

Cross-Government Project to Reduce Social Isolation of Older People

Best practice guidelines



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Overview and purpose



These best practice guidelines have been developed as part of the Queensland *Cross-Government Project to Reduce Social Isolation of Older People*. The aim of the guidelines is to assist service providers, government agencies, and community groups in designing, implementing and evaluating projects to reduce social isolation of seniors. They summarise information about best practice strategies that can prevent or reduce social isolation. Users of the guidelines are invited to select, adapt and integrate the principles as they see fit for creating the most appropriate and sensitive response to their particular target group of older people.

The guidelines are one component of a suite of products from this Queensland Government initiative. These products are listed in Section 2 below.

The guidelines have been drawn from findings from the *Cross-Government Project to Reduce Social Isolation of Older People* including consideration of the following:

- > literature reviews (*project phase 1*)
- > local community forums, submissions and analysis (*project phases 2 and 3*)
- > an evaluation of five demonstration projects (*project phase 4*).

More detailed information on best practice principles and models of service provision is provided in the accompanying documents within this suite.

The Cross-Government Project to Reduce Social Isolation of Older People

Social isolation is a serious issue for seniors because of the detrimental impact it can have on health and wellbeing. The Queensland *Cross-Government Project to Reduce Social Isolation of Older People* was established in 2003 to improve our understanding of how best to respond to social isolation of seniors.

The primary goal of the project was to 'identify, develop and disseminate information on innovate, sustainable and community capacity building responses that reduce social isolation of older people in Queensland'.

The project involved five distinct phases and produced several related documents:

Project phase	Project focus	Related document
1	Research and analysis of current responses to social isolation through two literature reviews conducted by the Australasian Centre on Ageing, The University of Queensland.	Warburton, J & Lui, C 2007, <i>Social Isolation and Loneliness in Older People: A Literature Review</i> , Australasian Centre on Ageing, The University of Queensland, Brisbane. Findlay, R & Cartwright, C 2002, <i>Social Isolation and Older People: A Literature Review</i> , Australasian Centre on Ageing, The University of Queensland, Brisbane.
2	Identification of local responses to social isolation through community meetings, forums and a submission process.	Department of Communities (Queensland Government) 2005, <i>Cross-Government Project to Reduce the Social Isolation of Older People. Interim Report: Project Phases One to Three</i> , Brisbane.

3	Identification of innovative and effective approaches to social isolation based on research findings of phase 1 and 2.	Department of Communities (Queensland Government) 2005, <i>Cross-Government Project to Reduce the Social Isolation of Older People. Interim Report: Project Phases One to Three</i> , Brisbane.
4	Development, implementation and evaluation of five demonstration projects based on innovative and leading (best) practice models.	Department of Communities (Queensland Government) 2008, <i>Reducing Social Isolation. Evaluation of phase four of the Cross-Government Project to Reduce Social Isolation of Older People</i> , Brisbane.
5	Dissemination of information about best practice that prevents and reduces social isolation.	Department of Communities (Queensland Government) 2009, <i>Cross-Government Project to Reduce Social Isolation of Older People: Best Practice Guidelines for Projects Aiming to Reduce Social Isolation of Older People</i> , Brisbane.

Social isolation and older people

Social isolation is a multi-faceted construct that encompasses both social and emotional isolation. It can have adverse effects on both physical and mental health. Epidemiological studies have shown that social isolation is a significant risk factor for morbidity and mortality (Berkman & Glass 2000; Moren-Cross & Lin 2006). The size of this risk has been described as ‘comparable to cigarette smoking and other major biomedical and psychosocial risk factors’, although our understanding of the underlying causal mechanisms remains limited (House 2001, p. 273). Social isolation is also

These documents are available from the Department of Communities
www.communities.qld.gov.au/seniors/isolation.

recognised as a risk factor for depression and suicide (De Leo et al. 2000; Roehner 2007). In addition, socially isolated people are less likely to access health and support services and to engage in behaviours that can have a positive impact on their health and wellbeing (Hawkey & Cacioppo 2002).

Social isolation can be described as having two components:

- a low level of social interaction with others, combined with
- the experience of loneliness (Findlay & Cartwright 2002).

While the concepts 'living alone', 'being alone', 'social isolation', and 'loneliness' are closely related, it is important to understand that they are not identical. They are also culturally defined and related to social expectations (Warburton & Lui 2007).

Older people may vary considerably in the level of social interaction they prefer. Some people are content with limited but meaningful interactions, while others prefer a high level of interaction with many people. The presence of large social networks does not necessarily prevent feelings of loneliness or imply the presence of close and confiding relationships.

While people can become more socially isolated as they age, it is now thought that age (in itself) is not the cause of social isolation. Instead, isolation among older people most likely increases due to greater exposure to risk factors such as a disability and loss of friends or a partner (Warburton & Lui 2007).

Social isolation can also be understood within the broader context of 'social exclusion' and 'social inclusion'. Social exclusion among older people refers to an experience characterised by 'deprivation and the lack of access to social networks, activities and services that result in a poor quality of life' (Office of the Deputy Prime Minister 2006, p. 18). Over the past decade, social inclusion has emerged as a key policy concept in Britain, Canada and Australia for addressing social



inequality, poverty and disadvantage (Warburton & Lui, 2007, Office of the Deputy Prime Minister 2006).

Social inclusion can be considered across a number of dimensions:

- consumption (the ability to purchase good and services)
- production (participation in economically or socially valued activities)
- political engagement (participation in local or national decision-making)
- social relationships (integration with family, friends and community) (Warburton & Lui, 2007).

The focus of this approach is not just limited to material resources and economic participation, but also encompasses social ties, community integration and the wellbeing of seniors. The challenge is to address and reverse factors of deprivation and access, and optimise opportunities for seniors to have 'meaningful relationships and roles in mainstream society' (Warburton & Lui, 2007, p. 22; Office of the Deputy Prime Minister 2006).

Risk and protective factors

It is important to develop an understanding of the risk and protective factors that underlie social isolation in order to implement effective interventions and to identify those groups and individuals who are most likely to benefit from interventions.

Risk factors that can increase the likelihood of social isolation (Findlay & Cartwright 2002; Warburton & Lui 2007) include:

- poor physical or mental health
- being a carer
- being very old (over 80 years)
- being male

- experiences of loss (e.g. death of partner) or a lack of stability in relationships
- living alone
- elder abuse
- disability, including hearing and communication difficulties
- having a low income or educational level
- living in poor or deprived areas (with high crime rates)
- a lack of access to appropriate and affordable transport.

Groups of older people who are particularly vulnerable to social isolation include:

- people who are over 80 years of age
- older adults living in remote and rural areas
- older men living alone
- older people from cultural and linguistically diverse backgrounds
- older Indigenous people and Australian South Sea Islanders
- residents of aged care facilities and age rental accommodation
- carers.

For vulnerable older people, interventions that occur soon after a critical event or early during life transitions can help to prevent social isolation. Critical events that can impact on social isolation are:

- retirement
- loss of one's partner
- older people relocating to new communities
- sudden disability
- being a victim of crime
- suffering a series of falls
- loss of a driver's license.

Protective factors that may reduce the risk of social isolation in older people include:

- high income and education levels
- good health
- having a meaningful and diverse social network
- strong social networks with friends and confidants
- the number of close relationships with children
- long-term residence in a community
- having a spouse or partner.

Research suggests that the protective benefits of good health and a partner may decline over time (Warburton & Lui, 2007). By contrast, the positive effect of being involved in a meaningful social network, in particular one that incorporates friends and confidants, may offer more protection against social isolation in later life (Giles, Glonek, Luszcz & Andrews, 2005; Fiori et al., 2006). This finding suggests that initiatives that link older people to social or friend-focused networks may be particularly effective in reducing social isolation.

For easy reference, the best practice principles are presented against two levels of project design:

a. Overall project development and design

- knowledge
- design
- resources and management

b. Specific project elements

- process
- organisational aspects
- surrounding context

Other useful resources on community development, conducting evaluations and community consultation processes are provided at the end of this document.

Best practice guidelines for projects

Overall project development and design

knowledge	theory / evidence base	<ul style="list-style-type: none">• To be effective, interventions should be theoretically-based and focus on the underlying causes of social isolation.• Interventions should be underpinned by a clear program logic that shows how the intervention is expected to impact on risk and protective factors for social isolation.• When designing and establishing a project for the general older population, a specific target group, or specific individuals, it is important to:<ul style="list-style-type: none">– consider the extent of social isolation– identify and address underlying risk factors– acknowledge and enhance protective factors.
	evaluation	<ul style="list-style-type: none">• Evaluation should be an integral part of designing projects. It should be built into the project from its inception, not as an add-on at the end.• Service providers should be involved in the design of evaluations to ensure that data collection techniques are considered appropriate and feasible, thereby improving their 'buy in' to the process.• Staff need training and support to ensure that evaluation data is collected in a standardised unbiased manner. Workshops and clear data guidelines are useful strategies for training and support.• Evaluation findings can further contribute to the evidence base and theory underlying social isolation programs.

design	target (risk) group	<ul style="list-style-type: none"> • Projects are most effective when they target specific high risk groups and individuals. • Certain groups have been identified as being particularly vulnerable to social isolation and it is important that projects are responsive to their specific needs.
	intervention timing	<ul style="list-style-type: none"> • Interventions occurring soon after a critical life event or during a transition point for an older person can help to prevent social isolation.
	system response	<ul style="list-style-type: none"> • The complex range of factors underpinning social isolation in older people requires a holistic, integrated, and coordinated whole-of-community response. Services and projects should participate in and contribute to this system response. • A whole-of-community response requires shared commitment and collaborative practices across agencies, government and community for information sharing, aligning and pooling resources, collective goal setting, and agreed protocols and operational procedures.

resources and management	timeframes	<ul style="list-style-type: none"> • Projects require adequate timeframes in order to implement innovative community development and health promotion approaches. A period of at least 12 to 18 months is required for such projects to become established — tangible results should not be expected before establishment is complete. • Partnership building, network development, establishment of referral pathways, agency liaison and establishment of volunteer services all require allocation of considerable timeframes within the project design.
	funding and resourcing	<ul style="list-style-type: none"> • Funding of projects based on innovative community development and health promotion models should accommodate adequate timeframes and resourcing. • Projects that involve the establishment and maintenance of volunteer networks may require paid coordinators to undertake recruitment, training and supervision of volunteers. It is unlikely that such projects can be sustained without ongoing funding for a paid coordinator. Funding decisions should ensure that this aspect is examined carefully.

resources and management	sustainability / cost effectiveness	<ul style="list-style-type: none"> • The sustainability and long-term benefit of projects can be enhanced if there is a focus on community capacity building (for example, developing resources and skills within a community, developing support networks, or building the capacity of local organisations to respond to the needs of older people). • Simply bringing people together for short-term group activities may not be enough to build community capacity or to reduce social isolation in the long term. • If a project or service ceases, appropriate follow up should be arranged to ensure seniors are not left isolated and without support.
	governance	<ul style="list-style-type: none"> • Clear project governance that is established early in the implementation phase can: <ul style="list-style-type: none"> – speed up decision making – establish the legitimacy of decisions – reduce fragmentation and duplication of effort and resources – ensure effective communication, information flow, and shared understandings.



Specific project elements

process	participation, ownership, empowerment	<ul style="list-style-type: none"> • Older people should be involved in the design, implementation, and evaluation of a project. This gives older people control of the events around them, promotes ownership, and ensures that initiatives and decisions are informed by their needs and perspectives. • Communities need support to establish their own projects that will best meet local needs rather than having projects imposed on them.
	care and friendliness	<ul style="list-style-type: none"> • ‘A culture of caring’ must be an essential element of any project which intends to reduce the social isolation of older people. Older people are more likely to be attracted to and participate in projects when they feel welcomed and can enter into a secure, comfortable environment.
	relationships	<ul style="list-style-type: none"> • Establishing trusting and respectful relationships with the local community can increase project success. A community may respond well to a project manager who has come from within the community and has prior established relationships with them. • ‘Buddy systems’ or mentoring approaches within a project are most effective after a relationship of trust has been established between the buddy and isolated (or potentially isolated) senior.

process	action / goal focus	<ul style="list-style-type: none"> It is important that individuals are ultimately able to achieve the level of social independence which is appropriate and desired by them. Goal setting and action planning with a mentor can assist and support the older person to develop social skills and confidence across a graduated continuum of situations – for example: <p style="text-align: center;">  one-to-one outings small group outings mainstream events </p>
	diversity, inclusivity, flexibility	<ul style="list-style-type: none"> Projects should be socially and culturally appropriate, and tailored to specific needs of target groups and/or individuals. Multiple entry points into a project, and a range of project activities, give seniors the flexibility to participate in those aspects of the program that are of interest to them and/or happen at the time that most suits them. More than one project approach may be required to sensitively meet the diverse and culturally-specific needs of different groups. One model does not fit all. It is important to allow for and respect seniors' choice of social support methods with varying levels of social participation and connectedness (for example, alternatives to face-to-face communication such as computer technology and telephone).

process	diversity, inclusivity, flexibility	<ul style="list-style-type: none"> • Participation by older people can be enhanced through recognition of needs and preferences (for example, time of day an activity is held; needs of people with hearing impairments). • When designing a project for addressing social isolation in a target group of older people, consideration needs to be given to the fact that there are different cultural meanings for concepts such as 'social isolation' and 'ageing'.
	relevance, needs based	<ul style="list-style-type: none"> • Projects should be tailored to address local community and individual needs. • 'Using seniors' lives' (starting where people are at) as a foundation ensures project relevance. • Simply bringing older people together in structured group settings may not be enough to address their social isolation. Projects should offer meaning and purpose to participants — 'being together' is not necessarily a stimulus for social interaction.
	personal / social development	<ul style="list-style-type: none"> • Engagement in meaningful and purposeful occupation can enable older people to learn new skills, gain knowledge, feel socially valued and build self-esteem. • Engagement in group activities can foster social interaction between older people and across generations, and may lead to friendships that extend beyond the group especially if this goal is specifically facilitated.

engagement

- It cannot be assumed that all people have the skills to seek support, respond to written advertisements and/or be comfortable to accept services or visits from professionals. The challenge of engaging with hard-to-reach isolated older people requires creative and multiple approaches of outreach and communication.
- Complex systems of access will generally deter older people from engaging in projects and services. A single point of access (for example, a phone enquiry line or a one-stop-shop) for all projects and support options is more effective.
- Service providers need to be sensitive to the psychological barriers and stigma associated with some interventions and the psychological barriers that may prevent some older people from seeking or accepting help.



organisational aspects	drivers and champions	<ul style="list-style-type: none"> • The success of a project can be enhanced by recruiting project coordinators with demonstrated leadership skills who can develop respectful and trusting relationships with local seniors. • Seniors who are active participants in the project can become valuable roving ambassadors for the project, encouraging others to join and sharing information.
	organisational (internal) capacity	<ul style="list-style-type: none"> • The success of a project is enhanced by: <ul style="list-style-type: none"> – recruiting coordinators and staff with appropriate skills, values and knowledge (areas of skill may include community development, mental health or experience in working with seniors) – strengthening skills of staff and volunteers through the provision of relevant training (for example, understanding social isolation of older people; building community connectedness; leadership capacity; methods for friendship development; working effectively with specific high risk groups) and support (for example, professional mentoring; group supervision).

organisational aspects	partnerships (networks, pathways, alliances)	<ul style="list-style-type: none"> • Projects which involve service networking and alliances can enhance their success by ensuring that network members feel that they can benefit from their membership. • Cross agency/government partnerships can help to prevent agencies working in isolation. The use of steering committees or reference groups can be advantageous in facilitating partnerships and resolving local barriers to a whole-of-community response. • Strong networks among service providers can enable effective case management and referral pathways for socially isolated older people.
	building on existing services, resources, supports	<ul style="list-style-type: none"> • Projects which complement and build on the work of other existing organisations within the community can better achieve long-term effects and sustainability.

surrounding context	communication and awareness raising	<ul style="list-style-type: none"> • It is important to develop effective whole-of-community communication strategies to increase awareness (in older people and their families, and service providers) about services and opportunities for social participation. • Communication strategies should consider a variety of communication mediums (for example, word-of-mouth, coordinated cross-agency communication, information packs, one-stop-shop for information).
	access and infrastructure	<ul style="list-style-type: none"> • The ability to access social connections, activities, services and information in a community is a protective factor against social isolation. • The availability of appropriate transport, which enables seniors to have easy access to the project, is a critical factor for equitable participation. Lack of access to transport is a key barrier which can impact on social participation.

access and infrastructure

- Age-friendly and inclusive environments can improve the wellbeing of seniors and reduce the risk of social isolation. The quality of local neighbourhoods and the layout of physical infrastructure can affect mobility, independence and quality of life. Seniors who reside in disadvantaged and unsafe areas can be at greater risk of social isolation and fear of crime.
- Projects have the potential to contribute toward and/or raise community awareness about the importance of age-friendly, safe and inclusive environments including:
 - public and community transport
 - infrastructure such as footpaths, wheelchair access, lighting for public spaces, water and toilet facilities
 - keeping older people driving safely for longer
 - the accessibility of information and local services
 - financial barriers to participation.
- Gaining support from key local agencies such as the local council can stimulate action towards required infrastructure enhancements.

Resources and information

Designing and conducting evaluations

Shackman, G 2008, *What is Program Evaluation: a Beginners Guide*, viewed 6 October 2008, <<http://gsociology.icaap.org/methods/>>

Department of the Premier and Cabinet, *Criminal Justice Evaluation Framework: Guidelines for Evaluating Criminal Justice Initiatives*, Queensland Government, Brisbane, viewed 6 October 2008, <<http://www.premiers.qld.gov.au/policy/research/cjresearch/>>

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Community development

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Community consultation

Department of Communities, *Engaging Queenslanders: A Introduction to Community Engagement*, Queensland Government, Brisbane, 2005, viewed 6 October 2008, <<http://www.getinvolved.qld.gov.au/engagement/guides>>.

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Victorian Local Government Association, *Community Consultation Resource Guide – the ‘Red Book’*, Melbourne, viewed 6 October 2008, <<http://www.vlgaconsultation.org.au>>.

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Office of the Deputy Prime Minister 2006, *'A Sure Start to Later Life: Ending Inequalities for Older People'*, London: Office of the Deputy Prime Minister.

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