

SOCIAL ISOLATION TRAINING SESSION



Hamilton Seniors Isolation PIP

AUGUST 2016

OUTLINE / AGENDA

- **Module 1:** What is social isolation and why does it matter? (25 mins)
- **Module 2:** Informed Consent Module (15 mins)
- **Module 3:** Participant Recruitment Module (20 mins)
- **Open Discussion** (30 mins)



SESSION GOALS



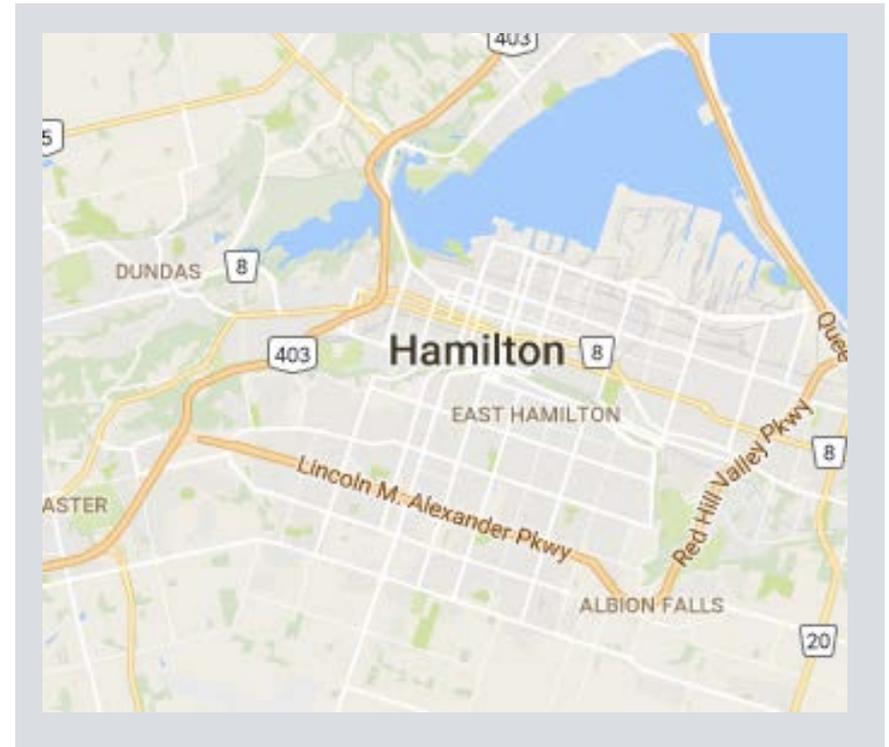
- Establish a common understanding of social isolation
- Understand the informed consent process with vulnerable populations

REMINDER: HAMILTON SENIORS ISOLATION PIP



Outcomes:

- increase the proportion of seniors who have support and **help when they need it**, by 20%
- increase the proportion of seniors who **participate regularly** in activities by 10%
- increase the proportion of seniors who **feel connected** to family, friends and acquaintances by 20%
- increase the proportion of seniors who **feel valued** by family, friends and acquaintances by 10%



WHAT IS SOCIAL ISOLATION?



Brainstorm

WHAT IS SOCIAL ISOLATION?



Social isolation occurs when a person has minimal social contact with good, fulfilling social relationships. As a result, people who experience social isolation typically lack meaningful social engagement with their communities, and do not feel a strong sense of belonging or fulfillment.

WHAT ARE THE RISK FACTORS FOR ISOLATION?



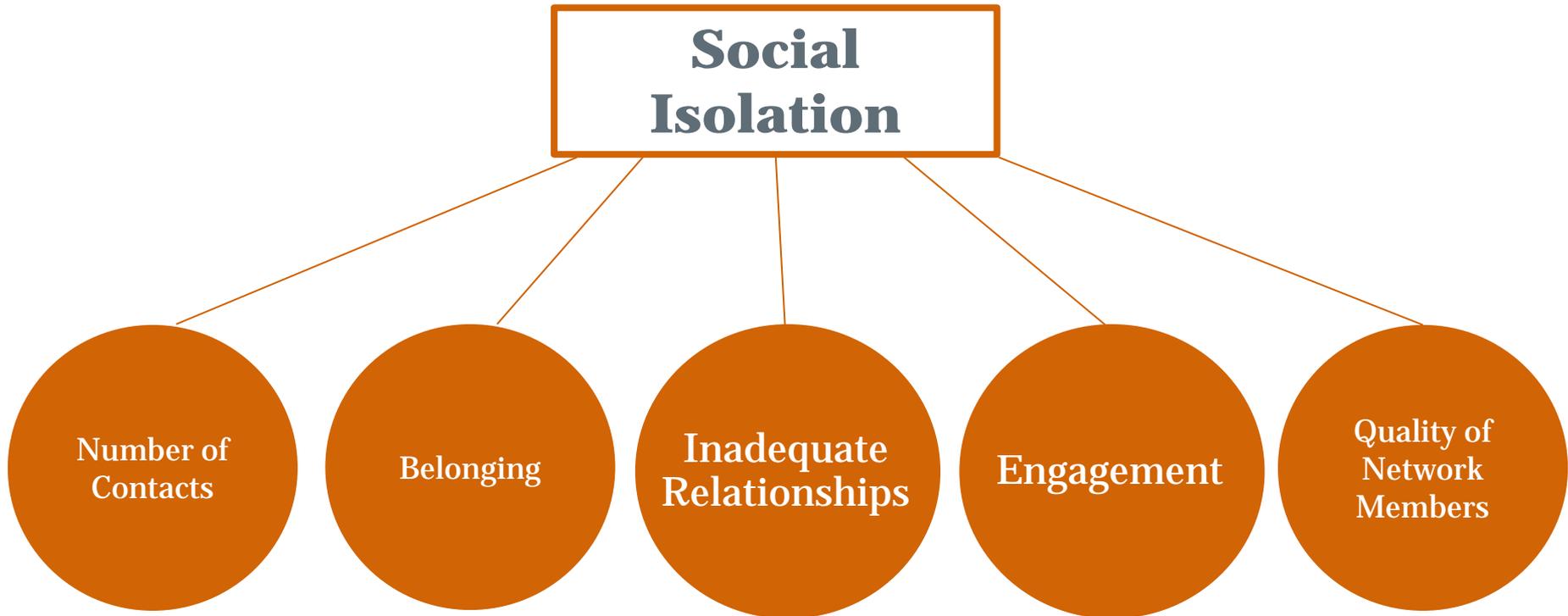
Personal Characteristics	Household & Family Characteristics	Community Characteristics
<ul style="list-style-type: none"> - Aged 75 or older^{1,2} - Complex health status, multimorbidities^{2,4} - Having no children² - Having mental health concerns^{1,5} - Being widowed or divorced¹ - Belonging to a minority group (including LGBTQ+ and racial minority groups)^{1,5} - Losing ability to drive¹ 	<ul style="list-style-type: none"> - Living alone^{2,4} - Low household income^{2,4,5} - Shifting family structures (e.g. children moving out)^{2,5} - Moving into residential care¹ 	<ul style="list-style-type: none"> - Poor access to accessible transportation^{2,5} - Physical barriers in community^{1,5} - Poor urban design^{1,5} - Lack of opportunities for social participation^{1,5}

WHAT ARE THE NEGATIVE OUTCOMES OF ISOLATION?

- **Individual level (social determinants of health)**
 - Increased risk of **premature mortality**¹
 - Increased risk of **cognitive decline and dementia**¹
 - Increased risk of **depression and suicide**^{1,2}
 - Increased risk of **loneliness and low self-esteem**¹
 - Increased risk of experiencing **elder abuse**²
 - Increased risk of **falls and hospitalization**²
- **Societal and community level**
 - Societies miss out on contributions of seniors
 - Inflated healthcare costs (although this is disputed)
 - “Weakening of social bonds” between generations¹
 - Older adults become increasingly “invisible”



FIVE KEY ATTRIBUTES OF SOCIAL ISOLATION



ATTRIBUTES OF SOCIAL ISOLATION



Number of Contacts

- Socially isolated seniors have small social networks
- This can refer to size of social network or number of close contacts
- May also refer to number of people that are contacted regularly

ATTRIBUTES OF SOCIAL ISOLATION



Belonging

- Socially isolated seniors may feel like they do not belong
- They may not feel integrated with their community
- Belonging is a subjective measure of isolation

ATTRIBUTES OF SOCIAL ISOLATION



Inadequate Relationships

- Socially isolated seniors feel that their relationships are inadequate
- They may also feel that their social needs are not being met
- This attribute takes into account the feeling of the older individual

ATTRIBUTES OF SOCIAL ISOLATION



Engagement

- Socially isolated seniors have insufficient social engagement
- This can refer to engagement at the individual and community levels
- Communities may not provide good opportunities for engagement

ATTRIBUTES OF SOCIAL ISOLATION



Quality of Network Members

- Seniors who are socially isolated do not have many good relationships
- Good relationships include people who are 'reliable'
- Good network members are also caring and not abusive

CLARIFICATION: ISOLATION VS. LONELINESS

- There are key differences between **social isolation** and **loneliness**
- People who experience loneliness may be isolated, but not necessarily alone
- Likewise, people who are isolated may or not feel lonely



THANK YOU



Learn more about the Hamilton Seniors Isolation Impact Plan:

Website: <http://socialisolation.ca>

Email: socialisolation@mcmaster.ca

Questions? Please contact Amanda Bradford-Janke at:

Gilbrea Centre for Studies in Aging
McMaster University
1280 Main Street West, KTH 201
Hamilton, ON
(905) 525-9140 ext. 24124
socialisolation@mcmaster.ca



REFERENCES



- ¹ Buffel, T., Rémillard-Boilard, S., & Phillipson, C. (2015). *Social Isolation Among Older People in Urban Areas*. Manchester, UK.
- ² The National Seniors Council. (2014). *Report on the Social Isolation of Seniors*. Ottawa.
- ³ Nicholson, N. R. (2009). Social isolation in older adults: An evolutionary concept analysis. *Journal of Advanced Nursing*, 65(6), 1342–1352. <http://doi.org/10.1111/j.1365-2648.2008.04959.x>
- ⁴ Kobayashi, K. M., Cloutier-Fisher, D., & Roth, M. (2009). Making Meaningful Connections A Profile of Social Isolation and Health Among Older Adults in Small Town and Small City, British Columbia. *Journal of Aging and Health*, 21(2), 374–397. <http://doi.org/10.1177/0898264308329022>
- ⁵ Elder, K., & Retrum, J. (2012). *Framework for Isolation in Adults Over 50*.
- ⁶ Canadian Institute of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada, *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, December 2014*. http://www.pre.ethics.gc.ca/policy-politique/initiatives/docs/Vulnerability_in_the_TCPS_-_ProGroup_Jan_2008_-_EN.pdf
- ⁷ Agency for Health Care Policy and Research (1998). *Measures of Quality of Care for a Vulnerable Population*. Retrieved March 29, 2009, from <http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-99-001.html>.