

LI 15

Ymchwiliad i unigrwydd ac unigedd

Inquiry into loneliness and isolation

Ymateb gan: With Music in Mind

Response from: With Music in Mind

Health Social Care and Sport Committee Inquiry into Loneliness and Isolation

Public Consultation

Submission from members of With Music In Mind C.I.C. 6th March 2017.

1. Background:

With Music In Mind is a Community Interest Company based in South Wales that was set up in 2015 to run singing and social networking groups for people at risk of loneliness or social isolation, or at risk of worsening physical or mental wellbeing. The organisation currently runs three groups in Cowbridge, Barry and Neath, for anyone aged 50 and over.

Liz Fletcher, a group member, approached Managing Directors Sarah Miles and Kate Whitestone, to ask if With Music In Mind could respond to the consultation above. Therefore, Liz designed an anonymous questionnaire for group users to complete and she then analysed the results (attached). Kate Whitestone led all three With Music In Mind groups in brief workshops to find out the members' thoughts on the **causes of loneliness and isolation**, the **impact of loneliness and isolation** and **what can be done to tackle the problems of loneliness and isolation**. The workshops were well received by the groups and plenty of discussion ensued. A summary of their response is below:

2. The causes of loneliness and isolation:

By far the most common reason given for loneliness was **bereavement**. **Ill health and disability** was the next most common response. Discussion around this matter revealed the cycle of **ill health → loneliness → ill health**.

'Separation of family', 'moving away', 'being isolated within a city/town' and **'break up of communities'** were all points that brought about discussion of how communities and families are differently organised now, in comparison to 50 years ago, and that this can lead to loneliness and isolation of individuals. Included within this area of discussion were also **'empty nest syndrome'** and **'lack of family support'** and **divorce/separation**.

Other points that were raised were to do with geographical isolation and practical issues, including **rurality, lack of or poor transport and poor mobility**. Mobility also fed into an area of discussion around **lack of confidence** making it difficult to get out. Confidence issues were also linked to **depression, mental health stigma, shyness and 'inability to develop social skills'**, which the groups felt contributed to loneliness and isolation.

Finally, the groups also felt that **financial difficulties** and **unemployment** were factors in developing loneliness and isolation.

3. Impact of loneliness and isolation:

All three groups felt that the main impact of loneliness and isolation was **depression**. **Suicidal thoughts, low self esteem, anxiety, despair and low confidence** were also mentioned. **General ill health** was also thought to be a consequence of loneliness and this was linked to a tendency to '**not looking after yourself**' as a result of loneliness and isolation.

The groups discussed that other consequences of loneliness were **withdrawal from company or society** and **becoming further isolated**. They also felt that it leads to **a greater reliance on medication and social care or services**.

4. Addressing the problem

The groups' ideas around addressing the problem of loneliness and isolation fell into two broad categories; the first was around self-help and the second was around provision for people who are lonely or isolated.

Self help:

The most common suggestion from the members was that those who are lonely or isolated should **join groups** that interest you. They also suggested that **joining church** could be a good way to tackle loneliness. Another idea was of **volunteering** in a local venture such as a charity shop and it was also discussed that **being a good neighbour, being an active member of the community and being involved with your family** would be a good way of avoiding or reducing loneliness.

When discussing that depression is not only an effect of loneliness but also a cause, it was suggested that **seeking medical advice** early was important.

Provision:

The group members felt that **groups with activities** were an excellent way of tackling loneliness and isolation. However, it was also felt that there were several possible barriers to accessing such groups that also need to be addressed. These include, **reducing costs** or keep costs low to service users, providing or arranging **adequate transport, better publicity** of services available, **more volunteers** to run groups, and **facilitation** for certain people to be able to access groups (e.g. support for those with anxiety or mobility issues). Other activities or services that were suggested were **letter writing** initiatives, a '**telephone tree**' and **cross-generational activities** including 'skill exchanges'.

With regards to the bigger picture of loneliness and isolation the group members felt that there should be **more support from influential people** such as **Assembly Members and Members of Parliament** around tackling the problem. They also discussed that there should be more work done **to increase knowledge and change attitudes** around loneliness and that people should be made aware of the concept of **socialising as a way to maintain or improve mental and general health**. Group members thought that GPs and other health professionals should consider **prescribing social groups** as a treatment.

We hope that you find this submission useful and we look forward to reading the results of the inquiry.

Yours

Kate Whitestone

Sarah Miles

Managing Directors

With Music In Mind C.I.C.

www.withmusicinmind.co.uk

5.The Questionnaire

In an effort to obtain 'evidence' for this consultation, I devised an anonymous questionnaire for members of With Music In Mind. We had 25 responses from the Cowbridge group and 6 from Neath, reflecting the membership of both groups. The Neath group is due to close shortly as it is too small to be viable.

These are very small numbers when considering national policy, but there is nothing more powerful than direct information and quotations from the people directly affected by the problem of loneliness and isolation

Overall 64% of respondents live alone, although this was 72% in the Cowbridge group. Over half in the Cowbridge group were widowed, and it was mentioned several times that people's marriage or partner was the thing keeping them from loneliness. The number of years being widowed was spread equally from newly widowed 0-2years, 2-10years, and 10-20years.

When asked if they were lonely (yes/no/sometimes), overall 71% answered yes or sometimes, the Cowbridge group being 86% - a tremendously high figure. When asked if they could become lonely if one thing in their lives changed, the answer came back at 81%.

The questionnaire also asked if there were days when they did not speak to/meet anyone. Nearly half the overall (45%) replied yes.

The questionnaire asked who they felt supported by. The choices given were: NHS, Social Care, Friends, Family, Church, Other. In the Cowbridge group, 68% were supported by Friends, and only 40% by Family. Overall 36% felt they had no family support. About a third felt supported by the Church, and about 20% the NHS. There were 6% overall who made it clear they felt they had no support at all.

The last question on the Questionnaire was: *If WMIM suddenly finished, would you miss it (a lot/a bit/ not much)*, 97% replied 'a lot', a resounding endorsement of the validity of a group of this sort.

6. Summary

The replies from this simple questionnaire seem to indicate that there are indeed a large number of people either lonely or isolated already, or who could easily tip into it with one simple life event.

Lonely and isolated people are often quiet people in the background of society, whom nobody notices until something goes wrong. Then they can become an enormous drain on the finances of social and health care in its widest context. If someone noticed them before this happened, they would have a network of contacts to help them through, or maybe even to have prevented the 'disaster' in the first place.

It seems to me that spreading a little money over a wide area, working with Voluntary and Community Interest Groups, could save enormous sums in the long run. Big prestige, headline

making projects so beloved of politicians cut little ice when all you want is a friendly face and to feel cared for.

Words coming up most frequently in the questionnaire were:

Friends, cheerfulness, fun, company, like singing, enjoyable, lifts your mood, Laughter.

And here are some direct quotations from the questionnaire:

'Feel uplifted'

'Very sad and lonely without husband'

'Singing and laughter help so much'

'Really upset about this' (*closing of Neath group*)

'There would be a huge hole in the week' (*without the group*)

'Such happy friendly people who truly care'

'Because of the friendliness of the group, I feel wanted and I feel looked after'

'It's the only thing that keeps me going'

Liz Fletcher

Member With Music In Mind, Cowbridge