Social Isolation in Older Adults

Dianne Davis, MPH
Vice President, Community Wellness
Partners in Care Foundation

Maureen Feldman, M.A.
Director, Social Isolation Impact Project
Motion Picture and Television Fund
Objectives

• Explore the scope of social isolation as a health issue, including risk factors, health consequences and financial implications

• Discuss the impact of COVID-19 on our vulnerable populations and identify those at increased risk

• Review evidence-based interventions and screening options

• Explore robust virtual and phone platforms currently available to address social isolation & loneliness in the era of COVID-19

CE Credits provided by Capital Nursing Education.

PROVIDER APPROVED BY THE CALIFORNIA BOARD OF REGISTERED NURSING/Provider Number 16028, approved for 1 CE contact hour/Provider: Kathleen J. Ellis
Our Mission

Partners shapes the evolving health system by developing and spreading high-value models of community-based care and self-management.
Loneliness or Isolation?

Thanks to Carla Perissinotto, MD, UCSF for slides.
Social Isolation and Loneliness: A National Problem

**Objective**

- **Isolation** is an objective lack of (or limited) social contact with others. It involves quantifiable measurements, such as the size of one’s social network (and the frequency of engagement with it), availability of transportation, and ability to access resources and information.

**Subjective**

- **Loneliness** (also known as subjective isolation) denotes how people perceive their experience and whether or not they feel isolated.

Source of Slide: Lynda Flowers, AARP Foundation, 2020
So, what is social isolation?

It’s the result of being disconnected from support groups of family, friends and community. **Risk factors and causes of isolation include:**

**Societal / Community**
- Limited/unaffordable transportation
- Rural, unsafe or inaccessible neighborhood
- Societal barriers (ageism or other forms of discrimination)

**Individual**
- A low income
- Being a caregiver
- Chronic health conditions
- Hearing/vision loss
- Retirement
- Limited mobility
- Living alone
- Loss of memory
- Loss of a spouse
- Living alone

**Source of Slide:** Lynda Flowers, AARP Foundation, 2020
Isolation is a health issue.

Research shows that the negative health effects of chronic isolation and loneliness, while harmful at any age, are especially dangerous for people over 50. Social isolation and loneliness are associated with:

- Higher blood pressure
- Increased susceptibility to the flu
- Greater risk of heart disease
- Earlier onset of dementia


SOURCE FOR GRAPHIC:

AARP Study on Social Isolation

Presented with the permission of
Lynda Flowers, AARP Foundation
It’s Deadly, But Is Social Isolation Costly?

- **Research Question:** The health consequences of social isolation among older adults are well known, but is social isolation **costly for Medicare**?
To Learn the Answer, They....

- Linked nationally representative data from the Health and Retirement Study (to derive social isolation) to Medicare claims data (showing actual beneficiary spending)

- We followed spending over an average of five years.
To Learn the Answer, They....

Controlled for factors known to influence Medicare spending:

- demographics
- health and functional status
- socio-economic status
- region
- living arrangement
- supplemental coverage
Major Finding
Social isolation increases Medicare costs by an estimated $6.7 billion every year.
Why Does Social Isolation Cost Medicare More?

Socially isolated older adults were:

- More likely to use skilled nursing facility care and when they did, they cost Medicare more.
- Not more likely to use more inpatient hospital care, but when they did, they cost Medicare more.
Costs to Medicare Could Be Even Higher

Total costs to Medicare could be higher, if you consider:

- Medicare prescription drug spending (Part D)
- Spending on younger Medicare beneficiaries with disabilities
- Spending on Medicare beneficiaries enrolled Medicare Advantage private plans
Millions of Medicare Beneficiaries are Isolated

We estimate that there were approximately 4 million socially isolated older adults in traditional fee-for-service Medicare.
Who’s Isolated?

Isolated older adults more likely to be:

- men
- depressed
- dually eligible for Medicare and Medicaid
- experiencing difficulties performing activities of daily living (bathing, dressing, etc.)
It’s Counter Intuitive!

• You might think that people who live alone or are single are more likely to be the socially isolated.

• That’s not what we found!

• That’s why it’s important to not exclude certain populations from screening.
Policy Recommendations
Step One: Identify the Isolated

Develop a valid and reliable tool to screen for isolation.

- Short
- Easy to use
- Usable in a variety of settings
Step Two: Develop Evidence-Based Interventions

- Private-public partnerships are highly desirable
- Interventions need to be culturally competent
- Explore feasibility and desirability of using technology
Step Three: Require Screening in Medicare

- Use Welcome to Medicare and Annual Wellness Visits to identify people who are socially isolated.

- Screeners should connect people to evidence-based interventions.

- The private sector will likely follow Medicare’s lead.
Step Four: Engage Public Health

• Recognize social isolation as an **important social determinant** of health

• Work towards population-level **surveillance**

• Disseminate public health messages to **overcome possible stigma**
Consensus Study: Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System

- Develop a more robust evidence base for effective assessment, prevention, and intervention strategies for social isolation and loneliness
- Translate current research into health care practices in order to reduce the negative health impacts of social isolation and loneliness
- Improve awareness of the health and medical impacts of social isolation and loneliness across the health care workforce and among members of the public
- Strengthen ongoing education and training related to social isolation and loneliness in older adults for the health care workforce
- Strengthen ties between the health care system and community-based networks and resources that address social isolation and loneliness in older adults
Platforms to Address Social Isolation & Loneliness; A Solution for Staying Socially Connected, While Socially Distancing

Maureen Feldman
Director, Social Isolation Impact Project
Maureen.feldman@mptf.com
MPTF was created by Charlie Chaplin, Mary Pickford, and Douglas Fairbanks who realized the need for reaching out to those in the entertainment industry who fell upon hard times.

The Motion Picture & Television Fund is a Charitable Organization

- MPTF offers assistance and care to those in the motion picture & television industries with limited or no resources serving over 150,000 individuals.

- Mission: To support our community in living and aging well, with dignity and purpose, and to help each other in times of need.
Solitary Confinement - Intended as the Harshest of Punishments

Maureen Feldman M.A., Social Isolation Impact Project
MPTF’S Scalable Model

AGENCY TOOLKIT
For Social Call Programs

VOLUNTEER TOOLKIT
For Social Call Programs
COVID-19 Response MPTF Has Trained Over 100 Organizations Nationwide
COVID-19 Response

• 40% growth since COVID-19
• MPTF has trained over 100 organizations nationwide
• Loneliness can be treated with intervention
• Social call programs connect people in need with key resources
• Social calls truly can be a lifesaving intervention
• Beneficial to both recipients and volunteers
• Establishes ongoing system of support
WHAT IS MPTF’s CallHub?

- Enables a broad network of organizations to rapidly mobilize a solution for older adults struggling amidst the global pandemic and volunteers looking to contribute from the shelter of their own home.

- A platform to facilitate safe, telephonic connections between volunteers and isolated older adults by leveraging, coordinating, and amplifying trusted networks.

- An open source utility allowing organizations to focus their efforts on managing their volunteer resources and effectively deploy them to the highest need without having to focus on underlying technical components or management of data.
MANAGE CALLERS & RECIPIENTS

The CallHub allows for efficient coordination and management of program outreach through an easy to use platform that allows for safe connections via the phone.
How It Works

1. Easily upload contacts to your CallHub Dashboard to begin to organize volunteers and outreach efforts.

2. Seamlessly manage matches between pools of volunteers and individuals in need.

3. Monitor on-going activity to ensure everyone is engaged and getting the attention they deserve.
Social call programs work in multiple communities and can include volunteers of all ages
A Simple Call Can Be A Lifeline....
MPTF Virtual Social Program Results

- Duration: 12 weeks
- Homebound participants
- Two facilitated group meetings per week + 1 peer only meeting
- 89% participation rate
- Loneliness Scores went down
- Discovered Tech isn’t scary
- # of support calls dropped over the course of the pilot
Facilitated activities

89% Participation rate

53 minutes average activity duration

Bi-Weekly Facilitated Meet
Support calls

Tech isn't scary – They got the hang of it

- The number of support calls declined after participants got comfortable with the technology.
- After three weeks most participants were managing on their own

Number of support calls per week

Week #1
A VIRTUAL HALF-DAY CONFERENCE

SOCIAL ISOLATION IMPACT SUMMIT

07.01.20  9AM-12PM PT

WATCH HERE
What Can Your Organization Do?

- Recognize the case for tackling social isolation & loneliness
- Create partnerships
- Work together to reduce stigma
- Leverage the power of older volunteers
- Start a program!
Los Angeles County
• 2017 Population
  • *10,100,000
  • 60+ > 1,800,000

Race (alone or in combination with one or more other races)
• White - 55%
• African American - 9%
• Asian - 16%
• Other race 20%
~48% Hispanic or Latino of any race

Disparities
• Ethnicity / Language
• Rural and Urban
• Vast variances in economics
• Gender
• Disabilities

Operations
• 250 Workshops per year
• 172 Partner sites
• 17 Full time staff
• 19 Volunteers

*ACS Demographic and Housing Estimates 2013 – 2017 American Community Survey 5-Year Estimates
Tips for getting and staying connected

We can all take steps to maintain and strengthen our ties to family and friends, expand our social circles, and become more involved in the community around us.

1. Nurture existing relationships. Invite people over for coffee or to go see a movie.

2. Schedule a time each day to call a friend or visit someone.

3. Volunteer to deepen your sense of purpose and connect with others who share your interests.

4. Get involved in fun group activities by visiting your local senior or community center.

5. Join a walking club to stay physically active. Include group exercise in the mix.

6. Take a class. You’ll learn something new and expand your circle of friends.

7. Say hello to your neighbors. Meeting new people in your community is a great way to connect with people of all ages.
Evidence-based programs we provide (Before & After COVID-19)

**Self-Management**
- Chronic Disease Self-Management
- Tomando Control de su Salud
- Diabetes Self-Management (English & Spanish)
- Chronic Pain Self-Management (English & Spanish)

**Fall Prevention**
- A Matter of Balance *(Piloting)*
- Tai Chi for Arthritis
- Tai Ji Quan: Moving for Better Balance
- Enhance Fitness *(Piloting)*
- Bingocize
- CAPABLE
- SAIL

**Exercise**
- Arthritis Exercise Program
- Enhance Fitness *(Piloting)*

CAPABLE and SAIL are 2020 ACL Grant Additions
Our Solution:
Continue with your core work . . .
In a new way!

Collect Data!
Campaign to End Loneliness:
1. I am content with my friendships and relationships.
2. I have enough people I feel comfortable asking for help at any time.
3. My relationships are as satisfying as I would want them to be.
Create Pathways to Health

Develop referrals among/between evidence-based programs with SDOH Add-Ons

- Arthritis Exercise
- CDSMP
- MOB
- Tai Chi
- Kitchen Divas

Celebration is Important!
Keep Moving Forward!

- Assess for social isolation and loneliness
- Refer individuals based on their needs and interests
- People are likely to require multiple solutions to stay engaged
- Partner with organizations with similar missions and values offering additional programs
- Collect data and measure outcomes
Ways organizations can help people fix broken connections:

- **Treat health issues that create barriers to connection.** Like fall prevention programs that increase balance, strength, and the confidence to go out more often.

- **Provide support through major life transitions.** Support groups can help someone feel connected while coping with a significant change.

- **Address societal barriers that exclude older adults.** For instance, policy changes that support an older workforce.

- **Ensure availability of services and support tailored to the needs of diverse communities.** Home-sharing models can make aging in place more affordable.

- **Create opportunity for affordable and accessible transportation.** Volunteer transportation services make it easier for older adults to get around their community.
It always seems impossible until it’s done.

Nelson Mandela
QUESTIONS?
Thank You!

Dianne Davis, MPH
Vice President, Community Wellness
Partners in Care Foundation

ddavis@picf.org
818.837.3775 (116)

Maureen Feldman, M.A.
Director, Social Isolation Impact Project
Motion Picture and Television Fund

Maureen.Feldman@mptf.com
818-876-1190

FOR QUESTIONS ABOUT CE CREDIT, PLEASE CONTACT:

Shield HealthCare
marketing@shieldhealthcare.com

Capital Nursing Education
capitalnursingeducation@gmail.com