



VOX SCOTLAND consultation response to;

A Connected Scotland: Tackling social isolation and loneliness and building stronger social connections.

Building social connections and addressing loneliness are central to improving the quality of life for all, reducing the likelihood of developing mental ill health, and supporting recovery. VOX believes we must address the loneliness epidemic, and that society and services must see building social connections, reaching out to people, and supporting those most at risk as a key aspect of improving mental health.

Who we are

VOX is a national mental health service user/ lived experience led organization based within Scotland which aims to give a voice to people with experience of mental health conditions (past or present). VOX has both group and individual membership. We aim to drive policy and practice, facilitate partnership working and strengthen the voice of people who have experienced mental ill health.

We aim to do this by using a range of innovative and accessible consultation methods to involve our members.

Why are we Responding?

VOX Members welcome the Scottish Governments commitment to develop a national strategy to tackle loneliness and isolation as they feel that there has not been enough emphasis on its wide ranging negative impact on people.

VOX members recognise the negative effect that loneliness and isolation can have on everyone's mental and physical health. We have highlighted both issues at a number of member led events and consultations in the past.

We are aware that work across a range of policy areas is required to pull together a coordinated approach.

What we did

We reviewed a range of themes which have arisen from existing reports (that were co-produced with our members) and from previously conducted workshops and focus groups.

Here are links to two of the previous reports;

One focused on the effects of spending cuts
<http://voxscotland.org.uk/wp-content/uploads/2015/01/Real-People-deeper-cuts.pdf>

One focusing on peoples experiences in remote and rural areas
<http://voxscotland.org.uk/wp-content/uploads/2015/01/Report-remote-and-rural-May-2015.pdf>

Key Issues

What our members feel should be done... VOX members feel the following are ways to enhance social connections and reduce a sense of loneliness.

- There has been a decline in places where individuals with complex mental ill health can attend and experience a sense of belonging (e.g. drop-in centres/ day centres) run by local authorities which supported many people to come together.

Whilst VOX fully supports social integration and see that it is absolutely crucial to enable social connectedness, we are aware that at the start of a recovery journey people need to be to feel accepted and understood, and that others can relate to how they feel (informal peer support). Re-investment in this aspect of care is required in order to enable people to become more socially integrated further along their recovery journey.

Below is a lived experience example of this;

“ I’ve gone from someone who lived/worked full time despite an underlying mental health condition, to someone unable to work, unable to access health care (refused) or community support (When I have tried I’m told I am too unwell and need health care first) reliant on social care. The social care I’m allocated is unable to meet my needs. The Service I have found helpful is closing due to council cuts. I can’t see any hope at all; I’ve tried to keep going despite deteriorating health, but the removal of hope by both health care, social care cuts, benefit freezes leave me just functioning in survival mode and [I am] looking forward to the morning when I don’t wake up and don’t have to suffer anymore.”

(See VOX Spending Cuts report)

- Peer Support and other mechanisms for bringing people together should be expanded. Members feel that sharing with others who have some understanding of what it is like to experience mental ill health either in a group setting, or one to one helps them to feel less lonely and has been shown to enhance social networks.

“People using peer provided services are more likely to be involved in community activity and have better social networks than those without peer support”

(Peer support roles in mental health)

- Mental Health Services and local authorities should be designing services and supports to enhance social connections. We have huge concerns that whilst Self Directed Support is underpinned by good principles, it is failing those with mental ill health.
- People in remote and rural or outside the city centre areas find it difficult to link in with people as more and more interaction opportunities such as chatting to people at the Post office, local bank branch, supermarket to name but a few, are closing and moving services online. There needs to be an approach that values face to face contact and not just electronic contact.

While people welcomed the use of free bus passes as a way to encourage them to socialise and travel to see family etc. there are issues with the varied public transport services and routes that are either too infrequent or patchy at best.

(See VOX remote and rural report)

- Work and Volunteering: People should have opportunities to have flexible working, engage in meaningful activities, and should have continued opportunities to be involved in their community.
- For many people Volunteering is a key support for their mental wellbeing and social contact however they can be put off due to fear of being deemed fit for work or having their benefits re-assessed. It is important that both national and local government are promoting volunteering not just as a stepping stone to employment but of having excellent wellbeing value that does not have to lead to a more formal work arrangement.
- Spending cuts: Spending cuts and welfare reform has had a devastating effect on disabled people and people with mental health conditions. Our survey and focus groups on spending cuts found that almost half 50% of all respondents had seen a reduction in access to social/cultural and leisure services due to closures, reduction in opening times and or need to travel further to access them. And over 26% of people did not access any Social/cultural or leisure services at all.

A negative or strong negative impact on people's mental health and recovery was felt by over 76% of people as a direct result of changes to services due to spending reviews. And over 82% felt a negative or strong impact on their social networks. (See VOX Spending Cuts report)

- Members feel anti stigma/discrimination campaigns are necessary as they make it easier for people with mental ill health to open up about their mental health (which may help reduce a sense of loneliness).

The national anti-stigma campaign See Me found that 48% of people think that fear of losing their job would make someone unlikely to disclose their mental health condition

The employment rate of disabled people in 2015 was 45.6% compared to 79.4% for those not classified as disabled, excluding those who did not state their health situation.

Reviews have highlighted that schemes such as access to work are limited in their impact for those with mental health conditions. (Sayce, L 2011)

In 2015/16 28.8% of 16-18 year olds with mental health conditions were not in employment, education or training compared with 6.9% of non-disabled people.

We need to develop a society where social connections become a priority.

References

- Peer support roles in mental health services
<https://www.iriss.org.uk/resources/insights/peer-support-roles-mental-health-services>
- Real People Deeper cuts VOX
<http://voxscotland.org.uk/wp-content/uploads/2015/01/Real-People-deeper-cuts.pdf>
- Remote and Rural report VOX
<http://voxscotland.org.uk/wp-content/uploads/2015/01/Report-remote-and-rural-May-2015.pdf>
- See Me, 2015 You Gov poll.
- Sayce, L (2011), 'getting in, staying in and getting on: Disability employment support fit for the future'. Department of work and pensions.