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## **CONFERENCE ABSTRACT**

Young at Heart: A co-designed, community-based intervention to address loneliness and social isolation in a rural community.

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The proportion of older people in the population has risen dramatically in recent decades which is a major achievement for science and healthcare. Social isolation and loneliness affect up to half of the older population and have a negative effect on physical and mental health and life expectancy. They have been identified as risk factors with outcomes comparable to smoking, obesity and lack of exercise. Research has indicated that rural areas with poor infrastructure, where services such as banks, shops and post offices have been withdrawn may be particularly associated with isolation and loneliness. Ideas of a rural idyll may hide deprivation, poverty and low levels of wellbeing. The main types of interventions which aim to reduce social isolation and loneliness are group interventions, one to one interactions, technology based support, befriending schemes and visitor volunteers. These interventions generally take place in a community hall or in the participants own home. This research is based on a group intervention for older people (65+) living in a rural community in Northern Ireland. The project is called Young at Heart and has been co-produced and co-delivered by the participants. Following an initial call for expressions of interest, older people were asked to co-design their own 20 week programme of activities. This paper is based on an evaluation of this project. A qualitative approach involving one to one interviews and focus groups was undertaken with 40 participants. The main topics were the positive and negative aspects of the intervention, suggestions for enhancements and perceived benefits. Participants reflected on their self-perceived health status, mental health, quality of life and wellbeing. Thematic analysis was used to evaluate the data and the study was undertaken in a six month period. The study assessed the quality of the intervention, its cost effectiveness and the extent to which lessons were transferable. There is an urgent need for studies assessing the effectiveness of potential interventions to reduce social isolation amongst older people. This study has helped address this knowledge gap and inform an important public health issue. It also provides policymakers with better insights on how to tackle isolation and loneliness by identifying the transferable lessons from this case study. Participants particularly valued the opportunity to get out of their own homes and the opportunity to co-design the project. Loneliness is a complex issue and finding solutions can be highly personal. In this study multiple underlying causes of loneliness were identified including death of a spouse, distance from family, health-related issues, lack of transport, loss of confidence and unmet social expectations. Social contact that was meaningful, regular and allowed the forming or re-forming of relationships was highly valued, it was not contact but the quality of contact. Loneliness is not inevitable and can be reversed. There is no one-size-fits all solution, it comes in different forms and requires different responses. Strategic solutions that are co-designed and informed by the local context which recognise the causes of loneliness are needed.