



# Social Connectedness

## *What is this?*

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Social connectedness refers to the relationships people have with others and the benefits these relationships can bring to the individual as well as to society. High levels of social connectedness are proven to promote better health and psychological wellbeing<sup>1</sup>.

Social networks may be based on family ties, spatial proximity (for example, neighbourhood connections), or shared interests (for example, sports or cultural groups) which bring people together from further afield. Volunteer work and informal caring are valuable contributions to social connectedness.

## *Why is it important?*

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These relationships and connections can be a source of enjoyment and support. They help people to feel they belong and have a part to play in society. People who feel socially connected contribute towards building communities and society. They help to create what is sometimes called 'social capital', the networks and skills that help society to function effectively. Social connectedness supports overall social capital, which in turn enhances access to contacts, resources, skills, influence, reassurance and mutual support. Social connectedness has been shown to be associated with good health, low crime, higher educational achievement, economic growth, and other positive benefits.<sup>2</sup> High levels of social connectedness can promote better health and psychological wellbeing.<sup>3</sup>

Research has shown that higher levels of perceived social connectedness are associated with lower blood pressure rates, better immune responses, and lower levels of stress hormones, all of which contribute to the prevention of chronic disease.<sup>4</sup> 'Connect' is identified as one of the five ways to wellbeing, which are based on a review of literature regarding effective mental health promotion<sup>5</sup>. Social connectedness can also promote health indirectly. Bonding and bridging relationships between individuals can create healthy social norms, help people connect with local services, provide emotional support, and increase knowledge about health within social networks.<sup>6</sup>

In contrast, the lack of social connectedness – social isolation – is considered a risk factor for multiple chronic diseases, including obesity, high blood pressure, cancer and diabetes. The evidence suggest that loneliness heightens sensitivity to social threats and motivates renewing social connections.<sup>7</sup> The negatives of social isolation appear most among disenfranchised communities, including the poor and the elderly. Lack of social connectedness can increase stress levels and lead to behaviour that increases health risks, such as increased tobacco and alcohol use, or reduce healthy behaviours, such as eating well, exercising, and getting adequate sleep. Isolation can also mask symptoms and increase the delay in seeking care.<sup>8</sup>



## Data

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The most current source of information on community wellbeing is the Canterbury Wellbeing Index<sup>1</sup> which brings together extensive research and understanding of the social trends and issues that are present across Greater Christchurch. The index identified a number of points around social connectedness.

Prior to the 2010 and 2011 earthquakes, the proportion of people feeling a sense of community stood at around 57%, compared with around 60% observed across New Zealand as a whole.<sup>9</sup> The 2016 survey identified that since September 2012, the proportion, across the region, feeling a sense of community has trended downwards to below 50 per cent overall. The 2016 survey data indicates that feeling a sense of community is not consistent across the region. Residents of Selwyn and Waimakariri districts continue to feel a stronger sense of community than those living in Christchurch city. Within the Christchurch city there were also differences. The area with the lowest sense of community were the city's eastern suburbs (at 32% down from 39%) while those in the south had the highest sense of community 58% down from 64%).

The Wellbeing Index indicates that enduring loss of local facilities in some areas remains a stubborn issue for many as these were often focal points for the community. The longer facilities are not available, the more the ebb of people and interest erodes their connections, patronage and heritage which can influence their prioritisation for rebuilding.

The Social Report used six indicators for social connectedness; telephone and internet access in the home; voluntary work; trust in others; contact between young people and their parents; loneliness and isolation; and contact with family and friends<sup>10</sup> a selection of these indicators have been summarised below.

### Sense of Trust

Trust in others is an important indicator of how people feel about members of their community. High levels of trust facilitate co-operative behaviour among people and contribute to people's ability to develop positive relationships with others. A Chicago study found that higher levels of trust between residents are associated with lower mortality.<sup>11</sup> Table 1 below identifies data for Christchurch and the Six Cities from the 2014 Quality of Life Survey. The 2014 Survey did not analyse sense of trust by age or ethnicity.



**Table 1:** People’s sense of trust – 2014 Quality of Life Survey<sup>12</sup>.

Sense of trust	Christchurch	Six Cities Total
People can almost always be trusted	10%	9%
People can usually be trusted	51%	56%
You usually can’t be too careful in dealing with people	27%	23%
You almost always can’t be too careful in dealing with people	7%	7%

### Social Connections

In the 2014 Quality of Life survey half of the respondents identified work or school as an important source of social connections with an almost equal proportion identifying online networks as important and just over a quarter identified hobby and interest groups and sports clubs. Just under a quarter identified churches as an important source of connection. The results for Christchurch were not substantially different to the other six councils surveyed.<sup>11</sup>

### Contact between young people and their parents

The Social Report indicates that having a close and caring relationship with a parent is one of the most important predictors of good health and wellbeing for young people. The Youth ’12<sup>13</sup> survey reported on the health and wellbeing of 8,500 secondary school students aged between 12 and 18 throughout New Zealand (including 558 students living in Greater Christchurch).

The table below shows responses to questions asked of young people living in Greater Christchurch and the rest of New Zealand about home and families in the Youth ’12 survey. The Christchurch results are very similar to the rest of New Zealand except that Christchurch students are reporting they have less ‘fun with family’ compared with students from the rest of New Zealand.

**Table 2:** Students’ responses to questions on family relationships and circumstances

Family relationships	Christchurch %	Rest of NZ %
At least one parent (or person who acts as a parent) cares about them a lot	92.0	93.1
Family ate meals together five or more times in the last 7 days	63.2	62.3
Family members get along well or very well	80.1	81.0
Student has fun with their family often or a lot	66.5	69.4
Family circumstances		
Parents often or always worry about not having enough money for food	10.0	11.6
Moved home 2 or more times in the last 12 months	7.9	7.3



The majority of Youth '12 participants in Christchurch and the rest of New Zealand report positive family relationships. However only slightly over one third of participants say they usually get enough time with their mother or father (or person who acts as mother or father).

### **Isolation**

People who are not connected to social networks of some form tend to feel more isolated. The latest Quality of Life survey identified that for those 18 years and over in Christchurch 64% never or rarely felt isolated compared to 68% nationally. Five percent of respondents in Christchurch and nationally felt isolated.<sup>11</sup>

### ***Impact on inequalities***

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While there are some differences across gender, age group and ethnic groups, these differences are not striking indicating that the issues around inequalities and social connection are not straightforward. There is room for further data gathering and analysis to identify impact on inequities and possible strategies for addressing these.

### ***Solutions***

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Social connectedness is particularly important in building communities that can withstand adversity, whether caused by economic, social, or environmental shocks.<sup>14</sup> This has been particularly strongly argued by research in Christchurch post-earthquake where the level of social capital invested in a suburb appears to have a strong correlation with the local residents' resilience<sup>15</sup>. In 2012 Christchurch was selected as one of the first 33 cities to work with the Rockefeller Foundation in the development of 100 Resilient Cities. Early work on the resilience plan identified a number of themes, one of which was community and social cohesion<sup>16</sup>. The final plan identifies actions around the future focus of work. The key areas identified were:

- 1) Connecting people: Strong communities can respond to change more rapidly and recover from unforeseen events. People who connect with each other access support, resources and are part of informal support networks. Connectedness will better support individuals who may experience feelings of helplessness with consequential implications for mental health.<sup>17</sup>
- 2) Create adaptable spaces: The quality of the environment, buildings and the network of streets and spaces, defines the way we go about our daily lives. The convenience and safety of transport routes determine our choice of travel. The ambience and functionality of a space encourages us to spend time there, in turn shaping our lifestyle choices and social engagement and ultimately our physical and mental wellbeing. Making spaces accessible to all is key to building connections. We need safe environments where people can walk or cycle to obtain services or meet others for recreation.<sup>18</sup>



Initiatives that emphasis and enable reciprocity are fundamental. Initiatives like Time Banks, sometimes called ‘paying it forward’ are one good example of an initiative that builds connected, cohesive communities. Initiatives that support connections through community networks and organisations are also important for people to feel part of and supported by their communities.<sup>19</sup> This is particularly evident locally through the promotion of initiatives like Summer of Fun, ‘Knowing your neighbour is a Piece of Cake’ and Neighbours Day Aotearoa <sup>20</sup>

### *Connections with other issues*

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Mental Illness, Community Initiatives, Community and Voluntary Sector, Religious Organisations, Social and Sports Clubs, Māori Culture and Marae, Migrant Social Support.

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## References

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- <sup>1</sup> Canterbury District Health Board. (September 2016). *Canterbury Wellbeing Index*. Available from <http://www.cph.co.nz/your-health/Canterbury-Wellbeing-Index/> Accessed 20.09.2016.
- <sup>2</sup> Capon, A.G., & Blakely, E.J. (2007). Checklist for healthy and sustainable communities. *New South Wales Public Health Bulletin* 18, 51-54.
- <sup>3</sup> Aminzede, K. (2013). The association between neighbourhood social capital and adolescent self-reported wellbeing in New Zealand: A multilevel analysis. *Masters Thesis*. University of Auckland. Available from <https://researchspace.auckland.ac.nz/handle/2292/11566>. Accessed 08.09.2016
- <sup>4</sup> Uchino, B., Cacioppo, J., & Kiecolt-Glase, J. (1996). The relationship between social support and physiological processes: A review with emphasis on underlying mechanisms and implications for health. *Psychological Bulletin*, 119 (3), 488-531.
- <sup>5</sup> <https://www.mentalhealth.org.nz/home/ways-to-wellbeing/> Accessed 08.09.2016
- <sup>6</sup> Villalonga-Olives, E., & Kawachi, I. (2015). The measurement of bridging social capital in population health research. *Health Place* 36, 47-56. Available from <http://www.ncbi.nlm.nih.gov/pubmed/26409896> Accessed 18.09.2016
- <sup>7</sup> Cacioppo, J. T. (2014). Social relationships and health: The toxic effects of perceived social isolation. *Social and Personality Psychology Compass*. 8(2), 58-72.
- <sup>8</sup> Institute of Medicine Committee on Health and Behavior. (2001). *Health and Behavior: The interplay of biological, behavioral, and societal influences*. Washington D.C., National Academy Press.
- <sup>9</sup> Quality of Life Survey. (2010). [http://www.qualityoflifeproject.govt.nz/pdfs/Quality\\_of\\_Life\\_2010.pdf](http://www.qualityoflifeproject.govt.nz/pdfs/Quality_of_Life_2010.pdf)
- <sup>10</sup> Ministry of Social Development. (2016). *The social report 2016: Te purongo oranga tangata*. Wellington: Ministry of Social Development. Available from <http://socialreport.msd.govt.nz/documents/2016/msd-the-social-report-2016.pdf> Accessed 08.09.2016
- <sup>11</sup> Lochner, K., Kawachi, I., Brennan, R., and Bucha, S. (2003). Social capital and neighbourhood mortality rates in Chicago. *Social Science and Medicine*, 8, 1979 -1805.
- <sup>12</sup> Quality of Life Survey. (2014). Available from [http://www.qualityoflifeproject.govt.nz/pdfs/Quality\\_of\\_Life\\_2014.pdf](http://www.qualityoflifeproject.govt.nz/pdfs/Quality_of_Life_2014.pdf) Accessed 08.09.2016
- <sup>13</sup> Adolescent Health Research Group. (2013). *Youth '12: The Health and Wellbeing of Secondary School Students in New Zealand. Findings from the Youth '12 national youth health and wellbeing survey*. Auckland: The University of Auckland. Available from <https://www.fmhs.auckland.ac.nz/assets/fmhs/faculty/ahrg/docs/christchurch-%20report.pdf> Accessed 08.09.2016
- <sup>14</sup> Cork, S. (2009). *Brighter prospects: enhancing the resilience of Australia*. Australia 21. Available from: <http://australia21.org.au/research-archive/building-australias-resilience-2/brighter-prospects-enhancing-the-resilience-of-australia/#.V9DBcNj3AV> Accessed 08.09.2016.
- <sup>15</sup> Thornley, L., Ball, J., Signal, L., Lawson-Te Aho, K., & Rawson, E. (2013). Building community resilience: Learning from the Canterbury earthquakes Available from <http://www.hauora.co.nz/assets/files/Resources/Final%20Report%20to%20HRC%20-%20Building%20Community%20Resilience.pdf> Accessed 08.09.2016
- <sup>16</sup> Greater Christchurch Preliminary Resilience Assessment. September 2015. Available from <http://www.ccc.govt.nz/assets/Documents/The-Rebuild/About-the-Rebuild/Resilient-Cities-PAM7918-WEB.pdf> Accessed 08.09.2016
- <sup>17</sup> Urry, J. (2002). Mobility and proximity. *Sociology – the Journal of the British Sociology Association* 36, 255-274.
- <sup>18</sup> Miles, R. (2008). Neighbourhood disorder, perceived safety, and readiness to encourage use of local playgrounds. *American Journal of Preventive Medicine* 34, 275-281. Copeland, K.J., & Young, A.M. (2007). Health and social impact assessment of the South East Queensland Regional Plan (2005-2026). *New South Wales Public Health Bulletin* 18(9-10), 177-179. <http://www.publish.csiro.au/nid/227/issue/4093.htm>
- <sup>19</sup> Whitham, M., & Clarke, H. (2016). Getting is giving: Time banking as formalized generalized exchange. *Sociology Compass*, 10(1), 87-97. Available from <http://onlinelibrary.wiley.com/doi/10.1111/soc4.12343/abstract>
- <sup>20</sup> <http://raranga.org.nz/pieceofcake/>  
<http://www.cph.co.nz/wp-content/uploads/communityinmindsharedprogrammeofaction.pdf>

