

AGENDA

SELECT COMMITTEE - LONELINESS AND SOCIAL ISOLATION

Monday, 10th September, 2018, at 10.00 am Ask for: Gaetano Romagnuolo

Swale 1 - Sessions House Telephone 03000 416624

Tea/Coffee will be available 15 minutes before the start of the meeting in the meeting room

Membership

Mr M A C Balfour, Mr D L Brazier, Ms K Constantine, Ms S Hamilton, Mr A R Hills, Mrs L Hurst, Ida Linfield and Mr K Pugh (Chairman)

UNRESTRICTED ITEMS

(During these items the meeting is likely to be open to the public)

10.00am - Minutes of the meeting held on 23 July 2018 (Pages 3 - 6) 10.05am

10.05am - Samantha Sheppard (Senior Commissioner, KCC) (Pages 7 - 40) 11.45am

12.00pm - Public Health - Gerrard Abi-Aad (Head of Intelligence), Rachel

Kennard (Senior Intelligence Analyst), Amber Povey (Kent 12.45pm

Graduate Programme)

Presentation to follow.

EXEMPT ITEMS

(At the time of preparing the agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public)

At the end of the public session, Members of the Committee should remain in the meeting room for 20 minutes for summing up

Benjamin Watts, General Counsel 03000 416814

Friday, 31 August 2018



KENT COUNTY COUNCIL

SELECT COMMITTEE - LONELINESS AND SOCIAL ISOLATION

MINUTES of a meeting of the Select Committee - Loneliness and Social Isolation held in the Darent Room - Sessions House on Monday, 23 July 2018.

PRESENT: Mr M A C Balfour, Mr D L Brazier, Ms K Constantine, Mrs L Game, Ms S Hamilton, Mr A R Hills, Ida Linfield and Mr K Pugh

IN ATTENDANCE: Mrs K Goldsmith (Research Officer - Overview and Scrutiny) and Mr G Romagnuolo (Research Officer - Overview and Scrutiny)

UNRESTRICTED ITEMS

1. Membership

(Item 1)

(1) The Committee noted that Ms Hamilton and Mr Hills had replaced Mrs Bell and Mr Sweetland.

2. Election of Chairman

(Item 2)

- (1) Mr Brazier proposed, and Mr Balfour seconded, that Mr Pugh be elected Chairman on the Select Committee.
- (2) RESOLVED that Mr Pugh be elected Chairman of the Select Committee.

3. Social Isolation Select Committee Topic Review (Item 3)

- (1) The Committee considered a report on the terms of reference, scope, potential witnesses and timescale for the review.
- (2) Members had a free ranging discussion on the scope of the review and potential witnesses.
- (3) Members agreed that the title of the Select Committee should be amended to "Loneliness and Social Isolation", as the two concepts differed, and the committee would consider both.
- (4) Members discussed the focus of the committee. In accordance with the process in the Constitution for developing the Terms of Reference, the Chairman Designate and a member from the other two political groups had held an informal

discussion and agreed in principle that the focus of the committee should be on older people.

- (5) The importance of the Terms of Reference being clear and focused was emphasised and due to the tight timescale for the review this would enable the Committee carry out an in-depth review. It was clarified that the final report should acknowledge that older people were not the only group to suffer from social isolation and loneliness, and if so minded the Committee could recommend that further work carried out.
- (6) In relation to the first proposed Term of Reference, Members asked for the word "contextualise" to be amended to "put into context". Also, the wording should read "social isolation and/or loneliness" because people can suffer from one without the other.
- (7) In relation to the fourth proposed Term of Reference, Members asked for the following addition to be made: "to recommend initiatives and strategies to prevent or reduce the impact of social isolation and loneliness on Kent's older residents", because the overall goal should be for no older person to become lonely or isolated.
- (8) Mr Romagnuolo explained that the "Proposed Exclusion" in item 4 had been suggested to ensure that it was clear that the Committee would be looking at the prevention of loneliness, but not the effectiveness of the services that deal with its effects. Whilst acknowledging the importance of remaining focused on their Terms of Reference, Members did not think it was necessary to set out this Exclusion.
- (9) Members discussed the possibility of individual County Councillors speaking to individuals in their community as part of the evidence gathering process. The use of rapporteurs would be added under the Site Visit section in the Terms of Reference. Members also asked that a question structure be circulated, though they were free to develop and expand these questions as they wished.
- (10) In relation to proposed witnesses, and sites to be visited, there was general agreement over those listed in the topic review. If a Member did have a particular group they wished officers to contact, they were to let Mr Romagnuolo know by the end of the week. Where it was not possible to arrange a hearing or site visit, written evidence would be requested.
- (11) It was agreed that a press release would be arranged so that wider members of the community could submit written evidence to the committee if they wished.

RESOLVED that the terms of reference, as amended to take account of the comments made in paragraphs 6, 7 and 8 above, and the general approach to the review, including the suggested witnesses and timetable be approved.

(A copy of the agreed Terms of Reference is attached as an appendix to these minutes)



Loneliness and Social Isolation Select Committee



Topics

- Defining social isolation and loneliness
- Understanding impact
- Understanding the extent of the issue
- Key challenges
- Overview of what KCC is doing



Defining loneliness and social isolation



Defining Ioneliness and social isolation

- Loneliness and isolation are not the same thing.
- Loneliness is a subjective concept, which is influenced not only by circumstances and events, but is also subject to cultural and psychological factors.
- Isolation is an objective state whereby the number of contacts a person has can be counted.
- One way of describing this distinction is that you can be lonely in a crowded room, but you will not be socially isolated.



Fage

Loneliness

Loneliness can be defined as an unwelcome feeling of lack or loss of companionship. It happens when there is a mismatch between the quantity and quality of social relationships that we have, and those that we want.

(Perlman and Peplau, 1981).



Loneliness

- There are different types of loneliness:
 - Emotional loneliness: when we miss the companionship of one particular person
 - Social loneliness: when we lack a wider social network or group of friends
 - It can also be experienced as the lack of a useful role in society



Loneliness

- Loneliness can be a transient feeling that comes and goes.
- It can be situational; for example only occurring
 at certain times like weekends, bank holidays or
 Christmas.
- Or loneliness can be chronic; this means someone feels lonely all or most of the time.



Social isolation

Social Isolation is characterised by an involuntary absence of social interactions, social support structures and engagement with wider community activities or structures.



Social isolation

Some people become socially isolated over time as a result of deteriorating health and mobility, others because of a trigger event.

- Trigger events range from being widowed, or being made redundant, to having public transport links cut.
- Trigger factors are likely to hit hardest later in life, so social isolation has a strongly negative impact on older people and is considered to be a major contributing factor in the decline into dependency.



Social Isolation and Ioneliness

- Loneliness is linked to social isolation but it is not the same thing.
- One of the most effective ways of combating loneliness is to combat isolation.
- Of the two, social isolation would seem the easiest to rectify, however, with so many possible contributory factors leading to the state of isolation there is no single solution to the problem.



Understanding Impact



Impact

Studies showing a scientific link between loneliness and mental and physical ill health are recent, but they back up substantial research indicating that relationships and connectedness are good.



Impact

Examples include:

 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, 2015)

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 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).



Physical Health Impacts

Research suggests that loneliness:

- increases the likelihood of mortality by 26%
- is associated with an increased risk of developing coronary heart disease and stroke
 increases the risk of high blood pressure
 - places people at higher risk of the onset of disability
 - is comparable to the impact of well-known risk factors such as obesity, and has a similar influence as cigarette smoking



Impact on Mental health

Research suggests that loneliness:

- puts individuals at greater risk of cognitive decline
- increases the risk of developing clinical dementia
- Increases the risk of developing depression
- is predictive of suicide in older age



Impact on health and social care

Research suggests that lonely individuals are more likely to:

- Visit their GP more frequently than needed
- have higher use of medication Page 29
- have higher incidence of falls
- Have increased risk factors for long term care
- Undergo early entry into residential or nursing care
- Use accident and emergency services <u>independent of chronic illness.</u>



Impact on health and social care

Academic research is clear that preventing and alleviating loneliness is vital to enabling older people to remain as independent as possible.



Financial Impact

Recent research commissioned by Eden Project initiative The Big Lunch and funded by the Big Lottery, found that disconnected communities could be costing the UK economy £32 billion every year.

The study shows the annual cost to public services of social isolation and disconnected communities, including:

- Demand on health and care services: £5.2 billion
- Demand on policing: £205 million
- Disconnected communities are also linked to a loss of productivity, with a net cost to the economy of nearly £12 billion every year.



Financial

According to research, carried out by Centre for Economics and Business Research, neighbourliness already delivers substantial economic benefits to UK society, representing an annual saving of £23.8 billion in total.

This saving comes from sharing between neighbours, an increase in social connection and reductions in the demands on public services such as healthcare, social care, welfare and the environment. It also includes the productivity benefits associated with a happier and healthier workforce: a net gain to the economy of £6.4 billion, which is equivalent to 0.34% of UK GDP in 2015.



Understanding the extent of loneliness and social isolation





Scale

Although loneliness can be compounded by age related issues, it is not just an issue for old age.

The scale of the problem is much more widespread and applies to:

- Page 28 Children and young adults
 - University students
 - People with disabilities (including physical and learning disabilities)
 - Refugees and migrants
 - Carers
 - People living with dementia
 - Older People



Older People

Whilst loneliness and social isolation do affect all age groups, older people may be more vulnerable due to additional factors they experience putting them more at risk, and because of barriers that they experience in overcoming social isolation.

10% of over 65s categorising themselves as "lonely or very lonely", which equates to 26,231 individuals in Kent

(Campaign to End Loneliness) and (2011 Census: 262,306 over 65's in Kent)



Risk Factors

Family dispersal

Single person households

Trigger effects

Disconnected communities

Infrequent phone contact

မြေ B Increased use of မြေ Social media to communicate Across the UK 51% of people over 75 live alone, which equates to over 65,300 individuals in Kent

Some more closely associated with older age, for example, retirement, bereavement.

Caring role.

Lack of local shops, post office, banks.
Commuter belts.
Transient populations.
Working adults. Lack of transport options.

Lack of face to face interaction

Isolation from activities

Lack of meaningful relationships

Loneliness and social isolation

Barriers

Dementia Friendly Communities Engagement Events June 2017

Caring responsibilities can isolate people even though they are with someone.

Can't drive anymore. No or infrequent buses. Bus stop too far to walk.

I have no way of getting there

I can't leave my husband too long

I can't physically manage it Lack of physical ability or restricted mobility

Lack of disposable income can prevent people getting out and accessing activities.

I can't afford it

Even if I get there I can't get in

Inaccessible buildings, narrow doorways, heavy doors, steps, no ramps

Lack of confidence. Fear of stigma due to conditions

I have no one to go with me or take me

It takes too much time and energy.

© www.harrycutting.com

I'm scared

Fear of falling, crime and other perceived threats

Time and effort outweighs gain.

Coping with Ioneliness

Dementia Friendly Communities Engagement Events June 2017

nothing you can do try to get out nothing you can do stay positive television radio photographs speak to people reading keep brain active talk to care staff



The key challenges in addressing loneliness and social isolation



Key challenges

There are solutions available, but some key challenges include:

- Not everyone who is socially isolated is lonely
- You can't make people engage
- Number of factors could be contributing
- Individual issues require individual solutions
- It's not always clear what help is available
- Older people are less likely to use online directories or internet to find help



Overview of current provision and partnership working



What is most important to older people

Dementia Friendly Communities Engagement Events June 2017

maintaining own personal care

socialising

good care staff Stimulation getting a break independence Getting out shopping keeping busy

companionship & friends
singing family pet family health

peer support entertainment games and puzzles faith

membership of club or group

having purpose and being valued freedom to make choices mixing with younger people

What can be done?

Those services that look most promising include befriending schemes, social group schemes and Community Navigators.

www.scie.org.uk May 2012



What we are already doing

- Befriending
- Day services
- Care navigators
- Dementia peer support and cafes
- Kent Pathways Services
- Live Well Kent Page 38
 - Extra Care Housing
 - **Community Wardens**
 - St Stephens community work
 - Delivering differently in neighbourhoods
 - Support for carers (Carers cafes,
 - Stronger Kent Communities (Rural Kent Coffee and information) project)
 - Arts, culture, heritage and sport / physical activities



Key Messages

- Loneliness and social isolation are not the same thing although they are connected
- Loneliness and social isolation can be experienced at any age, but several factors place older people more at risk
- risk
 A range of factors can contribute to loneliness and social isolation
 - People often face real and perceived barriers in becoming less lonely or isolated
 - There is support available, but people may need help to find and use it



Questions



