



NHAHA Quarterly Meeting

December 10, 2020; 9:30 – 11:30

Meeting Summary

Addressing the Impact of Social Isolation and Highlighting ways to Engage Older Adults.

Presenters: Jeffrey Stokes, University of Massachusetts Boston; Sandra Faber, Monadnock at Home; and Lisa Henderson, LeadingAge Maine and New Hampshire (slides 5 – 49).

Jeff started the discussion by providing a foundation of knowledge on social isolation and loneliness. Jeff indicated that social isolation and loneliness are different concepts and specifically, social isolation occurs when people have a lack of social contact (i.e., few people in social network or have few contacts with people in social network), whereas loneliness is a subjective emotional experience that entails a gap between people's *desired* quantity and quality of social contacts and people's *perceived* level of quantity and quality of contacts. Social isolation and loneliness matter for both mental and physical health, and those who are socially isolated and/or lonely have higher rates of mortality. Jeff also discussed that the prevalence of loneliness and social isolation is difficult to quantify because neither is seen as a "clinical measure" (i.e., individual *is* lonely vs. individual *is not* lonely), indicating that loneliness and social isolation often use scaled measures (e.g., lonely some of the time; lonely all the time) making it difficult to identify how many people are lonely. Jeff discussed that during the pandemic social isolation and loneliness is heightened, especially for those populations that are already vulnerable. For example, those who are aging at home and have relied on friends, neighbors, and family to visit are no longer able to do so; or if friends, family etc. do offer to visit there is the additional weight and stress of is that a healthy decision (i.e., is it better not to go to my family's house for Thanksgiving or is better to risk infection for a social engagement to try and reduce isolation).

Sandra Faber discussed the program she manages called [Monadnock at Home](#), which provides support for older people to age at home. Sandra discussed the challenges for older people to age at home including mobility issues, transportation, and cognitive issues which all contribute to social isolation and loneliness. To remedy some of the challenges associated with Covid, many people switched the way they conducted business such as receiving grocery at their door and ordering from Amazon, however, some older people do not have the knowledge or access to these platforms, which can contribute to further isolation and loneliness. Sandra discussed the weight that her clients feel during this time, for example, her clients discussed not wanting to be a burden on their families but feeling fearful that something would happen, and nobody would find them for days. Sandra also discussed ways that Monadnock at Home is connecting with clients throughout Covid such as opting all clients into a telephone check-in call, providing grocery deliveries, and engaging in weekly coffee klatch calls. Sandra emphasized the important role that volunteers play in making this work possible.

Lisa Henderson from [LeadingAge Maine and New Hampshire](#), discussed how the pandemic has affected older adults in congregate settings. Lisa provided statistics on long-term

care and Covid, specifically that about 28% of residential care communities have been impacted by an outbreak. Lisa talked about the dedication of staff in long-term care facilities. Lisa also discussed that regulatory oversight exists by the Centers for Medicare and Medicaid, Department of Health and Human Services, and the Centers for Disease Control and Prevention. Lisa talked about NH's innovative support visitation, which included residents being able to receive ADL support from a dedicated loved one. Lastly, Lisa discussed some observations related to social isolation and loneliness such as providing meaning to activities rather than simply keeping participants distracted (i.e., signing cards for active service members, engaging in climate change activism), movement (i.e., chair yoga), connection (i.e., window visits, calls), and surprise (i.e., hot air balloon came to one residency, and Santa went to another).

Question and Answer

- Are there any evidence-based loneliness scales other than the UCLA scale? What about for social isolation?
 - *Jeff*: Yes, but UCLA is the gold standard and most used. There are other scales such as [De Jong Gierveld loneliness scale](#) which seeks to separate out social loneliness from emotional loneliness. The UCLA scale is used with large data sets across international research which also allows for comparative analysis. Social isolation is trickier because of the context. For example, some scales measure perception of social isolation, others measure social networks or social contacts.
- LGBTQ older adults are more than twice as likely to live alone compared to their same age heterosexual counterparts and the majority do not have children to check in on them. Many of them may hide their identity for fear of discrimination. Given their increased vulnerability to isolation and loneliness, and how this is compounded by the pandemic, are you aware of any outreach, projects, or services in NH that aim to address these disparities?
 - *Sandra*: Not aware of any services that specifically target LGBTQ older adults. Monadnock at Home and Catholic Charities are welcoming of people of all backgrounds.
 - *Lisa*: In Maine there is a very active [SAGE chapter](#), an advocacy and service organization for LGBTQ older adults. SAGE in Maine has been hosting Zoom calls and social hours for LGBTQ older adults during the time of Covid, unfortunately SAGE has not taken off in NH.
- Are you aware of any municipalities in the Monadnock Region that are addressing the housing challenges older adults are facing (e.g., changing zoning regulations to allow for subdividing homes for rentals, thereby making it more affordable for older adults to stay in their homes)?
 - *Sandra*: This is a topic that is in discussion. For example, Peterborough is talking about shared housing to help older adults and younger people with affordability and assistance.
 - *Chat comment*: Nationally there are some great models to create that win-win creating co-housing opportunities that assist older adults to age at home and serve other community needs (like affordable housing for students or young adults who have aged out of foster care who provide household help, etc.)

- *Chat comment:* [Plan NH](#) offers [grants](#) to communities who wish to expand housing options, but zoning is getting in the way.

Nursing Home Project ECHO

Presenter: Marcy Doyle, Institute for Health Policy and Practice (slides 52 – 72).

The Project ECHO model is an evidence-based method developed by researchers at the University of New Mexico, connecting interdisciplinary specialists with community-based practitioners using web conferencing technology. During teleECHO sessions, experts' mentor and share their expertise across a virtual network through case-based learning, enabling practice teams to manage complex conditions in their own communities. Currently, there is an ECHO geared for nursing homes across Maine, New Hampshire, and Vermont during the time of Covid. The ECHO seeks to promote practices on 1) Keeping Covid out of nursing homes; 2) Identifying residents and staff who have been infected, 3) Reducing spread; 4) Ensuring safety and 5) Reducing social isolation. The teleECHO sessions are 90-minutes weekly and currently have 3 cohorts of 33 – 34 long-term care facilities participating.

NHAHA Advocacy Strategic Priority Update

Presenters: Heather Carroll, Director, NHAHA Advocacy (slide 73)

The advocacy team is preparing for the 2021 legislative session. Many legislators convened on the legislative organizing day, and while some decisions were made, the sudden passing of the speaker of the house has changed original plans. Because the upcoming year includes a budget, the advocacy team is hoping to include NHAHA priorities in the budget. Further, the advocacy group will focus on how the system of care is delivered and direct care workforce issues. In conjunction with many community partners, the advocacy team hosted candidate forums across the state. Topics at the forum(s) included supporting libraries and senior centers across the state, social isolation, and access to telehealth and broadband services. Normally the budget process involves lengthy testimony, but most likely that will not occur this year so NHAHA Advocacy is preparing for online sessions.

[Please click here to view the recording of the meeting.](#)

NH Alliance for Healthy Aging 2021 Meeting Schedule:

Wednesday, March 10, 2021

Thursday, June 10, 2021

Wednesday, September 8, 2021

Thursday, December 9th, 2021