**Children 1st response to Scottish Government consultation on tackling social isolation and loneliness and building stronger social connections**

*April 2018*

Children 1st is Scotland’s national children’s charity. We have over 130 years of experience of working alongside families to provide relationship- based support when they need it and to help children and families to recover from the trauma associated with childhood adversity. We focus our work on three main areas: prevention, protection and recovery from trauma.

We welcome the opportunity to provide comments relating to social isolation and loneliness, recognising the Government’s commitment to considering how to help families and communities feel more connected. We agree that the focus of this work should be on preventing people from feeling lonely and isolated in the first place, where possible, and to encourage the development of compassionate, kind and welcoming communities.

Our consultation response focuses on our experience and understanding of the impact of social isolation and loneliness based on the stories and views of the children and families we work alongside. Most of the families that we work alongside are, or have been, impacted by social isolation and loneliness at some point in their journey and we see daily the importance and impact that strong relationships and social connections can have on family life and mental and emotional health. At Children 1st we believe that most of the problems we encounter are relational—and most of the solutions are in relationships. Strong relationships are often the single most important part of preventing inter-generational cycles of trauma from repeating themselves and ensuring people feel loved, supported and part of a community.

This is complex and challenging issue. There is not one simple answer to helping people and communities to feel more connected and less alone—and this is made clear in the consultation paper. However, the value of focusing on these issues and considering them within the context of intergenerational trauma and systemic inequalities cannot be underestimated. Research and experience has demonstrated time and time again the impact that one strong, supportive relationship can have on a child—or indeed an adult—‘s life. Especially in the first few years of a child’s life strong connections and attachments can determine outcomes for many years to come. Working hard to ensure our children feel safe and connected by investing in trauma- informed support for families and communities can often prevent problems from escalating in the future.

Children 1st is proud that our consultation response is accompanied by a response written by a group of women that we work alongside in Edinburgh. This extraordinary group of women have lived experience of trauma and challenge and wanted to take the opportunity to share, in their own words, the way that social isolation and loneliness impacts on their lives. Their response is attached to our organisational consultation response as an Annex. The group would be very happy to have further conversations with the Scottish Government to discuss their response in more detail.

**The experience of the families that we work alongside**

The children and families that Children 1st work alongside have varying experiences of what it feels like to be isolated. Some children talk about feeling lonely at school because they are being bullied or because they feel pressure to look a certain way. Others talk about a pressure to achieve and attain, which makes them feel lonely or emotionally distressed, particularly when they are not meeting the expectations of their school, parents and peers. Many of these children choose coping mechanisms to deal with feelings of isolation—such as missing lessons, acting in a particular way in class or at home or using substances.

Some children and families talk about feeling isolated because they have no friends, or because they are a long way away from their extended family. Others feel that the things they are experiencing at home—such as domestic abuse or substance use—or experienced in their past—such as sexual or physical abuse—make them feel alone.

For some of the families we work alongside, experiencing poverty makes them feel isolated because they can’t afford to go out or because they feel like they won’t fit in. Others tell us that they feel like they don’t belong in their community, or that there ‘is no community any more’—people live ‘individual lives’. Some families told us that they don’t feel that they ‘matter’ in their communities, and that no one would help them if they were in need. They also highlight feeling like they have ‘nowhere to go’ and the impact that social cuts have had on the availability and access to community centres and voluntary services.

For other people they feel concerned about feeling judged—for using coping behaviours like taking drugs or using alcohol, for being a kinship carer, for not having enough money or for not wearing the right clothes and make-up. And for many of the women and children that we support, experiencing domestic violence has meant that their social connections have been severed by a perpetrator, leaving them with low self- esteem, disconnected from family and friends and concerned to leave the house.

We explore many of these issues below as we think it is important to consider them within the context of developing kinder, more understanding communities and services that are compassionate and inclusive. We illustrate the diversity of the experiences of the people that we support to demonstrate the breadth of the problem—we cannot focus on siloed approaches to dealing with each of these complex, often interconnected, issues. Instead, Children 1st’s belief is that many of these problems can be solved by building community resilience, listening more to children and families and investing in preventative, relational, trauma- informed services that help families feel included, supported and loved.

The Strategy should be framed in a rights- based way that recognises clearly people’s right to family life, to recovery, to play, to healthcare and education and social interaction and other key areas that contribute to building strong communities and resilience and emotional wellbeing for all children and families.

We are not sure whom the draft Strategy is aimed at and would caution against developing a Strategy that fails to make deeper connections to both some of the key drivers that both exacerbate social isolation and loneliness and the systemic issues that create these feelings. In particular we would welcome stronger links to ongoing work relating to childhood adversity, mental health, looked after children, drug and alcohol use, trauma recovery and poverty. We believe that the draft could be strengthened by a focus on these specific areas:

**The right to trauma- recovery services**

Children 1st believes that Adverse Childhood Experiences (ACEs), and the resulting trauma, are the single biggest health and social care issue affecting children and families in Scotland today. Understanding and working to address unresolved trauma and build resilience affects *every* *single aspect* of our work with families. The way that trauma affects the brain often means that people have low self- esteem, find it hard to establish secure and lasting relationships or to communicate and translate the world around them and disassociate themselves out of concern of being hurt or stigmatised. This is even in a crowded room, a busy community or amongst a circle of peers.

Understanding this should change the nature of the way we design and deliver services and have a significant impact on the way we work collaboratively alongside families. We believe that this knowledge must also affect every aspect of the work of policy makers and leaders as well—if we truly take a trauma- informed approach our policies, processes and systems will look very different to how they look today. This means that strategies to tackle social isolation cannot only focus on access to things like transport and IT—they must address the systemic issues behind why people find it hard to establish or seek connection.

Many of the people in Scotland who feel most vulnerable, most isolated and least connected are those who have experienced significant trauma in their lives as children and who are struggling to rebuild the connections, emotional literacy and resilience to cope in adulthood. Getting a bus, going to the shops, going out for the day and other ‘basic’ ways of connecting with the community might seem like alien and difficult concepts.

This is acknowledged in the consultation document, which states, “Moreover, traumatic events – be it abuse, a period of imprisonment, homelessness or addiction – can lead to a situation where isolation compounds the challenges of recovery or reintegration into society.” However, trauma and the need for trauma recovery services is not mentioned anywhere else in the document.

Our vision is of a trauma- informed Scotland where priority is firmly placed on preventing childhood adversity from occurring in the first place and, where it does, helping people to recover through the provision of compassionate family support services and relationships that build emotional resilience. To realise this vision we must ensure that there are appropriate family support services where children are supported to become emotionally healthy and resilient individuals and, where appropriate, their parents are able to access early help to resolve what happened to them in their own childhood and to support the development of their parenting skills.

Sara and Lappin state: “*Childhood trauma disrupts crucial physiological, psychological, and social developmental processes. It increases the risk of the full range of mental disorders... It should be seen as a major challenge requiring not only a systematic public health framework, but also a wider societal response to the prevalence and sequelae of childhood trauma*.”[[1]](#footnote-1)

There are a number of different factors that can build resilience to help people to cope with their childhood experiences so that they experience positive outcomes and lead healthy, happy, safe lives as adults. Primarily, this is about having strong attachments and a stable, supportive relationship in a child’s life: exactly what looked after children (and many other children) in Scotland have been telling us for decades. And it makes the provision of trauma- informed, relationship-based family support a key element in prevention of and recovery from ACEs.

However, we know that there is not enough provision of the type of support that we envisage helping to resolve trauma and ensure people feel supported enough to connect with others. There is an urgent need for a strategic and sustainable expansion of trauma- informed, relationship- based family support models across Scotland.

Children 1st believes that the prevalence of childhood adversity in this generation of children is linked to the recovery of the previous generation. It is this systemic approach, which acknowledges prevention and recovery as part of the same continuum that will help us tackle the many issues that are linked to unresolved childhood adversity. We often find that it is only by working with the entire family, and helping to resolve parental trauma caused by their own childhood adversity, that we resolve issues for the child. However, we have concerns that some funding is divided into specific ‘child services’ and ‘adult services’ which causes an arbitrary divide instead of allowing organisations to apply for funding to work with the entire family.

We would welcome consideration in the Strategy of how investment in preventative family support services could impact on social isolation and loneliness and prevent crisis from escalating where acute services for people are the only option. Working earlier with families in this trauma- informed way can ease the pressure on mental health and emergency services and increase the levels of support families need to feel connected with their community.

**The right to compassionate, relational, trauma- informed universal services designed for, and by, the people who use them**

It is not hard to understand why someone would feel disconnected from their community if they have experienced domestic abuse, been left with little support to help them to recover, been through a traumatising court process and then been placed in unsuitable temporary accommodation far away from family and friends.

Equally, it is not hard to understand why some of our families feel alone and struggling with mental health issues when the services they access to help them—such as employability, benefits or housing support—do not respond to them compassionately or understand the impact of trauma and the way this can affect decision- making and behaviour.

In addition to the type of trauma- recovery, family support based services outlined in our first point above, we believe there is also a need for all universal and statutory services to be trauma- informed and to understand the symptoms of trauma, adversity and challenge faced by children and families. In our view, helping universal and statutory services to work to prevent unresolved trauma from manifesting as coping behaviours and strategies or becoming mental health issues will help to strengthen families and reduce the likelihood that children and families will feel isolated and alone.

This does not have to be complex or difficult, it is about ensuring that people are treated with dignity and kindness and their rights are respected. Often this means directing people to appropriate support, helping people feel listened to, involving them in the design of their own support or being offered a cup of tea and a chat. In answer to question 9 in the consultation paper, we believe this is one of the core ways of promoting kindness as a route to reducing social isolation and loneliness, in line with the recommendations from the Carnegie UK Trust’s report.

Helping people to understand that certain behaviours are traumatised, distressed or coping behaviours will make services more compassionate and understanding. To illustrate our point we highlight three specific areas that this would improve connections and help people to rebuild relationships:

*Domestic abuse*

We often hear that at the point of separation from an abusive partner the non- abusing parent feels isolated and disconnected from friends and family and the community. Frequently the perpetrator has forced the survivor to sever contact with loved ones, to stop working and has left them with shattered confidence and self esteem. At this point support must be available to help survivors to overcome the trauma that they have experienced and reconnect with the community.

They must feel listened to, heard and supported and offered assistance with moving on with their lives. However often we hear of survivors being moved to unsuitable accommodation without support—and often with PTSD or mental health issues that can manifest into a crisis. We would welcome consideration of the need for recovery- based (as opposed to crisis or risk- focused) support where the survivor is provided with support to recover and reconnect instead of being moved out of their community.

*Housing*

Many of the families that we work alongside have issues with housing and live in temporary accommodation. The issues with temporary accommodation have been well documented, but families also tell us of long waits for appointments that are difficult to get to at challenging times. They talk about not being spoken to with dignity or compassion and being moved far away from friends and family to places where they have no connections. Crisis’ report “A Life in Limbo” describes how some people living in temporary accommodation feel isolated from friends and family and distanced from the job market.[[2]](#footnote-2) A more trauma- informed approach would consider these issues and offer kinder, more relational support to try and mitigate against families feeling isolated and alone with little support.

*Poverty*

End Child Poverty figures reveal that poverty affects children in every part of Scotland, with as many as 34% of children living in poverty in some local authority areas - compared to one in ten in others. In Glasgow it is estimated that 34% of children are living in poverty.[[3]](#footnote-3)

Children 1st have seen a substantial increase in the number of individuals we work alongside experiencing financial hardship. Some of the families that we support have told us that they have to choose between ‘eating and heating’. For the children that we support growing up in poverty means feeling cold, going hungry, being unable to fully join in activities at school, with friends or in the wider community and spending time feeling worried about their financial situation at home, or even where they are going to live.

For many of the families that we work with poverty can place intolerable stresses and strains on daily life and can impact on their ability to support a safe and nurturing environment for children to grow and develop. Where there are issues relating to poor housing, economic or financial uncertainty, job insecurity or unemployment some families can find it hard to develop safe, attachment- based relationships while experiencing poverty. Children may find it difficult to concentrate at school or to build resilience while dealing with not having enough to eat or worry about what is happening at home.

Indeed, the relationship between poverty and social isolation is identified within the consultation response, which states that living in poverty can lead to social isolation and that people suffering from social isolation are at risk of experiencing poverty. We would welcome further consideration of the need for trauma- informed family support to help families experiencing poverty to connect with their communities and overcome some of the challenges they are experiencing.

Recent research from Glasgow Caledonian University found that intense child poverty can be found in some of Scotland’s most affluent areas, with two- thirds of those suffering income deprivation (468, 430 people) living outside areas identified as ‘deprived’.[[4]](#footnote-4) We therefore think it is important to ensure that SIMD classification is not the sole determinant of funding allocations or service provision. Indeed, our support workers tell us about the ‘affluence of poverty’ whereby they arrive at some larger houses in more affluent areas but the families we work alongside have no furniture or food or are struggling to leave the house. The Strategy must acknowledge this.

**Access to peer support and group work**

One of the areas that the children and families we work alongside identify as the most important in terms of addressing social isolation and loneliness is being able to access peer support and group work.

At Children 1st we have first- hand experience of the value of introducing families to other people experiencing the same issues and challenges and building connections and confidence through peer support. We have seen families connect through groups for kinship care, survivors of childhood sexual abuse, trauma recovery and emotional wellbeing and domestic abuse. We would welcome specific reference in the Strategy to how the Government can ensure the people who would benefit most from this type of support is able to access it within their local community.

For children it is also important, but we are concerned that in some areas local groups stop at certain ages and there are little around for older children (such as dancing or art). Many activities can only be accessed through school, which is a challenge for young people who don’t like school or see school as a source of stress and anxiety.

**Sustainable funding and investment in the voluntary sector**

Question 17 in the consultation asks how the third sector and social enterprise can play a stronger role in helping to tackle social isolation and loneliness in communities. As outlined above, Children 1stbelieves that one of the primary ways to address this challenge is through the provision of relational, trauma- informed family support. However, we are concerned that funding for services is often uncertain and unsustainable. Some families talk to us about finding it hard to establish relationships with support workers due to the ‘time limit’ placed by funders or knowing that the relationship has an end date.

One mother that we work with told us the difference that a service based on a relationship can make: *“It felt like Children 1st spoke to us and not about us. It felt like they cared about us, rather than just seeing the drugs… With their support—emotional and practical—we’ve all become stronger… The kids and I are closer and we feel like we’re safe and we’ve got a home. We’ve never had that before.”*

We believe that there is an urgent need for a strategic and sustainable expansion of these relational family support models across Scotland. At present, however, we are seeing significant reduction in funding for family support, despite the clear evidence that working collaboratively alongside families as early as possible, particularly during the first three years of a child’s life, is crucial.

We think a more important question is: how can we ensure more sustainable and reliable funding for the third sector so that they can help families feel more connected? Children 1stwelcomes the clear recognition in the Strategy that the third sector has an important dual role to play in tackling social isolation and loneliness, being rooted within communities and well placed to offer support in a different way to statutory services and ensuring the voices of individuals and communities are heard in the design and development of services. However we cannot do this well in the current financial climate of cuts to important preventative services.

In summary, we submit some short bullet points to address the first question in the consultation:

**What needs to change in your community to reduce social isolation and loneliness and increase the range and quality of social connections?**

* Investment in relational family support trauma recovery services in clear recognition of role of trauma recovery in preventing social isolation and stopping it from getting worse.
* Ensuring that statutory and universal services are trauma-informed, compassionate and kind.
* Ensuring that there are groups and peer support for children and families who want to access them.
* Sustainable funding for the third sector so that they can invest in the type of preventative services we know help people feel more connected.

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**Annex 1: Response from the Edinburgh Wellbeing Group**

*The Edinburgh Wellbeing Group is a group of mothers who have worked, or are currently working alongside Children 1st with their family. Children 1st has supported them to form a peer- support recovery focused group to share their experiences and challenges and to support each other in their daily lives. The group has been clear that this has helped them to feel more connected and less isolated. A support worker worked with the group to note down their thoughts regarding this consultation. Their response is entirely their own, and reflects their own experiences and concerns.*

**What does social isolation and loneliness mean?**

Loneliness is when you can be surrounded by people but feel completely alone. It’s when you feel unheard or no one gets you, there’s no one that can relate to you and your experiences.

Finding people that have lived through similar experiences can help you feel connected and you can be more open and feel less judged.

Social isolation is getting worse as nowadays we move houses more, because there is a lack of housing so we move to where we can get a house, or we move to get a job.

Being socially isolated is about not being able to meet people in the first place because of our caring responsibilities, not being able to afford to go out and about, and there being no places to go even if you could. As everywhere is being sold off to private companies for houses or student accommodation. We are losing our communal places, and because property is being built everywhere it pushes the prices up of cafes up, so it’s more expensive to meet up and go for a coffee.

The existence of groups like ours (wellbeing group) helps, but people who are isolated and vulnerable wont make that first step through the door by themselves. You need the one-to- one work or support first to get you a place where you can manage a group and meeting a bunch of strangers. We wouldn’t have been here without that support. Not everybody can have a worker but a volunteer ‘buddy’ could help overcome that barrier.

We need more groups! So people have the opportunity to come together and connect, people who would all be at home alone if it wasn’t for groups like this. I have meet people in this group who have supported me when I’ve needed it and who have been there through hard times. But to have groups, there needs to be places to have them in and funding to allow them to happen. There are cuts being made everywhere and in Edinburgh loads of community places are being sold off, we’ve lost out community.

Service should be located in communities as opposed to being city wide, they would be easier to access and they would know have knowledge about the community and what activities are going on. They could also bring people together. It’s easier to join a group when you already know the service that is running it.

Offering longer term support help you to engage with services, when you know a service is just very short term; you don’t invest in it or build up the relationship as you know they’ll be out the door before you know it. You need longer term support even if it is just a phone call now and then.

The Government should take responsibility for the lack of social housing and communal public spaces by having tighter control on Local authorities selling off publicly owned land to private developers. There is an agreement that 10% of new houses being build need to be social housing but that is not enough it needs to be higher and it should be mandatory that they build communal area and buildings into their plans.

Peer mentors would be a good way to help overcome loneliness, someone who you can talk to who has been through the same experiences would make you feel like your not alone. This is something that could be funded through charities that already have connections with these people.

Getting to places can be a barrier, when you have a family of five getting anywhere on a bus costs a lot when your on a low income, then you have to pay to get into wherever you’re going and then you have to buy food! Family trips can be expensive.

Travelling can be difficult itself when you have mental health problems or your child has Autism. If you don’t have your own transport, getting anywhere can be a barrier. Having people who can give you a lift helps, and free bus passes for low income families.

While school uniforms have taken away some of the equality issues, there are still inequalities in the availability of extra curricular activities. There are not enough affordable clubs for kids, all of the government-funded ones get filled quickly and there’s waiting lists (Edinburgh leisure had to cut back on their afterschool clubs because of funding cuts). It should be mandatory and all groups should offer a certain amount of places to low income families for free or at a discounted rate. This would allow us to give our children the experiences that other families take for granted. When we can’t offer our children these things, I feel awful as a mother, I feel guilty that my situation is depriving them of learning new things and meeting people. They then feel bad about themselves as they are not able to things that ‘normal’ families do. This then impacts on how isolated they are and how lonely they feel, then the cycle continues.

To have a kinder society you need kinder people. That comes from knowing your neighbours, everyone moves about these days.

When kids don’t have anything to do in the community they get bored and then started stealing bikes and causing trouble. It’s not their fault, there is nothing else for them to do. Kids need a role in society. Teenagers could have a role in supporting local elderly people, popping in for a cup of tea or helping with messages.

Kind communities happen when strangers are kind to one another and help one another. It happens when you can open the door and let the children play in the street together, allows them to be free and make friends regardless how or how much money I have. Right now there are too many cars on the street and not enough ‘safe’ places for children to play.

1. <https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(17)30104-4/fulltext> [↑](#footnote-ref-1)
2. <https://www.crisis.org.uk/media/237733/a-life-in-limbo.pdf> [↑](#footnote-ref-2)
3. <http://www.endchildpoverty.org.uk/poverty-in-your-area-2018/> [↑](#footnote-ref-3)
4. Research from Glasgow Caledonian University Scottish Poverty and Inequality Research Unit published in March 2018 [↑](#footnote-ref-4)