

Increasing social connection for older people in marginalised communities

A scoping paper

June 2017

About NCOSS

The NSW Council of Social Service (NCOSS) works with and for people experiencing poverty and disadvantage in NSW to make positive change in our communities.

As the peak body for health and community services in NSW for over 80 years we support the sector to deliver crucial services that make a difference.

We work directly with communities to identify the challenges they face and solutions that will allow them to overcome those challenges.

Through collaboration with communities, services and across government, the private sector and other civil society organisations we work to see these solutions become a reality.

Together we advocate for a NSW free from poverty and inequality.

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NCOSS can be found at:

3/52 William St, WOOLLOOMOOLOO NSW 2011

phone: (02) 9211 2599

email: info@ncoss.org.au

website: www.ncoss.org.au

facebook: on.fb.me/ncoss

twitter: [@_ncoss](https://twitter.com/_ncoss)

Introduction

We know that social isolation can be a major problem for older people and can contribute to poor physical and mental health.¹ Conversely, social connection is an important protective factor, significantly increasing a person's wellbeing.

'Inclusive communities', a priority area of the NSW Ageing Strategy², emphasises the importance of older people being socially connected. The Strategy acknowledges the need to focus on older people from marginalised communities including:

- Aboriginal and Torres Strait Islander peoples; (referred to in this paper as 'Aboriginal')
- people from culturally and linguistically diverse (CALD) backgrounds;
- people who are lesbian, gay, bisexual, transgender and intersex (LGBTI);
- older people living in rural and remote areas;
- older people who are carers; and
- older people who have had lifelong disability.

Although some work has been done to address this issue at State and Commonwealth levels, a sustained systemic response is needed. Recognising this issue, NCOSS brought together members and stakeholders to begin a conversation about the barriers and enablers to social connection for older people from marginalised communities and to shape a plan for a systemic response.

To continue the conversation, here we scope the issue and outline some options to address it. We explore:

- **What is the problem:** highlighting why older people from marginalised communities experience greater barriers to social and community connection;
- **What is happening:** outlining Commonwealth and State initiatives aiming to increase social connection among older people in marginalised communities, and their challenges;
- **What works:** exploring the elements of approaches which are successful in fostering community connectedness; and
- **What needs to change:** exploring options at State and Federal level to increase connection.

¹ Heinrich, L. and Gullone, E. (2006) 'The clinical significance of loneliness: A literature review', *Clinical Psychology Review*, vol.26(6), pp.695-718.

² [NSW Ageing Strategy 2016-2020](#), Priority 5.

The problem: Why are older people from marginalised groups less connected?

Accumulation of disadvantage

We know that people from marginalised communities experience multiple and intersecting forms of disadvantage. This inequality compounds as people move through their life course, affecting their health and wellbeing. By the time they have reached older age, we know that that a life of disadvantage reinforces poverty and isolation.³

Looking at the experience of different marginalised communities, we see that the disadvantage faced over a person's lifetime affects their sense of connection in their later stages of life. We know that:

- Aboriginal elders, members of the Stolen Generations, feel isolated due the dispossession they have experienced from their land and culture. Aboriginal members tell us how important their kinship clan is very important to their sense of identity, but this has been eroded as people (often forcibly) move from their cultural lands⁴ ;
- Language barriers can make it harder for people from CALD or refugee backgrounds to connect to and participate in the community and there is not enough language support for older people. The isolation faced by these groups can sometimes be hidden because services assume that older people from CALD communities rely solely on their family for support;⁵
- LGBTI elders are more likely to live alone, without children to rely on for assistance. They may also be estranged from their family of origin;⁶
- As people with lifelong disability get older, their mobility impairments worsen and it is hard for them to leave the house without assistance;⁷ and
- Older parent carers of adult children with disability may experience long term isolation and financial disadvantage due to low engagement with the workforce over their lifetime and limited social opportunities as a result of the demands of their caring role.

Lack of affordable housing and transport options increase isolation for everyone, but because older people in marginalised communities are more likely to experience poverty, the effect is more significant. For example, our members tell us that as LGBTI people get older, the price of housing means that they may have to move away from their cultural community in the Inner West of Sydney which makes them more isolated. Sense of place is important for community connection, as this quote demonstrates:

³ Masten, J & Schmidtberger, J (2011) "LGBTI Aging: A Question of Identity" *Gerontologist* Volume 51 Issue 6, pp880-884, at 882.

⁴ National Aboriginal Community Controlled Health Organisation, (undated), [Understanding Isolation and Loneliness in Aboriginal Communities](#)..

⁵ Federation of Ethnic Communities Councils of Australia (2015) *Review of Research on Older People from Culturally and Linguistically Diverse Backgrounds* Australian Government Department of Social Services.

⁶ Masten, J & Schmidtberger, J (2011) "LGBTI Aging: A Question of Identity" *Gerontologist* Volume 51 Issue 6, pp880-884, at 882.

⁷ Physical Disability Council of NSW (2014) [The Impact of Ageing on the needs of people with Physical Disability](#) .

...here is a lifestyle, and so many gay people have lived in the inner suburbs and they don't want to move further afield, but stay in their locality where the discrimination will melt away,⁸

This also shows that isolation can be both locational and cultural.

Knowledge of and access to services and supports

We heard about the challenge older people from marginalised communities face in knowing about and accessing services and supports.

Some marginalised communities, such as those in rural and remote areas, may lack support options. For example, there may only be one service provider available in the community and it may lack the resources and know how to be responsive to older people from marginalised communities.

If support options are available, older people from marginalised communities are less likely to know about them. Pertinently, our members tell us that the My Aged Care website is not easy to access for older people who are Aboriginal and CALD and they often do not know it exists. Difficulty with this gateway - because of difficulties in communication and low take-up of technology - blocks vulnerable older people from access to a range of services. The Commonwealth Government has recognised this barrier, funding Partners in Culturally Appropriate Care (PICAC) to investigate how My Aged Care could become more accessible to CALD communities. This report is forthcoming, and our members suggest it would be valuable for similar work to be commissioned into the barriers experienced by Aboriginal people in accessing My Aged Care.

We have heard that the most significant barrier to older people from marginalised communities accessing supports is the perception that services and supports are not welcoming or culturally safe. Our stakeholders tell us that older people of marginalised communities feel most comfortable talking about their situation with someone in their community. Often, lifelong distrust of government services mean that people minimise their needs when interacting with someone outside their community, meaning that they do not get enough support to meet their needs.

For LGBTI elders fear of being discriminated against leads to a reluctance to access support. They may feel that it is necessary to hide that they are LGBTI and fear being 'outed' (someone else, such as staff, disclosing that they are LGBTI). Our members tell us that some services are tokenistic about LGBTI inclusion (for example displaying a rainbow flag at reception) but have not taken steps to ensure that they provide LGBTI-inclusive services. There continues to be a lack of awareness of the needs and concerns of older LGBTI peoples, a lack of targeted services across the board and a lack of awareness that there need to be targeted services.

Many older parent carers have experienced long periods of disengagement from disability support services and many can be identified as 'hidden carers'. This may be influenced by negative experiences of service engagement or an absence of adequate supports early in their caring journey, which is likely to have started 30

⁸ ACON (2014) [*Consultation Report: Service Needs and Preferences of Older Lesbian, Gay, Bisexual and Transgender People in NSW*](#), p9.

or more years ago. As older parent carers age, frailty or poor health can threaten the sustainability of the caring role and increase the need for both disability and ageing services, however their disengagement from services may mean their need for support is only recognised as a result of a crisis resulting in hospitalisation. Hidden older parent carers need to be identified earlier so they can be provided with tailored information and support sustain the caring arrangement and engage in future planning.

Lack of funding to local community groups

Small community groups often have the most responsive approach to community connectedness, but lack resources to implement their ideas.

We know that many organisations are funded to run programs to increase social connection. Many seniors' social groups are funded as Commonwealth Home Support Program (CHSP) social support groups and are accessible through My Aged Care. Our members tell us that the obligation on CHSP providers to charge fees of social support group participants is posing a considerable barrier to access for marginalised groups and increasing the administrative burden on social support group providers.

At the most local level, we've heard that small unregistered local community groups whose volunteers provide the backbone of social support, become unsustainable as a result of financial pressures associated with supporting volunteers. However the accountability requirements of government funding would change the nature of the group.

We know that local communities have the solutions to the problems they face. We need flexible funding to enable community members to drive solutions they know work.

Current funding requirements may drive out these local solutions. We have heard that for some local groups - sharing a meal, pivotal to connectedness, may be restricted as a result of WHS requirements; providing a 'lift', with the community bus may be restricted if not all participants have engaged with My Aged Care to receive funding. If we want to maximise community connection, it is important that all funding mechanisms focus on enabling these local solutions.

What is happening: Government initiatives strengthening social connectedness and their challenges

Commonwealth Government

Many initiatives that promote social connection face an uncertain future as aged care services transition to being delivered via individualised budgets instead of block funding.

- Supports under the Home Care Package Program (HCP) have been delivered via individualised budgets since July 2015, with the introduction of Consumer Directed Care.
- While supports under the Commonwealth Home Support Program (CHSP) are currently block funded, the Government intends to merge this program with HCP. In the 2017-18 Commonwealth Budget, the date for the merger was extended from 30 June 2018 to 30 June 2020.

Commonwealth funded social connection initiatives include:

- **Community Visitors Schemes:** Community organisations are funded to coordinate and train volunteers who visit people receiving Home Care Support packages (and those in residential care). Despite a positive review, this program has only been extended until June 2018.⁹
- **Social support on a 1:1 or in a group setting for people receiving support under the CHSP:** Whilst the Government recently extended the CHSP to June 2020, uncertainty exists around the long-term future of group social support once budgets have been individualised because participants may be reluctant to pay the full costs of social support (including administrative costs) from their personalised budgets. Members tell us that group social support is a valuable and cost effective avenue for social connection, as well as a source of information for isolated people.
- **Jointly funded Sector Support and Development Officers:** Funded by the Commonwealth Government under CHSP, these regional positions are auspiced by a range of non-government community organisations and local government. They are tasked with improving the capacity of funded organisations to better meet the needs of their target populations and play an important role in supporting the development and implementation of wellness and reablement in community based aged care. There are four types of SSDOs:
 - Sector Support and Development Officers
 - Multicultural Access Project Officers;
 - Aboriginal Sector Support and Development Officers;
 - Sector Support and Development Training Services

Our members tell us about the valuable contributions to social connectedness for older people made by SSDOs, working alongside both local services and community members. Despite the extension of the CHSP, SSDOs only have funding certainty until June 2018.

⁹ Minister for Aged Care, Ken Wyatt (2017) [Review of Community Visitors Scheme](#).

The Commonwealth Government is currently consulting on the development of an Aged Care Diversity Framework. This Framework will replace the LGBTI and CALD Ageing and Aged Care Strategies that expire on 30 June 2017 and to fill the significant gap arising from the absence of an Aged Care Strategy for Aboriginal people and other special needs groups under the *Aged Care Act*. Members are concerned about the amalgamation of the different marginalised communities within the Framework. Separate action plans are needed for each diversity group, and clear accountability and reporting mechanisms are needed against them to drive real change.

SPOTLIGHT: ABORIGINAL SECTOR SUPPORT & DEVELOPMENT OFFICERS ORGANISE EORA ELDERS OLYMPICS (SYDNEY).

Since 2015, ACSA Aboriginal Sector Support and Development Officers have organised the Eora Elders Olympics Event. This event is duplicated around the state by various organisations and workers, not always the Aboriginal SSDO.

Individual teams design their own banners and uniforms to display and wear on the day, representing their team with great pride. Although the games are very competitive, everyone plays in the spirit of goodwill and sportsmanship. Clients have so much fun coming together for a happy occasion, rather than Sorry Business which is sadly the case too often.

Around 300 people attend the event throughout the day including the Elder Olympiads, carers, students, volunteers and families. The Elder Olympiads engage in modified sporting activities competing in a friendly environment. Elders were also connected to expert advice relating to health and well being to address their nutritional, physical and recreational needs in the lead up, during and after the event which empowers Elders to live healthily.

This project is supporting and strengthened connections in the community by preserving Aboriginal culture through the Elder Olympics with the inclusion of traditional aboriginal games. The Elders Olympics is also strengthening connections across communities and sponsoring pride in Aboriginal culture amongst the many different Aboriginal groups within the South East Sydney and Inner West Areas

NSW Government

The NSW funding landscape also poses some risks to social connection programs.

- The NSW component of funding for SSDOs is uncertain, as 32% of their funding comes from the Department of Family and Community Services Ageing, Disability and Home Care (ADHC) under CCSP, which transitions to the NDIS by 1 July 2018. Similarly, the future of the ADHC funded Older Parent Carer Program is uncertain.
- Neighbourhood Centres run programs facilitating community connection using funds from the Community Builders Program. The Targeted Earlier Intervention and Prevention reform process means

that these funds will be prioritised towards vulnerable young people, with programs targeted at older people uncertain.

Liveable Communities Grants under the NSW Ageing Strategy is the NSW Government's funding mechanism for social connection. \$4 million of grants were announced over 4 years. The grants allocated in Round 1 (2015-16) have some focus on marginalised communities, but a 1-year grant is insufficient to maintain momentum of the projects.

SPOTLIGHT – THE KITCHEN PROJECT

The Kitchen Project, developed by Bankstown Women's Health Centre facilitates older people from CALD backgrounds to prepare and enjoy food together. As the project progresses each term, participants teach each other dishes from their cultures, and then volunteer to teach cooking skills to local high school and TAFE students. Participants are given a sense of independence and empowerment by providing the opportunity to give back to the community, utilising their skills, wisdom and experience.

The program is based at local high schools to allow for interaction with students and offers free travel through a partnership with a Community Transport Provider. Funding is needed for a second year to enable the program to continue.

The next round of Liveable Communities Grants presents an opportunity to lay the foundations for a systemic approach to creating connectedness for older people in marginalised communities. Before exploring options for doing this, we look at the successful elements in fostering community connectedness.

What works: successful approaches in fostering community connectedness

Social networks are a crucial element to building connectedness. Indeed a person's isolation or connectedness can be defined in terms of the extent, range and depth of social networks, including the extent to which people feel able to rely on their social network for support.¹⁰

Research identifies key elements that are successful in fostering social inclusion and building social support. The key elements are:

- making use of existing community resources (such as public spaces);
- focusing on quality rather than quantity of relationships;
- using volunteers to run programs;
- utilising (and funding) local councils as a gateway to accessing community services;
- providing meaningful, purposeful activity;
- using targeted and tailored approaches;
- age friendly communities and transport; and

¹⁰ COTA Victoria (2014) [Social Isolation: Its impact on the mental health and wellbeing of older Victorians](#), at 10

- providing opportunities for active engagement: involving older people in the planning, delivery and evaluation of programs.¹¹

Of course, strategies and projects need to be developed in consultation with community leaders and members.

To ensure projects work for the community, they need to be sustainable, building on targeted solutions developed by the community. We know from our members and research that it can take a number of years for projects to establish ownership and responsibility amongst participants.¹²

SPOTLIGHT – OLDER WOMEN’S NETWORK

The Older Women’s Network (OWN) auspices self-directed collectives of older women, each collective run by and for older women. Each of the 20 groups in NSW plans activities to suit its membership.

The groups are run locally by volunteers, with administrative support available from OWN NSW.

Groups include an Aboriginal circle and a Greek group in Bankstown.

What needs to change: Options to increase social connectedness for older people from marginalised communities

We’ve heard about a number of options for creating a systemic partnership approach to connection for older people from marginalised communities. This is the start of the conversation. Here we present some options for the NSW and Commonwealth Governments. We will next be seeking your view about other solutions that work in your community.

It is important to be sure that our chosen solutions are effective at increasing social connection for older people in marginalised communities. To assist with this, we recommend the actions be measured against an Outcomes Measurement Framework.

This paper does not advocate any particular model or framework at this stage but merely recommends in principle that a sector wide approach to measuring the social impact of any agreed actions to be delivered which can track progress towards a more inclusive society for the target groups identified in this study. As an example, and to clarify what we are suggesting, the Results Based Accountability Framework is one model that could be applied. There are also others that should be considered if this recommendation gets general approval.

¹¹ Aged and Community Services (2015) [Social Isolation and Loneliness Among Older Australians: A Discussion Paper](#).

¹² Bond, M. Howden, P. Ralston, N. (2014) [Social isolation in older adults](#), at 10

Actions for NSW Government

The next round of the Liveable Communities Grants program is an opportunity to lay the foundations of a systemic approach. In order to build on what works, we propose that funds are made available through the Liveable Communities Grants program to:

1. Develop communities of practice to demonstrate ways to extend existing knowledge and skills in working with marginalised communities and support workers at the local level to respond appropriately.

Communities of Practice are “groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly”.¹³ Members form relationships through joint activities and discussions and develop a shared repertoire of resources: experiences, stories, tools, ways of addressing recurring problems—in short a shared practice. This takes time and sustained interaction.

Many communities of practice already exist at a regional level in the form of Aged Care Interagencies, CHSP Forums and HCP provider meetings. Of particular note are:

- the Sector Support Development Network (SSDN). comprising SSDOs across the State¹⁴; and
- NSW Neighbour Aid and Social Support Association (NASSA), the peak body for organisations provides social support.¹⁵

Both these bodies hold regular meetings and conferences, but are currently unfunded. Our members tell us that when a previous iteration of SSDN was funded, attendance at meetings and conferences was larger, particularly for regional representatives.

Funding these or similar networks would allow the NSW Government to build the infrastructure for increasing connection. Our members emphasise the importance of community leaders be included in communities of practice.

Key members of a community of practice are CHSP social support providers, whose future block funding is uncertain in the trend towards individualised funding. Given the stated commitment of both NSW and Commonwealth Governments to older people from marginalised communities,¹⁶ it is important to prioritise and secure this funding.

2. Work together with the Commonwealth Government to ensure continued funding of SSDO positions

The NSW Government needs to secure its portion of funding of SSDOs. Our members tell us that these positions bring great benefit to the State Government, especially in terms of providing information to multicultural communities about the aged care reforms.

¹³ Wenger-Trayner, E, and Wenger-Trayner, B (2011) [“What is a community of practice?”](#)

¹⁴ NSW Sector Support and Development (2016) Aged Care Sector Support Development: The Case for a Regional Approach White Paper.

¹⁵ [NSW Neighbor Aid and Social Support Association](#)

¹⁶ In NSW Ageing Strategy and Aged Care Diversity Framework.

3. Provide a pool of funding to support small local initiatives

To support small-scale volunteer initiatives, local community groups need access to small grants without onerous accountability measures and reporting requirements of a formal government contract.

Many community initiatives are supported using an intermediary organisation that manages a program of small grants for local groups. For example, Carers NSW administers \$500 grants for local groups; My Choice Matters administers grants of up to \$5,000 that enable a person with disability to run a project; under the NDIS, Disability Support Organisations administer a program of \$5,000 grants to peer networks. All these schemes use a non-government organisation to shield small community initiatives from the bureaucracy of government accountability requirements and assist local informal groups to apply for and report on the use of funds.

Access to small grants in this way will facilitate and seed the growth of local small volunteer based initiatives that promote connection and allow older people to make a contribution.

Our members tell us about small scale, local ideas from their communities that might be facilitated with funds of this nature. Examples include a yarnning group in the Aboriginal community visiting older people who are house bound, and older people being supported to organise welcoming dinners for refugees in the local area. Social support networks could be funded through this mechanism.

4. Better support collaboration and partnerships

We have heard how small organisations sometimes lack the capacity and infrastructure to secure funding and provide programs on an ongoing basis. Increased funding and support to these organisations to collaborate and partner would enhance their capacity to deliver locally responsive support and build on existing resources.

5. Extend Liveable Communities Grants Program targeting marginalised communities

The Liveable Communities Grants Program is an established government funding program that has begun effective work in supporting connectedness among older people. Projects have been funded for 12 months and should be extended to strengthen reach into community and promote sustainability. In addition, the extension of the grants program with a specific focus on older people in marginalised communities could continue to demonstrate creative responses to older people in marginalised communities.

Building on what works, the Livable Communities Grants should be used as a mechanism to identify initiatives to be targeted for longer term funding more broadly across NSW.

Additionally or alternatively, a portion of the next round of funding could be set aside for marginalised groups.

6. Bring together organisations to share best practice

Our members tell us that periodic face-to-face interaction, such as conferences, provides an important mechanism to share best practice, build capacity, showcase innovation and maintain enthusiasm in the face of challenges. This is particularly valuable for workers in regional areas who can face isolation and limited access to capacity building opportunities and resources.

If they are resourced sufficiently, local councils are well placed to provide a coordinating role in such conferences, particularly in rural and remote areas.

Of course, we know that other priorities under the NSW Aging Strategy, such as accessible transport and housing, have a substantial impact on social connection. A coordinated response in all areas is needed.

Actions for Commonwealth Government

The NSW Government should advocate that the Commonwealth takes the following actions:

1. Commit to ongoing funding of SSDO positions

We have highlighted the valuable work of SSDO in building sector capacity to increase connectedness. To increase social connectedness for marginalised older people, it is crucial that block funding for SSDO positions be maintained. Maintaining these positions requires a commitment from the Commonwealth that the extension of funding for CHSP includes SSDO positions.

2. Maintain social connectedness initiatives, particularly more funding to social support

To ensure a systemic and sustained response to community connectedness, it is important that during the CHSP funding transformation, group social support, the Community Visitors Scheme and other social connectedness initiatives continue to be block funded.

We particularly highlight the importance of maintaining recurrent block funding to social support under CHSP. As NASSA points out, removing block funding will mean that these services are no longer viable; and older people from marginalised communities or on limited incomes will bear the greatest brunt of this.¹⁷

3. Improvement to My Aged Care

As we have highlighted, social isolation is increased if older people from marginalised communities cannot access My Aged Care. To improve accessibility, the Commonwealth should take the following actions:

- Develop linkage services to provide information and facilitate entry into the aged care system for older people from marginalised communities. These services should be block funded and delivered at a local level by organisations with proven experience in working with marginalised communities. Local councils, particularly in regional and rural areas, are well placed to deliver these linkage services, being the only multi service provider and community ‘hub’ located in many of the rural and regional areas in NSW.
- Offer one-on-one support to older people from marginalised communities accessing aged care services, including supported referrals to My Aged Care.
- Additional funding to provide specific information sessions to older people from marginalised communities and their supporters.

¹⁷ [NSW Neighbor Aid and Social Support Association](#), *Social Support Services: Connection and Wellbeing – Beyond 2018*.

Recommendations of the forthcoming PICAC review into My Aged Care will develop further options for reform in this area. As highlighted, it would be prudent to commission a similar review into improving access to My Aged Care for other marginalised groups, particularly Aboriginal people.

Where to from here?

This is the start of the conversation about how government and community can work together to increase connection for older people from marginalised communities. We want to hear your ideas and solutions to further develop a strategy for action.

If you would like to be part of the conversation, get in touch with us at:

Ya'el Frisch

Phone: 8960 7908

Email: yael@ncoss.or.au