

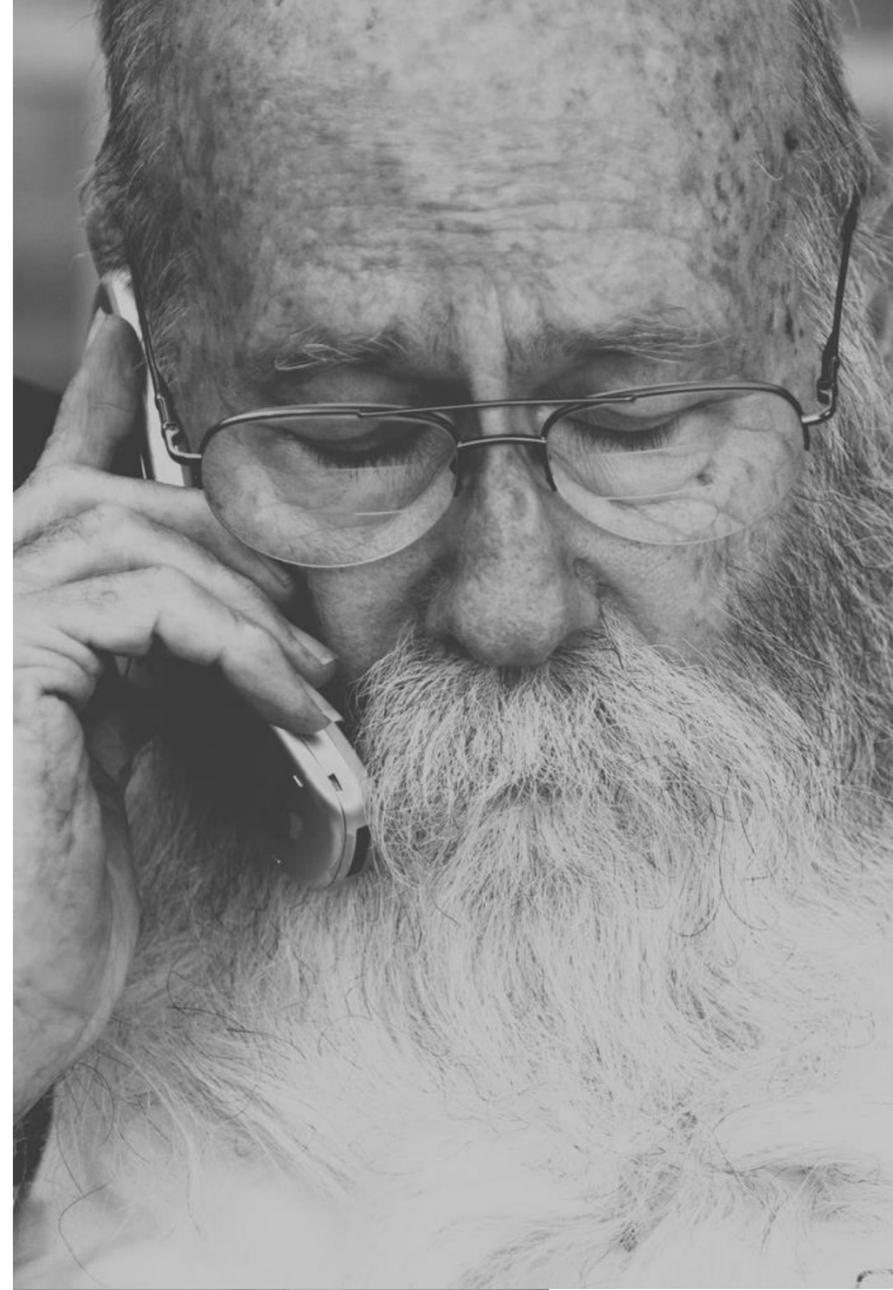


# Isolated Together: Qualitative Needs Assessment of Community-Based Organizations Serving Older Adults

A Volunteer-Based Telehealth Program for Isolated Older Adults during COVID-19

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# Telehealth Intervention Program for Older Adults (TIP-OA)

TIP-OA service began in April 2020 at the Jewish General Hospital providing weekly, confidential, FREE, friendly phone calls to older adults in Montreal.

The aims of TIP-OA are:

- To provide free friendly tele-support through trained volunteers to the seniors(clients) who need social connection and social support.
- To ensure that the client's basic needs are met, such as access to medicine, food, and transportation; and redirect the client to the appropriate community resource when needed.
- To develop long-term community partnerships for knowledge translation and capacity building in order to serve this population.

# Telehealth Intervention Program for Older Adults (TIP-OA)

- Volunteers provide friendly phone support to the multilingual older adults, who might benefit from having a social connection
- Clients are matched with an appropriate volunteer based on level of experience
- Older adults receive at least 1 call/week from volunteers

# Telehealth Intervention Program for Older Adults (TIP-OA)

- Serving >550 older adults with >200 volunteers since April 2020
- Support system for volunteers:
  - 1) Hotline Service (9am - 5pm, with clinician support)
  - 2) Email account
  - 3) Follow-up sessions with trainers

# Research

- **Objectives.** To evaluate the effectiveness of the program TIP-OA in **1)** reducing stress (Perceived Stress Scale), **2)** improving the mental health of program users (Patient Health Questionnaire-9, Generalized Anxiety Disorder-7, Fear of COVID-19 Scale), **3)** compare mental health outcomes based on program users baseline risk, as well as **4)** understand the experiences of program users, volunteers, and other stakeholders to improve TIP-OA and related future programs.
- **Mixed Methods:** assessing the program and mental health status in 200 TIP-OA participants at baseline, 4- and 8-weeks

# Research

## Qualitative:

### Methods

- In-depth, semi-structured interviews (n=50)
- Focus Group Discussions (n=18)

### Sample

Participants	Method	Numbers
Program Users/older adults	Semi-structured interviews	25
Volunteers	Semi-structured interviews Focus group discussions	31
Stakeholders e.g. community partners, and clinicians	Semi-structured interviews Focus group discussions	18

# Participants/Stakeholders Profile

- In-depth, semi-structured interviews conducted with 12 representatives of the COs. The participants include:
  - Executive Directors
  - Directors/Senior Managers
  - Case Managers
  - Social Workers
  - Front line workers

# Preliminary Findings: Emerging Themes

- Increased/deteriorated mental health challenges among seniors during Covid19
- Organizations were not prepared to handle the Covid19 challenge
- Resources and stable funding is needed for the continuity of the service, especially when govt is also relying on the COs for service delivery
- Outreach is restricted/limited due to several reasons and needs improvement
- Communication and Collaboration
- Lack of digital skills/readiness among COs/senior volunteers and clients
- Research – simplified, connectable, and community-based research is required

## Preliminarily Findings: Increased Mental Health Issues

*"I think, for our clients who are in such [places] as CHSLDs, there's nothing and they're really having such a hard time. **A lot of them have different stages in dementia or Alzheimer's, and that's progressed very quickly because they're not getting enough stimulation and social contact.**"*

Samantha Jones

*"We've had mental health breakdown, and this is really common. I think we have all seen this, especially with the 2nd wave we were seeing seniors are not out with us, speaking, interacting with the public. **There's almost, you know, starting to lose a bit of their words. They're starting to the stress level, they're under the fear, the unbelievable fear.**"*

Catherine Hey

## Preliminary Findings: Organizational Capacity and Experience

*"We are not trained for this and that's what Covid has brought to light for us, is that our phone line all of a sudden became a crises Hotline... seniors saying that they wanted to kill themselves.*

***For my own mental health, and for my staff's mental health and for my volunteers' mental health, we can only benefit from training.*** *My job is not a mental health job, it is a seniors' job and those are two very different things, right."* (Catherine Hey)

*We're all from different backgrounds, so we all have a bit of knowledge, but what we're missing is a real or a lack of mental health like all of us don't have a training in mental health and I feel that when this topic comes up, we're struggling to understand how to deal with it. So **It's very difficult for us to really intervene with a client that has mental health because none of us really have a background in mental health.*** (Sabrina Roy)

## Preliminary Findings: Sustainable Funding and Resources

*Community groups need long term, reliable, sustainable funding. They need to be able to hire staff who will stay on. To provide the ... most creative, resourceful people out there in the world who are working on an absolute shoestring ... Finding the next funding source, applying for funding, I mean, the amount of time wasted on funding applications... When the [vaccination] campaign started, our Premier said if getting to the vaccination centre is an issue, contact your local community groups. I mean **if the government is relying on these organizations to fill in the gaps that they can't, then no problem, people are happy to do it, but it requires funding.** (Iona Taylor)*

## Preliminarily Findings: Outreaching Vulnerable Groups

*“Yeah, so outreach in terms of building partnerships to and going out and finding new clients, new isolated people that are more vulnerable, it's really hard in this context too because you have to build a lot of confidence and trust and relationship and a lot of times that's done by face to face and good referral and that's really, really hard in this context, so **we're often maintaining the seniors that are more active, that want to participate but there's a whole vulnerable group that's been, that's not participating,** and the outreach it next to almost impossible. It's not impossible, but it's very, very difficult to find seniors on this online environment that we haven't connected with in the past.”*

James Grant

## Preliminary Findings: Outreaching Minority Communities

*Our community, that we serve are English as a mother tongue but also English as a second language cause some people, obviously, **especially immigrants and refugees, they're coming into communities and it's already difficult speaking a second language. And they're dealing with a lot of other issues like cultural differences, learning, you know how things work, accessing services in a different way, maybe even understanding what services exist on the territory, and breaking isolation and creating that sense of community so that they feel like they're part of a community like, you know, that's people like to feel that they are part of the community.***

Julie Watson

## Preliminary Findings: Communication & Collaboration

*"I think it's integral to who we are because our budgets are so limited that **we're always looking to develop partnerships so that we can reach a larger number of constituents and meet people's needs....** Exactly, they [networks] bring the organizations together and it gives us an opportunity to showcase what we do, and you know either we give them guidance, or we develop a partnership with them."* (Matty Morison)

*There is a danger of miscommunications between us, the organizations, and especially because working with older adults they don't always understand everybody's roles, or when or where we connect. For example, **I can be servicing the senior citizen and she is also receiving services from another organization and at one point instead of helping the person we kind of become a nuisance for each other because we offer too much services. So there is a danger!*** (Sylvie Vinceltte)

## Preliminary Findings: Virtual/ Digital Service Delivery

*“We're expanding our virtual lab programs. **Going forward, of course that it does not allow those that don't have the digital capacity to participate**, so that's unfortunately something that we are working on.”*

(Matty Morison)

*“I think it's **one of the biggest challenges and Covid is there just the whole digital piece, access to Internet** even you might have a computer, but do you have Internet access? Do you know how to use the computer? Do you know how to use the iPad? And it's also I say, habit, if you're used to meeting people in person suddenly having to be on it.”* (Julie Watson)

## Preliminary Findings: Simplified, Accessible, and Participatory Research

*“They [researchers] feel a little bit like they have to prove that even though **they're only doing research and not working on the ground**, they have to show that they know a lot and I think that the opposite is true. If you sort of let people know that their knowledge is just as valuable and that you're there to learn from them, things would go a lot more smoothly.”* (Iona Taylor)

*“Well, I think to start collaborations .... but I think it's also creating alignments with different universities and researchers; we need to connect with researchers that have an interest on this topic and are willing to .... **finding alignments between their research interests and our community agenda.**”* (James Grant)

# Preliminary Findings: Programming Needs

- **Different age groups** among seniors change their needs and hence the required programming also needs to be changed
- **Background** – financial status, living arrangement, physical and mental ability, relationships and networks, languages also need to be incorporated in the programming
- **Capacity building of the COs**, especially in mental health aspects of community service
- **Multicultural background**, especially for ethnic minorities is a significant aspect and needs to be incorporated while programming for this population
- **Duplication of services** and effective outreach to meet various needs is crucial

# Thank you!

## Questions/Feedback?

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