Loneliness, Social Isolation, and Depression

Loneliness, Social Isolation, and Depression is designed to help you understand the causes of these conditions and action steps to take for yourself or someone you know.

Goal: Participants will understand what the terms loneliness, social isolation, and depression mean; how to identify the symptoms; and how to get help if they are or someone they know is experiencing any of them.

Learning Objectives

Short Term:

- 1. Understand the connections between loneliness, isolation, and depression.
- 2. Identify risks associated with them and how they can affect your health.
- 3. Know that they are not a normal part of aging.
- 4. Learn techniques to help themselves and others experiencing these conditions.
- 5. Share resources to help address their negative impact

Facilitator Instructions and Handouts

- The facilitator guide and all handouts are provided in this notebook.
- The handouts that go along with this module are indicated by a screenshot within the facilitator guide. Each handout can be distributed when applicable, given at the beginning of the presentation, or held until the end.
 - Handout A Self-Assessment Checklist
 - Handout B Zone Tool Self-Management for Depression
 - Handout C Mental Health Resources Sheet
 - Handout D Empowerline Card
 - **Evaluation Form** (Bring pencils/pens so audience can complete evaluation forms).

Facilitator Tips

- Focus on engaging participants in a conversation, not making a "presentation."
- The topic of loneliness, social isolation, and depression can be rather sensitive. You set the tone. Talk WITH participants, not AT them.
- Ideally, have **everyone sit in a semi-circle or around a table** to create a group environment. However, you may be limited by the room set-up or space available.
- Ask questions often to encourage participation.

Ensure that participants have the **Empowerline** phone number (404-463-3333) and website (<u>www.empowerline.org</u>). Encourage them to call for more information about community-specific services.

Remember, as an AmeriCorps Seniors RSVP volunteer for the Atlanta Regional Commission; you are required to stay neutral and not promote any services, goods, products, or religion, or make political comments during the presentation.

RSVP Presentation – Let's Talk Loneliness, Social Isolation and Depression, REV 7–25–22

Time Layout

Sections	Page #	PowerPoint Slides Addressed	Activity/Handout	Time (60 min. total)
Personal Introduction / Agenda	4	Slide 1	Icebreaker / Personal introductions	2 min.
Presentation Goals and Good Mental Health	5-6	Slides 2-3		2 min.
Definitions: Loneliness, Social Isolation, and depression	7-11	Slides 4-8		5 min.
Loneliness	12-13	Slides 9-10		4 min.
Isolation	14-15	Slides 11-12		4 min.
Comparison to Smoking	16	Slide 13		4 min.
Self-Assessment and Staying Engaged	17-18	Slides 14-15	Distribute "Self- Assessment Tool"	5 min.
Depression	20-21	Slides 17-18		5 min.
Suicide	22	Slide 19	Distribute "safeTALK Suicide Insert."	4 min.
Options to address Loneliness, Social Isolation, and Depression	23-25	Slides 20-21	Distribute "Depression Zone Tool."	5 min.
Key Notes and Take- a-ways	26	Slide 22		4 min.
Local Resources	27	Slide 23	Distribute "Resource Sheet"	5 min.
Quick Recap & Conclusion	28-29	Slides 24-25	Distribute and collect Participant Feedback Form.	10 min.
Evaluation			Complete Presenter Feedback Form while you wait.	
<u>Total</u>				60 min

Evaluation Tools

- ✓ Participant Survey: This survey is intended to gauge what participants learned during the module and whether they found the program to be helpful. Participants should fill out the survey at the end of the presentation.
- ✓ **Facilitator Evaluation:** This report will help determine if the learning objectives were accomplished. This report is also a chance for you, the facilitator, to reflect upon how the program went. After each lesson, complete the corresponding section of the report.

Please return all completed evaluations to the RSVP Volunteer Coordinator (Cynthia Haley Dunn) at the ARC office no more than one week following the presentation. The evaluation tools are further described below.

It is important to collect information about the session to determine the effectiveness of the services provided.

- At the end of each module, you should fill out the corresponding part of the *Facilitator Evaluation* so that your feedback can be integrated into this program.
- At the end of the module, participants should fill out the Let's Talk about
 Loneliness, Social Isolation, and Depression Evaluation. Please encourage
 everyone to give honest answers. Participants are asked, though not required,
 to provide their name and phone number so that they may be called to answer
 follow-up questions regarding the session.

Remember, it is important as an RSVP volunteer to remain neutral and not to promote any services, goods, or products. Do NOT give any medical advice or answer questions about specific medications or treatments that participants may be using. Encourage participants to discuss any concerns about particular concerns with their healthcare providers.

Questions/ Suggestions?

If you have any questions about the program or suggestions for improvement, please contact the RSVP Volunteer Coordinator, **Cynthia Haley Dunn**, at cdunn@atlantaregional.org.

PowerPoint slide images, facilitator's notes, and a suggested script follow.



Let's Talk About Loneliness, Isolation & Depression

Presented by AmeriCorps Seniors Metro Atlanta RSVP A Program of the Atlanta Regional Commission





Facilitator Instructions

1. Greet participants and welcome them to the module.. ▶ Say:

Hello everyone, and thank you for coming today. My name is _____, and I am an AmeriCorps Seniors RSVP volunteer here on behalf of the Atlanta Regional Commission (ARC). Today, we will talk about Loneliness, Social Isolation, and Depression. We will discuss what these conditions are, explore ways to respond and cope, and share resources to help manage or alleviate the negative conditions that loneliness, social isolation, and sepression may raise.

- 2. Explain the presentation being presented. Say: I will not give you medical advice, just suggestions, and techniques to help with loneliness, social isolation, and sepression. You should direct any medical questions about these conditions to your healthcare providers.
- 3. Emphasize confidentiality. Say: I encourage you to think about and discuss these topics outside of our session. However, I ask that you keep the personal stories and opinions private.
- **4. Verify understanding. Say:** Before we get started, does anyone have any questions? Ok, let's get started!
- **5. Explain the agenda for the module**. **Say:** We have some handouts we will be giving you that will summarize some of this information. Please feel free to take notes and ask questions.



Let's Talk: Presentation Goals

This presentation will help you understand:

- How loneliness, isolation, and depression can affect your health
- The connections between them
- The risks associated with them
- That they are not a NORMAL part of Aging!
- Learn techniques to help yourself and others experiencing these conditions.
- Share resources to help address their negative impact.



▶Sample Script:

As we age, circumstances in our lives often change. We retire from a job, friends move away, or health issues convince us to eliminate or restrict driving. When changes like these occur, we may not fully realize how they affect our ability to stay connected and engaged and how much they can impact our overall health and well-being.



Let's Talk: Good Mental Health

Mental health is essential to good health.

- Mental health is very important to our personal wellbeing, our family, and our personal relationships.
- Good mental health is successful mental functioning that results in productive activities, fulfilling relationships, and the ability to cope and adapt.
- It includes emotional balance, the ability to live fully, and the flexibility to deal with life's inevitable stresses, challenges and traumas.



▶Sample Script:

Mental health is essential to good health.

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- Good mental health is successful mental functioning that results in productive activities, fulfilling relationships, and the ability to cope and adapt.
- It includes emotional balance, the ability to live fully, and the flexibility to deal with life's inevitable stresses, challenges and traumas.

Definitions



▶Sample Script:

Let's explore definitions of loneliness, social isolation, and depression. Remember that none of these conditions are a normal part of aging.



Loneliness

Having fewer social contacts and meaningful contacts and/or meaningful relationships that one would like to have



▶Sample Script:

Loneliness is defined as having fewer social contacts and meaningful contacts and meaningful relationships than one would like to have.

Social Isolation

Problems that occur in an individual's social network, community or society that result in a person losing a sense of belonging





▶Sample Script:

Isolation results from problems that occur in an individual's social network, community, or society that result in a person losing a sense of belonging

Research tells us that more than 8,000,000 adults aged 50 and older are affected by isolation. The health risks associated with prolonged isolation are equivalent to smoking 15 cigarettes a day!

Ask Participants:

What are some of the reasons that people may be affected by social isolation?



Depression

A mental health/medical condition that creates a sad mood which lasts for a long time and interferes with normal functioning



▶Sample Script:

Depression: is a mental health/medical condition that creates a sad mood that lasts for a long time and interferes with normal functioning.



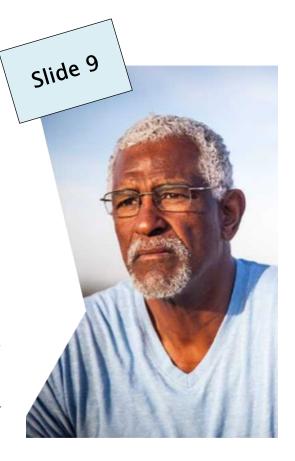
Loneliness, Isolation and depression are <u>NOT</u> a NORMAL part of Aging!





▶Sample Script:

Remember that loneliness, isolation, and depression are not a normal part of aging.



Loneliness

Loneliness is a growing health epidemic!

"We live in the most technologically connected age in the history of civilization, yet rates of loneliness have doubled since the 1980s."

ATLANTA

Dr. Vivek Murthy 19th and 21st U.S. Surgeon General, 2017

▶Sample Script:

Loneliness is a growing health epidemic. We live in the most technologically connected age in the history of civilization. Yet, rates of loneliness have doubled since the 1980s.

It means being without company, cut off from others, and sad from being alone.

Loneliness is linked to serious health problems and death among older adults.

slide 10

Let's Talk: Loneliness



- Is the psychic pain and distress that happens when you feel alone
- Is possible even when you are around other people
- Is usually related to the quality of our relationships
- Can be "passed on" to others
- Can be caused by lack of physical activity.



▶Sample Script:

The emotions that set off when you feel lonely can be quite powerful. They can trigger dejection and depression – and in extreme cases – lead to death.

Loneliness has a systemic or full-body affect, raising our stress hormone levels; It can be passed on to others. The Journal of Personality and Social Psychology states that loneliness can be contagious. In fact, you are 52% MORE likely to feel lonely if someone you are connected to is lonely as well.

Loneliness can affect your sleep (Sleep Journal). The lonelier you are, the more fragmented your sleep.

Research also shows that there is a correlation between weight gain and loneliness. Many of us tend to compensate for lack of relationship or connection with food.

Older adults who describe themselves as lonely have a 59% greater risk of functional decline and a 45% greater risk of death.

Isolation and depression are different from loneliness.

Older Adults, Isolation and Depression

- Many older adults go through major life changes that make them more vulnerable to isolation and depression.
- Aging may bring changes to social relationships, and readjustment can be difficult.
- A major risk factor for isolation is loss of a spouse/loved one.



▶Sample Script:

According to a report by AARP, more than 8 million adults over 50 are affected by isolation. Isolation – defined as a lack of meaningful contacts with others -- occurs is when someone is physically or emotionally disconnected from friends, family, and community.

In a more recent AARP survey on the impact of COVID-19, two-thirds of respondents stated that the pandemic has caused them to "experience social isolation" and increased anxiety.

Older adults may be especially at risk for social isolation because they are more likely to have experiences -- like the loss of friends and loved ones, or the onset of health problems—that increase their need for a strong foundation of robust social relationships.

According to the AARP Public Policy Institute (2017) socially isolated older adults are at greater risk for poor health and death than their well-connected counterparts.

Medicare spends more on socially isolated older adults for skilled nursing care and hospital stays because they lack community support.

Socially isolated adults tend to have poorer health outcomes and higher likelihood of death.

When you are feeling empty or isolated, you may behave in more hostile and awkward ways toward others who, in turn, behave a bit more negatively than others, and so on.

Do you have more Facebook Friends than real friends? Take note.



Factors Associated with Isolation

- Loss of a spouse/partner
- Living alone
- Mobility or sensory impairments
- Major life transitions or losses
- Low income/limited financial resources
- Being a caregiver for someone with a serious condition
- Psychological or cognitive challenges
- Inadequate social support
- Rural/unsafe/inaccessible neighborhood
- Transportation access challenges
- Language barriers
- Racial/ethnic/sexual orientation and/gender identity issues



▶Sample Script:

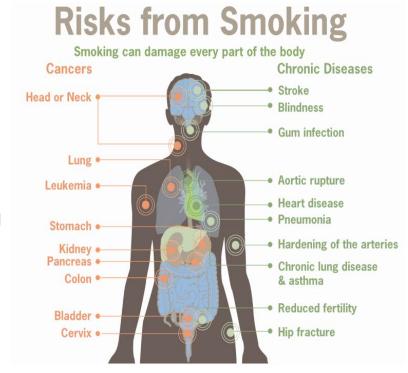
These factors are often associated with isolation:

- Loss of a spouse/partner
- Living alone
- Mobility or sensory impairments
- Major life transitions or losses
- Low income/limited financial resources
- Being a caregiver for someone with a serious condition
- Psychological or cognitive challenges
- Inadequate social support
- Rural/unsafe/inaccessible neighborhood
- Transportation access challenges
- Language barriers
- Racial/ethnic/sexual orientation and/gender identity issues

What Research Tells Us

- More than 8,000,000 adults aged 50 and older are affected by isolation.
- The health risks associated with prolonged isolation are equivalent to smoking 15 cigarettes a day!



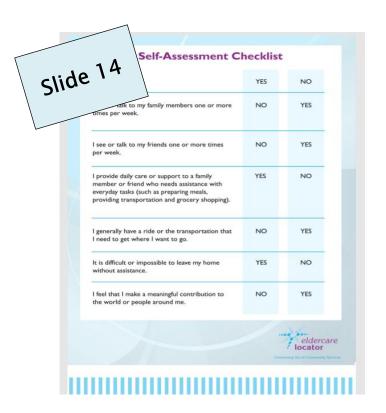


▶Sample Script:

More than 8 million adults age 50 and older are affected by isolation.

The health risks associated with prolonged isolation are equivalent to smoking 15 cigarettes a day! People who are isolated are more likely to develop serious illnesses.

→ Do not give any advice about taking specific medication. Tell participants to ask their healthcare providers.)



Self-Assessment Checklist

Do you have risk factors for depression?



▶Sample Script:

Let's review the self-assessment tool developed by the National Council on Aging. Plan to complete this assessment at home when you have some free time.

→ Handout: Self-Assessment Checklist



Lonely/Isolated Now?

Stay Connected and Engaged

- Take stock of your networks and activities to evaluate what you can do to make more connections.
- Notice if it takes more effort to stay connected.
- Nurture and strengthen existing relationships.
- Stay physically active and include group exercise.
- Volunteer.



▶Sample Script:

Recognizing that you feel lonely/isolated or having trouble maintaining social connections that meet your needs is a signal that it is time to take serious action.

Talking with your primary care physician is an excellent first step.

Also, take stock of your networks and activities. They provide a clue as to what is going on with you.



Let's Talk: Depression

- Loneliness
- Factors
 Associated
 with
 Depression
- Social Isolation
- Alcohol or Drug Use
- Certain Medications
- Obesity



▶Sample Script:

Depression is more than just feeling sad or blue. It is a common but serious mood disorder that needs treatment. It causes severe symptoms that affect how you feel, think, and handle daily activities. For example, depression may cause you to sleep or eat too little or too much, drink inadequate fluids, or experience trouble with your volunteer or work commitments. When you have depression, you have difficulty with everyday life for weeks at a time. Doctors call this condition "depressive disorder" or "clinical depression."

Depression is a real illness. It is not a sign of a person's weakness or a character flaw. You can't "snap out of" clinical depression. Most people who experience depression need treatment to get better.

Remember that depression is a mental health/medical condition that is treatable.

Possible causes of depression include:

- Biological differences/physical changes to the brain
- Brian chemistry/neuro-transmitters
- Hormones/hormonal changes
- Inherited traits/genetic pre-disposition
- Trauma or stressful events
- History of other mental disorders
- Alcohol and/or drug abuse
- Certain medications or drug interactions

Depression: Health Risks



Untreated depression is associated with:

- ➤ Higher risk of death
- > Heart Disease
- > Stroke
- Cancer
- Diabetes
- > Alzheimer's Disease and other forms of dementia
- > Suicide
- > Insomnia
- > Rapid weight change



▶Sample Script:

Untreated depression is associated with a higher risk of death, heart disease, stroke, cancer, diabetes, Alzheimer's Disease and other forms of dementia, insomnia, rapid weight change, and suicide.

The Centers for Medicare and Medicaid Services (CMS) reports that one in six persons older than 65 suffers from depression.

Depression in older patients occurs in 25% of those with other physical illnesses.

Medicare Part B covers an annual depression screening. You do not nee to show signs of symptoms of depression to qualify for screening.

The screening must, however, take place in primary care setting, such as a doctor's office. This means that Medicare will not cover your screening if it takes place in an emergency reoom, skilled nursing facility, or hospital.

Depression Warning Signs

- Little interest or pleasure in doing things
- ☐ Feeling down, depressed or hopeless
- ☐ Trouble falling or staying asleep
- ☐ Feeling tired or having little energy
- Poor appetite or over-eating
- ☐ Feeling bad about yourself
- Trouble concentrating on things
- Moving or talking so slowly that others now notice
- ☐ Thoughts that you would be better off dead



▶Sample Script:

If any two of these conditions continue for two weeks or more, you may be experiencing depression:

- Little interest or pleasure in doing things
- Feeling down, depressed or hopeless
- Trouble falling or staying asleep
- Feeling tired or having little energy
- Poor appetite or over-eating
- Feeling bad about yourself
- Trouble concentrating on things
- Moving or talking so slowly that others now notice
- Thoughts that you would be better off dead

Depression in older adults may be difficult to recognize because they may show different symptoms than younger people. For some older adults with depression, sadness is not their main symptom. They may have other, less obvious symptoms of depression, or they may not be willing to talk about their feelings.



Depression and Suicide

- If you are thinking about harming yourself or attempting suicide, tell someone who can help immediately
- <u>Call 988</u>, the national hotline for suicide prevention and other mental health crisis situations. Trained staff people are standing by.
- Other Resources:
 - o Call 911 for emergency services.
 - Call the nearest hospital emergency room.
 - Call the toll-free, 24-hour hotline of the National Suicide Prevention Lifeline at 800-273-TALK (800-273-8255); TTY: 800-799-4TTY (4889).



▶Sample Script:

Suicide is a serious problem among older adults. Research tells us that suicide rates are particularly high among older men, with men ages 85 and older having the highest rate of any group in the country. Depression and other mental health problems, substance abuse, physical illnesses, disability, pain, and social isolation can cause people to complete suicide.

Suicide in older adults may be difficult to recognize. Some symptoms of suicide include:

- Drastic changes in behavior, including eating and sleeping habits
- Withdrawing from friends and previously enjoyable activities like hobbies, sports, and sex
- Social isolation
- Feelings of loss of a sense of purpose and independence
- Preparing for death by making a will or other final arrangements, including giving away prized possessions
- Preoccupation with death and dying
- Losing interest in personal appearance

If you are or someone you know may be thinking about attempting suicide, tell someone who can help immediately.

Handout: safeTALK Suicide insert



Self-Management Tool





▶Sample Script:

→ Handout: Zone Tool – Self-Management for Depression Ask everyone to fill it out.

This Self-Assessment Checklist will help you determine your level of risk of becoming socially isolated or lonely and whether you should take steps to expand your circles of connection and engagement.

The checklist includes space for you to write down the name and telephone number of your primary care physician.

Feeling L-SI-D: What are The Options?

- See a doctor: a doctor can diagnose depression and offer a care plan that fits you and your illness.
- See a therapist: After diagnosis, your doctor may recommend counseling with a judgement-free counselor who will help you cope with feelings you are not sure how to manage.
- Seek Resources: Reach out to local agencies for resources to help with symptoms of isolation and depression (Resource List provided).
- Stop smoking: Smoking is highly correlated with mental health conditions, including depression.
- Reach out to a friend: Meaningful human interaction can combat loneliness.
- Practice Mindfulness: Alternative practices-- such as relaxation techniques, meditation, and acupuncture - may help reduce symptoms of depression.



▶Sample Script:

Here are the options again in more detail:

- See a doctor:
 A doctor can diagnose depression and offer a care plan that fits you and your illness.
- See a therapist:
 After diagnosis, your doctor may recommend counseling with a judgement-free counselor who will help you cope with feelings you are not sure how to manage.
- Seek Resources:
 Reach out to local agencies for resources to help with symptoms of isolation and depression (Resource List provided).
- Stop smoking: Smoking is highly correlated with mental health conditions, including depression.
- Reach out to a friend: Meaningful human interaction can combat loneliness.
- Practice mindfulness:
 Alternative practices -- such as relaxation techniques, meditation, and acupuncture may help reduce symptoms of depression.

Continued

Ask Participants:

What steps can you take to stay connected and engaged?

Sometimes it takes effort to stay connected. These are some actions you may want to consider taking to stay connected:

- Nurture and strengthen existing relationships. Invite people over for coffee or call them to suggest a trip to a museum or to see a movie.
- Schedule a time each day to call a friend or visit someone.
- Meet your neighbors—young and old.
- Stay physically active.
- Eat a healthy diet.
- Find out about your transportation options.
- Use social media like Facebook to stay in touch with long-distance friends or write an old-fashioned letter.
- Stay physically active and include group exercises like joining a walking club.
- Take a class to learn something new and, at the same time, expand your circle of friends.
- Revisit an old hobby you've set aside, and connect with others who share your interests.
- Volunteer to deepen your sense of purpose by helping others.
- Visit your local community wellness or senior center and become involved in a wide range of exciting programs.
- Check out faith-based organizations for spiritual engagement, as well as participate in their activities and events.
- Get involved in your community by taking on a cause, such as making your community more age-friendly.



L-SI-D: Key Notes and Takeaways



WELLNESS AND RECOVERY ARE POSSIBLE.



NO MATTER HOW LONG A PERSON EXPERIENCES SYMPTOMS OF LONELINESS, SOCIAL ISOLATION OR DEPRESSION, PEOPLE CAN AND OFTEN DO RECOVER.



THERE ARE ALL KINDS OF INTERVENTIONS, TREATMENTS AND SUPPORTS AVAILABLE TO HELP.



YOU ARE THE KEY. TAKE RESPONSIBILITY FOR YOU!



▶Sample Script:

Remember:

Wellness and recovery are possible.

No matter how long a person experiences symptoms of loneliness, social isolation, or depression, people can and often do recover.

There are all kinds of interventions, treatments, and supports available to help.

You are the key. Take responsibility for YOU!



Resources

	Georgia Crisis & Access Line www.mygcal.com	800-715-4225
•	National Suicide Prevention Hotline	800-273-Talk
•	Emergency/Fire/Police	9-1-1
•	Veterans Crisis Line	800-273-8255
•	Fuqua Center for Late Life Depression	404-778-5526
٠	SAMSHA Treatment Locator Line	800-662-4357
	GeorgiaCares (for Medicare answers) 866	-552-4464
ı	Empowerline www.empowerline.org	404-463-3333



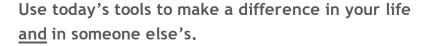
▶Sample Script:

- → Handouts: Mental Health Resources and Empowerline card.
- → Handout: Evaluation Survey
- → Ask if anyone has questions, or encourage them to talk to you in private after the presentation.

What's next?

Take out a pen and jot down some guick answers.

- What could you do the next time you feel lonely?
- If you know someone who is socially isolated, how can you help that person feel more connected?
- ➤ Whom will you contact if you or someone you care about may be experiencing depression?







▶Sample Script:

Take out a pen if you can and jot down some quick answers.

- ➤ What could you do the next time you feel lonely?
- ➤ If you know someone who is socially isolated, how can you help that person feel more connected?
- ➤ Whom will you contact if you or someone you care about may be experiencing depression?

Use today's tools to make a difference in your life and in someone else's.



Thank you for participating.

- For questions regarding this presentation, email volunteer@atlantaregional.org
- To learn more about Aging Well visitwww.Empowerline.org
- To find additional events visitwww.Empowerline.org/events
- To become a volunteer, visitwww.Empowerline.org/volunteer











▶Sample Script:

Thank you for taking the time to come to this presentation. I hope you learned some new information to help you handle loneliness, social isolation, depression, and suicide.

Before you leave today, we would appreciate it if you would please fill out this short Participant Feedback Form. The information learned from these evaluations helps us continually improve our program and presentations. Please be honest because your opinion counts!

Thank you again, and if you are interested in becoming an RSVP volunteer or helping with ARC in the future, please talk to me as we are always looking for more volunteers, and your skills are valued!