whatever they wish.
Working shoulder to shoulder [rather than face to face], men are more likely to share their problems and give constructive advice to their peers.

For some of the men who attend the Shed, it is very much the highlight of their week.

Let’s Motivate
Encouraging older people to take part in physical activity sessions, increasing their active living and interaction with others while reducing sedentary behaviour and loneliness.

Food Train Friends
The Food Train, as well as providing a shopping service and a service which helps with small household tasks, also, through external funding provides a befriending service to older people across Dumfries and Galloway - Food Train Friends. By connecting volunteers with older people who have similar interests, the dangers of these older people feeling socially isolated are much reduced. Organising group outings as an integral part of the service also means that there are more opportunities for older people to socialise with others.

Good Neighbour Service
The Royal Voluntary Service provides a Good Neighbour Service across Dumfries and Galloway. The service, which is supported by a large number of volunteers, is principally a service which provides a door to door volunteer transport service with volunteers using their own cars. The service enables older people to stay connected with their local community by taking people to do their shopping, go to the hairdressers etc as well as supporting them to visit loved ones in a hospital or care home.

There is a charge for this service but older people are happy to pay for a service which clearly meets their needs. Often longstanding relationships build up between the volunteer and the older person. Other support within the home is also available through this service.

Dementia Friendly communities
Dumfries and Galloway is about to embark on a big piece of work to develop dementia friendly communities across the region. Our key aim is that, regardless of where a person with dementia lives in Dumfries and Galloway, they can say they live in an enabling and supportive community and feel valued and understood.

We will proactively engage people with dementia, their families and carers, empowering them to influence the development of dementia-friendly communities across our region. As already stated, Dumfries and Galloway has some very rural and isolated communities which present unique challenges. Engaging people with dementia who are traditionally harder to reach as well as residents in care homes will be a particular focus.

Social isolation on discharge from hospital
Many older people who have spent some time in hospital, particularly as a result of an unplanned admission can often become “institutionalised” and whilst they may
have been living on their own at home prior to admission to hospital and not felt lonely, having company whilst in hospital and maybe losing confidence – as a result of a fall, for instance, can quickly lead to someone feeling very isolated and lonely and can often result in a further admission in quick succession.

In Dumfries we are piloting the use of a vacant flat within a sheltered housing development to provide step-up / step down care. The following link describes what is being provided in more detail - http://youtu.be/gONIZoJ3DRM

4) Potential ideas for improvement and influencing policy

Early intervention and support for children, young people and families has been shown to increase the health and wellbeing, coping and resilience in families and reduce vulnerability and isolation. Therefore implementation of the overarching child health strategy for Scotland “Getting It Right For Every Child” (GIRFEC) should have significant impact over time.

Secondly, there is a body of evidence that supports the positive impacts of volunteering on older adults, who may experience feelings of social isolation, loss of status, and loss of routine associated with paid employment, that have the potential to negatively impact on both physical and mental health. Indeed research from the USA has established that older adults who volunteer have lower mortality rates, greater functional ability and lower rates of depression that those who do not volunteer. (The American's Changing Lives Study)

5) Effective awareness-raising within communities

Third Sector Single Point of Contact within a co-located health and social care team. Social isolation or loneliness can sometimes be a result of people simply not knowing what is out there in the community. In Dumfries and Galloway we commissioned the Royal Voluntary Service over two years to provide a “Single Point of Contact” to raise awareness amongst health and social care professionals of all the Third Sector – both large and small – resources that are out there.

Sometimes older people in particular need some help and support to go to local groups and a Link Worker post in the Annandale and Eskdale locality is supporting this along with having a role in community capacity building.

Beating the Lows in Later Life
Leaflets widely distributed by the Health Improvement Team to highlight common mental health difficulties in the retired population which often go undiagnosed and untreated. Two leaflets were developed:

- One leaflet was focused on ‘Demystifying Mental Health’ to highlight the prevalence of mental health difficulties such as depression and anxiety which often are attributed as ‘normal’ in later life and how maintaining and physically and socially active lifestyle can prevent the onset and exacerbation of mental health problems.
- The second leaflet was focused on sources of specialist support available in the area and outlined information on the different services available from medicines to guided self help, psychology, psychiatry and occupational therapy. Both
Leaflets encouraged readers to speak to their GPs about any concerns they may have about their mood and well-being. Leaflets were also augmented by press releases in local papers and by posters across the region.

Contributions from:

- Strategic Planning and Commissioning Department
- Health Intelligence
- Public Health
- Third Sector Dumfries and Galloway
- Department of Psychology

Vicky Freeman
Acting Head of Strategic Planning
NHS Dumfries and Galloway
6 March 2015
Appendix 1 – Research summary, impact of loneliness on health
http://www.campaigntoendloneliness.org/loneliness-research/

Loneliness: a threat to health

Loneliness and social isolation are harmful to our health: research shows that lacking social connections is as damaging to our health as smoking 15 cigarettes a day (Holt-Lunstad, 2010). Social networks and friendships not only have an impact on reducing the risk of mortality or developing certain diseases, but they also help individuals to recover when they do fall ill (Marmot, 2010).

Loneliness and physical health

• The effect of loneliness and isolation on mortality exceeds the impact of well-known risk factors such as obesity, and has a similar influence as cigarette smoking (Holt-Lunstad, 2010)
• Loneliness increases the risk of high blood pressure (Hawkley et al, 2010)
• Lonely individuals are also at higher risk of the onset of disability (Lund et al, 2010)

Loneliness and mental health

• Loneliness puts individuals at greater risk of cognitive decline (James et al, 2011)
• One study concludes lonely people have a 64% increased chance of developing clinical dementia (Holwerda et al, 2012)
• Lonely individuals are more prone to depression (Cacioppo et al, 2006) (Green et al, 1992)
• Loneliness and low social interaction are predictive of suicide in older age (O’Connell et al, 2004)

Maintaining independence

Academic research is clear that preventing and alleviating loneliness is vital to enabling older people to remain as independent as possible. Lonely individuals are more likely to:

• Visit their GP, have higher use of medication, higher incidence of falls and increased risk factors for long term care (Cohen, 2006)
• Undergo early entry into residential or nursing care (Russell et al, 1997)
• Use accident and emergency services independent of chronic illness. (Geller, Janson, McGovern and Valdini, 1999)