Mental illness and social isolation

The first in a new series of SANE Research Reports asking people affected by mental illness to give their views on issues which affect their lives – providing real-world evidence to support advocacy for improved services and attitudes . . .

Relationships with other people matters to all of us. For people affected by mental illness, though, social isolation – a low level of interaction with others plus loneliness – is far more common. As well as being distressing, it also makes it harder for people to cope with symptoms and any effects of psychiatric disability. This SANE Research Report investigates the extent of social isolation and its impact on people with a mental illness.

The survey was conducted in February and March 2005, using a convenience sample of 258 consumers and carers who completed a questionnaire face-to-face, by telephone or via the SANE website. The survey was intended to answer four key questions . . .

How common is loneliness among people with a mental illness?

The prevalence of loneliness reported was dramatically higher among respondents than in the general population. While around 10% of the population as a whole report feelings of loneliness (Victor et al, 2002), over two-thirds of those affected by mental illness reported feeling lonely ‘often’ or ‘all the time’.

Does mental illness make it harder to maintain close relationships?

People overwhelmingly find it more difficult to maintain close relationships after being affected by mental illness. Around 85% reported that it was ‘a bit’ or ‘much’ harder, with 8% reporting no change and 7% saying it was easier.

Having a mental illness can make it harder to maintain relationships for a variety of reasons. Stigma and misunderstanding in the community about mental illness can mean people are reluctant to engage with those affected.

‘The minute someone knows you have a mental illness, you are treated differently,’ commented one respondent.

Social anxiety and symptoms, such as paranoia, can also affect the ability to communicate and get on with others easily. Having a low income is another important factor contributing to social isolation. Living on a welfare benefit such as the Disability Support Pension simply does not allow much money for social activities.
How important are social relationships to managing one’s mental illness?

- 8% A bit important
- 4% Unimportant
- 26% Important
- 62% Very important

Friendships and social relationships are valued highly by people affected by mental illness, in helping them to manage symptoms and look after themselves. This may include practical support, people to socialise with and – very importantly – simply having someone to talk to about how they feel. Family members are especially important in fulfilling this role.

Almost 90% of respondents considered social relationships to be ‘important’ or ‘very important’ in helping to manage the effects of mental illness and maintain mental health.

How often do people affected by mental illness use community support services?

- 7% Often
- 7% Very often
- 14% Sometimes
- 26% Rarely
- 46% Never

Despite their important role, support services such as rehabilitation programs are little-used because of limited supply and lack of referral – 72% used them ‘rarely’ or ‘never’.

This is very concerning as there is a significant association between attendance and feeling less lonely and being able to manage one’s illness better. Another concern noted was that many programs do not provide pathways to integration with the local community, and may actually perpetuate isolation from society by their insularity in service provision.

Recommendations

1. **Rehabilitation programs**

   Urgent action is needed by the Australian and State governments to implement a systematic national network of recovery-based rehabilitation programs, as an integral part of the National Mental Health Strategy.

2. **Improved referral by clinical services**

   A primary reason for limited use of rehabilitation programs is the lack of referral by clinical services. Doctors and other health workers need training and support to refer people to rehabilitation and other community support services as part of their normal practice.

3. **Support for family and other carers**

   Evidence-based education, training and support for family and other carers needs to be implemented as an integral part of the National Mental Health Strategy.

4. **Training and support**

   Improved training and support is needed for workers in community support programs, so that they are able to provide more effective, evidence-based rehabilitation and promote integration with the local community.

5. **Action to reduce stigma**

   Renewed efforts are needed to improve understanding of, and attitudes towards, people affected by mental illness – encouraging a more inclusive community.

SANE Australia

A national charity working for a better life for people affected by mental illness – through campaigning, education and research. With thanks to the Pratt Foundation and the R. E. Ross Trust for supporting this initiative.

SANE Research Report 1:
Mental illness and social isolation
(August 2005) ISSN 1832-8385
PDF version available at www.sane.org