INITIAL KNOWLEDGE SYNTHESIS

Aim: Knowledge synthesis activities for the first month of the project were focused on conducting a rapid review to identify and examine the effectiveness of social connectedness interventions at reducing feelings of social isolation and loneliness and promoting well-being, resilience, and coping in the context of infection control-related social and physical distancing measures.

Methods: A search strategy was developed in collaboration with academic librarians and run on June 5th 2020. The search combined terms related to (1) social isolation and loneliness, (2) confinement and quarantine, and (3) infectious diseases and outbreaks. The following databases were searched: Medline, PsychInfo, Ageline, CINAHL, Embase, Social Work Abstracts, Cochrane database. Pre-prints were also searched using the following databases: Covid-Scholar, PsyArxiv, MedArxiv. We also ran a Google search and examined the first 10 pages in an attempt to find relevant grey literature. A two-stage screening process was undertaken in Covidence by two reviewers with disagreements resolved through discussion. Studies were excluded if they focused on younger adults or children, were not original studies, were not related to an outbreak context, did not report on an intervention targeting social isolation, were published prior to 2000, or not in English or French. Results were synthesised narratively.

Results: A total of 1344 unique records were identified, of which 13 were eligible for inclusion (see figure below). All studies were undertaken during the current COVID-19 pandemic. Only three studies were completed and reported results, with results providing mixed results and the remaining reporting on protocols or proposing intervention models. The vast majority of studies used information and communication technology to provide education, coping strategies (e.g. cognitive behavioural therapy, mindfulness), knowledge and skills related to healthful behaviours (e.g. sleep, exercise), daily planning strategies, opportunities to connect and health care (telehealth). Two studies reported on approaches to identify individuals negatively affected by social distancing measures. With the exception of one, all studies were individual interventions either self-administered or led by health care professionals.

Conclusions: Literature on interventions aiming to reduce the psychological impact of social isolation resulting from lockdown measures is still limited and most studies are still underway. Many excluded articles provided relevant recommendations that were either based on clinical expertise or interventions evaluated when social distancing measures were not in place, which should be examined to provide more evidence on effectiveness of specific interventions.



PRISMA 2009 Flow Diagram

