Isolation and Why it Matters

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Agenda

• What is social isolation?
• Why does isolation matter for health?
• Isolation in a rural context
• What we can do about isolation
What is Social Isolation?

• Lack of social contacts, relationships, or support
• Few family, friends, and other people in one’s life; few people to connect with or turn to

Source: Interventions for loneliness and social isolation National Institute for Health Research. The University of York Centre for Reviews and Dissemination. 2014
What is Loneliness?

• A subjective *feeling state* of being alone, separated or apart from others.

• Has been conceptualized as an *imbalance* between desired social contacts and actual social contacts.

Defining Isolation and Loneliness

- No one, perfect definition:
  - Social isolation, social connectedness, loneliness, and living alone are related, but distinct
  - Differences between loneliness and solitude
  - Social isolation = lack of social connections
  - Loneliness = social needs not being met
Our Body’s Signal

“Loneliness is like hunger and thirst… it’s a natural signal our body sends us when we’re lacking something we need for survival – in this case social connection.”

- US Surgeon General Vivek Murthy

From The Guardian, 1/29/2024
Social Isolation, Loneliness, and Health

- Increased risk of:
  - Alzheimer’s disease and poorer cognitive functioning
  - Poorer immune system functioning
  - Hypertension and heart disease
  - Stress
  - Substance use
  - Depression
  - Mortality, including from suicide

Sources: Hafner, 2016; Holt-Lunstad et al., 2015; Nicholson, 2012; DiNapoli et al., 2014
Cost of Isolation and Loneliness

- Social isolation costs the Medicare program nearly $7 billion annually

Sources: Flowers et al., 2017; AARP Public Policy Institute, 2017
How Common is Isolation and Loneliness?

- In a 2021 survey of Americans conducted by Cigna:
  - 58% of Americans are considered lonely
  - 42% of people aged 18-34 report “always feeling left out”
Unique Risks for Older Adults

- Multiple life transitions
- Loss of friends and loved ones
- Changes in health and functional status
- Hearing loss
- Ageism
Isolation, Older Adults, and COVID-19

Changes in feelings of social isolation, 2018–2023
AMONG ADULTS AGE 50–80

Percentage who felt isolated from others some of the time or often

University of Michigan National Poll on Aging, 2023
Unequal Risk

COVID-19 poses an unequal risk of isolation and loneliness

BY CARRIE HENNING-SMITH. OPINION CONTRIBUTOR — 03/18/20 05:00 PM EDT
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• Higher risk for:
  - People with chronic conditions and disabilities
  - People living alone (not by choice)

• Structural barriers to connection:
  - Transportation, technological connectivity
  - Racism, homophobia, transphobia, xenophobia

• Different access to care and support resources

Source: Henning-Smith (2020) The Hill
Isolation and Loneliness in Context
Isolation and Loneliness in Context
What Does this Mean for Rural?

Photo Credit: Kathleen Henning
Disability Rates Higher in Rural

Percentage of Adults with Disabilities by Urbanization Level*, 2016, BRFSS

Noncore (rural)  Micropolitan  Small metropolitan  Medium metropolitan  Large fringe metropolitan  Large central metropolitan

Source: Zhao et al. (2016) American Journal of Preventive Medicine
Living Alone More Common in Rural Counties

- 14.9% in rural counties vs. 13.5% in urban counties
- Geographically patterned
- Disability rates highest among rural adults living alone

Source: Henning-Smith et al. (2020) University of Minnesota Rural Health Research Center
Rural Transportation Challenges

- Key rural-specific challenges:
  - Infrastructure (roads, bridges, availability of vehicles);
  - Geography;
  - Accessibility;
  - Political support and public awareness;
  - Financial resources

Broadband Access

Source: Federal Communications Commission (2022)
Rural Hospital Closures Since 2010

Source: University of North Carolina Sheps Center (2023)
Rural Areas are Not Monolithic

Source: Henning-Smith et al. (2019) Health Affairs
Rural/urban differences in social isolation and loneliness for older adults (ages 65+)

Source: Henning-Smith et al. (2019) Journal of Rural Health
Rural-Urban Differences: Family

Number of Close Relatives

- **Urban**
- **Micropolitan Rural**
- **Non-Core Rural***

**Non-core different than urban at p<0.001**

Source: Henning-Smith et al. (2019) Journal of Rural Health
Rural-Urban Differences: Friends

Number of Friends

0% 10% 20% 30% 40%

0 1 2-3 4-9 10 - 20 > 20

Urban  Micropolitan Rural*  Non-Core Rural**

2% 3% 15% 32% 21%

5% 2% 1% 9% 28%

3% 2% 1% 15% 33%

9% 27% 19% 23%

15% 32% 19% 21%

Source: Henning-Smith et al. (2019) Journal of Rural Health

*Micropolitan different than urban at p<0.05;
**Non-core different than urban at p<0.01
Rural-Urban Differences: Loneliness

*Different than urban at p<0.05

Source: Henning-Smith et al. (2019) *Journal of Rural Health*
What Do the Experts Think?

Key informant interviews (n=22)

Semi-structured interviews

Inductive content analysis

Source: Henning-Smith et al. (2018) University of Minnesota Rural Health Research Center
Key Rural-Specific Challenges

- Five themes:
  - Transportation
  - Technology
  - Demographics
  - Access to resources
  - Rural “culture”
Transportation Challenges

- Most frequently endorsed theme
- Limited transportation resources and infrastructure constrain social contact
- Long distances make access to providers, events, and resources challenging

Photo: Ely, Minnesota
“Our bus doesn’t run on Sundays. So, you’re losing that whole weekend day that you could say, ‘Hey! We’re going to have a big picnic at the park!’ because then you have to figure out who’s coming and who needs rides…the logistics are really, really hard.”

Sector: Direct service; Focus: Recent immigrants
Technology Challenges

- Limited Internet, broadband access, and cell connectivity
- More restricted access to devices and resources, compared with urban
“We have this great idea going out, but can’t do it for people in the smaller communities because there’s no internet access. No cell signals in the area. There are certain places where there are dead spots and that’s where people live.”

Sector: Direct service; Focus: Older adults
Demographics

• Aging population, younger people moving to urban areas
• Families becoming more geographically distant
• Poverty
• Increasing racial and ethnic diversity, but limited availability of culturally- and linguistically-appropriate services for recent immigrant populations
Access to Resources

- Fewer formal programs and gathering spaces
- Low population density
- Health care constraints and workforce shortages
- Fewer available volunteers

Photo: Española, New Mexico
“As an EMT, I’ve gone on a lot of 911 calls because they didn’t have anyone else in their life. I don’t know how many runs I’ve gone on that are caused by loneliness, but it’s more than you would think.”

Sector: Health care; Focus: All ages/groups
Rural “Culture”

• Strength and size of rural families
• May be isolating to be “different”
• Shift toward being less likely to know one’s neighbor; increased political divides

Photo: Sunburg, Minnesota
Addressing Isolation: Individual Actions

- Pay attention to your feelings with solitude and your need for connection
- Reach out to others: phone, email, text, mail…
- Use social media constructively
- Try out hobbies, clubs, or groups
- Find ways to help others
- Don’t be afraid to talk about loneliness
Addressing Isolation: Community Actions

• Talk about isolation and loneliness

• Provide opportunities for connection
  - Accessible
  - Affordable
  - Varying schedules
  - Varying interests

• Address built environment
  - Places to gather
  - Safe connection points
Addressing Isolation: Policy Actions

- Need for rural-specific, flexible, and inclusive policies
- Address structural factors that impact health and social well-being
- Build on strength in rural areas
Resources

- 988 hotline
- MN Thrives (Minnesota Department of Health)
- Men’s Sheds
- Foundation for Social Connection
- Rural Health Information Hub
Thank you!

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