Preventing social isolation in older people

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A B S T R A C T

The extent of social isolation amongst older people has emerged as a major concern for health and social policy. Although the social and health outcomes of social isolation are well documented, evidence regarding the prevention of isolation in later life remains scarce. This article addresses this by presenting the findings from a literature review focusing on the identification, assessment, prevention, and intervention strategies relevant to social isolation in older age. The paper first addresses the issues of identification and assessment, using an ecological framework to identify the risk factors for social isolation at four levels: individual, relationship, community, and societal. It then reviews different types of interventions to reduce or prevent social isolation in later life, including one-to-one, group, service provision, technology-based, neighbourhood, and structural interventions. The paper discusses both the opportunities and the constraints associated with these different approaches. The discussion highlights future directions for research, emphasising the need for a cultural change from 'cure' to 'prevention' of social isolation across the life-course, and the importance of acknowledging greater diversity within the ageing population.

1. Introduction

1.1. What is social isolation?

Social isolation can be defined as an objective measure reflecting an individual's lack of contacts or ties with others, such as family, friends, acquaintances and neighbours [1]. Social isolation is characterised as an absence or limitation in the quantity of social interactions. It is distinct from the related and subjective concept of loneliness which occurs when there is a perceived discrepancy between an individual's desired and achieved level of social interaction [1].

1.2. Why is tackling social isolation important?

Social isolation has been linked with a range of health problems in middle and later life. Individuals who are socially isolated have been found to be at greater risk of developing cardiovascular disease [2], stroke [2], depression [3], dementia [4], and premature death [5]. The mechanisms underlying the impact of social isolation on health remain unclear but are thought to include influences on health behaviours, sleep, exhaustion, and social connectedness [6]. Social isolation affects both individuals and the wider community. Health issues arising from isolation and loneliness lead to an increased use of health and social care services, and a higher number of emergency admissions and GP

consultations [7].

This review of the literature on social isolation covers four main areas: first, identifying those at risk of isolation in middle and later life; second, methods for assessing isolation; third, developing interventions aimed at preventing isolation; and, fourth, future directions for research.

2. Methods

This review article presents current knowledge of how social isolation can be prevented in older age. PubMed, PsycINFO, EMBASE, ScienceDirect, and CINAHL were searched for relevant articles using the following key terms: social isolat*, lonel*, social connect*, OR social relations AND reduc*, minimi*, less*, OR prevent*. Only publications written in English were included.

3. Identifying those at risk of social isolation

Social isolation often remains undetected as it is not routinely assessed in settings (such as primary care) that are well-placed to identify individuals who are at risk [8]. This section addresses the importance of increasing awareness of social isolation as it develops across the life-course and the central role of frontline professionals in assessing and referring high-risk individuals to appropriate interventions.

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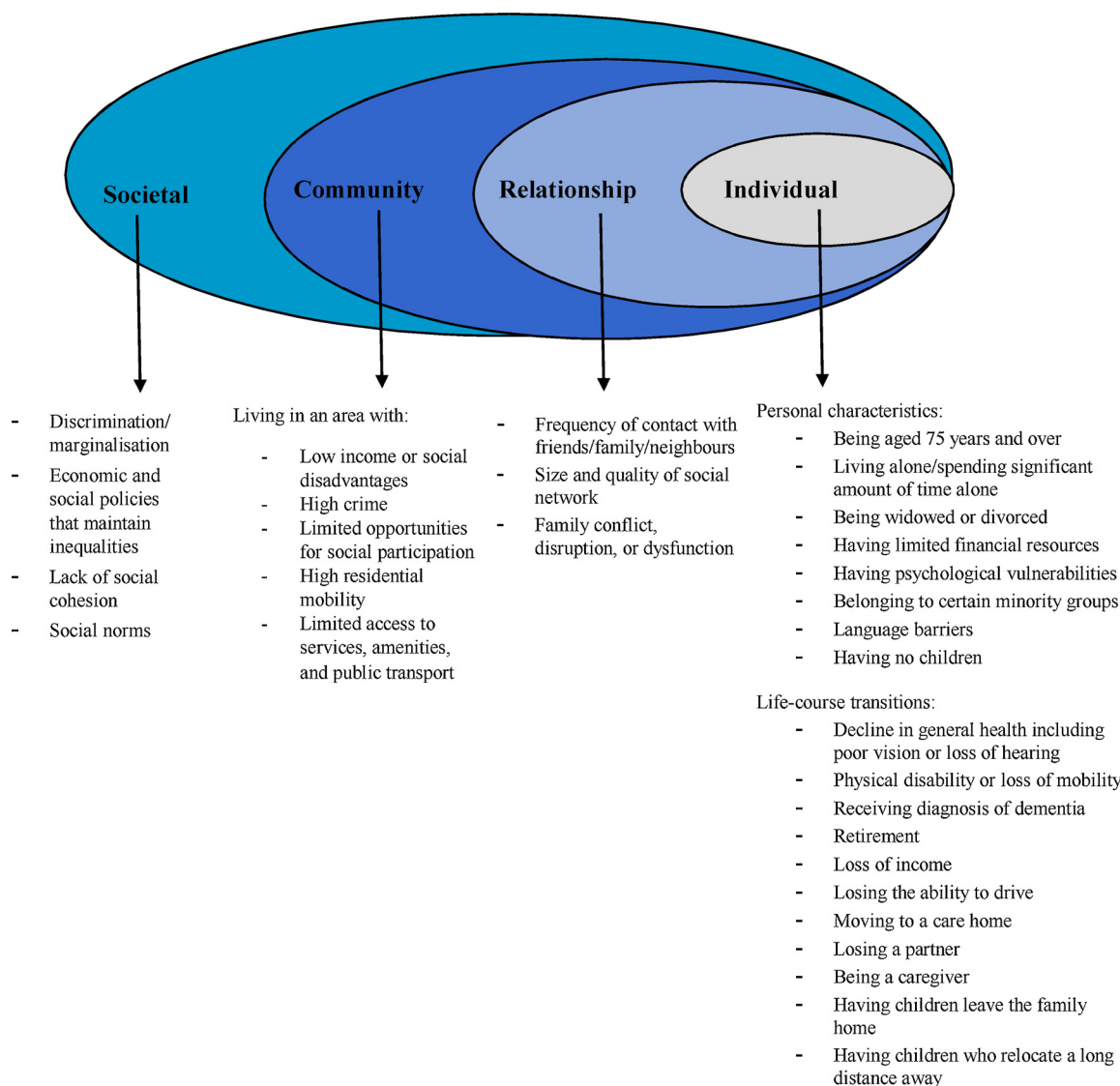
Fig. 1. The ecological framework: examples of risk factors for social isolation at each level.

3.1. Risk factors for social isolation

Most individuals experience feelings of loneliness or isolation at some point in their lives, although such moods may be transient with no long-lasting consequences. However, for some people they can persist with harmful effects on physical and mental health [9]. To understand the risk factors associated with isolation, it is useful to place the discussion within the context of an ecological framework [10]. This views social isolation as the outcome of interaction among multiple factors at four levels: *individual, relationship, community,* and *societal* (see Fig. 1).

At the *individual level*, certain *personal characteristics* and *life-course transitions* have been associated with a higher risk of social isolation. The former includes: being 75 years and over [11], living or spending a significant amount of time alone [11], having limited financial resources [12], having psychological vulnerabilities such as a learning disability [13], belonging to certain minority groups [14], language barriers [15,16], and having no children [1,16]. Life-course transitions associated with social isolation include: a decline in general health including poor vision or loss of hearing [11,12], physical disability or loss of mobility [12], receiving a diagnosis of dementia [17], retirement [18], loss of income [12], losing the ability to drive [19], moving to a care home [12,18], losing a partner [18], becoming a caregiver [18], and having children leave home especially if they move a long distance

away [11].

At the *relationship level*, personal relationships and social networks influence the risk of becoming socially isolated. For example, an individual who has little contact with friends and family is more likely to become isolated [20]. Moreover, individuals who have poor quality personal relationships or those who experience regular conflict, disruption, or dysfunction are also at increased risk [20].

At the *community level*, the contexts in which social relations occur influence the risk of becoming socially isolated. The community level factors that are associated with an increased risk of isolation are: living in socially disadvantaged areas [11], high levels of neighbourhood crime [8], high residential mobility [8], limited opportunities to participate in social activities [21], and limited access to services, amenities, and public transport [22].

At the *societal level*, structural factors influence whether social participation is encouraged or inhibited. The factors that increase an individual's risk of becoming socially isolated are: experiencing discrimination and marginalisation [23], having economic and social policies that produce and maintain socioeconomic inequalities [8], a lack of social cohesion [16], and social norms which discourage social activity [24].