



## OXFORDSHIRE NEEDS ANALYSIS

# Loneliness and Isolation

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**November 2018**

This report was produced by Oxfordshire Community Foundation using community mapping and reporting tool Local Insight. This tool has been developed by OCSI and makes use of open data to help councils and community organisations make informed funding and policy decisions. It brings in up-to-date data drawn from the Census, the Department for Work and Pensions, deprivation indices and other sources.

*Note that data will change regularly as information is updated on Local Insight. This report was correct at the date of publication.*

**Key to maps:**

20% least  
deprived

20% most  
deprived

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## Introduction

Loneliness and isolation have been found to be a significant health risk and a cause of increased use of health services. Areas rated as “high risk” for loneliness and isolation in Oxfordshire are mainly in urban centres.

For many years OCF has regularly awarded grants, particularly to groups helping older people, to combat loneliness and isolation. This has been supported regularly by Surviving Winter monies. More often than not, these grants have been awarded from our ‘Small and Vital’ programme, with a value of up to £1,500 per grant.

Loneliness and isolation is a featured chapter in OCF’s 2016 research report *Oxfordshire Uncovered*. We highlighted that this social problem is not only felt by the elderly, featuring statistics about rural isolation, loneliness in older people, and loneliness felt by vulnerable minorities, including disabled people and ethnic minorities.

Recent news articles have also highlighted that loneliness is not only felt by the elderly. 55,000 people took part in the [BBC’s Loneliness Experiment in collaboration with Wellcome Collection, the largest survey on loneliness in the world](#). The headline key finding was that 40% of 16 to 24-year-olds who took part said they often or very often feel lonely, compared with 27% of over 75s.

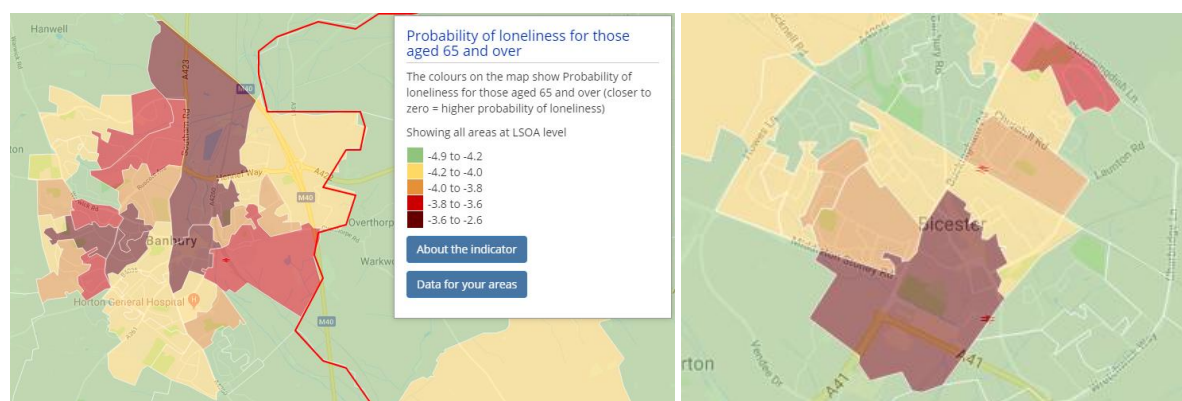
The BBC survey also found that those who feel discriminated against are more likely to feel lonely. This included people who feel discriminated against because of their ethnicity, sexuality or disability.

## Older people

### Loneliness

The maps show the areas with a higher probability of loneliness for those aged 65 and over, in each of Oxfordshire’s districts. The data is from the 2011 Census and the model was devised by Age UK using the English Longitudinal Study of Ageing (ELSA) survey. This prediction has been generated for each person, starting with a base value and then adjusting it based on a number of other variables.

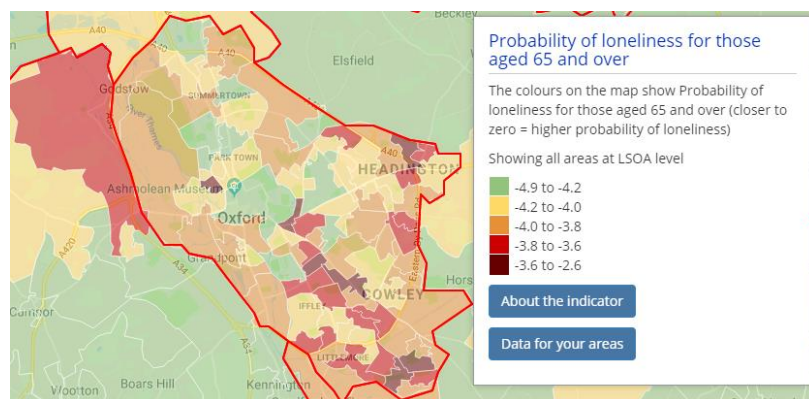
#### Cherwell



In Cherwell the areas with a high probability of loneliness for those aged 65 and over are exclusively in Banbury and Bicester.

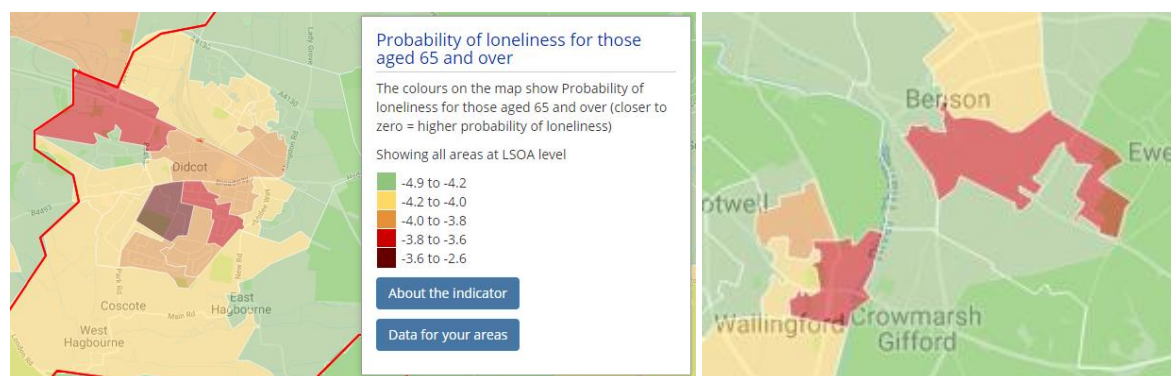


## Oxford City



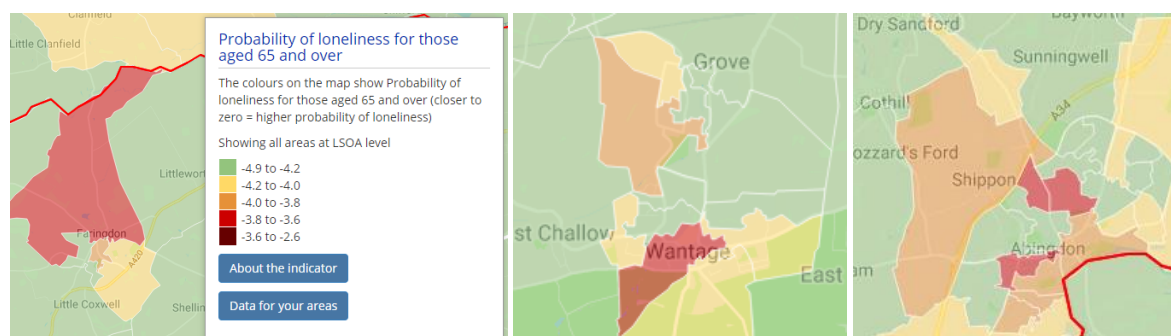
Within Oxford City the areas with greatest probability of loneliness for those aged 65 and over are in the most deprived areas of Blackbird Leys and Barton. There are other areas that show a raised probability in Cowley, Rose Hill, Iffley Fields and Donnington.

## South Oxfordshire



There are few areas in South Oxfordshire with high probability of loneliness for those aged 65 and over. Areas of Didcot, Benson and Wallingford do show a raised probability.

## Vale of White Horse

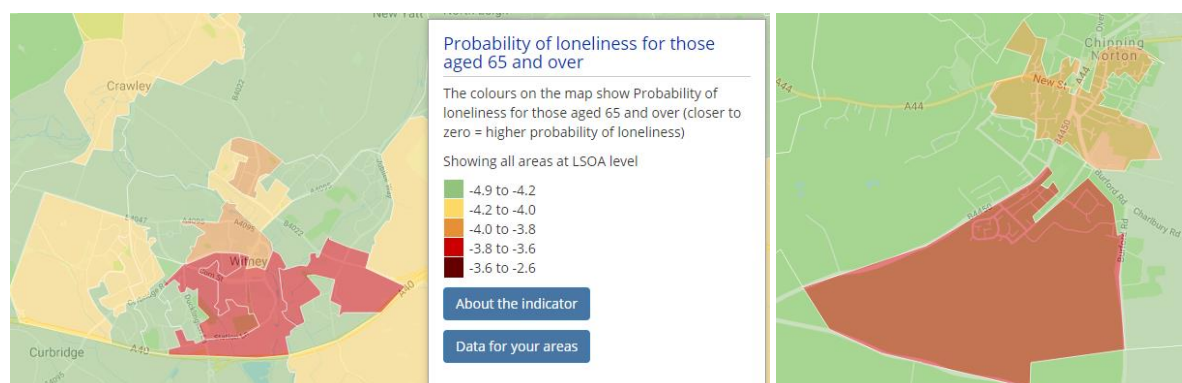


There are only a few pockets in Vale of White Horse where there is a higher probability of loneliness for those aged 65 and over: in Faringdon, Wantage/Grove, and Abingdon.





## West Oxfordshire



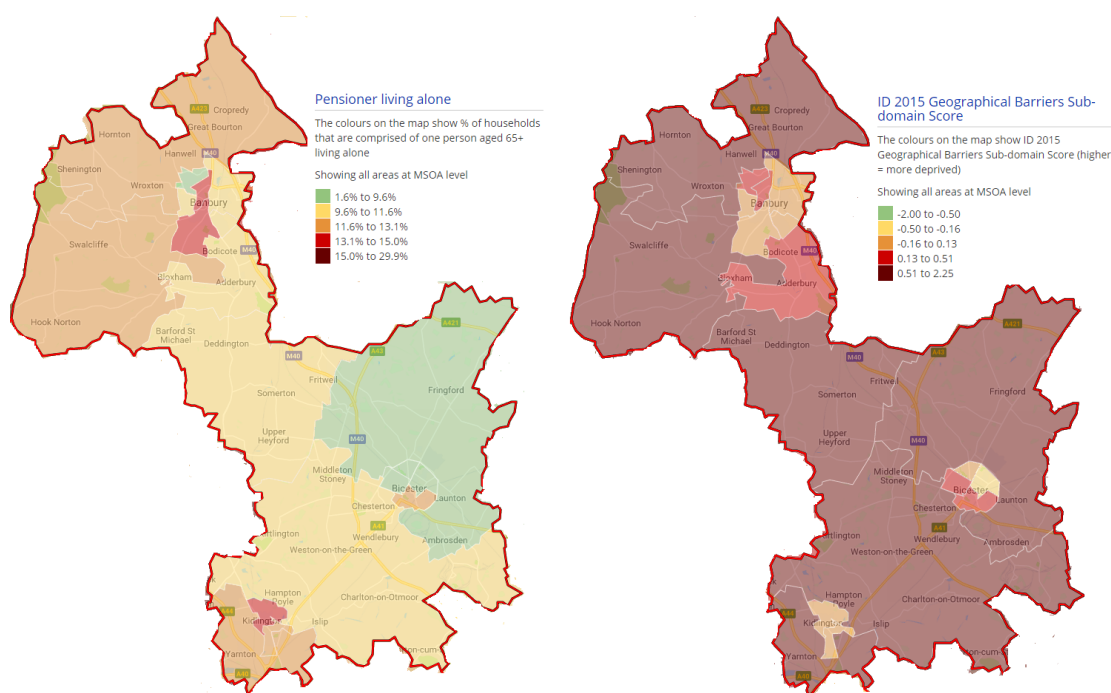
In West Oxfordshire, there are only three areas of Witney and an area south of Chipping Norton where there is a higher probability of loneliness for those aged 65 and over.

## Isolation

As can be seen from the maps above, loneliness is not the same as being alone; most of the areas with higher probability of loneliness are in areas of higher population density.

Loneliness and isolation are not the same thing; however, they are undoubtedly linked. Below we look at the proportion of households where pensioners are living alone, and the Barriers to Housing and Services.

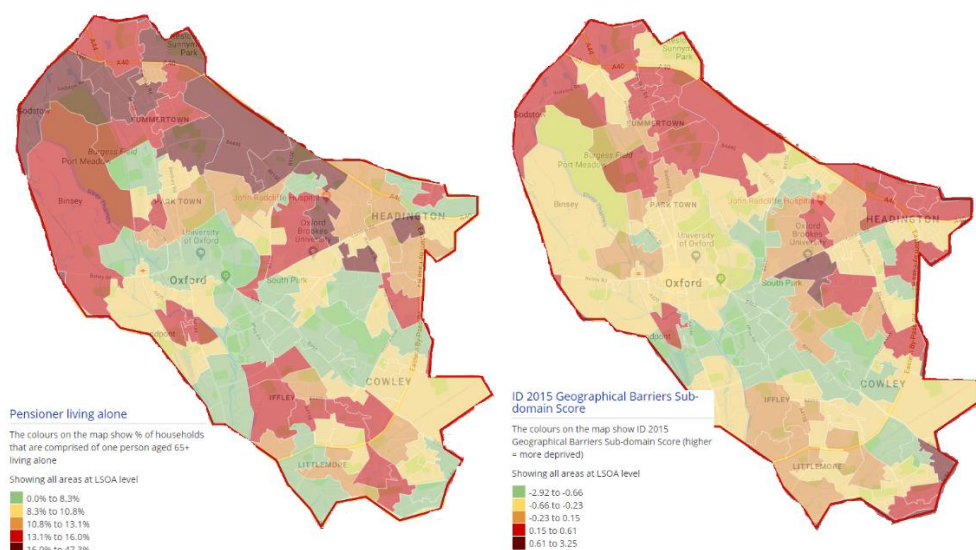
## Cherwell



In most areas of Cherwell there is an average to low proportion of households where a pensioner is living alone. However, in contrast to the likelihood of loneliness explored in the previous section, the areas of greatest deprivation in relation to barriers to services tend to be in the more rural areas.

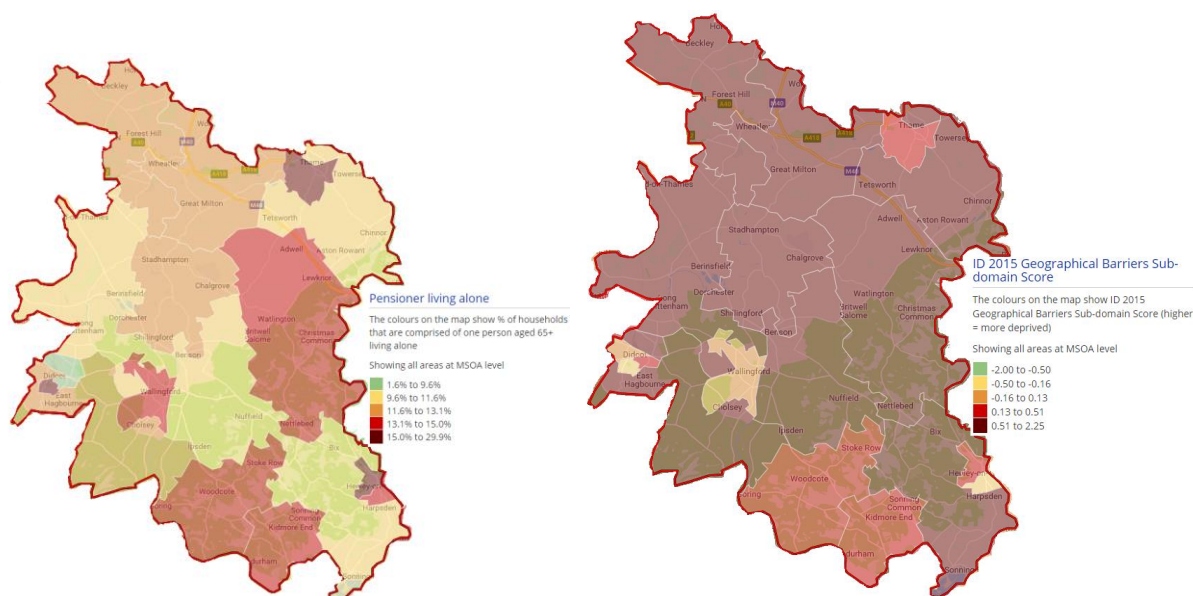


## Oxford City



The areas in Oxford City that show a higher proportion of pensioners living alone, as well as greater barriers to services, are in the north of Oxford. Recent cuts to bus routes would exacerbate this deprivation in Cutteslowe and the surrounding area.

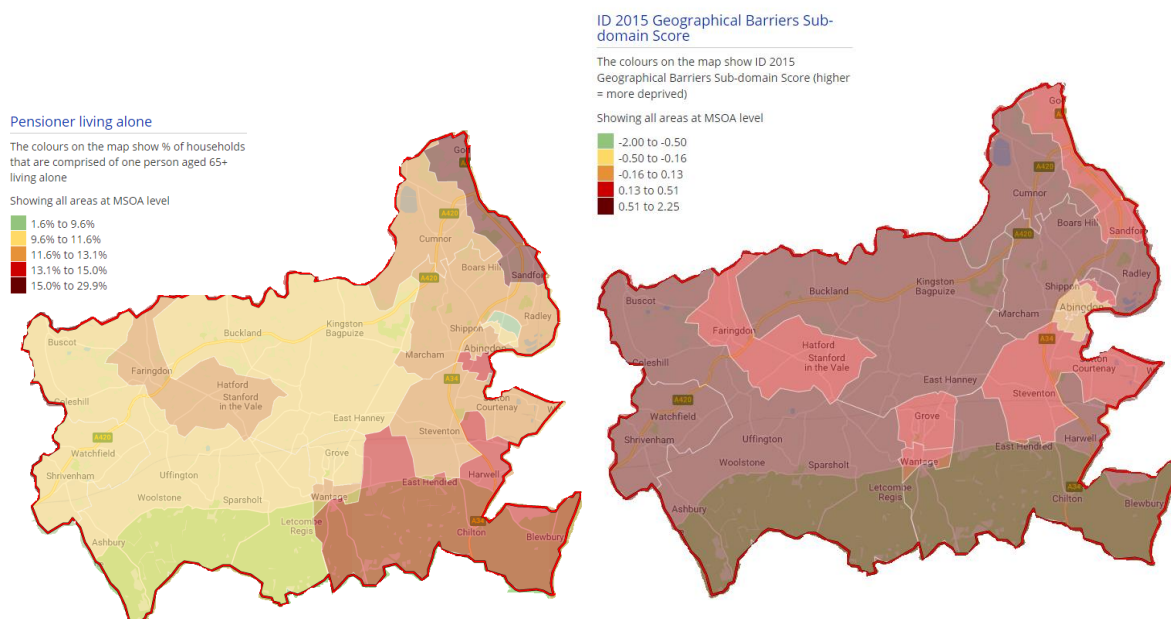
## South Oxfordshire



Generally South Oxfordshire shows a lower proportion of households occupied by a pensioner living alone. However, almost the whole district is deprived in terms of access to services.

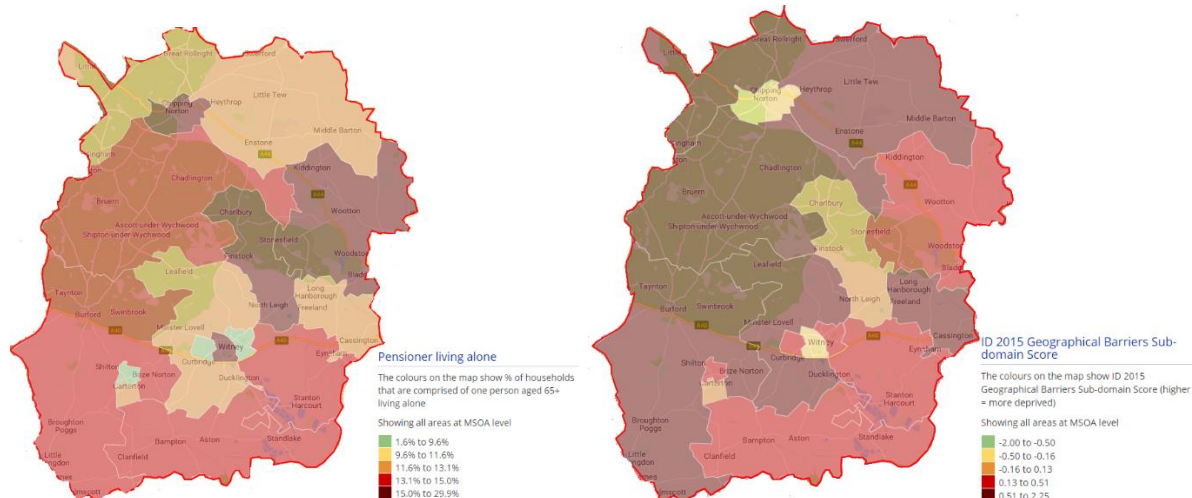


## Vale of White Horse



With Vale of White Horse being a very rural part of the county, we see greater geographical barriers to services. The highest proportion of pensioners living alone is seen in the area bordering Oxford City, and in the south east corner of the district around Chilton.

## West Oxfordshire



Of all the districts, West Oxfordshire shows the greatest number of areas that have both a high proportion of pensioners living alone and geographical barriers to services.

## Recommendation for older people

The probability of loneliness in the older population is highest in the urban areas highlighted within Oxford City, Banbury, Bicester, Didcot, Witney and Abingdon. There is also a higher probability in parts of Faringdon, Wantage/Grove, Benson, Wallingford and Chipping Norton. OCF should concentrate on relieving loneliness in these areas by funding projects such as lunch clubs, day centres, exercise classes, allotments, befriending services, community centre/village hall activities etc.

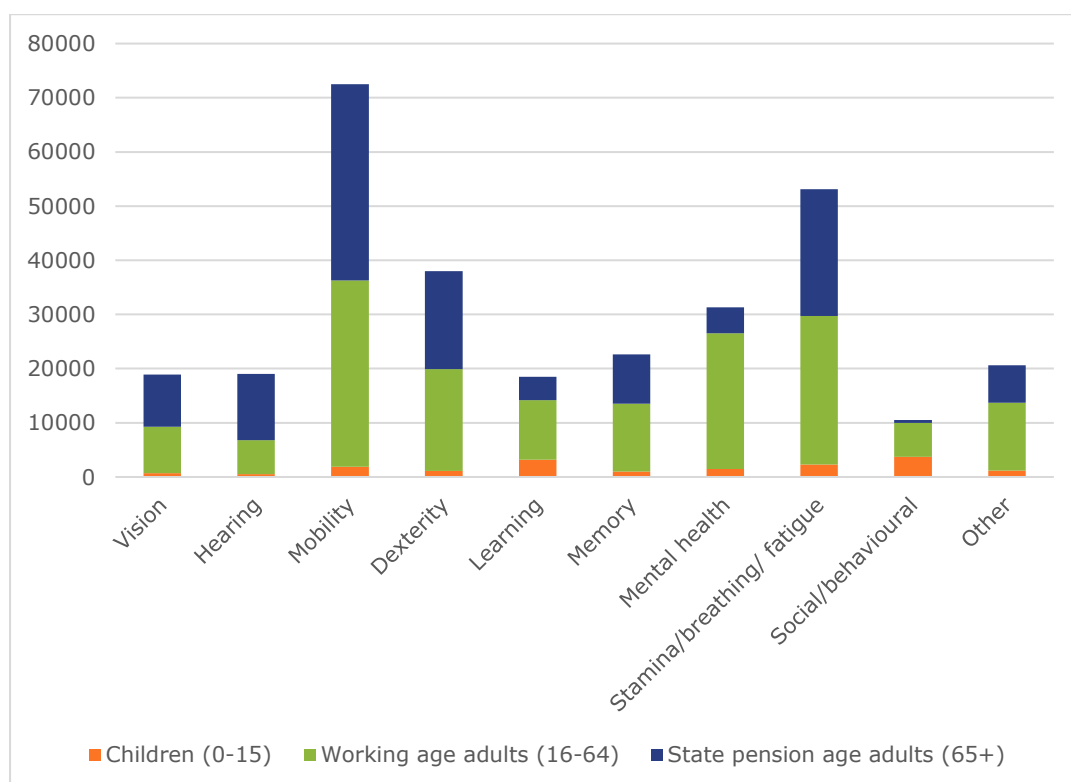


Isolation is more likely to be common in rural areas of the county. Areas with a higher proportion of pensioners living alone and poor access to services are most likely to have a population feeling isolated. Our analysis shows this to be most prevalent across West Oxfordshire and in the north of Oxford City (Cuttleslowe). There are also a few areas of Vale of White Horse, South Oxfordshire and Cherwell that are experiencing some deprivation by these two measures – these shouldn't be ignored. To relieve isolation OCF should fund projects in these areas that either take the services to the beneficiary or take the beneficiary to the service; these could include: community transport schemes, day care centres, volunteer driving schemes, mobile libraries, talking newspapers, community radio etc.

## Vulnerable minorities

### Disabled people

Those with disabilities are a significant minority, and are often susceptible to becoming isolated from the community.



Source: Extrapolation from Family Resources Survey 2014-15 and 2015 mid-year population estimate for Oxfordshire

Note that for the mental health category this method implies 31,300 people with this impairment, which appears to be a significant underestimate. The number of people in the Oxfordshire Clinical Commissioning Group with diagnosed depression (alone – without including other mental health conditions) was around 56,800 in 2016-17.

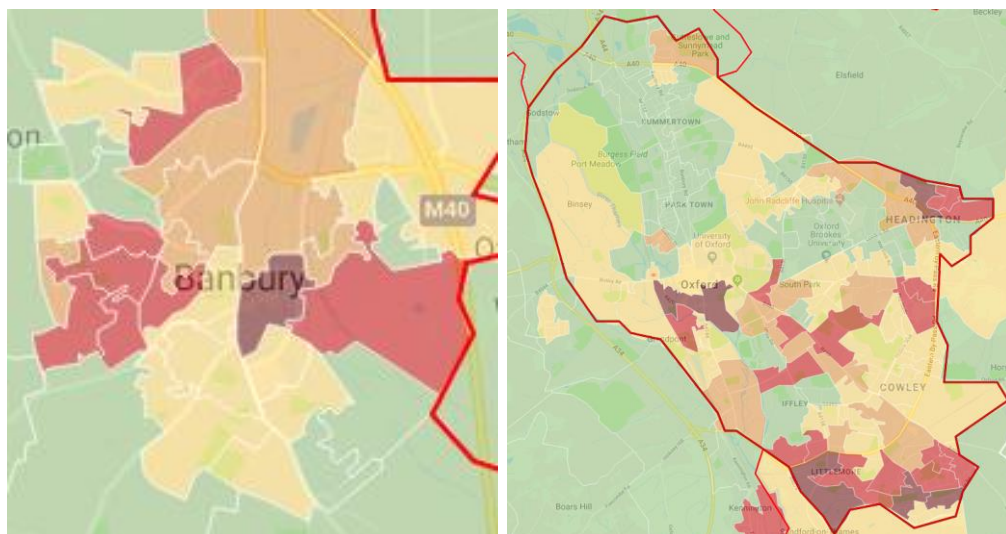
The Indices of Deprivation (ID) 2015 Comparative Illness and Disability Ratio is an indicator of work-limiting morbidity and disability, based on those receiving benefits due to inability to work through ill health.

We've looked at this measure to identify where there are higher number of people living with an impairment. A higher score indicates that an area is experiencing high levels of deprivation. The England average score is 112.8.





Most of the areas in Oxfordshire with a higher level of deprivation than the England average are in Banbury and Oxford City. There are pockets of deprivation slightly higher than the England average in Abingdon, Bicester, Didcot and Witney.



#### Recommendation for people living with disability

OCF should support projects alleviating loneliness and isolation for people living with disabilities in the areas identified above. These may be any project that is designed specifically for people with any impairment, or to include them better. The activity may be social, physical/sporting, arts and culture, etc.

#### Ethnic minorities

As can be seen from the table below, Oxfordshire is not particularly ethnically diverse. The "Non-white" column shows the proportion of people who identify their ethnicity as either Asian or Asian British, mixed ethnicity, Black or Black British, Chinese, or other non-white ethnicity.

| Area                | Non-white | Number    |
|---------------------|-----------|-----------|
| England             | 14.6%     | 7,731,314 |
| Oxfordshire         | 9.1%      | 59,794    |
| Cherwell            | 7.8%      | 11,107    |
| Oxford City         | 22.3%     | 33,949    |
| South Oxfordshire   | 3.9%      | 5,264     |
| Vale of White Horse | 5.1%      | 6,164     |
| West Oxfordshire    | 3.2%      | 3,310     |





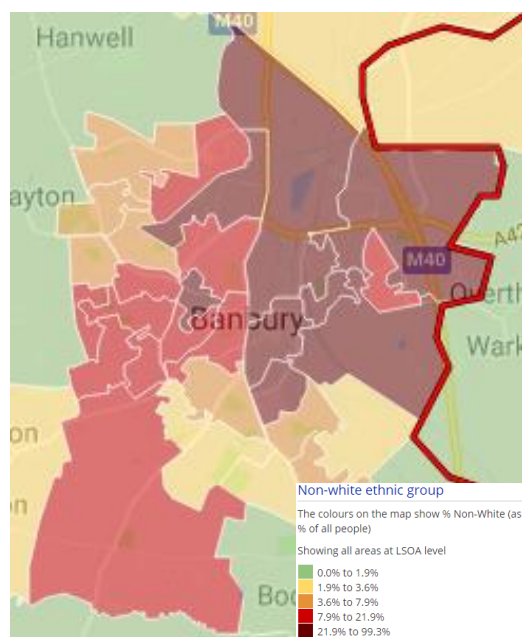
Furthermore, we see a very similar picture when looking at the measure “No-one in the household has English as a main language”. This is an important measure, as the lack of ability to converse in English can be a big contributing factor to loneliness and isolation.

| Area                | No-one in household has English as a main language | Number  |
|---------------------|--|---------|
| England             | 4.4%   | 980,303 |
| Oxfordshire         | 3.6%   | 9,310   |
| Cherwell            | 2.9%   | 1,670   |
| Oxford City         | 9.1%   | 5,029   |
| South Oxfordshire   | 1.7%   | 913     |
| Vale of White Horse | 2.2%   | 1,097   |
| West Oxfordshire    | 1.4%   | 601     |

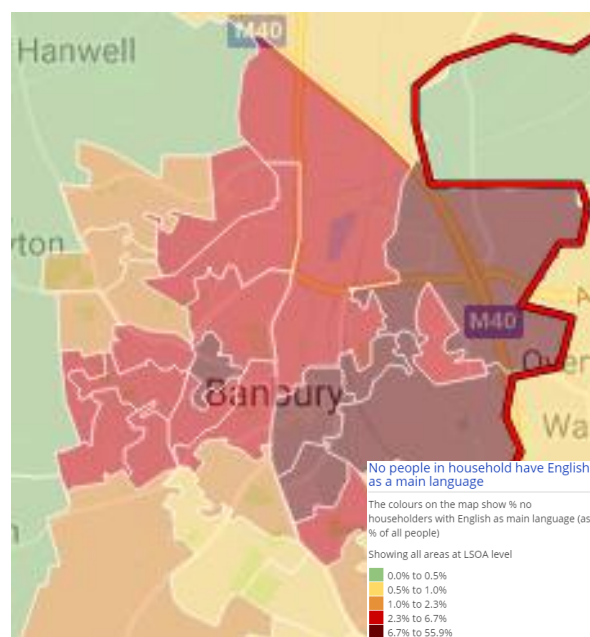
By both these measures, it is only Oxford City that has a higher rate than the England average. When looking at smaller areas (LSOA) there are some areas that are in the top quintile (dark red) in both measures.

### Cherwell

In Cherwell the only areas that display as dark red by both metrics are in Banbury. There are also some areas of Bicester that show relatively high proportions by both metrics.

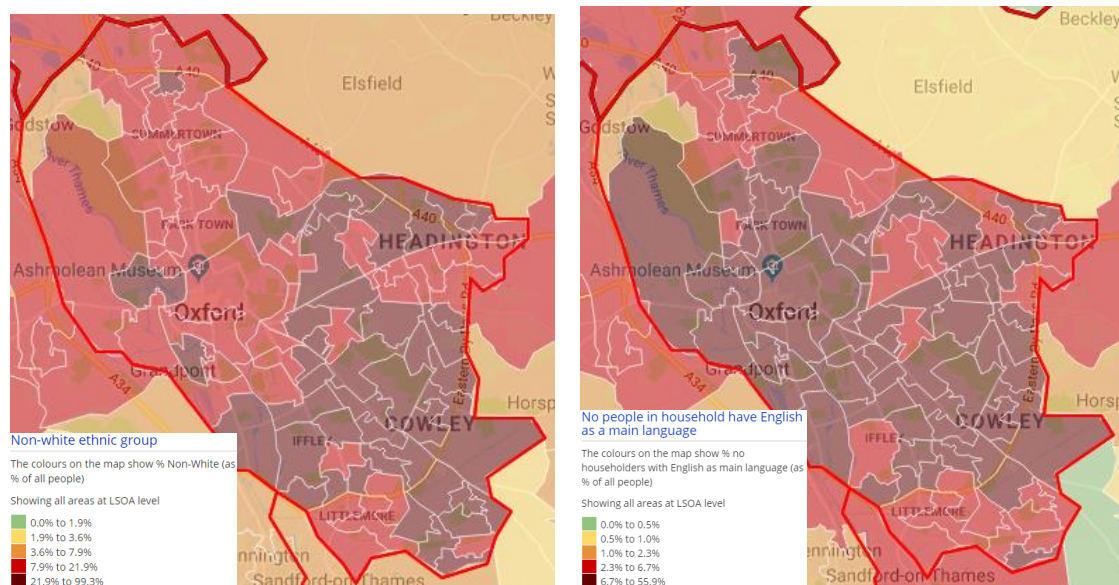


Non-white ethnic



No-one in household has English as main language

## Oxford City



*Non-white ethnic*

*No-one in household has English as a main language*

Other areas of Oxfordshire that show quite high proportions of non-white ethnicity and households without English as a main language include areas of Abingdon, Berinsfield, Carterton, and Didcot.

### Recommendation for people from ethnic minorities

OCF should focus its funding in the areas highlighted above. Projects could involve any activity to help ethnic minorities feel a greater part of the Oxfordshire community; these may be social, sporting, or cultural. Projects that focus on language skills would also be welcome.

## Sexual orientation and gender identity

National research has been conducted with adult social care users who are lesbian, gay, bisexual and transgender (LGBTQ+), and their carers. This suggests that these groups may have distinct needs, for example they may be more at risk of social isolation and loneliness; and they may face distinct issues, including discrimination. However, the data on sexual orientation and gender identity amongst people using adult social care is currently limited.

OCF should fund projects that may combat loneliness or isolation in people from the LGBTQ+ community.

## Younger population

As was highlighted in the BBC report, loneliness can be rife in the younger population aged 16-25 years. The report noted how people who feel lonely have more online-only friends. People who report high levels of loneliness don't use social media any more often than other people, but they use it differently. For example, they have more Facebook friends who they are only friends with online, and who don't overlap with their real-life friends.

In Oxfordshire we have seen a rise in many mental health conditions in the young. Not all of these can be attributed to loneliness, but it is highly likely that loneliness or a sense of isolation contributes to these rises.



## **Increase in rates of anxiety and depression, above-average self-harm and suicides of young people**

The Oxfordshire Joint Strategic Needs Assessment points out:

- In Oxfordshire, the average wellbeing scores for life satisfaction, “things you do are worthwhile”, and happiness, were slightly lower in 2016–17 compared with 2015–16. In 16–17 the anxiety mean is higher.
- The number and rate of GP-registered patients in Oxfordshire with depression or anxiety has increased significantly each year for the past four years.
- The percentage of GP-registered patients with a recorded diagnosis of a severe and enduring mental health problem has increased in all districts. The rate in Oxford City remains well above the average for NHS Oxfordshire CCG.
- Rates of intentional self-harm in Oxfordshire are now statistically above the England average.
- There were 15 wards in Oxfordshire with a significantly higher admission ratio for intentional self-harm than England.
- There were 23 suicides of people aged under 25 in the Oxfordshire Clinical Commissioning Group area in 2014–16. The OCCG rate was statistically above the England average.

## **Recommendation for Oxfordshire’s younger population**

OCF should look to fund projects that encourage or enable more social interaction for younger people. We should also support projects that help with mental health problems that may be the cause or effect of loneliness and isolation felt by young people.

## **Conclusion**

This report lists the types of audience that would most benefit from charitable interventions or preventative work to combat loneliness and isolation, as well as the areas of Oxfordshire where the most people are likely to be affected. It also makes recommendations for each of these for the types of work OCF would like to fund.

In summary, these are:

- Older people in areas where there is evidence they are likely to experience loneliness
- Older people who are living alone or have barriers to services
- People living with disabilities in Oxford or Banbury
- Ethnic minorities in Oxford or Banbury, especially where no-one in the household speaks English
- People from the LGBTQ+ community
- Young people suffering from mental health problems, especially self-harm

Grant applicants are encouraged to make use of the data in this report in order to make the case for funding from OCF and other grant-making organisations.



## Appendix: Data sources (via Local Insight)

### Probability of loneliness for those aged 65 and over

Shows a prediction of the prevalence of loneliness amongst usual residents, living in households, aged 65 and over. The data is from the 2011 Census and the model was devised by Age UK of the Wave 5 (June 2010 – July 2012) using the English Longitudinal Study of Ageing (ELSA) survey. This prediction has been generated for each person; this starts with a base value, which is then adjusted based on a number of other variables. The result is a final prediction value for each person. This table shows these results as averages for each geographical area. Areas with a value closer to 0 predict a greater prevalence of loneliness amongst those aged 65 and over and living in households compared to areas with a value further away from 0. This prediction value has been generated as follows: Base value is -4.54969. If aged 75 to 79 then deduct 0.3141. If marital status is Widowed or a surviving partner from a same-sex civil partnership then add 1.0833. If marital status is divorced, a dissolved same-sex civil partnership or separated then add 0.5408. If they do not live alone then deduct 0.968. If their general health is bad or very bad then add 2.317. If their general health is fair then add 1.7688. The prediction values as described have not been designed by ONS, they are based on analysis by Age UK of the Wave 5 (June 2010–July 2012) of the English Longitudinal Study of Ageing (ELSA) survey. ONS have applied these values to the 2011 Census data. CT0467 – Log odds of loneliness for those aged 65 and over <https://goo.gl/mphstT> (published January 2016).

#### Source: Age UK

(<https://www.ageuk.org.uk/our-impact/policy-research/loneliness-maps/>)

### Pensioner living alone

Shows the proportion of households that are comprised of one person aged 65+ living alone. Figures are self-reported and taken from the household composition questions in the 2011 census. Rate calculated as = (One person household: Aged 65 and over (census KS105))/(All households (census KS105))\*100. Date: 2011 (published July 2014)

Source: Census 2011 (<https://www.nomisweb.co.uk/census/2011/ks105ew>)

### ID 2015 Geographical Barriers Sub-domain Score

The Indices of Deprivation (ID) 2015 Geographical Barriers sub-domain measures the physical accessibility and proximity of local services. The following indicators are included: road distance to a post office (a measure of the mean distance to the closest post office for people living in the Lower-layer Super Output Area); road distance to a primary school (measure of the mean distance to the closest primary school for people living in the Lower-layer Super Output Area); road distance to a general store or supermarket (a measure of the mean distance to the closest supermarket or general store for people living in the Lower-layer Super Output Area); road distance to a GP surgery (a measure of the mean distance to the closest GP surgery for people living in the Lower-layer Super Output Area). A higher score indicates that an area is experiencing high levels of deprivation. Date updated: September 2015

#### Source: Communities and Local Government (CLG)

(<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015>)

### Family Resources Survey

The Family Resources Survey (FRS) is a continuous household survey which collects information on a representative sample of private households in the United Kingdom. Detailed information is recorded on respondents' income from all sources; housing tenure; caring needs and responsibilities; disability; expenditure on housing; education; pension scheme participation; childcare; family circumstances; child maintenance. This report summarises key findings from the FRS for the 2015/16 financial year when over 19,000 households were interviewed.

#### Source: Department for Work and Pensions

([https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/600465/family-resources-survey-2015-16.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/600465/family-resources-survey-2015-16.pdf))





### ID 2015 Health Deprivation and Disability Score

The Indices of Deprivation (ID) 2015 Health Deprivation and Disability Domain measures the risk of premature death and the impairment of quality of life through poor physical or mental health. The domain measures morbidity, disability and premature mortality, but not aspects of behaviour or environment that may be predictive of future health deprivation. The following indicators are included: years of potential life lost (an age and sex standardised measure of premature death); comparative illness and disability ratio (an age and sex standardised morbidity/disability ratio); acute morbidity (an age and sex standardised rate of emergency admission to hospital); mood and anxiety disorders (a composite based on the rate of adults suffering from mood and anxiety disorders, hospital episodes data, suicide mortality data and health benefits data). A higher score indicates that an area is experiencing high levels of deprivation. Date updated: September 2015

**Source: Communities and Local Government (CLG)**

(<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015>)

### Joint Strategic Needs Assessment Annual Report 2018

The Oxfordshire Joint Strategic Needs Assessment is produced to help inform the work of Oxfordshire's Health and Wellbeing Board. It underpins the Oxfordshire Health and Wellbeing Strategy. Information, data and intelligence is included from a wide range of sources that cover the health and wellbeing of the population in its broadest terms.

**Source: Oxfordshire County Council**

(<https://insight.oxfordshire.gov.uk/cms/system/files/documents/JSNA%202018%20FINAL%20Apr18%20FULL.pdf>)

