Council on the Ageing
Queensland

# SENIORS SOCIAL ISOLATION PEAK SERVICES PROGRAM

## Seniors Social Isolation Provider Community of Practice (SSIP-CoP)

### Minutes of Meeting No. 1 – 2024

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| **Date/Time** | **Wednesday 6 November 2024 (10.00am – 11.30am)** |
| **Theme** | **Healthy Ageing** |
| **Location** | MS Teams Meeting |
| **Facilitator** | Karen Wilson, Executive Officer, Seniors Social Isolation Peak Services Program, Council on the Ageing Queensland |
| **Admin Support** | Not Available |
| **Guest Speakers** | • **Professor Nancy Pachana**, Clinical Geropsychologist and Program Lead in the University of Queensland (UQ) Age-Friendly University and Healthy Ageing Initiative, in addition to Co-Director of the UQ Ageing Mind Initiative<br>• **Mahnoosh Hassankhani**, PhD Student, University of Queensland and Supervisor, Associate Professor Renee Zahnow, University of Queensland. |
| **Recording** | You Tube: https://youtu.be/pmKAXhQ80Xo?si=Hv6lXhcwNwWylZOG |
| **Apologies** | No attendees from FNQ or NQ |

**Attendees - SSI funded orgs (*n* = 9)**

**Central Queensland**

- **Barcaldine 60 & Better:** Jean Williams, Program Coordinator. Barcaldine Regional Council

**South West Queensland**

- **The Older Men's Network (TOMNET):** Shannon Wade, General Manager, Toowoomba

**North Coast**

- **Fraser Coast Regional Council**: Janelle Barlow (tbc), Grants Coordinator
- **Senior Social Connections Program**: Ben O'Rourke, Relationships Australia Queensland
- **Bundaberg 60 & Better:** Des Kemp, Program Coordinator, YMCA of Bundaberg Inc.

**Brisbane & SEQ**

- **Acacia 50 & Better:** Hayley Kiata, Service Manager, Seniors Program Coordinator and Christine Harkins, Team Leader, Community Engagement, Inala Community House
- **Older Persons Action Program (Slacks Creek):** Kim Wright, Program Coordinator, Kingston East Neighbhourhood Centre.
- **Bribie Island Seniors Wellbeing Service:** Michelle Swan-Ridel, Community Engagement Worker – Seniors Wellbeing Service, Bribie Island Neighbourhood Centre

**Others**

- Eboni Webb and Roz (unknown)

## Discussion, Key Points and Actions

| | Discussion and Key Points | Actions |
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| 1 | **Acknowledgements and Introduction**<br>• Acknowledgement of Country<br>• Karen introduced herself and gave apologies for Steph, who was unwell and unable to facilitate today's meeting. | |
| 2 | **Previous Minutes and Outstanding Actions**<br>• No previous Minutes (transcript and video only).<br>• CoP 3 recording: IT system updates have resulted in ongoing issues with access to Teams recordings.<br>• The recording was uploaded to YouTube instead. | |
| 3 | **Project Updates**<br>• Karen reviewed previous meeting transcripts to get a better understanding of the challenges, barriers and opportunities.<br>• Karen will be calling program leads over the next few months to introduce herself and learn more about the different programs. | |
| 4 | **Guest Presenter:** Professor Nancy Pachana, Clinical Geropsychologist and Program Lead, UQ Age-Friendly University and Healthy Ageing Initiative, and Co-Director of UQ Ageing Mind Initiative.<br>**Topic: CarFreeMe Program**<br>• Developed over past 15 years to assist older adults to transition to a non-driving lifestyle.<br>• Interdisciplinary initiative: primarily OT and psychology<br>• Steps people through transition from relying on their own car to moving to a distributed model of mobility (public or community transport, family support, or giving up driving due to traumatic brain injury, or cognitive and physical changes due to ageing).<br>• Research suggests that driving cessation is a major inflection point in people's lives. Gives a sense of independence, makes people feel they've lost their independence.<br>• Can lead to depression and social isolation, and in older adults is related to increased morbidity, mortality and pre-mature admission to nursing homes.<br>• Flexible program: from 1-2 sessions or 6-8, face to face or in group or telehealth, to support people to consider their transportation goals, spend time mourning the loss of driving, and brainstorm how they can still meet their main goals through options available.<br>• Field trip on Brisbane ferries and buses, to get people used to changing their sense of identity from reliance on self-transport to a new set of tools to help them getting from A to B.<br>• Subject of many randomised control trials (recent program with PHN Brisbane, looking at Culturally and Linguistically Diverse (CALD) people. Findings are that people didn't think they could make that transition, but they realised they could. | Link to **CarFreeMe Program** |

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| | **Q&A Session**<br><br>**1. Are there costs involved?**<br>The program was developed using a commercial model established at UQ and funded by us to train allied health professionals (including nurses, OTs, psychologists, physiotherapists, and counsellors). Trained practitioners are certified as CarFreeMe trainers and receive full access to program materials. The model enables organisations to deliver the program within their existing funding structures, such as GP management plans, NDIS, veterans' benefits, and ACAT assessments. CALD practitioners have also been trained to deliver the program in CALD-focused services. UQ does not deliver the program; its role is to ensure the training remains current. Certified practitioners across Australia implement the program within their own service and funding contexts.<br>**2. What initiatives are in place for regional areas?**<br>Significant consideration is being given to regional areas. Transport challenges exist even in Brisbane, where some locations remain unserved by bus routes despite sustained advocacy. The program is not a transport solution, as improved infrastructure and services are still essential. Instead, it supports people in capital, regional, and rural areas to identify, coordinate, and scale local resources to address mobility challenges. One session focuses on political action and advocacy, such as CALD community groups lobbying to relocate bus stops or retain services.<br>This is a broader societal issue about how we value older people and mobility in regional communities, and the program works with local groups to support grassroots initiatives.<br>**3. How new is the program and has there been much of a take-up?**<br>Considerable research was undertaken to ensure the program is effective and meets participants' needs. However, the funding environment has become increasingly constrained over the life of the program. Providers reported clients are reluctant to use their packages for mobility support, and GPs have been slow to refer, often hesitant to involve OTs or address licence cessation. Funding constraints remain a significant challenge.<br>**4. Age there any differences in the age ranges with the update.**<br>Chronological age is a poor predictor of driving reluctance. Older males tend to be more hesitant, though women in their 60s and 70s show similar reluctance. Attitudes depend largely on how personally invested someone is in driving. For example, some women in remote rural areas learned to drive later in life and view driving as essential to independence. People often give up driving due to anxiety, loss of enjoyment, vision problems, or social pressures to be the "last licence holder." Others live near public transport but have never used it, so they are reluctant due to unfamiliarity or time constraints. Driving cessation is strongly influenced by place, and solutions for people with disabilities or those giving up their licences remain complex and elusive. Nancy shared personal stories and suggested setting a hypothetical date to plan for life after driving. Inclusive, accessible solutions must involve older people. Upcoming changes in transport should be easy to use and accommodate older adults in diverse circumstances. | |

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| | **5. How are transport challenges for seniors, such as unreliable buses, lack of shade or seating, and reliance on car-pooling being addressed by local government?**<br><br>Seniors need seating and shaded areas, such as outside hospitals. Agencies could provide vans to transport people to social events, and local communities could organise shared community vans with a roster, funded partly by users and partly by councils. Often, councils are unaware of simple measures that can greatly support older adults.<br><br>**Comment by Renee Zahnow**<br>Driving is a significant part of Australian identity, weekend drives, family trips, and the memories associated with the car. For many older adults, particularly men, giving up a licence is not just a practical loss but also a loss of identity, requiring a psychological adjustment.<br>Accessibility involves both practical and physical considerations: services may be nearby but still unsafe or difficult to reach, such as when waiting for buses. Advocacy is a key part of CarFreeMe, with strong partnerships and support from local politicians being critical to success. Nancy said to call out bad behaviour too (taxis/buses not showing up, not taking guide dogs, support dogs etc). | **Contact details:**<br>https://about.uq.edu.au/experts/967 |
| **5** | **Guest Presenters: Mahnoosh Hassankhani** and **Associate Professor Renee Zahnow**<br><br>**Topic: UQ PhD Project, "Green Spaces for Healthy Ageing – Green spaces as an antidote to loneliness and social isolation"**<br><br>Gave an overview of Mahnoosh's research project which addresses loneliness and social isolation, focusing on the role that infrastructure in neighbourhoods, such as parks, plays in shaping these dynamics. Mahnoosh drew on survey findings (the responses from older adults aged over 70 years) and highlighted the role of local neighbourhoods in supporting older people's life satisfaction.<br><br>Key considerations for urban environments and older people include creating sustainable, accessible, and inclusive spaces that support health, social connection, and agency. Urban design should mitigate risks of isolation and loneliness, promote active participation, and enable older people to shape their communities as agents of change. Concepts such as spatial justice and co-produced solutions ensure equitable access to resources and opportunities. Accessible parks and community engagement contribute to healthy ageing, while current planning often leaves many older adults feeling excluded.<br><br>**PhD addressed two main questions**<br><br>1. How do older people experience social life in urban parks?<br>2. How do older people practice their agency to come to terms with the barriers of visiting parks? | PPT will be shared with the SSI Providers |

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| | **Method**<br>The study used mixed methods, including quantitative surveys, semi-structured interviews, and spatial mapping to visualize issues in Brisbane. Parks provide important opportunities for social activities for older adults. The research mapped parks, green spaces, and private yards, revealing uneven access across the city. Proximity alone is not enough, quality, range of amenities, and transport accessibility are also critical. Maps assessed park suitability, including public transport access, highlighting that some parks may be nearby but still difficult for older people to access. The study also explored what makes parks social spaces for older adults.<br>**Surveys**<br>The study engaged 180 older people across Brisbane through a combination of face-to-face interactions in shopping centres, QR codes shared via flyers and on social media platforms popular with older adults (e.g., Facebook), and postal surveys with pre-addressed, self-stamped return envelopes.<br>**Outcome:**<br>Park attractiveness influences older adults' visitation, but parks are not inherently social spaces. What makes them social are specific activities, such as taking grandchildren to play or walking a dog. Older adults rarely visit parks incidentally; streets, cafes, shopping centres, and clubs play a larger role in sustaining social life, though interactions in these spaces are often passive. Barriers to park use include feelings of exclusion and invisibility in urban planning, limiting agency and negatively affecting wellbeing. Overall, parks are often peripheral to older adults' daily social lives.<br>**What can we do?**<br>To better support older adults, engage them in decision-making, improve park design for group activities, and organise social programs such as walking or gardening clubs. Councils are already providing some activities, and adding cafes in parks can enhance social engagement. Digital exclusion must be considered, and technology-based solutions should be implemented cautiously. Urban planners, policymakers, and researchers must work together to create cities that are inclusive and sustainable from current to future.<br><br>Renee highlighted that people already connected to their community are the ones using public spaces. Simply providing facilities in parks is not enough. Social interventions are needed, as lonely or isolated individuals are unlikely to form new connections on their own. Familiar strangers, faces seen regularly in everyday places like cafes, shops, and neighbourhoods are important for older adults' sense of belonging. Scheduling activities and creating predictable social spaces, such as pop-up reading areas or book exchanges, can encourage interaction, enhance safety, and strengthen social connections. | |

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| | **Q&A Session with Comments**<br><br>**What about programs delivered in the parks with libraries or Councils or other providers.**<br>Michelle said they are considering doing this and Renee responded that the *Heart Foundation* will help with this. Karen said *Walking Australia* might be able to help.<br><br>Older adults need parks with flatter surfaces for easier access. Some older men feel self-conscious using parks or playgrounds alone, highlighting the need to change community perceptions and encourage park use.<br><br>Creative initiatives, such as converting an old telephone booth into a book exchange, can help foster a sense of place and attachment, turning a park into "our park."<br><br>Intergenerational connections are also crucial for building resilient and safer communities.<br><br>Kim highlighted that community gardens are valuable, providing food, refreshments, and a space for multicultural groups to grow diverse foods. Having the garden at the back of the community centre is convenient, but moving activities into public parks requires Council approval and risk management. Gardens offer sensory experiences through trees, bushes, plants, and water features, rather than just lawns, which are more European.<br><br>Bundaberg faces a shortage of parks and shade, and with Council $30 million short over the next year, many services may be lost. Rapid population growth since COVID has also increased pressure on public spaces.<br><br>How can we make better use of liminal spaces, areas that aren't formally parks? For example, schools could be repurposed when not in use, such as ovals being used by dog-walking groups on non-school days.<br><br>We need to think more creatively about underutilized spaces.<br><br>Similarly, flood buy-back schemes return land to councils, which often just mow it. Could these plots be managed more innovatively?<br><br>With rising rents, more families are living in apartments, increasing the need for accessible outdoor spaces. | |
| **6** | **Date of Next Meeting**<br>• Wednesday 19/3/25 (2-3pm) | Circulate Minutes & Recording link |

**Prepared by**
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