

Loneliness in Northern Ireland 2018/19

Factors associated with feeling Lonely in Northern Ireland 2018/19.



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TABLE OF CONTENTS

Contents

1. KEY STATISTICS	3
2. INTRODUCTION	4
3. WHO IS 'MORE OFTEN' LONELY?	5
3. 1 Loneliness by Sex and by Age	6
3.2 Loneliness by Marital Status	7
3.3 Loneliness by Dependents	8
3.4 Loneliness by Health	9
3.5 Loneliness by Employment and Qualifications	10
3.6 Loneliness by Geographical location	11
3.7 Loneliness by Household characteristics	13
4. WELLBEING AND LONELINESS	15
ANNEX	16
Annex 1: Further Information	17
Annex 2: Useful information for those feeling lonely	20



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1. KEY STATISTICS

In 2018/19, approximately 1 in every 20 adults in Northern Ireland reported feeling Ionely "always" or "often"	In 2018/19, 64.8% of respondents (adults aged 16+) reported feeling lonely "hardly ever" or "never". However, 35.2% of respondents reported feeling lonely "occasionally", "some of the time" or "often/always" and were therefore described as "more often lonely". In 2018/19, 5.3% of respondents reported feeling lonely "often/always". (Figure 1).
Females were more likely to be "more often lonely" than males…	Female respondents were more likely to feel "more often lonely" (39.2%) than males (30.9%) (Figure 2).
Adults aged 75+ were most likely to report feeling "more often lonely"	Two-fifths (41.3%) of respondents aged 75+ reported feeling "more often lonely". The age group with the lowest percentage of respondents reporting feeling "more often lonely" was those aged 35-44 (29.6%) (Figure 3).
People who were widowed were most at risk of feeling lonely	Those who were widowed (61.3%) were the highest proportion of respondents feeling "more often lonely". Those who are married and living with their husband/wife (24.0%) were less likely to feel "more often lonely" than any other marital status group (Figure 4).
People who reported having worse general health were more at risk of feeling lonely	Approximately two-thirds of the respondents who described their general health as "bad" or "very bad" felt "more often lonely" (66.2%). In comparison, 21.3% of those who described their general health as "very good" felt they were "more often lonely" (Figure 6).
People who are currently not in paid employment are more at risk of feeling lonely	Of those not in paid employment, 43.8% reported they felt "more often lonely". In comparison, 28.8% of those currently in paid employment felt "more often lonely".
People without access to a car are more at risk of feeling lonely	One in every two people without access to a car reported being "more often lonely" (54.9%). Whereas, 31.7% of those with access to a car, felt "more often lonely".

A detailed breakdown of all Key Statistics provided above can be found here.

2. INTRODUCTION

Everyone is likely to experience feelings of loneliness at some point in their lifetime and the effects of feeling lonely will differ from person to person. However, feelings of loneliness can negatively impact a person's health, wellbeing and overall quality of life¹ and so it is important to understand what factors are associated with feeling lonely. In 2017, the Jo Cox Commission for Loneliness highlighted the need to measure loneliness on a national scale to better understand the personal characteristics and circumstances associated with loneliness. Following suggestions made by the Jo Cox Commission, the Office for National Statistics (ONS) developed national measures of loneliness. One measure has been included in the Northern Ireland Continuous Household Survey (CHS) and an additional three measures of loneliness have been included in the Annual Health Survey for Northern Ireland since 2017/18. This provides four strands of data that can be used to look at the factors associated with loneliness.

This release presents some key 2018/19 loneliness data for Northern Ireland. The analyses in this report are based on the direct measure of loneliness included in the CHS. This measure asks people the question, "How often do you feel lonely?" with the following 5 response options: "often/always", "some of the time", "occasionally", "hardly ever" and "never". This question therefore measures the frequency with which people report feeling lonely, but not the level of loneliness they experience.

The results presented here will describe the individual, personal characteristics and circumstances associated with frequency of loneliness. Although the main focus of this report is 2018/19 data, 2017/18 data have been provided in a separate spreadsheet to allow for comparison over time. A full breakdown of figures for 2018/19 and 2017/18 are available in Excel and Open data format via the <u>publication page</u>.

Analysing the personal characteristics and circumstances which are associated with loneliness will provide understanding and insight for policy makers and those looking to improve societal wellbeing by trying to alleviate or prevent loneliness.

For ease of understanding and interpreting results, the responses "often/always", "some of the time" and "occasionally" were grouped into a single category called "more often lonely". The responses "hardly ever" and "never" were grouped into the category "hardly ever lonely".

In this publication differences between groups are only reported on where they are found to be statistically significant, unless stated otherwise. Statistical significance was determined using 95% confidence intervals.

***Statistically significant (using 95% confidence intervals)** means that we can be 95% confident that the differences seen in our sampled respondents reflect the population of Northern Ireland.

Further Background Information can be found in Annex 1.

1 https://www.gov.uk/government/publications/a-connected-society-a-strategy-for-tackling-loneliness

3. WHO IS 'MORE OFTEN' LONELY?

In 2018/19, 64.8% of respondents (adults aged 16+) reported feeling lonely "hardly ever" or "never", categorised as "hardly ever lonely". Whereas, 35.2% of people reported feeling lonely "occasionally", "some of the time" or "often/always" and were therefore described as "more often lonely". These figures are similar to those reported for 2017/18, with 64.1% of respondents feeling 'hardly ever lonely' and 35.9% of respondents feeling "more often lonely".

In 2018/19, around 1 in every 20 people (5.3%) of respondents reported feeling lonely "often/always". (Figure 1). This is similar to the 2017/18 figure, 4.2%.

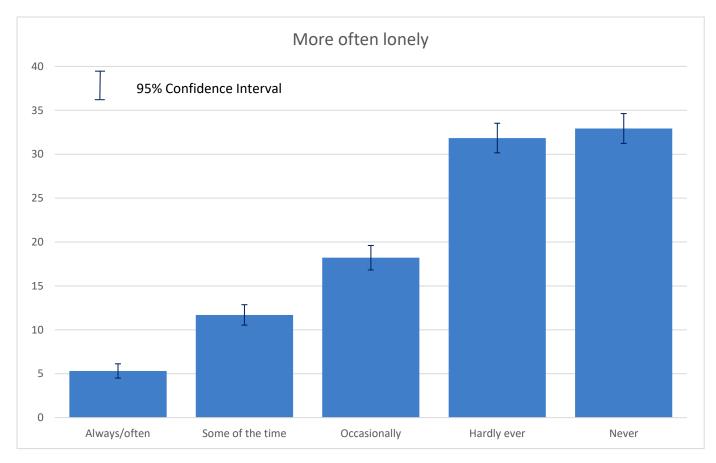


Figure 1: Frequency of loneliness in people aged 16+, 2018/19

*What is a confidence interval?

The error bars included in figure 1 indicate 95% confidence intervals. These show the ranges within which we are 95% confident that the true value for the population falls. For example, 5.3% of the Northern Ireland population reported that they were "often/always" lonely in 2018/19; we can be 95% certain that the true (if we surveyed everyone and not just a sample) 2018/19 figure for the Northern Ireland population falls between 4.5% and 6.1%.

Various personal characteristics and circumstances are associated with how likely a person is to report feeling lonely. A full breakdown of the data available for 2018/19 and 2017/18 are available in Excel and Open Data format on the <u>publication page</u>.

3.1 Loneliness by Sex and Age

Sex (Figure 2)

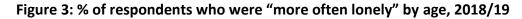
Females were more likely to be "more often lonely" than males. Overall, 39.2% of females described themselves as "more often lonely" compared to 30.9% of males.

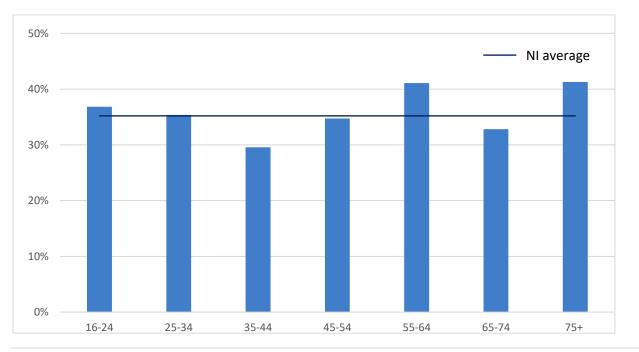


Figure 2: % of respondents who were "more often lonely" by sex, 2018/19

Age (Figure 3)

People aged 75+ (41.3%) and people aged 55-64 (41.1%) were "more often lonely" than people in other age groups. Those aged 35-44 have the lowest numbers of respondents reporting being "more often lonely" (29.6%), significantly lower than the 55-64 and 75+ age groups.





3.2 Loneliness by Marital Status (Figure 4)

People who are "single", "married but separated from their partner", "divorced" or "widowed" are all more likely to be "more often lonely" than people who are "married and living with their partners". Over half of respondents whose marital status was "widowed" (61.3%), "divorced" (58.2%) or "married and separated" (53.4%) were "more often lonely". In contrast, around one in four of those married and living with their husband/wife reported they were "more often lonely" (24.0%).

People who are "married but separated from their partner", are "divorced" or "widowed" are more likely to be "more often lonely" than people who are single (41.1%).

Although considering marital status by sex would be of interest, the numbers in some categories are too small for accurate analyses and combining groups would provide less meaningful results.

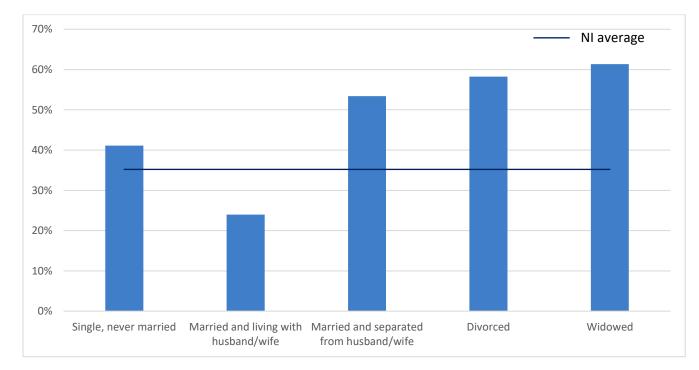
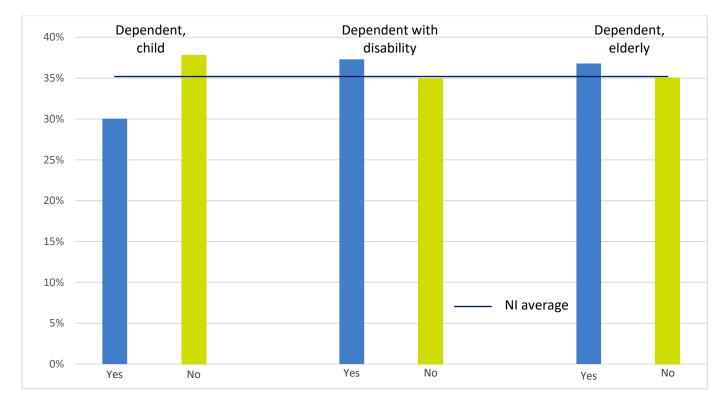


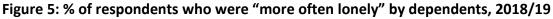
Figure 4: % of respondents who were "more often lonely" by marital status, 2018/19

3.3 Loneliness by Dependents (Figure 5)

People who have responsibility for the care of a child are significantly less likely to be "more often lonely" than those without such dependents (30.0% and 37.8%, respectively).

Whilst those with dependents with a disability (37.3%) and those with elderly dependents (36.8%) seem more likely to be "more often lonely" than those without such dependents (35.0% and 35.1% respectively), however, the difference is not statistically significant.





3.4 Loneliness by Health

General Health (Figure 6)

People who reported having worse general health were more at risk of feeling "more often lonely". People who rated their general health as "very good" were less likely to be "more often lonely" than people who described their health as "good", "fair" or "bad/very bad".

Values for "more often lonely" varied from one in five (21.3%) for those who rated their general health as "very good", to almost two in three (66.2%) for those who rated their general health as "bad/very bad".

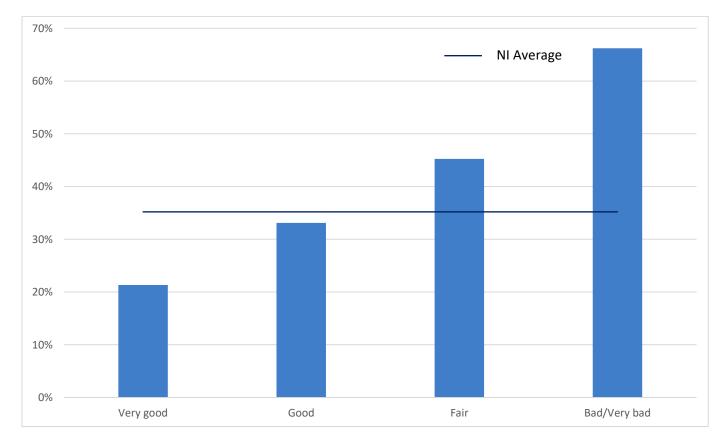


Figure 6: % of respondents who were "more often lonely" by general health, 2018/19

Limiting Long-standing Illness

Over half (55.2%) of people who reported having a limiting long-standing illness were "more often lonely". Of those without a limiting long-standing illness, the proportion who were "more often lonely" was much lower (27.8%).

Respondents are defined as having a **limiting long-standing illness** if they have any physical or mental health conditions or illnesses lasting or expecting to last for 12 months or more, and these condition(s) or illness(es) reduce their ability to carry out day to day activities.

3.5 Loneliness by Employment and Qualifications

Employment

People who are currently not in paid employment are more likely to be "more often lonely" (43.8%) than those who are in paid employment (28.8%).

Qualifications (Figure 7)

People with no qualifications are more likely to be "more often lonely" than those with qualifications. More than two in five of those with no qualifications (42.2%) reported being "more often lonely". In contrast, those whose highest level of qualification is 'degree level/equivalent or higher' were less likely to be "more often lonely" (28.5%).

Highest level of qualification is split into three groups:

- 'degree or higher', which includes degree, or degree equivalent, and above;
- 'any other' qualification, which includes other higher education below degree level, A levels, vocational level 3 and equivalents, GCSE/O level grade A*-C, vocational level 2 and equivalents, qualifications at level 1 and below and other qualifications; and
- 'no qualifications'.

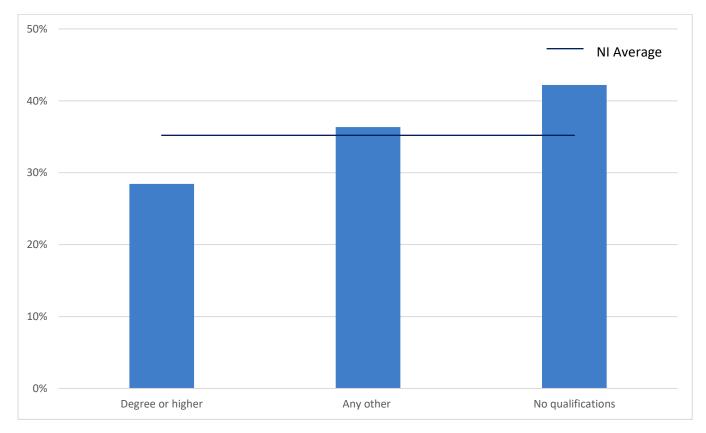


Figure 7: % of respondents who were "more often lonely" by qualification, 2018/19

3.6 Loneliness by Geographical location

Urban/Rural

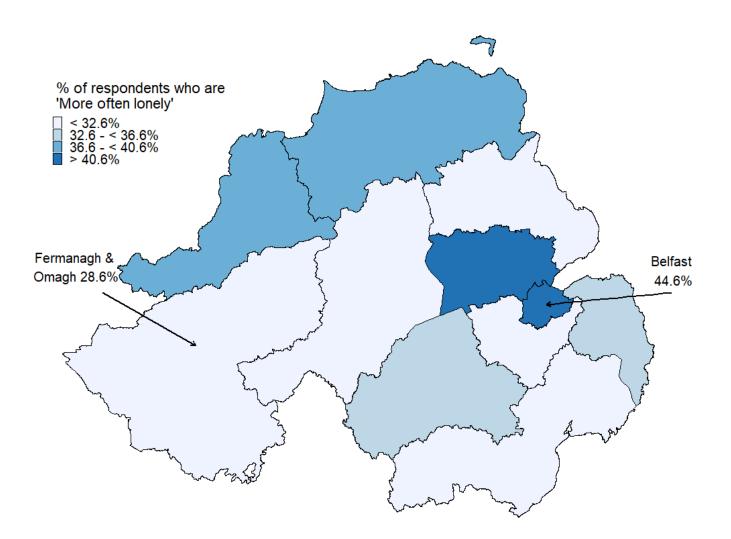
People living in urban areas are more likely to be "more often lonely" (38.0%) than people living in rural areas (31.1%).

Local Government District (LGD) (Figure 8)

Belfast had the highest proportion of people who reported being "more often lonely", at 44.6%. This was higher than Armagh City, Banbridge and Craigavon, Fermanagh and Omagh, Lisburn and Castlereagh, Mid and East Antrim, Mid Ulster, Newry, Mourne and Down and North Down and Ards.

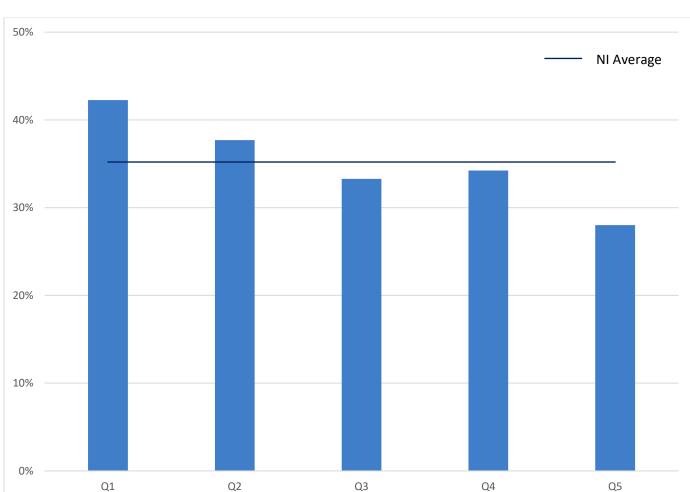
Fermanagh and Omagh had the fewest people who reported to be "more often lonely" (28.6%). This was fewer than Antrim and Newtownabbey, Belfast, Causeway Coast and Glens and Derry and Strabane.

Figure 8: % of respondents who were "more often lonely" by Local Government District, 2018/19



Multiple Deprivation Measure 2017 (MDM) (Figure 9)

People living in the most deprived areas (quintile 1) were "more often lonely" (42.2%) than those in quintiles 3, 4 and 5 (33.3%, 34.2% and 28.0% respectively). In contrast, those living in the least deprived areas (quintile 5) were least likely to be "more often lonely". **Deprivation Quintiles** categorise an area of deprivation; Quintile 1 (Q1) represents the 20% most deprived areas, and Quintile 5 (Q5) represents the 20% least deprived. See <u>Annex 1</u> for more information on the 2017 MDM.





3.7 Loneliness by Household Characteristics

Length of Time at Address (Figure 10)

People who have lived at their address for 5-10 years were found to be least likely to be "more often lonely" (30.3%). Whereas, more than 2 in 5 people who have lived at their address for 2-3 years or less than one year reported feeling "more often lonely" (47.1% and 40.7% respectively).

House Tenure (Figure 10)

People who are renting their home from the Housing Executive or Housing Association or privately are more likely to be "more often lonely" (51.2% and 40.3% respectively) than those who either own their home outright (32.6%) or are buying it with a mortgage (29.0%).

Number of People Living in Household (Figure 10)

People are more likely to be "more often lonely" if they live alone than if they live with others. Over half of those who live in households of one are "more often lonely" (57.2%). The lowest figure of those responding "more often lonely" is for households of five or more (23.0%).

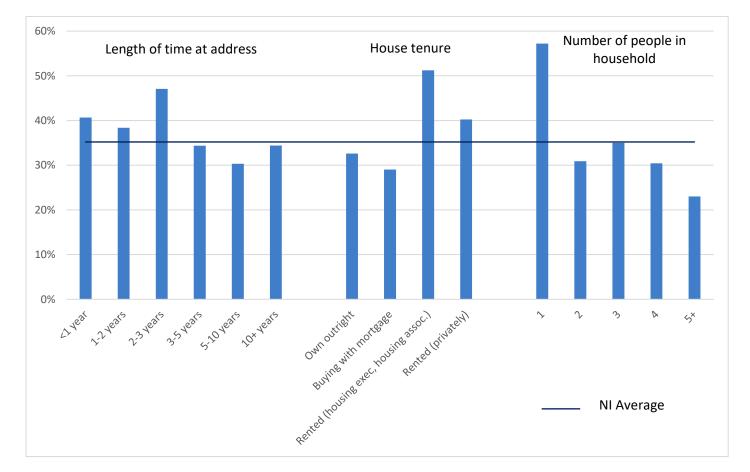


Figure 10: % of respondents who were "more often lonely" by house characteristics

Internet Access (Figure 11)

People who do not have internet access are more likely to be "more often lonely" (47.6%) than those who live in houses with internet access (33.8%).

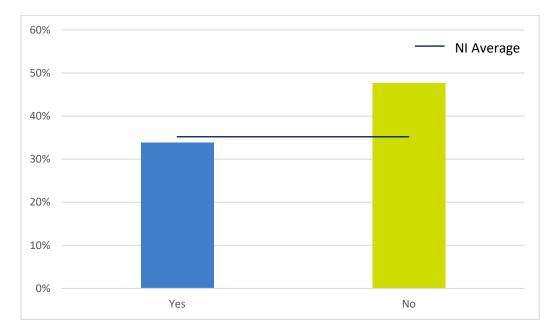
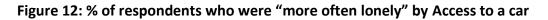
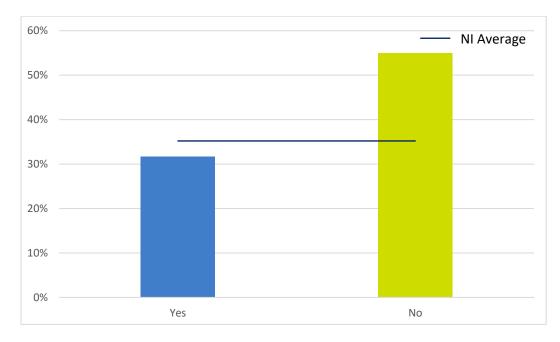


Figure 11: % of respondents who were "more often lonely" by Internet Access

Access to a Car (Figure 12)

People without access to a car are "more often lonely" than those who do have access to a car. Over half of those without access to a car reported being "more often lonely" (54.9%), compared to less than a third of those with access to a car (31.7%).





4. WELLBEING AND LONELINESS

Since 2010, four questions which measure self-reported personal wellbeing and five questions which measure self-efficacy have been included in the NI Continuous Household Survey (for more information, see <u>note 5: Annex 1</u>).

Personal wellbeing measures how satisfied people are with their lives, their levels of happiness and anxiety, and whether or not they think the things they do are worthwhile. The responses to these questions are on a scale of 0-10 with 0 meaning "not at all" and 10 being "completely". These responses are then grouped as outlined in <u>table 1</u> (Annex 1).

Self-efficacy measures a person's belief in their ability to achieve their goals and as such is closely linked to other aspects of a person's wellbeing. The measure used in this report sums the responses to five self-efficacy questions. The scores for the summed self-efficacy questions are then split into two groups of higher and lower self-efficacy.

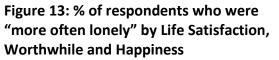
Those with **high self-efficacy** have confidence in their abilities and produce sustained efforts to achieve goals.

Those with **low self-efficacy** often doubt their capabilities, are less ambitious and give up on their aims when challenged.

Loneliness and Personal Wellbeing (Figures 13 & 14)

People who had "very high" and "high" life satisfaction, worthwhile and happiness scores were less likely to be "more often lonely" than people with lower scores.

People who had "very low" and "low" levels of anxiety were less likely to be "more often lonely" than people with high anxiety scores.



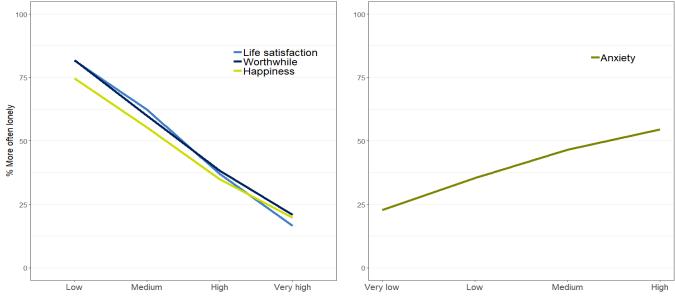


Figure 14: % of respondents who were "more often lonely" by Anxiety

Loneliness and Self-Efficacy

People with low self-efficacy were more likely to be "more often lonely" (62.6%) than people with higher self-efficacy (28.6%).

ANNEX

Annex 1: Further Information

Annex 2: Useful information for those feeling lonely

Annex 1: Further Information

1. Background to the CHS and Loneliness

The Continuous Household Survey (CHS) has been conducted annually in Northern Ireland since 1983. The CHS asks questions on a wide range of topics such as general health, education and employment and aims to give a regular overview of all topics covered.

The CHS asks the direct measure of loneliness:

- How often do you feel lonely?

Available responses are "Often/always", "Some of the time", "Occasionally", "Hardly ever" and "Never".

This question adheres to the Government Statistical Service (GSS) harmonised principals and will be comparable with data published by the Office for National Statistics (ONS).

2. Sample Size

The CHS is based on a systematic random sample of addresses drawn each year from the Pointer list of domestic addresses. Pointer is the address database for Northern Ireland maintained by Land & Property Services (LPS). The full achieved sample for 2018/19 was approximately 5,800 people. Findings on loneliness are based on a question asked of a smaller subsample of 2,937.

3. Weighting

As the CHS is a sample survey, there is a certain level of sampling error, i.e. the characteristics of the group sampled may differ slightly from the population as a whole. To account for this sampling error, the data has been weighted in order to produce estimates that better represent the population.

4. Northern Ireland Multiple Deprivation Measure 2017 (NIMDM 2017)

The analysis presented in section 3.6 utilises five groups (quintiles) of Super Output Areas (SOAs) across NI. These five groups are determined based on level of deprivation using the NIMDM 2017.

Following consultation, NIMDM 2017 replaced NIMDM 2010 as the official measure of deprivation in NI.

SOAs ranked 1 to 178 are the most deprived quintiles relative to all other SOAs. Those ranked 713 to 890 are the most affluent relative to all other SOAs.

NIMDM 2017 is a weighted combination of the seven domains of deprivation. The Income and Employment Deprivation domains account for nearly 50% of the multiple deprivation measure. The Health Deprivation and Disability Domain and Education, Skills and Training Deprivation Domain account for a further 30%, and the remainder is made up of the Access to Services, Living Environment and Crime and Disorder Domains.

Further details on deprivation measurement in NI can be found here.

5. Personal Wellbeing and Self-Efficacy questions

The CHS asks four questions about personal wellbeing and five about self-efficacy.

The **personal wellbeing** questions included in the CHS are:

- overall, how satisfied are you with your life nowadays?
- overall, to what extent do you feel the things you do in your life are worthwhile?
- overall, how happy did you feel yesterday?
- overall, how anxious did you feel yesterday?

The responses to these questions are on a scale of 0-10 where 0 is "not at all" and 10 is "completely". It is important to note that, while for the questions on life satisfaction, worthwhile and happiness, a higher score indicates better personal wellbeing; for anxiety, a lower score indicates better wellbeing. The scores for each individual question are then grouped into categories, as outlined in table 1. More information on personal wellbeing in Northern Ireland can be found <u>here</u>.

Table 1

Life Satisfaction, worthwhile and happiness scores		Anxiety scores	
Score	Label	Score	Label
0-4	Low	0-1	Very Low
5-6	Medium	2-3	Low
7-8	High	4-5	Medium
9-10	Very High	6-10	High

The **self-efficacy** questions included in the CHS are:

- I can always manage to solve difficult problems if I try hard enough.
- I am confident that I could deal efficiently with unexpected events.
- I can remain calm when facing difficulties because I can rely on my coping abilities.
- When I am confronted with a problem, I can usually find several solutions.
- No matter what comes my way, I'm usually able to handle it.

The responses to these questions are on a 5 point likert scale which ranges from "strongly disagree" to "strongly agree". The responses are then scored from 1 ("strongly disagree") to 5 ("strongly agree") and summed across all five questions. This measure of self-efficacy therefore has a minimum value of 5, which indicates lower self-efficacy, and a maximum value of 25, which indicates higher self-efficacy. Self-efficacy scores are then grouped into a higher (scores from 18 - 25) and lower (scores from 5-17) categories. More information of self-efficacy in Northern Ireland can be found <u>here</u>.

Data on personal wellbeing and self-efficacy also feed in to the <u>Draft Programme for Government</u>. Confidence of the population aged 60 years or older (as measured by self-efficacy) feeds into PfG Outcome 8 ('We care for others and we help those in need') and the average life satisfaction score of people with disabilities feeds into Outcome 8 and Outcome 9 ('We are a shared, welcoming and confident society that respects diversity'). The latest position of all population indicators in the wellbeing framework, in relation to the draft PfG outcomes is available <u>here</u>.

6. Further Information on Loneliness in Northern Ireland

The Department of Health NI recently reported results on loneliness in their <u>2018/19 Health Survey</u> <u>Northern Ireland (HSNI) report</u>. The 2018/19 HSNI loneliness questions are based on the three-item version of the University of California, Los Angeles (UCLA) scale ("How often do you feel that you lack companionship?"; "How often do you feel left out? "; and "How often do you feel isolated from others?"). Responses to each question were scored and aggregated into a single loneliness score. Based on the recommendations published by the Office for National Statistics (ONS) in December 2018 on measuring loneliness, the 2019/20 HSNI also includes the direct question on loneliness ("How often do you feel lonely?") in addition to the 3 UCLA questions.

7. Future Development

Latent Class Analysis (LCA) will be explored further for future publications, to aid understanding of the links between variables and those most likely to be "more often lonely". Other areas for future development include the use of more questions, to explore additional variables and breakdowns by sexual orientation and ethnicity. In order to ensure statistically significant data and representative samples, a larger sample size would be beneficial, and this will also be considered.

8. Useful Contact Information:

This report is issued by:

Northern Ireland Statistics and Research Agency Colby House Stranmillis Court Belfast BT9 5RR Web: <u>www.nisra.gov.uk</u>

Statistical Contact:

Kimberley Gillespie (Lead Statistician) Statistical Co-ordination Branch Email: <u>Kimberley.Gillespie@nisra.gov.uk</u> Telephone: 028 9025 5469

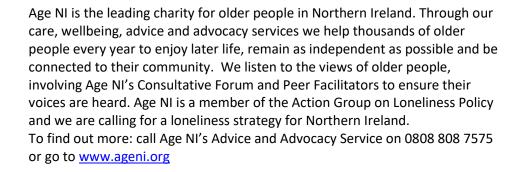
Annex 2: Useful Information for Those Feeling Lonely

There are wide ranging resources available in Northern Ireland for those experiencing loneliness. The following are some of the organisations which can offer further support and guidance:

SERVICES & CONTACT DETAILS

ORGANISATION





DCYPPP

The Disabled Children and Young People's Participation Project (DCYPPP) provides support to young people with a disability who are aged 8-25. This project gives young people a place to meet together, talk about the issues that are important to them, and participate in the planning process for issues and policies that affect them. Any young person can contact the team directly themselves or any professionals working with the young person can refer into the service.

Telephone: 028 3741 4541.

Young Carers

The Barnardo's NI Young Carers service provides individual and peer support for young people who are helping to look after someone at home in the Northern and Western Trust areas. The Young Carers service provides a place for young people to talk to a supportive adult or spend time together as a peer group. Anyone is welcome to refer into the Young Carers service, including young people themselves.

Telephone: 028 7963 1344



The British Red Cross is a volunteer-led humanitarian organisation that helps people in crisis, whoever and wherever they are. Telephone: 028 9073 5350 Website: www.redcross.org.uk





ORGANISATION



OLUNTEER

SERVICES & CONTACT DETAILS

Carers NI provide information, advice and support to those caring for a sick, elderly or disabled relative or friend. Advice line: 028 9043 9843 Email: <u>advice@carersni.org</u> Website: <u>www.carersuk.org/northernireland</u>

Volunteer Now is a regional organisation supporting volunteering across Northern Ireland, we have a NI wide database of volunteering opportunities, and can provide support to individuals wanting to get involved in volunteering by linking them to appropriate volunteer roles and organisations. Within the Community Projects team we offer a volunteer led befriending service for isolated older people living within the Belfast Health & Social Care Trust area and a door to door volunteer driving service for isolated older people to take them to a medical / health appointment or to a health and wellbeing service. Volunteer Now can also offer capacity building support to older peoples groups within Belfast.

Telephone: 028 9023 2020 Email: <u>info@volunteernow.co.uk</u> Website: <u>www.volunteernow.co.uk</u>

