

# JSNA Health and Wellbeing Profile 2024/25

## Social Isolation

Social isolation is defined as the state or condition of having little or no contact with others. Loneliness is the feeling that people have when their need for social contact and relationships isn't met.

High quality social connections are essential to our mental and physical health and our wellbeing being. The effect of social isolation and loneliness on mortality is comparable to that of other risk factors such as smoking, obesity and physical inactivity (World Health Organisation).

### Summary points

- Just over 5% of Bristol residents feel lonely because they don't see family and friends enough
- Nearly 42% of adult social care users in Bristol have as much social contact as they would like
- Loneliness is nearly three times higher than the city average amongst disabled people and people renting from the council.
- Loneliness is highest amongst Black / Black British residents and lowest amongst White British residents in Bristol.

### Findings

Social isolation<sup>1</sup> can have physically and emotionally damaging effects resulting in:

- depression
- poor nutrition
- decreased immunity
- anxiety
- fatigue
- social stigma.

Using estimates from the Office for Health Improvement and Disparities, there could be 23,100 people aged 18-64 experiencing social isolation in Bristol as well as between 6,800 and 12,350 people aged 65 & over<sup>2</sup>.

Whilst older people are most at risk of social isolation, it is often caused by specific life events that can happen at different times in people's lives (eg leaving school, becoming a parent, divorce, retirement, or bereavement).

For full discussion, see [www.bristol.gov.uk/socialisolation](http://www.bristol.gov.uk/socialisolation) including background report which also covers health impacts<sup>3</sup>.

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<sup>1</sup> Including "loneliness"; is where people have: 'few social contacts and few social roles, as well as an absence of mutually rewarding relationships with other people.'

<sup>2</sup> Social Isolation in Bristol Initial Findings Report (2013) – applying mid-2023 population estimates

<sup>3</sup> Research on health impacts is also at: [www.campaigntoendloneliness.org/threat-to-health/](http://www.campaigntoendloneliness.org/threat-to-health/)

### Loneliness

According to the 2023/24 Bristol Quality of Life survey, 5.2% of respondents feel lonely because they don't see family and friends enough, and 80.1% of respondents see friends and family as much as they want to. Loneliness is highest in the wards of Hartcliffe & Withywood (12.3%) and Central (9.5%) and lowest (below 2%) in Redland, Stoke Bishop, Bishopston & Ashley Down, Hengrove and Whitchurch and Clifton Down (Figure 1).

**Equalities data:** Loneliness in the 10% most deprived areas of Bristol is more than five times higher than in the 10% least deprived areas (10.7% v 1.8%). Loneliness is nearly three times higher than the city average (of 5.2%) amongst disabled people (16.0%) and people renting from the council (14.6%) and more than twice as high amongst single parents (12.9%). By ethnicity, loneliness was highest amongst Black / Black British residents (15.7%) and lowest amongst White British residents (3.8%). There were no significant differences by sex.

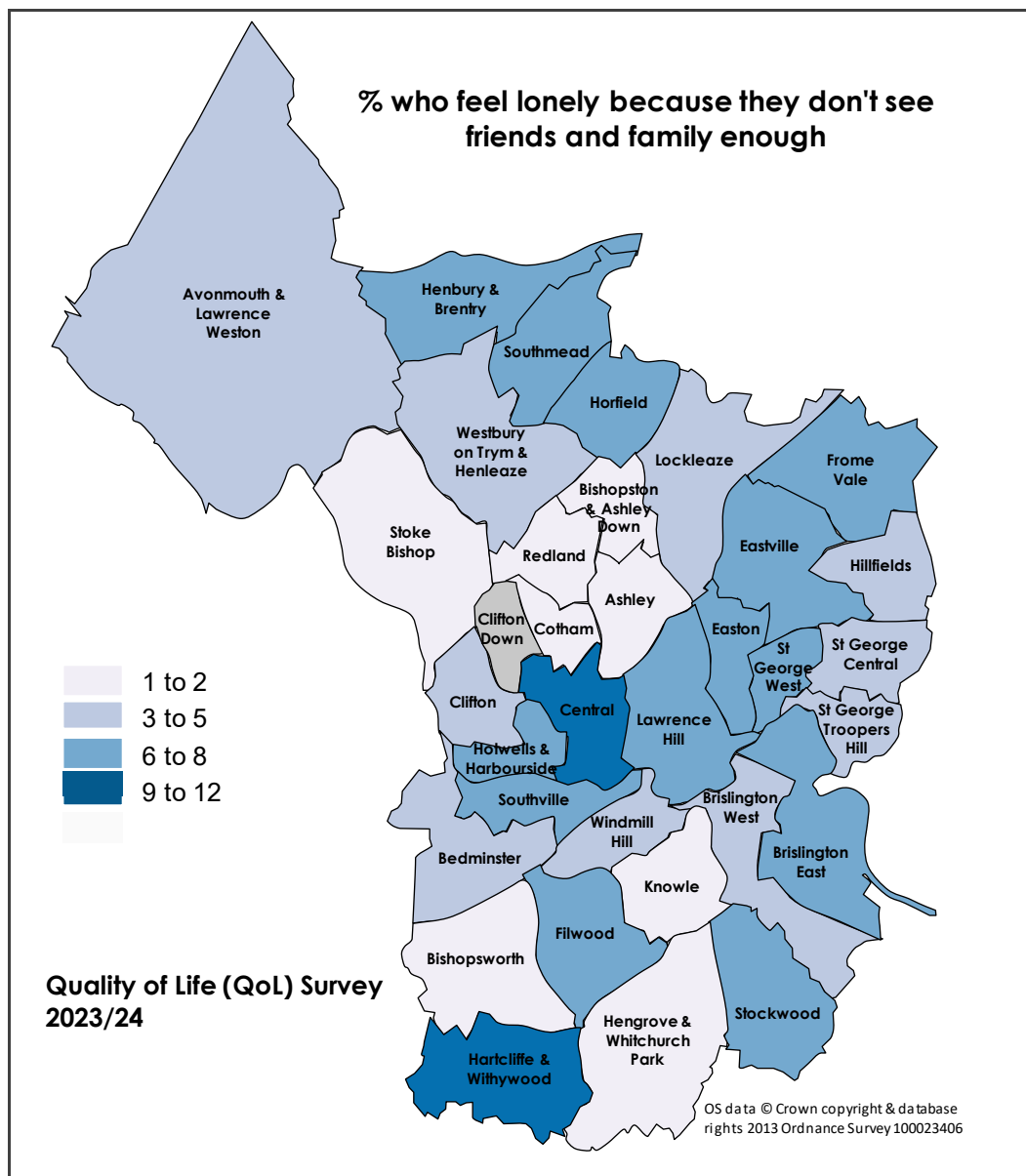


Figure 1: % of Bristol residents who feel lonely. Source: QoL survey 2023/24

### Social isolation of older people

Socially isolated older adults have:

- longer stays in hospital
- a greater number of GP visits and
- more dependence on homecare services

Social isolation amongst older people is being addressed through [Bristol Ageing Better](#) and partners to develop local solutions.

### Social isolation of social care service users

In England, the majority of social care service users do not have as much social contact as they would like. In most local authorities, the proportion of people who say they have as much social contact as they would like is below 46%<sup>4</sup>.

In Bristol, 41.8% of adult social care service users (in 2023/24) said they “have as much social contact as they would like”, lower (worse) than the national average (45.6%) - see figure 2. This is a decrease on the previous year (44.4%) and ranks Bristol mid table when compared to the English Core Cities. Leeds had the highest proportion of service users with as much social contact as they would like at 49.2% and Birmingham had the lowest at 37.6%

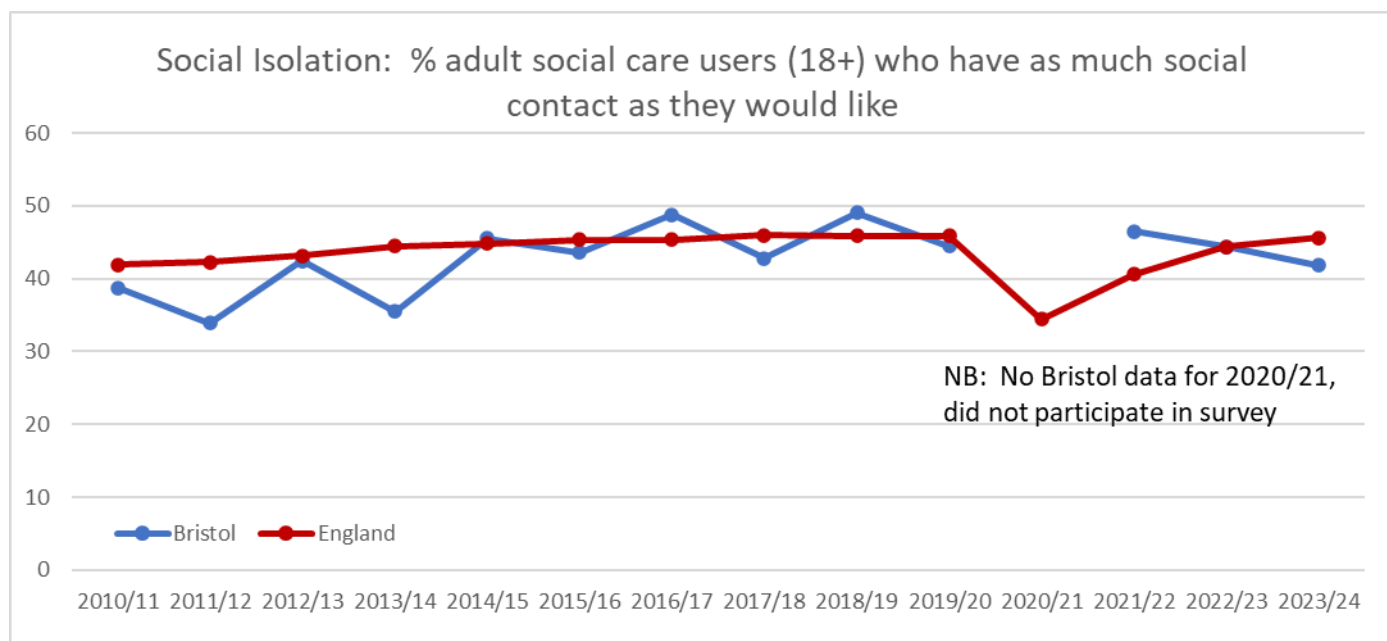


Figure 2: Source: Adult Social Care Survey via NHS Digital (November 2024)

**Equalities data:** Data for Bristol by age band showed that the percentage of people who had as much social contact as they wanted ranged from 37.0% of 25-34 year olds to 45.0% of 35-44 year olds. Males were more likely to have as much social contact that they wanted than females (46.3% males v 38.2% females). By broad ethnicity group, people of Asian ethnicity had the lowest rates of social contact that they wanted at 26.0% compared to 80.5% of people

<sup>4</sup> Source: Adult Social Care Survey - a random sample of social care users run each year by local authorities following Department of Health guidance

of mixed ethnicity, although it should be noted that the number of respondents from both ethnic groups was low and may or may not accurately represent the real picture.

### Social isolation of carers

The Personal Social Services Survey of Adult Carers in England (SACE) is conducted every two years<sup>5</sup> and provides information relating to the social isolation of carers. The latest data is for 2023/24<sup>6</sup> and shows that only 27.8% of carers in Bristol (2023/24) say they “have as much social contact as they want with people they like”. This has fallen significantly since 2012/13 (46.2%) and is lower than the English average (30.0%) – see figure 3. Bristol ranks mid table compared to the other English core cities, where desired social contact ranges from 22.3% in Liverpool to 33.1% in Sheffield.

**Equalities data:** In Bristol, none of the 15 respondents aged 35-44 years old felt they had as much social contact as they would like which compared to 38.1% of carers aged 55-64 years old. By gender, 23.9% of males and 29.3% of females had as much social contact as they wanted and by ethnicity only 21.1% of Asian / Asian British adult carers had the social contact they wanted.

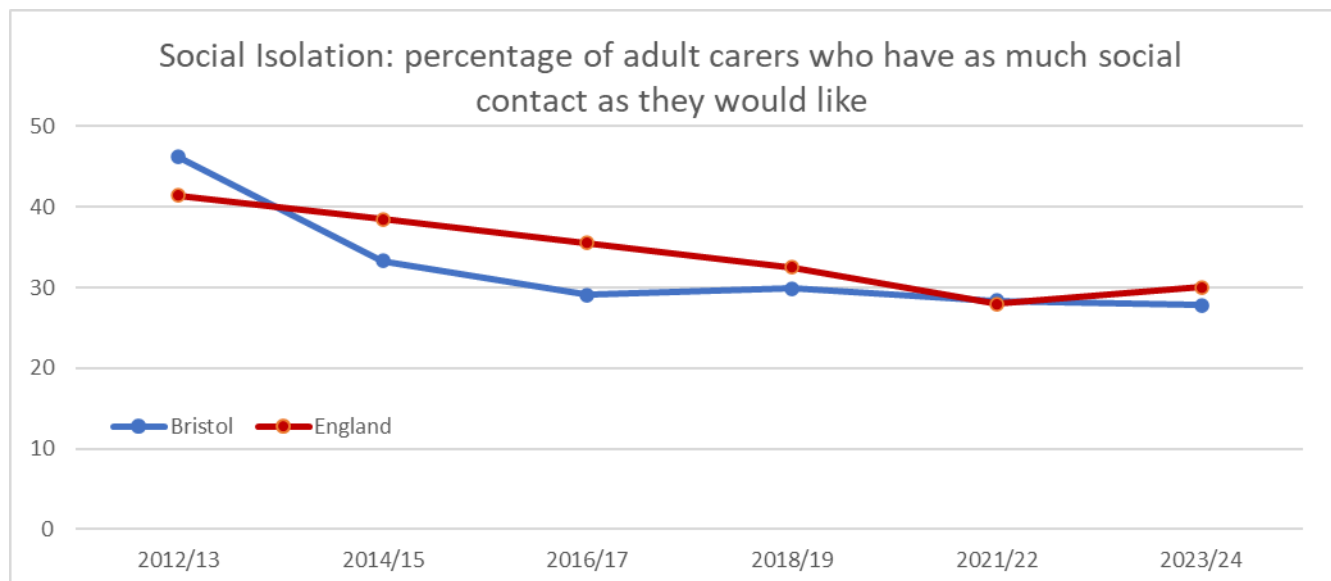


Figure 3: Source Personal Social Services Survey via NHS Digital (November 2024)

### Covid-19 impact:

Research on loneliness during the pandemic had three main findings<sup>1</sup>:

- People who felt most lonely prior to Covid in the UK now have even higher levels of loneliness. This increase began as physical distancing, shielding and lockdown measures were introduced in the UK, in March 2020.
- Adults most at risk of being lonely, and increasingly so over this period, have one or more of the following characteristics: they are young, living alone, on low incomes, out of work and, or with a mental health condition.

<sup>5</sup> The 2020/21 survey was postponed by one full year due to Covid-19

<sup>6</sup> [Personal Social Services Survey of Adult Carers in England, 2023-24 - NHS England Digital](#)

- The impact on wellbeing from people at risk of loneliness is likely to be compounded by other economic and social impacts experienced by the same people, such as those experiencing job losses and health anxieties.

These impacts could last well into the future for some, so Bristol's community wide partners continue to work together to address these impacts, as well as the cost of living crisis. You can find out more here: [www.bristol.gov.uk/costofliving](http://www.bristol.gov.uk/costofliving)

**Further data / links:**

- Research on health impacts are available at: [www.campaigntoendloneliness.org/threat-to-health/](http://www.campaigntoendloneliness.org/threat-to-health/)
- Age UK: Loneliness and isolation - understanding the difference and why it matters <https://www.ageuk.org.uk/our-impact/policy-research/loneliness-research-and-resources/loneliness-isolation-understanding-the-difference-why-it-matters/>

**Date updated:** November 2024

**Date of next update:** November 2025

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<sup>1</sup> [Loneliness, social isolation and COVID-19 | Local Government Association](#)