

# **Welcome to the UKRI Loneliness and Social Isolation in Mental Health Network Launch**

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## Things that we know about loneliness and social isolation in mental health include....

- In the general population, being lonely puts you at risk for depression.
- Loneliness is associated with various social adversities – people with lower income, living in deprived circumstances are more lonely
- Rates of loneliness & social isolation are high among people with mental health problems, especially with depression and personality disorder diagnoses.
- Loneliness and social isolation are associated, but not very strongly
- Lonely people recover less well from depression (and possibly other mental health conditions)
- Lonely people are also more likely to develop a range of physical conditions, and to die earlier.
- There are interventions that seem to increase social participation and activity – loneliness is a harder target

## Things we don't know about loneliness and social isolation in mental health include

- In the population, is reducing loneliness a potential way to improve mental health?
- Are there specific risk groups (e.g. young people, disabled people, refugees), in whom tackling loneliness could be particularly good for mental health?
- How do people with mental health problems experience loneliness, and do the established measures capture this?
- Is it possible to reduce loneliness among people with mental health problems through any kind of intervention?
- Does reducing loneliness result in better outcomes among people with mental health problems?

# The UKRI Loneliness and Social Isolation in Mental Health

- UKRI – all the Research Councils together
- Eight networks commissioned in 2018
- Aim: to induce a step change in certain areas of mental health by creating networks
- Cross-disciplinary – perspectives from all/most of the Research Councils
- Cross-sector – NHS, Universities, PPI, voluntary sector
- Some plans to coordinate networks together
- Model: Network plus model used in areas like engineering, physics

## Our network aims

- Our overall aim is to establish a cross-disciplinary network to allow rapid advances to be made in understanding of the mental health impacts of loneliness and social isolation, and of how these may be alleviated
- Objectives include:
  - Creating links across areas and disciplines
  - Mapping evidence and research on key questions
  - Commissioning small projects that will seed further research
  - Giving rise to larger projects
  - Establishing an effective PPI voice regarding this topic
  - Developing early years researcher capacity & supporting careers of existing early year researchers
  - Engaging public

## Stage 1 Cross-disciplinary mapping & priority setting (first 18 months)

Collaborative mapping of evidence and current research on these questions, agreement on research priorities:

- A. What are the impacts of loneliness and of social isolation on mental health in the general population?
- B. Is intervening to reduce loneliness and/or social isolation a potential means of preventing mental health problems in the population? If so, what strategies are most promising, and should the whole population or specific risk groups be targeted?
- C. What is the impact of loneliness and of social isolation on people living with mental health problems?
- D. Is intervening to reduce loneliness and/or social isolation a potential means of improving mental health outcomes and the daily lives of people living with mental health problems? If so, which strategies are most promising?

## Stage 1 activities

- HR: two part time post-docs, PPI group, expenses.
- Start with launch and sandpit (M1-2)
- Rapid evidence synthesis on Network questions, including scoping current research (M1-18)
- Seminar series on topics for cross-disciplinary working (M1-18)
- PPI group-led investigation of service user experience & priorities (M1-8)
- Collaborative group meeting to reach consensus on targets and priority strategies for intervention (M9-18)
- Symposium on inter-relationships between mental health, loneliness, social isolation (M9)
- Symposium on potential cross-disciplinary strategies to prevent/improve mental health problems (M18)
- Online activities: sessions recordings and discussions, blogs, tweet chats.....

## Stage 2 Commissioning and conduct of Network Plus projects

- Months 19-36 (18 months)
- Series of small projects commissioned by network
- Any bidder
- Support in preparing bids, especially for ECRs and service user/survivor-led projects
- Potential to seed larger-scale work
- £450,000 pot.
- Post-doc continues in post to support, also PPI group
- At least two service user/survivor-led projects

## Stage 3 Dissemination and future planning

- Final conference
- Policy maker round table
- Three planning meetings to initiate large proposals
- Further outputs

# Disciplines

Epidemiology

Mental health care research

Sociology

Music

Art

Architecture

Geography

Service user/survivor research

Health policy

Peer support & social interventions

Neuroscience

Psychology

Theology

Engineering

Design

Anthropology

Sports science

Psychology of religion

Social psychology

## Questions for today

- How can we make this network as effective as possible?
- How shall we measure its success?
- How can we make it inclusive?
- Who should be included?
- What priorities should we focus on?
- What activities/sub-groups would it be helpful to establish?
- What can we do to support your research?

Your feedback please via:

- Leaves
- Post-launch on-line questionnaire
- Vox pop
- Talk to us