A NATIONAL STRATEGY TO TACKLE SOCIAL ISOLATION AND LONELINESS

09:30 – 13:30, Wednesday 19 April 2017
CoSLA, Verity House, 19 Haymarket Yards, Edinburgh EH12 5BH

POST EVENT KEY THEMES

Creating a kinder, more social Scotland
Presentation by Claire Stevens, Chief Officer Voluntary Health Scotland

- VHS promotes greater recognition of the voluntary health sector contribution to people’s health and wellbeing.
- Programme of events called Unequal Lives Unjust Deaths (2014) relating to health inequalities – loneliness centre stage as a symptom and compounding factor in health inequality.
- National research Living in the Gap provide evidence base regarding voluntary sectors involvement addressing health inequality. 91% of respondents indicate that social isolation and loneliness were significant factors in health inequality.
- Equal Opportunities Committee Inquiry – first parliamentary inquiry in the world into this issue.
- Loneliness increasingly a matter of public concern and policy interest in Scotland and UK. Range of activity taking place
- Befriending Networks report of last year’s summit on loneliness, and British Red Cross and the Co-operative Group report Trapped in a Bubble. Carnegie UK Trust and JRF published Kinder Communities: the power of everyday relationships – focus on impact of kindness of kinder communities
- Big Lottery Rethink Good Health grant – supports the charity Addaction to deliver its Drink Wise Age Well initiative
- Focus by Jo Cox Commission on Loneliness and the Campaign to End Loneliness awarded a Big Lottery grant to extend its work into Scotland
- The Samaritans report Dying from Inequality – isolation can increase the risk of suicide
- Childline reports 11 children phone each day because of loneliness
- Living in the Gap set out a public health case for tackling loneliness. Mindroom focuses on the loneliness experienced by young people with autism and other learning difficulties and Action for Sick Children focuses on the extreme social isolation some children with long term or life limiting conditions can experience.
- “Creating a more generous, inclusive and outward looking Scotland” is a key to tackling unwanted loneliness.
• Volunteering an important route to begin to address loneliness – “a golden thread in Scottish life” – for example Cope’s “Save the Smile” project in Drumchapel which is cross generational and inter-generational work to create a kinder community.
• Importance of food – Edinburgh Cyrenians focus on human need to eat – “Something to Eat, Someone to Eat With”.
• What does the voluntary health sector hope to see in a strategy?
  o How to better provide a consistent / sustained measure of social isolation and loneliness as an evidence-base
  o How assess / audit policies and plans across policy areas
  o How better promote / support volunteering as a way of addressing loneliness
  o How encourage local partnerships as part of strategic and local planning
  o How harness digital technology in tackling loneliness

Keynote address
Jeane Freeman MSP, Minister for Social Security
• EOC Inquiry in the last Parliament – first parliamentary inquiry of its kind in the world – look at underlying causes and listened to real experiences.
• SG elected with commitment to develop a national strategy – this is the first of many opportunities to help develop it.
• Not starting from scratch – build on EOC Inquiry, supporting grass roots projects and providing funding – but needs to be joined up / clear strategic direction and focus across government and being informed by professionals and people experiencing isolation and loneliness.
• Important because at heart this is a very human experience – feeling “outside” has physical and mental health impacts – and effect of loneliness and isolation can often be hidden by silence, alcohol/substance abuse and suicide. Hard to admit to.
• Need to act.
• Focus today on what, with whom and how.
• Suggest attention given to three additional areas of interest:
  • Language used
  • Approach to be taken – whole population or specific groups or both – how should we prioritise and blend realism with ambition.
  • What works – what is effective and how can SG enhance the work you are doing
• No quick fixes – the work you do in the public and third sectors is very important
• We will learn form you what are the most important responses to make.

A public health approach to tackling social isolation and loneliness
Cathy Steer, Head of Public health, NHS Highlands
• A public health approach eg, population based; collective responsibility; partnership with those contribute to public health
• NHS Highland Director of Public Health Annual Report for 2016 addresses isolation and loneliness and health in older people
• NHS Highland Survey
• 67% experience some level of loneliness
• 8% experience intense loneliness
- Risk factors eg. living alone; living in very remote rural areas / remote small towns; being disabled
- Recommendations eg. awareness-raising; signposting services / support; support access to evidence based interventions, services are coproduced; community planning partners to focus on loneliness and isolation
- Work in Highlands: Reach Out – Make a difference to someone who is lonely with focus on awareness-raising / good contacts with local media
- Adopt a multi-facetted response – develop good relationships with local media; role for community planning; work with UHI; social prescribing; develop age friendly communities.
- Lessons: eg. importance of awareness-raising; Director of Public Health’s annual report; local research, media links

**Headline reflections from groups**

**Group 1**
- Focus on groups including those who provide support
- Challenge of those with dementia / people on the edges (eg. prisoners)
- Importance of intergenerational work

**Group 2**
- Language – move away from sociological language - suggest “We all need to be needed”
- Intergenerational work – focus on community rather than “vulnerable” people – use of “vulnerable” can create a barrier
- Volunteering – express offer in terms of “we need your help” rather than “you are lonely and volunteering can help”.

**Group 3**
- Strategy should not relate to any particular social group
- Public Bodies should take issue further – eg. Through embedding EQIA process
- Aware of language associated with volunteering - mutuality and reciprocity of volunteering – and implications volunteering may have on benefits
- Importance of peer support was emphasised.

**Group 4**
- Each SG directorate should be responsible to take account of strategy in policy / to be measurable
- Funding streams (SG, local authorities and third sector) to be connected
- Consider how private sector can be involved – eg. employability
- Important to focus on factors which contribute to loneliness.

**Group 5**
- Outcomes
  - Demonstrate people in Scotland are less lonely
  - Collaborative and coproduced outcomes
  - Awareness of and understanding of loneliness to reduce stigma
  - Identify specific factors to build resilience
- What works
Better language (gateway or barrier)
Better collaboration / coproduction
Mutual respect between different sectors
Harness all (local) assets
Recognise that third sector key / essential partner in public health
Shift resources to prevention

Group 6
• Outcomes
  o Develop a kinder Scotland – importance of education
  o Tackle a blame culture / othering of others
  o Reduce stigma associated with loneliness
  o More effective sign-posting of services
  o More sustained funding to support response to loneliness
  o Create formal and informal safe spaces for conversation

Group 7
• Importance of evidence gathering / people’s stories
• Tackling isolation and loneliness should be built into national outcomes
• Housing developments should be places to facilitate connectedness

Group 8
• Outcomes
  o There will be a reduction in reported experience of isolation – need to develop measurement / audit process
  o Scotland will become a kinder country – kindness will be a common currency (SG, private, voluntary and third sectors)
  o Increased awareness and a change in society from “me” to “us” (“capitalist to socialist”)
  o Usefulness of mindfulness
  o Importance of providing time to talk / listen

Conclusion and next steps

Key themes
• Clear outcomes underpinned by qualitative and quantitative evidence
• Consider the scope of the strategy – broader society or specific groups or both?
• Importance of language
• Cross-cutting focus within SG and importance of joined up approach (SG, public, private if appropriate)
• Identify and share good local practice (eg. Dundee, Highlands)

Next steps
• Capture evidence from event
• Identify key groups SG should speak to
• Minister hopes to publish consult on development of Strategy in the summer.