Overcoming isolation and loneliness

JoCare

Caring for neighbours

ACKNOWLEDGEMENTS

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Cover: Ian sharing a drink with his volunteer visitor Piero

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Dr Sally Osborne | Dr Laurence McNamara

A study of the impact of volunteer outreach on the older person, their family/friends and on the volunteers themselves.
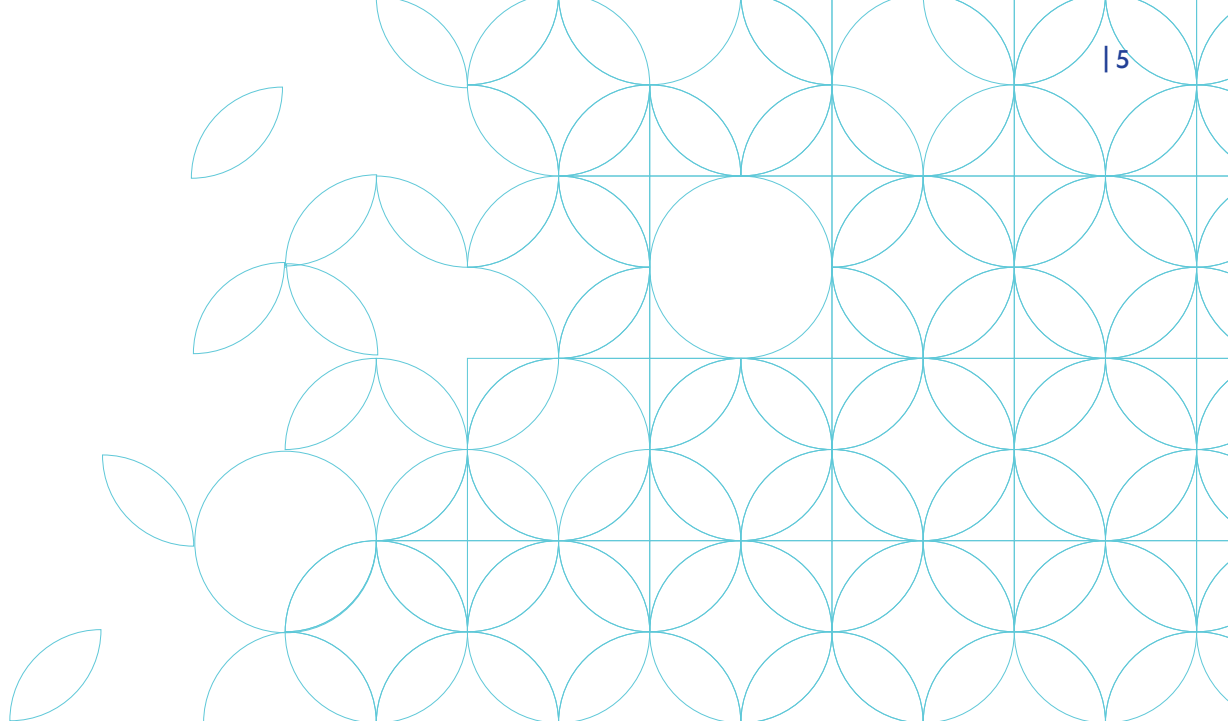
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Abstract

Social isolation and loneliness can be harmful to both physical and mental health, particularly for older people. The voluntary sector plays an ever-increasing role in the provision of services which aim to bring communities together.

Organisations such as JoCare are well placed to further develop a compassionate and caring social community in which loneliness and isolation are reduced. Amid an increasing funding shortfall, this study provides insight and practical recommendations to enhance the socialisation initiatives of JoCare within the wider community.

Executive Summary

Social isolation and loneliness are significant yet underappreciated public health risks — both being associated with poor physical and mental health outcomes for people, particularly those who are becoming older, experiencing a chronic illness or disability, or lacking the resources to engage with others. This study was commissioned by JoCare, a volunteer organisation which believes that mitigating loneliness is our collective responsibility. Being local and staying local is one of its strengths. The study comprised of interviews with volunteers, neighbours and their families/friends in order to assess the impact of JoCare's outreach program on their lives. The phenomenological methods of van Manen (1990) were utilised for analysis and understanding.

Conducted during the confines of a pandemic, its findings revealed the nature and impact of COVID-related isolation, furthermore highlighting JoCare's dynamic response to those impacts. COVID posed additional risk to people such as those living alone and within the data it was possible to assess the ways in which the volunteers built on their knowledge, skills, and values to respond to such expanding needs. The COVID pandemic of 2020/21 has caused a substantial increase in people feeling isolated or lonely for the first time, highlighting the need to talk about it, to normalise it and to seek to eliminate it in a post-pandemic world.

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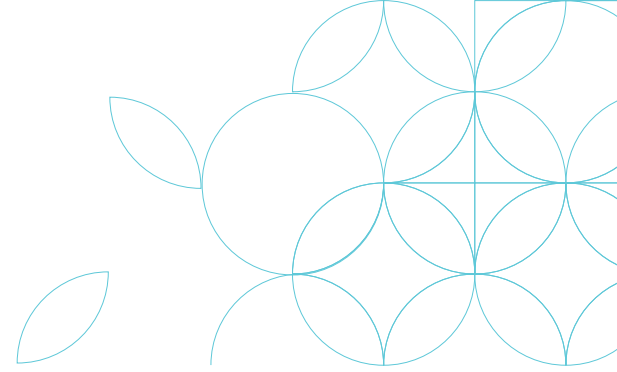
While the world wrestles with a deadly pandemic and how to confront climate change, there is another long-term global challenge for which there are no easy solutions — global ageing (Smith, 2020). Smith refers to this as 'the next global economic threat', and it will result in economies around the world coming under significant strain — more taxes to pay for pensions and health care, lower living standards for the elderly and a greater burden on family/friends to provide care for their elders. Smith (2020) calls for an aggressive search for solutions, especially technological ones like automation, in order to ease the growing burden of care. Even before the COVID-19 shutdown, robots were being introduced in nursing homes and other settings where lonely people are in need of companionship — especially in ageing societies like Japan, Denmark, and Italy.

The Australian population is ageing. In 2016, 15% of Australians (3.7 million) were aged 65 and over and this is projected to grow by 22% (8.7 million) in 2056 (AIHW, 2018). Health maintenance of this growing cohort is an important social and economic challenge facing Australia, together with the increasing demand for volunteer-provided services in health and aged care. Extending a lifetime of good health however enables older Australians to continue to contribute socially, culturally and economically to the wider community (AIHW, 2017), and this represents a tremendous resource to society. The productive social engagement of this cohort and the resultant strengthening of community networks will support a lifetime of good health (Onyx & Warburton, 2003), as well as positive volunteering and the reduced need for formal aged care.

Human beings are social by nature and high-quality social relationships are vital for health and well-being.

Like many other social determinants of health, social isolation and loneliness are significant yet underappreciated public health risks — both being associated with poor physical and mental health outcomes.

These outcomes include higher rates of mortality, depression and cognitive decline (National Academies of Sciences, Engineering, and Medicine, 2020), which potentially may increase the risk of further isolation and loneliness. Although both conditions may be related they do not necessarily co-occur, for it is possible to feel lonely while among other people and to be alone but enjoy the solitude (Cacioppo & Patrick, 2008).

Loneliness refers to the subjective feeling of being alone, being 'left out', separated, or apart from others and it signals a need to form a meaningful or greater connection with other people. Importantly, social species such as humans require not simply the presence of others, but the presence of significant others with whom they feel connected, who they can trust, and with whom they can plan, interact, and work together to survive and prosper (Cacioppo & Patrick, 2008). Loneliness is evident across the lifespan, even in young adults who are surrounded by others or who have numerous followers on social media (Qualter et al., 2015). Beach & Bamford (2014) highlight that more women report being lonely, but hypothesise that women are more willing to admit loneliness than men. The study of Eisler & Blalock (1991) supports this view, reporting that men are limited by stereotypes of masculinity where self-disclosure of feelings is not sanctioned,

thus inhibiting emotional expression and further contributing to their vulnerability. As we age, the potential to become lonely increases and the highest incidence is among people over eighty (Luhmann & Hawkley, 2016). This statistic has emerged as a major concern for health and social policy (Cotterell, Buffela & Phillipson, 2018), with research highlighting diverse negative health effects of loneliness in a cohort already dealing with the effects of ageing.

Where once we survived and prospered as a species by banding together—in couples, in families, in tribes, providing mutual protection and assistance to each other, (Cacioppo et al, 2011), today people are becoming more self-dependent.


Above: Josie welcoming Denise at a JoCare gathering

The traditional social bonds of family, church, neighbourhood and work have lost meaning for some people (Hortulanus & Machielse, 2005), who live in larger, more mobile communities. These communities however create more fleeting bonds with resultant individualistic lifestyles and different ways of connecting with others. This social trend highlights a voluntary isolation with none of the attendant feelings of loss and marginality which may accompany lifestyle changes such as becoming older, experiencing a chronic illness or disability, or lacking the resources to engage with others. Negative life events such as the loss of a job, divorce or bereavement present an increased risk of poverty resulting in greater isolation and a lower sense of belonging (Stewart et al., 2009). Because of its harmful consequences, social isolation represents one of the most serious social problems of our time, ironically in an age when connecting with others seems easier than ever (Glover, 2018).

Structurally loneliness and social isolation have both become significant and pervasive afflictions of modern society (Holt-Lunstad, 2020). Factors such as one's health, education, income, location and access to affordable transport may determine an individual's ability to remain connected and engaged and may result in negative physical and mental health outcomes which carry both an economic and a social cost (Trickey et al, 2008). Over a life course both social isolation and loneliness may be episodic or chronic — depending on a person's circumstances and perceptions (Cacioppo et al, 2011).

Social capital starts from the viewpoint that relationships matter (Bonham, 2017) and volunteering is core to the generation of that capital (Onyx & Leonard, 2000). Here we can see the connections between people and social
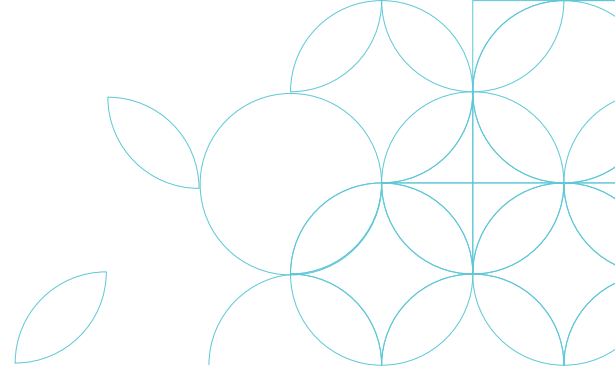
networks, together with the norms of reciprocity and trustworthiness that arise from them (Szendre & Jose,1996; Putnam, 2000). These connections provide significant economic and social value to the economy and, more broadly, to the communities in which they serve (Ending Loneliness Together, 2020). As the population ages however and more people are living alone, social isolation and loneliness are emerging as one of the major issues facing the industrialised world, due to the adverse impact they can have on health and wellbeing (Findlay, 2003).

This paper seeks to demonstrate that JoCare provides opportunities for ongoing engagement and socialisation and will continue to meet expanding needs during Victoria's pandemic lockdowns and beyond. This study also identifies the importance of treating social isolation and loneliness as separate concepts, for they may provide independent predictors and better understanding of health effects. This, therefore, has an impact on the conclusions reached regarding the effectiveness of any prevention strategies (Cotterell, Buffela & Phillipson, 2018).

Volunteerism has a rich history traceable back to medieval times and has now become a core feature of Australian culture. In modern societies civic participation may take many forms. It typically involves people choosing to help others often with considerable expenditure of time and effort (Brindle, 2015), with no financial gain. There is a growing demand for services that traditionally rely heavily on volunteers to supplement government funding (such as community, aged and disability services). However, participation rates are seen to be declining over time (Volunteering Australia, 2021). This may be partly due to the fact that the role of a volunteer is currently being underestimated and undervalued (McVilly & Dodevska, 2017). Moreover, contemporary settings bring new forms of volunteering where more episodic forms of volunteering are expressed through individual, project-based assignments which are often reactive to situations with volunteers frequently shifting between organisations. As a consequence, only weak organizational attachments may develop. Due to changes in social circumstances it happens that organisational expectations of the role of volunteers also changes as does the profile of the typical volunteer (Hustinx, Cnaan & Hardy, 2010). In this study a more traditional volunteering is considered where volunteers and their efforts are deeply embedded within the community. This is Brindle's 'active citizenship' (2015) which contributes to the community's well-being and enables social connectedness and belonging for many people, irrespective of age, gender or other differences.

Volunteering is good for you (Reilly & Vesic, 2002; Stebbins, 1996; Han, Brown & Richardson, 2019) and is a key factor in one's psychological health-contributing to personal happiness and subjective well-being (Myers & Diener,1995). It transforms people's perceptions of themselves, their emotions and their knowledge of the world around them (Haski-Leventhal & Bar-Gal, 2008) while the receiver is also transformed within the relationship, building and expanding their support systems (Saxton, Harrison & Guild, 2015). Bonham (2017) asserts that volunteering has become a community standard with the transformative power for building social capital.

Above: Syd greeting his volunteer visitor John at a local residential aged care facility

JoCare — a case study in action

JoCare has existed as a community support program for the faith community of St Joseph's Malvern, Victoria, for approximately thirty years. While the need to support parishioners had never diminished, over time the program ceased to exist. In 2014, however, the increasing social dislocation within the community caused concern for a number of parishioners and under the guidance of the parish priest JoCare was revived. The intent was to create an outreach program targeting not only the isolated in the faith community but more widely the local community. Cabrini Australia became a partner with St Joseph's and both have supported the outreach program financially ever since. A program coordinator was employed to implement the outreach program. The National Standards for Volunteer Involvement, Australia, 2015, provided a framework for the development of the program.

In 2018, JoCare successfully applied for a grant to become part of the Federal Government's Community Visitors Scheme (CVS). It is currently funded for ten in-home volunteer visitors and five residential aged care visitors. To access a CVS funded volunteer visitor, in-home recipients must either be on a Home Care Package (HCP) or have been accepted for one. HCPs support older people with complex care needs to continue to live independently in their own homes. Without the continuation of supplementary funding, independent of CVS funding, a significant proportion of the people referred to JoCare seeking companionship would not be able to access a volunteer visitor. Many of the referrals that JoCare receives for people looking for a volunteer visitor are not on a HCP. The importance of access to supports and services for maintaining social connections cannot be overstated (Grenade & Boldy, 2008).

JoCare has adopted the term 'neighbour' when referring to people either living in the community or in a Residential Aged Care Facility (ACF) who are visited by a volunteer. Neighbours can be referred to the program either through local aged care providers, by families and friends or simply by self-referral.

Finding volunteers remains an ongoing challenge for JoCare and the local community. JoCare is a member of the Boroondara Volunteer Resource Center receiving referrals from this organisation, as well as through Seek Volunteer and GoVolunteer. Being adequately funded for the continuation of volunteer-supported services is another ongoing challenge for organisations such as JoCare. Sourcing and applying for appropriate funding and support distracts from the important role of supporting volunteers and their neighbours, and creates uncertainty into the future.

In 2021, 86% of the outreach undertaken by the JoCare program was in the local community and outside the parish community. Its strength is to be found in its people who represent diverse cultural, gender and age groupings. Volunteers vary in age from late twenties to mid-eighties. Seventy-four percent of the volunteers who participated in this study had been with JoCare for more than four years. JoCare is an organisation which believes that caring for others, including its volunteers, is a collective responsibility. Creating such a sustainable, inclusive, safe and resilient community exemplifies the United Nations Sustainable Goal #11(United Nations, 2021) and reflects the aims and aspirations of the JoCare program.

AIM

This study aims to examine the impact of volunteer outreach on the lives of those who have consented to join the JoCare community and who have expressed their need for increased companionship, either through the one to one visits and/or the JoCare monthly social gatherings at St. Joseph's, Malvern. The study focuses on the feedback provided by the volunteers, the neighbours and the family/friends regarding JoCare's contribution to their well-being. Families/friends provided an insight into the contribution that JoCare makes to the wellbeing of their relative or friend who accesses a volunteer visitor.

Twenty-five neighbours and/or their families as well as thirty-one volunteers all received a written invitation to join in the study. They had all been involved in the JoCare program for at least six months. After follow-up invitations by mail and phone, forty-five interviews were conducted with illness and interstate movements preventing a further two people from participating. Fourteen neighbours and the family/friends of eight neighbours were interviewed resulting in a total of twenty-two individual interviews with people who are connected through accessing the JoCare program. Twenty-three volunteers were interviewed. A bias must be acknowledged in this study's report as it could be assumed that only those who have had a positive experience were prepared to share their thoughts about the JoCare program.

Neighbours, volunteers and family/friends are referred to as the participants in this study and have been designated pseudonyms. Within the ana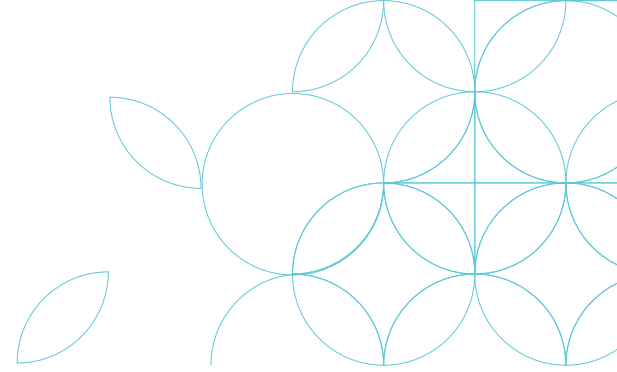lysis, a person will be identified by (N), (V) or (F) to denote their status. Their direct contributions will be given within italics.

METHODOLOGY

This project is a qualitative study using phenomenology as its guiding framework. Phenomenology is the philosophical study of human experience with a concern for the way individual experiences in everyday things in the real world have an impact on a first-person point of view. In this study, data collection and analysis were conducted solely by the researcher, Sally Osborne. The experiences of the participants were recorded through one-on-one interviews where the researcher has the role of listening closely to the participant. Interview transcripts provided the source material for identifying participants' experiences and for revealing a nuanced understanding of the impact JoCare has on them. The experiences, perspectives and opinions of the neighbours, their family/friends and the volunteers were recorded orally and transcribed. The researcher listened to and studied the transcripts repeatedly in order to understand and to fully appreciate the subtleties of tone, use of language and other nuances to be found in what the participants said. The transcripts revealed deeply personal, privileged and sometimes private insights.

ETHICAL ISSUES

Ethics approval was obtained from the University of Divinity Human Research Ethics Committee (HREC) prior to the commencement of this study. Initially details of the study were presented at a social gathering of JoCare neighbours and volunteers and later to those who could not to

attend. Three forms were distributed to potential participants: an 'Introduction to the Study', a 'Person Responsible' form and an 'Informed Consent' form. The last two required personal signatures. Any questions were addressed in detail prior consent to participate being given.

Ongoing assurances were provided for participants regarding withdrawal from the study at any time throughout the study, about the presence of a trusted other being present if required and in regard to the availability of emotional support from a practising psychologist. Respect for privacy and confidentiality were foremost in the conduct and the transcription of all interviews. All identifying material was removed at this stage and later stored securely. All participants shared their experiences in an open and positive way indicating they felt comfortable about taking part in the study. Finally, interviews were conducted in the participants' homes or a place of their choosing such as a coffee shop and were conducted between February and April 2021. During interviews information flowed in a conversational manner.

RESEARCH QUESTIONS

The following three research questions were addressed by all three groups of participants:

1. What is your connection with JoCare?

2. Do you think that a person needs to have certain qualities to be a volunteer?

3. Can you give any feedback on the JoCare organisation? Any thoughts about improvements, what are its strengths and its weaknesses?

ANALYSIS

While there are many numerically based scales for documenting the experience of loneliness, this qualitative study will utilise the human research method outlined in the writings of Max van Manen (1990, 1997, 2007) in order to explore the lived experience of participants and their involvement with JoCare. This phenomenological approach seeks meaning through sensitive questioning, investigating, reflecting, intuiting and describing that lived experience, whereby the researcher becomes a sensitive observer of the subtleties of everyday life. There is, therefore, no specific method directing the flow of the research project, but a set of investigative procedures which function with their own criteria of precision, exactness and rigour (van Manen, 1990).

This qualitative study asks "What is this experience like?" and the three research questions outlined encapsulate the meaning of that lived experience. The interview transcripts become the source of that experience providing a more nuanced understanding as to what JoCare means to the study participants as they relate their experiences, perspectives and opinions to the researcher.

Van Manen's 'detailed reading' approach (1997) to the text requires the scrutiny of every sentence, word and/or statement and then asks: "What does this reveal about the impact of JoCare programs?" A continual search for possible meanings occurs here through a deep engagement in what has revealed itself within the conversations, justifying the isolation of words, sentences and thoughts that may disclose meaning. Similar meanings are then grouped and labelled with a word or a phrase that sums them up. Meaning units begin to appear and going forward may either overlap or become redundant. This process facilitated

the early analysis. For each interview a table was constructed – the first column is a quote from the interview (Script), the second highlights key words, phrases etc. and the third column contains the researcher's interpretation and understanding of the words/phrases within the context of the conversation. The last column distils all this content into a potential meaning unit. The rich content of the interviews outlined below, necessitated the use of this method with its detailed exploration of the experience in order to discover its meaning. Table 1.1 illustrates this process which is not primarily rule bound but rather makes possible an act of 'seeing' meaning.

The following table is an example of Douglas' (N) interview:

Table 1.1 The breakdown into key statements in the interviews

Script	Word/phrase	Understanding of this within the context of the story	Potential meaning unit
I don't feel marginalised or anything I'm not Catholic but they've embraced me as it were.	marginalised embraced	Non judgmental inclusive nature of JoCare	Inclusiveness of JoCare
He brings joy to my life actually he's got an energy that I used to have so it makes me feel sad cos I've lost it. Joy, enthusiasm, youth, optimism, spontaneity- all the things that have been killed in me.	Sad at loss of joy and energy and other attributes	Appreciation of contributions of volunteer	Loss
Family I don't like the word family but I feel like I'm within the organisation and I feel loyalty to it and that's served me well and there's no moral judgment or the like.	Reluctance to use the word 'family'	The inclusive nature of JoCare's programs	Family
I used to be a real comedian but I find it very hard to laugh anymore, I find myself smiling sometimes but I don't laugh out loud, it's very sad.	Loss of humour and ability to laugh	There is not a lot to laugh about now Loss of humour	Humour
I hate the word blessed, but I'm very grateful for their input into my life.	blessed	Gratitude for JoCare's input	Gratitude
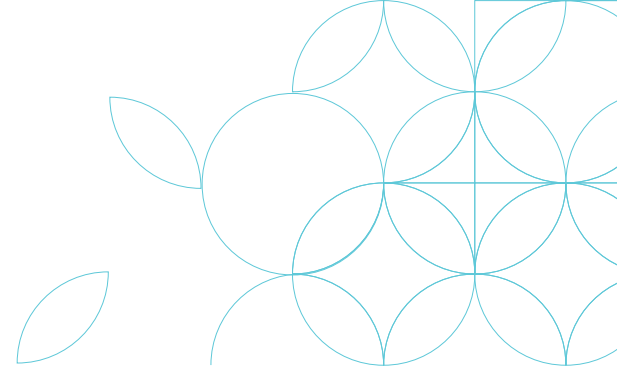
At this stage in the process the meaning units are all examined for their meanings and collated with the purpose of looking for similar words and statements. For example, within the interviews themselves, there was much laughter and smiles, and this is evidenced in the following statements in Table 1.2.

Table 1.2 Components of a meaning unit — 'humour'	
We get on really well together we have a few good laughs	James(V)
She's got a good sense of humour and very intelligent so it was very good company	Jack(N)
My son nearly died with laughter when I said I was visiting old people I'm an old people to him!!	Fenella(V)
Someone who's been willing to listen and laugh with me	Muriel(N)
To go out and have a laugh and a giggle	Jess(F)

'Someone who's been willing to listen and laugh with me.' Muriel(N)

The statements shown are grouped into the meaning unit 'humour'. This meaning unit will go on to become a part of the minor theme 'Kind of Person' and finally a primary theme 'Connected Lives'. Van Manen (1990) reminds us that a theme is essentially a simplification: the sense that we are able to make of something.

Figure 1. How the analysis unfolds
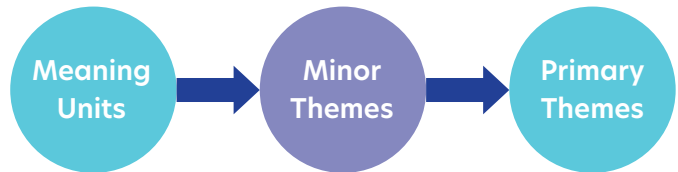
Twenty-six meaning units were identified within the gathered data, each one encapsulating an aspect or a thing. Their classification was dynamic and fluid over time and frequently underwent multiple changes due to shifts in emphasis. Attention was paid to the preceding and subsequent statements as this often set up their intended meaning, as each meaning unit was then re-examined, refining the meaning and the sorting of ideas within the data.

From this point, similarities in meaning units were discerned in order to create minor themes. Meaning units were often represented in more than one place with the meanings being refined, related and overlapping with each other.

For example: After much reflection, the meaning units 'fear', 'faith', 'listening', 'acceptance', 'humour', 'loss', 'grace', 'trust' and 'esteem' were then collapsed into the 'Kind of Person' minor theme. The following Table 1.3 shows the meaning units consolidated to form the minor theme 'Kind of Person' and examples of statements that characterised each of the meaning units.

Millicent (V) summed up the minor theme 'Kind of Person' in her statement: *we can't define ourselves by what we do, it's who we are that matters.*
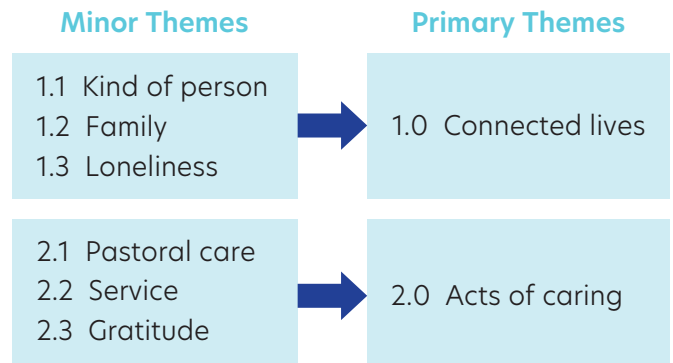
The six minor themes ('kind of person', 'service', 'gratitude', 'loneliness', 'pastoral care' and 'family') were then used to inform and create the primary themes of this study. The data continued to be re-worked, through reading and listening again with

Table 1.3 The compilation of meaning units into a minor theme 'kind of person'

grace	*It makes me grateful... people have gifts and we can all learn something.* Pippa (V)
faith	*He's (God) been a tower of strength all my life.* Catherine (N)
humour	*Oh it's great fun.* (Andrew (N)
listening	*Most people do not listen with interest to understand, they listen with intent to reply.* Fenella (V)
acceptance	*I can't rearrange what is-what it is, is what I've got.* Catherine (N)
loss	*It's filled a big space in my life I suppose.* Muriel (V)
trust	*I think she has learned to trust me and I have also learned to open up to her so it works both ways.* Jane (V)
esteem	*An appreciation that I'm part of the community and that my part is valued and that gives me a feeling of belonging.* Jade (N)
fear	*I have a fear of being ignored when I'm her age.* Carrie (V)

the research question firmly uppermost in mind. The themes coalesced and shared meaning units, overlaying meaning upon meaning and finally uncovering the primary theme. There was reflexivity between the minor themes and the potential primary themes, all providing insight into the research question. The twenty-six meaning units were refined into six minor themes that were in turn distilled as the two primary themes 'Acts of Caring' and 'Connected Lives' as illustrated in Figure 2.

'Most people do not listen with interest to understand, they listen with intent to reply.' Fenella(V)

Figure 2. Consolidation of Minor Themes to Primary Themes

Minor Themes	Primary Themes
1.1 Kind of person 1.2 Family 1.3 Loneliness	→ 1.0 Connected lives
2.1 Pastoral care 2.2 Service 2.3 Gratitude	→ 2.0 Acts of caring

The two primary themes will now be explored with all their related minor themes and meaning units.

1.0 'Connected Lives': A Primary Theme

'Connected Lives' is a primary theme discerned in this study identifying the connection between the neighbours, their family/friends and the volunteers themselves and how it contributes to making the community a better place. Notwithstanding the positive impacts on our health and well-being, being connected and 'in-touch' or sharing food and drink make us all feel good (Reilly & Vesic, 2004; Stebbins, 1996; Han, Brown & Richardson, 2019). Chronic illness and social isolation both remain significant life transitions and a time of increased need for social support. Connectedness does not only just happen but rather evolves over time. Our individual communities may include friends, relatives/ family, neighbours, workmates and acquaintances and they represent ties that allow us to interact in meaningful ways from where we may derive our social support. JoCare provides opportunities to connect with others and for several neighbours it has become the centre of their personal communities.

'Family' is an increasingly complex term today, and within this study it evolved beyond a nuclear definition. Maude(V) reminded us of JoCare's evolution: *it was just a little germ… a little seed that started look where it's come to now.* Roger(V) explained: *I'm very lucky that the person that I've got to look after is such a wonderful person. He and I get on like a house on fire; I'd miss it if he wasn't in my life, he's like family.* Eric(V) concurred as his neighbour has also become part of his family: *having Douglas(N) is like that grandfather role, I guess you could say which is quite nice because I obviously don't have my family here.* Catherine(N) summed up this meaning unit of 'family' for her, saying that JoCare has a *unique position in old people's lives particularly if you are single.* Carrie(V) reflected: *As religious devotion*
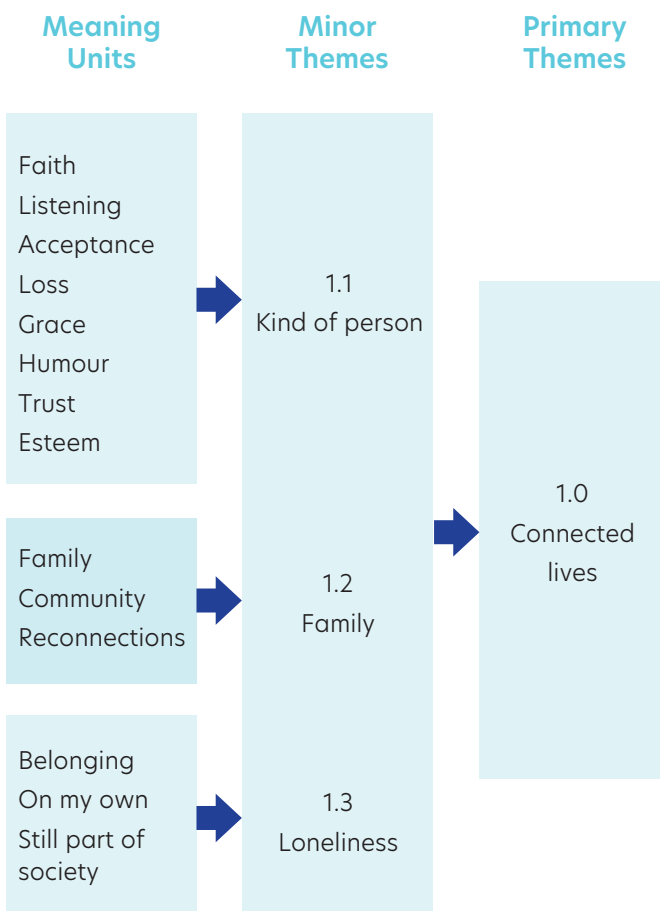
decreases (in an increasingly secular society), the need for JoCare to become 'a family' increases.

Fenella(V) pointed out, however, that while her neighbour has family: *she didn't talk much to them because they didn't listen or weren't interested.* For Fenella, her role was not to replace the family, but to offer a connection through friendship and mutual interests. Parker(V) and his neighbour have reconnected through an interest in sailing: *We're having a good time together…he's got a boat at the marina and I go and help him. We're sailing a little bit cos I'm a sailor myself. It gives me joy if I can help somebody, it really does.*

Community engagement is both an end in itself and a means to an end (Walterstein, et al., 2015). It is an end in itself in that people value a service such as JoCare which understands and is responsive to their needs, and the resultant meaningful participation has positive benefits for people's health and wellbeing. Community engagement is also a means to an end, in that it enables the development and delivery of services which are more attuned to peoples' concerns and needs. Danielle(N) explained this: *I never went to their Mass or their tea things Why? Danielle? Why? I think I'm a loner, yeah I'm a loner 'cos I like my own company…cups of tea and biscuits and natter natter natter doesn't really appeal to me.* Her one-on-one relationship with her volunteer was different: *She brings me information and friendliness. She's very friendly and it's nice to see her and she wears beautiful clothes.*

The three Minor Themes that constitute 'Connected Lives' reflect important aspects of this Primary Theme and represent elements of its composition.

Figure 3. 'Connected Lives' interview analysis

| Meaning Units	Minor Themes	Primary Themes
Faith Listening Acceptance Loss Grace Humour Trust Esteem	1.1 Kind of person	1.0 Connected lives
Family Community Reconnections	1.2 Family	
Belonging On my own Still part of society	1.3 Loneliness	

1.1 'KIND OF PERSON': A MINOR THEME WITHIN 'CONNECTED LIVES'

'Kind of Person' encapsulates many of the meaning units in Table 1.1. *Grace* is used here as good will and benevolence and the JoCare volunteers exemplified this well. The volunteer Millicent said: *it's been a real privilege to walk the journey with her because our relationship has developed really quite significantly.* That particular sentence also embodies the meaning units of *faith, listening, acceptance, trust* and *esteem* and exemplifies the interconnectivity of the parts, going from the whole *(friendship)* to its parts, and vice versa. Fenella(V) remarked on the importance of listening: *Most people do not listen with interest to understand, they listen with intent to reply. She told me the same story several times but it didn't matter it was interesting.* Here the meaning units of *acceptance, loss, esteem* and *trust* are also in evidence.

1.2 'FAMILY': A MINOR THEME WITHIN 'CONNECTED LIVES'

Connections, community and family were used interchangeably within the interviews and made up the meaning units: 'family', 'community' and 'reconnections'. Within the data, the meaning unit 'family' included the volunteer: *he's more than a companion he's a very close friend so if we have dinners or people over he and his partner are often here* Jess(F). For several neighbours JoCare is family. Jane(V) confided: *Now to me JoCare is part of St Joseph's parish and even though I'm a volunteer I still feel like a family… the people there that make up the JoCare family.* JoCare has redefined the word family for Douglas(N): *Family, I don't like the word family but I feel like I'm within*
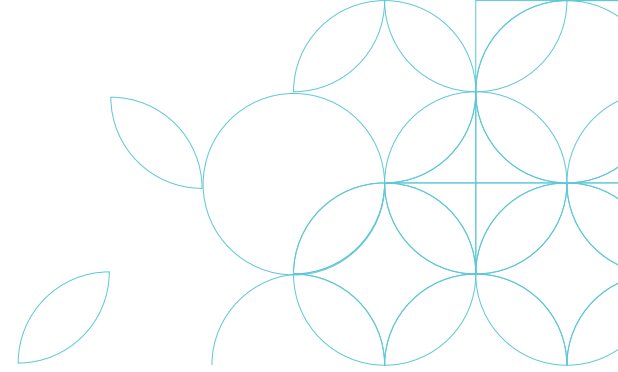
the organisation and I feel loyalty to it and that's served me well. There's no moral judgment or the like. Jade(V) explained this also: *even though I'm a volunteer I still feel like a family the people there that make up the JoCare one.* Carrie(V) made the link to her community: *I really enjoy it, it definitely brings me a sense of fulfilment and connection, to me it's all about community.* The minor theme of 'family' is all encompassing – a volunteer role, an organisation such as JoCare and a community which sustains and nurtures the participants.

1.3 'LONELINESS': A MINOR THEME WITHIN 'CONNECTED LIVES'

The benefits of engaging and connecting with others are denied to people who lack the ability to reach out. This places them at risk of social isolation and loneliness. Within the interviews loneliness and being alone were spoken of in raw, personal terms. For Catherine(N): *It's frightening you wake up in the morning and you just don't belong to anyone. I just didn't ever realise that we were just the two on our own... no family no anything.* Barry(N) contacted JoCare at a time when: *I was very, very lonely and after a very bad nervous breakdown,* and after meeting his volunteer: *I started talking to her now I'm in a different situation.* Delphi(N) acknowledged her volunteer while not admitting to being lonely: *Without her I would be less, what's the word I'm trying to say – turn recorder off for ten minutes while I think! yes I would be on my own more or feeling so – even if I wasn't really.* For Amy(F):

'They are very special...very caring, they don't have a task to do, except to be a friend.'

While the word lonely was rarely used in the interviews, isolation was. *It gives me a link to the outside world... it makes me feel that I'm still part of society... I quite enjoy his visits you feel a bit isolated here all the time* Stanley(N). For the Wheelers(V) their motivation to volunteer was borne out of others' need for company: *Loneliness is such a shocking thing and there are so many people who are lonely and to provide company for people who are lonely... it's not rocket science.* The meaning units of 'belonging', 'on my own' and 'still part of society' became the minor theme of 'isolation'.

As the strands of meaning are brought together, the research question is posed once more: What is the impact of volunteer outreach on the neighbour, their family/friends, and on the volunteer himself/herself? The primary theme of 'Connected Lives' highlights the ways that people reach out to each other through JoCare and the benefits of that engagement for them all.

2.0 'Acts of Caring': A Primary Theme

Central to its working definition and meaning, volunteering is the substance of this primary theme 'Acts of Caring'. Carrie(V) viewed it through a societal lens and called it: *A civic duty for everyone to do some volunteering* and then through a personal one: *It's very important to society and also to me cos it gives me joy*. Ruby's(V) personal lens also spoke of joy: *Most certainly it's something that helps you grow, you learn things that you didn't know, qualities within yourself that you haven't discovered before and you bring great joy to the people you're helping as well as great joy to yourself*. Tamsin(V) summed it up: *It's amazing for people to have just somebody that cares for them*.

The volunteers themselves were full of praise for *the power of volunteering* (Wheelers) and a chorus of volunteers was in agreement:
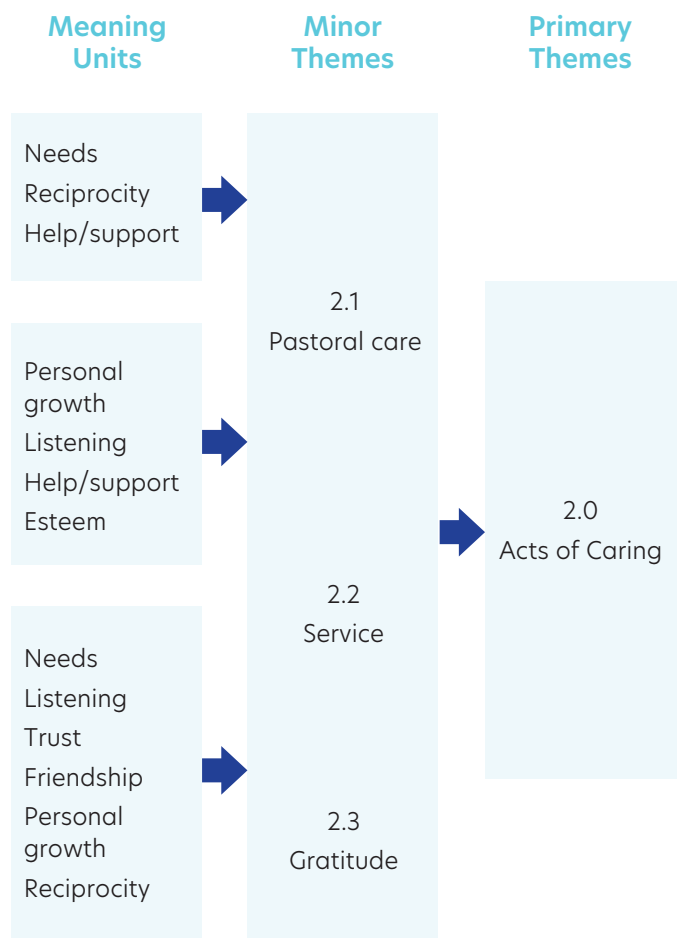
I think you get back more than you give and it's filled a big space in my life I suppose (Muriel)
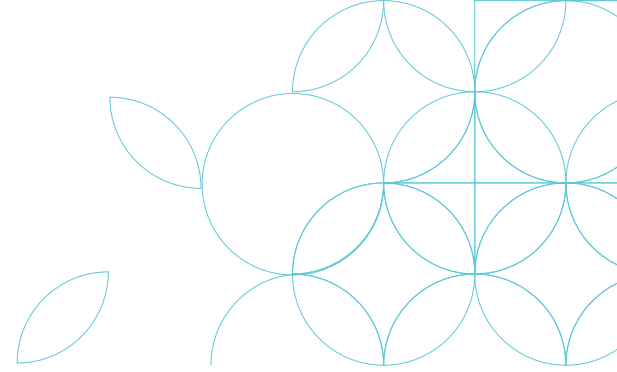
I believe it's beneficial for me because it's a continuity and she and I have become close friends (Jade).The acknowledgement of reciprocity was also widely expressed: *I get great pleasure in seeing other people so pleased to see you*. (Elizabeth); *I know it's just a little thing but it means a hell of a lot… does mean a hell of a lot to both of us* (Dan). Ruth was also in agreement: *And to think that I can make somebody's life better for doing nothing more than having a cup of tea and a chat – which I love to do both*.

While the benefits of volunteering for everyone were varied, within the interviews the neighbours were certain that no particular skills were

necessary: *I don't think so you just have to be a nice human being, simple really* (Parker(V). For Jess(F), the ideal person would be: *Anyone who has it in their heart, a passion to volunteer... it's a win-win. Anyone really who has the time and the energy and also the aspirations... and a social need to connect with people*. Roger saw his volunteer role as an extension of himself: *When you're doing this you can build it into your life*, a role which gave him great satisfaction and a more meaningful life.

Figure 4. 'Acts of Caring' interview analysis

Meaning Units	Minor Themes	Primary Themes
Needs Reciprocity Help/support	2.1 Pastoral care	2.0 Acts of Caring
Personal growth Listening Help/support Esteem	2.2 Service	
Needs Listening Trust Friendship Personal growth Reciprocity	2.3 Gratitude	

The three Meaning Units which comprise 'Acts of Caring' will now be explored within the framework of the research question. They are essential elements of the Primary Theme and are well represented within the participants' interviews.

2.1 'PASTORAL CARE': A MINOR THEME WITHIN 'ACTS OF CARING'

Pastoral care brings emotional, social and spiritual support to the person and addresses the well-being of others. It was seen in the small acts of kindness spoken about by a grateful neighbour: *I'd get two little muffins... the bell would ring and I'd get there.. nobody there... the fairies* (Catherine (N)) and enacted by a caring volunteer: *I will also pray for you and I will add you to my prayers and I say you should also ask God and pray to Jesus and ask God to help you. He can in many, many things* (Jane (V)). Overall, the kindness of the volunteers shone through: *Part of me just wanted to help people who perhaps weren't as lucky as I was. It seemed like a very good idea, is a good idea, has been a very good idea* (Ruth (V)).

'Pastoral care' contains the meaning units: 'needs', 'reciprocity' and 'help/support'. Eric(V) noted: *He doesn't have lots of people around him so you know it just makes you appreciate the family and the friends that you have.* Carrie(V) reflected on this and reminded us that we all have needs: *it's very important to society and also to me cos it gives me joy, I really enjoy it, it definitely brings me a sense of fulfilment and connection, to me it's all about community.* Amy(F) would like JoCare to visit her mother more often: *They do a fantastic job but they need more people. Once a fortnight visits are not enough.* For Remi and Reece(F): *It's*

totally enriched Dad's life which makes caring for him much better for us because it gives us a much better time as a family.

2.2 'SERVICE': A MINOR THEME WITHIN 'ACTS OF CARING'

The role played by the volunteers and their skills encapsulated the minor theme of 'service' and it lit up the interviews with personal testimonies of 'giving back' and personal satisfaction: *I've done volunteering in some capacity for most of my adult life. When I was at high school I volunteered in a soup kitchen... and now so when this flyer came into the letter box it was almost serendipitous. To me it's all about community* (Carrie(V)). James(V) confided:

'I believe that service/volunteering is the only thing that we are on this earth to do and all happiness comes from giving not receiving.'

For the Wheelers(V) meeting their neighbour was transformative: *She bought us a lot of questions that we are now starting to ask ourselves and that we want our kids to ask too. I wish I'd have spoken to my grandparents the way I speak to Joy. I learnt so much from Joy.* Jess(F) and her family received help from JoCare at a critical time: *We needed a little bit of support, that's for sure* and their appreciation for their volunteer Parker knew no bounds: *I hope he feels and he recognises what he's done for Arthur and what impact it's had on his life because it's been massive, huge. We can't begin to thank him enough.* This statement sits well within both the minor themes of 'service' and 'gratitude'.

Other volunteers looked at the bigger picture: *You know I think that this is one of the parish's most important roles in supporting the aged and the vulnerable in our community* Jackie(V).

Importantly for all the volunteers they acknowledged personal growth within their service role: *Most certainly it's something that helps you grow. You learn things that you didn't know… qualities within yourself that you haven't discovered before and you bring great joy to the people you're helping as well as great joy to yourself* Ruby(V).

2.3 'GRATITUDE': A MINOR THEME WITHIN 'ACTS OF CARING'

While recognising the benefits of having a volunteer, the participants all felt gratitude to others, to the church, to the community and to JoCare. For Jade(N), having a volunteer: *Bring(s) an awareness and an appreciation that I'm part of the community and that my part is valued and that gives me a feeling of belonging, which I very much enjoy.* Douglas(N) was alone at this time and acknowledged the importance of JoCare: *I hate the word blessed, but I'm very grateful for their input into my life.* His praise for his volunteer was overflowing and what he brought to him – all that was missing from his life: *Joy, enthusiasm, youth, optimism, spontaneity – all the things that have been killed in me.* He reflected on his volunteer:

'He's not a carer per se but the guy who's in contact with me, he's a lovely guy – he's half my age and… he brings me joy.'

For Remi and Reece(F) the estimation of their father's volunteer could not be greater: *If we had had to go out and find someone in the whole world I reckon Roger fits the bill.* For Miriam(F): *If the JoCare volunteer is going, we felt relief. Mum thought the world of her, it was very important in her life.* Further, from Fabian(V) *I was just thinking about the old chap in his 90s you know I met some of the family and they were so grateful that I went once a fortnight and spent an hour with him, that's all.*

'Gratitude's meaning units summed up the essence of this minor theme – 'trust', 'friendship', 'personal growth' and 'reciprocity' and it was strongly evidenced in all the participants' interviews.

This analysis has revealed primary themes which demand to be interrogated within the framework of the research question. Can they both be reflected within the question: What is the impact of volunteer outreach on the neighbour, their family/friends, and on the volunteer himself/herself? The primary themes of 'Connected Lives' and 'Acts of Caring' are singular and independent. They are, however, inextricably linked. The purpose of the outreach program is to 'connect lives' and this is done through the volunteers and can be seen as 'acts of caring'.

This brief analysis concludes with the overall context of the interviews recorded (Figure 5 next page). After this, the two primary themes are explored.
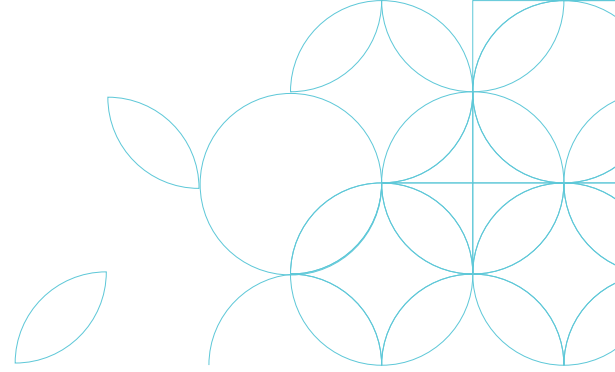
Figure 5. The Final Analysis

Breakdown of Meaning Units, Minor Themes and Primary Themes

Meaning Units	Minor Themes	Primary Themes
Faith, Listening, Acceptance, Loss, Grace, Humour, Trust, Esteem	1.1 Kind of person	
Family, Community, Reconnections	1.2 Family	1.0 Connected lives
Belonging, On my own, Still part of society	1.3 Loneliness	
Needs, Reciprocity, Help/support	2.1 Pastoral care	
Personal growth, Listening, Help/support, Esteem	2.2 Service	2.0 Acts of Caring
Needs, Listening, Trust, Friendship, Personal growth, Reciprocity	2.3 Gratitude	

Discussion

From the rich interview material presented in this study three broad discussion points merit further exploration.

1 THE COMMUNITY

The central importance of community arose as a key understanding throughout this study. Although typically thought of in geographical terms, communities may also be shaped by shared interests or characteristics (Wallerstein et al., 2015). Within this study it was expressed as family, a friend, the church and the companionship of the JoCare network. These are all characteristics of community that JoCare manifests and nurtures. The word 'community' was used twenty-seven times by all three groups of participants: Nanette(V) commented: *We're not actively involved in the church community but we feel that we are part of the bigger family.* Carrie summed up her volunteer role: *It's a sense of yeah, it's a real sense of connection to community.* While JoCare began within a community of faith, it was able to draw others into the vision of JoCare, caring for others in the local neighbourhood.

Here we can see the JoCare program emerging and growing organically from its community and this is certainly the great strength of volunteerism. *I think that JoCare is really good as it's going out to the community rather than just the parish* Jane(V). Jackie(V) was a long term member of the congregation at St. Joseph's: *There have been so many people who need this and I think Stonnington refers people – it's compassion for people, not just people who happen to be Catholic.* Stanley(N) was full of praise for the program: *There's no religious barrier, he's a Catholic and I'm a Protestant but it doesn't really matter if you think about it. It might matter in hell but not here.*

Catherine(N) summed it up: *You see if you're going to have someone come and visit you I mean that is marvellous, that is normality.*

Jess(F) felt connected to her community and hoped that her husband's volunteer did also: *Hopefully he gets a sense of helping and community and everything too.* Jade's(N) involvement in JoCare outreach: *Brings an awareness and an appreciation that I'm part of the community and that my part is valued and that gives me a feeling of belonging which I very much enjoy.* Two statements underscore the role of community and JoCare's place within it. Fenella(V) concluded her interview: *I think that this [JoCare] is being part of a community which in itself is dying out I think,* and that of Jackie(V): *Community you know I sort of think if the Catholic Church doesn't look at that community caring aspect, its lost it.*

Omoto, Snyder & Martino (2000) consider community as both context and process for volunteer efforts. That is, many volunteer efforts are situated squarely in a community and its standards, norms, resources, and institutions provide a backdrop for volunteer efforts. Conversely a community is often directly and indirectly changed by the activities of volunteers and the time and energy that they invest in responding to its needs. Belonging to communities can also be seen in terms of feelings of efficacy, responsibility, and support that derives from this sense of connectedness (Omoto, Snyder & Martino, 2000). Theirs is an inclusive and psychological sense of community which encourages people to volunteer, it motivates and sustains their actions and makes for the understanding of broader
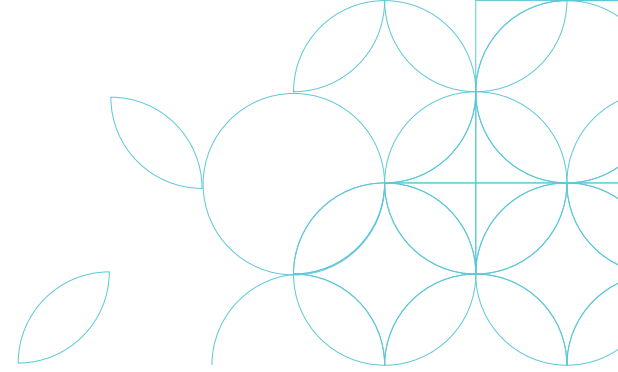
collective action and civic participation.

The word 'family' was used fifty-one times in the interviews and was also multi-faceted in its use. Several volunteers considered their family to be JoCare as Jane(V) attested: *Even though I'm a volunteer I still feel like a family... the people there that make up JoCare.* Of her neighbour Ruby(V) said: *JoCare has become my family.*

'Friend' was utilised thirty-six times within the interviews and it almost exclusively referenced the volunteers. Barry(N) summed up his volunteer: *At the time what I needed was someone to talk to, and I also needed to have a friend after that, and she's become that friend.* Despite COVID-19 restrictions, Catherine's(N) relationship with her volunteer was unchanged: *You got a phone call, you got a card or a little something at the front door. They'd ring the bell I knew to go up and it meant that someone was thinking of you. People are treasures, you know.* These views support the invaluable work of JoCare, within a local community, supported by volunteers which enable connection of a particular sort which focuses on inclusion and connectedness.

2 THE VOLUNTEER

The evolving role of the volunteer was brought into sharp focus within the study. Initially befriending took place but the relationships became so much more in the days, months, and years ahead. For Elizabeth(V) her volunteer role gave her: *Great pleasure in seeing other people so pleased to see you.* Millicent(V) reflected: *When we do form that relationship what you get back is often much more than you give... and to be conscious of that.* Jane(V) explained the challenge of her volunteer match: *I was scared when the co-ordinator put me with her* but over time she devised ways of 'hanging in': *I thought that I needed help and I*

did the thing I said 'you know I live alone I've got no one to talk to' and I said it would be great if I could talk with you. I made it sound like I'm the one who needed help rather than she needed help and that's how she agreed to see me and talk to me. I think she has learned to trust me and I have also learned to open up to her so it works both ways – it's not only me helping her but I think she is also helping me in her own way.

Within Jane's volunteer role, exchange had played a part in building a social relationship. Mauss (1954) reminds us that relationships built on reciprocity are a universal feature of humankind, a gift. When people transact with each other like this, a 'whole' is created and recreated in different ways, reflecting the nature of those involved. However, when volunteer relationships are threatened, the transaction between the volunteer and the neighbour may be compromised. Over several years, mistrust by a family member forced the Wheelers to confront the limits of their role, while working harder to maintain contact with their neighbour Joy. *There was a big question mark against us* but throughout it all, they *felt a real sense of commitment and loyalty to maintain the visits and the relationship* and *if Joy had lived for another five years then we would have stuck at it for another five years. We would have made it work.* Ultimately, Joy passed away and the Wheelers needed time to process their experience: *We're just trying to find our life now.* The experiences of volunteers whether good or bad may determine their future involvement, and the flexibility of JoCare will support the Wheelers to make their own independent decision in their own timeframe.

Volunteering is as much about gaining new skills and experience as it is about giving back. Upskilling volunteers means a more informed and

educated community. Several volunteers have commented on how their role has broadened their awareness of others and their needs. Ruby(V) commented: *Most certainly it's something that helps you grow; you learn things that you didn't know, qualities within yourself that you haven't discovered before.* Roger agreed: *Once you get involved in this sort of thing it needs your total immersion and you've got to learn how to do it too. It's like I'm doing this dementia thing. I'm hoping to be able to use that knowledge to help with the group at JoCare. Already I can see when I'm there people who are starting to show signs of memory loss and now I'll have a better appreciation of what their needs are and be able to respond.* Prior to commencing their volunteer position with JoCare, volunteers undergo an intensive training session which gives priority to the understanding of being in the presence of another, listening and seeing another, as well as insights into the world of volunteering. JoCare also provides continuing support and opportunities for ongoing education and information regarding such issues as elder abuse, dementia and advocacy. A regular newsletter maintains contact between the volunteers and the coordinator.

3 THE JOCARE ORGANISATION

The participants were asked the question: Can you give any feedback on the JoCare program? Throughout the interviews, the responses consistently spoke of the ongoing support from the JoCare organisation (from volunteers) and the extraordinary calibre of the volunteers themselves (from neighbours and family/friends).

First and foremost, the neighbours' responses to the outreach program were unanimous in their praise. Catherine shared her thoughts: *About*

JoCare I found it just so essential. For her it filled: *A unique position in old people's lives-particularly if you are single.* The program also gave joy and solace to family/friends like Amanda, especially at Christmas time: *The partners like myself because it just made us get the Christmas spirit. And we needed a lot of Christmas spirit and it made you realise that you weren't on your own either.* For a volunteer like Maude: *It's filled a big space in my life I suppose... a bit of purpose, I suppose.*

Amid the neighbours' gratitude towards JoCare was their admiration for their volunteer. Douglas acknowledged his younger friend: *Yeah, yeah I think it's the old story you know some people have got it, most haven't, it's an intuitive thing and he seems to have it, he's a very nice guy, but I don't want someone coming round and ordering me around. I've been robbed by a carer you know, things like that I don't need that in my life so it's a very spontaneous thing, it's the companionship it's the feeling that someone else that... is there for me.* Throughout all the lock-downs Catherine reflected: *I still had support mainly from JoCare. That is the key to how I kept my sanity. I mean the kindness of a twenty something year-old* [volunteer].

The need for volunteer support to be ongoing, continual and consistently sustained is acknowledged (Omoto & Snyder, 1995) and is evidenced in the volunteer feedback at JoCare: *The co-ordinator's doing a brilliant job and she matches very well... she communicates well. The initial training day was very good, she did a really good job of that, she really knows how to acknowledge and recognise. I know she's there if anything goes wrong* (Nanette(V)). Significantly there is trust between the co-ordinator and the volunteers to develop their roles to fit their needs within those of their neighbours'. Parker's neighbour was lonely: *I feel bad if I can't do it. If I*
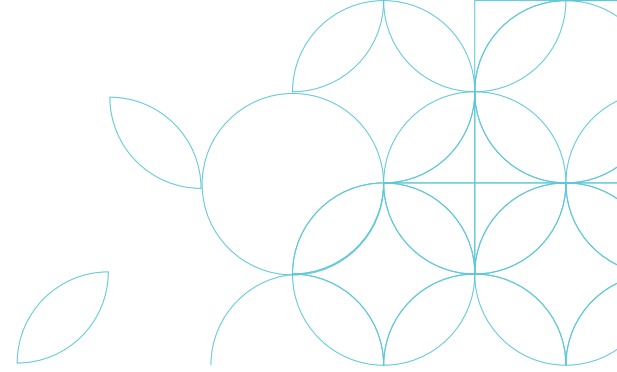
get busy I go oh my God but I saw him, you know sometimes three times a week. We just go for coffee locally, we do this every week sometimes twice sometimes he texts me and says What are you doing? And I say ok ok ok I'm coming. Douglas and his volunteer Eric have also shaped their own relationship: *So we don't build up a dependency relationship, we build up a relationship – a more of an easy going, pop in, 'when you're able to' no strings attached*. Building this friendship within the confines of a hectic career and time taken off to study, Eric was grateful: *What I really like about JoCare is the flexibility*. The consistent support and trust shown by JoCare allowed for this adaptation within the developing relationships and it bore fruit for the program in terms of volunteer tenure and satisfaction. This trust was again evidenced in the neighbours' willingness to welcome a (previously unknown) researcher into their homes in the name of JoCare research.

The interview data revealed that both individual and group interventions reflected a connection to others. JoCare's monthly social gatherings created a sense of security and belonging (Masi et al., 2011), while individual interventions offered a higher quality of created bonds as well as influencing the empowerment to engage socially (Nicholson, 2012). Ruth(V) summed it up:

'It's really about people getting together and helping each other out, it's really a very simple thing.'

While one could argue that it is a simple thing, its effects on the volunteers were profound: *a sense of fulfillment and connection* (Carrie), *very enriching* (Jane), *inspiration and purpose… they nourish you to a great extent* (Kip), *and a lot of joy* (the Wheelers). Individual differences were also sensitively managed as noted previously: *I*

never went to their Mass or their tea things… it doesn't really appeal to me Danielle (N) However over several years Danielle's volunteer became an important part of her life: *She brings information and friendliness, she's very friendly it's nice to see her. We can talk over the phone. I can drop everything and talk to Priscilla.*

The future viability of JoCare was not far from the minds of the volunteers: *It needs to grow and there's staff and then it changes by nature and then it becomes a different beast altogether… Would it be the same JoCare that we know? Maybe not, I don't know* (Carrie). Several volunteers voiced their concern for a succession plan when the current co-ordinator steps down: *The challenge for JoCare is the co-ordinator – we can't speak more highly of her. She, to us, is JoCare she's very caring she's unreal* (the Wheelers). Roger had been involved from the beginning and was protective of what's been achieved: *I would be suggesting that the effective model is replication – we'd give them some support but our key role is a bit inward – we have to look after our group of fifty if that's what it is*. This concern was evidence of the volunteers' own emotional and psychological investment in the program, and is a strong endorsement of JoCare's intrinsic value, both to themselves personally and the community at large.

COVID-19's health impacts posed additional risk to people living with age-related conditions such as frailty and this presented a more urgent need to support the safety and well-being of the neighbours. Within the interview data it was possible to assess the ways in which the volunteers built on their knowledge, skills, and values to respond to the pandemic crisis. Going beyond traditional face-to-face support they employed new, innovative methods of communication and

engagement with their Neighbour (e.g. virtual communication via Facetime, food parcels, letters and notes were new and innovative delivery formats) became the norm and Catherine(N) noted: *How you can plan for that* [COVID-19] *without having experienced it? Well, they've done it.* JoCare's provision of Tablets continued with support tuition where possible and these interventions acted as barriers to counter the effects of loneliness, offering different possibilities and ways of engagement.

JoCare is a dynamic and evolving program with an inclusive agenda, that has provided connection not only to the neighbours in the program but also to the volunteers, providing them both with a sense of belonging to a community of care. The volunteers' generous gift of time to others is respected and acknowledged as being pivotal to the success of the program.

INSIGHTS

Loneliness and social isolation are rarely featured in public health campaigns. This lack of discussion does little to address the associated stigma which also makes assessment and treatment problematic (Cacioppo et al., 2015). The COVID-19 pandemic of 2020/21 has caused a significant increase in people feeling isolated or lonely for the first time, highlighting the need to talk about it, to normalise it and to seek to eliminate it in a post-pandemic world. The interviews illustrated that people are reluctant to acknowledge they are experiencing isolation and/or loneliness, but were prepared to speak around the issue.

A shift from cure to prevention may assist in addressing the causes of isolation and loneliness (Holt-Lunstad, 2020). There is much still to be done. Initiatives include improved urban planning, enhanced social connectedness and building

resilience within communities, promoting civic engagement and volunteering from an early age. Overall, opportunities that connect people in the first place may deliver social return on investment by minimising the risk of loneliness and its associated costs- both in terms of poor health outcomes and the potential contributions that people could have made to their community.

However, The Sydney Myer Fund and Myer Foundation (2010) caution that the complexity and diversity of causes of social isolation and the heterogeneity of people themselves means that there is a need for a range of tailored responses, including where predictors, determinants and interventions may vary. Furthermore, not all people wish to engage in initiatives to reduce their isolation and this must also be recognised and respected.

In the larger context of addressing social isolation and loneliness, the health care system cannot solve all of the associated challenges. Its strength however lies in its positioning that could identify those who are at highest risk of isolation, those for whom this system may be their only contact within the broader community. In this way, the healthcare system has the potential to be a critical component of a much larger solution.

Issues related to funding may arise when local agencies collaborate rather than compete to improve services, however working together and prioritising social health must be elevated above these concerns.

Programs such as the Federal Government's Community Visitors Scheme, ought to change its charter to be a scheme that is available to anyone who is seeking companionship. It should not be tied to specific requirements as it is now. This marginalisation of a proportion of the aged

population denies support to all those who reach out for companionship. Council, state and federal government intervention programs designed to minimise social isolation and loneliness may also prescribe particular criteria for inclusion, thereby becoming exclusive, rather than inclusive, conceivably KPI centred, rather than person-centred. Being local and staying local is one of the strengths of JoCare, and all local councils like Stonnington have a unique opportunity to embed a program such as JoCare locally in their community as well.

The landscape for volunteering is changing. Cities worldwide are being forced to consider new ways of operation to manage ageing populations, along with an increased demand for not-for-profit and community services which are largely run by volunteers. Online networks such as LinkedIn, Facebook, Twitter and other social media tools may be used to strategic advantage as a recruiting tool for volunteers. New types of volunteering will present new engagement possibilities. With today's youth set to transform the next generation of volunteers, the demand for engaging experiences driven by technology is now critical for executing successful volunteer management programs (Ending Loneliness Together, 2020). Volunteer managers must be valued by organisations, and seen as an integral part of the administration and not just as add-ons. Support and encouragement to undertake ongoing professional development and involvement in associated groups such as Volunteering Victoria are examples of this.

COVID-19 has revealed just how unprepared we are to empower and protect vulnerable populations during crises. As a society we must undergo a shift in how we think about global ageing and remap the life course to look at unique opportunities to maintain people's health and foster longevity. Importantly, this thinking will inform future research and service provision.

FINALLY

At a time when declining rates of volunteerism exist in Australia, (Volunteering Australia, 2021), JoCare's performance has defied the national trend with increasing demand for involvement in the program. Furthermore, the profound impact that COVID-19 had on volunteering rates- a drop of 65.9% between February and April 2020 (Volunteering Australia, 2021) was not replicated in the innovative and creative ways that JoCare supported its people to remain connected and engaged with each other.

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Recommendations

'This evaluation is strong and authentic review that builds an epistemology of aged care volunteering that weaves a tapestry of community operating together in an organised, supported and funded fashion.

We know that when people actively engage with change (e.g. ageing, loneliness and social isolation) through volunteering we rejuvenate our sense of agency, and collectively, our resilience to increasingly complex social and economic straits.

This report is to be highly commended for its thoughtful and meaningful calls to change.'

Scott Miller
CEO Volunteering Victoria

'Being engaged and socially connected is very important for any individual especially those who experience living alone such as older people.

This has been particularly evident during the ongoing COVID-19 pandemic which has seen so many people disconnected and socially isolated from family, friends and community. The JoCare program highlights the importance of volunteering and the positive impact this can have on helping older people (our neighbours) remain connected to the community.

The valuable support volunteers can provide to older adults to help is highlighted in this report.

With an increase in the number of older people in our population and living alone or disengaged from community, and the compounding factor of COVID-19, there is a clear need for more volunteers and programs like JoCare.'

Associate Professor Helen Rawson
Director of Graduate Research
School of Nursing and Midwifery
Monash University