



*Alone a Whisper,
Together a Voice*

**Loneliness and Social Isolation
Among Older People in Halton**
A study by Halton OPEN
(Report of Findings)

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1. Acknowledgments

This report was written and compiled By Clare Lightfoot, Forum Development Officer on behalf of Halton OPEN. Particular thanks are due to Richard Ashworth, Chair of Halton OPEN and Committee Members Doreen Whimperley who surveyed a large group of older people in Widnes, Carol Connor, Diane MacGregor and Barbara Pollock of Halton OPEN for their help in carrying out the survey amongst members.

Thanks also to Age UK Mid Mersey, Halton Borough Council and Age UK for their support.

2. Introduction

We, at Halton OPEN, know that isolation and loneliness is an issue in Halton through working with older people and through conversations with our partners. However, to date there has been very little local research into the nature and extent of this issue.

Loneliness is part of the human condition that affects all ages, but older people are particularly susceptible. Experiences commonly associated with ageing, such as loss of family and friends, poor health, decreased mobility and income; as well as trends in wider society, such as greater geographical mobility, reduced inter-generational living, less cohesive communities; mean that older people may become more socially isolated, potentially leading to increased loneliness.

Halton OPEN's aim in producing this report is to bring about an increased awareness of the plight of our older people and highlight this issue in general – but also to make isolation and loneliness very real to decision makers. There is a great deal of talk around this subject, however; it is felt by Halton OPEN that there is not enough effective action. This is not the end of our study but more the beginning of developing a wider understanding of this issue and influencing decision makers to design services with loneliness and isolation in mind.

3. The Concept of Isolation and Loneliness

The terms loneliness and social isolation are often used interchangeably, but in reality these two concepts are very different. It is possible to be socially isolated without feeling lonely just as it is possible to feel lonely in a group.

The definition used by the English Longitudinal Study of Ageing (ELSA) splits the concept of loneliness into four key elements: feeling lack of companionship, feeling left out, feeling isolated from others and feeling out of tune with people.

Loneliness has been defined as a negative emotion which can be caused by the absence of a significant other, and social loneliness – the absence of a social network. Whereas, social isolation tends to be defined as a situation in which the number of social/necessary contacts or interactions are reduced – a type of “separateness” from society.

There is a relationship between social isolation and loneliness, however, and this is likely to change over a lifetime and as well as this there are differing patterns of loneliness, so that for some older people it is a long-standing condition, particularly if there are difficult relationships with family and friends. For others, it is related to the impact of particular life events, such as becoming a widow, moving to new neighbourhoods or retiring, and may alter in time. Although evidence suggests that older people living alone are most likely to experience social isolation, those living in residential care may experience loneliness, especially if they lack opportunities to participate in the community outside the care home.

It is also important to understand that we all experience loneliness and isolation differently. For some of us a social network is important, for others the quality of our relationship with a spouse or partner is more important. The lack of a companion has a significant impact - there is no magic wand or immediate solution to this but it is hoped that a greater understanding and early intervention will help those suffering with loneliness to cope.

4. Isolation and Loneliness – the national picture

Age UK have carried out various studies that highlight the national issue that is isolation and loneliness – particularly at Christmas – this is echoed by Halton OPEN's Committee, many of whom commented that Christmas is particularly tough if you're on your own. For example, last year the charity ran its **No one Should Have No One Christmas** survey across the UK.

Primary campaign statements were:

- Over 900,000 older people say they feel lonelier at Christmas time
- Over 800,000 older people will be on their own this Christmas
- Over 900,000 older people say the TV is their only source of company over Christmas
- Almost 1.4 million older people admit Christmas passes them by

Supporting research behind these statements from the survey:

- 8% or approx. 928,000 older people (65 and over) feel lonelier at Christmas time.
- 7% or approx. 826,000 older people (65 and over) in UK say they will be on their own this Christmas.
- 7.7% or approx. 909,000 older people (65 and over) in UK agree with the statement: 'Over Christmas, the TV is my only source of company'.
- 48% or approx. 5.7 million older people (65 and over) feel their days can be repetitive, almost a quarter of whom (24% or approx. 1.38 million) admitted that Christmas isn't a special day for them and just passes them by.

(Source: Kantar TNS survey for Age UK, sample of 2,585 UK adults aged 65+, November 2017 - figures extrapolated by Age UK to national population using latest ONS Population Estimates).

The 2016 'Loneliness' Survey (June 2016) primary campaign statements were:

- 16.1% or 1.9 million older people (65 and over) in GB often feel ignored or invisible (these days)
- 1.7% or 200,000 older people (65 and over) in GB have not had a conversation with friends or family for a month
- 3.1% or 360,000 older people (65 and over) in GB have not had a conversation with friends or family for over a week
- 16.1% or 1.9 million older people (65 and over) in GB often feel ignored or invisible (these days)
- 31.4% or 3.7 million older people (65 and over) in GB agree the television is their main form of company (these days)
- 12.1% or 1.4 million older people (65 and over) in GB feel cut off from society
- 8.5% or 975,000 older people (65 and over) in GB often or always feel lonely

(Source: TNS survey for Age UK, 3,110 adults 65+ in GB, June 2016 – figures extrapolated to national population using mid 2016 UK ONS Populations Estimates).

A 2015 PR / Media Polling: 'Christmas' Survey (October 2015):

- 3% of older people (65 and over) in UK were planning to spend Christmas on their own

(Source: TNS, 2605 UK adults aged 16+ were interviewed online from 13th – 19th October 2015 / included 534 aged 65+).

Age UK External Studies

- 12.04% or 1.2 million older people (65 and over in England) are persistently/chronically lonely
- 12.04% or 1.2 million older people (65 and over in England) have been dealing or coping with loneliness for years
- 12.04% or 1.2 million older people (65 and over in England) have been coping with loneliness year, after year, after year

(Source: Marmot, M., Oldfield, Z., Clemens, S., Blake, M., Phelps, A., Nazroo, J., Steptoe, A., Rogers, N., Banks, J., Oskala, A. (2016). *English Longitudinal Study of Ageing: Waves 0-7, 1998-2015*. [data collection]. 25th Edition. UK Data Service. SN: 5050, <http://dx.doi.org/10.5255/UKDA-SN-5050-12>)

Figures extrapolated to national population using latest ONS Populations Estimates

X number of older people in X will experience loneliness:	
The North	*163,500
Midlands	*221,300
London and South East	*124,200
The South West	*74,000
UK	*582,800

*Numbers of people aged 65+ who say there are often or always lonely.

(Source: Marmot, M., Oldfield, Z., Clemens, S., Blake, M., Phelps, A., Nazroo, J., Steptoe, A., Rogers, N., Banks, J., Oskala, A. (2016). *English Longitudinal Study of Ageing: Waves 0-7, 1998-2015*. [data collection]. 25th Edition. UK Data Service. SN: 5050, <http://dx.doi.org/10.5255/UKDA-SN-5050-12>).

Figures extrapolated to national population using latest ONS Populations Estimates:

- 6.87% or 800,000 older people (age 65 and over in UK) have no close friends

(Source: University of Essex. Institute for Social and Economic Research, *Understanding Society: Waves 1-5, 2009-2014* [computer file]. 7th Edition. Colchester, Essex: UK Data Archive [distributor], November 2015. SN: 6614, <http://dx.doi.org/10.5255/UKDA-SN-6614-7> Figures extrapolated to national population using latest ONS Populations Estimates).

Living alone

- 3.6 million over 65 in the UK live alone, of whom over 2 million are aged 75+

(Source: *Families and households in the UK 2016*, Office for National Statistics, Table 6 <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/bulletins/familiesandhouseholds/2016#more-women-than-men-live-alone-in-the-uk>)

Prevalence

- A longitudinal study over 8 years showed the overall prevalence of loneliness as: 9% reporting severe loneliness and 30% reporting that they were sometimes lonely.

(Source: *A longitudinal analysis of loneliness among older people in Great Britain*. C. Victor and A Bowling, [*J Psychol.*](#) 2012 May-Jun;146(3):313-31.)

5. Risk factors for Isolation and Loneliness

Anyone can suffer from Isolation and/or loneliness however; research has shown that there are certain factors that can increase the risk of a person experiencing these conditions. Changes in loneliness are linked with changes in marital status, living arrangements, social networks, and physical health. Becoming a carer and retirement are risk factors for increased loneliness, as is bereavement.

Generally, those most at risk of loneliness are at the older end of the spectrum (aged 75 plus) – although the Halton OPEN study has shown that this can start much earlier – and in people from LGBT groups. People in poor health, with cognitive impairment, sensory disability and those living in an area with a high crime rate are also found to be at increased risk of loneliness.

In terms of timing and how this affects risk – Christmas is clearly a difficult time as are weekends and bank holidays. Shutting down of many services and the non-availability of help at these times is unfortunate as the problems facing lonely people do not shut down and are in fact generally intensified.

Age UK's Index of Wellbeing for Later Life (February 2017) shows that older people who score in the bottom 20% of the wellbeing spectrum with an average wellbeing score of just 32% are very different from people at the top end of the wellbeing scale. The bottom group score lower in cognitive tests involving word recall, verbal or numeric ability than those in the top fifth group. More than half of them live alone.

People in this group are significantly more likely to be helping / caring 20+ hours a week. 23% do not take part in creative and cultural activities. 85% are not engaged regularly in social activities, such as at a social or sports club.

Around 80% of this group are not involved in any civic activities, such as belonging to political parties, the Neighbourhood Watch, a religious group or a pensioner's group. 12.5% report having no friends. Their sense of the 'neighbourliness' in their community is lower than in the general population – although 75% still rate their community as neighbourly. Less than one per cent is involved in sports and physical activities. 88% have a long-standing illness or disability. 42% have three or more diagnosed health conditions. 84% have a mental health score which is lower than the middle score for those in the top group.

People in the bottom 20% of wellbeing are more likely to rent (61%) or have an outstanding mortgage (11%) – less than one third are outright home owners. 27% have a means-tested benefit. They report low satisfaction with local medical services and public transport as well as with local leisure and shopping.

6. Impacts of Isolation and Loneliness

It is well-known that loneliness and/or isolation have a huge and lasting impact on mental health and general wellbeing. It can lead to a lack of self-esteem and depression which may act as a barrier to the person accessing vital and relevant services.

The impact on health is striking in that the body enters into a stress-like state where the hormone cortisol is released. This hormone can have some rather undesirable side-effects. Loneliness can increase the risk of premature death by up to a quarter.

“Loneliness can be as harmful for our health as smoking 15 cigarettes a day”

(Source: *Social relationships and mortality risk: a meta-analytic review*. Holt-Lunstad J, Smith TB, Layton JB. *PLoS Med* 2010;7(7))

A lack of social relationships is associated with an increased risk of developing coronary heart disease and stroke. Loneliness puts individuals at greater risk of cognitive decline and they also have a 64% **(Holwerda et al, 2012)** increased chance of developing clinical dementia.

Clearly the impacts of this condition are significant and as the findings below will show, as many as around 40% are affected across Halton OPEN's membership which if extrapolated across Halton Borough is a major issue for service provision and intervention.

7. Methodology

This study was carried over a year through a three question, multiple choice questionnaire. This is the first time that members have been engaged in this way. The majority of those asked were more than happy to take part and, in fact, several wanted to talk about the issue more.

Participants were asked:

How often do you feel that you lack companionship?

How often do you feel left out?

How often do you feel isolated from others?

A large group of 69 older people that attend a group called Sanctuary located at St Ambrose, Widnes were asked to complete the questionnaire.

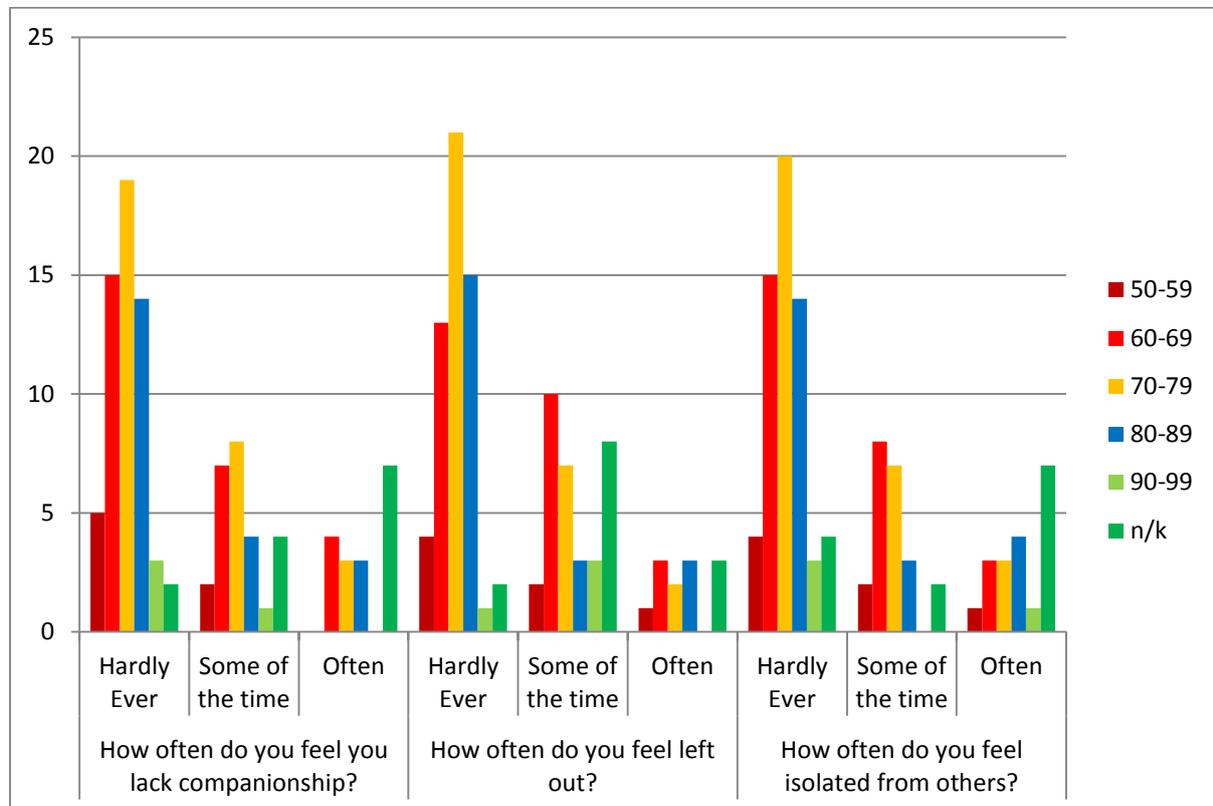
The questionnaire was then used as a basis for a telephone survey across 93 members and 8 linked non-members, giving a total of 101.

All in all, a total of 170 people were surveyed. The telephone survey in particular was a lengthy but ultimately rewarding process.

8. Findings

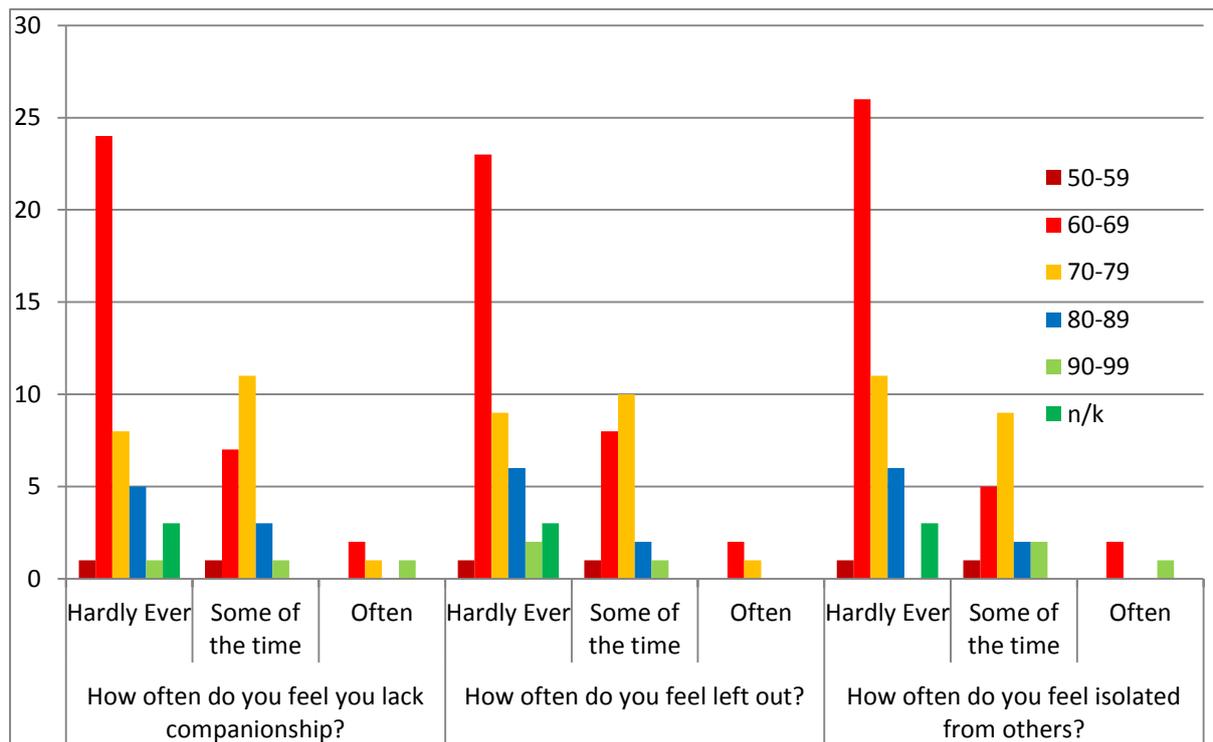
The charts below are taken directly from the data collected by Halton OPEN during 2017.

Membership of Halton OPEN



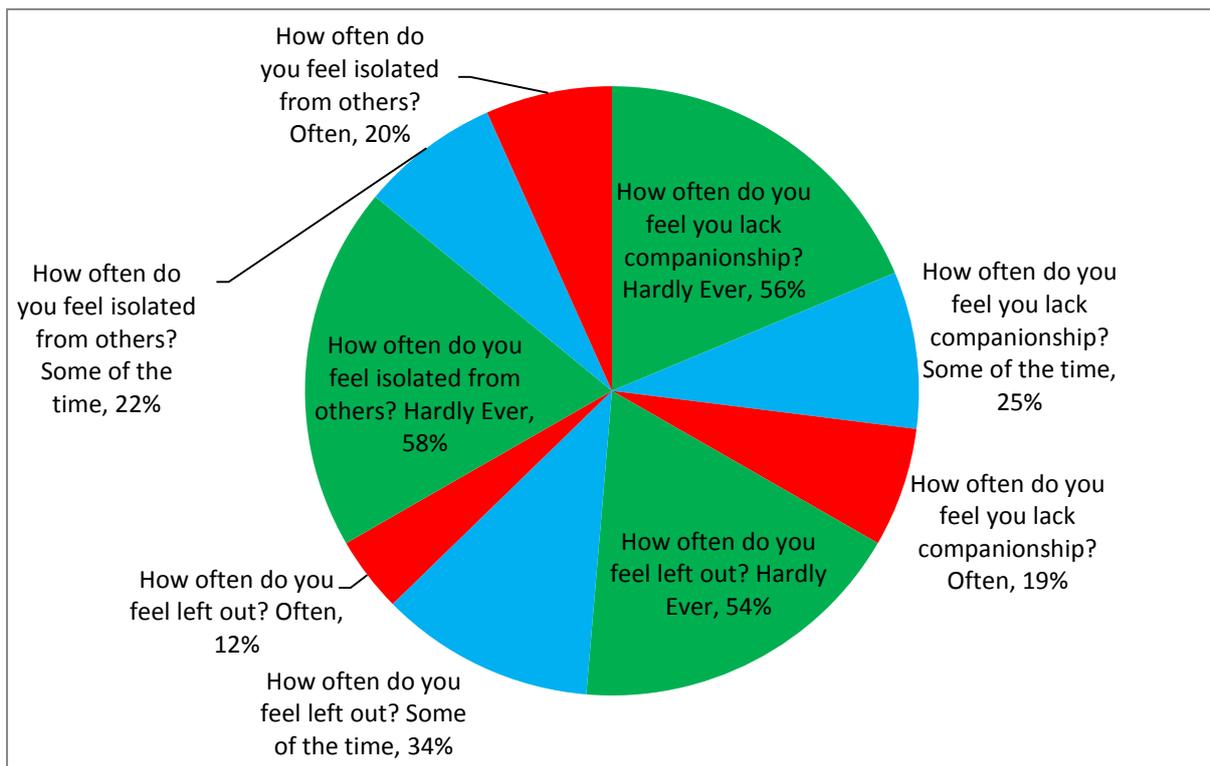
This chart clearly illustrates that across the sample of Halton OPEN membership, whilst there are many people that felt they were “hardly ever” affected by isolation and/or loneliness, there are many that are very much affected. What is surprising is that the 60-69 age group feel that they are affected “some of the time” – in fact, they are almost as affected as the 70-79 age group and in some cases more affected. This is quite a concern as it is almost always assumed that the older someone gets, the more they are affected. Could retirement have had an impact here? – where a person’s integration into society is reduced. This is not to say, of course, that the older groups are not affected – the chart shows that the combined age groups of 70-79 and 80-89 are very much affected.

Non-member Group in Widnes



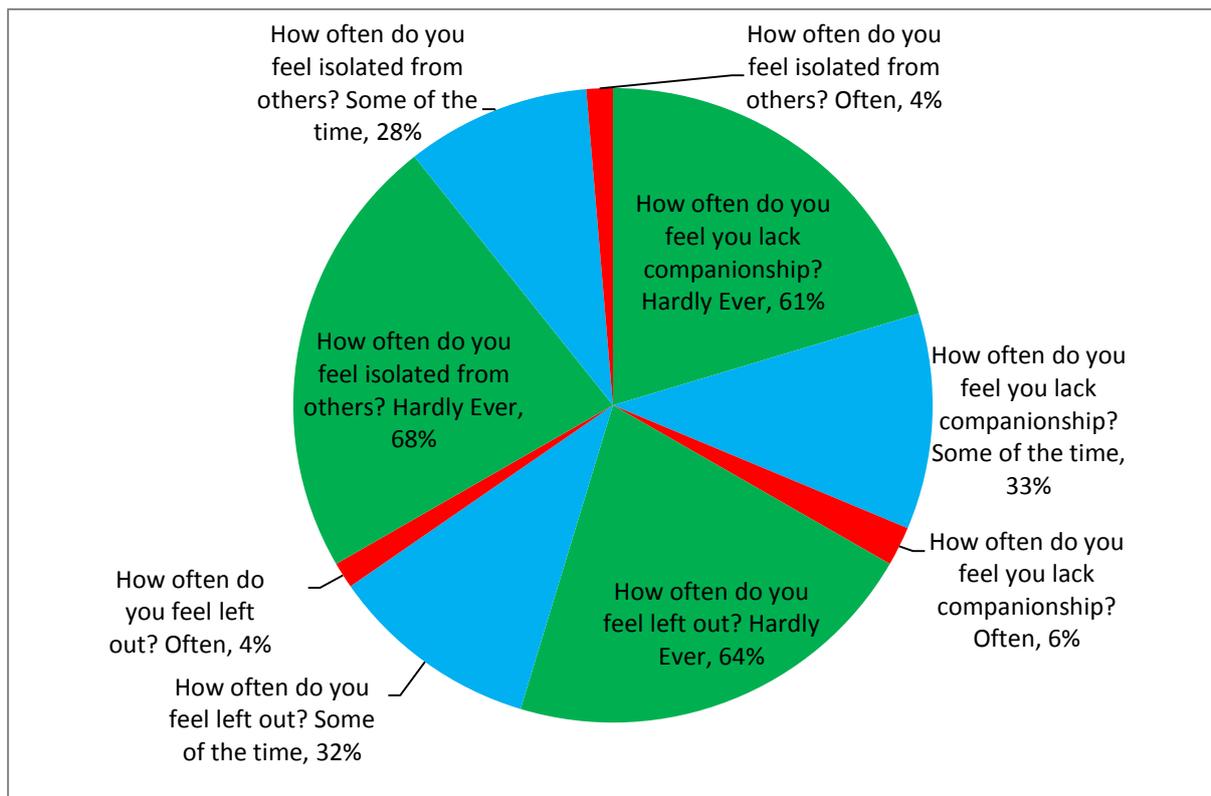
Again, this chart reflects the findings of the previous chart in some ways with over 60's showing that they can be affected. However, this is an actively engaged group of older individuals with many of the group showing (reassuringly) that they did not feel affected and around 30% showing that they were affected which is still significant. It is also important to note that many of these people still felt that even where they were not affected, isolation and loneliness was still an issue.

Halton OPEN membership



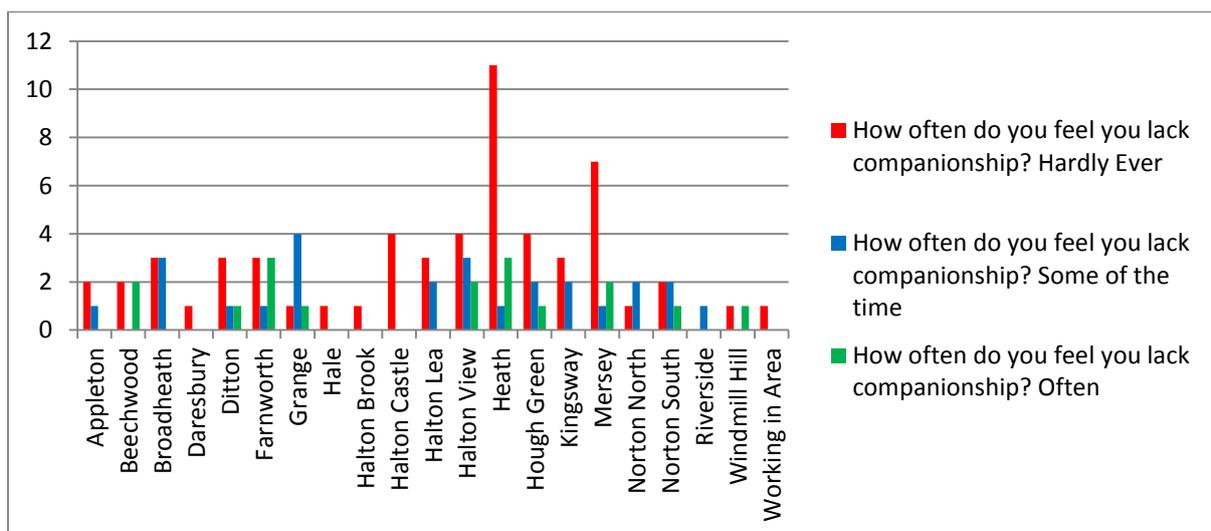
This chart shows the sheer impact of isolation and loneliness across the sample of membership. It is shocking to see that almost half of those surveyed feel that they lack companionship in some way. Feeling left out was an interesting question to ask people because some said that they had lost partners and even though they had friends and they went out with them, they still felt marginalised somehow because they weren't in a couple. This is something that can affect all ages – however, on talking to people, it is felt ever more keenly after the loss of a life partner. The chart speaks for itself here, with a lot of people feeling “left out”. Again, feeling isolated affects many people as this chart shows.

Non-member group in Widnes

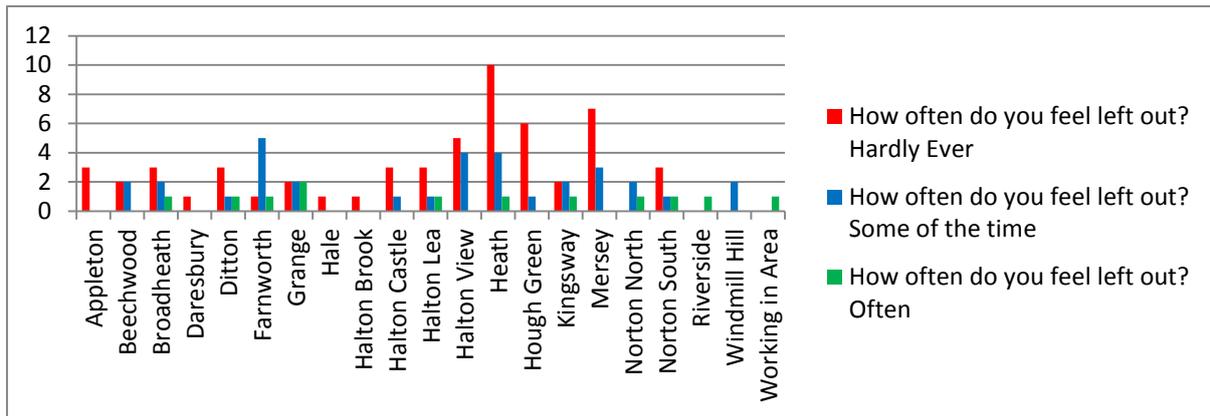


The non-member engaged group in Widnes shows that people feel isolated or lonely “some of the time” in the main, with very few feeling it often. It is still a significant number of people feeling this way though – with roughly a third affected in some way.

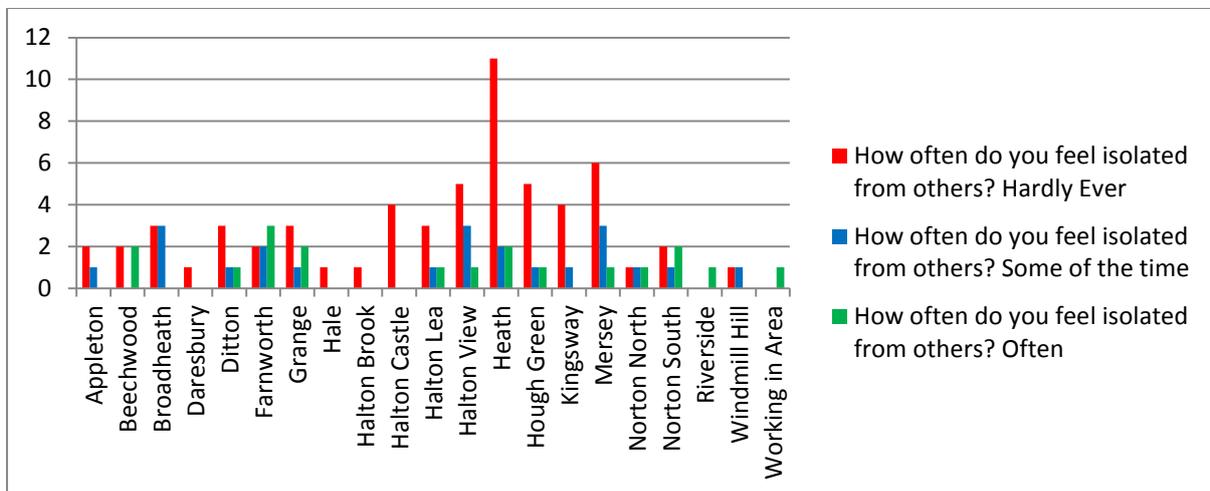
Ward Profile of membership answering “How Often Do You Feel You Lack Companionship?”



Ward Profile of membership answering “How Often Do You Feel Left Out?”



Ward Profile of membership answering “How Often do you feel Isolated From Others?”



The above charts give an indication of the spread of the feelings of isolation and loneliness across many of the wards in Halton where Halton OPEN members live. As this is not a controlled sample, the results are not an absolute picture of the state of this condition in Halton but rather give a sense of how people are feeling living in their ward. Farnworth and Broadheath are interesting as are Heath, Mersey, Kingsway, Beechwood and Ditton. Perhaps some of these have better access to activities or more of a sense of community or does living in a slightly more affluent area play a part? According to sources, this doesn't affect a person's feeling of isolation but it may be that the activities that take place in these wards have more of an impact because they are more enriching somehow. However, there are many people living in Halton that are affected as these charts illustrate. (The engaged group was not included in this analysis as the group is geographically based).

General feedback and Comments received

Public transport was the most mentioned comment – it remains a barrier to many people in accessing vital services and activities. Many, many comments received on the perceived lack of community spirit. An interesting comment received was that people don't like to admit that they are lonely – there seems to be a stigma attached to the admission that one feels this way. Another comment along a similar vein was that people have to help themselves to a degree – **“You have to make yourself go out”**. Others felt that illness is isolating and there certainly is a correlation

between social isolation and poor health and this leading to loneliness which in turn leads to a vicious circle of worsening health. Information and advice was cited as being important – again, as in previous reports, information technology was mentioned and the lack of knowledge that older people have in this area.

The loss of a loved one – **“I am still missing my husband and all friends have passed away”**

“I haven’t seen one person all week”

“Kids text, not talk”

Almost all participants agreed that isolation and loneliness is a problem and even where they do not suffer, they know of others that do.

Halton OPEN’s view

Halton OPEN prides itself on being a Committee of older people who are the representative voice for older people in Halton. They have a thorough understanding of the issues affecting older people because they absolutely belong to that demographic. The Committee were asked about loneliness and they had some interesting insights that are worth documenting.

Walking into an activity or a new group takes a lot of confidence – a person might have lost a partner or have no friends left and to join a new group can be daunting and the longer someone is left to contemplate this, the more difficult it becomes.

Not everyone wants **“booze and walking”!** Some activities may be great for others but there needs to be a good, wide variety of meaningful activity to suit all degrees of health and mobility.

“Why does everything stop at Christmas?” Suddenly people are on leave and it takes another week for people to come back after the break. The issues facing older people do not pause for public holidays and weekends and lonely older people can be left “out on a limb” at these times.

Some Committee Members felt that being on your own is tough in terms of going out for the reason that you have to come home to an empty house. Many older people keep relatively busy during the day but when arriving home and shutting the door the sudden realisation of loneliness can be devastating. Not only this, but there is no one at home to call if they are late or can’t get home.

“A cat can be good to come home to”.

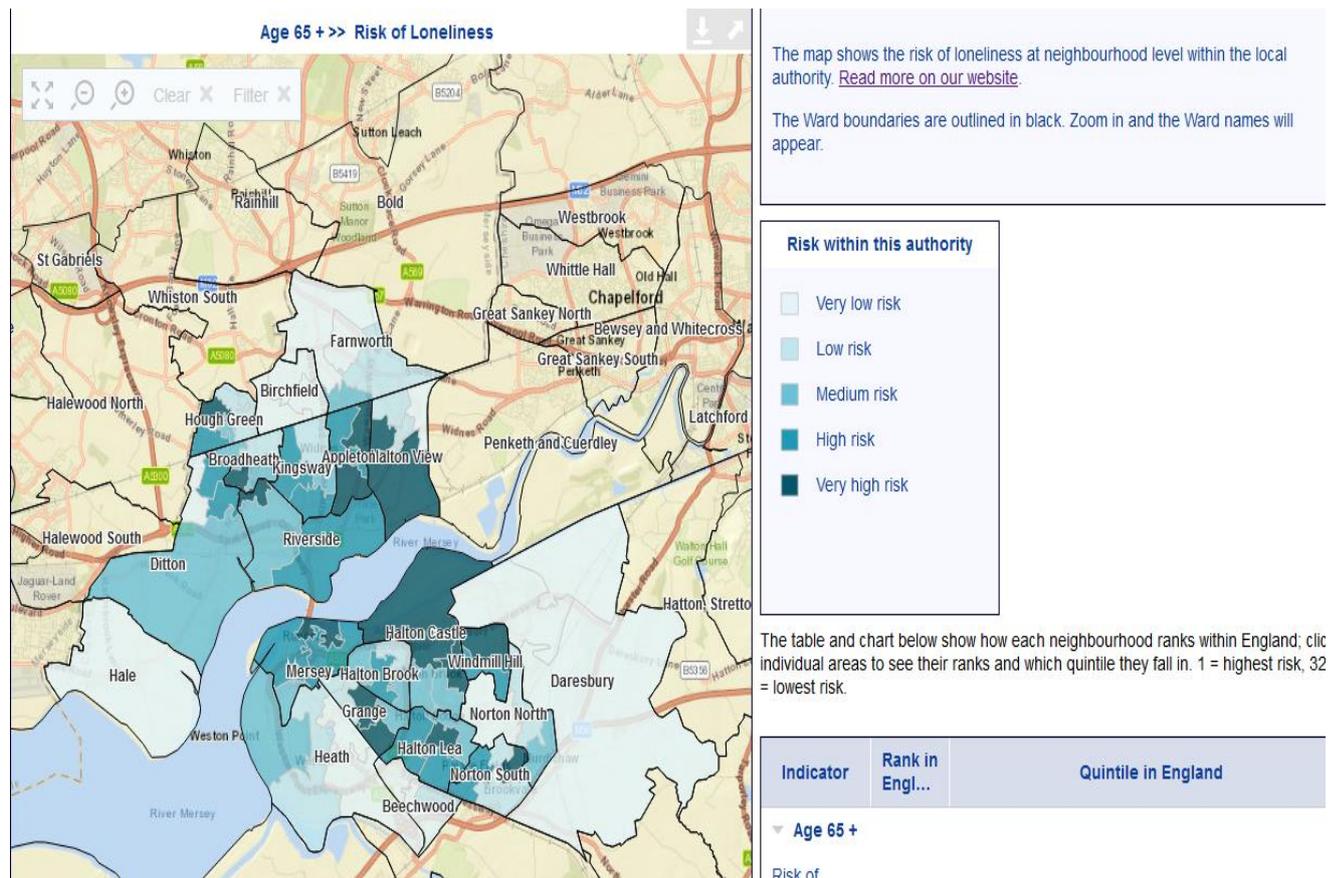
A Committee Member relayed a story where one lady had gone out and came home on her own to her house being burgled. She felt very vulnerable and her fear of crime has impacted her going out in the future.

“I’m not overlooked at the back – so I don’t always feel safe”.

“A befriending service in Halton would be great” – this has been highlighted in previous surveys.

“There is definitely a stigma around the issue – people don’t want to admit it” and finally, (and perhaps most poignant), “The only solution to loneliness is company”.

Age UK Isolation and Loneliness Heat Map



The “heat map” above is taken from Age UK’s Risk of Loneliness study across England in 2016 for people aged 65+. This shows a correlation between the Halton OPEN study in terms of certain wards such as Heath, Grange, Broadheath, Halton View and Appleton. Some wards that were highlighted in the Halton OPEN study showing higher levels of isolation and loneliness such as Farnworth, show very low risk in the heat map. A fair assessment here would be to highlight that there are some wards with low risk that show pockets of isolation and loneliness.

The map gives a good indication of where the highest and lowest risks lie in the area.

9. Conclusion and Recommendations

This Halton OPEN study has confirmed that isolation and loneliness are both major issues within the membership and wider if the results are to be extrapolated across Halton.

One of the most interesting and surprising findings is the trend for isolation and loneliness in Halton across the 60-69 age group in that it is similar to the trend for those in the older spectrum – could it be that retirement has a significant impact on these older people? Both Age UK Mid Mersey and St Helen's Mind (using Mind's Mental Health Resilience Model) carried out a six-week course in 2017 on 'How to Enjoy Retirement' – early learning has shown that whilst pre-retirees are not interested in a course on mental health resilience, however once they have been retired for 6 to 12 months, they are more receptive to this.

We have always known that isolation and loneliness is an issue across the older spectrum of age groups generally but it is interesting to see that it affects so many and whilst there are lots of activities and sign posting initiatives going on – the need for coordination of these activities with public transport is still an issue and a barrier to many people. The other barrier is the lack of someone to go to the activities with – perhaps an advocate or companion to go to that first session with. Sign posting is clearly not enough. We need to develop a much fuller understanding of why people suffer from loneliness and isolation, particularly in relation to their local environment. If left to themselves these issues are self-perpetuating and may give rise to problems with both physical and mental health, particularly with the elderly.

We have also found through conversations with partner organisations that people value one-to-one sessions more than any other type of session – this supports the role of information and advice in an accessible, local venue (not online ideally). This becomes much more important as time goes on because of the simple fact that there are about 30 to 40% of older people (if we extrapolate our results) that are lacking close personal relationships and this highlights the importance of the role of domiciliary care workers and befrienders, whose work has been severely undervalued previously.

It is also important to highlight the need for the right people in the right job – that first contact with a lonely and isolated individual is perhaps the most important and will ensure correct engagement of the person in need. Professionals need to get out into the community and talk to older people on a deeper level as it is felt that many "consultations" can be too superficial. Halton OPEN can and does support Halton Borough Council through the Older Peoples' Reference Group, Older People's Delivery Board and studies such as this one.

Age UK's Index of Wellbeing for Later Life (February 2017) shows that social and civic participation as well as creative and cultural participation are all important, together making up almost 1/8th of total wellbeing in later life. This suggests that active engagement with the world around you is hugely important to us all, whether you go to the theatre or participate in a community group. Other indicators such as being in good health, your personality, and having a large social network are also strong contributors.

What is clear is that people who took part in more health-maintaining and independence-maintaining activities were less likely to feel isolated and more likely to feel that their community was a good one to grow old in.

Halton OPEN will continue to campaign to raise awareness and advocate on behalf of older people for improvements in physical health and better social relationships because we know that these are linked to reduced levels of loneliness and it is hoped that this report will be used to influence the strategies of decision makers in Halton so that these issues can be reduced.

Our supporters and partners:

