

This is a repository copy of *Loneliness and Social Isolation Among Older People in North Yorkshire : Stage 2 report*.

White Rose Research Online URL for this paper:
<http://eprints.whiterose.ac.uk/77364/>

Version: Published Version

Monograph:

Bernard, Sylvia Margaret and Perry, Hannah (2013) Loneliness and Social Isolation Among Older People in North Yorkshire : Stage 2 report. Research Report. SPRU Working Paper, WP 2599 . Social Policy Research Unit , York.

Reuse

Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.

THE UNIVERSITY *of York*



spru | Social Policy
Research Unit

Loneliness and Social Isolation Among Older People in North Yorkshire

**Project Commissioned by
North Yorkshire Older People's Partnership Board**

Executive Summary

Sylvia Bernard

November 2013

Working Papers Nos:
WP 2565 & WP 2599

Background

There has been a growing interest in the topic of loneliness and social isolation over a number of years and a recognition that they have an impact on the health and wellbeing of individuals and communities. Local strategic organisations have an important role to play in tackling the problem of loneliness and social isolation in older people.

Stage 1

Stage 1 of the report reviews current literature and examines the concepts of loneliness and social isolation, how they are understood, their impact on individuals and communities and why they should be important concerns of local strategic organisations such as health and wellbeing boards. The type and range of interventions aimed at alleviating loneliness and social isolation are examined and evidence about their effectiveness reviewed. Findings are related to the national and local demographic context.

Key messages from stage 1

- Loneliness and social isolation are distinct concepts.
- Approximately ten per cent of people over the age of 65 in the UK are lonely all or most of the time.
- There may be differences between rural and urban areas in how loneliness is experienced.
- Loneliness and social isolation have direct effects on older people's health and life span.
- Lonely and isolated older people use more healthcare resources and are more likely to need long-term care.
- Loneliness and isolation is detrimental to quality of life and sustaining 'healthy' communities.
- Interventions may target the problem of loneliness; others are part of wider community engagement initiatives. They include: information and signposting, support to individuals, group interventions, and wider community engagement. Loneliness and isolation may require different inputs.
- One-to-one interventions, such as befriending and community navigator services appear to be successful in alleviating loneliness, and group activities, particularly those with a creative, therapeutic or discussion-based focus, are effective in improving health and wellbeing.
- Knowing the target population and what works for which people is key.

Future work will need to focus on developing a strategy for:

- identifying those in the population who feel lonely and/or socially isolated;
- understanding the range of experiences in different localities;
- consulting about the types of services older people in different localities want and identifying the gaps;
- ways of targeting and meeting needs in a difficult financial climate that harnesses the potential of available resources and makes best use of partnership arrangements.

Stage 2

Stage 2 of the research aimed to identify the range of statutory and third sector organisations in North Yorkshire that could or should be able to identify older people at risk of loneliness and /or social isolation. Through these organisations, the sorts of activities that exist across North Yorkshire and some of their characteristics were described.

Key messages from stage 2

- The survey provided a snapshot of a self-selected sample of services and activities existing in 2013 that were attempting to alleviate the problem of loneliness and social isolation among older people in North Yorkshire.
- Examples of the service models highlighted by the literature review in stage 1 as potentially most effective in alleviating loneliness and/or promoting wellbeing were found across North Yorkshire. These particular models were the sorts of services and activities that, in the current survey, were most reliant on statutory or voluntary funding support.
- Services and activities across different types were openly available to older people. More could be done to encourage awareness and referrals to available services from GPs in particular, but also other health professionals who were likely to come into contact with many older people.
- Over half of the services/activities had existed for more than five years with many for over ten years.
- Services and activities reported in the survey have an important preventative role, not only in directly addressing loneliness and social isolation, but also as capable of contributing to supporting wider health and social care needs.
- Many respondents felt that the future of their service was insecure, especially those that received funding from statutory organisations. Not only levels of funding, but also how funding was provided or secured was an issue for many services.
- Projections about the likely service landscape in the future are difficult.

Implications for the future

There is a need for measures that will ensure the continuation of the sorts of services and activities that have been shown to alleviate loneliness and social isolation in older people and their further development in response to changing local needs. A commitment of formal support from statutory agencies to such continuity, while encouraging innovation, is essential.