

Does social connectedness prevent dementia *and more*?

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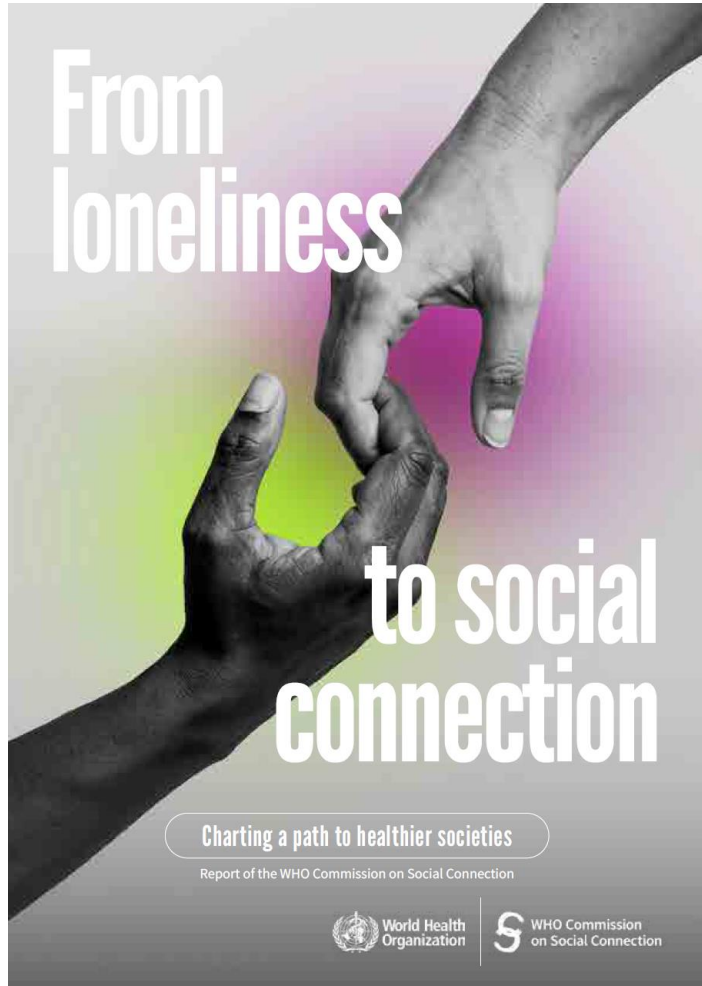
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Isolation and loneliness in older Australians

- 50% of people aged over 60 are at risk of social isolation
- A third will experience loneliness later in life, more so for
 - People aged 75+
 - **People living in aged care**
 - Migrants, refugees, ethnic minorities, lack English language
 - People with mental illness
 - Sexually diverse individuals
 - Indigenous people

WHO Commission on Social Connection (2025)



- **1 in 6 people worldwide affected by loneliness**
- **Significant impacts on health and well-being**
- **Loneliness linked to estimated 100 deaths/hour; >871 000 deaths/ year**
- **Strong social connections → better health and longer life**

WHO terminology

- ***Social connection***: an umbrella term describing the three dimensions – structure, function and quality – of how people relate to and interact with each other
- *Social isolation*: a form of social disconnection, the objective state of having few roles, relationships and social interactions with others
- *Loneliness*: a form of social disconnection, is a negative, subjective emotional state resulting from a discrepancy between one's desired and actual experiences of connection

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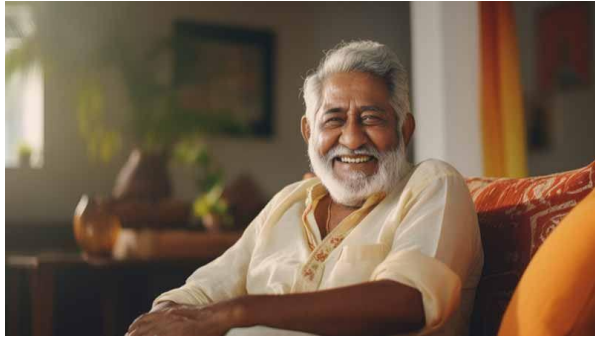
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- **Loneliness**: a form of social disconnection
 - a negative, subjective emotional state resulting from a discrepancy between desired and actual experiences of connection

Being alone

vs

Being lonely



**Correlation
only 28%**



Loneliness

- **Rates: adolescents (20.9%); 30-59 (15.1%); 60+ (11.8%)**
- **M = F overall but in adolescents and older F > M**
- **Highest rates low-medium income countries (LMIC) (24.3%),
then gradient low-medium to medium-high to high income
countries HIC (10.6%)**

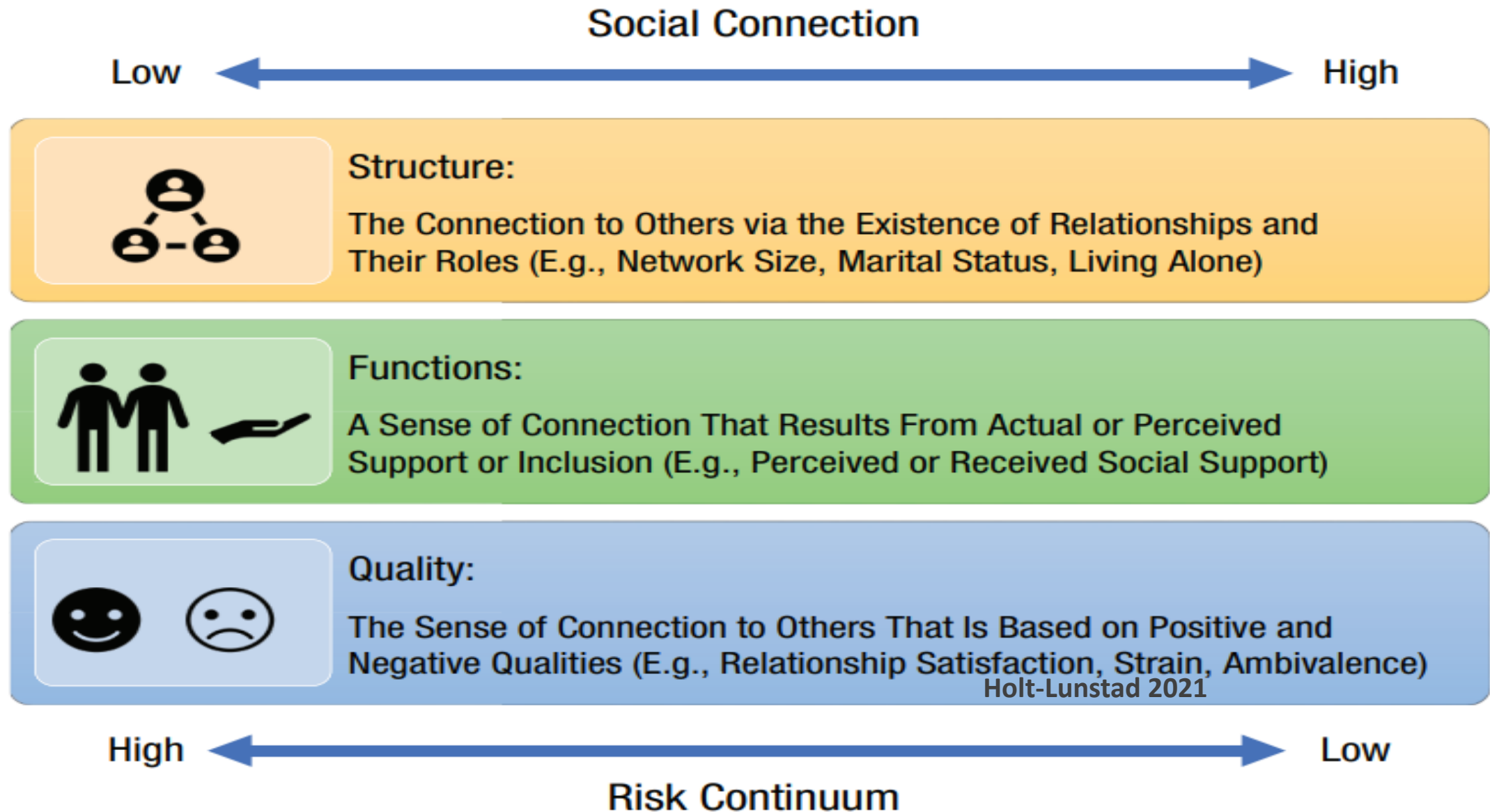
What is social health?

- **Having connections**
 - Family, friends
 - People you see
 - Activities with others
- **Feeling connected**
- **Feeling good about your connectedness**



- ***Feelings of caring about others and feeling cared about by others, such as love, companionship or affection***
- ***Feeling of belonging to a group or community***

Social connections framework



Examples of social structure, function, quality

Structure

- ☐ Household size
- ☐ Frequency, variety of interactions
- ☐ Community groups
- ☐ Network size (social circle)
- ☐ Activities – clubs, religion
- ☐ Married/ partnership status
- ☐ Children, grandchildren

Function

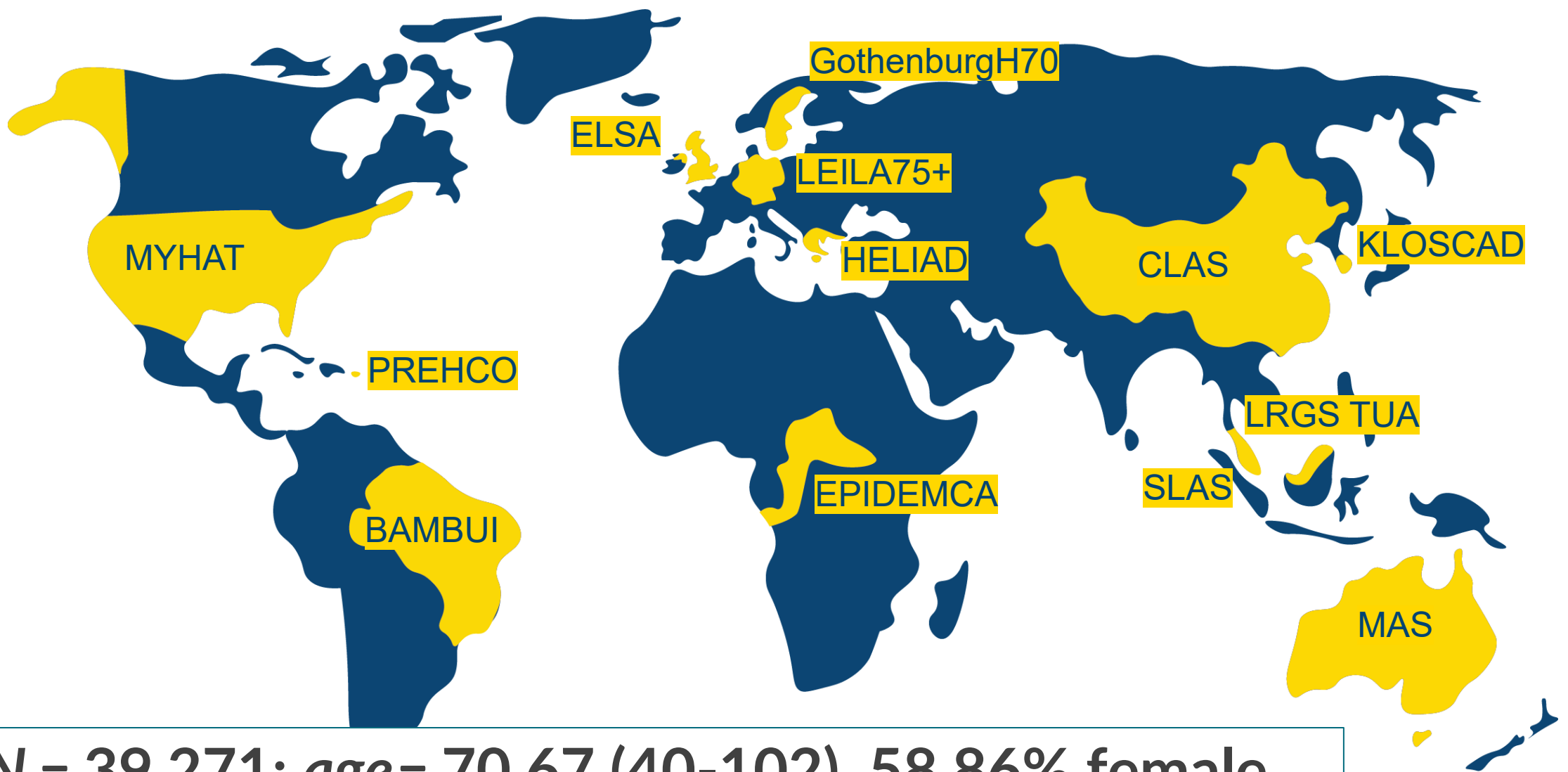
- ☐ Having a confidante
- ☐ Received and perceived support
 - ☐ e.g. favours, advice, emotional

Quality

- ☐ Positive (and negative) relations
- ☐ Feeling connected, not lonely
 - ☐ E.g. trust, intimacy, judgemental

Why do we care about social connections?

- **High prevalence of social isolation and loneliness**
- **Social isolation accounts for 5% of population attributable risk for dementia**
- **Risk of mortality due to poor social health comparable to risk of mortality due to other risk factors eg obesity, smoking**

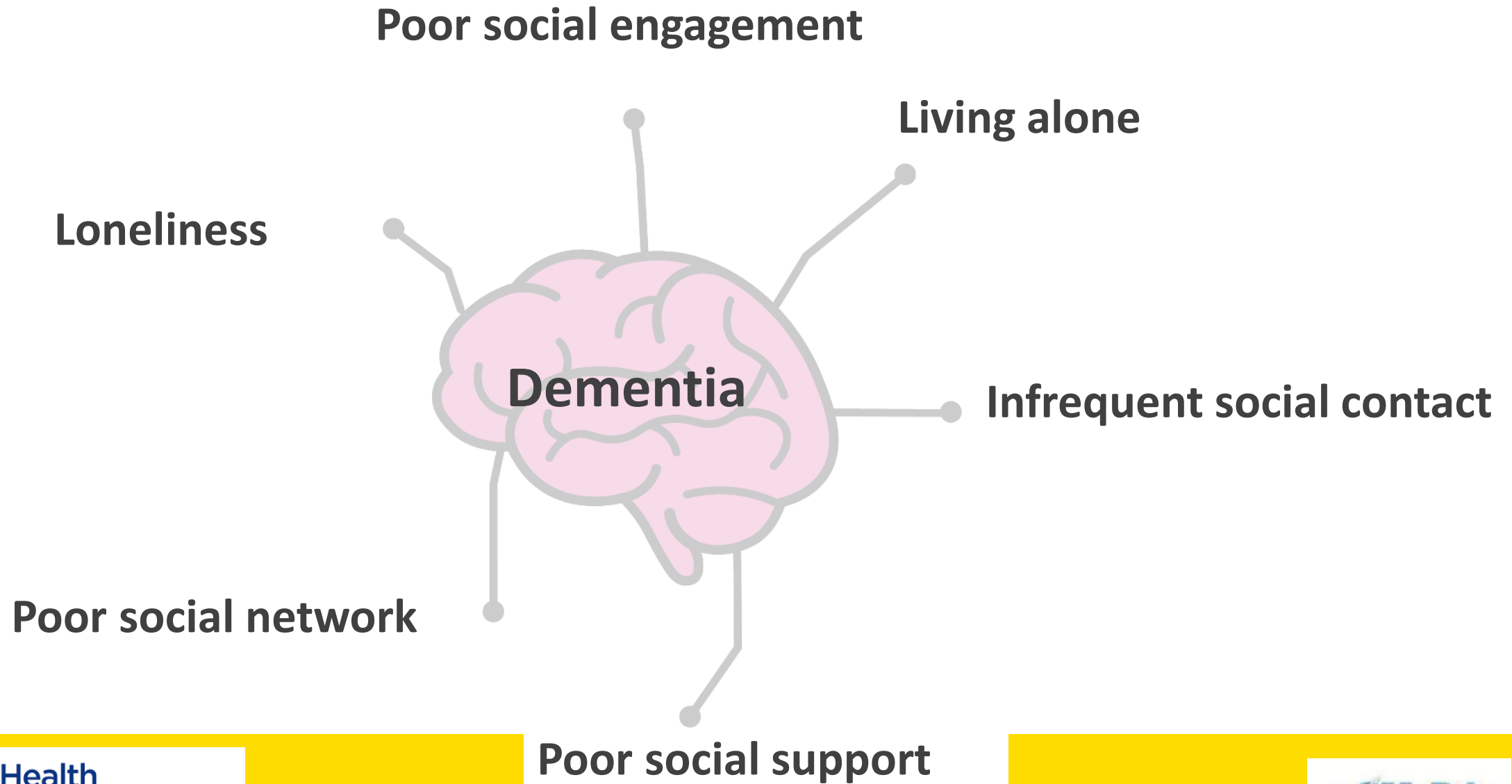


($N = 39,271$; $age = 70.67$ (40-102), 58.86% female,
Education = 8.43 years, Follow-up = 3.22 years)

Samtani et al 2022;
Mahalingam et al, 2023

Data from 13 studies of ageing across the globe

Social connections and higher risk of dementia



Social connections and higher risk of dementia

Poor social engagement

CAVEATS

Loneliness 1. Depression

2. Apathy

3. Personality – neuroticism, introversion

4. Poor physical health

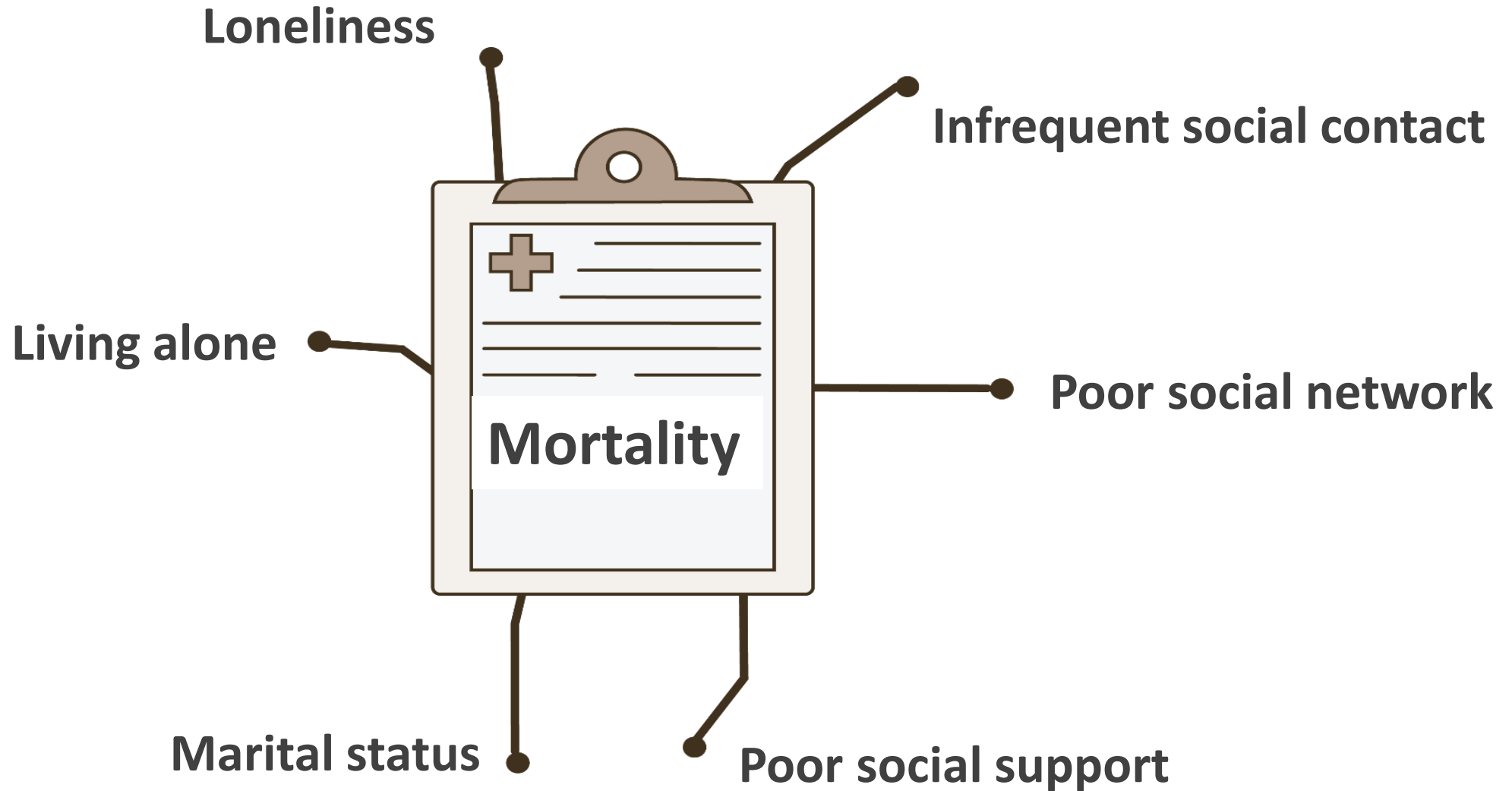
5. Reverse causality ie undiagnosed early dementia may reduce social contact

social contact

Poor social network

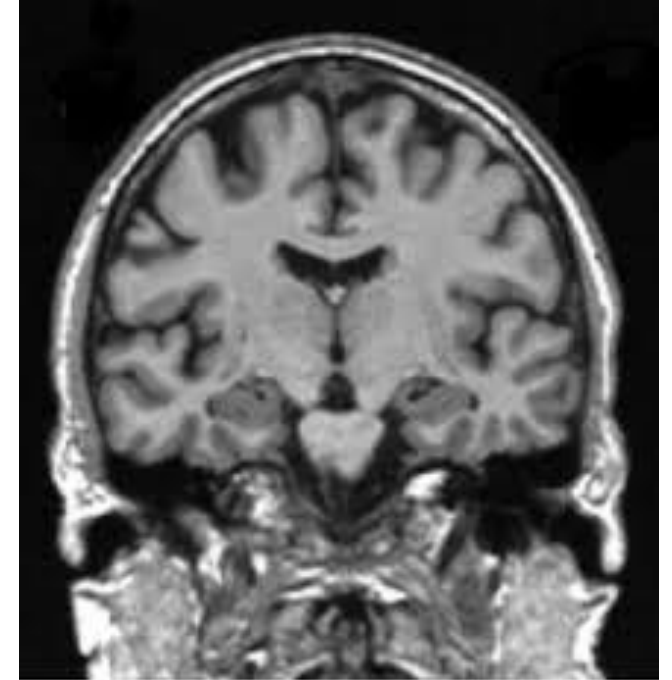
Poor social support

Social connections and higher risk of mortality



Associations of social health and brain MRI scans

- **Social support associated with**
 - Larger brain volumes
 - Slower decrease in total brain volume over time
 - Cognitive resilience
- **Social Isolation/ loneliness associated with**
 - Smaller brain volumes



Brain MRI & Social Health

Rotterdam: social support associated with larger total grey and white matter volumes & slower decrease in total brain volume over time¹
Loneliness associated with smaller white matter volume¹

US Framingham; good social support was associated cognitive resilience²

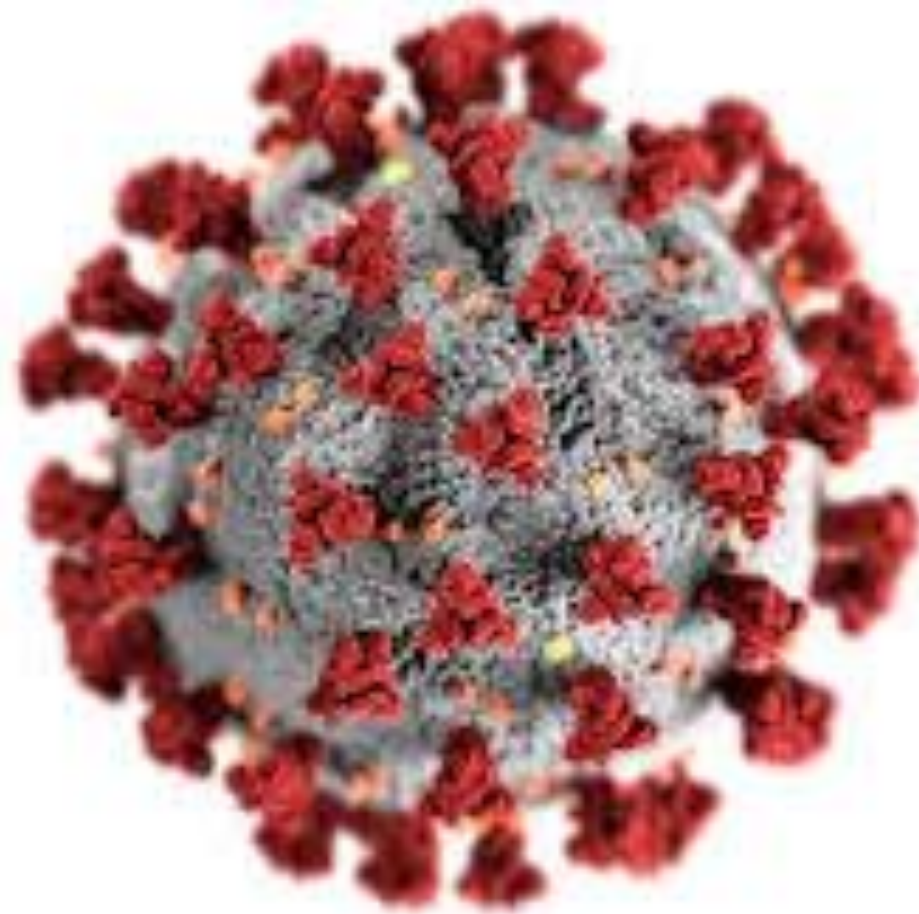
UK Biobank: socially isolation individuals lower grey matter volumes in temporal, frontal and other regions, with grey matter volumes mediating association between isolation and cognition at follow-up³

1 van der Velpen, I. F. *et al.* Social Health Is Associated With Structural Brain Changes in Older Adults: The Rotterdam Study. *Biological Psychiatry: Cognitive Neuroscience and Neuroimaging* **7**, 659–668 (2022).

2. Salinas, J. *et al.* Association of Social Support With Brain Volume and Cognition. *JAMA Network Open* **4**, e2121122 (2021).

3. Shen, C. *et al.* Associations of Social Isolation and Loneliness With Later Dementia. *Neurology* **99**, e164–e175 (2022).

4. Schurz, M. *et al.* Variability in brain structure and function reflects lack of peer support. *Cerebral Cortex* **31**, 4612–4627 (2021).



COVID – A Natural Experiment

- Enforced social isolation
- Nursing homes
 - Window visits
 - Window therapy
 - Increased agitation, depression
- Grandparents cut off from children and grandchildren



Health barriers to being connected

- ☐ Hearing, vision
- ☐ Mobility
- ☐ Pain
- ☐ Frailty
- ☐ Continence



Reducing health barriers

☐ Hearing, vision ✓

☐ Mobility ✓

☐ Pain ✓

☐ Frailty (✓)

☐ Continence ✓



<https://toiletmap.gov.au/>





Psychological barriers to being connected

☐ Depression

☐ Anxiety, social phobia,
agoraphobia

☐ PTSD

☐ Bereavement

☐ Paranoia

☐ Apathy

☐ Alcohol, drugs

☐ Pride, vanity

☐ Stigma



Reducing psychological barriers

☐ **Depression** ✓✓

☐ **Anxiety, social phobia,
agoraphobia** ✓✓

☐ **PTSD** ✓✓

☐ **Bereavement** (✓)

☐ **Paranoia** ✓

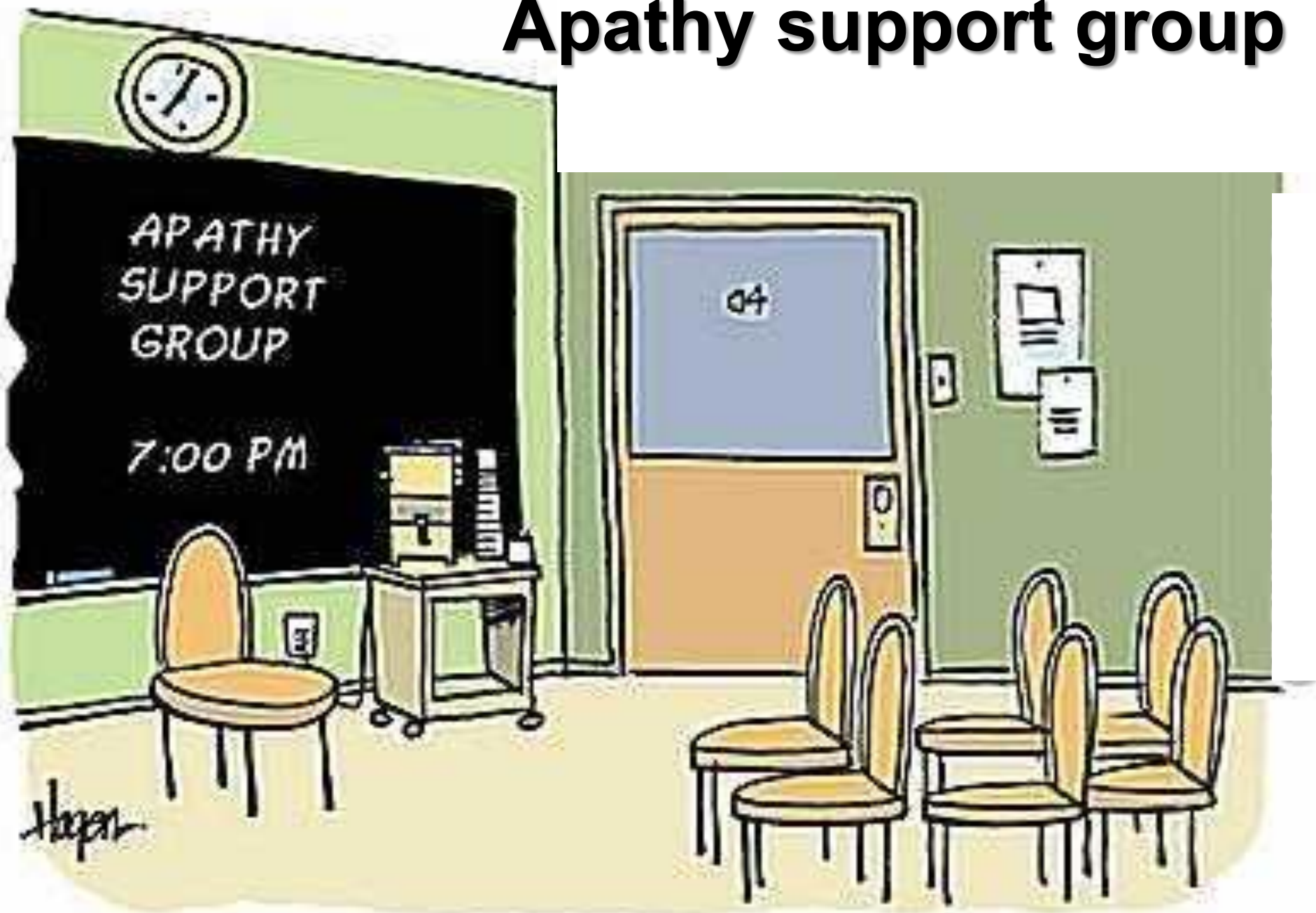
☐ **Apathy** (✓)

☐ **Alcohol, drugs** (✓)

☐ **Pride, vanity**

☐ **Stigma**

Apathy support group



**ANTI
SOCIAL
SOCIAL
CLUB**



Social Barriers to being connected

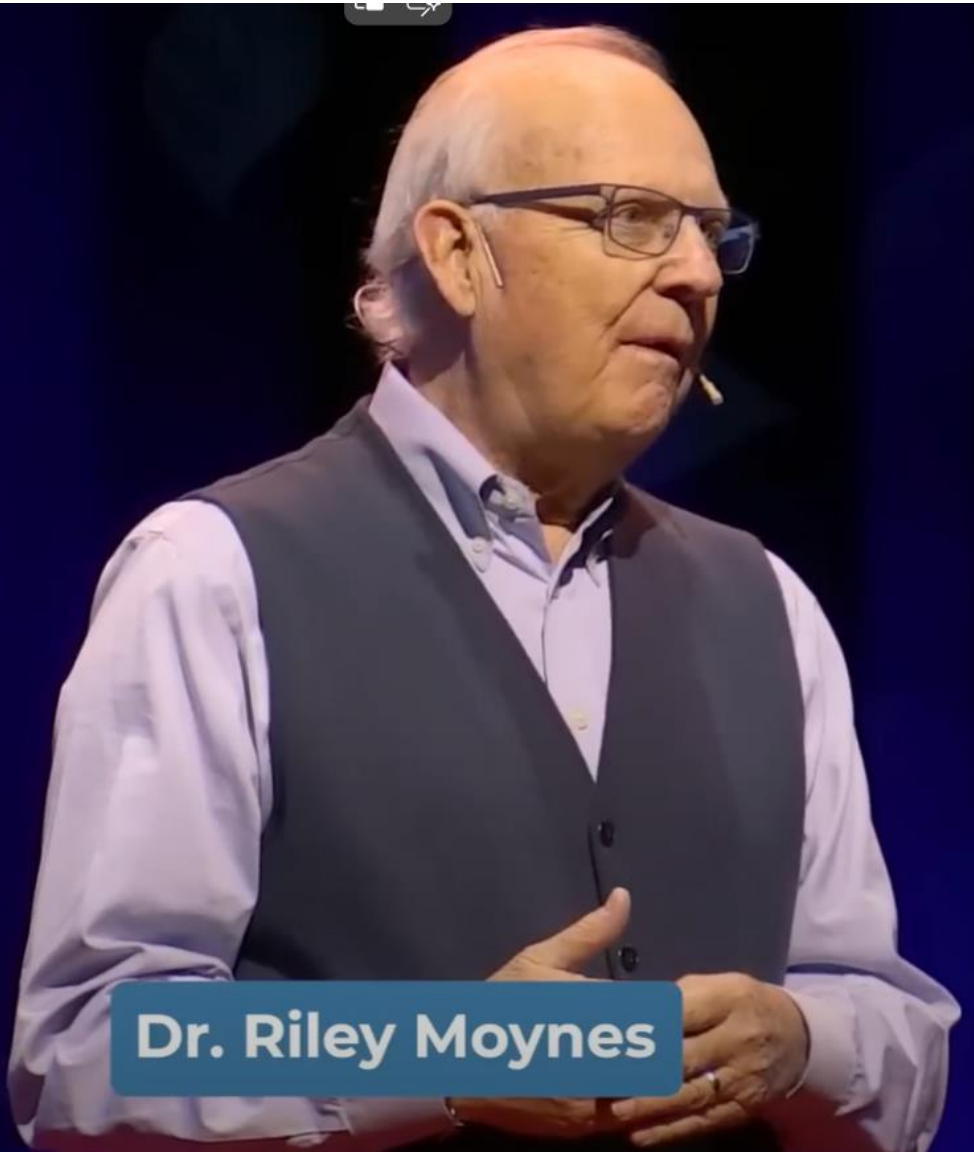
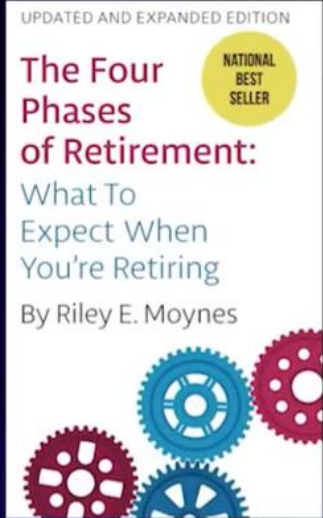
- ☐ Finances
- ☐ Epidemic
- ☐ Public transport
- ☐ Driving
- ☐ Friends/family
- ☐ Rural location

Reducing Social Barriers

- ☐ **Finances – public policy, superannuation**
- ☐ **Epidemic – public health**
- ☐ **Public transport – age friendly buses, taxi subsidisation**
- ☐ **Driving – driving lessons, family/friends, community transport**
- ☐ **Friends/family**
- ☐ **Rural location – public policy**
- ☐ **Advocacy groups in Australia eg Ending Loneliness Together**
- ☐ **International – UK (Ministry), Canada (Policy)**

Retirement

- **Loss of social contact/ connection**
- **Loss of status**
- **“Relevance deprivation syndrome”**
- **Loss of purpose**
- **Men adapt less well than women**
- **Lack of planning for post-retirement**



The four stages of retirement

1. Vacation
2. Loss/
depression
3. Trial & Error
4. Reinvent &
rewire



My wife said "Watcha doin' today?"

I said "Nothing"

She said, "You did that yesterday"

I said "I wasn't finished."

Sandi V

www.wackywits.com

Building social connectedness

Activities

- Shared interest groups
 - Film club, book club,
 - Swimming, bushwalking
- Faith based
 - Church, temple, bible group
- Organisations
 - Older Women's Network
 - Men's Shed



Building social connectedness



- **Support**

- Discussion
- Counselling
- Education
- Mentoring



- **Volunteers/ service provision**

- <https://makeadifference.volunteering.nsw.gov.au/seniors-aged-care-volunteering/in-all-sydney-nsw>
- <https://nationalseniors.com.au/>
- Community development



Building social connectedness

- Group or one-to-one
- In person, telephone or online
- Organised – Seniors clubs, Men's Sheds, Older Women's Network, NSW Health, Council on the Ageing COTA (NSW)
- Community gardens
- <https://nationalseniors.com.au/stories/trailing-topics/social-connectedness>





- Improving health, wellbeing and social welfare by connecting patients to community services
- Growing movement in UK



Social media can help combat isolation and loneliness?

- **Better mental (and physical) health**
- **Reduce perception of loneliness and/or isolation in older adults**
- **Greater contact between older adults and family members**
- **Source of support**
- **Sense of belonging**
- **Reduce loneliness**

¹Fu L, Xie Y 2021 doi: [10.3390/healthcare9091143](https://doi.org/10.3390/healthcare9091143)

²Kusumta L 2022 doi: [10.1590/1518-8345.5641.3526](https://doi.org/10.1590/1518-8345.5641.3526)

Benefits of Social Media for Older People

<https://nationalseniors.com.au/uploads/0820234787STP-TechHubEguide-SocialMediaGuide-A4-210x297.pdf>

Benefits of Social Media for Older People:

1. **Stay Connected:** eg Facebook, WhatsApp, keep in touch with family/friends
2. **Learning and Exploration:** eg cooking, Pinterest, lectures on YouTube
3. **Join Communities:** Find groups of people with shared interests - gardening, reading, knitting, there's a community for everything!
4. **Share Memories:** Instagram or Facebook - share photos and videos, creating a digital scrapbook of memories
5. **Stay Updated:** Twitter and Facebook are news sources for many

Safety tips – privacy, scams, passwords, fake news



Dr Suraj Samtani

Maintaining Social Engagement study

The University of New South Wales has designed a free online program for people with memory concerns to help them stay socially connected

Go in the draw to win 1 of 3 \$100 gift vouchers



What's involved?

- 5 online group sessions
- 3 individual online sessions to track progress

Who can take part?

- Aged over 55
- Noticed changes in memory/thinking OR living with mild cognitive impairment or early stages of dementia
- Able to join online meetings via laptop or tablet
- Have conversational English
- Located anywhere in Australia

How will I benefit?

- Connect with others
- Maintain or enhance your confidence by engaging with others in a small group setting

Interested?



- Accepting participants throughout 2024 & 2025
- Email: s.samtani@unsw.edu.au
- Phone: 0450 880 580

Ethics approval
iRECS0834



UNSW
SYDNEY



Training people in social skills

- Empathy
- Picking up cues eg non-verbal
- Reading emotions eg boredom, irritation
- Failing to reciprocate appropriately or at all
 - Learn from autism therapy
- Social skills decline as cognition declines
- People with mild cognitive impairment or dementia become more isolated
- Online training programs, groups at CHeBA

There is so much you can do

- Ring a friend, arrange coffee or an activity you both enjoy eg movie, gallery, watch a sport, 'people-watch' at beach
- Organise a Whats App or Facebook group
- Previous suggestions
- There is *no* one size fits all
 - Personality eg introvert vs extravert
 - Culture
 - Lifetime interests, hobbies
 - Current physical, psychological and cognitive abilities

Conclusions

**Good social health
is good for our
physical, mental
and cognitive health**

**Need policy &
programs to focus
on providing
opportunities for
older adults to
connect with others**

**Consider social health
in people with dementia**

- Community**
- Residential care**

Thank you



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