

JSNA Health and Wellbeing Profile 2025/26

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

- Between one-in-six and one-in-seven Bristol residents rarely or never feel close to other people,. This increases to nearly one-in-four residents who live in the 10% most deprived areas
- 46.5% of adult social care users in Bristol have as much social contact as they would like
- Amongst disabled people and people living in social housing loneliness is more than twice as prevalent than the city average
- Nearly 20% of males rarely or never feel close to other people, significantly higher than both females and the city average

Findings

Social isolation¹ 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 & over².

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 including background report which also covers health impacts³.

¹ 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.'

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

³ Research on health impacts is also at: www.campaigntoendloneliness.org/threat-to-health/

Loneliness

According to the 2024/25 Bristol Quality of Life survey, 15.2% of residents rarely or never feel close to other people, a slight decrease (improvement) on the previous year (16.1%). Prevalence is significantly higher than the city average in the wards of Central (27.7%) and Hartcliffe and Withywood (25.6%) and significantly lower than the city average in the wards of Redland (7.2%), Southville (7.1%), Westbury-on-trym and Henleaze (6.4%) and Cotham (4.5%) – see Figure 1

Previously reported indicators that provided an indicator of loneliness, namely ‘% who feel lonely because they don’t see family and friends enough’ and ‘% who see friends and family as much as they want to’ were retired following the 2023/24 Quality of Life survey.

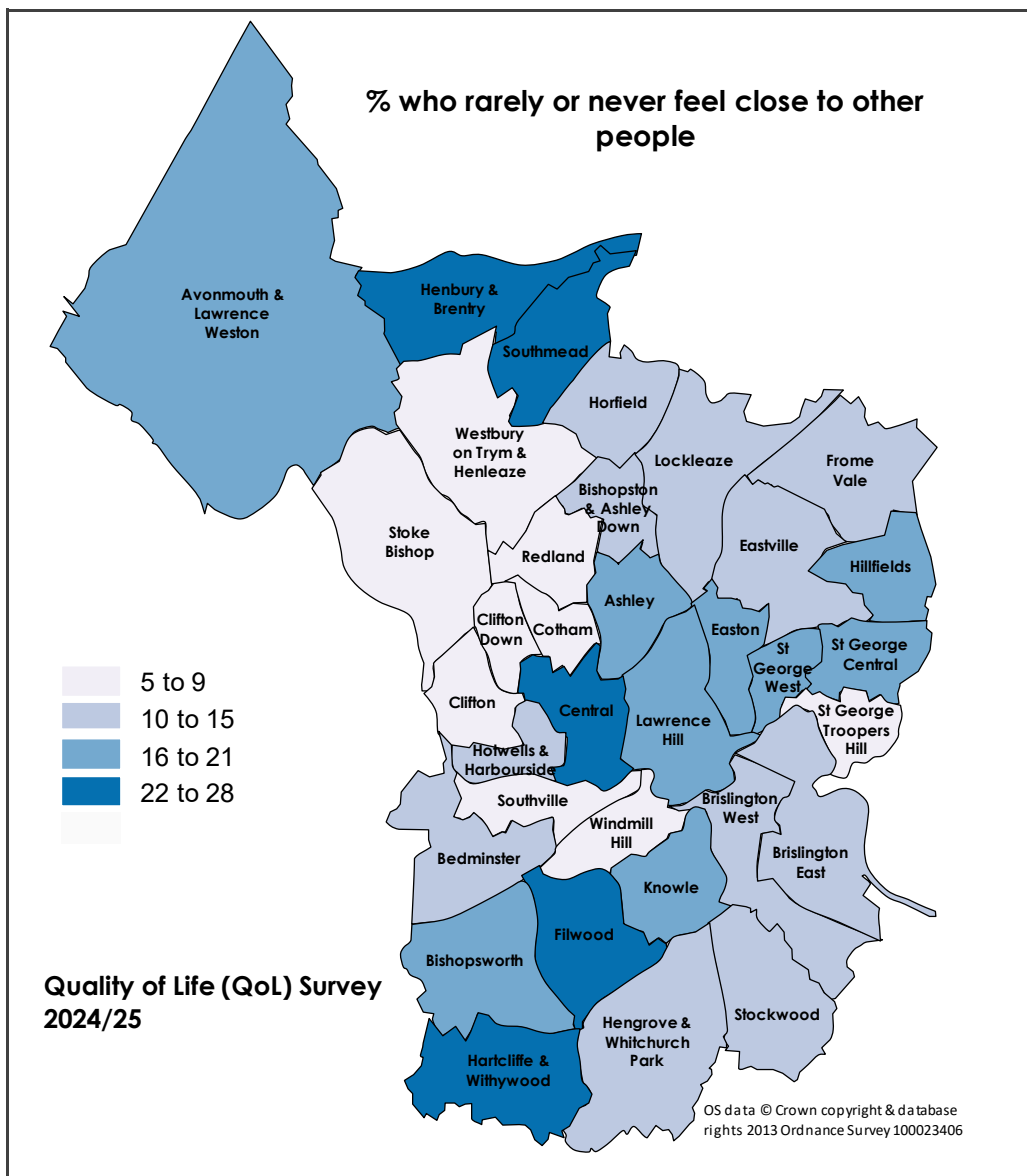


Figure 1: % of Bristol residents who rarely or never feel close to other people. Source: QoL survey 2024/25

Equalities data: Nearly one in four people living in the 10% most deprived areas in Bristol rarely or never feel close to other people (23.6%), higher than the city average (15.2%). Other equalities groups who reported the highest proportion of never / rarely feeling close to other

people include people living in social housing (39.5%), disabled people (29.7%), people renting from a housing association (26.2%), people with no qualifications (24.8%), full-time carers (23.8%) and residents of Asian / Asian British ethnicity (23.7%). Males were more likely to rarely / never feel close to other people than females (19.0% v 11.7%).

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.

Nationally, [Age UK](#) is one example where social isolation amongst older people is being addressed linking with local schemes such as [Age-friendly Bristol](#).

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%⁴.

In Bristol, 46.5% of adult social care service users (in 2024/25) said they “have as much social contact as they would like”, slightly higher than the national average (45.4%) - see figure 2. This is an increase on the previous year (41.8%) and ranks Bristol third lowest (of 8) when compared to the English Core Cities. Liverpool had the highest proportion of service users with as much social contact as they would like at 48.5% and Nottingham had the lowest at 38.7%

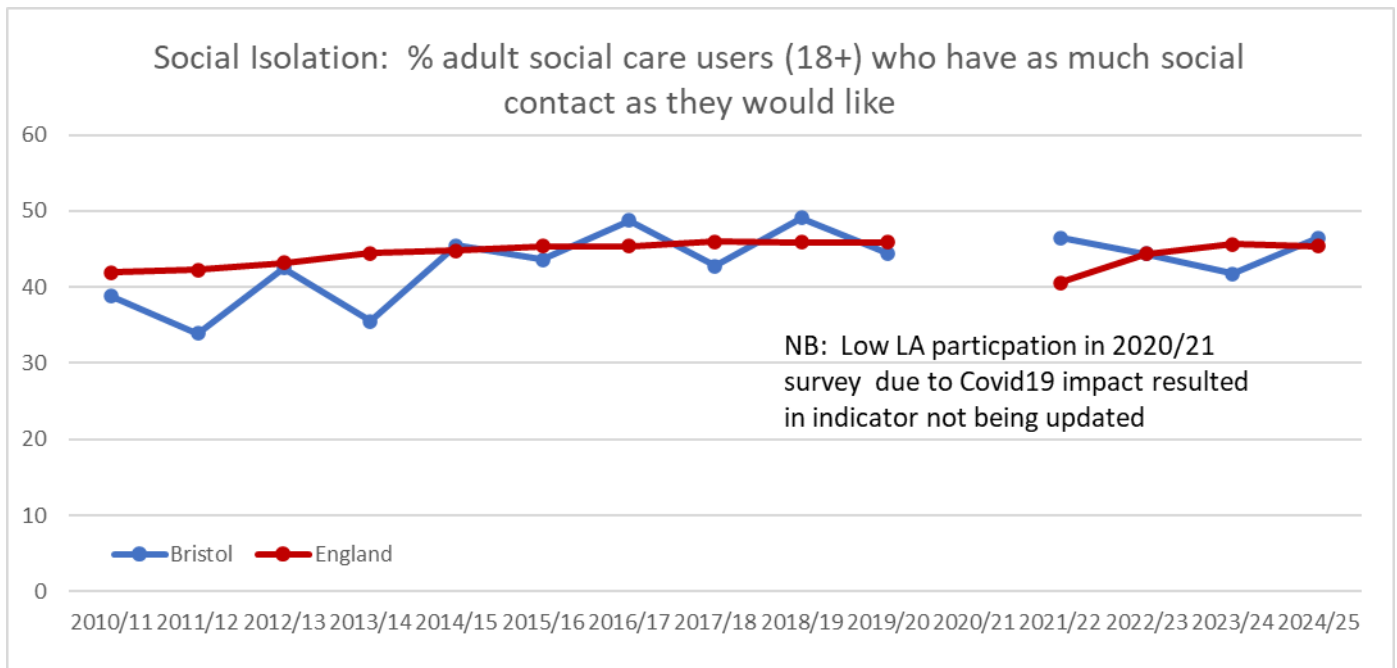


Figure 2: Source: Adult Social Care Survey via NHS Digital (November 2025)

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

Equalities data: National demographic data for 2024/25 showed that a higher proportion of younger social care users had ‘as much social contact as they want with people they like’ than older social care users, with findings ranging from 52.5% of 18-24 year olds and 57.8% of 25-34 year olds to 42.7% of 75-84 year olds and 43.8% of users aged 85 and over. By broad ethnic group, people of White ethnicity (46.3%) and Mixed ethnicity (46.5%) had the highest proportions of social contact and people of Asian / Asian British ethnicity (37.9%) and Other ethnicity (37.0%) the lowest. Demographic data was not available at LA level for 2024/25.

However, demographic data for Bristol in 2023/24 analysed 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 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 years⁵ and provides information relating to the social isolation of carers. The latest data is for 2023/24⁶ 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 (0%) of the 15 respondents aged 35-44 years old felt they had as much social contact as they would like which compared to 32 (38.1%) 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.

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

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

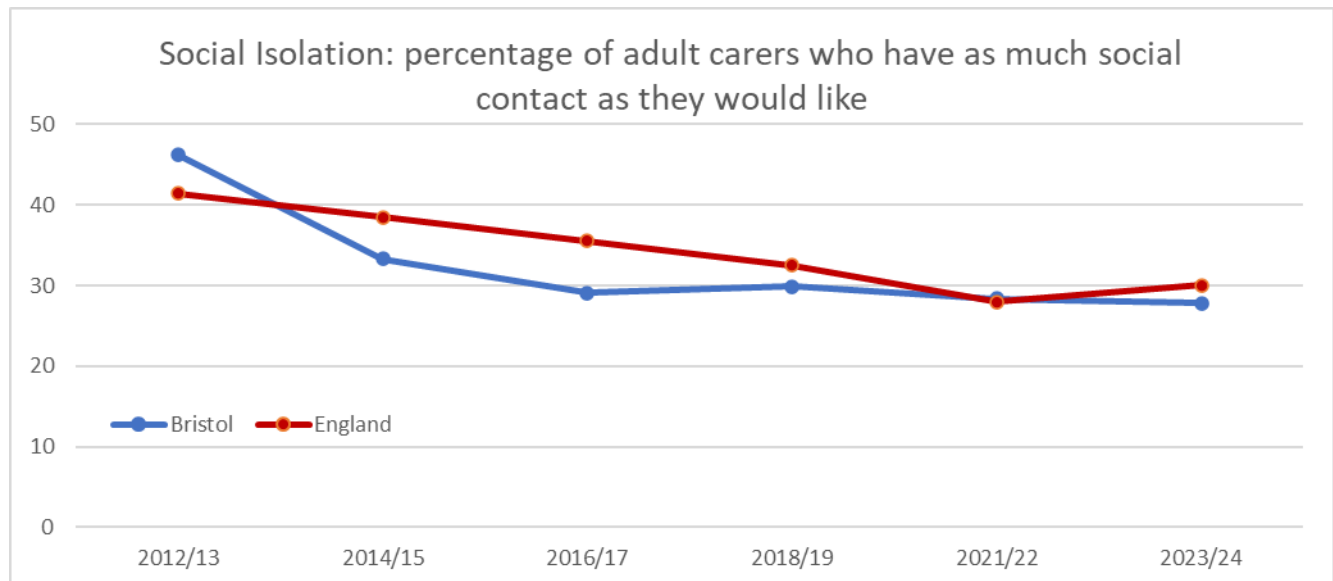


Figure 3: Source Personal Social Services Survey via NHS Digital (November 2024)

Covid-19 impact:

Research on loneliness during the pandemic had three main findingsⁱ:

- 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.
- 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

Further data / links:

- Research on health impacts are available at: www.campaigntoendloneliness.org/threat-to-health/
- Age UK: [Loneliness and isolation - understanding the difference and why it matters](#)

Date updated: November 2025

Date of next update: November 2026

ⁱ [Loneliness, social isolation and COVID-19 | Local Government Association](#)