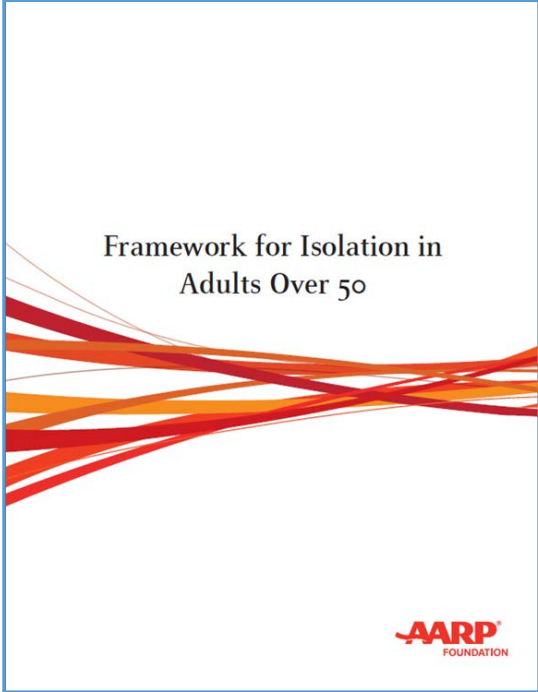


A Review of Interventions: Addressing Social Isolation in Older Adults

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Today

1. Discuss the background, methods, and results of project conducted.
2. List a variety of categories of interventions aimed to reduce social isolation and/or increase social connectivity in older adults.
3. Explain how to access details of 3-4 specific interventions that could be replicated.

Social Isolation in Our Later Years

- Consequences
- Previous Reviews of Interventions
- Current Review
 - Methods
 - What we found...
 - Recommendations for future research, practice and policies



In Our Later Years



www.griswoldhomecare.com

Consequences of Social Isolation

Social Relationships Matter

- A plethora of research tells us this



theflowchannel.com

Social Isolation and Health

- Morbidity
- Mortality
- Physical health
- Mental health

Coming from Different Angles

Research from several disciplines, **no one** definition, measure or solution to isolation exists.

Therefore, **difficult to determine the exact prevalence** of isolation.

Based on our “**best guess**” estimates indicate that isolation could impact **up to 17% of Americans 50+.**



www.ugotrade.com



srxawordonhealth.com

Previous Reviews of Interventions

Select Reviews of Intervention Studies

targeting older adults

- Findlay (2003)- 17
 - social isolation and/or loneliness
- Cattan et al. (2005)- 30
 - health promotion interventions that targeted isolation and loneliness
- Dickens et al. (2011) - 32
 - broad range of outcome measures relevant to social isolation
- Masi et al. (2011) - 50
 - Effectiveness of reducing loneliness- And they describe 4 previous reviews
- Cohen-Mansfield & Perach (2015)- 34
 - utility of loneliness interventions
- Khosravi et al. (2016) – 34
 - technology interventions impacting social isolation

Recently Published:

Chen & Schulz (2016)

- *Technology interventions to address social isolation: Information Communication Technology (ICT)*

Franck, Molyneux & Parkinson (2016)

- *Systematic review of interventions addressing social isolation and depression in aged care clients*

Shvedko, et al. (2018)

- *physical activity interventions for treatment of social isolation, loneliness or low social support in older adults*

Current Study

Review of Published, Peer-Reviewed Interventions: Addressing Social Isolation in Older Adults



www.wired.com

Original PURPOSE: create an interactive tool designed to serve as a resource catalog for evidence-based or promising practices to address loneliness and social isolation in older adults. **Project initiated by funding from the AARP Foundation.**

The ultimate goal of this project is to create a catalog of current interventions that is a simple to use reference for researchers, implementation scientists, social service program managers, clinicians, and others.

Project included a review of the literature and a collection and review of unpublished interventions.



When people connect, they affect
each other's lives.

LEARN MORE



<https://connect2affect.org/>

17%

of adults age 65 and older
are isolated

26%

increased risk of early death
due to subjective feeling of
loneliness

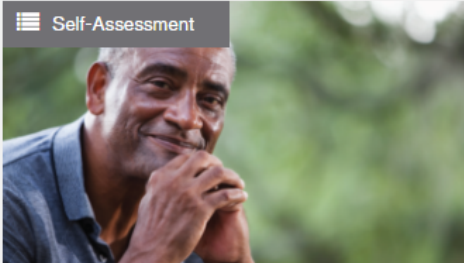
46%

of women age 75 and older
live alone

ARE YOU OR A LOVED ONE AT RISK FOR SOCIAL ISOLATION?
FIND OUT.

LATEST UPDATES

Self-Assessment



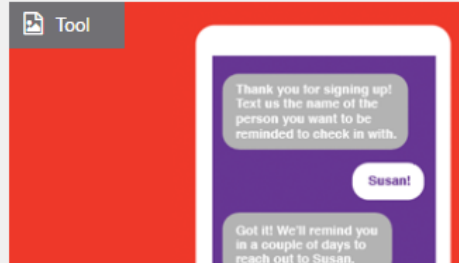
Self-Assessment: Is
Isolation Affecting Me?

Infographic



Assumptions vs. Reality.
See what's really going on.

Tool



Sign Up for Text Reminders
to Keep in Touch With
Loved Ones

<https://connect2affect.org/>

Method

Three phases

- 1) review and screen relevant literature from relevant databases representing a variety of disciplines,
- 2) organize and extract relevant information from each study for an audience to give the reader a quick understanding of the intervention and whether it might be something they'd like to learn more about and potentially replicate in some way,
- 3) coding each study to easily categorize them according to
 - a) target older adult population, b) level and type of intervention, and c) rigor of the evaluation done to assess impact. They were later coded based on the information provided to identify a) Target Population, b) Intervention Level, c) Intervention Type, and d) Rigor of the Evaluation.

Method

Phase 1: Systematic Review

- Data bases: Academic OneFile Plus, Academic Search Premier Plus, PsychINFO, and PubMed.
- Search terms:
 - intervention concept (e.g. intervention, activity, therapy, service, etc.),
 - social isolation/social participation/social inclusion outcome measure (e.g. UCLA Loneliness Scale, Lubben Social Network Scale, etc.) or
 - focus of intervention if measures were not used (e.g. loneliness, social isolation, social participation, social engagement, etc.),
 - adults over 50 were part of the sample (e.g. older, elder, older adult, etc.).

Method

Inclusion criteria:

- English language,
- published, peer-reviewed article,
- 1997-2017,
- study participants are over age 55;
- evaluates the impact of a program or intervention
- study design could vary (included randomized controlled trials, cohort studies, pre/post, post only studies, etc., the study reports on social isolation or social connectedness outcomes (measures)).
- Over 20 validated measures were also included in the search (e.g. UCLA Loneliness Scale, LSNS).

What we found....

312 articles identified after saturation

➡ 143 met initial screening

➡ 92 selected after closer review-- *evaluated the impact of an intervention*

➡ Developed inventory of published interventions

Articles were Categorized Based Upon

- Target Population
- Intervention Level
- Intervention Type
- Level of Rigor of Evaluation

Target Population

- General Older Population: no subgroups were targeted for the intervention if studies targeted women vs. men for example, but for no particular reason, it was given this code.
- Health Related Issue/ Condition: recipients of the intervention were targeted/ recruited because they have a diagnosed or suspected health or mental health condition.
- Vulnerable Group: recipients of the intervention were targeted/ recruited because they were considered at risk and/or because they belong to a socially vulnerable group (isolated, low income, minority population, recent loss or change, LGBTQ community member, etc.).
- Residents of a Setting that puts them at Risk (Skilled Care Facility, Assisted Living, Senior Housing)

Table of Target Population

Catalog	Totals	General Older Population	Health Related Issue/ Condition	Vulnerable Group	Residents in a Setting
Literature Review Interventions	92	37	7	31	17

Intervention Level

1. One-on-One
2. Group
3. Community

Table of Intervention Level

Catalog	Totals	One-on-One	Group	Community
Literature Review Interventions	92	27	41	24

Intervention Type

1. Intentionally Addresses Behavior and/or Cognitive Processes and/or Skills (e.g. therapy, training, education, direct formal service of some kind)
2. General Social Activity/ Opportunity for Social Engagement
3. Environmental Changes/ Introducing New Resources

Table of Intervention Type (note: not mutually exclusive categories)

Catalog	Totals	Intentionally Addresses	General Social Activity/Engagement	Environment Change/ New Resource
Literature Review Interventions	92	41	55	39

Level of Rigor of Evaluation

1. No systematic evaluation (anecdotal information only)
2. Formal evaluation completed but evidence not strong due to various reasons (very small sample size, weak response, incomplete data, qualitative design).
3. Formal evaluation completed with moderate evidence but design not as strong (no comparison group).
4. Formal evaluation completed with strong evidence (comparison group but not RTC).
5. Formal evaluation that was Randomized Controlled Trial/Experimental Group design.

Table of Rigor of Evaluation

(Scale of 1-5, 1=lowest e.g. anecdotal, 5=highest, e.g. RCT)

Catalog	Totals	1	2	3	4	5
Literature Review Interventions	92	0	18	22	31	21

Types of Interventions:

- **One-on-One:** Clinical treatment, Peer volunteers/mentors, Professional supports
- **Group Interventions:** Clinical treatment/ Support Groups, Shared activities
- **Community Level:** intentional community building, Modifying built environment, Community Education/ Awareness Raising

Catalogue of Interventions:

- social skills training, enhanced social support, increased opportunities for social interactions, and cognitive behavioral training
- environmental changes (transportation & neighborhood safety)

Examples of Interventions

Level: One-on-One

Intergenerational Program, *reading books to children* (Murayama, et. al., 2014), *“could serve as key health promoters among elderly people by decreasing the risk of social isolation and loneliness due to the greater sense of meaningfulness.”*

RCT (n = 80) (larger sample size needed)

Examples of Interventions

Level: Group

Physical Exercise Training (Tse, et. al., 2014),

“psychological well-being (happiness, loneliness, life satisfaction, and depression) of the experimental group was significantly improved ($p < .05$).”

RCT (n = 225)

Examples of Interventions

Level: Community

Café for residents (Andrew & Wilson, 2014), *“The café provided a myriad of opportunities for participation in relationships and the creation and maintenance of social networks. This participation reinforced a sense of self and of being ordinary.”*

N=11, Qualitative Study

Examples of Interventions

Level: Community (for Individual Use)

Patient-Led Assessment for Network Support (PLANS)
(Blickem et. al., 2013)

“tailors access to local resources based on personal preferences, needs and acceptability to encourage service users to engage with sustainable health choices”

Pilot Study

Trends in Intervention Effectiveness...

At First Glance...

- Interventions that specifically targeted socially isolated individuals, taken at face value appear to be less effective
 - Less likely to see improvement (no controls for more severe cases)
 - Rigor of design
- Multi-focused or multi-systemic interventions might be good option
- Active participation of older adult
- Interventions with a sound theoretical basis

Persistent Challenges

- Still limited number of studies on impact of interventions
- Shortage of RCTs/ Quasi-Experimental Studies
- Majority of Intervention Studies Measure Loneliness vs other
 - Much less focus on social isolation conceptualized in other ways
- Target either general community or “easy to find”
- Difficult to recruit truly isolated and lonely to RCTs or other evaluations

Recommendations

- Identify effective methods for finding and recruiting the truly hard to reach
- Risk Factors & Effective Interventions
 - Per population
 - For the most severe cases
- Target and screen populations based on risk factors
- Provision of a community based action plans that could address isolation in a preventative way

Reference List is Available

- Questions?

