

Level 1, 5 Green Square Close, Fortitude Valley 4006 Phone: 1300 655 535

1 September 2021

Committee Secretary Community Support and Services Committee Parliament House George Street Brisbane Qld 4000

Submission to the Inquiry into social isolation and Ioneliness in Queensland

Dear Committee Members,

Thank you for the opportunity to provide feedback for the Inquiry into Social Isolation and Ioneliness in Queensland.

We applaud the intention of this Inquiry to identify the nature and extent of the impact of social isolation and loneliness, and the role, scope and priorities of a state-wide strategy to address social isolation and loneliness. We recognise that this inquiry has been initiated in response to grass-roots process of community listening and community organising.

We would like to share our views, knowledge and recommendations and propose a 3 - part framework to understand and address loneliness and social isolation in Queensland.

- Develop and support the Community of Practice, evidence-based programs and adopt the key themes from The Social Cure
- 2. Develop and support investment in core infrastructure People & Tools
- 3. Develop and build an embed an integrated long-term framework of key influences

Once again, I want to commend you on your part in this important Inquiry.

Regards

Brentyn

Brentyn Parkin Executive Director Community Information Support Services

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1,296,000 (1 in 4) Queenslanders suffer from the impacts of social isolation and loneliness and is considered by many as one of our biggest social challenges in Queensland

Our understanding of the impact of social isolation and loneliness is primarily based on what the broad community are searching for and accessing online and specifically using the My Community Directory, My Community Diary and associated platforms.

Over the past eight years we have gained a clear understanding about what Queenslanders are searching for within their local community (using the My Community Directory, My Community Diary and Access My Community App) which has been used more than 12 million times to search for Health and Community Information.

Our key findings identify and validate that:

- Every community is different
- The services and activities available are different
- People are looking for connection to community not just looking for help

From over 30,000 clubs, groups and services listed on My Community Directory - 57% are Client Services, the group that is traditionally considered by the community sector – Specifically funded services for a specific need.

The other searches are based on people looking to get involved with 10.4% looking for Sport, Recreation and Conservation, Information and Advice, 11.4%, Education and Employment 6.3% and Groups, Clubs and Churches 10.2%.

Using this evidence to underpin our understanding of the sector we also know that how people look for connection is impacted by numerous factors.

The impact of the COVID-19 pandemic / and other emergencies on Queensland Communities. The data shows a consistent pattern (based on user search) that during a flood or natural disaster people are protecting their family and general searches drop by at least 5% in affected areas however it is interesting to see that the types of searches are also different and are more focused on finding specific help.

We see after a community event an ongoing sustained connection in communities as people recover and searches become focused on clubs and groups and people getting involved in their community.

COVID-19

The impacts of COVID 19 will have a lifelong impact on how communities' function. The impacts of COVID-19 will be a significant impact to the health and community sector for years to come.

The impact of COVID saw a significant (24%) decrease in users compared to the same period in 2019 to our Platforms but has since returned to expectant levels (Graph below).



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Connecting people is more important now than ever before. While we have been forced to think about the future, it is bright and we will be part of connected, stronger communities as we work together.



Digital solutions can create both short term and long-term change.

As an example of the importance of Civic Technology, Feedback from consumers highlighted the value of being able to access information on both a website and mobile application and that it was a valuable resource for health consumers.

As part of providing better information to support the needs of the vulnerable and disadvantaged to access services, Community Information Support Services has developed the **Access My Healthcare** website and mobile application that provides up to date information about health services from data collected within the Community Information Exchange.

Access My Healthcare is seen as a **valuable resource** for health consumers. The outcomes of the independent evaluation by Health Consumers Queensland articulated that overwhelmingly, consumers like the app and overall feedback was very positive with Access My Healthcare seen as a **valuable resource** for health consumers.

Consumer feedback included:

- Four in five consumers said it was easy to use for the area they live in and everything was set out under services that they would want to access, including contact.
- Almost four in five said the website was considered easy to read and understand; however, others said the app was 'congested' or too small to easily read and navigate.
- Four in five consumers would continue to use the website and mobile application.

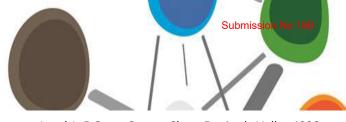
The 80/20 principle is again clearly demonstrated and underpins and reinforced by our data. Access to local information plays a significant part in connecting people however there are people that will always need direct, face to face support.

By connecting the Community centres to their local community and resourcing them to be connectors, with the right local information and a supportive process we significantly reduce the impact

The causes and drivers of social isolation and loneliness, including those unique to Queensland

Our data shows that while some of the key drivers that increase social isolation and loneliness are the same, the impact to Queensland is different to other states of Australia.

1. Lack of subsidiarity – Funding decisions by government staff continue to be South East Queensland centric and based on the large providers rather than community leaders.



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Additional funding to resource Community Centres (Recommendation 1 and 2) will begin to address this issue. However, funding for local initiatives including the ability for local people to develop civic technology will not only play a key role in addressing social isolation but also contribute to the digital economy.

- 2. Lack of digital infrastructure Data from our platforms shows that the approach of additional funding without core infrastructure creates ongoing duplication of effort and often the best programs (like the Mount Gravatt Ways to Wellness) are not replicated and funding is given to large providers rather than effective, connected grassroots providers. By developing the Community Information Exchange, the same information is available to the public, providers, local government, state and federally funded programs.
- 3. Tyranny of distance Queensland is vast and has large regional cities and connected local communities along the coast. As a Charity that works across the state we have travelled extensively and have visited most towns with populations over 3,000 people (in the two years prior to COVID-19). From our interactions we report that communities articulate that it is difficult to access services when they are not always informed of the health and wellbeing services visiting the community. From the Consumers Health Queensland Report, consumers need to feel connected to community and to be able to have the information they need to connect. Hence, it is vital that communities are able to access relevant information about the services they need when they need them.

The protective factors known to mitigate social isolation and loneliness

While there are many well researched protective factors, 3 key themes have guided the local work we do which include:

- 1. Strengthening an integrated population-based approach, not competing for services, rather collaborating and driving better value for the population. This approach of health system leadership and collaboration may result in a greater alignment to delivering an agreed set of outcomes and value-based healthcare for the population. This dramatic shift from provider competition to collaboration and integration means a reframing of contracting and partnerships with health and wellbeing sectors. This will shift the system towards: orientating itself to work in populations; have clear aims and defined outcomes for these population segments; deliberative allocation of resources to the population segments based on equity not historical activity; and balancing learning and accountability in the system (Tonge, 2021).
- 2. Encouraging preventative health by using technology effectively to:
- Improving population health by providing health service information that is easily accessible
- Supporting healthcare delivery by providing information on health service delivery
- Connecting individuals to preventative healthcare by overcoming distance barriers
- Empowering individuals to take control of their health (Himawan, 2021).
- 3. Supporting Civic Technology locally allows
- Increased access & knowledge improves people's connectedness to both the online and offline worlds
- Removes financial barriers and access to services and local connection
- Provides opportunities to learn.



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Some international evidence has demonstrated that community self-determination is vital to addressing issues at the community level. Some initiatives include:

The benefits of addressing social isolation and loneliness are significant

Supporting Developing place-based partnerships by:

Encouraging place-based partnerships, thereby, contributing to the improvement of health, wellbeing and reduction in inequalities, especially where there is the greatest potential to add value over and above the contributions of individual organisations or entire systems (Charles et al., 2021).

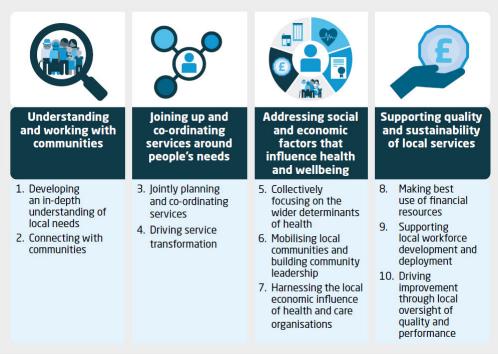
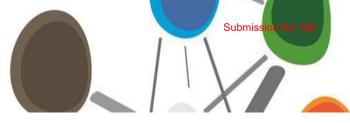


Figure 1 Key functions of place-based partnerships (adapted from (Charles et al., 2021)

Some of the most promising opportunities to make progress in these areas come from building broad multi-agency partnerships involving local government, HHSs, AMSs, community organisations, social care, health and wellbeing program providers and communities themselves. Partnerships involving a broad range of agencies and sectors are able to draw on a wider range of levers to influence health outcomes (Figure 1).

The principles to guide the development of place-based partnerships include:

- Start from purpose, with a shared local vision
- Build a new relationship with communities
- Invest in building multi-agency partnerships
- Build up from what already exists locally
- Focus on relationships between systems, places and neighbourhoods
- Nurture joined-up resource management
- Strengthen the role of providers at place
- Embed effective place-based leadership (Charles et al., 2021).



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Investment

With a focus on addressing the core issues of social isolation and loneliness by the development of a state-wide approach the key beneficiaries including the Queensland Government non-government organisations and the private sector.

With a comprehensive community-based focus resources will be more ability though partnerships to address some of the key issues.

Current investment by Government does not fund the front-line nature of the role that community and without this change in focus it is difficult to raise alternative funds to meet this need.

Investment in Core Infrastructure, including the Civic Technology Institute could produce significant results. Since the 1990s, local governments have increasingly used information and computer technologies (ICT) to improve public service delivery. As part of the suite of tools, local governments are also using eParticipation, ICT to support democratic decision making, it an effort to improve democratic decision-making. With the onset of the COVID-19 pandemic, instead of only hosting public meetings, local governments have the opportunity to increase their reach and improve engagement opportunities with eParticipation, made possible by increasing investment in civic technology. This presents an opportunity to improve citizen engagement for local service delivery. Civic technology can provide meaningful engagement opportunities, improving equity among citizens (Gasparro, 2018).

Community Information Support Services have tools to link with communities across Queensland. The information is stored in the Community Information Exchange which links to the My Community Directory, My Community Diary, Link Social and the Access My Healthcare platforms. As an example, please see more information about Access My Healthcare currently being implemented across eight Hospital and Health Services across far north Queensland.



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<u>Recommendations</u> Addressing loneliness and social isolation in Queensland needs to support these key strategies:

STRATEGY 1

Develop and support the Community of Practice, evidence-based programs and adopt the key themes from The Social Cure

a. The Social Cure

We recommend that the research by University of Queensland's School of Psychology around "Social Cure" should be the central reference point and underpinning of the new Queensland State-wide strategy to address social isolation and loneliness

b. Community of Practice

We recommend that a Community of Practice should be established (investigate the existing Community of practice by Link Social) to be a reference point for practice.

c. Implement Social Prescribing and Community Connecting Models

We recommend social prescribing and Community Connecting should be developed as a key pillar of the Queensland State-wide strategy to address social isolation and loneliness.

d. Expand Ways to Wellness

We recommend that evidence-based projects such as Ways to Wellness (Developed by the Mt Gravatt Community Centre) are expanded

STRATEGY 2 - Develop and support investment in core infrastructure - People & Tools

- a. Increase base funding for Community Neighbourhood Centres
 We recommend that Community Neighbourhood Centres be considered as frontline services, and that their funding be increased accordingly.
- b. Increased funding for Civic Technology and platforms that created shared data
 We recommend that Civic Technology (including investigating support for the Civic Technology
 Institute) and Shared Data Tools (The My Community Directory + Diary and or the Community
 Information Exchange) be considered as key enablers of frontline services and funded accordingly.
 - c. Involve cultural community leaders from first nations and multicultural communities in leadership and co-design of relevant initiatives

We recommend that first nation people are part of developing approaches used in first nations communities and people from different multicultural communities develop culturally apocopate practice.

STRATEGY 3 - Develop and build an embed an integrated long-term framework of key influences

- a. Creation of a ministerial portfolio for social isolation and loneliness
 We encourage the creation of a ministerial portfolio which will help to maintain this issue as a priority issue on the political agenda.
 - b. Community Hearings

We encourage the committee to conduct community hearings hosted by civil society organisations (charities, ethnic associations, faith organisations, unions) that are engaged on the issues of social isolation and loneliness.



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About Community Information Support Services

Community Information Support Services is a Health Promotion Charity that uses technology to support the coordination of health and wellness activities in local communities and provide ways that the public and service providers can work together. We have focused our activities to support people who are vulnerable to disease and isolation in the community We connect people "wherever they live" to services, local activities, clubs groups and events using the My Community Directory + Diary (and the Access My Community App – Available in iOS and Android) In the past 12 months more than 3 million people have accessed the platform and we work 460+ Community (LGA) directories across Australia.

Community Information Support Services is funded through membership of 56 Local Government Areas, WA Government, Queensland Government and 6 Primary Health Networks.

About Link Social

Link Social is a platform of tools developed to create intentional connections and provide new ways for the "Community Connectors" and Link Workers (who are involved in Social Prescribing) ways to find new connect local people to their community.

About The Community Information Exchange

The Community Information Exchange is a secure platform where information can be accessed and used for community purpose. The Community Information Exchange is focused on reducing duplication and the known business benefits of shared data.

Currently the Community Information Exchange is accessible via an Application Programming Interface.

About The Civic Technology Institute

Established in 2020 the Civic Technology Institute has been supported by Community Information Support Services to provide access to the Community Information Exchange to third party developers and suppliers. The first project in partnership with QUT Capstone Students provided new ways to explore and understand local community services and facilities. The Civic Technology Institute is currently financially supported and managed by Community Information Support Services.

This submission has been authorised by Brentyn Parkin, Executive Director, Community Information Support Services, Level 1, 5 Green Square Close, FORTITUDE VALLEY QLD 4006 - For further information please contact Brentyn Parkin by email at phone on the service of the support of the support

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