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It's the Little Things: A Community Resource for Strengthening Social Connections

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IT'S THE **LITTLE** THINGS:

**A Community Resource for Strengthening
Social Connections**



CENTER FOR SOCIAL AND DEMOGRAPHIC RESEARCH ON AGING



IT'S THE **LITTLE** THINGS:

A Community Resource for Strengthening Social Connections

Authors: Caitlin Coyle, Shayna Gleason, Cindy Bui

Acknowledgments

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Without question, we must thank each of the members of the Massachusetts Task Force to End Loneliness & Build Community for their generosity, passion, and creativity. The mission of this task force is to ensure that every older adult in Massachusetts feels connected to the community and enjoys strong social well-being. This report is one of several initiatives prompted by the task force to help end loneliness and build community connections for older residents of the Commonwealth.

Members of the Massachusetts Task Force to End Loneliness & Build Community

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INTRODUCTION

The evidence is clear—being disconnected from other people has serious consequences for both mental and physical health.¹ The rapidly growing body of research related to the social determinants of health provides strong evidence that a connection to community and to others is paramount in preventing chronic illness and sustaining the ability to live independently. Ironically, there are international days of recognition,² multiyear campaigns,³ months of awareness,⁴ and entire organizations⁵ dedicated to promoting physical health and mental health—but what about raising awareness of social health, the dimension of well-being that results from connection and community? In addition to a lack of public awareness, there is little to no empirical evidence about what it takes to prevent or alleviate disconnection (e.g., loneliness or social isolation).⁶

The academic literature has had difficulty developing mechanisms for prevention and intervention that can be translated into practice, predominately a result of misaligned measurement or clinical constraints that make the programs difficult to implement at the community level. While the COVID-19 pandemic has prompted several comprehensive efforts to identify such mechanisms,⁷ many of them focus on national efforts and policy suggestions⁸—most of which fall short of being useful to the communities of individuals, neighbors, and providers that comprise the social fabric of a person’s environment. These local actors are the connectors.

Advancing age brings risks for becoming socially isolated or lonely, but the COVID-19 pandemic has exacerbated these risk factors beyond measure. While remaining physically distant from others is necessary to slow the spread of the COVID-19, these conditions can spark feelings of loneliness and depression.⁹ For these reasons, it is imperative that a variety of mechanisms for keeping older adults connected socially be developed during this pandemic.

There are so many ways to connect with each other. Some are obvious (e.g., friendly visiting, joining a club, or participating in a faith community) and some are less obvious (e.g., having access to transportation to attend social activities, connecting to a cause through volunteering, or saying hello to a stranger in the grocery store parking lot). While social isolation and loneliness may seem like straightforward problems, the causes and the context of the experiences are complicated and manifest differently for different individuals. It follows that the solutions also need to be diverse, multiple, and flexible.

The purpose of this document is to provide communities and residents with practical resources and ideas for building connections in their communities. We include both new ideas for building connections among neighbors, families, and friends, and also offer insights to strengthen existing opportunities for ALL residents to participate and be engaged.

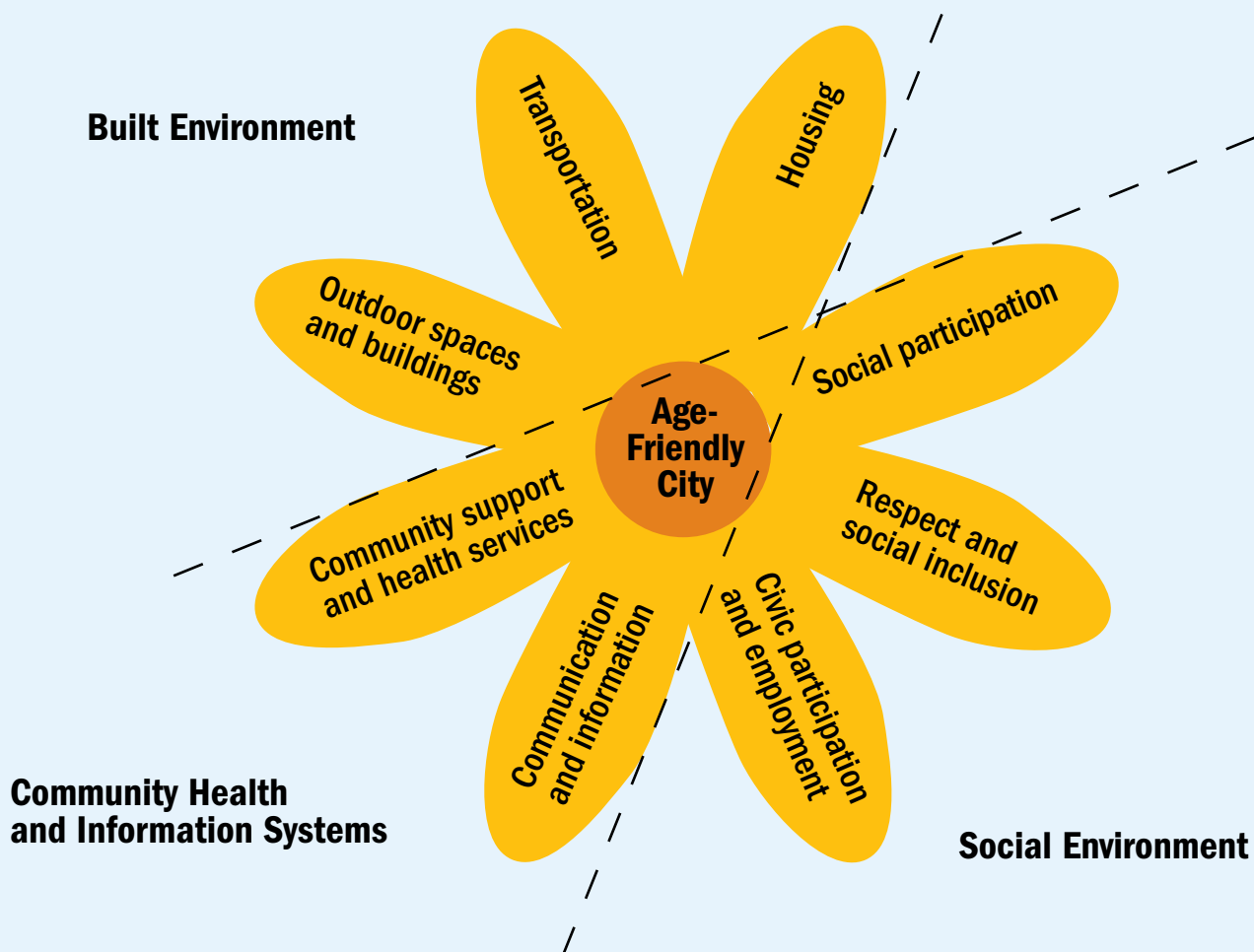


Although no “silver bullet” exists to remedy the devastating public health problem of social isolation, there is hope in the vibrant network of advocates, community organizations, and volunteers that is constantly innovating and adapting to meet basic needs (nutrition, housing, case management, economic supports) of older people in their spheres of influence. This report highlights ways in which the existing networks, programs, and systems can pivot to focus more on addressing social isolation among older community members.

Communities, however they are defined (e.g., neighborhood, building, population, or municipality), are in a unique position to effect change in the social lives of their members. For example, the World Health Organization's Age-Friendly Community framework was founded on the idea that communities directly influence the lives of older adults by improving access to opportunities for health, social connection, and dignity. Specifically, eight domains of an age-friendly community were identified (see Figure 1) as contributing to quality of life. Each of the eight domains also represents a key to the broader concept of *social capital*. Social capital is made up of

the social networks and interactions that inspire trust and reciprocity among citizens.¹⁰ Individuals with high levels of social capital tend to be involved politically, to volunteer in their communities, and to get together more frequently with friends and neighbors. The Age-Friendly Community movement is largely focused on increasing social capital for older residents by creating environments in which residents of all backgrounds and abilities have access to assets. Any community that is working toward a goal of becoming more age-friendly is therefore also building connections and reducing risk for social isolation and loneliness.

Figure 1. Age-Friendly Community Framework



CONSIDERATIONS FOR ENDING LONELINESS AND BUILDING COMMUNITY

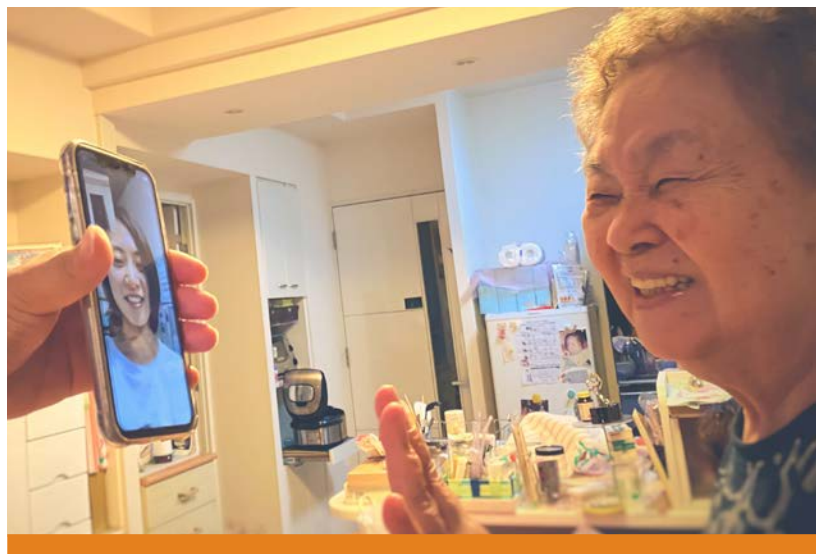
As awareness of the negative impact of social isolation and loneliness increases, so does the recognition that these conditions look different in each person. Given the diversity of experiences of isolation and loneliness, there will need to be several strategies to build connections in a community, from one-on-one interactions to meaningful group opportunities. Subsequently, these diverse sets of actions and interventions must also be the approach of a variety of stakeholders, groups, and people. For a community to be inclusive and supportive for residents with limited social capital, awareness and commitment to action is critical across sectors.

It can also be helpful to think about social isolation and loneliness not as problems to be solved, but as important contextual factors to consider when engaging older residents in community—a recognition that there are some with weaker social ties and support than others. Approaching isolation and loneliness in this contextual way widens the path to meaningful connection by recognizing that things like access to language translation, stable housing, and a walkable neighborhood can lessen social isolation and loneliness. In other words, by considering social context as part of a person's profile, indirect mechanisms can be leveraged to improve social capital.

Just as social isolation may be a consequential part of a person's life and experience, there are other important factors to consider when building social scaffolding in a community. Through thoughtful planning and intentionality, the following barriers to social participation can be managed.

Physical and Cognitive Capacity to Participate

As is commonly true when developing programming for populations that include older adults, physical and cognitive capacity is an important consideration. Changes to these capacities can spark feelings of loneliness or the experience of being isolated from others and, thus, make efforts to build social connections more complex. Physical or cognitive changes may keep individuals more homebound than they would prefer; in these situations, creating supportive transportation opportunities or in-home programs may be fruitful. Connecting individuals and families with others who are experiencing similar ailments or changes can also be powerful. By ensuring that interventions or programs aimed at providing support also promote social participation and relationship building, we reinforce sentiments of gain rather than loss.



Personal Preferences

Just as the experiences of social isolation and loneliness occur in vastly unique ways, the preferences for the amount and type of social interaction are just as varied by an individual's preference for interaction (i.e., group activities, one-on-one conversations, or casual interactions with strangers). The only universal “solution” to isolation and loneliness is to foster social connection or feelings of belonging. This may be a conversation with the cashier at the grocery store over a mutual love for bananas that makes one feel connected to another human in a small way, or the feelings of comfort and validation that come from another person understanding how it feels to care for a spouse with dementia. How we achieve this ultimate goal will not be uniform.

Negative Perception

What sorts of images come to mind when the words *social isolation* or *loneliness* are uttered? Are these images positive or negative? More often than not, these terms are associated with negative imagery and connotation. Interestingly, research has found that individual's self-shaming or guilt about feeling lonely or being isolated from others is stronger than their judgements of others being lonely or isolated.¹¹ This embarrassment makes it harder to admit being or self-identifying as someone who is isolated or lonely—and that reason alone makes developing a “tailored” solution difficult to implement. For some, isolation or loneliness has resulted from negative life events or personal decisions that are associated with painful emotion and trauma. Thus, it may be more successful to take aim at raising awareness of the importance of social health and developing mechanisms for a variety of types of community connection.



Transportation and Walkability

Access to opportunities for building and maintaining social capital relies heavily on one's ability to get around. Studies have found that people who live in more walkable neighborhoods are more likely to be socially and civically engaged.¹² In addition, while transportation to necessities like grocery shopping and medical care may be available, in many places there are gaps in transportation to meaningful social or recreational activities for persons who do not drive, who live in places where transportation is lacking, or for whom the available transportation resources are difficult to navigate.

Cultural Preferences and Language Capacity

Cultural and linguistic isolation are not new concepts, but these elements are crucial to promoting connection and quality of life.¹³ Access to information in a language that is compatible with one's background is crucial to participating in community. Thus, opportunities that reflect these preferences and abilities are necessary in building communities where all members feel a sense of connection.

Technology and the Value of Face-to-Face Contact

As recently as 2019, studies found that 40% of adults age 65 and older use social media as a means of gathering information compared with 90% of those under age 29 and 82% of those age 30–49.¹⁴ Other trends have emerged suggesting that among older cohorts, there are those who have access and means to navigate technology-supported ways of communicating and connecting, and there are those who lack access and knowledge to use such technologies. These disparities in access to technology are particularly challenging now, during the COVID-19 pandemic, when remote social connection is just about all we can expect. Not to mention, evidence suggests that while remote social connection can be convenient, especially in vulnerable times of illness, disability, or crisis, in-person social connection is more powerful for sustaining long-term feelings of belonging and social connectedness.¹⁵

METHODS USED TO HARVEST IDEAS

As a way to bridge the divide between the dire need for interventions that promote connection and the few such evidence-based examples, we sought the input of community stakeholders to develop “promising practices” that are rooted in the cities and towns of Massachusetts. In the spring of 2020, we convened four regional “community conversations” with providers of elderly services, community stakeholders, and resident volunteers to harvest ideas about how their communities are building connections both at the time of the conversation—in the midst of COVID-19—and before. We consulted with nearly 300 individuals in Western Massachusetts, Cape Cod and the South Coast, Merrimack Valley, and the Boston metro area. Each session included facilitated small-group work that generated more than 100 ideas for building connection among older residents. All ideas were recorded and developed by the authors of this report. In addition to these community-derived ideas, a review of the recent literature (2015–2020) was conducted to identify additional promising practices. Finally, in response to the COVID-19 pandemic, several national organizations convened conferences or produced reports that highlight ways in which individuals can connect socially with one another remotely, and these items were also included in our literature review. A total of 43 papers and reports were included in the literature review.



USING THIS REPORT

The intention of this report is to provide the seeds of ideas and examples of how solutions have been implemented in cities and towns. Ideas presented in this report are drawn from the community conversations and literature review described in the methods section above, and nearly all ideas have been linked to “real-world” examples. To be clear, these examples are not the only examples that exist, and we do not endorse any particular approach. We simply offer them to you as inspiration on your journey to community connection.

It is crucial to address social isolation and loneliness with a variety of approaches. In this report, we offer 9 types of approaches and more than 100 specific actions.

We acknowledge that empirical evidence of success or impact may not exist for each idea. However, it is with the innovation and creativity of communities and individuals that these ideas will bloom.

You’ll notice that not all ideas outlined in this report are explicitly related to social isolation or loneliness. That is intentional. In fact, included in the list of possible remedies to social isolation are several “indirect” approaches. Research on age-friendly communities underscores the impact of the built environment, access to information, and opportunities to connect with a larger purpose on a person’s sense of belonging.¹⁶ *By focusing on building connections, we can nurture social interactions that bring value to the lives of older adults living in the community.* This report is rooted in a concept of “connection first” which suggests that by prioritizing the development of social connection, addressing other existing needs becomes more natural.¹⁷ As you move forward in building opportunities for social connection in your community, it will be helpful to keep these factors in mind as a way of building intentional pathways to social connection that might not always appear direct.

Select a topic of interest.

Review the ideas for action.

Connect with those who have tried it already.

Adapt the idea for your community.

Try it out.

Demonstrate the impact it had on your community!



MEASURING IMPACT

When it comes to reducing feelings of loneliness or experiences of social isolation, measuring change is hard. It's hard because people don't like to identify with the word *lonely*, so questions like "How often in the last two weeks did you feel lonely?" fall flat. It's also hard because the process of becoming socially isolated can be complex, long-standing, and deeply emotional—which means that although you have brightened someone's day through your work, you haven't changed their past.

For these reasons, we encourage communities to consider documenting the positive outcomes of their work as opposed to measuring change in social isolation and loneliness. Outcomes could include the number of new friendships that were forged during the intervention, the occurrence of feelings of belonging or inclusion, or a strengthened sense of community.



IDEAS FOR REACHING OUT

*Click on an icon to navigate
to the desired topic.*

**Transportation-Focused
Initiatives**

**Information Sharing and
Resource Connection**

**Multicultural Approaches to
Building Social Connections**

**Connection-First Volunteer
Opportunities**

**Health- and Wellness-Oriented
Opportunities to Connect with Others**

Intergenerational Approaches

Building Community Cohesion

Reaching the Hard(er) to Reach

Internet-Based Innovations





Transportation-Focused Initiatives

Getting to and from destinations in the community is critical to maintaining and building social relationships—not to mention accessing necessities like food, medication, and health care. Because transportation touches many aspects of a person's life and is a tangible way to feel connected to one's environment, it is important to consider ways of ensuring that as residents age or become frail, they continue to have options for mobility. Ideas in this section offer suggestions for approaching social connectedness from the pragmatic vantage point of transportation.

- **Learning flows between generations.** Leverage ride times for intergenerational engagement. Ask student interns or volunteers to ride paratransit or senior shuttle transportation to talk with riders. Consider including international or bilingual students. Encourage students to flag isolated seniors, and use those examples to expose students to issues in the field of aging.
- **Is the bus sitting empty?** Demand is increasing for prescription delivery. Facilitate after-hours prescription drop-off via school bus drivers or senior shuttle drivers—people who may be looking to pick up extra billable hours.
- **Drivers become friends.** Many older adults like getting to know their paratransit or ride-share drivers and look forward to seeing them. Foster this connection wherever possible. Though not always possible in shared-ride situations, front-seat sedan travel is a catalyst for deeper conversations. Make sure drivers know how much their presence means to the people they transport.
- **Give caregivers priority.** In many systems, home health aides and personal care assistants can ride for free while “on the clock.” Consider allowing these frontline workers to ride for free all the time.
- **Form a buddy system for big appointments.** Medical escort programs, through organizations such as FriendshipWorks, can draw on hospital volunteers, students, or others to keep patients company and provide support in transit.
- **Create a pal for travel to church or synagogue.** Ask older adults coming to your house of worship to ride together whenever possible. This practice is not only an efficient use of resources, but the time spent together riding to and from services builds strong bonds. Or consider participating in a ride-sharing service explicitly for faith services. The important thing is that people share a ride together.



Information Sharing and Resource Connection

While *social* isolation is often the primary type of isolation that is considered, it is imperative for us to recognize that there are other kinds of isolation that can plague older adults (e.g., geographic, mobility, cultural, or linguistic, and basic disconnection from information). In this section, we outline ideas for better connecting older residents with information about available resources not only for social outlets, but for important information that can support community living. For some, simply knowing that there are resources available and how to access those supports and services can alleviate feelings of loneliness and anxiety.

- **Call a local business.** Similar to welcome bags for new residents, several communities have created “thinking-of-you” gift bags using products from local businesses—things like brain games, exercise instructions, hand sanitizer, cookies, local honey, personal notes, and information about a regular phone-in conversation group. Bags are distributed to residents living alone or those who are homebound.
- **Where to turn?** Create a local resource for connecting with others that lists all of the social clubs or groups in the community, or host a volunteer fair that connects residents with opportunities to get involved—regardless of age or ability.
- **Create municipal ambassadors.** Establish a group of local resident experts who are trained to be just that—experts at being residents of your community. Repurpose property tax work-off positions or host a training program that all interested applicants must complete before they can serve on a board or committee that offers them details on how things work in the local government and what resources are available. These “municipal ambassadors” can make presentations around the community and host “welcome nights” for new residents. This provides a volunteer opportunity for older adults and creates a pathway by which your city or town can connect a personal level with isolated segments of the population.
- **Build emergency contact lists.** In one town, maintenance workers slipped paper surveys under the doors of seniors living in public housing and asked recipients to name an emergency contact. Those without contacts or whose contacts lived far away were notified of whom to call with any problems, and they were given priority for receiving tablets or smartphones when available.
- **Engage the private sector.** A local realtor initiated a series of community conversations to disseminate information on various town happenings—a sort of a “current events” speaker series for the community.
- **Develop or use kinship navigator programs.** These are resources designed to help caregivers navigate official support systems for children, older adults, and other family members.
- **Who’s calling?** Use special software to ensure that phone calls from volunteers are displayed as “City of X” or “Senior Center” on a caller ID. This technology communicates that the call is safe and increases the likelihood of someone answering the phone.
- **Speak their language.** Include a person’s preferred language in your database. Build into your operations a process of checking the preferred language before placing a phone call or sending information.



Multicultural Approaches to Building Social Connections

Genuine social connection often comes as a result of sharing and receiving personal information with another person. What is more personal than the culture in which a person was raised? Centered around the celebration of a person's culture and finding ways to build bridges across generations of the same culture can be a meaningful way to engage residents of all backgrounds, whether their culture is that of the Midwestern United States, Cambodian, or Somali.

- **Cook and share—from my kitchen to yours.** Host a regular community cooking class, inviting new residents each week to share a family recipe through a cooking demo. Collect recipes and videos in a community cookbook.
- **Foster communities within the community.** A gathering with food can be welcoming and provide something common to talk about—particularly the case for affinity groups that are at risk for isolation, like the LGBTQ community. Host a regular potluck every month for members of this community, including older adults, to bring a small dish to share and gather in a public space like a senior center or community center.
- **Culturally connect through technology.** Technology can be a gateway to connection, but it can be overwhelming to get started. Prepare lists of applications and websites with instructions that are catered to groups with different backgrounds and interests. For example, the Immigrant Family Services Institute and a group of IT professionals are working together on preloading tablets with daily exercises, prayer, singing, medication checks, and the latest news about the COVID-19 pandemic in Haitian Creole.
- **Match us!** Have sign-ups for people looking to be matched to other connections with similar identities. Gather common traits or fun facts about each person and what type of connection they are looking for to form matches.
- **Try “agri-culture.”** A garden is a great space to show and tell. Cultivate a shared garden among community members, where people can grow fruits and vegetables to share. Label the items growing and who grew them. Share tips on how to prepare and cook each item.
- **Learn languages together.** Learning a language alone can be hard, so why not swap language skills to learn from and help someone else? Construct simple prompts to foster informal language learning in the community or expand to learn with people across the world.



Connection-First Volunteer Opportunities

Similar to movements like person-centered care,¹⁸ the “connection first” approach is one that puts the individual before their need for services or support. By building personal connection first, meeting additional needs becomes a more natural process between two people who know one another. Secondly, the associations between volunteer and service opportunities and feelings of belonging are strong.¹⁹ In this section, we offer ideas that are mutually beneficial for all involved!

- **Move beyond the typical “Hi! How are you?”** Imagine a volunteer call center or “friendship line” with the purpose of providing 24/7 access to a friendly voice and someone to talk with. It would include training volunteers to ask questions that go beyond “How are you?” to “What is something new that you have learned this week?”
- **Foster animal connections.** Animals provide a sense of camaraderie and comfort that cannot be described with words. Volunteers bring their pets (dogs, cats, rabbits, birds) to local care facilities or apartment buildings for a few hours per week to visit with residents.
- **Maintain furry friendships.** Pets are like family members. They provide steady support and happiness to people as the world around them changes, but they can also be a lot of work to maintain, especially as we get older. Make available local resources for helping residents care for their pets physically or financially.
- **Hear a familiar voice.** Think about the joy that comes from sharing a coffee or tea with a friend. Inject this joy into the lives of older adults in your community by starting a weekly calling program. It’s hard to find time to make an in-person visit, but taking time to have a phone conversation while you sip your morning coffee can make someone’s day brighter (and yours, too!).
- **Connect with letters.** Write letters to be sent to area assisted-living or nursing-home residents. Tell them a story about something that made you smile this week or the most recent thing you learned.
- **Talk “shop”...or not.** Create industry- or hobby-specific phone mentoring for older and younger generations to connect about the field or profession and build rapport.
- **“I get it.”** Peer support programs can foster much-needed relationships with others who have an appreciation for age-related changes.
- **“If you need me, call me.”** Making sure that friends and family have the support they need when emergencies happen is a crucial element of social support. Near or far, knowing that there is a plan in place provides comfort to all involved.

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Connection-First Volunteer Opportunities (Continued)

- **Offer warm food and warm conversation.** Create volunteer positions within faith communities to serve as a contact to local people experiencing homelessness (or other vulnerable groups). Personally invite them to communal meal opportunities (at no cost) to build community and promote inclusion.
- **Know your sources...and outlets.** Regis College is conducting phone interviews with area residents to find out their trusted sources of local information. This initiative will inform future outreach efforts and will be vital to keeping residents informed about social opportunities and needed services.
- **You say “tomato.” I say, “How many?”** Recruit volunteers to be personal shoppers for homebound older adults, including providing help with putting away groceries at home. Or, a car ride to the grocery store through a companion program could add to the visit. Swap cooking tips or recipe ideas in the process!
- **Kindness is free...professional services are not.** Access to English language translation services is crucial for some residents to connect to their community. Explore national resources or consider gathering up a local contingent of multilingual interpreters.
- **Craft for a cause.** Learn a new skill with friends via phone or video conference, or use your talents to help others by knitting blankets for newborn babies or veterans. Connection to a larger cause or to assisting others can help lessen feelings of loneliness or isolation.
- **Head home together.** For those with few social ties or with family and friends who live far away, transitioning to and from medical settings can be harsh. To aid in these transitions, faith communities can connect hospitalized members with volunteers from local agencies on aging to help them transition home, helping with minor chores and ensuring that groceries and medications are purchased.



Health- and Wellness-Oriented Opportunities to Connect with Others

One important unanswered question is the directionality of the relationship between social isolation and health outcomes: is it that poor health leads a person to become more isolated or that an isolated person is likely to fall into poor health? Perhaps it is a bit of both. In any case, using health promotion as a way to bring people together is a double whammy of positive influence. In this section, we describe ways that communities can address social, physical, and emotional health—simultaneously!

- **Promote social health awareness.** Social Health Bingo could spark friendly competition when it comes to staying connected with the people, groups, and causes that are of value. Consider using Self-Care Bingo as an example. Or commit a group of local organizations to each do one thing within a month to promote social health.
- **Sharing memories and stories in a group setting can be therapeutic.** In fact, reminiscence therapy has been shown to improve the well-being of older adults, particularly those living in congregate settings.
- **Get moving, together. Start a Walk ‘n’ Talk** group in your area to get people chatting and climbing!
- **Can providers “prescribe” social connection?** Yes, but like any other prescription, it is up to the individual to fill it and take that prescription. Some providers are offering phone calls, referrals to community organizations, and home visits. Ask providers about their thoughts on a “social care plan.”
- **Illness can be isolating, and sharing your story can be healing.** Organize live story-sharing events or record stories about health and illness to share publicly. Consider displaying a collection of stories of illnesses, like dementia, to raise awareness about the disease.
- **How to make friends? There could be a class for that.** Develop an evidence-based program on “making and maintaining friends” as an important social determinant of health. Explore funding opportunities to collect quality data that demonstrates the impact of such a program.
- **Adjust your mindset.** When thinking about how to overcome feelings of sadness or loneliness, consider these three questions: (1) how can I change my perspective; (2) how can I can change how my body feels in this moment; and (3) how can I connect with others.
- **Make it a game.** Ask your family, friends, or neighbors to join you for a game of “Bingo-cize.” Draw it out over the course of the month, with one letter being drawn at a time.
- **Hold a “brown bag” learning series.** One Friday per month from noon to 1 p.m. gather at the public library to hear local experts talk about topics like retirement planning, health, mindfulness, or travel. Bring a bagged lunch or pick one up when you arrive (donations may be available from area businesses or a local food pantry).

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Health- and Wellness-Oriented Opportunities to Connect with Others (Continued)

- **Consider a tele-behavioral health program.** Homebound older adults are often left out of social engagement opportunities. Compared to a tele-friendly visiting program, a tele-behavioral health program focused on goal setting (and delivered by lay volunteers) helped to lessen social isolation.
- **Get a chef's delivery.** On weekends and holidays, home-delivered meal services are often suspended. To fill the need on those days, local restaurants can work together to donate food and provide staff to deliver meals to homebound residents. A warm meal and a warm smile can last until Monday.
- **Spark memories.** Music is healing and can elicit powerful emotions from the past. Customize devices (e.g., iPods or radios) to play music from when the user was a teenager or child, making it easy to find the “good stuff.”
- **How you respond matters.** Encourage health providers and social service providers—or anyone who works directly with the public—to be trained in mental health “first aid.”
- **Utilize round-the-clock support.** Having reassurance during evenings and weekends can ease a lot of worry. Health coach systems like care.coach or personal emergency response systems can ensure that older persons living alone have access to emergency response services. Consider ways to increase access to these devices—apply for grants to subsidize the cost to residents or purchase some devices to be loaned out from local emergency-response departments.
- **Implement a reverse mental health hotline.** When people are under stress due to a medical condition or a life change, it is more difficult for them to reach out for assistance. That's why it can be helpful to use reverse hotlines that are staffed with behavioral health professionals or students, who can reach out to residents who have previously contacted their organization or are otherwise identified as at-risk.
- **Start a 10 by 10 campaign.** On the 10th of every month, commit 10 older adults to exercise together 10 feet apart in a public space to raise awareness for increasing life expectancy through physical movement and social connection.
- **Set up a trusted hub of mental health resources.** To help individuals navigate mental and behavioral resources, residents can call a central phone line hosted by a trusted source, such as a local college, and do an intake interview. Students and staff will then spend a few days gathering relevant resources and connecting that person with appropriate supports and services in the area.
- **Join active seniors for not-so-average day trips.** The Trailblazers is not a typical recreational organization. It's a group of active seniors who developed a year-round program offering day trips full of healthful activities. They hike, canoe, and ride horses—all with the goal of sharing their interests, connecting with one another, and staying active.
- **Invest in accessible lifelong learning opportunities.** Lifelong learning can take many forms, including a 5-month course on health and aging for older people. Offered for free in community settings and facilitated by volunteers from various backgrounds, these courses build camaraderie and foster empowerment when it comes to physical, psychological, and social health.



Intergenerational Approaches

Relationships between people of different generations can serve as a vaccination against ageism and can curb the isolation that occurs when one's peers begin to pass away. When young people get the chance to interact with older adults, they have a window into the power and wonder of being someone who is old enough to possess a lifetime of experience. For older adults, connection with younger generations can offer a sense of purpose and an opportunity to share their lessons learned with future generations. In this section, we illustrate how intergenerational opportunities can build friendships that break the mold.

- **Read a book together.** Train older adults to read picture books to young children, in person or remotely. Have them help a child develop their reading skills by taking turns reading different pages or different books weekly.
- **Seniors encouraging seniors.** Have older adults share advice, words of encouragement, and their own stories with graduating high school seniors as they transition to new challenges and adventures in life.
- **Start a pen pal program.** Receiving a handwritten letter can bring the same warm impact today as it did decades go. Start an intergenerational pen pal program in your community. Encourage children with social disabilities to participate. In some cases, postage can be donated by organizations like AdLib.
- **Community calls on you.** Coordinate local high school volunteers to take on roll call sheets to check in with older adults in the community as community service experience. Have a list of prompts high school students can use to engage in conversations beyond “How are you?” Examples include “Tell me about your day” or “What are some things you’re looking forward to?”
- **Share stories.** Have high school students interview older adults and ask them to share a story, and encourage students to share a similar story. Stories can be accumulated into a community documentary and shared back with older volunteers.
- **Engage through the ages.** Engage older adults and college students in active discussions about ageism and how age stereotypes affect their lives. Pair college student groups with older adult groups from senior centers or residential facilities, eliciting conversation through a discussion guide and a shared volunteer activity.
- **Institute home-sharing programs.** Connect college students seeking affordable places to live with older adults who have empty rooms in their home and who can use assistance with house maintenance.
- **Engage through civics.** Promote civic engagement in all age groups by having older adults participate in civic engagement workshops, and then volunteer in schools to teach youth about basic civic skills and current local issues.

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Intergenerational Approaches (Continued)

- **Relax through the arts.** Organize intergenerational programs for all ages to express themselves through art activities.
- **Support veterans, young and old.** Establish multigenerational peer mentorship programs to connect with veterans in building resiliency. Consider an “internship swap” where young veterans spend a period of time working in the community and older veterans spend a period of time on a college campus learning about opportunities for engagement and professional development.
- **Remain colleagues for life.** Encourage employers to maintain “alumni groups” to stay connected with retirees, who can help with onboarding of incoming employees.
- **Enlist grandkids on-demand.** Connect with college volunteer groups to provide instrumental support to older adults in the community, support in areas such as home maintenance, grocery shopping, and care packages.
- **What makes a good friend?** Friendship enrichment programs may help people, regardless of age, develop friendship-building skills and meet others in the process.



Building Community Cohesion

When building close interpersonal relationships or committing to long-term responsibilities is not preferable or possible, creating a community in which all residents feel welcome and connected can be another way to combat social isolation on a macro level. In this section, we offer ways to build community cohesion in the hopes of creating environments in which residents feel they belong and are seen and heard.

- **Who is closest (literally) to you?** Locally based connections are easy to find and can brighten one's living environment. Try organizing a meet-your-neighbor day that gives people a reason to gather socially or celebrate a welcoming week or national good neighbor day.
- **Create public spaces for connection.** Identify a few park benches or existing gathering areas in the community to create a "talking bench." Generate signage that explains that by sitting on this particular bench a person is agreeing to be open to conversation with people they've never met before. Consider commissioning local artists or students to decorate the area or including conversation starters on the signage to keep the conversation alive.
- **Weatherproof opportunities for connection.** In the winter months, social and physical activity often slows. Consider a "wintermission," a period of the winter when the community makes a concerted effort to offer opportunities for connection and activity. In addition, work toward being a "winter friendly" community that ensures snow removal and transportation are always accessible to persons who have difficulty navigating snow and ice.
- **Map the facts.** Consider the use of virtual maps to document where opportunities for social gathering exist in your part of town. This tool can open a dialogue about isolation from a built-environment perspective, removing stigma and engaging policy makers in the discussion.
- **Connect creatively.** Bring in inclusion-oriented artists to teach older adults. Free arts programming via the Creative Aging Program is for older persons with an existing interest in the arts as well as those seeking to learn a new skill—all in a group setting that fosters connection through a shared passion.
- **Establish a "care force."** Harnessing and sharing individual social capital can be a dynamic way both to engage volunteers and reach out to more vulnerable segments of the community. Invite residents to identify the social capital they have to offer (skills, work experience, passions, hobbies, cultural backgrounds, interests) and then work through this new "force" to identify those in need of additional connection.
- **Walk away from loneliness.** Align public health organizations, communities, and neighborhoods to "get ahead" of isolation and loneliness through public awareness efforts. Consider a walk to end loneliness, walking buddy program, or fundraisers for various other social issues that may intersect with the problem of loneliness (e.g., homelessness, addiction, chronic illness, caregiving).
- **Form a senior center without walls.** Programs, services, and activities provided through senior centers are often inaccessible to residents who may need these supports the most: those who are homebound. Weather, transportation, and other factors may also impede someone from physically visiting the center. A senior center without walls is a phone-based program that offers activities and gatherings to these particularly vulnerable residents.

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Building Community Cohesion (Continued)

- **Promote a Friendship Friday.** Consider promoting the Friday after Thanksgiving or first Friday of a new year as “Friendship Friday”—a day of recognizing old friendships or sparking new ones. Host a “speed friend-making” event or a “Gal-entines Day” dinner to celebrate.
- **Challenge your community to 30 days of connection.** For 30 days, reach out to a friend each day. For example, reach out to a friend who is the best cook or plays an instrument. Generate a calendar to challenge those in your family, congregation, workplace, or neighborhood to join.
- **Create a network of helpers.** Plan a quarterly coffee networking event for human service providers and other stakeholders in the community. Include an opportunity to hear from each participant or discuss a topic facing the community. This personal connection can lead to a better way to share information across providers, who may be serving the same people.
- **Everyone deserves a chance to shine.** Create forums for residents of all abilities to share their artistic talents. Encourage the community to be audience members.
- **Share histories.** Invite residents to share a story about a common experience (e.g., a first kiss, learning to drive a car, or where they were on 9/11). Share these recordings via the public library or local cable station as a tangible way to highlight our shared experiences—at any age!
- **Go green...together.** Erect community garden beds near senior housing or a long-term care facility so that older adults can easily access the plots or simply enjoy watching the transformation as community members tend their gardens. Consider shared plots so that multiple residents are working together to beautify the community. Benches are a must!
- **Make it exclusive.** Using local census information, invite people to join “Club 90” by mailing invitations to and requesting contact information from residents age 90+ (or 80+) to establish contact between the municipal government and older residents and celebrate this milestone age.
- **Create a human library.** Invite others to volunteer their personal stories and human experiences. Convene “dialogue rooms” in public libraries, schools, or other venues where topics are posed and individuals engage in one-on-one conversation about the topic as if they are “checking out” a human book to gain new perspectives.
- **It takes a village.** In large congregate housing settings, designating small “villages” of about 10 people can help residents build closer relationships. In the era of COVID-19, this village model also strikes a balance between complete isolation and high exposure.
- **Who’s in charge?** What happens when we empower older adults to define for themselves the kind of communities they want? The answer: They form socially connected, vibrant places that are resilient to disaster.

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REACHING OUT IN NEW WAYS

- Track the sociodemographic characteristics of the people your organization serves (age, gender, ethnicity, language preference, neighborhood) and periodically compare this information to the characteristics of the entire community, or the 60+ population, to identify constituencies that you have not reached. This comparison allows for targeted outreach.
- Encourage neighbors, postal workers, or utility employees to “see something, say something.” Have they noticed a property declining in repair or mail piling up for a someone they haven’t seen in a while? They can make resident referrals to programs like [Smart911](#) or other emergency response units in the community. Having a systematic way to communicate with the most vulnerable can help prevent tragedy.
- Build authentic partnerships. The best way to reach subpopulations is to go through trusted channels. Evaluate the strength of your partnerships with faith communities, nonprofit organizations, or community centers, and find ways to build trust and camaraderie.



Reaching the Hard(er) to Reach

Whatever the reason—personal preference, mental health conditions, physical ability limitations, or geography—it is a reality that some people are harder to reach out to than others. And once initial communication has been established, these individuals may require different types of opportunities for social connection. In this section, some ideas of how to reach and engage these “harder to reach” groups are proposed.

- **Bring a friend.** Offer incentives for members of your social organization to bring a friend. Consider hosting regular “new member” events to consistently reflect how welcoming your organization is to newcomers.
- **Daily check-ins.** Create a free service that establishes a prearranged time for participants to receive a regular phone call inquiring about their well-being. The participant will be asked, “Are you OK?” If they respond yes, they may simply hang up. If they have a concern, the caller will determine the nature of the concern and connect them appropriately. If there is no response, a public safety officer may be dispatched to do an in-person wellness check.
- **Empower faith volunteers to “Take and Eat.”** Gathering multiple faith communities can create a powerful swell of service. By sharing kitchen space, donations, and resources, a network of faith communities can unite in preparing and delivering meals to persons in need on weekends and during holidays, filling meaningful gaps in food access.
- **Enlist the eyes and ears of the community.** Consider implementing a community gatekeeper program to identify at-risk older adults and connect them to local agencies that can assist. Gatekeepers are often employees of local businesses who regularly encounter older adults (e.g., banks, coffee shops, convenience stores, utility employees, postal carriers, or first responders).
- **Partner with first responders.** Build bridges between first responders (e.g., paramedics, fire fighters, and police officers) and local senior service providers to address underlying causes of frequent 911 calls from specific residents. Consider establishing a liaison at the senior service agency that can be called upon to accompany first responders into the home of a frequent caller.
- **Create scholarships for healthy aging.** Consider fundraising to create scholarships exclusively to increase access to opportunities that promote healthy aging (e.g., lifelong-learning programs, trips, or health-promotion classes).
- **Enable second-chance friendships.** Healthy relationships can be crucial for the successful reentry of former inmates and prisoners. Include relationship-building skills in reentry programs for recently incarcerated persons.
- **Encourage self-referral.** Drawing on the principles of suicide prevention, consider training employees or residents in elements of QPR (Question. Persuade. Refer) to identify, encourage, and assist isolated older adults to connect with existing supports.
- **Be the first to ask for help.** Be more conscious of your willingness to ask for help. Creating a culture of helping (both giving and receiving) can enable others to feel more comfortable in asking for help when they need it.



Internet-Based Innovations

Especially during the COVID-19 pandemic, Internet-based ways of connecting can feel like the panacea of social isolation. While many of the solutions described in this report could be translated into a virtual program, there are a number of ideas that already rely on the Internet for their innovative approaches. The opportunities for connecting remotely are endless. In this section, we provide a wide range of ideas for using Internet-based mechanisms to connect older adults both to social relationships but also to needed services like health care and emergency assistance.

- **Notice one's own feelings of loneliness.** Evidence around a two-week mindfulness training to improve social relationships shows that recognizing one's own loneliness and accepting one's own experiences is critical for reducing the harmful effects of the feeling.
- **Sing along.** There is strong evidence that music and the arts can stimulate the brain and improve quality of life for older adults. Host a sing-along via video conference or start a chorus that sings virtually as a group.
- **Be a first responder.** Applications have been developed to allow health care professionals and others to make referrals so individuals can receive medication or food delivery, rides to medical appointments, or just a friendly chat by phone. A pool of volunteers can be located via the application.
- **Travel virtually.** Convene a group of friends or neighbors for virtual tours and performances via video conferencing. Check out collections from museums around the world, MetOpera performances, or wander some of our national parks.
- **Try group meditation.** Using livestream nature cams or other positive imagery and free meditation applications, bring together a group for virtual meditation.
- **Go back to school...sort of.** Older adults can take free online courses with a friend or “go to college” with their young adult child or grandchild. They can join the fun and challenges of online learning.
- **Pass the popcorn?** People of all ages can host a party from the comfort of their couch. They can choose a game or a movie to stream and join together via videoconferencing to chat along the way.
- **Create local how-to videos.** Many cities and towns are shifting things like library services, municipal government meetings, and bill paying online. Creating brief video tutorials on how to do things like sign up for library e-books or access the town meetings via YouTube can improve access and reduce isolation for many residents. Show these tutorials on public cable.
- **This is not your grandkid's tablet.** Devices like the Grandpad and programs like Tech Goes Home aim to reduce barriers to the use of technology for communication with family, caregivers, and health professionals.

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Internet-Based Innovations (Continued)

- **Implement telehealth for the whole person.** Consider the rationale that social connection is a determinant of health and should therefore be part of the telemedicine system. Work with hospitals to include apps like FaceTime, Skype, and Facebook for social connections when preparing devices to be used for traditional telemedicine.
- **Hold a sip and swipe café.** Provide lessons or “refreshers” on using tablets, smartphones, or video conferencing programs by offering a local training session that promotes Internet inclusion for persons of any age.
- **Host dinner, drinks, and discussion.** Whether it is a weekly Friday-night dinner conversation or an occasional dinner party (get dressed up!), gathering for a meal is a connecting experience. The party may be BYOE (bring your own entrée), but it’s a great way to get together while observing social distancing.
- **Send trusted technical assistance.** For some, the biggest barrier to accessing technology is getting it set up in a way that is usable and familiar. Consider asking trusted sources (e.g., fellow members of a faith community or local school) to send someone in to set up computer equipment in a person’s home and help them get started.
- **Enable access to basic job-search skills.** Employment can be a steady source of social connection (not to mention needed income). People of all ages can learn basic computer and job-search skills in a six-week web-based course.
- **Remote respite for caregivers.** For those caring for frail or disabled loved ones, just getting out of the house can be a feat in itself. Consider ways to connect with others and share your experiences via venues like online memory cafés or support groups.

Throughout the process of collecting insights for this report, several solutions and ideas were raised that would require policy change or significant advocacy efforts that go well beyond the capacity of the community level. These higher-level suggestions have been compiled in this section, and we offer them as a brief that can be shared independently of this report as a way to foster action at the legislative and advocacy level.

ADVOCACY AGENDA

Being socially isolated or lonely has been associated with risk of mortality that is comparable to smoking or obesity,²⁰ not to mention the impact of these conditions on quality of life and one's ability to live in the community. While isolation and loneliness harm adults of all ages, advancing age brings with it an accumulation of risk factors (e.g., death of network members, health and mobility changes, and life changes like retirement, caregiving, and residential moves).

Prevalence of the Issue²¹

- 17%** of adults age 65 years and older are socially isolated
- 26%** increased risk of early death due to loneliness
- 46%** of women age 75 years and older live alone
- 35%** of adults age 45 and older in the United States are lonely
- Only **1%** of adults describe their neighbors as friends



Proposed Actions and Promising Efforts

- Strengthen the capacity (increasing funding and responsibilities) of senior and community centers to bolster existing operations and build capacity for meeting a diverse set of needs among older patrons.
- Legitimize loneliness and social isolation as a public health priority through awareness in the public, private, and health care sectors.
- Designate a government role at the federal, state, or city level to lead and oversee social engagement efforts.
- Establish reliable Internet connection in all regions of the state. Specific steps could include the following:
 - a. Passage of the Health and Economic Recovery Omnibus Emergency Solutions Act (HEROES) that includes provisions for increased access to broadband and Wi-Fi
 - b. Subsidized cable and Internet services for low-income older adults
 - c. Making Internet access a municipal utility
- Strengthen public health funding focused on social determinants of health for older adults. For example, providing access to Wi-Fi increases access to telehealth *and* social connection. Or, consider ways to enforce and encourage practices like social prescribing.
- Incentivize the development of housing with social connectivity aspects (common spaces, courtyards, etc.).
- Continue reauthorization of the Older Americans Act to include the Social Isolation and Loneliness Prevention Act and the Dignity in Aging Act.
- Include approaches to recognizing and triaging social isolation and loneliness within existing geriatric training for medical residents and other clinicians (i.e., social workers, psychiatrists, psychologists).
- Allow older residents to live with unrelated persons or those not considered “family” in senior public housing.
- Recognize “Good Neighbor Day” as a state holiday, or celebrate Older Americans Month by formally recognizing a “Senior-to-Senior Day” and encouraging all 351 cities and towns to designate one day (or more) in which older residents and high school seniors spend time together doing community service, mentorship, or art/creative activities.
- Advocate for and support the Strengthening Social Connections Act of 2020.

CONCLUSION

Now, more than ever, it is imperative that we prioritize connection for ourselves and the people around us. The global COVID-19 pandemic and the national reckoning with systemic racism has made people more aware and appreciative of their relationships and has made some painfully aware of how distant and disconnected they are. While the evidence is clear that social isolation is bad for health and well-being, the evidence base of solutions is far less so. Thus, this report sought to harness the energy, creativity, and progressive thinking of cities and towns in Massachusetts by documenting their efforts to keep people connected well before the COVID-19 pandemic took hold and the efforts they will sustain in the aftermath.

This document is a resource of ideas about actions, big and small, that can be taken to strengthen social connections in your community. It is intended to kick-start conversation, and the ideas embedded here are meant to be adapted for your local culture. It is our hope that by equipping communities with ideas of where to start, we can begin to build strong empirical evidence for solutions that have been implemented and evaluated. So consider these ideas, generate your own, and continue to think about the work you do as a neighbor, volunteer, leader, advocate, and professional in promoting social connection for those you serve.

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ENDNOTES

1. Holt-Lunstad, J., Smith, T. B., Baker, M., Harris, T., & Stephenson, D. (2015). Loneliness and social isolation as risk factors for mortality: a meta-analytic review. *Perspectives on Psychological Science*, 10(2), 227–237.
2. <https://www.goredforwomen.org/en/get-involved/give/wear-red-and-give>
3. <https://www.healthypeople.gov/2020/About-Healthy-People>
4. <https://www.alz.co.uk/world-alzheimers-month#:~:text=World%20Alzheimer's%20Month%20is%20the,on%2021%20September%20each%20year>.
5. <https://nami.org/Home>
6. National Academies of Sciences, Engineering, and Medicine. 2020. Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25663>.
7. <https://www.nationalacademies.org/our-work/the-health-and-medical-dimensions-of-social-isolation-and-loneliness-in-older-adults>
8. https://mptf.com/social-isolation-summit/?mkt_tok=eyJpIjoiTURJd01USmIzVEExT0dVeSIsInQiOiJrSFdKRVRyMzkxOEIDdWo4MGxSUUVNIUIRaVWtYVDYxSmRa28zMTNGV1hXWU5BYmVNaHAyOUhRVFJNOWlNa0doc3VQczlyR0NXQStXMnIFaGdOSGx0Tj-c1YVJ5c21cL01RS2FRaStHvVwK1ZueVIEVGdoVW5ObkxYWkJibnlNSnNzIn0%3D
9. Erzen, E., & Çikrikci, Ö. (2018). The effect of loneliness on depression: A meta-analysis. *International Journal of Social Psychiatry*, 64(5), 427–435.
10. Putnam, R. D. (2000). *Bowling Alone: The Collapse and Revival of American Community*. Simon and Schuster.
11. <https://qz.com/1413047/lonely-people-face-less-social-stigma-than-they-think/>
12. Rogers, S. H., Halstead, J. M., Gardner, K. H., & Carlson, C. H. (2011). Examining walkability and social capital as indicators of quality of life at the municipal and neighborhood scales. *Applied Research in Quality of Life*, 6(2), 201–213.
13. Nawyn, S. J., Gjokaj, L., Agbényiga, D. L., & Grace, B. (2012). Linguistic isolation, social capital, and immigrant belonging. *Journal of Contemporary Ethnography*, 41(3), 255–282.
14. <https://www.pewresearch.org/fact-tank/2019/04/10/share-of-u-s-adults-using-social-media-including-facebook-is-mostly-unchanged-since-2018/>
15. Baym, N. K., Zhang, Y. B., & Lin, M. C. (2004). Social interactions across media: Interpersonal communication on the internet, telephone and face-to-face. *New Media & Society*, 6(3), 299–318.
16. Emlet, C. A., & Mocer, J. T. (2012). The importance of social connectedness in building age-friendly communities. *Journal of Aging Research*, 2012.
17. https://mptf.com/social-isolation-summit/?mkt_tok=eyJpIjoiTURJd01USmIzVEExT0dVeSIsInQiOiJrSFdKRVRyMzkxOEIDdWo4MGxSUUVNIUIRaVWtYVDYxSmRa28zMTNGV1hXWU5BYmVNaHAyOUhRVFJNOWlNa0doc3VQczlyR0NXQStXMnIFaGdOSGx0Tj-c1YVJ5c21cL01RS2FRaStHvVwK1ZueVIEVGdoVW5ObkxYWkJibnlNSnNzIn0%3D
18. <https://guidewaycare.com/what-is-person-centered-care-and-how-can-it-improve-healthcare/>
19. Pilkington, P. D., Windsor, T. D., & Crisp, D. A. (2012). Volunteering and subjective well-being in midlife and older adults: The role of supportive social networks. *Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 67(2), 249–260.
20. Holt-Lunstad, J., & Smith, T. (2015). Loneliness and Social Isolation as Risk Factors for Mortality: A Meta-Analytic Review. *Perspectives on Psychological Science*, 10(2), 227–237.
21. Anderson, G. Oscar and Colette E. Thayer. Loneliness and Social Connections: A National Survey of Adults 45 and Older. Washington, DC: AARP Research, September 2018. <https://doi.org/10.26419/res.00246.001>