Isolation, Age and Volunteering
September 2016

What is Social Isolation?

Social isolation and loneliness are two separate (but often inter-related) terms. Social isolation describes people with few relationships with others. This could be by choice or by circumstance. Often social isolation is linked to loneliness, given the strong causal relationship between the two. It is, however, important to note that individuals with vibrant social networks can still feel lonely.

Loneliness is described as a loss of companionship, friendship or relationship. There are a range of reasons people may feel lonely – social isolation being one of them. Feelings of loneliness and isolation are varied, and their causes are complex.

Research Challenges and Assumptions

We know that it is difficult to measure difficulty in measuring the prevalence of loneliness and social isolation as it is a really subjective concept that cannot be easily studied. Often it relies on individuals self-reporting states of loneliness, or identifying loneliness. The causes of loneliness and isolation are often related to a range of different (but sometimes interlinked) circumstances.

The Impact of Loneliness and Social Isolation on Older People

Loneliness and isolation can be felt by people across all ages. However older people can be particularly vulnerable to loneliness, because:

a) Loneliness can be more prevalent for people receiving professional care and support in their own homes;

b) Loneliness can be more prevalent for people with reduced capacity for independent living;
c) Loneliness is more likely to be experienced by individuals with health problems including:
   a. Alzheimer’s disease and dementia;
   b. Obesity;
   c. High blood pressure;
   d. High cholesterol;
   e. Sleep disorders; and
   f. Depression

d) Loneliness is more likely to be felt by people who have been widowed;

e) Loneliness can be more acutely felt by those living alone;

f) Older Australians are more likely to live alone:
   a. 29 per cent of 75-84 year olds live alone
   b. 35 per cent of individuals over 85 live alone (Australian Bureau of Statistics, 2011 Census)

These risks and health conditions may precipitate loneliness or may be simply connected to feelings of loneliness and isolation. There are risks for older individuals, however it is important to note that all age groups can feel the effects of loneliness and isolation.

**Volunteering, Health and Community Engagement**

We are still yet to fully understand the impact of volunteering on health – particularly for different age groups and different socio-economic backgrounds. However, there are some indicators that there are significant health and wellbeing benefits to be gained from volunteering including: functional health, mental wellbeing, self-reported health and life satisfaction. This can be particularly felt in older volunteers who are more likely to be satisfied with life and report fewer incidents of depression and anxiety.

Equally we know that the contribution of volunteers can be critical in combating social isolation and loneliness among older people. Volunteers have always been a critical for organisations and facilities who support people in the community to age with dignity. Volunteers can support care given to the individuals who choose to live as independently as possible in their own accommodation and remain part of their local community. Volunteers also provide vital engagement, interaction and companionship in many of our aged care facilities and hospitals. A significant proportion of our community care draws on the support given by these volunteers.

Volunteering is important to an individual’s overall health and wellbeing, and can be vital in increasing community participation.
References


Australian Bureau of Statistics, 2011 Census


