Analysing responses to 'A Connected Scotland' - the Scottish Government's draft strategy to tackle social isolation and loneliness
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1. Executive Summary

In January 2018, the Scottish Government opened a public consultation on its draft strategy for tackling social isolation and loneliness and building stronger social connections in Scotland. The aim of the consultation was to help the Scottish Government better understand what needs to change in communities to address these important social issues, and what local and government leaders and other key stakeholders can do to create the conditions to allow social connections to flourish.

The consultation received 419 responses from individuals – members of the public and professional stakeholders - and organisations, as well as written summaries from 17 public engagement events. The Scottish Government commissioned Kantar Public to summarise the views contributed in response to the consultation and draw out key themes and findings in the responses, which are captured in this report.

More detail on the consultation context and the research methodology can be found in Chapter 2.

Key findings

Perceptions of the value of the draft strategy

Responses to the Scottish Government’s draft consultation were constructive, and respondents felt the draft strategy could be improved to ensure it succeeds in addressing these issues. Respondents welcomed the draft strategy and felt it was a step forward in addressing the important issues of social isolation and loneliness, though it needed to be more specific and detailed. Responses also indicated that the draft strategy felt removed from the lived experiences of social isolation and loneliness, and that specific groups at risk, for example older or disabled people, should feature more prominently in the draft strategy. Respondents may not have fully appreciated the strategy was a draft because responses suggested an expectation the strategy should read like a comprehensive plan for tackling social isolation and loneliness, including more specific indicators and measures, key stakeholder responsibilities, timescales, and how it would be funded.

Feedback on the definitions of social isolation and loneliness also featured in responses. Collectively, responses reflected a tension between making the definitions more specific and inclusive of individual experiences and simplifying them so they are more easily understood. Like the responses to the draft performance framework, respondents felt the definitions were removed from the individual and emotional experiences of social isolation and loneliness, which risks people not relating to the definitions. Respondents felt the definitions could be improved by including the subjective, emotional experience of social isolation and
loneliness in an accessible and relatable way that avoids placing blame on an individual for their circumstances. Also, through a more detailed analysis of risk factors that lead to social isolation and loneliness.

More detail on perceptions of the draft strategy and definitions can be found in Chapter 3.

Features of support

Consultation responses mainly covered suggestions for what could be done to address social isolation and loneliness, what support is needed, and who is seen to be well-placed to deliver this support. The main features of support included in responses were: policies and regulation, sustainable funding, education and training, and designing and delivering support. Responses commonly featured six key stakeholders that were seen to be involved in leading on and delivering support, including: government, local authorities, private sector and employers, health and social care, third sector organisations, and schools. These key stakeholders were seen by respondents as having overlapping responsibilities related to tackling social isolation and loneliness, summarised in Figure A below.

Figure A: Summary of features of support and perceived stakeholder responsibility
Policies and regulation

Respondents’ views showed an expectation for government to demonstrate leadership on the issues of social isolation and loneliness, and seek to address the contributing factors through policies and regulation. Austerity featured in responses both directly and indirectly, with references to limited funding or funding cuts, and there was an expectation that the government should be increasing funding of essential public services and third sector organisations. Respondents also felt the government could address known issues contributing to social isolation and loneliness through policy, as well as strengthen enforcement of existing policies that enable social connections, such as disabled access to public buildings. Finally, the government was expected to reduce barriers that third sector organisations and volunteers encounter, like the cost of insurance policies, and streamline the process for applying for funding.

The private sector and, more specifically, employers were also seen to have a role in addressing social isolation and loneliness by prioritising employees’ wellbeing and facilitating opportunities for social connection. Employers were well-placed to help spread awareness of social isolation and loneliness and signpost employees to relevant support. Responses to the consultation underlined the importance of having flexible, family-friendly, and inclusive working policies, for example greater flexibility for employees that have carer responsibilities.

Sustainable funding

Consultation responses highlighted the negative impact of austerity and the desire for government to increase funding to public services and third sector organisations. For example, respondents emphasised third sector organisations’ need for sustainable funding to respond to social isolation and loneliness. Third sector organisations were noted as operating ‘hand-to-mouth’ and could grow their impact if they had access to additional funding. Sustainable funding also empowers community organisations to respond to the needs of their community in a locally-relevant way. Respondents also mentioned the private sector had a role to play in funding community organisations as part of their corporate social responsibility.

Education and training

Respondents felt there needed to be greater awareness of social isolation and loneliness as issues, and that education and training are required to establish a collective awareness of and responsibility for these issues. The government was seen as well-positioned to create a national awareness campaign or awareness week for social isolation and loneliness, much like what has been done for other issues like mental health. The private sector, health and social care, and schools were also expected to play a role in raising awareness and signposting those in need to relevant support, for example by hosting seminars or placing informational posters in visible places.
Designing and delivering support

Respondents often noted that a ‘one-size fits all’ approach to designing and delivering support would not be effective, and that there is a need for a range of support and opportunities for social connection. This included support options that are accessible and approachable, and either organised around a theme or activity or targeted at demographic groups. Both informal, casual opportunities (like walk-in cafes) and more formal, organised opportunities (like interest groups) were appealing. In addition, support was most effective when it was co-located or clustered near other services, to enable pooling of resources and helping individuals more easily access a range of support or amenities.

Many respondents saw social prescribing as an effective way of connecting individuals to relevant local support, which would be reinforced by greater investment in community link workers and a database that centrally collates local support options. Volunteers were seen as essential to the delivery of support and respondents felt more could be done to harness this resource, for example by promoting ‘micro-volunteering’ opportunities.

More detail on features of support can be found in Chapter 4.

Factors contributing to social isolation and loneliness

Consultation responses reflected on what factors contributed to social isolation and loneliness in Scotland, and suggestions for overcoming these. Four themes featured prominently: transportation, housing, public spaces and digital technology.

Transportation

Limited transportation options and access barriers to available transportation were seen to contribute to social isolation and loneliness, particularly for those living in rural communities and disabled people. In rural communities and the islands, poor transportation connections to public spaces and amenities and lack of coordination between modes of transport were cited as barriers to social connection. Respondents felt more needed to be done to join up modes of transport to ensure people can get where they need to go.

Accessibility was particularly a concern for older and disabled people, and respondents indicated a need for door-to-door transport. ‘Active transport’, such as walking or cycling, was suggested as an alternative to other modes, and respondents felt the government should better maintain and develop foot and cycle paths to make this a safe mode of travel. While charities and social enterprises can help meet some of these needs, respondents felt government should invest more in transportation to enable social connection.
Housing

A perceived lack of safe, secure, and affordable housing was seen to not only undermine an individual’s wellbeing, but also contribute to social isolation and loneliness. For example, lack of accessible housing options limits disabled people’s choice in where they live and may result in them living away from their social networks. Respondents expected the government to support access to affordable and accessible housing. Respondents also felt that housing lacked communal spaces that foster informal and formal social interactions, and that government could promote community-based housing to address social isolation and loneliness.

Public spaces

Free, accessible, and safe public, community, and recreational spaces were seen to foster social connection, but some individuals experience barriers to accessing these spaces, with some communities noting they are not available. Respondents feel community spaces are integral to facilitating social connections, like by hosting activities. However, these spaces, as well as other communal spaces like libraries, were seen to be on the decline or closed. Respondents felt the government could do more to maintain these spaces.

Respondents also cited practical barriers to using community spaces, such as accessibility or the cost of use. Where possible, public and community spaces should be centrally located, connected to transport, accessible and free of charge. Outdoor communal spaces were seen to facilitate casual social interactions, and respondents felt outdoor spaces could be improved to reinforce this, for example by ensuring footpaths are well-lit and placing benches in gardens and other public spaces.

Digital technology

Digital technology can facilitate social connection, particularly where it links people to in-person activities or services. It was also viewed as beneficial for rural communities and disabled people as a way of overcoming geographical and physical barriers to social interaction. Barriers to connection brought on by digital technology included lack of access for those that are digitally excluded, over-emphasising use of digital technology undermining value of face-to-face connection, especially for younger people, and cost of and access to broadband, particularly for rural communities or low-income individuals. Respondents suggested expanding broadband coverage, having Wi-Fi in public spaces, and providing access to computers and broadband in community centres. Overall, respondents felt digital technology should supplement rather than replace in-person social interactions.

More detail on factors contributing to social isolation and loneliness can be found in Chapter 5.
Conclusions

Consultation responses were engaged, constructive and solutions-focussed. Those who took part identified what they saw as the main barriers and key support needs for tackling social isolation and loneliness in Scotland. Responses suggest that tackling social isolation is not going to be a ‘quick-fix’ and that communities require traditional investment in public and social services that support community life and social connection. Responses set expectations of different stakeholders’ role in tackling social isolation and loneliness, helping to identify priority areas for future work:

- **Leverage existing channels**: the government and key stakeholders should identify existing channels, such as workplaces or schools, to engage with people at risk of or suffering from social isolation and loneliness and build capacity to effectively and appropriately respond.

- **Focus on the lived environment**: transportation, housing, public spaces, and digital technology shape an individual’s daily life and can either facilitate or limit social connection. Well-connected, accessible transport; housing and public spaces that enable informal and formal social interactions, and digital technology that enables both online and face-to-face interactions may help to address causes of social isolation and loneliness.

- **Empower communities**: Respondents saw a need for both top-down and bottom-up approaches to tackling social isolation and loneliness, and felt that government could empower local communities to respond to these issues through greater clarity in policy and investment.

- **Address chronic social isolation and loneliness**: The draft strategy did not distinguish between acute and chronic social isolation and loneliness, and responses to the consultation did not comment on the differences in approaches for the different types of needs. Those suffering from chronic social isolation and loneliness may require more individualised, intensive support than the responses captured in the consultation suggest.
2. Introduction

Context
As stated in its draft strategy to tackle social isolation and loneliness, Scotland aspires to be a country where individuals and communities are more connected and everyone has the opportunity to develop meaningful relationships regardless of age, status, circumstances or identity. Extensive literature exists on the role connections play in the experience of social isolation and loneliness, and the repercussions on individuals, communities and societies of a lack of connections. Without meaningful and satisfying social connections, people may face powerful negative physical and psychological consequences, including low life satisfaction\(^1\), declined cognitive functioning\(^2\) and increased risk of dementia\(^3\) and depression\(^4\).

NHS Health Scotland’s evidence review\(^5\) revealed that Scottish people are susceptible to these consequences, with 11% of adults in Scotland often feeling lonely, and 38% feeling lonely sometimes. In addition, 6% of adults have contact with family, friends or neighbours less than once or twice a week and 18% of people have limited regular social contact in their neighbourhoods\(^6\).

The consequences are far reaching, going beyond the individual and immediate communities, to the societal level. The negative mental and physical health impacts of social isolation and loneliness have a financial cost. Kantar Public’s UK-wide research\(^7\) for the Red Cross highlighted the negative impact on communities and society, such as people withdrawing from communities and having reduced productivity at work.

\(^1\) Thomas, M, (2015) “New Perspectives on Loneliness: Developing Theory, Methodology and Evidence for Practice”, Seminar Series, Campaign to End Loneliness
More still needs to be done to understand the scope and scale of the issue, and the combination of preventative, responsive and restorative support needed to respond to the highly individualistic and often unpredictable experience of social isolation and loneliness. The Scottish Government laid out its understanding of this issue, its vision and priorities for tackling social isolation and loneliness in Scotland through its draft strategy following the last Scottish Parliament’s Equal Opportunities Committee Inquiry into Age and Social Isolation\(^8\). The public engagement consultation to obtain views on this draft strategy ran from 16 January 2018 to 27 April 2018. The aim of the consultation was to help the Scottish Government to:

- assess whether the public agrees with the way social isolation and loneliness is framed,
- better understand what needs to change in communities to tackle this urgent social issue, and
- identify what local and government leaders can do to create the conditions to allow social connections to flourish.

The Scottish Government commissioned Kantar Public to review, synthesise and analyse the responses submitted for the consultation. This report summarises the key findings and themes.

**Aims**

The research had two aims:

- **Analyse written responses** to the social isolation and loneliness draft strategy and set out key themes that emerge from the responses, highlighting trends in responses, level of consensus, and drawing out any differences (where relevant) by respondents (e.g. individuals or organisations)
- **Synthesise findings from responses** into a presentation and written report, including an overview and discussion of main themes that emerge

**Approach**

The public submitted responses in three ways: (i) via the Scottish Government’s online citizen space platform; (ii) with a toolkit provided by the Scottish Government for community groups to facilitate group responses; and (iii) through a series of 17 public engagement events across Scotland. The consultation produced 419 responses to 26 questions\(^9\) from both individuals and organisations, as well as

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event summaries from 17 public participation events. Kantar Public conducted a robust and systematic analysis of each of these submission types.

Figure 1: Overview of research approach

1. **Review**: 419 responses to 26 questions, from individuals and organisations; and 17 written summaries from public participation events

2. **Synthesise**: Content analysis method, a flexible and systematic approach

3. **Analyse**: Analysis brainstorm followed by targeted interrogation of responses, to identify trends and differences by group (where possible)

The first stage of analysis was to review the consultation responses received to understand the content and composition of the responses before developing the analysis framework. The second stage used a content analysis method known as framework analysis. After reviewing the consultation responses and familiarising ourselves with the data, the research team created an analysis framework to capture both anticipated and new themes. The research team tested and refined the analysis framework to avoid duplication, and used the final version of the framework to synthesise the consultation responses.

Following synthesis of the responses and further analysis, the research team held an analysis brainstorm to interrogate emerging findings and identify key themes and patterns from across the data. Finally, the research team conducted targeted analysis to identify connections and differences by groups, where possible.

**Reading this report**

There are a number of considerations to keep in mind when reading this report. First, views from online responses were similar to those captured in the public participation events, though the online responses had greater specificity. Consequently, in this report we do not differentiate between the mechanism for capturing responses in the findings. Where relevant, we do distinguish between individual views and responses from organisations. The consultation format did not require respondents to submit demographic details, which limited our ability to
conduct sub-group analysis. Where demographic information was provided, this is highlighted in the report. Finally, it is important to note responses came from individuals and organisations representing both local and national perspectives. Response ranged from general to specialist, with some responses very narrowly focused on a specific issue or area of interest.

The absence of an issue or sub-group does not mean it is not important or within scope for this consultation, but rather that it was not submitted by those that took part in the public consultation. The report findings are not exhaustive and do not include every view shared in the consultation. Using rigorous and systematic analysis methods in line with professional standards and guidelines, the research team has made judgements about the main issues raised in consultation responses. This report presents the results of this synthesis and analysis, and it describes the most prominent themes in the data. The findings are thus reflective of the view and experiences of people who responded to the consultation, rather than the general public.

Throughout the report, verbatim quotes (appearing in italics) and examples are used to illustrate findings. As these are taken from the consultation responses, they should be taken as indicative of the responses submitted rather than representative of the views and practices across the population of Scotland.
3. Perceptions of the value of the draft strategy

The relatively high number of responses to the consultation suggests that social isolation and loneliness is viewed as an important issue of public interest. Social isolation and loneliness are wide-ranging and cross-cutting issues that are intertwined with many other social issues, and the range of perspectives featured in responses underlines the wide scope of the topic. Overall, responses to the consultation were hopeful and constructive, rather than negative. Respondents welcomed the strategy, and viewed it as a useful starting point, but they felt more must be done to ensure it meets the needs of the Scottish people.

Perceptions of the draft strategy

The draft strategy was described as ‘a good starting point’, and seen as ‘well researched,’ ‘balanced’ and ‘covering a wide range of social issues’.

“The proposed strategy covers a comprehensive overview of areas that can alleviate social isolation and loneliness.” (Organisation)

The draft performance framework featured in many of the consultation responses, as respondents recognised the importance of the framework to hold stakeholders accountable on progress made in addressing social isolation and loneliness. However, nearly a quarter of respondents felt the draft could be strengthened to overcome what was seen as its limitations: too general and generic overall, and lacking specificity in success measures.

“Too wishy-washy, need to consider real metrics e.g. broadband by when and to whom?” (Organisation)

“We are concerned that the outcomes, measures for success, and indicators do not clearly link up with one another, appear vague, and together may not result in achieving the overall vision. The limited detail of measures such as ‘improved population health’ will lead to difficulties quantifying the impact of the strategy and driving future improvements.” (Organisation)

*10 A CONNECTED SCOTLAND Tackling social isolation and loneliness and building stronger social connections (p 24).
Respondents also felt the government should be taking a leadership role and that the draft performance framework lacked specificity about the government’s responsibilities in addressing social isolation and loneliness. Some respondents felt that the strategy did not sufficiently address the need for funding in addressing social isolation and loneliness, which is discussed in more detail in Section 4.2. Because the performance framework is a working draft, this suggests that respondents would expect to see a more comprehensive performance framework in the final version of the strategy.

For some individual respondents, the framework felt removed from the lived experiences of individuals and needed to be rebalanced to include them at the heart of the measures. Respondents felt the draft strategy could be more comprehensive and inclusive of the specific groups at risk of social isolation and loneliness, like older people, disabled people, and children and young people (particularly those in care).

**Suggested changes to the performance framework in the draft strategy**

Respondents felt the draft performance framework needed more specificity to support timely and impactful change. Suggestions included providing greater detail about performance measures, anticipated interventions and the roles of key stakeholders.

Respondents felt that the wider discussion of loneliness was nuanced and wide-ranging and that this needs to be translated into a comprehensive list of performance indicators.

> “Performance Framework sets out the actions and indicators to chart progress, this could be enhanced if a social isolation measure could be developed together with a timeline for monitoring progress.” (Organisation)

In order to offer a more rounded approach, it was suggested that the performance framework could include additional indicators with direct links to the issue of social isolation and loneliness. The examples suggested included reduction in anti-depressants prescribed, reduction in suicides, or an all-ages measure of social isolation and loneliness. Some believed the framework should move beyond demographics and consider specific life points where support is needed, for example when students leave for university. The Scottish Government may want to consider conducting further research to establish performance measures and collect population data to understand the prevalence of social isolation and loneliness.

While respondents felt the draft performance framework needed to be strengthened, some also felt that it should include what steps could be taken to address the issues of social isolation and loneliness.
As well as a more detailed performance framework, respondents felt the framework should also include the roles and responsibilities of the government and other key stakeholders. These organisations already collect valuable data, which could be used to paint a fuller picture of what is happening at a local level and ensure the approach to tackling loneliness and isolation goes beyond ‘top-down’, to include grassroots engagement.

“You have experts working at the coal-face in the third sector. We, third sector, report at least twice a year to local government - value and utilise those reports to find out what works in any community.” (Organisation)

There was also a desire for measures aimed at key groups or demographics, and what was to be done to address their unique needs. Respondents called for a more detailed analysis of the risk factors leading to social isolation and loneliness, and a fuller review of the types of individuals affected and in what circumstances. Respondents also raised the need for specific indicators, and more of them to be of more use, e.g. crime and safety and antisocial behavior measures, and measures featuring the experiences and needs of specific populations, including children and young people (e.g. care leavers, and people experiencing homelessness).

The desire for greater specificity about planned actions, timings, funding and the roles of key stakeholders suggests that respondents viewed the draft strategy as the Scottish Government’s plan to tackle social isolation and loneliness, and thus wanted a more detailed roadmap of the government’s plans.

Perceptions of the proposed definitions for social isolation and loneliness

Respondents felt that the current definitions of social isolation and loneliness (see below) worked, but felt they could be refined to improve understanding and to make them more relatable.

**Definitions**

- **Social isolation** refers to the quality and quantity of the social relationships a person has at individual, group, community and societal levels
- **Loneliness** is a subjective feeling experienced when there is a difference between an individual’s felt and ideal levels of social relationships

Respondents appreciated that the two definitions distinguish between social
isolation and loneliness, as they are two different issues. They also saw the ‘subjective’ aspect of the loneliness definition as key to include. However, respondents felt the definitions could be clarified to ensure they accurately reflect the experience of social isolation and loneliness and are understood by a range of audiences.

The current definitions were seen to:

- Conflate the quality and quantity of social relationships. There were mixed views on which is more important, which points to the subjectivity of loneliness. For example, a person might have lots of social connections but may not be happy with them.

  “By conflating quantity and quality, inaccurate assumptions about the latter from the former. e.g. it could be assumed that someone living within a family household, or surrounded by peers enjoys quality relationships, but this may not be the case.” (Organisation)

- Minimise the emotional impact of those experiencing loneliness. Respondents expected the emotional impact of these issues to be acknowledged.

  “Definition doesn't adequately describe the emotion - feelings of despair, hopelessness and emptiness that loneliness can bring. Is a detached description of an emotion, therefore people won't identify with this definition in strategy.” (Individual)

- Imply attribution of blame and suggest that an individual is lacking something and thus needs to change. This was felt to reinforce the existing stigma around loneliness.

  “Whether intentional or not, when someone is viewed as lonely or isolated there is an underlying attitude that they are someone lacking in something, when in fact it could be the very community that they live it that reinforces that loneliness.” (Individual)

- Exclude those people that may choose solitude over the company of others, and the definitions run the risk of pathologising them.

  “Anyone can feel isolated or lonely one day but not the next - definitions imply that some people are isolated and lonely and others are not, danger of this is that might lead to attempts to identify who needs help rather than ensuring what is put in place is accessible by anybody at any time.” (Individual)

These points relate to the broader point that social isolation and loneliness is subjective. People experience it differently and for a range of reasons, and the definitions could be improved by taking this into account.

**Suggested changes to definitions of social isolation and loneliness**

Simplifying and humanising the language would improve the clarity and relevance of the definitions of social isolation and loneliness. Specifically, responses to the consultation suggested:
- Simplify terms like 'subjective' and 'societal' that may be less well understood
- Clarify the meaning of 'quality'
- Incorporate emotional isolation, to indicate that being isolated may not be a physical situation
- Reframe to include the role of communities or circumstances in contributing to social isolation and loneliness, so they don’t blame individuals
- Add that loneliness can be short-term or long-term
- More clearly distinguish between social isolation and loneliness how they are related, for example can be linked but they are not always experienced together
- Include the element of exposure to diversity of social networks

There were additional more specific suggestions, often referencing the groups most relevant to respondents, like disabled people, older people, or parents of disabled children. Although it would not be possible to include all of these groups in a definition, they underscore the importance of defining social isolation and loneliness in a way that is inclusive of key groups.

As discussed in Section 3.3, there were mixed views on the relative importance of the quality and quantity of social relationships, so the definition could perhaps be improved by changing to ‘quality or quantity’ to account for the range of ways people experience loneliness. One organisation’s response gave NHS Highland’s definition as a good example, particularly in the way it captures ‘emotional’ loneliness or the feeling of lacking closeness to others. This is closely aligned to the concept of ‘quality’ and is potentially a more relatable way of defining ‘quality’.

**NHS Highland Definition**

Loneliness: An individual’s subjective sense of lacking closeness, and social interaction with others. Although loneliness has a social aspect, it is also defined by an individual’s subjective emotional state. Loneliness is more dependent on the quality than the number of relationships.

An example from a respondent who felt the loneliness definition should be simplified was to revise the definition so it communicated the subjectivity of loneliness without using the term ‘subjective’:

“Feeling you get when the number or type of social contacts you have with other people leaves you dissatisfied with this part of your life.” (Individual)

Another organisation pointed to the Age UK definition of loneliness as an example that captures the subjectivity of the experience. The advantage of this definition is it captures the subjectivity of the experience by using the first person without using the term ‘subjective’. The use of ‘we’, the first person plural, also implies a collective view of loneliness that may reduce the stigma surrounding loneliness.
There was no consensus among respondents about how to define social isolation and loneliness; contradictions between responses appeared. For example, as seen in the discussion on the importance of quantity or quality in the definition of social isolation, and through acknowledging the diversity of experiences of these. There is a tension in the responses between a desire to make the definition as specific as possible and to simplify and ensure the definitions are relatable and easily understood. The challenge for the Scottish Government is to balance these competing needs when revising the definitions in the draft strategy.

**Age UK Definition**

We often feel lonely when we feel we don't have strong social relationships or are unhappy with the ones we have.
4. Features of support to tackle social isolation and loneliness

The consultation included a range of responses, and our analysis identified that a main focus of responses was the support needed to tackle social isolation and loneliness. The main features of support needed included\textsuperscript{11}: policies and regulation, sustainable funding, education and training, and both designing and delivering support.

The consultation responses also identified six key stakeholders, all of whom have interlinked responsibilities for delivering these features of support. We highlight key stakeholders (where relevant) throughout the remainder of the report.

\begin{figure}
\centering
\includegraphics[width=\textwidth]{figure2}
\caption{Summary of features of support and stakeholder responsibility}
\end{figure}

\textbf{Policies and regulation}

Policy and regulation are required to set expectations and establish the standards for recognising and tackling social isolation and loneliness in Scotland. National and local government, the private sector and employers were seen by respondents as

\textsuperscript{11}It is worth noting that these features reinforce what we learned on the British Red Cross Study, about the building blocks from which to construct successful services and support.
central to achieving this. The government was especially viewed as needing to take the lead through national and local laws and policies, as well as enforcing existing policies.

**National and local government**

Respondents suggested ways the government could address social isolation and loneliness by demonstrating leadership and addressing factors that contribute to this issue. Respondents expected the government to lead by example by embedding considerations about social isolation and loneliness into developing policy. For example, the government could make it a ministerial requirement to complete an impact assessment for social isolation and loneliness, in the same way as is required for children’s rights.

In consultation responses, austerity featured both directly and indirectly, through general references to funding cuts or general lack of funding of public services and third sector organisations. Respondents felt cuts to funding were contributing to social isolation and loneliness, particularly as it relates to public transport and community spaces, which is discussed in more detail in Chapter 5. Austerity was seen to be limiting third sector organisations’ ability to respond to social isolation and loneliness due to cuts and lack of sustainable funding, discussed in further detail in the next section. Responses revealed an expectation for government to increase funding to core public services like transport and mental health services as well as funding of third sector organisations.

Trauma was recognized as a cause of social isolation and loneliness in some situations, and responses included a recommendation for more trauma informed responses to situations and of loneliness and social isolation. Respondents also felt that the government could update or develop policies aimed at addressing specific factors contributing to social isolation and loneliness. For example, a suggestion shared was to limit the number of holiday homes in an area. Respondents also felt that the government could be better at enforcing existing equality legislation and duties

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12 The Equality and Human Rights Commission, which is Great Britain’s national equality body, is responsible for promoting and protecting equality in Scotland.
to ensure they are followed through, for example by ensuring hearing loops are widely available in public spaces and increasing disabled access to buildings.

Economic and city focused investment was suggested as a contributing factor to depopulation in rural areas and increasing the risk of social isolation and loneliness.

Respondents also suggested bureaucracy that restricts the design and delivery of support be reduced. Respondents felt that there was a need to simplify processes to make it easier for third sector organisations to provide support that strengthens social connections. Respondents felt the government should strive to reduce barriers faced by volunteers and organisations to carry out volunteer activities like transport schemes.

“Volunteers are being put off by insurance policies. A drivers’ scheme cannot function without disclosure certificates and public liability insurance. How can we remove those barriers while protecting vulnerable individuals?” (Event)

Another suggestion was to make it easier for volunteers to obtain background checks, for example the Protecting Vulnerable Groups (PVG) scheme, to enable visiting people in their homes. Finally, views from some third sector organisations noted the government could streamline funding applications and ensure that they are proportionate to the level of funding.

“It currently feels like a mountain to climb for just one application.” (Organisation)

Third sector organisations who responded, with limited time and resources to complete applications, felt hindered by excessive bureaucracy creating barriers to delivering support.

Respondents felt that where appropriate, a social inclusion and loneliness strategy should link to connecting strategies, such as those on child poverty, alcohol, suicide prevention, safety and mental health. When making strategic and commissioning decisions, there should be a duty to tackle the issues of isolation and loneliness.

**Private Sector and employers**

Consultation responses also suggested that the private sector and employers have a responsibility to establish a work culture that does not contribute to social isolation and loneliness and to help identify and support for those who may be in need. Respondents felt the private sector and employers should create opportunities for employees to make social connections, for example by setting up interest groups or sponsoring social activities like quizzes, sports teams or volunteering. Respondents also felt the private sector should support volunteering opportunities for employees by, for example, allowing volunteering during work hours.

“In England, a call-centre has partnered up with a local Age UK to encourage its staff to offer telephone befriending to older people in work time.” (Individual)
In addition to encouraging social interaction and volunteer activities, respondents felt it was essential for employers to have flexible, inclusive and family-friendly working policies. As an example, employers should allow flexible working hours for parents and carers and be more understanding when a crisis occurs in employees’ home lives. Another example suggested that employers should remove or limit zero hour contracts so employees have more stability. Respondents felt employers should do more to make hiring and working policies inclusive for people with disabilities, home workers, and blind and deaf people.

**Spotlight on…**

ASTRiiD, a charity connecting businesses with professionals who have long term health problems but who still have many skills to offer employers. They believe that the value of work is far more than the wages that are paid. Work provides routine, challenges and rewards and help gives its members a positive mental attitude. (see: https://astriid.force.com/s/)

Finally, respondents felt that the private sector should integrate social isolation and loneliness into existing health and wellbeing policies, and help to spread awareness and understanding of the issue among employees. Employers could monitor overall staff health and wellbeing – including social isolation and loneliness – through an anonymous employee survey. Employers should also consider how to identify and support employees who may be in need and signpost them to company or local resources.

**Sustainable funding**

As discussed in Section 4.1, austerity and cuts to funding were identified by respondents as limiting the ability of third sector organisations to respond to social isolation and loneliness. In addition, a recurring theme in consultation responses was the need for investment and sustainable funding to support national and local initiatives aimed at tackling social isolation and loneliness. Third sector and charity organisations are helping to combat social isolation and loneliness at a local level and doing important community work, but they require greater financial support to sustain and grow their impact. This approach may not only empower communities to work together to meet the needs of their community but may also support engagement with existing services.

Government and the private sector have a role to play to invest in existing, effective community organisations and infrastructure to ensure the continued existence of essential services.

“*Vital and well equipped services shutting down due to lack of funding. Mental health costs soaring as a result of this.*” (Individual)

Respondents felt there was a general lack of funding and that third sector organisations could expand their reach if they had access to greater funding. Some
of this funding was expected to come from the government, but some responses also named the private sector as having a role in funding initiatives aimed at social isolation and loneliness as part of their corporate social responsibility.

Third sector organisations cited a need for stable funding, rather than short term grants, to ensure they are not operating ‘hand-to-mouth’ and can sustain and eventually scale up their work.

“The service we provide is only reaching the tip of the iceberg of people who would potentially benefit. We receive council core funding for about half our turnover, the other half being raised by ourselves. This is an annual hand-to-mouth existence.” (Individual)

“We see too many good community projects come and go because they simply can’t scale or provide the depth of evidence needed to move beyond initiation/innovation funding.” (Organisation)
In addition to providing funding to third sector organisations, respondents felt the government has a responsibility to extend its existing investments to tackle social isolation and loneliness. For example, mental health services, such as counselling, were seen to need increased funding to get rid of current long waiting lists. It was also felt that the government should extend the Integrated Care Fund (ICF) to fund a range of projects and partnerships. Another suggestion was to increase the rate of carers’ allowance, currently at £64.60 a week, for those who have significant carer responsibilities and are unable to work. Respondents felt that the government must increasingly invest in communities to address the root causes of social isolation and loneliness.

Some of the consequences of processes and practices underpinning voluntary sector funding, and service design were noted. Limited, and ring fenced, voluntary sector funding was seen to create a voluntary sector that must target its provision, and as a result exclude individuals who have a need for the service, but who may not fit into target criteria, on the basis of their age or other identity characteristics. For example, as a consequence of service provision contracts, access to community transport services may be confined to individuals or groups through restrictive eligibility criteria. Services could therefore be focused less rigidly, to work in a more inclusive and collaborative way.

Social enterprises, which are funded through their trading, were seen by respondents as well-positioned to deliver valuable services and support to communities. Respondents felt more can be done to promote and support social enterprises in Scotland.

**Spotlight on…**

A **social enterprise** (SE) is a trading business – selling goods and services – whose primary objective is to achieve social and/or environmental goals. Profits from the SE are reinvested in the business or in the beneficiary community – and not distributed to private owners, shareholders or investors.

(see [http://www.se-code.net/](http://www.se-code.net/))

Physical safety was seen to be critical and a need for increased funding for community policing initiatives as a means of strengthening the confidence some urban communities have in the safety of their neighborhood.

**Education and training**

Education and training were viewed as necessary for raising awareness of social isolation and loneliness as issues, establishing a culture of caring, and helping link people at risk with relevant support. Overall, respondents felt that there was a need to increase the visibility of social isolation and loneliness as issues that exist and affect everyone, and that everyone has a role to play in preventing and responding to them.

Key stakeholders have similar roles to play in raising awareness of these issues.
The government was expected to take a leadership role in raising awareness, and an example shared by respondents of how it could do this was from a national awareness campaign. Due to the cost of undertaking such a campaign, it may not be feasible, but the sentiment behind the suggestion is important to consider: that something needs to be done to increase visibility of social isolation and loneliness across Scotland.

Another example of a suggestion was to institute a week focused on raising awareness of social isolation and loneliness, much like what has been done for mental health and mental health awareness week.

**Spotlight on…**

‘See Me’ Social Movement in Scotland to end mental health stigma and discrimination. They are funded by the Scottish Government and Comic Relief and managed by the Scottish Association for Mental Health (SAMH) and The Mental Health Foundation.

(see: www.seemescotland.org)

The private sector, health and social care providers as well as schools are also well placed to raise awareness of social isolation and loneliness - for example, by hosting awareness seminars or by placing information posters in practices, workplaces, or schools. These stakeholders were seen as well placed to intervene and refer people to relevant support where a need is identified. For example, responses commonly cited ‘social prescribing’ and felt health and social care providers could do more to link patients with sources of support in their community and embed social prescribing into their practice.

**Spotlight on…**

**Social Prescribing** is where an individual is connected to services or activities in the community which are likely to help with the health problems they are experiencing. These activities are prescribed as a non-clinical alternative to a medical prescription.

Recognising that health is impacted by a range of factors, social prescribing draws on a wide range of community assets to focus on an individual’s physical and mental wellbeing. These include opportunities for the arts, physical activity, outdoor activity, learning, volunteering, social support, mutual aid, befriending services and self-help, as well as support with benefits, legal advice, etc.

To support those in need, there was felt to be a need to increase the capacity of

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well-placed people in the community, like healthcare workers or employers, to recognise and respond to those in need. The government could help fund training and education and share best practice examples. Health and social care providers could screen for social isolation and loneliness in routine assessments. Training is needed for health and social care providers, as well as the private sector and schools to enable employees to recognise the signs of social isolation and loneliness, sensitively respond and signpost to local provision. One example shared highlighted the initiative to raise awareness of dementia as a good example that could be replicated with social isolation and loneliness.

“Just as Dementia Awareness training has been rolled out to businesses in Scotland, could replicate similar awareness training for those exhibiting signs of loneliness, and train employees to have short, simple dialogue with customers / people who exhibit traits.” (Organisation)

Raising awareness of social isolation and loneliness in Scotland and building the capacity of those in the community in a position to intervene will help to ensure those in need of support are connected to available resources.

Physical safety was seen to be critical and a need for increased funding for community policing initiatives as a means of strengthening the confidence some urban communities have in the safety of their neighborhood.

Designing and delivering support

Responses to the consultation also offered views on what good support looks like, and things to keep in mind when designing and delivering support aimed at social isolation and loneliness. Communities know the needs of their local area and residents, and the government has the capacity to enable communities to design support that works for them, by conducting asset mapping, sharing best practice and helping to scale up effective support through funding. Respondents felt government should be driving forward its expectations of good quality support, with communities putting it into practice in a locally relevant way.

Those suffering from social isolation and loneliness did so for wide-ranging and intersecting reasons, and there was agreement from consultation responses that there was not going to be a ‘one size fits all’ approach to designing support. There is a need for a range of support and opportunities for connecting, both formal and informal, that are accessible and inclusive. There was no consensus about what should be designed, though responses identified key features of support that may help enable connections to flourish. This included organising support around a theme or topic of interest in addition to support targeted at key demographics or characteristics. More opportunities for casual interactions, in addition to formal, structured activities, was appealing and seen to embed responses to social isolation and loneliness into the day-to-day. Finally, all support should have an inviting tone and be in a neutral and accessible setting.
As discussed in Section 4.2, access to stable and sustainable funds was seen as crucial for third sector and community organisations to deliver support aimed at tackling social isolation and loneliness. In addition, effective delivery was characterised by locally relevant provision and co-located or clustered support. Support was seen as most effective if it was grouped together with other forms of support or near to other community amenities or services. This helps existing services pool their expertise and resources more easily, and helps the individuals in need to more easily access different types of complementary support.

“It's often too taxing or time consuming to make many journeys, so if services were clustered it would be easier.” (Individual)

**Spotlight on…**

In Dundee, the Main Street Café in Coldside Parish Church was developed as a direct response to a local wellbeing survey that found that many people in surrounding streets were socially isolated. A steering group was formed that accessed funding for a co-ordinator and established a successful community café operating two days a week currently on a donation only basis. Volunteers help run the café and a partnership with Fairshare means that food parcels and other items from a local supermarket are available for those present to take away free of charge. A rota of services provides access to information, advice and support on issues such as benefits, housing, literacy and community activities.

Furthermore, signposting people to locally relevant support was seen as crucial to ensuring those in need of support receive it. Many responses called for more social prescribing and greater investment in link workers to carry out this work. Another suggestion was to identify and leverage community champions - people who are familiar with support and the needs of their community. To enable social prescribing, responses to the consultation suggested creating a central database highlighting the range of local provision available to the community.
Responses to the consultation felt that more could be done to harness the time and resources of volunteers. While health and social services are fundamental to effectively preventing and responding to social isolation and loneliness, resources are outstripped by demand. Volunteers were seen, especially by organisations, as crucial to the successful delivery of support. Consultation responses suggested more creativity in operationalising this resource, as well as reducing bureaucratic processes which impedes this (as discussed in Section 4.1). Micro-volunteering opportunities were repeatedly referred to as a realistic and appropriate way forward.

In addition, respondents felt that Jobcentres could do more to encourage people to volunteer and that the impact of volunteering on unemployment benefits should be clarified, so people who have the time and willingness to volunteer can do so to the benefit of their community. Some respondents also saw volunteering as not only helpful to a community, but also for the volunteer, for example as a pathway to employment. Respondents felt more could be done to promote and incentivise volunteer activities.

Government was expected to take a leadership role in addressing social isolation and loneliness through policy-making and funding, but also to support private and third sector organisations in raising awareness and increasing their capacity to respond to this issue. The government should play a lead role in shaping what effective support looks like and reducing barriers to delivering support.

Self-directed support is considered less appropriate for recovering substance misusers and people with a terminal illness or deteriorating health. For these individuals, intensive, tailored and one-to-one support is more appropriate. It was suggested that informal peer support is most suitable for such groups who may face stigma, and who need to feel understood and accepted by others (most likely people in similar circumstances or with similar experiences) before being able to build relationships and become more socially integrated.

On a practical note, it was suggested that a Social Isolation and Loneliness Assessment Tool, for use by sector professionals, or a checklist of behaviors that could indicate social isolation and loneliness, for use by the general public concerned about family and friends, would be helpful tools to identify those in need of support.
5. Factors contributing to social isolation and loneliness

Many of the consultation responses were solutions-oriented and focussed on what support was needed and who was best-placed to deliver it. Respondents also reflected on what factors contributed to social isolation and loneliness, with four key themes featuring prominently: transportation, housing, public spaces, and digital technology. These themes are key aspects of an individual’s lived environment and play an important role in either enabling or hindering social connections.

Each of these themes will be explored in depth below, detailing what factors were seen to contribute to social isolation and loneliness and what solutions were proposed, highlighting any best practice examples that were shared.

Transportation

Transportation can facilitate social connections, but often functions as a barrier for certain communities or demographics, either due to a lack of sufficient transportation options or because of practical barriers to accessing existing transportation systems.

In rural areas and in the Islands, geographic isolation and lack of coordination between transport services created barriers to social connection and contributed to social isolation and loneliness. The main issues for rural communities were poor transport links between homes and community spaces and across local authority borders. Consultation responses cited infrequent service and transport services that operate independently of each other and end abruptly at local authority borders.

“Arbitrary local authority boundaries prevent people from accessing much-needed community transport.” (Event)

This means that community transport does not effectively create links between towns, and villages that are near the border of several local authorities have even more limited access to community transport. Lack of nearby transport in rural communities is a barrier for older or disabled people, who may not be able to walk to the nearest bus and require door-to-door service.

Rural respondents felt more could be done to join up different modes of transport and align timetables. For example, islanders must wait hours between ferries and buses.

“Transport needs to become fully joined up recognising the challenges of living in an island community e.g. better coordinate ferry and bus services.” (Event)
In addition, rural respondents felt more could be done to join up different modes of transport across local authority borders, so rail, bus and ferry services are complementary and rural dwellers are able to get where they need to go more easily.

Respondents in both rural and urban areas cited lack of ‘active travel’ infrastructure which allow for walking and cycling, particularly where this could serve an alternative to public and community transport. Without foot and cycle paths, traveling on foot or by bicycle is not a safe alternative. Respondents believed developing – and, where they already exist, maintaining – walking and cycling paths would expand viable transportation options as well as facilitate informal social interactions.

“More accessible, enabling streets have the potential to bring many more isolated people into their communities and into community life.” (Organisation)

“An old lady said to me: ‘In the old days everyone walked everywhere and loneliness wasn’t a problem as people would stop by your gate for a chat as they went past. Now no-one walks, everybody drives, and nobody stops off to say hello anymore.’” (Individual)

**Spotlight on…**

Angus Cycle Hub is a new Social Enterprise and Community Interest Company which was formed to help build cycling infrastructure and create cycling opportunities and events. Hub has targeted areas of multiple deprivation in the Arbroath area and offers sporting pathways and coaching opportunities to young people that might otherwise not be able to take part in cycling.

(https://www.anguscyclehub.co.uk/pages/aboutus/)

Physical accessibility and affordability were cited as prominent transportation barriers in urban areas, though these were also concerns in rural and semi-urban areas.

Older or disabled people need public transportation to be accessible, and need adaptions like wheelchair ramps and kneeling buses to be consistent across all modes of transportation. For example, there is a need for kneeling buses to enable those with physical limitations to get on and off easily. If not all the buses on a planned journey have this feature, a person may choose not to travel at all since they can’t be certain they’ll be able to get on the bus. For older and disabled people, there is a need for transportation that is truly door-to-door, with the driver
coming to their door to help the person get from their house into the vehicle and then out to their destination.

These barriers to transportation become barriers to social connection and interaction, and respondents felt accessibility should be a priority in transportation to ensure people do not become socially isolated as a result of poor or inadequate transport options. Responses suggested, without stating directly, that lack of integration between public planning and private sector transport companies may account for issues with coordination between transport options.

Spotlight on…

Community Cars is a volunteer-led community transport scheme which delivers door-to-door and demand responsive transport for Dundee’s 65+ community. It helps enable everyday tasks and journeys and gives people the opportunity to get out of the house.

(http://www.dundeecommunitycars.org/)

Affordability of transportation was also a concern for respondents in both rural and urban areas, as people who struggle to afford transportation may not have alternatives and are at risk of becoming socially isolated as a result. Consultation responses cited increasing costs and the loss of free or subsidised travel passes in some areas, and felt that that concessionary and subsidised travel should be protected.

“Retention of subsidised transport as without it people will not venture out and become socially isolated.” (Organisation)

Often in rural areas, there is a lack of suitable, affordable options for getting around, and the alternatives that might meet their needs are too expensive:

“Remote and rural areas can be disadvantaged through a lack of affordable and regular transport which impacts of the maintenance of social connections.”

(Organisation)

“People in island communities cannot afford taxis due to local salaries being lower.” (Event)

While charities and social enterprises can help to bridge the gaps, respondents felt government and local authorities should do more to ensure public transportation enables social interaction – this was seen as vital to combatting social isolation and loneliness. Beyond this, they were also seen to have a responsibility to make sure transportation is accessible and affordable so certain groups are not excluded.
Housing

A need for developing and maintaining a housing stock that is affordable, accessible and well-connected, creating and reinforcing opportunities for connection was important to respondents. Respondents expected the government to play a key role in delivering on this vision of housing.

Lack of secure, suitable, and safe housing options can undermine an individual's wellbeing as well as contribute to social isolation. This issue impacts communities in both rural and urban communities alike, as well as demographic groups at risk of experiencing social isolation or loneliness. In rural communities, young people are pushed out of their communities due to a lack of housing options within their means. For disabled people and those with chronic illness or injury, lack of accessible housing limits choice and leads to them living anywhere that is suitable, which may mean they are removed from their existing social circles. Faced with unaffordable or unsuitable housing options, people are forced to move away from their social networks, leading to or exacerbating social isolation and loneliness.

Respondents felt that existing housing lacked communal spaces or meeting places, as well as more formal planned social events or initiatives, and that more intentional planning would cultivate a stronger sense of community. Responses cited a lack of shared spaces, like play areas or community rooms and limited opportunities for residents to connect with their neighbours. Housing associations could plan social activities for residents or sign-post residents to local community events. Responses also noted the importance of housing that is centrally located and connected to local amenities such as the high street and services like GP practices, with accessible walking paths and public transportation. Some responses felt this should be a requirement in the planning process for new developments, which requires the leadership of local authorities.

Embedding opportunities for social connection within housing was seen as especially important for older people. This could be accomplished by ensuring there are communal spaces as well as by offering occasions for social interaction like communal meals. Respondents felt older people needed better affordable housing options, as currently they must choose between staying in their own home – which may exacerbate social isolation and loneliness – or going into a care home. Some suggested independent living communities, which would provide additional support as well as opportunities for social connection. Even more specifically, responses cited the need for greater flexibility in care homes that would allow older people in care to be able to remain living with partners or allow them to keep pets, which reduces loneliness.
Several consultation responses cited examples of multi-generational communities or co-housing\(^\text{14}\) as ways of cultivating a sense of community as well as offering affordable, community-based housing that is mutually beneficial.

**Spotlight on…**

Germany, where they are developing a system of “mehrgenerationenhäuser”, or multi-generational houses. These have a role as both kindergartens and social centres/day services for older people, providing mutual support for both young and old.

These were seen as best practice examples of housing that encourages social connection and tackles some of the interrelated factors contributing to social isolation and loneliness for different demographics. Respondents felt government and local authorities needed to encourage and enable these types of ‘intentional’ community-based housing schemes.

**Spotlight on…**

Cassiltoun Housing Association in Glasgow, which has been a community-based housing association for 33 years. With roots as a housing co-operative, it aims to enhance the quality of life of its clients and to regenerate and sustain its community through housing-led and resident controlled initiatives.

(\url{http://www.cassiltoun.org.uk/})

Respondents saw national and local government as responsible for ensuring Scottish people have access to affordable and accessible housing, and felt more could be done to facilitate connections in residential communities. Local authorities could do more during the planning process to ensure new housing developments include social and community spaces and embed social infrastructure going forward.

Some suggested independent living communities, or shared living schemes in which a person who needs support moves in with an approved carer or companion who would provide additional support as well as opportunities for social connection. Housing organisations already providing a range of care and support services were considered well placed to identify and deal with social isolation and loneliness.

\(^{14}\) Co-housing refers to intentional communities run by residents, with self-contained private homes centred around a community space (\url{https://cohousing.org.uk/}). \url{https://www.ippr.org/research/publications/the-generation-strain-collective-solutions-to-care-in-an-ageing-society}
Public spaces
As well as residential spaces that support and encourage connection, public and community spaces that are thoughtfully designed and well-maintained were seen to have potential to support both casual and organised forms of social connecting. Respondents highlighted the need for outdoor, recreational, and community spaces to be free, accessible and safe.

Community centres were seen as essential to facilitating social connections, but in some instances they may not be accessible to everyone, or may not even be available in certain communities.

“In most of our rural communities the Hall is the only place that people can come together – there are no shops, no bus services, sometimes even the church has closed…If you don’t have a safe, warm, well run facility for the activities to happen in, then you have no chance to develop the strong social connections we all need and which are the basis for helping the socially isolated and lonely.”

(Organisation)

Respondents cited a lack of or decline in community spaces and amenities such as banks, libraries and post offices that draw people out of their homes and provide opportunities for informal interactions, particularly in rural communities. Some organisations felt that costs associated with using community spaces was a barrier to providing services, and felt that councils or leisure trusts should allow them to use community spaces free of charge. Respondents also suggested making better use of existing public spaces, for example using schools at the weekends for community activities. Community spaces were seen as important not only as places for informal interaction, but also to the extent they facilitate provision of community activities and services.

Many of the suggestions concerning community spaces pointed to the desire to have functional ‘community hubs’ which are centrally located, connected to public transportation, and co-located with other useful services or amenities such as health centres or shops.

Spotlight on…
Kinross Day Centre is located in the centre of the town, on the high street. It provides a transport service to pick people up from their house and takes them to the centre, and returns them home. Its central location allows visitors to walk from the centre to other parts of town, like shops and the post office.

(www.kinross.cc/daycentre/)
Where possible, community spaces should seek to overcome barriers to accessing their services. For some the cost of services or activities is a barrier to taking part in community activities, so they should be free or subsidised wherever possible. Respondents also cited that often community spaces are not accessible for disabled people, which discourages or prevents them from accessing these spaces. Concerns about comfort and safety prevented some older people from leaving their homes, so there is a need for public spaces and pathways to be properly maintained and well-lit to support them in venturing out.

“Pavements are not maintained well, have slip and trip hazards, or sometimes are no pavements/pathways at all. Lack of benches and public toilets also prevents older and frail people from leaving house, which deprives them of opportunity for casual social interaction in area where they live as don’t meet people.” (Organisation)

The role of public and outdoor spaces in facilitating casual interactions was a recurring theme. As discussed in Section 3.4, people may prefer casual or informal social interaction to more formal activities, so public spaces should be designed to encourage these kinds of interactions.

“For many [older people with disabilities we talked to], just being able to sit out in the garden or park, and pass the time with passers-by could make the difference in how lonely they felt. 'Sit-ootery's' in key spaces - on the high street, park, or even outside the front door, were important, rather than being able to attend organised activities.” (Organisation)

Government, local authorities and those responsible for community spaces could be more proactive in considering these concerns when planning and designing community spaces, and where possible the public should be consulted to ensure public spaces meet their needs. Some respondents attributed the lack or decline of public spaces to policies of closure or privatisation, and they felt any new development and planning should consider the impact to ensure public and community spaces endure as places for social connection.

**Digital Technology**

Digital technology is an important and widely used tool for facilitating social connection, but for those without access, it can contribute to social isolation and loneliness\(^\text{15}\). Individuals and organisations agree on the usefulness of digital technology in connecting and bringing people together, particularly where it is used to advertise in-person activities or services. However, in some cases this creates

\(^{15}\) Some expressed concern that this consultation was completed online and thus is missing out on the ways isolation and loneliness affects those who are not digitally connected.
barriers for those that are digitally excluded, such as rural communities without broadband coverage and low income families.

“Most of Appin does not have broadband. Infrastructure mostly in place but been waiting for electricity connection for over a year.” (Organisation)

Cost of broadband was a barrier, especially in rural communities, and respondents commonly suggested expanding access to affordable broadband and providing free Wi-Fi in public spaces.

“Internet connectivity should be regarded as a basic utility such as water, power or heating. We know this is a vital resource for those who are isolated or living in remote or rural parts of Scotland.” (Organisation)

Where this is not feasible, providing internet access and computers at community spaces like libraries and community centres was seen as a way to bridge the gap in access to digital technology and ensure everyone in a community is aware of and can access activities and services.

“Excellent local schemes through libraries and 'local hubs' that provide free access to hardware and learning.” (Organisation)

Respondents also cited the usefulness of training for those who may not be comfortable using digital technology. Some even suggested that this could be organised as an intergenerational activity, with young people helping to tutor older people on how to use computers15. Offering access to and training for digital technology may also encourage attendance at community hubs and help to facilitate informal interactions and strengthen these spaces as community meeting places. Building capacity with digital technology may also help enable face-to-face social connection.

Spotlight on…

‘Putting the social into social media’ is a project coordinated by Voluntary Arts Scotland that is offering free digital skills training to anyone aged 50+ who helps run creative activities. The project is funded by Scottish Government as part of its wider Digital Scotland programme, delivered through SCVO’s Digital Participation Charter Fund. The focus is on helping volunteers to raise the profile of the creative groups they lead - to help more people get involved. The project has directly supported some 90 people who are leading creative groups in their communities.

(see: www.voluntaryarts.org/forms/putting-the-social-into-social-media)

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16 This has been done already in Bo’ness, Scotland: https://www.bield.co.uk/news/tenants- become-computer-wizards-thanks-local-pupils
While respondents agreed on the value of the digital technology, they cautioned against the reliance on digital technology as a substitute for face-to-face contact as it could contribute to social isolation and loneliness.

“People spending too much time alone online instead of getting out and physically meeting others face to face.” (Organisation)

Respondents felt the increasing use of and reliance on digital technology for communication could be isolating for those who would prefer to interact in person. However, leveraging digital technology to make social connections was seen as more useful for rural and island communities, where there are greater geographic barriers to overcome. Digital technology was also seen as an avenue to connection for those with disabilities or who were long-term sick and face physical barriers to participating in face-to-face activities.

There was particular concern about young people’s high usage of digital technology and reliance on smart phones and social media which might mean they have less face-to-face interactions.

“Young people spend increasing amounts of time on social media potentially isolating themselves from face to face interactions.” (Organisation)

Overall, respondents felt that digital interaction should supplement – rather than replace – face-to-face interaction, and that digital technology has a role to play in facilitating this. Respondents felt the government should focus on broadening access to digital technology and services. The Scottish Government is already doing this as part of its Digital Participation Charter Fund17, which aims to help reduce isolation and improve job opportunities through the teaching of digital skills. However, more needs to be done to ensure greater access to digital technology across all of Scotland.

6. Conclusions

Key findings
Respondents welcome the draft strategy, and view it as a useful starting point, but feel more needs to be done to ensure it meets the needs of the Scottish people. The Scottish Government should consider ways to increase visibility of social isolation and loneliness as an issue that affects everyone, and while it has a leadership role to play, it should also consider building capacity and empowering communities to provide support. Key reflections from analysing consultation responses included:

1. **Leverage existing channels**: There is a balance to strike between public expectations of tackling social isolation and loneliness and what is feasible given known funding constraints. Consultation responses highlight what was most important to those that took part and while suggestions may not all be feasible, they help identify priority areas, and point towards opportunities to benefit from existing good work. To combat social isolation and loneliness, the government and key stakeholders need to identify and leverage existing channels and contact points to identify and engage with people at risk of or experiencing social isolation and loneliness. This can be through community and public services (like health and social care), employers, and schools.

2. **Importance of the lived environment**: The lived environment, which includes transportation, housing and public spaces and digital technology, can either facilitate and enable social connections, or limit them. A lack of well-connected public transportation, safe, affordable and accessible housing and community spaces, and access to broadband contribute to social isolation and loneliness. Where certain groups (for example, those with a disability) are excluded from opportunities to connect, this creates and reinforces social isolation and loneliness. These aspects of the lived environment featured prominently in consultation responses and should be the focus of community investment.

3. **Empowering communities**: The Scottish Government positioned local communities at the heart of the draft strategy, setting their expectations for a collaborative top-down and bottom-up response to social isolation and loneliness. Yet, respondents set their expectations of the government to facilitate and enable communities to address social isolation and loneliness, particularly by providing funding to local organisations. Respondents may have used ‘government’ as shorthand because they were uncertain about other more relevant stakeholders that could deliver different strands of work, but without further information we cannot be certain the expectation is not on
government. For example, business, schools and social enterprises could be well-placed to fund education and training to tackle misconceptions of loneliness. By leveraging and building upon existing, effective local support, sharing best practices, and supporting communities to maintain their support through funding and investment, a collaborative approach may be possible.

4. **Absence of chronic social isolation and loneliness**: No distinction was made in the draft strategy about acute and chronic social isolation and loneliness, and responses to consultation questions did not touch on this either. It is worth keeping in mind that many of the features of support reported here are less appropriate for tackling chronic social isolation and loneliness, and that a more individualised approach would be needed with those identifying with this group.

Overall, findings from this consultation suggest social isolation and loneliness is not going to be solved with a ‘quick-fix’ or new technology. The findings suggest that the way forward is a ‘slow-fix’, requiring traditional community development and investment that fosters community life through maintenance and funding of public and social services. There are changes large and small, at local and national level, that are needed to create an environment that enables connections to thrive, and community stakeholders in Scotland have different but reinforcing roles to play in delivering and maintaining support.

**Role of key stakeholders**

Social isolation and loneliness are complex issues with many contributing factors. Addressing them will take time, and require collaboration and coordination between key stakeholders, each of whom has a role to play in addressing social isolation and loneliness.

**The Scottish Government** was expected to take a leadership role in spreading awareness of social isolation and loneliness and empowering other key stakeholders. The government must also consider the impact of current and future policies, particularly economic policies, and how they might contribute to social isolation and loneliness. Respondents expected the government to invest in communities, and to increase the funding of public services, like transportation and housing, that enable social connection. Finally, in addition to showing leadership, respondents felt the government should support community-led services, share best practice and help to scale up through long-term, sustained investment and funding.

**Local authorities**, like government, were expected to take leadership at a local level on the issue of social isolation and loneliness and to review how policies might contribute to tackling social isolation and loneliness - for example, the provision of community transport. Respondents felt local authorities should invest in
and protect community spaces that create opportunities for social connection. Local authorities were expected to ensure local resources are centrally collated and to sign-post to services so those in need of support can easily find it.

**The private sector** was seen as well-positioned to help spread awareness of social isolation and loneliness, and to refer employees to available support and resources. Employers should also reflect on their own company policies and consider how they might be contributing to social isolation and loneliness. The private sector could also play a role in funding local or national initiatives aimed at tackling these issues.

**Heath and social care workers** were expected to leverage existing contact points to identify and support individuals currently or at risk of experiencing social isolation or loneliness. To do this, they require further training to integrate measures of social isolation and loneliness into existing health assessments. They must also be able to easily find and sign-post patients to further local resources in order to more effectively carry out social prescribing.

**Third sector organisations** are already doing impactful work aimed at reducing social isolation and loneliness, and they need access to long term, sustainable funding sources to have lasting impact. To enable social connection and ensure those in need are able to access support, third sector and charity organisations should aim to provide accessible, affordable, and (where possible) clustered services (incl. internet access) to communities.

**Schools** were viewed as well-placed to spread awareness and educate students about social isolation and loneliness. To do so, teachers require further training to recognise signs of social isolation and loneliness, and better awareness of available resources so they can sign-post those in need.
Appendix A: Summary of key groups

Consultation responses identified key groups at risk of social isolation and loneliness. The absence of a specific group or suggestion does not mean that it is not relevant to the issues of social isolation and loneliness, but that it did not feature prominently in those who responded to the consultation. Below is a summary of needs for key groups identified in consultation responses.

Disabled people are viewed as impacted by lack of accessibility of public spaces, housing and transport and lack of suitable activities. More specifically, people with sensory impairment need better infrastructure to ease communication barriers and enable them to connect with their communities. Consultation responses suggested this group would benefit from:

- Improved accessibility of transportation, housing and public spaces and better training for staff to provide support, which facilitates interaction with non-disabled people and helps reduce stigma
- More suitable activity options (especially physical activity), as well as activities designed for disabled children
- Increased public awareness of ‘hidden’ impairments
- Services and support that facilitate communication, for example lip reading teachers, funding for sign language interpreters, and sign language instruction for children
- Better enforcement of legislation like hearing loops so they can more easily participate in community activities and groups
- Reducing and removing clutter and obstacles on streets in accordance with RNIB Scotland’s Street Charter;
- Increasing the number of websites that are accessible to those with visual impairment, including adding information about access for people who are visually impaired to venue websites and general directions on Google Maps, and
- Providing financial support for the costs of accessing technology for blind and partially sighted people.

People with learning disabilities who, although regarded as living independently in the community, often experience loneliness and social isolation, and are at higher risk of hate crime. Suggestions for how to improve support for this group included:

- Support to access mainstream education, achieve useful qualifications and gain paid employment, without which people with learning disabilities would continue to live lives separated and isolated from the rest of society.
- Greater recognition of hate crime by the police and support services, and action to be taken when reporting these crimes, would give people with learning difficulties more confidence to leave the house and interact with others.
• Involvement of people with learning disabilities in the design of services including social care, the benefits system, employment, housing and leisure services, so that services can better meet need.

**Older people** may have limited opportunities for social interaction, due to physical limitations, isolation due to housing or lack of accessible transport and public spaces. Suggestions from respondents related to this group included:

• Better, more affordable housing options that embed opportunities for social interaction, for example multi-generational housing
• More opportunities for older people to connect with their community and better utilising their assets, for example through buddy schemes
• Opportunities for intergenerational activities, for example children’s nurseries visiting older people in care homes
• Door-to-door transportation to get out of the house and participate in community life
• Increased accessibility of public spaces, for example wheelchair access and public benches
• Expanding existing opportunities for social interaction, for example allowing more time with in-home care workers

**Young people** were seen to be impacted by a lack of affordable housing and job opportunities, and in need of support to mitigate social isolation and loneliness. Responses to the consultation suggested:

• More affordable housing and job opportunities, particularly in rural communities, to enable young people to stay in their communities and close to their social networks
• Greater range of youth clubs, for example sports and gaming, and qualified youth workers who can help identify social isolation and loneliness
• More face-to-face interactions and less use of digital technology and social media
• Anti-bullying and kindness education and awareness programmes in schools
• Opportunities for intergenerational interaction, for example teaching older people how to use technology

Young people included the sub group of unaccompanied asylum seeking young people, considered to be particularly vulnerable and susceptible to becoming socially isolated due to language and cultural barriers, new and unfamiliar environments, and experiences of trauma. It was reported that housing and accommodation decisions for these young people could be significant in either mitigating or exacerbating these issues.

People on **low incomes** were seen to be negatively impacted by the cost of housing, transportation, and broadband, and respondents felt they would benefit from:
• More affordable housing and subsidised transportation
• Access to affordable broadband and use of technology
• Increased benefits to bring families out of poverty
• Free or subsidised support and social activities to enable social connection

People living in rural communities are impacted by lack of adequate transportation that joins up with other modes of transport, and lack of or limited access to affordable broadband. Responses suggested rural communities would benefit from:

• Better connected, more frequent transport system, with a need for door-to-door transport for elderly and disabled people
• More affordable public transport and taxis to be able to get around
• Better coverage and access to affordable broadband

People with mental health issues were seen to need greater support to encourage social interaction and support wellbeing, suggestions for this group included:

• More individualised support – those with social anxiety may need more support to access services and activities
• Better referral to services after a diagnosis, for example for people diagnosed with autism or Asperger’s
• Greater support in place for those at risk of suicide

Responses to the consultation also identified families and parents as in need of further support, such as:

• Groups for (single) mums that also provide childcare to facilitate participation
• More community family events and activities
• Greater support for single parents
• Better funding of day care services

Consultation responses suggested more could be done to support carers, for example:

• Greater financial support by increasing carer’s allowance
• More flexible work policies to allow for emergencies or care needs
• Additional support and opportunities for respite

Respondents felt more could be done to support ethnic minorities, for whom the fear of discrimination was sometimes a barrier to social connection. Suggestions to support this group included:

• More inclusive activities and groups that embrace everyone
• Better diversity and inclusion training for public sector workers, for example teachers, social workers, housing officers and police

Suggestions for better support for ethnic minorities included those for BME carers, who were reported to face particular challenges that contributed to social
isolation and loneliness. These included a higher proportion of cared for people within BME communities living with their carer, younger BME women more likely to combine childcare responsibilities with informal care for other family members, and BME carers more likely to be caring for a disabled child or a child with a long term health condition.

Respondents felt more could be done to support people who are bereaved, and that this group would benefit from support groups. Responses to the consultation touched on key life stages, like students leaving for university or retirement, where additional support could be targeted. For example, newly-retired people may need encouragement to take part in activities like volunteering. Finally, some respondents felt that older men would benefit from more activities and groups targeted at their interests, like Men’s Sheds.

Other groups mentioned included:

- **LGBTQ** – they may fear discrimination and become socially isolated due to stigma in some communities; would benefit from shared interest groups; suggestion to allocate core funding to LGBT groups
- **Victims of domestic violence** – this can contribute to social isolation and loneliness when they are isolated and feel they can’t speak about their situation
- **Homeless** – they need to be able to use toilets safely, shower, and wash clothes
- **Substance misuse** – support needed for children and young people in homes where there is an issue of substance misuse; substance misuse may be symptom of loneliness; greater understanding needed to reduce stigma of addiction; and a suggestion to include this group in performance framework
- **Home workers** – freelancing / working from home may contribute to social isolation and loneliness, there is a need for communal working spaces
- **People for whom English is a second language** – need better ESOL provision to overcome language barriers, example of church that offers ESOL classes where all are welcome that helps to build relationships
- **The unemployed**, prompting suggestions that volunteering opportunities for the unemployed could be particularly beneficial in not only providing a route into employment but also providing opportunities for social interaction that could help mitigate social isolation and loneliness.
Appendix B: Addenda

Sixty-eight organisations and individuals emailed their responses to the draft strategy and these were not included in the initial analysis informing the published findings.

These responses have been analysed and compared to the published findings to ensure the consultation analysis was comprehensive and all insights featured in the report. We identified similar themes, with the responses echoing the original findings and adding more examples and nuance to the original analysis.

The following section lists the additional insights that came out from the additional analysis and organized around the key sections of the report.

Perceptions of the value of the draft strategy

Suggested changes to the performance framework in the draft strategy
Respondents called for a more detailed analysis of the risk factors leading to social isolation and loneliness, and a fuller review of the types of individuals affected and in what circumstances. Respondents echoed the need for specific indicators, and more of them to be of more use, including crime and safety measures (e.g. antisocial measures) and measures featuring the experiences and needs of specific populations, including children and young people (e.g. care leavers, experiencing homelessness).

Perceptions of the proposed definitions for social isolation and loneliness
An additional suggestion was for the definitions to allow for greater diversity of experience and incorporate the need for people to have exposure to diverse social networks.

Features of support to tackle social isolation and loneliness

Policies and regulation
Trauma was recognized as a cause of social isolation and loneliness in some situations, and therefore a trauma informed response needs to be available.

A new view was economic policy and city focused investment was contributing to depopulation in rural areas, suggesting the need for a more balanced policy.

National and local government
Respondents felt that where appropriate, a social inclusion and loneliness strategy should link to connecting strategies, such as those on child poverty, alcohol, suicide prevention, safety and mental health. When making strategic and commissioning decisions, there should be a duty to tackle the issues of isolation and loneliness.

Sustainable funding
Some of the consequences of processes and practices underpinning voluntary sector funding, and service design were noted. Limited, and ring fenced, voluntary sector funding was seen to create a voluntary sector that must target its provision, and as a
result exclude individuals who have a need for the service, but who may not fit into target criteria, on the basis of their age or other identity characteristics. For example, as a consequence of service provision contracts, access to community transport services may be confined to individuals or groups through restrictive eligibility criteria. Services could therefore be focused less rigidly, to work in a more inclusive and collaborative way.

Increasing funding for community policing initiatives was seen as necessary to strengthen the confidence some urban communities have in the safety of their neighborhood.

**Education and training**
Suggestions for focusing on developing resilience in the early years were raised. Helping children to understand what happiness and wellbeing feels like and what skills will help them to tackle challenges to their wellbeing was seen as a further area of focus for schools.

Support for language training and classes for people with asylum and refugee status was seen as important for helping to break down some of the barriers leading to social isolation and loneliness.

**Designing and delivering support**
Self-directed support came through strongly from many respondents in the initial analysis. New perspectives emerged from the additional analysis; self-directed support is considered less appropriate for recovering substance misusers and people with a terminal illness or deteriorating health. For these individuals, intensive, tailored and one-to-one support is more appropriate. It was suggested that informal peer support is most suitable for such groups who may face stigma, and who need to feel understood and accepted by others (most likely people in similar circumstances or with similar experiences) before being able to build relationships and become more socially integrated.

On a practical note, it was suggested that a Social Isolation and Loneliness Assessment Tool, for use by sector professionals, or a checklist of behaviors that could indicate social isolation and loneliness, for use by the general public concerned about family and friends, would be helpful tools to identify those in need of support.

**Factors contributing to social isolation and loneliness**

**Housing**
Some suggested independent living communities, or shared living schemes in which a person who needs support moves in with an approved carer or companion who would provide additional support as well as opportunities for social connection. Housing organisations already providing a range of care and support services were considered well placed to identify and deal with social isolation and loneliness.

**Summary of key groups**
Other key groups identified as being at risk of social isolation and loneliness included:
Veterans and services personnel face a unique set of circumstances which can trigger social isolation and loneliness, including a mobile lifestyle with long periods away from family and friends, a culture of self-sufficiency and emotional repression, and a loss of identity and social support networks upon exit from the services. Research was cited that found problems with isolation peaked between the ages of 35-54, suggesting that isolation is not limited to older veterans.

The early experiences of children were seen to be key to their emotional development and ability to form positive attachments. It was recommended that early interventions to promote positive early attachment and minimize the harmful consequences of previous Adverse Childhood Experiences on children’s emotional health was key to preventing children from experiencing difficulties in forming healthy relationships in later life.

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- Involvement of people with learning disabilities in the design of services including social care, the benefits system, employment, housing and leisure services, so that services can better meet need.

Additional suggestions for how to improve infrastructure for people with sensory impairment to be able to connect with their communities included:

- reducing and removing clutter and obstacles on streets in accordance with RNIB Scotland’s Street Charter;
- Increasing the number of websites that are accessible to those with visual impairment, including adding information about access for people who are visually impaired to venue websites and general directions on Google Maps, and
- providing financial support for the costs of accessing technology for blind and partially sighted people.

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these young people could be significant in either mitigating or exacerbating these issues.

The **unemployed**, prompting suggestions that volunteering opportunities for the unemployed could be particularly beneficial in not only providing a route into employment but also providing opportunities for social interaction that could help mitigate social isolation and loneliness.
How to access background or source data

The data collected for social research publication:

☐ are available in more detail through Scottish Neighbourhood Statistics
☐ are available via an alternative route <specify or delete this text>
☒ may be made available on request, subject to consideration of legal and ethical factors. Please contact ben.cavanagh@gov.scot for further information.
☐ cannot be made available by Scottish Government for further analysis as Scottish Government is not the data controller.