SOCIAL ISOLATION AND SAFETY

What’s the issue?
Social isolation can influence anyone, but it perhaps affects the elderly more than younger age groups. People may feel isolated and not part of society for many reasons due to age, being a carer, poverty, unemployment, mobility problems, disability, ethnicity, religion, language barriers, poor literacy levels, etc. Certain groups, such as Gypsy and Travellers and asylum seekers, may have quite good social support within their group, but not outside their group so their whole community can feel isolated [64]. Social isolation and feelings of being unsafe in the community can have a large impact on wellbeing, but can also influence physical health.

What’s our situation?
From the local adult Prevalence Survey 2014 [66], a measure of social isolation was derived, and based on this, it was estimated that around 13.4% of Hull residents aged 65+ years might be socially isolated (but this ranges from 6% in University to 23% in Bricknell wards). If the 13.4% estimate is applied to Hull’s overall population aged 65+ years, it is estimate that just over 5,000 people aged 65+ years across Hull could be socially isolated. From the Public Health Outcomes Framework [26, 27], at baseline 2010/11, 43.5% of adult social care users had sufficient social contact in Hull and this increased slightly to 44.8% for 2014/15 and to 54.2% in 2015/16 with 257 out of 475 adult social care users surveyed feeling they had sufficient social contact (the percentage was higher than England at 45.4%). The rate among adult carers was lower with 38.5% (129 out of 335 surveyed) feeling they had sufficient social contact in Hull for 2014/15, although the figure was the same as England (38.5%).

From the local adult Health and Lifestyle Survey 2011-12 [63], one in six respondents had no close friends or family living within a 15-20 minute walk or 5-10 minute drive, increasing with age from 14% for those aged 16-24 years to 22% for those aged 75+ years. The majority (86%) had someone they could call upon for help if they were ill in bed, with the percentage slightly lower in the 75+ year age group (81% compared to 86%-88% for younger age groups). Around 5-6% stated they had no-one to ask except for women, those aged 16-24 years and those living in the least deprived areas where around 4% stated they had no-one to ask. Around 9% stated that “don’t know” or “it depends”, although the percentage was slightly higher among those aged 75+ years (13%) and people living in the most deprived fifth of areas of Hull (11%).

Feelings of safety among those aged 65+ years were considerably lower in Hull compared to England. For 2014/15, 97.6% of adults aged 65+ years felt ‘very safe’ or ‘fairly safe’ walking alone in their area during the daytime in England [67], compared to 89.1% for Hull from the local adult Prevalence Survey 2014 [66]. In England, 67.6% of people aged 65+ years felt safe when walking alone in their area after dark, and 94.3% felt safe when alone in their own home at night [67], but feelings of safety were considerably lower in Hull (46.8% and 87.2% respectively) [66].

For more detailed information, see the JSNA Toolkit: Mental Health and Learning Disabilities and JSNA Toolkit: Older People reports.

What are the strategic needs?
One of the aims of the local Humber, Coast and Vale “Start Well, Live Well and Age Well” Sustainability and Transformation Plans (STP) [3] is to support everyone to manage their own care better through communities and public and voluntary sector organisations working together (see the JSNA glossary (www.hullpublichealth.org/jsna2017.html#c82) for more information). Work is ongoing in Hull around the asset-based approach which utilises assets within the community to support people and improve their health. Such approaches can be used to tackle the problems of isolation and loneliness (see the JSNA section on social capital and asset-based approach (www.hullpublichealth.org/jsna2017.html#c14) for more information).

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A loneliness strategy for the City will be developed working closely with the voluntary sector. It will include the promotion of activities that seek to build connections between generations to tackle loneliness, and encouragement of a culture across organisations that celebrates diversity, encourages respect and has zero tolerance on hate crime. A focus is also to work with partners to ensure the design of the build environment discourages crime and fear of crime.

References


