Key Messages

The Challenge

Social isolation and loneliness in the elderly have a number of negative health consequences, which are magnified for those in socially disadvantaged groups. Increased social participation of socially disadvantaged older people can contribute to reducing social isolation and loneliness and the associated health inequalities in this group. However, this is a challenge because:

- the concepts of "social isolation" and "loneliness" are closely linked and there is no consensus on terminology and measurements yet;
- due to the limited data available, social isolation and loneliness among the elderly in Switzerland is not yet widely monitored;
- it is difficult to find socially isolated and lonely individuals, and few programs focus primarily on these conditions
- there is limited actionable evidence on how best to address the problem of social isolation and loneliness in affected populations

Options to address the challenge

Improved methods to reach those affected

- New methods to reach socially isolated and lonely people include: (a) better data and innovative ways of using it, (b) the role of a community navigator, (c) partnerships with other entities who already interact with older (socially disadvantaged) persons.
- Programs must go beyond the reach of traditional media and word of mouth to reach the socially isolated or lonely.
- Due to potential stigmatization, individuals found through improved methods should not be labeled as socially isolated or lonely.

Inclusion of target groups in the planning and implementation of programs

- Program planners should be aware of the heterogeneity across population groups and the importance of addressing the target group specifically.
- Working with individuals in the target group and community advisory boards are important steps in the planning of participatory programs.
- Formative research, including needs assessments of target group(s) should be an integral part of program planning.

Improved program evaluation considering socially disadvantaged groups

- Current and future programs need to be more systematically evaluated to strengthen the evidence of effectiveness of interventions.
- The collection of demographic information from program participants, in addition to the pre- and post-program outcome measures, may help to better evaluate the effectiveness of programs for people from specific populations and with an increased risk of health problems.
- Steps to take include determining which information to collect and which tool(s) to use, setting up a systematic data collection and analysis, and developing solutions for storage of data and results.

Implementation Considerations

Barriers to implementation include:

- social isolation and loneliness are sensitive subjects for some individuals, and not well understood by others;

- the time it takes to identify and involve affected individuals and target groups in program planning and development;
- a lack of incentives, lack of time, and/or lack of resources that limit efforts, as well as potential program partners, to implement programs.

Potential windows of opportunity include:

- established groups at community level that can be included as potential partners in program planning and implementation;
- many potential partners already have existing points of interaction with older adults;
- programs that already conduct evaluations can more easily build on existing evaluation approaches.