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# Empowering and Improving the Care of Older Adults Who Are Isolated or Lonely Through Clinical Practice Change Across Canada

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## The Challenge

- As many as 41% of Canadians aged 50 years and older are at risk of social isolation. Up to 58% have experienced loneliness.<sup>1</sup>
- Loneliness & social isolation are associated with an increased risk of death (26% and 29%, respectively).<sup>2</sup>
- Loneliness & social isolation are associated with higher rates of depression, dementia, stroke, coronary artery disease, disability from chronic diseases, reduced quality of life, and an increased number of falls.<sup>3</sup>
- While health care and social service professionals know about the risks of social isolation and loneliness, our research shows they may not be as confident about how best to intervene.<sup>4</sup>
- “Although the health sector cannot solve this problem alone, the medical community does need to respond. Clinicians will require adequate training, resources, and support to integrate screening, interventions, and referrals for SIL into their existing responsibilities. Patients’ lives may hang in the balance.”<sup>5</sup>

## Methodology

- National pan-Canadian interprofessional Working Group established to create first-ever Clinical Guidelines.
- Rapid Scoping review followed by focused literature searches. Academic and Grey literature searched.
- Scoping review: 1576 hits yielded 71 papers including 38 review articles.
- 2 National Surveys were carried out to provide perspective: a) healthcare and social service professionals n>350 and b) older adults n>2,000.
- Strength of recommendations based on an adapted GRADE approach.
- Some recommendations not based on empirical evidence are given a Consensus rating.
- Consensus among Working Group members was reached on all recommendations followed by voting.

## The Guidelines

### A Summary of Key Recommendations

#### Prevention

- Clinicians should know and be able to identify major risk factors associated with social isolation & loneliness, and to anticipate with their patients possible changes in their life circumstances that could put them at risk of social isolation and loneliness.
- Education on SI&L should be part of the curriculum for health and social service students as well as practicing clinicians.

#### Screening and Assessment

- Clinicians should screen patients who show risk factors for social isolation and loneliness (see recommended tools in Guidelines). Note: Consider possible stigma, reluctance to share feelings.
- A thorough clinical assessment should aim to explore possible causes and identify any underlying health conditions that maybe contributing.

#### Interventions

- Ensure that treatment is provided for any underlying medical conditions
- Clinicians should apply principles of shared decision making and an individualized approach to manage loneliness and social isolation.
- Interventions should take into account the individual’s culture and recognize the diversity of older adult populations

#### Possible Interventions May Include

- Social Prescribing / Social activity
- Physical activity
- Psychological therapies
- Leisure skill development and activities
- Animal-assisted therapies and ownership
- Use of technology

#### References

1. National Institute on Ageing. (2023). Perspectives on Growing Older in Canada: The 2023 NIA Ageing in Canada Survey.
2. Centres for Disease Control and Prevention. (2021). Loneliness and social isolation linked to serious health conditions.
3. National Academies of Sciences, Engineering, and Medicine. (2020). Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System.
4. CCSMH. (2023). Social Isolation and Loneliness in Older Adults A survey of Canadian health and social service providers .
5. Holt-Lunstad, J. (2022). Social Connection as a Public Health Issue: The Evidence and a Systemic Framework for Prioritizing the “Social” in Social Determinants of Health. Annual Review of Public Health 2022 43:1, 193–21

#### Learn More

Read and download the guidelines, screening tools and other resources on our website.



What role do you see for yourself in addressing social isolation & loneliness in older adults?  
What might need to change in your clinical practice to utilize a recommendation?

Let us know!

#### Contact Us

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