Increasing the Social Connectedness of Older People
Insights and Opportunities for Change

MAY 2018
Māu anō e rapu he oranga, nā to rourou, nā taku rourou, ka ora ai te iwi.

You will find your own path to well-being, but with your basket and my basket we will flourish.
Introducing Generations

Generations is a multi-year social innovation project to develop innovative solutions to build the social connectedness of older New Zealanders. The goal of Generations is to reduce social isolation among older people, and ensure they have positive social connections to friends, family, communities, work and other non-paid day activities that enable them to thrive, participate and contribute as full citizens.

As social isolation in older people has emerged as a key health and social issue in Aotearoa New Zealand (and the wider western world), there has been a large volume of work undertaken to quantify and understand the problem. New Zealand has many talented experts working in this area. However, most of these efforts are large scale research and policy projects, and it will be many years before impact is seen. Generations is a project that enables quick understanding of the issues, and works together with older people, their families and relevant stakeholders to co-design, prototype, and implement solutions that work.

Generations is a multi-year project that won’t be limited to a particular type of service solution. It is likely our final set of solutions will be a mix of approaches that may involve technology, policy, service, programme, infrastructure and other kinds of initiatives.

By the end of the initiative we will have between two to four solutions which have been developed, prototyped and refined in the real world. These solutions will also be supported by a scale and sustain plan to ensure ongoing impact.

Importantly, the full engagement of older people in Generations as designers, doers and deciders will be a significant and vital contributor to the success of Generations.

Generations has been initiated by innovate change, a leader in social innovation practice that has worked with over 50 different NGOs, ministries, DHBs, councils, crown entities, iwi and philanthropic organisations over the last six years. Generations benefits from our partnership with Innovation Unit - a social enterprise that creates new solutions for thriving societies with bases in Australia and the UK, and significant experience in building scalable solutions that enable positive ageing.

innovate change is passionate about using the process and methods of social innovation to create lasting impact. We are concerned that innovation efforts often do not focus on the health and well-being of older adults. For this reason, we have chosen to invest significant resource in getting Generations started and we are now seeking partners to support the continuation of the initiative.

This document shares what we have learned from the project’s initial discovery phase, drawing not only from existing literature but from spending time and learning from older people who shared with us their lived experience. We have heard from older people who are living active, connected and fulfilling lives and from others who are isolated, disconnected and undervalued. Both perspectives have informed a set of insights into what helps older people to thrive and opportunities for change, which will be the starting point for designing solutions.

1 Social innovation is the process of designing, developing and growing ideas, products, services, strategies and organisations that work to address unmet social needs.
Social isolation is a key driver of loneliness. A 2012 Auckland study found 45% of older people living in the community experienced loneliness, and 9% said they experienced severe loneliness.

Waldegrave, King, & Rowe, 2012
The Challenge

The way we support older people needs to change. The number of New Zealanders aged over 65 is rapidly increasing. In 20 years the number will double to become almost one quarter of the population. By 2050 the number of New Zealanders aged over 85 will increase six-fold (Statistics New Zealand, 2013). This will have an enormous impact on our health and social care policy, services and programmes, which are already struggling to cope with a greater number of people living longer than ever before.

This challenge will affect us all in some way soon or in the future. The sooner we address the challenges we face at a systemic level, the more likely the experience of ageing in Aotearoa New Zealand will be positive for all of us.

There are a wide range of issues to be unpicked within this broad and complex issue, from working, to housing, to the increasing medicalisation of ageing, none of which exist in isolation from one another.

Our initial investigation of the evidence shows us that social isolation is a common thread among the challenges older people face, a thread that impacts and amplifies all of these concerns. Evidence also shows us older people in Aotearoa New Zealand are experiencing social isolation in increasing numbers.

We are all significantly more likely to thrive when we have positive connections to friends, family, communities, work or education. The challenge is that older people tend to become more and more disconnected from these important social environments as they age. They are increasingly likely to live alone, experience a disability that limits mobility or interaction; make transition out of paid work without an alternative day activity; and their friends are more likely to move away or pass away.

Experiencing strong social connectedness has a positive impact on every sphere of life, and at every scale. It is a key protective factor in the health and well-being of individuals, families and communities. Conversely, a lack of social connection can have a huge negative impact on people and communities. Social isolation can have a similar negative impact on the health of older people to that of smoking, high blood pressure or obesity (Holt-Lunstad, Smith, & Layton, 2010), and experiencing social isolation means an older person is twice as likely to go into residential care (Parsons et al., 2006).
What We’ve Done

In September 2017 we made the decision to initiate the first phase of the project without external funding. We formed a co-design group, comprised of older people, stakeholders, technical experts and external provocateurs, which plays a critical role in developing and refining solutions. Since the beginning of 2018 we have been working together through an intensive discovery process to gain a deeper understanding of the challenge of building the social connectedness of older people.

The discovery phase of the project has involved:

AN INFORMATION REVIEW
This included a comprehensive literature review and key information interviews with stakeholders such as aged care providers, advocates and support networks, researchers and policy makers.

FORMING A CO-DESIGN GROUP
The co-design group generated ideas, made decisions, and will continue to guide Generations through every stage. The co-designers are a diverse group that includes older people, writers, filmmakers, academic researchers, policy makers and representatives from organisations such as Age Concern Auckland, Grey Power and Auckland Council.

DATA ANALYSIS
Assisting Age Concern Counties Manukau with the analysis of survey data collected from over 300 respondents as part of a Positive Ageing Network Research Project that examines how older people from South Auckland live, work and play well.

CO-DESIGN SPRINTS
Two intensive multi-day sprints with the co-design group. Co-Designers conducted empathy-led interviews with over thirty-five older people from locations throughout Auckland, which informed a deeper understanding of the lived experience of older people.

Learn more about our co-designers at https://www.generations.co.nz/our-codesigners
What’s Next
The Future of Generations

The next phase of Generations starts with a process of creative thinking to generate ideas for solving the challenge. The most promising solutions will then be identified and tested with older people, and further iterated based on the learning from the testing (prototyping) process. Once two to four solutions are strong enough, they will be tried out over a number of months in the real world – seeing what works and what doesn’t – and continuing to develop the solutions so they have the greatest impact on building social connectedness and reducing social isolation.

We can’t proceed to the next phase of Generations without help!

While innovate change is an expert in social innovation, we need to build a team to support and participate in the journey. To build on the insights and opportunities for change this document presents, we need to formalise partnerships and secure financial support for the project.

We know a social innovation process will be the most effective way to develop, test and scale solutions to reduce social isolation in older people, and thereby positively impact a range of increasingly important issues we face as our population ages. Together with our partners, co-design group, collaborators and participants, we believe we can make a significant positive impact in reducing social isolation of older people in New Zealand.
Next Steps

**DESIGNING**
This stage is all about creative thinking to generate ideas for solving the challenge. This stage involves the co-design group and other stakeholders, as well as people skilled at brainstorming and creative thinking.

**REFINING**
This stage is about identifying the most promising solutions and understanding how they might work.

**TRYING**
This stage is about trying out our ideas in the real world - seeing what works and what doesn’t. This marks the end of discovery and design work and the beginning of implementation.

**REVIEWING**
This stage is about assessing how the ideas are working in relation to the outcomes we’re trying to achieve. We may refine or change and try again to sharpen our ideas.

**SCALING AND SUSTAINING**
This stage is about ensuring the solution(s) we have developed are sustainable and can keep making an impact.

These stages occur in an iterative loop. We will repeat the trying and reviewing stages a number of times, until we are achieving the desired results. We will begin with small, inexpensive experiments that allow for rapid failure and responsive changes as we learn more about what will work.
We over medicalise ageing
Medicalisation is a process that focuses on the treatment of disease and medical problems rather than addressing underlying social and systemic issues.

**Ageing is increasingly perceived as a disease state to be treated, not as a natural life process.**

Older people are more likely to experience a disability that limits mobility or interaction than any other age cohort. Advances in healthcare technology, procedures, skills and medicine means we can do a lot to treat medical conditions and keep people alive for longer. This can be really positive, but not always. Quality of life and a person’s happiness must be balanced with the potential advantages of treatment.

Rather than purely treating the physical and mental symptoms of ageing, much can be done to promote wellness in later life such as taking preventative measures like maintaining healthy weight; keeping an active mind through activities like puzzles, singing and crosswords; and engaging in regular physical activity like walking, swimming, dancing or gardening.

However, having meaningful social connectedness and support is the most effective preventative measure likely to improve health and well-being for older people.

Studies have found older people who engage in social and productive activities lived at least as long as those who did physical activities (Glass, de Leon, Marottoli, & Berkman, 1999) and older adults’ happiness is not directly associated with a decline in physical abilities over time (Menec, 2003). People with stronger social relationships and ties have a 50% decreased risk of mortality (Holt-Lunstad et al., 2010).

**As a society, we can reduce many of the challenges associated with ageing by addressing the social conditions that affect older people, not just the physical conditions.**

A few conclusions become clear when we understand this: that our most cruel failure in how we treat the sick and the aged is the failure to recognize that they have priorities beyond merely being safe and living longer; that the chance to shape one’s story is essential to sustaining meaning in life; that we have the opportunity to refashion our institutions, our culture, and our conversations in ways that transform the possibilities for the last chapters of everyone’s lives.

Gawande, 2014
We under plan for later life
Ageing is a continuum and an ongoing process of transition. Transitions such as the move out of paid employment; from parenthood to grandparenthood; the loss of a life partner or the shift from independent to supported living are major life milestones. Imagine if we positively marked, planned and celebrated transitions in later life as we do graduations from school or tertiary education, 18th or 21st or 30th birthdays, first jobs, having a baby, or getting married.

We have put significant effort into ‘retirement planning’ but the focus is on financial planning and assumes a ‘retirement’ (where you leave your full-time paid work and retire into not working). There are challenges and opportunities with ageing, and while being financially prepared is important, what would it look like to more intentionally plan for happiness, how we live, and whom we live with?

If my partner dies, how would I like to live? If I need care or support to live independently, how would I like that to happen?

Part of planning for later life also entails maintaining personal interests and positive social connections. Leaving full-time or paid work is a major transition that can disrupt a sense of self and one’s value to society, and also removes a source of social connection and structure (Goodman, Swift, & Adams, n.d.).

If you are not prepared for growing old, if you have not developed the necessary inner resources for getting through this last stage of life, you risk going through hell... [you] need to compensate by developing an inner life, exploring emotional youthfulness. Old age is either a shipwreck, or a time of growth.

Hennezel, 2010, p. 11
We marginalise and discriminate against older people.
Many older people we spoke to talked about feeling invisible. They felt they are often treated as if their opinions don’t matter and they have nothing to contribute.

Older people are often missing from popular culture and mainstream media. If they are present, they are often depicted as frail, incapable, inflexible and out of touch. That’s if older people are represented at all. The language we use to describe ageing and older people is often negative and derogatory, and reinforces ageist stereotypes.

We fail to consider the needs of older people in everyday life in significant ways.

The World Health Organisation has identified core indicators that have a major impact on the mobility, independence and quality of life of older people and affect their ability to ‘age in place’ (World Health Organization, 2015a). Many of our communities score poorly on indicators such as neighbourhood walkability; accessibility of public spaces and buildings; affordability of housing and positive social attitudes toward older people.

What would communities where older people are valued as active and essential citizens look like?

Ageism creates social environments that exclude older people. Inadequate social support and dehumanising care settings increase vulnerability to loneliness and social isolation. Ageism and negative stereotypes can also affect the way older people perceive themselves and their abilities, causing them to withdraw from situations they consider threatening (Swift, Abrams, Lamont, & Drury, 2017).

“Old people would make perfect bankrobbers because nobody would see them coming.”

— Diane, Participant

“You need to bleed to be seen.”

— Leone, Participant
We ignore the most vulnerable older people
We spoke to many older people who are thriving. They have active and fulfilling lives, they are busy with activities, surrounded by family and they find enjoyment in later life. These are the people who are highly connected and well supported. But a significant minority are not thriving and their voices are rarely heard.

It is far too easy to ignore those who live out of sight.

Older people who do not have family support and lack financial security and housing stability are more likely to be isolated. While New Zealand’s superannuation scheme currently provides a universal basic income for over 65’s, inequality leaves many older New Zealanders behind. This gap is only likely to widen as our population ages.

There is a strong correlation between ethnicity and socioeconomic inequality among older New Zealanders.

Older people living in poverty are far more likely to be of Māori and Pacific ethnicity, and older Pacific people have the highest rates of hardship and the lowest economic living standards in New Zealand (Lotoala, Alpass, & Henricksen, 2014).

Age Concern’s 2017 survey of older people in South Auckland revealed 33.5% of respondents did not feel that they are financially secure, and when controlled for ethnicity, 85.7% Māori felt financially insecure compared with 21.5% of NZ European/Pākehā (Counties Manukau Positive Ageing Network, 2018).

The number of older New Zealanders who do not own their own home is rising. A recent inquiry into aged care in New Zealand found that renters are especially vulnerable as rents have increased faster than the accommodation supplement, particularly in Auckland. With the current housing crisis, there are long waiting lists for social housing. The quality of rental housing stock in New Zealand is also poor, with many older people living in damp and cold conditions in houses that are poorly maintained (New Zealand Labour Party, Green Party of Aotearoa New Zealand, & Grey Power, 2017).

“I’ve got nowhere to go now, I’ve got no family ... I never hear from anyone.”

– Bruce, Participant
We strip older people of their individuality
Older people are diverse and have diverse needs, but services and solutions for older people often take a ‘one size fits all’ approach. Whereas the milestones of reaching maturity as children and young adults are quite consistent, we experience the changes of later life quite differently. It is quite possible for some 80 year olds to retain the physical and mental capacities of 20-year olds, while some 60 or 70-year-olds may require assistance with basic day-to-day activities (World Health Organization, 2015b).

Many older people we spoke to feared the loss of identity and individuality that might come from entering institutional residential environments, where they would lose control over many aspects of their day-to-day lives.

There is a lack of awareness of the cultural and ethnic diversity of the rapidly growing ageing population and the diversity of our ageing people means there’s increasing demand for culturally appropriate aged care. Late-life immigrants can feel unwelcome and excluded. Community connections and participation in co-ethnic community groups provide pathways to participation in wider civic life in New Zealand (Wright-St Clair & Nayar, 2017), but it’s easy for the needs of minority groups to be overlooked.

Australia has recently launched an Aged Care Diversity Framework based on the World Health Organization principles of non-discrimination; availability; accessibility; acceptability; quality; accountability and universality that aims to ensure all Australians have access to respectful and inclusive aged care services (Aged Care Sector Committee Diversity Sub-Group, 2017).

What could we do in New Zealand to better meet the diverse needs of our older people?

“I am afraid of going into a rest home. How will they meet my needs when I have eaten vegetarian food all my life?”

– Jyoti, Participant
We underestimate the importance of spirituality
All of us have a spirituality, but not all of us understand, acknowledge or ‘feed’ our spirituality. Often as we age, we understand and explore our spirituality more. Many of the older people we spoke to who are thriving, told us their faith or spiritual practice gives them strength, support and meaning. For some people this means attending church, temple or taking part in other religious groups. For others this means praying, meditating or practising mindfulness.

Many older people we met talked about their appreciation and gratitude for life. They spoke of the pleasure of connecting with nature, and enjoying simple pleasures such as spending time in the garden. They told us about life slowed down - having, and taking, time to notice. All of this is spiritual practice and contributes to happiness, connection, satisfaction and thriving.

If the thriving are spiritual, what might we learn from them?

We are much more than the body. We are also emotions of many colours, intelligence, wisdom, rich life experience and voyaging souls. If we go into the ageing years thinking we are the body and no more, then we could have a rocky time, for the body will diminish as we age. If on the other hand we embark on the ageing years knowing we are also spirit, then we are likely to have a fulfilling time, with unexpected rewards.

Batten, 2013, p. 5

“My faith gives me strength.”
– Participant
We don’t recognise the skills it takes to connect
Experiencing strong social connectedness has a positive impact on every sphere of life, and at every scale (Glass et al., 1999). It is a key protective factor in the health and well-being of individuals, families and communities. Being connected makes us more resilient to the struggles of everyday life. As we age, those struggles can grow, and our connections will help us navigate them.

Taking part in regular social activities and having contact with family, neighbours and friends is important. Having a range of people in our lives from close ties to chance encounters makes life richer, more interesting, and improves our physical and mental health.

It can be difficult to meet new people. Making and maintaining social connections takes both skill and desire. Not everyone is able to make and maintain connections. Not everyone wants to.

Sometimes, as we age, we become less interested in maintaining connections or making new ones.

Neighbourhoods and local communities play a crucial role in supporting ageing in place, influencing how safe people feel and the opportunities people have for interaction, engagement and activity (Wiles, Leibing, Guberman, Reeve, & Allen, 2012).

But how many of us know our neighbours or have opportunities to interact with others in our neighbourhood?

“Some people are born more introverted than others, so they don’t want to go out unless they are approached. One of the things we need to do is approach these people - open the door and stretch out your hand.”

– Participant
We’d rather help than value older people
In our conversations with older people we repeatedly heard that more than anything, they want to feel valued and useful.

A 2017 Age Concern Counties Manukau survey found that although contributing to society is a key motivator for participating in activities and paid/unpaid work, 19.3% of respondents felt they did have skills to offer that weren’t currently utilised, and 29.5% said they did not know how to go about using those skills (Counties Manukau Positive Ageing Network, 2018). Older people can and do contribute so much to society, as carers, mentors, workers and volunteers. Rather than treat them as helpless, we need to find ways to recognise and celebrate their value.

Many older people enjoy working and want to remain in the workforce as long as possible. Employers benefit from the knowledge, experience and social capital of older workers who contribute big-picture thinking, negotiation and social skills (Biggs, Carstensen, & Hogan, 2012). But we heard about workplaces that did not include or welcome older people.

Including older people in workplaces will bring great benefits to organisations and older people, but organisations will need to become more flexible and change ageist attitudes to enable more older people to participate.

We also need to change the way we think about the value of unpaid work, and recognise the importance of the work that older people do in our community.

Helping others through volunteering and participating in community work helps to provide a sense of meaning and fulfilment.

Older people who volunteer report an increase in the quantity and quality of their social connections, an enhanced sense of purpose and self esteem and improved life satisfaction, happiness and well being (Jones, Young, & Reeder, 2016).

Services are not the (only) answer. Too often in our attempts to solve challenges for older people, we create services to help them that disable and isolate. We turn to short term solutions that do not empower people and address a single aspect of a problem without confronting underlying issues or challenges. ‘Good help’, “increases people’s confidence, sense of purpose and hope … and enables people to take actionable steps that lead to long-term improvements in their lives” (Wilson, Cornwell, Flanagan, Nielsen, & Khan, 2018, p.5).
We create housing that alienates older people
People living where they want to live for as long as they can or want is often referred to (in the aged care sector) as ‘ageing in place’. The Australian Centre for Social Innovation’s project, Starting the Innovation Age identifies that home is a broad concept that may include the house you live in, home ownership, a sense of a place to belong/stand, a community around where you live, people to live with, family, etc (Jones & Burkett, 2016).

**Living alone as you age presents significant challenges.**

The daily living tasks we all undertake at home are often shared by our family or flatmates. When we’re busy or unwell, the people we live with probably help out a bit more. The same situation applies for older people - the people they live with will be an essential part of their care and support network. Perhaps those that live with older people could reduce the need for some home support services, while also reducing social isolation.

**Living alone is a significant contributor to social isolation and loneliness for older people.**

People aged 85+ are the fastest growing group of older people and currently 80% of them live in the community, most in mainstream housing - a third of men 85+ and two thirds of women 85+ live alone. Half of men over 85 are partnered, but only 1 in 10 women 85+ are partnered (Davey, 2016).

There is complexity around the increasing disability or disease that older people experience that currently leads to a requirement for more home care. There is no single housing solution for older people and housing needs to be considered alongside care and social requirements. It is interesting to consider possible solutions where fewer older people live alone, but still in ways, and with people that they choose.

“It’s sad that I don’t know any of my neighbours any more. It didn’t used to be like this.”

– Participant
Opportunities for Change
The physical, mental, emotional, spiritual participation and social changes of ageing are different for everyone but can be surprising, overwhelming and traumatic. Often people report being unprepared.

We emphasise financial planning without consideration for how we might live if a partner dies or if health or ability declines significantly. The transition out of work is often celebrated as a great milestone, but for some feels more scary than joyous. Some have major concerns about what they will do with their time; how they will be of value; and how they will connect socially with others when work has often fulfilled many of these purposes.

Community nourishes and extends me. I feel safe but also challenged. Now, with the use of social media, I am developing virtual communities and feel more in contact with my readers than ever before. This sense of a rich network is vitalising. Just as I like to keep good circulation flowing through my body in order to feel fit and well, so do I like to keep a circulation of ideas and contacts.

**Let’s consider:**
- How might we mark major life transition points in later life and plan for them?
- How might we create opportunities to talk - early and often - about planning for ageing?
- How might we learn from those who plan well for later life?
- How might we calculate our social readiness as we do our financial readiness for retirement (measuring our social connectedness as we do our savings)?

**Case Study**

**COFFIN CLUBS**

While getting together with others to make your own coffin might sound like a macabre hobby, in fact the Coffin Clubs that have started springing up around New Zealand provide older people with a way to have positive discussions about living and dying well. Coffin Club members also help others in the community by making coffins for newborns and infants.

3  https://www.coffinclubs.co.nz/
**OPPORTUNITY TWO**

How might we have housing that connects not isolates older people?

Good quality housing is a human right yet more and more people struggle to have stable, healthy, affordable homes. This issue affects some older people especially those that do not own their own home.

Many other older people live alone in houses with lots of space. Living alone is a significant contributor to social isolation and loneliness for older people and living alone as you age may present significant challenges. The daily living tasks we all undertake at home are often shared by our family or flatmates. When we’re busy or unwell, the people we live with probably help out a bit more. The people we live with are an essential part of our care and support network.

**Case Studies**

**HOMESHARE UK**

Homeshare UK is an initiative that brings together people with spare rooms with people who are happy to chat and lend a hand around the house in return for affordable, sociable accommodation. Together, Householders and Homesharers share home life, skills, time and experience. A similar service in the US, Silvernest⁴, is an online platform that helps older people find compatible housemates.

**ABBEYFIELD**

Abbeyfield⁵ provides residents with shared housing in an environment that feels like a large residential family home, with up to 14 residents. Meals are provided by a housekeeper, but residents live independently and have a say in the management of the household, including deciding collectively on who gets to move in. Abbeyfield New Zealand is a charitable organisation. There are currently has 15 Abbeyfield Societies operating 13 Abbeyfield houses in New Zealand.

**INTERGENERATIONAL HOUSING**

Internationally there is growing recognition that thriving communities support and encourage intergenerational relationships. At Dutch rest home, Humanitas Deventer⁶, students are given free meals and accommodation in return for 30 hours of their time. This concept has spread to other communities such as Orangetree Village⁷ and Judson Manor⁸ in the US.

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⁴ [https://www.silvernest.com/](https://www.silvernest.com/)
⁵ [http://www.abbeyfield.co.nz/](http://www.abbeyfield.co.nz/)
⁶ [https://www.citylab.com/equity/2015/10/the-nursing-home-thats-also-a-dorm/408424/](https://www.citylab.com/equity/2015/10/the-nursing-home-thats-also-a-dorm/408424/)
⁷ [http://www.orangetreevillage.ca/](http://www.orangetreevillage.ca/)
⁸ [https://www.judsonsmartliving.org/judson-manor/intergenerational-programs/student-residents/](https://www.judsonsmartliving.org/judson-manor/intergenerational-programs/student-residents/)
How might we create work that welcomes older people?

The traditional transition from paid work to retirement at age 65, or any age, is disappearing. Continued participation in work, in ways that older people want, could have significant positive impact on social isolation and older people having a strong sense of contribution and value. The word retirement means to withdraw. How do we make our workplaces and communities places that welcome older people, not require them to withdraw?

There is significant workplace discrimination against older people. Our workplaces need to age in ways that celebrate older people by creating roles and supports where they can provide real value.

Participation in work should not be limited to paid work only. We need to find new language and value for unpaid work.

Let’s consider:

- How would older people’s participation in organisations provide mentoring and training value, and institutional anchoring?
- How might we connect older people with opportunities for both paid and unpaid work?
- How might we raise awareness of the contribution older people can make?
- How might we support people to enjoy fulfilling work for longer?
- How might we create workplaces that work better for people of all ages?

“I don’t want to give up nursing. I’m more than happy to keep nursing well into my seventies. I do work with someone in her mid-seventies and she’s a delight to work with. And we’re still learning. Every day I learn something new.”

– Tina, Participant

“One thing I love about work is the opportunity to be with younger people. It’s a range of age groups and I think that really helps me keep my mind working and youngish. I really enjoy their company, whereas if I were at home all the time that would be more difficult I think.”

– Diane, Participant
OPPORTUNITY FOUR

How might we power-up community catalysts?

There are people in communities all around the world that play a special and significant role connecting others and creating supportive networks. These people often do not have formal roles, and often do the connecting and gathering in low-key, quite natural ways; but their impact is vast. They are the people that host a coffee group at the local cafe and invite the person at the table on their own to join.

We are calling these people community catalysts. They can play a significant role to include older people and in communities. They could be old or young; queer or straight; men or women. They could be of any ethnicity. They should represent the diversity of our rich communities.

Yet how do we support these people without turning it into a service or programme? Formalising such a natural (yet powerful) role could kill its value and magic.

Let’s consider:

- How might we recognise the work of community catalysts?
- How might we sustain and amplify the work that they do?
- What kind of resources (space, time, money, support) might allow catalysts to have greater impact?

Case Studies

**BIGGEST LITTLE LOCAL**

**Biggest Little Local** is a cafe in Glen Eden where a group of older cafe regulars have created a lively and caring intergenerational community: “The cafe is a place where if we’re not well, people will help us. If we just want to talk, people will help us. If we just want to sit and have a coffee in the sun or go inside if it’s a bit cold, there’s always someone there to talk to. It doesn’t matter what time of day or who it is, people will always talk to you and you don’t ever have to feel on your own.”

– Leone, Biggest Little Local cafe regular

**MAKE GIVE LIVE**

**Make Give Live** is a social enterprise by the community for the community operating on a buy one, give one model. Makers come together weekly or fortnightly in their local groups to enjoy each other’s company, a cuppa, and to make beautiful beanies that warm heads and hearts and give them purpose. They swap finished beanies for wool and new patterns to keep them busy until the next catch up.

**FROME COMMUNITY Connectors**

In the town of Frome in Somerset (UK), **Community Connectors** are trained volunteers who help friends, family, colleagues and neighbours find support in their communities. They serve as a bridge between people and services, helping others to access health support and providing advice on things like housing, education and debt advice.

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9 https://www.facebook.com/biggestlittlelocal

10 http://makegivelive.com/

It is unusual to see older people in our media that are happy, healthy and part of communities, except media advertising retirement villages. Many older people experience discrimination. For older women, new migrants and older people with diverse sexual and gender identity the discrimination and exclusion they experience can be significantly worse.

What would happen if we see more images and stories of ageing that are full of joy and possibility instead of decrepitude and disability? By increasing the visibility of older people; using positive language when we talk to and about older people; and increasing opportunities for intergenerational connection, we will start to design older people in, not out of, our lives and communities.

Let’s consider:
- How might we draw attention to ageism and challenge media to do better?
- How might we share positive stories and images of older people?

Case Studies

**DISRUPT AGING**

#DisruptAging\(^{12}\) is a US initiative that aims to change the conversation around aging. Using video and social media, Disrupt Aging uses compelling storytelling aimed at younger citizens to challenge ageist beliefs.

**ADVANCED STYLE**

Advanced Style\(^{13}\) is a blog, book and documentary that celebrates stylish older women and has helped launched a group of older style icons who have millions of followers around the world. One of the stars of Advanced Style, 96 year old Iris Apfel even has a Barbie doll created in her honour!

**GRACE AND FRANKIE**

Grace and Frankie\(^{14}\) is a popular Netflix TV series that stars 80 year old Jane Fonda and 78 year old Lily Tomlin as best friends and housemates who lead vibrant, fun and independent lives. The series appeals to a wide range of ages and challenges stereotypical representations of older people.

\(^{12}\) https://www.aarp.org/disrupt-aging/

\(^{13}\) http://www.advanced.style/

\(^{14}\) https://www.netflix.com/nz/title/80017537
We think these questions provide a powerful platform for developing new solutions with impact, but we can’t do it alone.

We are now seeking to partner with bold organisations who want to explore with us how to make a real difference to the urgent issue of social isolation for older adults.
References


innovate change, a social change agency that uses creative and participatory approaches to build social connectedness that enables youth development, whānau well-being and positive ageing.

Innovation Unit creates new solutions for thriving societies, and seeks bold change and impact at scale that enables a world where more people belong and contribute.