

Report of: Lucy Jackson Consultant in Public Health

Report to: Inner North East Community Committee, Chapel Allerton Ward, Moortown Ward, Roundhay Ward

**Report author: Liz Bailey, Health and Wellbeing Improvement Manager, ENE Area
Contact 0113-3367641 or 07891273837**

Date: 19th January 2015

For information and to note

Key issues around Mental Health and Social Isolation

Purpose of report

1. To bring key health and wellbeing issues to the attention of the Inner North East Community Committee.
2. Improving health and wellbeing is one of the 4 commitments in the Leeds Joint Health and Wellbeing Strategy. The Mental Health Framework for Leeds was agreed across Leeds City Council, the 3 Clinical Commissioning Groups, Leeds and York Partnership Trust and Volition, earlier this year. One of its key areas is to focus on keeping people well-to build resilience and self- management.
3. To explore the issues of mental health in relation to social isolation and generate further ideas and activity that can help improve community mental health and experience of services.

Main issues

4. Mental health and social isolation needs to be set within the context of overall health and wellbeing, because poor health can restrict day to day life, independence and wider wellbeing. In the case of Inner North East Leeds the picture around reported health and wellbeing is mixed, when compared to other Community Committees in Leeds.

What people think-Self reported health

5. In terms of general health, more people say they are in better health than those in Leeds as a whole. 52% of people in Roundhay Ward say they are in very good health, compared to 51% in Moortown Ward and 49% in Chapel Allerton Ward. This is compared to 40% in Leeds as a whole. Only in Chapel Allerton ward are there more, who feel they are in very bad health (1.6%), compared to 1.2% citywide.

Dying early

6. "Individuals who are socially isolated are between two and five times more likely than those who have strong social ties to die prematurely. Social networks have a larger impact on the risk of mortality than on the risk of developing disease, that is, it is not so much that social networks stop you from getting ill, but that they help you to recover when you do get ill." (Marmot (2010) Fair Society Healthy Lives Final Report).
7. There are two neighbourhoods in Inner North East, *Meanwood 6 Estates and Chapeltown, where people have poorer health, including mental health and die earlier. From 2010-2012, there were 131 per 100,000 people dying early (under 75yrs) from cancer in Meanwood 6 Estates, compared to 113 per 100,000 people in Leeds generally. Deaths from circulatory disease were also higher than Leeds as a whole, during this period.
8. In Chapeltown, life expectancy at birth is 78 years, which is lower than the 81years for the rest of Leeds. Deaths from circulatory disease for people under 75yrs is higher at 127 per 100,000 people, than the Leeds rate (67 per 100,000 people) and Leeds deprived rate (111 per 100,000 people). Deaths from circulatory disease for men under 75yrs is twice as high as Leeds and above deprived Leeds and women's under 75yrs cancer rates are also above the Leeds rate.

Living with ill health

9. In Meanwood 6 estates, GP recorded smoking, coronary heart disease and Chronic Obstructive Pulmonary Disease (COPD) are above the Leeds rate as a whole. Recorded diabetes is also higher than the Leeds rate and only slightly below Leeds deprived.
10. In Chapeltown, GP recorded cases of diabetes are 7,579 per 100,000 people, being higher than Leeds as a whole and the 5,670 per 100,000 people in deprived Leeds. However, GP recorded coronary heart disease (CHD) is lower than both Leeds and Leeds deprived. Considering the correspondingly high death rates from CHD in this neighbourhood, it may reflect less awareness and reporting of symptoms, both of diabetes and heart disease.

Factors that influence our health

11. Chapeltown and Meanwood 6 Estates are amongst the least wealthy MSOAs in Leeds. Taken on a series of measures, this means fewer people in work, lower educational attainment for children and lower income levels for adults and fewer people in stable housing. This results in a cycle of poverty, deprivation and inequity, all of which lead to poor physical and mental health experience for many of our community members, compared to the rest of Leeds (Leeds Mental Health Framework 2014-17).
12. Mental ill health and social isolation have been identified as key issues in the Inner North East area. These issues can be strongly connected, often developing as a result of layers of disadvantage, but disadvantage can also be created by mental ill health and social exclusion. For instance, families supported through the Troubled Families programme, face on average nine different serious problems, with 71% of those concerned suffering from poor health and 46% having a mental health condition.
13. Poor mental health affects the likelihood of gaining and keeping employment. In Chapeltown, in the first quarter of 2014, 165 people had been claiming Employment Support Allowance for between 1 year and up to 2 years. 255 people (49% of the proportion of all ESA claimants in the area) had mental health issues.
14. In Meanwood 6 Estates, 130 people had been claiming ESA between 1 and 2 years and 210 people (52% of the proportion of all ESA claimants in the area) had mental health issues.
15. Being in work has positive effects on self-esteem. It is a highly valued activity, producing many more outcomes than those of financial reward, including security of housing and sufficient money to live, which in turn enables an individual/ family to eat healthily and take part in mainstream social activities, all of which protect and promote mental health and wellbeing.
16. However, poor mental ill health is often identified as a reason for tenancy breakdown, which then impacts on security of income. Gaining and keeping employment is more difficult for people who do not have settled accommodation.

Social isolation

17. All of these factors, which are commonly experienced by people in disadvantaged communities, can individually, or collectively lead to people becoming cut off from others, not leaving their house unless absolutely necessary, not seeking company, or joining groups and then becoming socially isolated. Social isolation can be defined as:

“The virtual absence of interaction with others, outside of that required to perform basic life functions, such as food shopping, transportation, work and entertainment. Social isolation is common in the disabled, divorced and elderly,

as well as in those with mental disorders and alcoholism, and is a risk factor for both suicide and deaths from all cause". (Segan's Medical Dictionary 2012).

18. Joseph Rowntree found that social isolation often takes us by surprise, or can follow naturally in the wake of one of life's transitions, for instance bereavement, redundancy, illness, or some other change of circumstance, such as moving house, starting school or university.

Key groups at risk of social isolation

Older People

19. Leeds City Council has agreed that 'Making Leeds the Best City to grow old in' is one of its key ambitions. Older people tend to be thought of as most at risk of social isolation, and it is estimated that around 15% of older people can be described as lonely, or socially isolated, due to factors including fear, living alone, retirement, personal and financial circumstances, the digital divide and ill-equipped outdoor spaces.
20. Added to this, there is possibility of disability, dementia, physical or mental ill-health and caring, or coping with the social and emotional void after loss of a partner, friend or role and struggling to emerge from those shadows. They may also have specific cultural needs relating to ethnicity, faith or sexuality.
21. Taken from the 2011 Census Older People's Thematic analysis, the Inner North East area of Leeds has 13,015 (18.9%) people who are 60 years old and over, which is slightly lower compared to the rest of Leeds, 149,776 (19.9%). Although the Inner North East may have a lower percentage of older adults, their needs should still be considered. A key summary of their health characteristics are detailed below:
- 3,523 (11.4%) homes are pensioners living alone
 - 6,563 people over 65 years old describe their health 'Bad or very bad and not good health'
 - 10,384 people over 65 years old 'live with a limiting long term-health problem or disability'
 - 2,602 pensioner households have no access to a 'car or van'
 - 3,270 people over 60 years old 'economically inactive' (retired, long term sick, student, look after home or person, other)
 - 76.1% of pensioners living alone are resident in tenure, which has 2 or more bedrooms
22. A number of work streams have focused on reducing social isolation in older people and most recently Leeds has been successful in gaining a £6 million Big Lottery grant to deliver the 'Time to Shine' Project. This funding will be spent over six years on measures to tackle issues of loneliness and isolation amongst older people, to ensure that they have meaningful opportunities for social contact, which offer them pleasure and purpose in life.

23. Across Inner North East, LCC Public Health and Housing Advisory Panels are funding distribution of 400 Winter Warmth packs to vulnerable (mainly, but not exclusively older people). This work aims to identify, engage and link up those who are not currently connected to community activity, using Neighbourhood Networks and the wider voluntary and community sector organisations

Men

24. Males aged 35-60yrs have also been identified as being particularly vulnerable to suicide, if not in employment, living alone, having a history of alcohol or drug misuse and/or having a history of mental health problems. Being dis-connected with the local community, neighbour's hostility, and feeling other's lack of respect for property and the community, were also seen as particular issues by those at risk. (Insight Report into Preventing Male Suicide in LS12, 2014).

25. A number of Third Sector organisations, who work with men, are currently contracted by LCC Public Health. Zest Health for Life is working in Meanwood and has run initiatives such as 'Giz a job'. Leeds Irish Health and Homes is working with Irish men and Oblong has been contracted to deliver two 'Headspace' courses in Inner North East, which are open to men. The first, in Chapeltown has been completed and reported excellent outcomes, including one return to work after stress related absence, one new job secured, lifestyle change, course take up and volunteering, for skills development .

Other socially isolated groups

26. In Inner North East Leeds, other groups have also been identified as vulnerable to social isolation, including young people (especially young gay people), LGBT individuals, migrants and BME females (especially of Pakistani and Bangladeshi origin) and it is well recognized that physically and learning disabled people are also likely to be socially isolated. Examples of the potential complexity of issues adding to the social isolation of some of these groups are given below.

- **Young gay people-** LGBT youth often face issues of bullying and social isolation. This isolation reaches all areas of life, from the possibility of homelessness when coming out to family members, to a higher rate of mental health issues due to homophobia, and the inability to freely express oneself.
- **BME females-** For BME women suffering from domestic violence, especially from Asian Sub-Continent and parts of Africa, the lack of knowledge of their rights, restrict them of their personal freedom outside the family home. In addition, they lack English language skills and this possibly is the greatest contributory factor to social isolation.

Recommendations

27. The recommendations in this report are that actions coming out of discussions should support a number of Leeds City Council Priorities contained in the Leeds Joint Health and Wellbeing Strategy 2013-2015, namely:

- Improving people's mental health & wellbeing
- Increasing the number of people supported to live safely in their own home
- Ensuring more people recover from ill health
- Ensuring more people cope better with their conditions
- Supporting more people back into work and healthy employment

28. This paper sets the context for the workshop session, which is focused on understanding the community and partner perspective on mental health and social isolation issues in the Inner North East community.

***NB. Meanwood 6 Estates is a defined geographical area covering the neighbourhoods of Beckhill, Miles Hill,, Potternewton, Scott Hall Farm Hill and Sugarwells. This geography has been used for analysis purposes, but it is understood that Stonegates, which is not included in this geography, has similar issues which will be dealt with similarly.**