A Strategy to reduce Social Isolation

2014-2018

Foreword

The Medway Health and Wellbeing Board has prioritised social isolation because it recognises that it is a serious problem for many Medway residents and it can have far reaching consequences for individuals and for wider communities. It can have a detrimental effect on a person's mental and physical health.

Nobody is immune to being socially isolated, but some people are at greater risk than others. A change in individual circumstances such as deterioration in physical health, death of a partner, becoming a carer and loss of income can all contribute to a person becoming more isolated.

This is the first strategy produced to reduce social isolation across Medway. The strategy aims to tackle the effects that isolation can have on our community by raising awareness of the issue, exploring how we can take action with individuals and ensuring that we work with communities. Tackling social isolation requires integrated action from partners across Medway within the statutory and community sectors.

There is already a wealth of excellent activities provided across Medway that people can participate in that can minimise the impact that social isolation can have. These include adult education classes, sport and leisure activities and art groups. Befriending schemes are provided to support people to access services. It is important to build on what is delivered and increase awareness to help those most vulnerable from being isolated. We also need to utilise the energy and skills from within the community because there is untapped resource of people who could potentially volunteer and improve their own wellbeing while improving the wellbeing of others.

Cllr Howard Doe
Portfolio Holder for Community Services, Medway Council

Cllr Andrew Mackness
Chair of the Medway Health and Wellbeing Board

Dr Mark Beach
Dean of Rochester, Chair of Healthwatch Medway

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Aim and key strategic themes

This strategy has been developed with the overarching aim of preventing and reducing the complex range of harms associated with being socially isolated. In order to achieve this aim, three key strategic themes have been identified;

- Raising awareness
- Action for individuals
- Community Action

For each strategic theme, there are a range of targeted actions, although some actions may span all three. For each theme, there will be an aspiration to work in partnership to ensure there is a joined approach in tacking social isolation.

Background

The concepts of social isolation and loneliness are frequently used interchangeably but are defined as two distinct concepts. Loneliness' is a subjective negative feeling of a lack or loss of meaningful social relationships (e.g. loss of a partner or children relocating), while 'social isolation' is an objective measurement to indicate a lack of social interaction and relationships caused by loss of mobility or deteriorating health[1].

Social isolation can affect anyone, although certain groups in the population are at increased vulnerability to social isolation. Older people are significantly more likely to suffer from social isolation with contributing factors being 'loss of friends and family, loss of mobility or loss of income'. Other population groups at risk include; carers, refugees and those with mental health problems[2]. The key risk factors for loneliness and being socially isolated include being in later old age (over 80 years), on a low income, in poor physical or mental health, and living alone or in isolated rural areas or deprived urban communities[3,4].

Social isolation can have a considerable negative impact on health and wellbeing and reducing it can reduce the demand for health and social care interventions[2]. Social isolation is associated with a range of negative health outcomes including increased risk of dementia, high blood pressure, stress levels, poorer immunity and death[5]. Research has shown that having well-connected strong social relationships can have an impact on survival comparable with well-established risk factors for mortality such as smoking, obesity and physical inactivity[5].

One study has identified that both social isolation and loneliness were associated with increased risk of death but argued that the objective nature of social relationships may be more crucial to older people's health rather than individual perceptions of loneliness. The findings showed that mortality was statistically higher for social isolation after taking account of baseline health and demographic factors, such as wealth, ethnicity, marital status and education. Loneliness was not statistically significant associated with increased mortality once the baseline health and demographic factors were taken into account[6].

It is estimated that across the present population aged 65 and over, that 5%-16% are lonely[7] and 12% are socially isolated[8]. If this estimate was applied to Medway this would result in an estimate of 4,698 people over 65 years old being socially isolated and between 1,958 and 6,264 people being lonely.

A chapter on social isolation for the Joint Strategic Needs Assessment (JSNA) has also been produced. It considers the evidence, views and insights of local population groups (via a range of focus groups that were undertaken with a range of population groups that have a risk of being socially isolated) and includes estimates as to the locations in Medway with the highest proportion of households that are socially isolated. The findings of the JSNA have been taken into account when developing this strategy.

Policy context

The Adult Social Care Outcomes Framework for 2014/15[9] contains a measure of social isolation, shared with the Public Health Outcomes Framework[10], which draws on self-reported levels of social contact to provide an indicator of social isolation. There are two indicators that are directly related to social isolation in the framework. These are the percentage of adult social care users who have as much social contact as they would like and the percentage of adult carers who have as much social contact at they would like. The values for Medway are 43.1% and 44% for the respective indicators which are similar to the England average.

The National Service Framework for Older People[11] acknowledged isolation in relation to falls and depression and linked the differential access to services between rural and urban areas to social isolation.

The Marmot Review[12] highlighted the importance of loneliness and social isolation in the promotion of health and wellbeing and in tackling inequalities.

The Medway Cultural Strategy 2014-2019 has four strategic priorities that include stewardship, engagement, contributing to economic prosperity and health and wellbeing. This strategy complements the priorities outlined in the cultural strategy.

Level of need in the population

There are limited data available that robustly measure social isolation. Census data can be used to show the proportion of households in which a single person aged 65 years and older is living alone, but there is a considerable limitation of using this as a proxy for social isolation in that it does not take account of people's individual circumstances in terms of health, mood, mobility and engagement with social networks. For example, a person may live alone but may have a thriving social network of family, friends and relatives.

Isolation index

To address the limited availability of data, a composite 'isolation index for Medway' from consumer data has been developed using a range of factors which can lead to social isolation. The factors related to social isolation that were used to develop the index included;

- Being widowed
- Having an attitude which thinks little can be done to change life
- Rarely/never meeting friends or relatives (who are not living with individual)
- Never talking to neighbours or talking to neighbours less than once a month
- Being visually impaired
- Being hard of hearing
- Having anxiety or depression
- A one person household: Aged 65 and over
- Being a lone parent with dependent/ non-dependent children
- People in the household not having English as a main language
- A Household without private transport
- Being an unpaid carer within the household

Figure 1 (population under 65years old) and Figure 2 (population over 65 years old) show the estimated proportion of households in Medway who are estimated to be socially isolated according to the Medway isolation index. It is displayed at Lower Layer Super Output Areas (LSOAs) level. An LSOA is small defined geographical area created by the Office of National Statistics for collecting, aggregating and reporting statistics. The population size for each LSOA can vary, but many will cover a population of around 1,500 people.

Figure 1: Relative social isolation per household at lower super output area level of persons aged under 65

Quintile 5 (least socially isolated)
Quintile 4
Quintile 3
Quintile 2
Quintile 1 (most socially isolated)
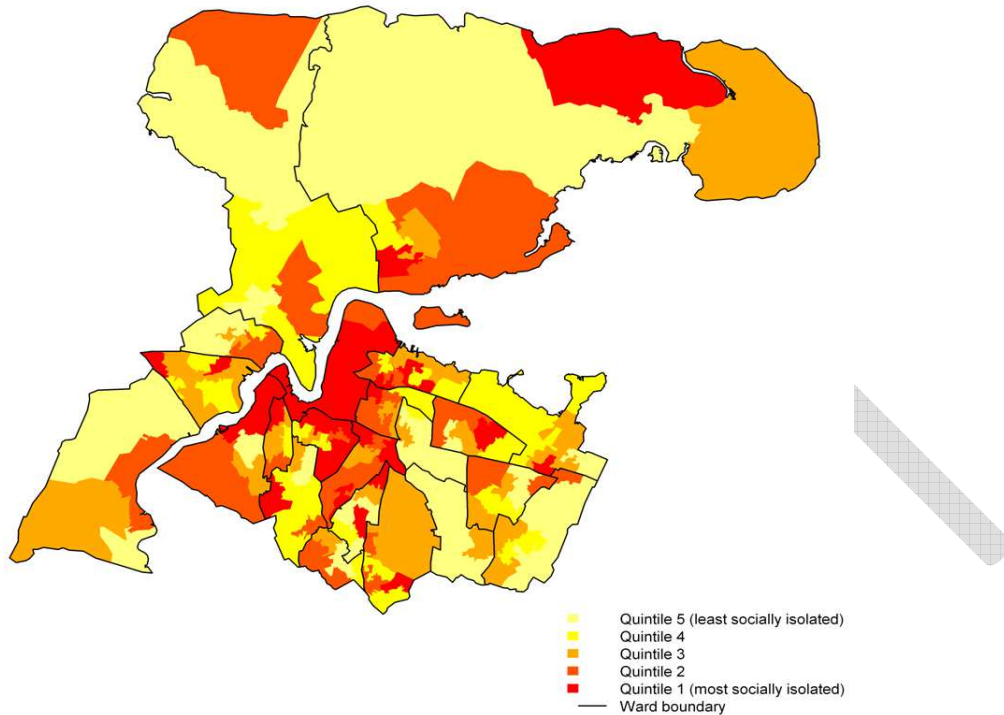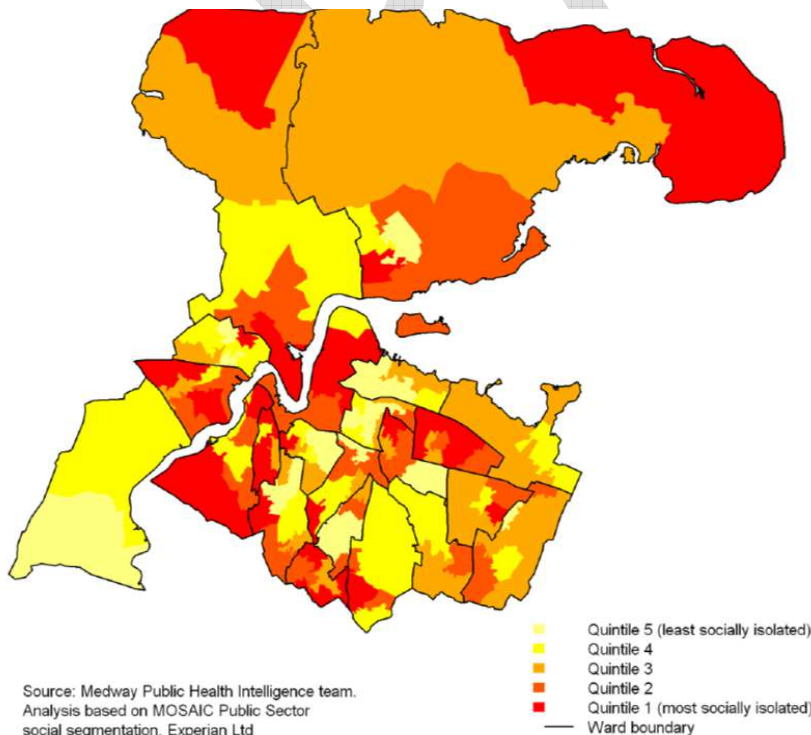—— Ward boundary

Figure 2: Relative social isolation per household at lower super output area level of persons aged 65 years and over

Source: Medway Public Health Intelligence team.
Analysis based on MOSAIC Public Sector
social segmentation, Experian Ltd

Quintile 5 (least socially isolated)
Quintile 4
Quintile 3
Quintile 2
Quintile 1 (most socially isolated)
—— Ward boundary

Focus groups

A total of seven focus groups were undertaken to inform this strategy with; older people, carers, mental health service users, black and minority ethnic communities, residents from Peninsula ward and a men's health support group.

A number of key themes emerged from the focus groups that influenced how people accessed services and activities and isolation levels. These key themes included cost, transport accessibility, involvement of communities in designing activities that they will use. Further details of the focus group outcomes can be found in the JSNA chapter on social isolation[13].

Strategic theme 1: Raising awareness

What we know

The general level awareness of the health risks associated with being socially isolated is low[6]. Training on social isolation offered elsewhere in Britain to both professionals and community members was shown in its evaluation, to have a positive impact in terms of increasing awareness of services available and the signs to look out for, when working with populations at risk[14].

A key theme emerging from the all of the focus groups conducted was that there is a low level of awareness of the activities/support available across Medway. This includes activities and support delivered by Medway Council and by community and voluntary organisations.

Public health interventions designed to address other key health challenges can also impact loneliness and social isolation[14].

There is currently a wealth of activities being offered across Medway including sports and leisure, educational art sessions and readers groups which bring together a wide range of people who enjoy reading and talking about books. All of these activities will have a positive impact on reducing social isolation

What we are doing
- Medway Matters is the council-produced magazine published bi-monthly and delivered to every household in Medway. It includes a comprehensive 'What's On' pull-out section that contains information on different activities available.

- The Medway Community hubs programme is providing further investment in libraries and increasing the range of services and activities to residents.

- The Better Medway Health Champions is a network of Champions with knowledge and skills who are able to take every opportunity to help the population make informed choices about healthy lifestyles and how to access support services.

- Making Every Contact Count, is a scheme whereby public health and health improvement skills and knowledge are applied by the wider workforce to enable people to modify unhealthy behaviours through making lifestyle changes.

What we aim to do
- Undertake marketing and promotional work to raise the profile of social isolation in the Medway population.

- Improving awareness of social isolation via training among frontline professionals that include; health professionals, social care workers, community safety wardens, housing officers, community development workers and floating support staff. The increased knowledge will help them to have an increased awareness of the risks of social isolation and knowledge of how to address it.

- Improving awareness of social isolation within the Medway population (particularly in high risk groups) to reduce the stigma of speaking up about being isolated. Awareness raising sessions will be offered to people at risk to empower them to get

involved in combating social isolation and to spread awareness of the services which are available to others.

- Improve the availability of information and advice on existing services and activities that reduce loneliness and isolation. Local authority websites, book and social network groups, sports clubs, art groups, transport links and volunteering opportunities can all help reduce social isolation. It is important to ensure that information on these activities are available in day centres, health centres, schools, youth projects, housing offices and other settings within the local community.

- Ensuring that social isolation is embedded in any relevant future strategies and JSNA chapters.

- We will utilise the opportunity from public health programmes to target raising awareness for social isolation and signpost people to support and activities. Examples of programmes include health checks, stop smoking, substance misuse.

Strategic theme 2: Action to support individuals

What we know

Social isolation and its links to lack of regular contact with others, means that those who will be most isolated will have little or no contact with services, therefore creative solutions are needed to identify those who would benefit most from initiatives.

A befriending scheme is an intervention that introduces an individual to one or more individuals with the aim of increasing additional social support through the development of sustaining an emotion-focused relationship over time. Such schemes have been shown to have a positive impact on reducing social isolation and loneliness[15]. Economic analysis has shown that befriending schemes can be cost effective due the reduced need for treatment and support for mental health needs[16].

Social prescribing is a means of enabling primary care services to refer patients with social, emotional or practical needs to a range of local, non-clinical services, often provided by the voluntary and community sector. It can be successful in terms of outcomes by increasing self-esteem, encouraging self-care, reducing the frequency of GP practice appointments and bridging the gap between primary health care and the voluntary sector[17].

Simple initiatives such as knocking on doors have been proven to be effective, particularly when those door-knocking do so alongside trusted members of the community, such as police community support officers[14].

For some people, social isolation is related to having a mental health condition such as depression, anxiety or other mental health problems[2]. Psychological therapies, such as cognitive behavioural therapy, may be effective for older people experiencing social isolation, in improving their wellbeing and helping them address some of the barriers to re-engaging. There can be a low level of access to such therapies in some risk groups[18].

Formal partnerships delivering targeted home visits to people at risk of social isolation have been successful in tackling it by connecting people to local resources, maximising their income, and referring them to befriending services, tea/coffee clubs, social and leisure networks, lifestyle and confidence building and educational opportunities[14].

Individuals need tailored responses to address their social isolation. One-size-fits-all solutions are unlikely to bring results. For example, generally, socially isolated men are best engaged through specific activities related to long-standing interests, such as sport and gardening and respond less well to loosely defined social gatherings, which are of more interest to women[19]

What we are doing

- A range of befriending schemes are operating across Medway, such as those delivered by The Hands & Gillingham Volunteer Centre and Hands Rochester Volunteer Bureau.

- There is currently a wealth of activities being offered across Medway including leisure (including physical activity) and education sessions delivered by Medway Adult and Community Learning Service.

- Medway Sport is working with partner organisations to launch initiatives such as boccia coaching for care home staff and afternoon tea dances. The Senior Sports programme is also offered to help older people to live better, healthier lives.

- Medway Sport provide the Sports centre senior offer. The over 60s can enjoy a comprehensive timetable of activities at sport and leisure sites ranging from badminton, short tennis and table tennis to short mat bowls, chairobics, walking football and senior step. Most sites also offer a friendly social element with external trips and activities.

- The On Your Marks programme complements the physical activity schemes delivered as part of the A Better Medway campaign. It is entirely aimed at beginners, to break down the barriers of attending sessions that you would be concerned that everyone else is an 'expert', breaking down barriers of what you wear doesn't matter just get involved have fun and get fitter.

- Medway Libraries' host regular groups which bring together a wide range of people who enjoy reading and talking about books.

- Medway Voluntary Action provides a range of support to help not-for-profit organisations in Medway to assist them to be sustainable and connected. Both the voluntary sector and Medway Council offer a wide range of volunteering opportunities in local communities.

- A launch of EDNA (energise, dance, nourish, art), a pilot project funded by North Kent Local Authorities Arts Partnership and Kent County Council to evaluate the benefits dance and arts activities can have on health and wellbeing for older people in Medway and Gravesham, resulting in participants reporting physical improvement with improved quality of life and social benefits.

- A launch of Arts Inclusive, an innovative programme delivered by Nucleus Arts aimed at encouraging people at risk of social exclusion to take part in motivational and creative art workshops. Almost 100 people have benefited from taking part in these activities including people with disabilities, young people at risk of offending and those being home schooled.

What we aim to do
- We will ensure that there is appropriate capacity of befriending schemes commissioned across Medway. We will also consider the most effective ways of using innovative methods of befriending such as the virtual befriending using technology.

- We will ensure that we will continue to offer the wide range of high quality services that are currently available across Medway in leisure centres, libraries and adult education centres.

- We will pilot a social prescribing scheme in Medway. This will support people to know what is happening in their community and become more involved in the activities that interest them. One way to initiate will be to pilot a scheme at a GP practice for the over 65 year age group.

- The voluntary and community sector will be supported to build referral partnerships with frontline staff (GPs, community nurses), fire services and social workers.

- Reducing social isolation will be built in to care pathways for a range of different conditions. This will ensure that people are referred or signposted to relevant agencies for appropriate support such as befriending.

- Individuals within local communities will be encouraged to take responsibility for identifying, 'reaching out' and supporting potentially isolated people within their own area. In order to achieve this, statutory, voluntary and community organisations will work in partnership to build greater community capacity and better social outcomes for risk populations.

- Ensure we utilise opportunities to work with faith groups as partners to identify and support people at risk of being isolated.

- It is important that people have access to mental health services, as a means of addressing the causes and consequences of social isolation. This should involve targeted services to ensure that people at risk are able to access and benefit from them. This could include ensuring appointments are timed appropriately, and that the needs of people at risk are taken into account e.g. carers needs). Services should be developed in partnership with relevant community organisations.

- Evaluation is a key component of any future programmes in Medway. Self-reporting is regarded as the best means of measuring social isolation. Measurements using valid scales such as De Jong Gierveld Scale will be utilised.

Strategic theme 3: Community action

What we know
Community action is particularly important in building and harnessing capacity within neighbourhoods to tackle social isolation.

Community Navigators or Wayfinder schemes involve individuals providing support to vulnerable people on emotional, practical and social issues. They act as an interface between the community and public services and helping individuals to find appropriate interventions. There is evidence that people who used community navigator schemes became less lonely and socially isolated following such contact[20].

Supportive group services and interventions (such as lunch clubs, bereavement support groups to specific population groups such as vulnerable men) can be effective in reducing loneliness and social isolation. Group based interventions that included art and cultural activities and exercise and health discussion groups, have been shown to have a positive impact on reducing social isolation and significant reduction in measured hospital bed days, physician visits and outpatient appointments[21]. Economic analysis of supportive closed groups interventions have found that there was a net saving of €62 per person due to a reduction of hospital bed days, physician visits and outpatient appointments[21]. .

Volunteering can help to reduce social isolation. It can support someone who is socially isolated by benefiting them to help others and also from being involved in a voluntary scheme where a person can receive support and help to build their own social network, preventing isolation from becoming chronic[16].

The JSNA on social isolation identifies areas in Medway that are estimated to have the highest proportion of households that have people who are socially isolated for both people over and under 65 years old[13].

Combining Personalisation and Community Empowerment (CPCE) is based on a) the ability of individuals to control their own budgets when assessed as requiring social support by a Local Authority, b) the rightful expectation of quality service delivery and c) a community wanting ownership of that delivery. Its benefits are: The provision of incentives for communities to deliver support to vulnerable people; delivering an enhanced quality of support; over time reducing the cost of providing social support which enables some savings to be reinvested by communities themselves; a reduction in reliance on statutory services, both those commissioned by Local Authorities and the NHS.

Men in Sheds programmes provide a space for older men to meet to take part in woodworking and other socially beneficial activities. Men in Sheds and has been developed as an intervention designed to promote social activity amongst older men[23].

Housing schemes can have a positive impact on reducing social isolation. One example is the Flexicare housing scheme which aims to accommodate a growing population of older people through an innovative and flexible approach to maintaining independent living. Flexicare housing preserves people's independence while ensuring that older people have all the support they need, when they need it. It enables people to have their own tenancy with services available 24 hours a day; helps promote independence, safety and security offering a real alternative to residential care[24].

What we are doing

- A CPCE pilot programme is currently being established in the Rainham and Peninsula areas of Medway

- A men's health weekly supportive group, based at the Sunlight Centre, Gillingham, was established in November 2013 and is supported and facilitated by Rethink. The group's focus is to reduce social isolation in men and provide an environment in which they can discuss their problems and receive peer support and health promotion information. There are opportunities for the men to have one-to one sessions with Rethink Community Development Workers to discuss specific issues. Members of the Medway Council's Health Improvement Team have frequently provided support to improve lifestyle (e.g. stop smoking, more exercise, healthy walks etc).

- A men's sheds programme has been commissioned and will be delivered by Sunlight Development Trust from the autumn 2014.

- Transport schemes are in operation for certain population groups. For example, Hands Rochester Volunteer Centre provide a transport scheme that is for use by anyone aged 75 years and older who is unable to use public transport due to mobility problems, or who do not have a friend or relative to provide transport. People aged below 75 years old may also be able to use the service if they are registered disabled or have a serious health problem which limits their mobility. The scheme enables people to attend essential appointments at hospitals, GPs/clinics, or other important medical appointments.

- Medway's Flexi-care Housing Scheme is a model of supported accommodation available to older people aged 55 and over including those with sensory needs, mental disorders including dementia, short- or long-term illnesses, and those who require end of life care. The scheme is designed to offer a safe, private and secure environment as an alternative to residential care; ensuring people are able to retain the independence of having their own home whilst 24 hour care and support staff are available on-site. Independent living skills are preserved or rebuilt through support making independent living possible for people with a range of abilities.

What we aim to do

- We will prioritise the development of a community navigator programme in Medway to improve the interface between the community and public services in helping socially isolated individuals to find appropriate interventions.

- We will work with communities to facilitate local social activities; encourage intergenerational contact and ensure local people have a voice in local decision making.

- Agencies across Medway will support the work in communities across Medway that encourages and strengthens engagement in the CPCE pilot.

- We will explore the provision of community transport across Medway to ensure that there is a joined up approach as to what is available to improve accessibility.

- We will increase the number of supportive groups in Medway, such as the men's health group operating at the Sunlight Centre to support vulnerable populations at risk of being socially isolated.

How will the strategy be implemented and monitored?

An action plan will be developed to support delivery of the strategic themes and aims of the strategy. Medway public health department will identify a lead individual who will be responsible for co-ordinating the implementation and monitoring the strategy and will have the role in liaising with key partners to ensure that actions are being implemented and to identify any barriers.

The lead officer should report regular progress of the strategy to the Medway Health and Wellbeing Board.

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