

Research Translation Webinar: Social Isolation and Loneliness amongst people aged 45 and over in Central and Eastern Sydney

25 May 2022

Summary

- The Centre for Primary Health Care and Equity (CPHCE), UNSW in collaboration with their partners, held a research translation webinar to: highlight research findings; identify issues, successes and gaps in research and services; explore ways to maximise use of the research findings to inform policy and practice; and explore opportunities or activities to reduce social isolation and loneliness amongst people aged 45 and over.
- The webinar was facilitated by Tony Jackson from South Eastern Sydney Local Health District (SESLHD) Population and Community Health.
- The webinar included four presentations followed by small group discussions. Firstly A/Prof Margo Barr from CPHCE, UNSW summarised the latest findings from the research on social isolation and loneliness in people aged over 45 years using the Central and Eastern Sydney Primary and Community Health Linkage Resource (CES-P&CH). Then research translation examples were provided by Sarah Steen, Team Leader of the Boarding House Outreach service from the Newtown Neighbourhood Centre (delivered by Jude Page, Sydney Local Health District [SLHD]), Gareth Wreford from the NSW Department of Communities and Justice, and Matina Kremisis, Cheryl Bruce and Hang Trinh from the Riverwood Community Centre (delivered by Jude Page, Sydney Local health District (SLHD)). Each presentation featured examples of programs addressing social isolation and loneliness, highlighting where they have been informed by research.
- 'Breakout rooms' were used to provide participants' the opportunity to reflect on the presentations and to encourage discussion to explore ways to maximise use of the research findings to inform service provision. These discussions highlighted examples of how research can be translated into practice to strengthen collaborations between health services, primary care and the community.

Purpose of the research translation webinar

Following the Third Annual Research Priorities Forum in 2019, the impact of social isolation and loneliness was identified as a major issue requiring further investigation. The webinar, organised by the CPHCE, UNSW in collaboration with SLHD, SESLHD and Central and Eastern Sydney Primary Health Network (CESPHN), was to share our main research findings from the CES-P&CH to improve policy and practice, and to encourage discussion to explore opportunities or activities to improve coordination of care and reduce isolation among people aged 45 years and over who are socially isolated.

Nineteen people attended the research translation webinar, including participants from UNSW and the health sector partner organisations. Prof Mark Harris opened the webinar and stated how great it is to have forums like this that bring together academics, clinicians and policy makers where there is a shared area of interest and important real-life issues.

The webinar consisted of four presentations followed by small group discussions. The first presentation reported findings on demographic, social and health factors associated with social isolation and loneliness within the CES-P&CH cohort, while the following research translation presentations featured examples of programs addressing social isolation and loneliness from the Newtown Neighbourhood Centre, NSW Department of Communities and Justice, and the Riverwood Community Centre.



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Professor Mark Harris, Webinar Chair and Executive Director, CPHCE





A/Prof Margo Barr, CPHCE

Resources:

Link to the CES-P&CH webpage:

<https://cphce.unsw.edu.au/research/central-and-eastern-sydney-primary-and-community-health-cohort>

Social Isolation and Health Service Use Report:

<https://cphce.unsw.edu.au/>

Duke Social Support Index (DSSI) social interaction subscale:

George LK, Blazer DG, Hughes DC and Fowler N (1989) Social support and the outcome of major depression. *Br J Psychiatry*. 154:478–485.

De Jong Loneliness Scale:

De Jong Gierveld, J., & van Tilburg, T. (2006). A 6-item scale for overall, emotional and social loneliness: confirmatory tests on survey data. *Research on Aging*, 28(5), 582–598. <https://doi.org/10.1177/0164027506289723>

Latest Findings – Associate Professor Margo Barr

The prevalence of social isolation and loneliness among older people in Australia is estimated to be 17% and 19% respectively – and increasing. In 2017, the Australian Bureau of Statistics estimated that 962,000 Australians aged 75 years and over will be living alone by 2026. Social isolation and social connection have been studied extensively, both in Australia and overseas, with authors agreeing on the importance of social connection on wellbeing across one’s life span, and the detrimental effects of social isolation particularly in later life.

A/Prof Margo Barr from the CPHCE, presented findings from a recent study exploring the impact of social isolation and living alone on health service use and health outcomes in people aged 45 years and over in Central and Eastern Sydney using CES-P&CH data from 2010. This was compared to CES-P&CH data from 2020, which was updated to include questionnaire data on loneliness.

A/Prof Margo Barr stated that, while often used interchangeably, social isolation and loneliness are measured and defined differently. **Social isolation** is defined as an objective state of having minimal social contact with other people, while **loneliness** is the discrepancy between a person’s preferred and actual level of social contact. Within this study, social isolation was measured using the Duke Social Support Index social interaction subscale, while loneliness was measured using the De Jong Loneliness scale.

Descriptive analysis was conducted to examine the proportion of participants who were and were not categorised as being socially isolated for each socio-demographic and health factor, and for use of health services. Adjusted prevalence ratios with 95% confidence intervals were calculated using multivariable generalised linear models with Poisson family and log link function to identify which demographic, social, health and health service use characteristic factors were independently associated with social isolation and loneliness.

Table 1 provides prevalence rates and findings for the factors associated with social isolation and loneliness in 2010 and 2020. Note: There was no available data for loneliness in 2010.

Table 1: Factors associated with social isolation and loneliness in CES

	2010	2020	
		Social Isolation	Loneliness
	<ul style="list-style-type: none"> 19.6% of the cohort were classified as socially isolated. 	<ul style="list-style-type: none"> 41% of the cohort were classified as socially isolated. 	<ul style="list-style-type: none"> 43% of the cohort were classified as lonely.
		<ul style="list-style-type: none"> 25% of the cohort were classified as both socially isolated and lonely. 	
Demographic Factors:			
<i>Less Likely</i>	<ul style="list-style-type: none"> Aged between 60 - 84 years Female Having school certificate or higher Private Health Insurance 	<ul style="list-style-type: none"> Aged 65 and over Female Private Health Insurance 	<ul style="list-style-type: none"> Aged 85 and over Female
Social and Medical Factors:			
<i>Less Likely</i>	<ul style="list-style-type: none"> Living alone Being a parent Undertaking adequate physical activity Adequate fruit and vegetable consumption Consuming alcohol Needing help with daily activities 	<ul style="list-style-type: none"> Being a parent Undertaking adequate physical activity Consuming Alcohol 	<ul style="list-style-type: none"> Self-reported cancer
<i>More Likely</i>	<ul style="list-style-type: none"> Full-time worker Current smoker Self-reported poor quality of life Self-reported heart disease Self-reported anxiety 	<ul style="list-style-type: none"> Full-time worker Self-reported anxiety 	

The impact of social isolation on service use and mortality was explored using the 2010 data. When adjusted by age and sex, there was no difference in high service use (general practice attendance, emergency department attendance, overnight hospitalisations) or mortality for those who were socially isolated compared to those who were not. The association between service use and mortality using 2020 data is yet to be examined.

Research Translation – Sarah Steen – Team Leader – Newtown Neighbourhood Centre

Community centres are important multi-purpose hubs, giving people an opportunity to socialise, learn and access key services. They offer different things to meet community need, providing a vital place to visit for older members of the community, or people who feel socially isolated, allowing them to connect through activities fostered by volunteers.

Presented by Jude Page (SLHD) on behalf of Sarah Steen, the first research translation presentation featured programs addressing social isolation from the Newtown Neighbourhood Centre (NNC). NNC aims to build an inclusive, resilient, self-reliant and creative community. To support this, NNC provides community support services and assistance to people who are the most vulnerable, with a particular focus on those at risk of social isolation, homelessness and domestic violence.

NNC have a number of projects and teams dedicated to reducing social isolation in the Inner West community through community action and the provision of services to address their needs. The Centre is structured into 4 operational teams which provide a range of services. These are:



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Resources:

Link to the Newtown Neighbourhood Centre webpage:

<https://www.newtowncentre.org/>

The Homelessness Outreach Project

The Homelessness Outreach Project provides support to the homeless and residents of unlicensed boarding houses, or low-cost, low-quality accommodation. The project aims to create a sense of community and change perceptions and assumptions about people experiencing homelessness, with the goal to create a more caring, connected society who advocate for both the practical housing and service needs, as well as the importance of community connection for people experiencing homelessness.

The Community Linking Project

The Community Linking Project promotes social inclusion and community involvement by providing community linkages, social support and assistance to residents of Residential Centres, such as Assisted Boarding Houses for people with serious mental illness and Boarding Houses.

The Programs Team

The Programs Team run a Front Counter Information and Referral Service, manage community activities, Multicultural Neighbour Aid, the Shopping Service, and the Good Neighbour Program, where volunteers make regular home visits to isolated older people or those living with a disability.

The Administration Team

The Administration Team supports the operation of three service delivery programs: Homelessness Outreach Team, Newtopian Outreach Volunteers, and Individual Social Support. Examples of activities to reduce social isolation and loneliness within each of these programs are outlined below.

Homelessness Outreach Team

Team members found that many of the residents were feeling disconnected during the first COVID-19 lockdown due to the temporary closure of services, as this significantly reduced social interactions. The Homelessness Outreach Team were forced to think outside of the box, delivering food boxes, PPE, and entertainment such as crosswords and crafts. This allowed staff to safely check in with their clients, as well as make sure they had access to updated information throughout the pandemic.

Newtopian Outreach Volunteers

Newtopian Outreach Volunteers are largely responsible for monthly outreach within the Inner West and CBD. To maintain connections during the pandemic, volunteers used phone calls to interact with those who were struggling.

Individual Social Support

Individual Social Support is offered as part of NNC's Aged Care Program, targeting residents aged 65 and over, or aged 50 and over for individuals who identify as Aboriginal or Torres Strait Islander. The program has a specific focus on reducing social isolation amongst seniors living in the Inner West, connecting them with volunteers who offer general emotional support and friendship.



Research Translation – Gareth Wreford – Department of Communities and Justice

The second research translation presentation, delivered by Gareth Wreford, focussed on the Combatting Social Isolation for Seniors During COVID-19 Grants Program. In 2020, the NSW Government awarded more than \$700k in funding for projects aiming to reduce social isolation for seniors during COVID-19.

Grant applicants were asked to tailor their proposed projects and initiatives around guidelines requiring the inclusion of activities to reduce social isolation amongst people aged 65 years and over, or 50 years and over for individuals identifying as Aboriginal or Torres Strait Islander, through online engagement. These activities needed to lead to self-sustaining programs that provided meaningful and lasting social connection opportunities for older people who are socially isolated, or at risk of isolation. Grant applications were assessed based on relevance, impact, implementation and sustainability.

Twenty-four organisations received funding to deliver innovative programs that helped older people connect with each other through online engagement or other methods that maintain social distancing.

Successful grant recipients proposed projects that:

- Effectively addressed social isolation for seniors while reducing the risks from COVID-19
- Actively attracted seniors who were socially isolated or at risk
- could start immediately, or in a very short timeframe, by extending current capacity, systems and networks
- had a wide geographic spread, and were regionally or locally focused, community driven and online
- could show business continuity planning to keep the project running until the end of 2020
- gave value for money in terms of overall costs and the outcomes and benefits.

Following the success of the initial Combatting Social Isolation for Seniors During COVID-19 Grants Program in 2020, the Reducing Social Isolation for Seniors Grant Program was established in 2021. The NSW Government awarded \$1.2mil in funding for fifty projects to reduce social isolation for seniors, completed with two grant application rounds.

Gareth stated that many older people were still remaining isolated despite the high COVID-19 vaccination rate and the easing of COVID-19 restrictions. To combat this, funded projects sought to actively engage new people, particularly harder-to-reach socially isolated older people, and focus on bringing them together in person through small group activities (where possible) and enable them to develop quality relationships that can be maintained beyond these activities.

Resources:

Successful Grant Recipients

Lists of successful grant recipients, as well as a brief description of their programs can be accessed via the following links:

Combatting Social Isolation (2020)

<https://www.facs.nsw.gov.au/inclusion/seniors/overview/chapters/what-we-are-doing-under-the-strategy/combating-social-isolation/successful-grant-recipients>

Reducing Social Isolation for Seniors (2021):

Round 1

<https://www.facs.nsw.gov.au/inclusion/seniors/overview/chapters/what-we-are-doing-under-the-strategy/reducing-social-isolation-grant-program/successful-grant-recipients>

Round 2

<https://www.facs.nsw.gov.au/inclusion/seniors/overview/chapters/what-we-are-doing-under-the-strategy/reducing-social-isolation-grant-program/successful-round-two>


Research Translation – Matina Kremisis, Cheryl Bruce & Hang Trinh – Riverwood Community Centre

Presented by Jude Page (SLHD) on behalf of Matina Kremisis, Cheryl Bruce and Hang Trinh (Riverwood Community Centre), the third research translation presentation highlighted programs delivered by the Centre to reduce social isolation.

The Centre conducts community projects and supports community activities for the people of Riverwood and surrounding suburbs. Programs run by the Centre are structured to meet the needs of the broader community, as well as tailored to individual community groups. These include:

- Aged and Disability services
- Child, Youth and Family services
- Community Programs

The Centre community programs and aged services feature activities to facilitate social connection and reduce social isolation. The community programs aim to foster a sense of community and establish a healthy neighbourhood where people feel safe and connected, and the aged services support older people to live independently at home and participate in their local community.



Resources:

Link to the Riverwood Community Centre webpage:

<https://riverwoodcommunity.org.au/>

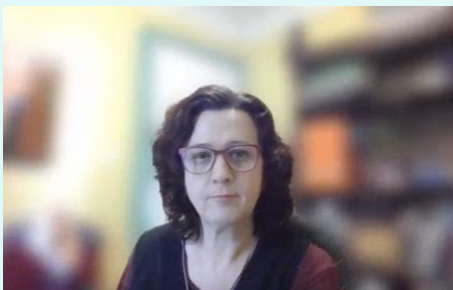
Community Programs:

<p>Community Information and Advice</p> <p>Riverwood Community Centre provides information, advice, and referral to relevant services. Information is tailored to meet the individual's needs and interests to keep them engaged with their local community. Staff and volunteers speak Italian, Greek, Spanish, Arabic, Polish, Vietnamese, Korean, Cantonese, Indonesian, Mandarin and Hindi.</p>	<p>Community Activities and Events</p> <p>Events are organised throughout the year to ensure everyone in the community has the opportunity to be engaged with people and opportunities in the area in which they live. Programs promoting social inclusion are offered weekly.</p>
<p>Community Garden</p> <p>Gardeners of all ages and experience levels are meet and share in the benefits of growing fresh, local and organic produce. Regular events such as harvest days and working bees are held to bring all gardeners together.</p>	<p>Men's Shed</p> <p>The Riverwood Men's shed is focussed on activities and opportunities that contribute to the health and well-being of men and women. Both men and women are offered the opportunity to work together on projects which benefit the local community. These include furniture repair, improving local amenities and participating in working bees at the community garden.</p>



Aged Services:

<p>Social Support Groups</p> <p>Social support groups meet weekly. They give older people the opportunity to meet others who speak the same language, share their cultural background, or share a common interest. They celebrate cultural events, share their culture with others, learn more about Australia, and participate in outings.</p>
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See links below for the presentations, program and summary report on CPHCE website:

<https://cphce.unsw.edu.au/news-events/events/2022/04/research-translation-webinar-social-isolation-and-loneliness-amongst>

Group Discussions

Following the presentations participants went to virtual breakout rooms where they reflected on the presentations and how they could use evidence to reduce social isolation and loneliness amongst people aged over 45 years. The discussions from the groups were fed back to the larger group by the small group facilitators: A/Prof Margo Barr, Dr Cathy O'Callaghan and Margaret Williamson. The facilitators stated that the group discussions provided ideas and initiatives to improve access, coordination and health care for older people. Key points from the small group discussions are summarised below:

- The presentations raised the issue of finding those who are experiencing social isolation or loneliness but are not reaching out for help. What can be done to connect them to appropriate services?
- The research findings are different to overseas studies given that there is not much of a link between social isolation and health service use or mortality. Further research should be conducted to confirm whether these results are particular to Australia.
- There is a disconnect between health and what is happening at a community level. The possibility of linking 45 and Up Study data with National Disability Insurance Scheme, My Aged Care and Australian Institute of Health and Welfare data should be explored to strengthen the link between health and community.
- The presentations highlighted the impact that community groups have on social isolation and loneliness. This may be attributed to flexibility, involving re-thinking and re-allocating resources internally
- Increasing access to services has the potential to reduce social isolation.

Closing Comments

Prof Mark Harris ended the session by highlighting the value of having forums that bring together academics, clinicians and policy makers where there are shared areas of interest and importance. He added that the research findings on health service use and social isolation may differ from findings from other countries due to potential barriers to service use, and that there is a need for better integration between health and social care. He also thanked everyone for attending and hoped that we would be able to hold the next Forum face-to-face.

"Simple solutions aren't what we need, we need sustainable solutions."
[Professor Mark Harris]