Addressing Loneliness and Social Isolation Sharing the Experience

A Research Summary

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ABOUT THIS RESEARCH

This booklet provides a brief summary of the research project 'Combating Loneliness and Isolation in Social Housing Estates', which was undertaken as a collaboration between Respond! Housing Association and University College Cork. The research was funded by the Irish Research Council New Foundations Scheme. It was carried out by Ms Lorna Kenny with support and oversight by Prof Cathal O'Connell and Dr Siobhan O'Sullivan of University College Cork and Shared Insight.

SHARED INSIGHT

Shared Insight is a partnership founded in 2013 to provide research, advocacy and training services to organisations in the voluntary, community, public and private sectors at reasonable cost. Promotion of human dignity and the empowerment of communities are at the heart of our ethos. Website: http://www.sharedinsight.ie/

1. INTRODUCTION TO THE PROJECT

Respond! Housing Association

Respond! is one of the largest providers of social housing and community services in Ireland. It was established in 1982 when Respond! took action to counter the numbers of older people in Waterford City that were living in poverty and extremely poor conditions. Since then, Respond! has provided over 5,500 homes throughout the country for families, single persons, the elderly, and people with disabilities.

Healthy Ageing

According to Census 2011 there are 535,393 people aged 65 years and over living in Ireland, which represents 11 percent of the total population. This age group has experienced the greatest growth since the 2006 Census. The majority of older people, 94 percent, live in private households and 6 percent live in communal establishments. While many older people live with their spouse or other family members, over one-quarter of older people live alone.

Healthy ageing in place is a key objective of the National Positive Ageing Strategy (2013-16) and has important implications for housing policy. Social housing is provided by local authorities and voluntary landlords to low income households who are unable to secure housing from their own means. While much of the discussion on social housing focuses on younger families, there is also a significant cohort of residents who are older persons, i.e. aged 65 and over.

Older residents of social housing are at risk of poverty but are also vulnerable to isolation, loneliness and social exclusion. This has far reaching implications for older persons' health and quality of life, broader community cohesion, and poses management and welfare challenges for social landlords.

Respond!'s National Strategy for Older People

As of 2013 Respond! has 895 properties which cater for older people and people with specific needs and requirements. More than 20 percent of Respond's residents are older persons; a figure projected to rise to over 30 percent in the next ten years. In 2013, Respond! published its 'National Strategy for Older People 2013-2016', which outlines ten aims and objectives to act as a guide for all staff working with older people in the organisation. According to the Strategy, Respond! encourages an environment informed by a positive ageing ethos.

Central to Respond!'s goals is ensuring that older people capable of living independently can access good quality, affordable homes throughout Ireland. Respond! aims to facilitate independent living by enabling and empowering older residents to participate within their families, communities and wider society. These goals are also important to those living in purpose built older persons' dwellings provided by Respond!

Why was this research undertaken?

Respond! conducted a review of its National Strategy for Older People after its first year, and decided to complement existing strategies with a more focused approach, particularly in terms of Aim 7: Tackling Loneliness and Social Isolation. It viewed the Irish Research Council scheme as an ideal opportunity to develop skills and knowledge in the area, both for itself and for the wider social housing community, through collaboration with the School of Applied Social Studies, UCC.

The research involved a review of literature in the area and six focus groups with Respond! staff and residents to explore their experiences and perspectives on loneliness and social isolation. The project aims to assist social housing landlords, both voluntary and local authority, to identify and develop strategies, supports, and interventions to prevent social isolation and loneliness among older tenants and ensure as many of them can remain living in their own homes for as long as possible.

2. UNDERSTANDING SOCIAL ISOLATION AND LONELINESS

Research Approach

The research explores Respond! resident and staff experiences and perspectives on loneliness and social isolation. The research aims to contribute to a growing evidence base on supports for older people addressing loneliness and social isolation and to guide good practice and future development.

In 2015, three focus groups were held with older residents of Respond! who are based in the South West and South East. Focus groups are commonly used as research method when conducting research with older people because they capture subjective lived experiences and allow for deep exploration of topics, including sensitive subjects.[i] Three focus groups were also held with Respond! staff from all over Ireland, including Resident Support Workers, Older Person Support Worker, Family Support Workers, Maintenance Staff, and Managers.

Defining Social Isolation and Loneliness

Social isolation is a state in which an individual lacks a sense of social belonging and engagement with others. A person may have a minimal number of social contacts or an absence of contact with other people and society.

Loneliness is a subjective experience that involves an individual's emotional response to their social connections. A person can feel lonely due to dissatisfaction with the frequency and closeness of their social contacts or loss of the companionship of an intimate romantic partner, family member or friend.

Many people across all age groups will experience or have experienced loneliness at some point in their lives. For some, it can be a chronic long-lasting experience, with negative impacts on their mental and physical wellbeing. For others, loneliness can be transient or passing without long-term negative consequences.

Although social isolation and loneliness may coexist in individuals they are not necessarily connected. For instance an individual may be lonely and not socially isolated, or socially isolated and not lonely.

> *Language has created the word 'loneliness' to express the pain of being alone. And it has created the word 'solitude' to express the glory of being alone*
> **(Paul Joseph Tillch)**

Prevalence of Loneliness in Ireland

Research by The Irish Longitudinal Study on Ageing (TILDA) explored the association between sex, education, health and loneliness across the age spectrum. It found that in general women are more likely to feel lonely than men and that healthier and more educated individuals are less likely to feel lonely.[ii] Several studies have documented the extent of loneliness among older people in Ireland. A 2009 study reported a prevalence of loneliness of 35 percent among 1,299 people over the age of 65 years living in their own homes in Dublin.[iii] A national telephone survey of 683 people over the age of 65 years identified low levels of social and family loneliness but relatively high levels of romantic loneliness.[iv]

> *Loneliness eats away at you over time. One can feel much destroyed.*
> **(Respond! Resident)**

> *Loneliness is a killer. It's a terrible fear for old people like me.*
> **(Respond! Resident)**

> *Feeling lonely is like being thrown in at the deep end with no one to save you.*
> **(Respond! Resident)**

Consequences of Social Isolation and Loneliness

Research clearly shows that social isolation and loneliness have significant impacts on both physical and mental health, particularly among older adults.[v]

A 2010 review of over 140 studies found that the influence of social isolation and loneliness on early mortality is comparable to well-established risk factors such as smoking 15 cigarettes a day, and has a greater impact than other risk factors such as physical inactivity and obesity.[vi] A 2012 Dutch study found that people who reported feeling lonely have a 64 percent greater risk of developing dementia in old age than those who did not feel lonely.[vii] Loneliness also increases the risk of high blood pressure,[viii] and for older people loneliness and isolation are associated with hospital readmission, and early admission to long term care.[ix]

Research conducted in Ireland found that both loneliness and social isolation were highly associated with depression.[x] As people become lonelier they may lose their confidence, and withdraw from their communities. Those communities then lose out on these individual's skills, resources and contributions.

It is therefore vital that health professionals, policy makers, the statutory, voluntary and community

> *Some people say to me: 'As you get older, you get more invisible'.*
> **(Respond! Staff)**

> *I have no brothers or sisters and I miss having close friends but I have lost a lot of friends, you see. Including my own husband.*
> **(Respond! Resident)**

> *Often the days can blend into another...I think if I knew I had a something on a Wednesday once a week or a trip every few months it would give me something to look forward to as well as more structure.*
> **(Respond! Resident)**

sectors, and the media take social relationships as seriously as other risk factors that affect physical and mental health.

Causes of Social Isolation and Loneliness

Research demonstrates that the prevalence of people feeling lonely 'sometimes' or 'often' is among the highest for those in mature adulthood and old age.[xi] Ageing often brings changes in social relationships as well as a need for adjustment to changing life and personal circumstances as individuals retire, experience changed financial circumstances, give up or modify activities due to ill health or lack of mobility, and suffer losses through bereavement, moving away or moving into new accommodation.[xii] These changes can bring about social isolation and feelings of loneliness.

Respond! staff further elaborated on a number of other features that contribute to social isolation and loneliness including societal and personal factors:

> *The younger generation doesn't involve the family, they have their own way. Even our own families are like that; my own family you hardly see them, they're going here and there. They're so busy.*
> **(Respond! Resident)**

> *I suppose as people get older...where your physical body is not able to be mobile so that creates isolation. And then you have physical barriers like in terms of our streets, our public transport systems, our public buildings. They create barriers for older people.*
> **(Respond! Staff)**

- Societal: access to transport, physical environment, participation in community, suitable housing, use of technology, fear of crime, a changing neighbourhood and society.
- Personal: poor health, sensory loss, loss of mobility, less income, bereavement, retirement, caring for another person.

3. TACKLING SOCIAL ISOLATION AND LONELINESS

Impacts of Social Involvement

People who are embedded in social networks and personal relationships experience a higher level of well-being than those who are socially isolated and they also tend to be healthier.

> *I think it's important to have a social grouping which allows you to express your interests and hobbies. One can get isolated without such things.*
> **(Respond! Resident)**

There is a wide-ranging literature on the positive impacts of social involvement and the maintenance of relationships. Physiological effects include increased immune function[xiii] and reduced cardiovascular damage because of emotional stress.[xiv] Being embedded within a social network also promotes health-enhancing behaviours[xv] and increases self-esteem.[xvi] The World Health Organisation has found that participation in leisure, social, cultural and spiritual activities in the community helps older people maintain self-esteem and create or develop supportive and caring relationships.[xvii]

Respond!'s Approach to Tackling Social Isolation and Loneliness

The focus groups with Respond! staff highlight the range of approaches Respond! undertakes to tackle social isolation and loneliness. Since 2008, Respond! has employed a National Coordinator of Services for Older People, responsible for the delivery of the Respond! Strategy for Older People and advocating for the rights of older people. This ten point plan is an effective guide and work plan for all staff who engage with older people and people with specific needs and requirements in their communities. When an older person first becomes a tenant with Respond! a personal profile is carried out by the Resident Support Worker to establish a clear picture of the needs of the older person. The Resident Support Worker will then develop a service plan for the older person based on these identified needs. Respond! endeavours to enable and empower the older person to live in their own home independently for as long as possible through the provision of essential support services.

Throughout the country, Respond! provides a wide range of educational, social and recreational programmes for its older tenants with help from the relevant statutory, community and voluntary agencies. Respond! works through an interagency and partnership approach, forging links with other services that support older people. These activities generally take place in the purpose built Community Buildings, Day Centres and Community Gardens in the tenants own communities.

> *It is about establishing strong partnerships. We as workers do not work in isolation, nor do we provide services in isolation. It's about collaboration, working together for the betterment of older people's lives ultimately.*
> **(Respond! Staff)**

Respond!'s community development approach focuses on developing the existing assets and relationships in the communities in which they work, and aims to build supports around those. Resident support workers and community development workers also aim to facilitate peer leaders who encourage other residents to engage in activities.

> *I think it's important about developing peer leaders to provide support to others in whatever age group. So for older people, that there's a peer leader there that is very positive and can encourage others.*
> **(Respond! Staff)**

Examples of Respond! Initiatives

Westland's Community Centre, Wexford

This centre has been operating in the Respond! designed estate for over two decades. The Centre opens daily and provides Go for life Group activities with games, gentle exercises and the all-important cup of tea and chat. This busy Centre also has a Book Swap 'library' in place where older people with mobility issues can take-a-book and leave-a-book. Everyone from the estate and the surrounding areas are made feel welcome by the friendly staff.

Respond! Community Allotments in Airmount, Waterford

The residents of the Respond! Housing Community in Airmount are busy growing all types of produce in their community gardening allotments. There are 27 allotments, a polytunnel and sensory garden in the Airmount community complex that cater for residents living in various Respond! estates throughout Waterford city. The allotments in Airmount are specially designed and are at a suitable height for older people and people with specific needs and requirements.

The Benefits Older People Experience Living in Respond! Housing

The focus groups with Respond! residents highlight the benefits of Day Centres, Community Buildings, Community Gardens and activities, contact with resident support workers and Respond! staff in general.

People feel they have the opportunity to participate in a range of activities, foster new relationships and friendships and feel like valuable members of their community. They can connect to others through group based activities based on shared interests.

For many residents this range of opportunities helps to alleviate their experience of loneliness and social isolation.

> *Respond! staff are easy to talk to and they understand.*
> **(Respond! Resident)**

> *If you wanted to talk to someone, you could come down here and there's someone that always comes along.*
> **(Respond! Resident)**

> *With the resident support we sometimes have a chat. We talk about memories and about people you know and years ago when we were young.*
> **(Respond! Resident)**

> *Everyone's on a first name basis here. There's a great sense of community since I came to live with Respond! And we keep an eye on one another. If anyone has not been present for a while, you'd enquire about them.*
> **(Respond! Resident)**

> *The garden keeps me going and you're learning stuff the whole time and I love the flowers and plants. We have a laugh and a joke and have good days and bad days. But I think it's great.*
> **(Respond! Resident)**

Tips for Developing Responses to Social Isolation and Loneliness

It is important to recognise that older people are not a homogenous group and that solutions are as diverse as the people. Thus, knowing the target population and assessing individual needs is essential.

It is also important to understand that loneliness and isolation may require different inputs. Interventions include information and signposting, support to individuals and referrals to therapeutic and psychological services, group interventions, and wider community engagement.

There is widespread agreement that to be effective interventions and services need to:[xviii]

- Consult with older people to explore what contributes to social isolation and feelings of loneliness and involve older people in the planning and delivery of services.
- Be flexible and adaptable.
- Build and make use of partnerships with statutory bodies and other organisations in the voluntary sector.
- And make every contact and every conversation count.

> *Look at the individual needs, instead of putting everyone under the same category.*
> **(Respond! Staff)**

> *We encourage people and support people to look more positively in their own lives no matter what age they are to see what contribution they can make.*
> **(Respond! Staff)**

> *We have experience in life and we should be listened to. I like to travel in the world. I worked all over the world.*
> **(Respond! Resident)**

> *We have an input to put in things. And to contribute is very, very important.*
> **(Respond! Resident)**

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