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Older people, Social Isolation and Loneliness in Scotland
Insights from the Healthy Ageing in Scotland (HAGIS) study

Acknowledging the increasing recognition of social isolation and loneliness as major public health issues, the Scottish Government's policy document **A Connected Scotland (2018)** sets out a strategic approach to tackling loneliness through building stronger social connections.

The strategy recognises that although that social isolation and loneliness can affect anyone, particular groups of people, including those living alone, those who have been bereaved, and those with socio-economic disadvantage, are among those at increased risk.

In seeking to build a Scotland where individuals and communities are more connected, the strategy identifies a series of priorities; empowering communities to build partnerships; promoting positive attitudes and tackling stigma; creating opportunities for people to connect; and supporting infrastructure that fosters connections.

This briefing, drawing on initial findings from the Healthy Ageing in Scotland (HAGIS) study (www.hagis.scot), presents headline statistics identified through the data, and demonstrates the significant potential of the project for informing policies in Scotland.

The Healthy Ageing in Scotland (HAGIS) study is the first comprehensive cohort study of older people in Scotland. In its pilot phase, the study interviewed over 1,000 people aged 50 or over in Scotland, with permission to link the survey data to administrative data including health (inpatients, day cases, outpatients, A&E and prescriptions), social care (social care census), tax and benefits. Collectively, the study's data presents a rich source of information has the capacity to inform the design, implementation, and evaluation of interventions aimed at reducing instances of loneliness and isolation among older people in Scotland.

Profiling older people in Scotland
Analysis of HAGIS data can provide profiles of people who self-report as socially isolated and/or lonely, enabling policymakers to recognise the characteristics of those who are most at risk of the adverse effects of social isolation and loneliness, and to target effective policies.

Healthcare
Data from HAGIS can allow analysis of the variation in health service usage (including costs) among older people, including those who self-report as socially isolated and/or lonely.

Transport and connectivity
The HAGIS study can also provide insights into the association between social isolation and loneliness, and access to transport, along with trends in the use of digital technology by older people.

Policy implications

- As a longitudinal cohort study, HAGIS would provide an enduring source of rich and reliable data to inform the long term nature of the Scottish Government's strategy
- HAGIS respondents are representative of people over 50 living in Scotland.
- If commissioned over a longer period the study could play a large part in supporting the strategy's aim of understanding how social isolation and loneliness interact with key life transition in older people, e.g. transitions to retirement, children leaving homes, and the emergence of care responsibilities and/or age-related health problems.
- Longitudinal studies (same survey, same people), unlike cross-sectional (same survey, different people) studies, support us to understand causality. When, and for whom, does loneliness cause poor health? When, and for whom, does poor health cause loneliness? We will then be able to recommend prevention strategies.

Profiling social isolation and loneliness in older people in Scotland

Social isolation was measured by asking respondents how often they meet, speak or communicate (via email) with family and friends. Loneliness was measured using the UCLA-3 Loneliness Scale which asks respondents if they ever lack companionship, feel lonely or feel left out.

We produced profiles of social isolation and loneliness by describing the

i)   distinct patterns of social isolation and loneliness

ii) the profile characteristics

Using latent class analyses, we found six distinct patterns of social isolation (see Figure 1) and three distinct patterns of loneliness (see Figure 2) within our population.
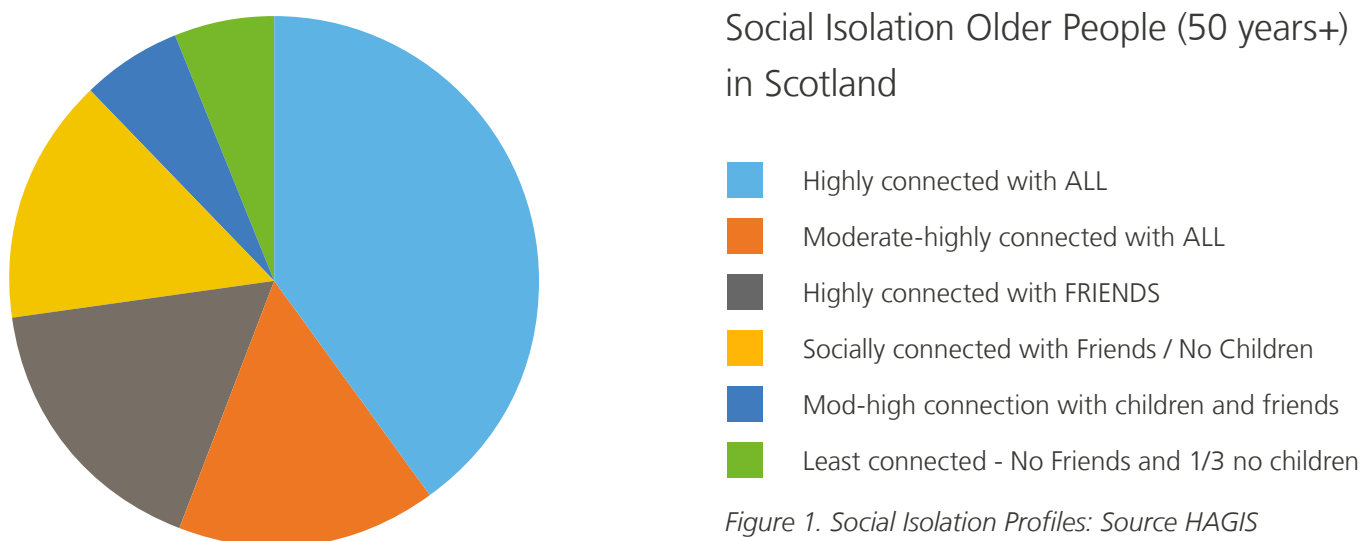
Social Isolation Profiles

Social Isolation Older People (50 years+) in Scotland

- Highly connected with ALL
- Moderate-highly connected with ALL
- Highly connected with FRIENDS
- Socially connected with Friends / No Children
- Mod-high connection with children and friends
- Least connected - No Friends and 1/3 no children

Figure 1. Social Isolation Profiles: Source HAGIS

Highly Connected with All (40%)

Over 85% have social contact with family, friends and children more than once per month, and over 70% were involved in clubs or other social activities.

Profile Characteristics:

- Almost two thirds (62%) are women
- 70% are aged between 60-79 years
- 70% are married/living with partner, and 29% are divorced, separated or widowed
- Highest level of education was spread broadly across all groups, however 39% had high school and 24% have higher education qualifications
- 71% are retired and 25% are working

Moderate-highly Connected with All (16%)

Over 98% have social contact with their children more than once a month. Around 43% meet their friends and other family more than once per month, and communicate more than once per month (via telephone/text/email) with friends (65%) and other family (95%). Just over a quarter are involved in clubs or other social activities.

Profile Characteristics:

- 64% are women
- 65% aged 60-79 years
- 74% are married/living with partner and 24% are divorced, separated or widowed
- For 72% their highest level of education is none/primary or secondary school qualifications
- 67% retired and 26% working

Highly Connected with Friends (17%)

This group most often met (80%) and communicated (82%) with their friends than with their children (42% met, 85% communicated) or other family (6% met, 40% communicated) more than once per month. 59% are involved in clubs or other social activities.

Profile Characteristics:

- 56% are men
- 68% are aged 60-79 years
- 72% are married/living with partner and 26% are divorced, separated or widowed
- 62% have further education or higher education qualification
- 68% retired and 30% working

Socially Connected with Friends, No Children (16%)

This group do not have any children but meet (53%) and communicate (76%) with their other family more than once per month. They meet (79%) and communicate (91%) with friends more than once per month. 58% are involved in clubs or other social activities.

Profile Characteristics:

- 53% are women
- This group are younger than other groups with 77% aged 50-69 years
- This group has a higher proportion of single people (38%) than all groups. 40% are married/living with partner and 22% are divorced, separated or widowed
- 48% have further education or higher education qualifications
- This group has the highest proportion who are either unemployed, sick or looking after family (17%). 57% retired and 26% working

Moderate Communication with Children and Friends – no other family (6%)

The majority (97%) of this group have no other family and 20% have no friends. They more commonly communicate via telephone, email or text than to meet up with their children or friends: 69% meet vs 92% communicate with their children, and 69% meet vs 72% communicate with friends more than once per month.

Profile Characteristics:

- 56% are men
- 68% are aged 60-79 years
- 64% are married/living with partner and 36% are divorced, separated or widowed
- 36% have high school qualifications, 23% have further education qualifications and 31% have a higher education qualification
- 72% are retired

Least Connected - No Friends and 1/3 no children (5% of sample)

This group have no friends (100%), a third (33%) have no children and 12% have no other family. However, 60% meet and 66% communicate with their children more than once per month, and just over half (54%) meet and three-quarters (75%) communicate with their family more than once per months. Less than a quarter are involved in clubs or other social activities.

Profile Characteristics:

- 55% are women
- Broad range of ages
- 61% are married/living with partner, 15% are single (never married) and 24% are divorced, separated or widowed
- 66% have either no qualifications or school qualifications
- 64% are retired and 24% are working. 12% are either unemployed, sick or looking after family

Loneliness Profiles
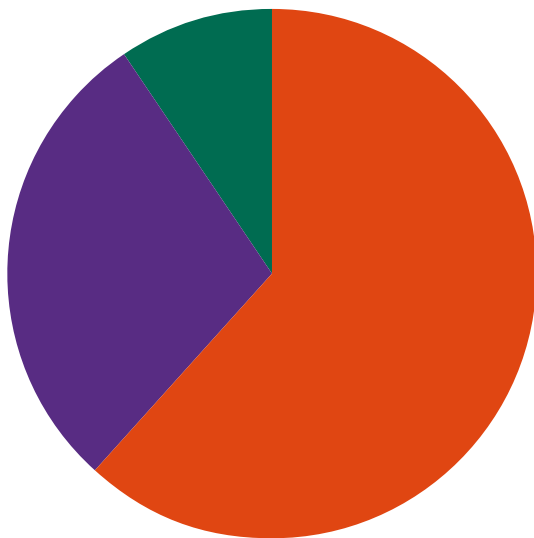
Loneliness
Older People (50+ years) in Scotland

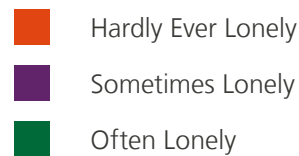- Hardly Ever Lonely
- Sometimes Lonely
- Often Lonely

Figure 2. Loneliness Profiles: Source HAGIS

Hardly Ever Lonely (62%)

Most respondents (62%) fell into the Hardly Ever Lonely Profiles.

Within this profile respondents self-reported that they hardly ever or never lack companionship (85%), feel left out (90%), or feel isolated (96%).

Profile Characteristics:

- 55% are women
- 64% are aged 60-79 years
- 75% are married/living with partner and 20% are divorced, separated or widowed
- 40% have high school qualifications, and a further 45% have further or higher education
- The majority are retired (69%) and 26% are working

Sometimes Lonely (29%)

Within this profile respondents self-reported that they sometimes lack companionship (74%), feel left out (82%), or feel isolated (76%).

Profile Characteristics:

- 56% are women
- 65% are aged 60-79 years
- 52% are married/living with partner and 36% are divorced, separated or widowed
- 62% have either school qualifications or none
- The majority are retired (66%) and 26% are working

Often Lonely (9%)

Within this profile respondents self-reported that they often lack companionship (88%), feel left out (84%), or feel isolated (89%).

Profile Characteristics:

- 54% are women
- Younger than other profiles: 30% are aged 50-59 years and 36% are aged 60-69 years
- 51% are married/living with partner and 36% are divorced, separated or widowed
- 34% have school qualifications and other educational attainment was broadly spread across categories
- This group had the highest proportion of those who self-reported as unemployed, sick or looking after family (18%)

Relationship between Social Isolation and Loneliness

Social isolation and loneliness are distinct but inter-related phenomena. Figure 3 shows the relationship between social isolation and loneliness. Those with moderate to high social connectedness most often report to be hardly ever or sometimes lonely. However, a small proportion of even those with high levels of social contact across children, family and friends are often lonely. Conversely, a small proportion of those with least social contact report as hardly ever or never feeling lonely are amongst those with least social connectedness.
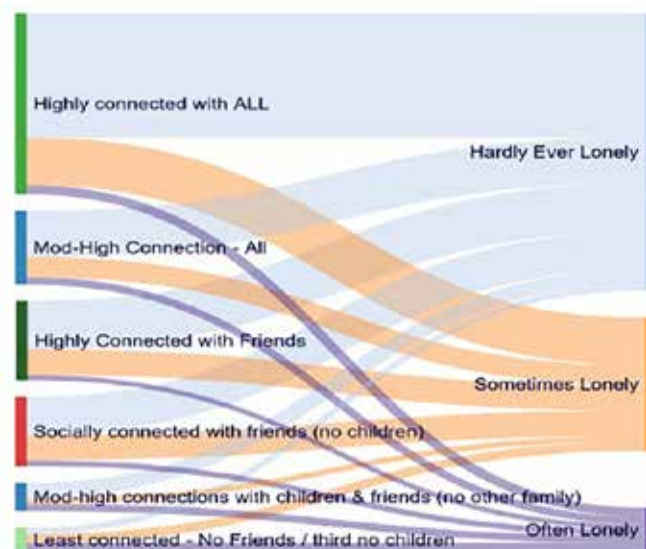

Figure 3. Relationship between social isolation and loneliness

Access to Amenities

HAGIS asks respondents how easy or difficult it is for them to access local amenities and health services using their 'usual form of transport'. Local amenities include bank/cash point, post office, corner shop, supermarket and shopping centre. Health services include GP, dentist and hospital.

The vast majority of the population find it easy to access local amenities and health services. However, this varies significantly between profiles.

Social Isolation

Those who are moderately connected (with children, but not friends) have the greatest difficulty going to the corner shop (19% find this 'very' or 'quite difficult,' while 6% are unable to go). This compares to those with a high degree of social connectedness where just 1% find this either 'very' or 'quite difficult,' and 0% are unable to go.

Similarly, those with moderate connections (those who report children but no friends) have the most difficulty getting to the dentist (29% find it 'very' or 'quite difficult', while 4% are unable to go), in comparison with those who with moderate connections (having children and friends), 91% of whom find it easy.

Importantly, those with moderate social connections (irrespective of whether they report having friends) have the greatest difficulty going to the hospital: 44% find it either 'very' or 'quite difficult,' and 3% are unable to go.

Loneliness

In terms of accessing local amenities, there is a clear gradient in difficulty between those who are Hardly Ever vs Often Lonely to get to the:

- post office (5% Hardly Every vs 13% Often Lonely)
- corner shop (3% Hardly Every vs 13% Often Lonely)
- supermarket (7% Hardly Every vs 13% Often Lonely)

In terms of health services, those who are 'sometimes' and 'often lonely' had greatest difficulty to get to their GP (14% and 11% respectively) in comparison with just 6% of those who are 'hardly ever lonely 6%'.

Those who are 'sometimes lonely' had the greatest difficulty going to the dentist (18%) in comparison with 'hardly ever' (7%) and 'often' (9%).

Getting to hospital was more difficult than getting to a GP or dentist across all profiles. Yet, there was a clear gradient in the difficulty; with 33% of those are 'often lonely', 26% of those who are 'sometimes lonely' and 17% of those who are 'hardly ever lonely' expressed difficulty in getting to hospital.

About HAGIS

Healthy Ageing in Scotland (HAGIS) is a study of people aged 50+ in Scotland. It collects data on their health, economic and social circumstances. It uses this information to help researchers understand the lives of Scotland's older people.

This understanding will help improve the health and wellbeing of Scotland's older people. In its pilot phase, HAGIS interviewed over 1,000 people aged 50 or over in Scotland. The pilot tested a number of innovative aspects of HAGIS and is currently informing developments of the full-scale version of the survey. In particular, the HAGIS pilot successfully managed the processes and systems required to link the survey data with other data that is routinely collected in Scotland in the fields of health, social care, education and benefits.

HAGIS is the first Scottish study to follow older people over time -the intention is to re-interview members of the study at intervals of two years. HAGIS is part of the Health & Retirement study family of longitudinal ageing studies. Together, these studies cover more than half the world's population aged 50+. By bringing them together, it is possible to compare the lives of older Scots with those of older people across Europe, or in the USA or China. Comparisons with other countries provide many opportunities to learn from their policies and practices.

For more information about the HAGIS study, please visit www.hagis.scot.

About this research

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