

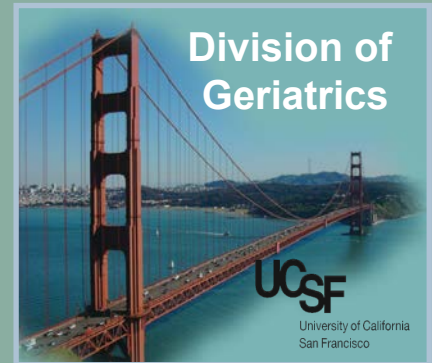
The Science Behind Social Connection in Older Age



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Associate Professor of Medicine

Amber Carroll
Director, Well Connected

June 2018



Learning Objectives:

- Review the concepts of loneliness and social isolation
- Describe the effects of loneliness and connections on health
- Discuss framework for maintaining connections and addressing loneliness

Understanding Health Risks

Understanding Health Risks

- You are an 80 year old woman with the following:
 - Recent falls
 - Concerns regarding finances
 - Multiple medications (polypharmacy)
 - Lives alone
 - Hypertension
 - Smokes
 - Hasn't seen a doctor in 15 years

Understanding Health Risks

If you were the health care provider, or Social Worker, what would you focus on?

1. Living alone
2. Financial insecurity
3. Hypertension
4. Polypharmacy
5. Falls
6. Smoking

FALLS

- Every 19 minutes an adult age >65 dies
 - One in four adults fall each year

Hypertension

- 63% in people age >60
- Death rates: 14.3 per 1000

Is there a risk to Living ALONE?

Is The Risk of living alone different than the risk of being disconnected?



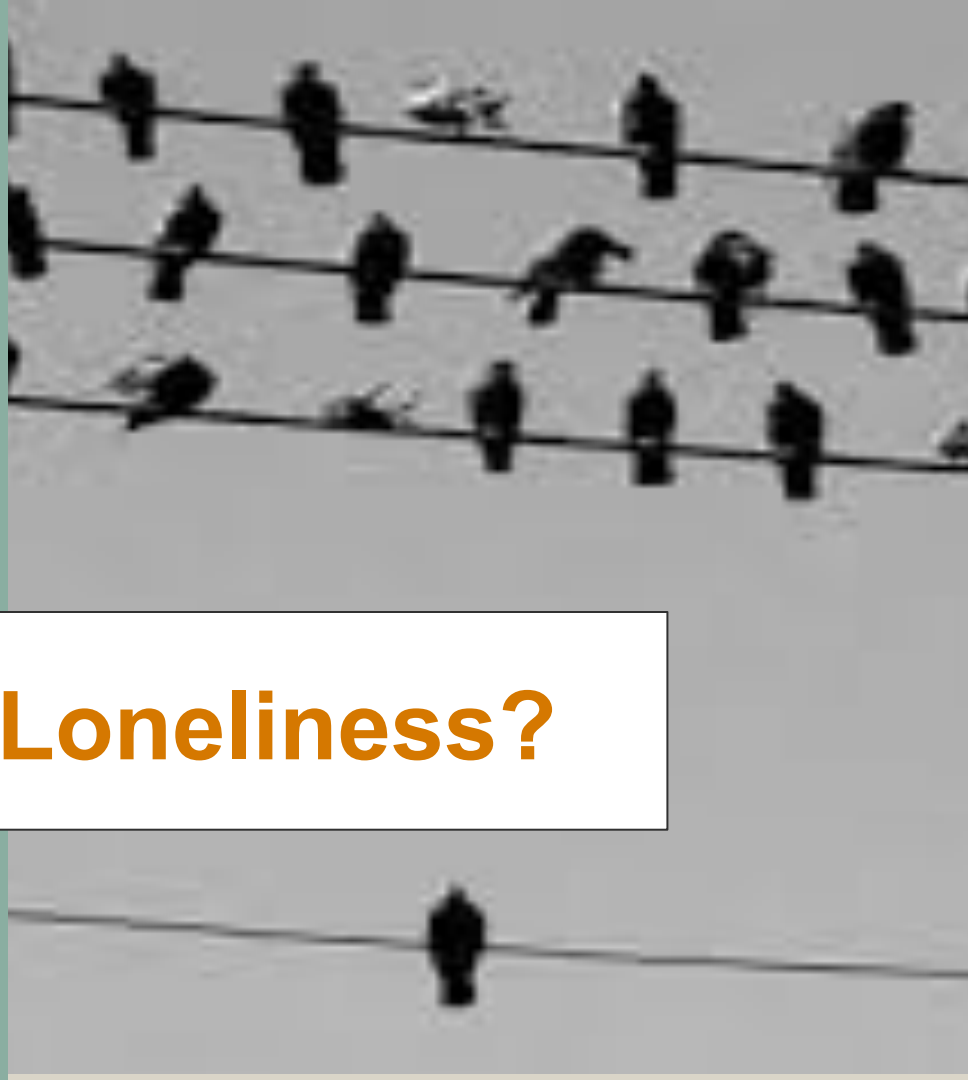
**If she is Alone and Disconnected,
what do you recommend?**



What is Disconnection?

Disconnection

- Aggregate term encompassing distinct concepts:
 - Loneliness
 - Social Isolation
 - Social Connection



What is Loneliness?

Loneliness Defined

- Loneliness is the *subjective* feeling of being alone
- “the **distress** that results from discrepancies between ideal and perceived social relationships.”

Social Isolation Defined



- Relates to a *quantifiable* number of relationships
- Social isolation refers to a complete or near-complete lack of contact with society

Loneliness and Social Isolation

- Social isolation by itself does not account for the *distress* that a person subjectively may feel

Myths about loneliness

- It is a normal part of aging
- It is synonymous with depression
- It cannot occur if you live with others and have friends
- It does not exist in married couples
- It will go away if you join a social group



World-Wide Recognition of Social Isolation

The growing issue of social isolation (and loneliness) has been **recognized** by the World Health Organization **as a determinant of health.**



**Could there be
(unmeasured)
loneliness in our
community affecting
our health?**

Where I live....

- San Francisco has the highest proportion of seniors and adults with disabilities of any urban area in the state



*20,000 are living alone (19%)

- We are diverse and we are immigrants



What challenges do you think **LGBT**
people face as they get older?

How can we identify loneliness?



Loneliness Screening

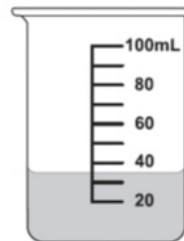
3-item Loneliness Scale:

Question	Hardly Ever	Some of the Time	Often
1. I feel left out	1	2	3
2. I feel isolated	1	2	3
3. I lack companionship	1	2	3

Max score 9: higher score=more lonely

Screening for Social Isolation

- NO “gold Standard”
- Multiple different measurement tools
 - All scales have benefits and drawbacks
 - Most developed for research purposes
 - Little validation for their clinical use
 - Some of the most commonly used:
 - Lubben Social Network Scale
 - Duke Social Support Index (DSSI)
 - De *Jong* Gierveld *Loneliness* Scale
 - Cornwell



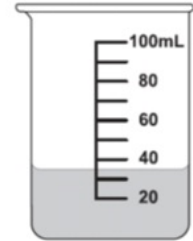
Composite Measures of Connection

-Includes structural, functional
and qualitative domains

How do we measure this?

Why else does it matter?

- Interventions for different aspect of disconnections may be different
- For the health care provider and from a public health perspective, we need a concept that can be understood and that provider can feel comfortable asking about
 - Comparable examples:
 - GAD-7 (Anxiety)
 - PHQ-9 (Depression)
 - AUDIT-C (Alcohol use)



Effects of Loneliness on Health

Variables Examined:

Characteristic		Lonely (N = 693)	Not Lonely (N= 911)	P-value*
Demographics	Age (mean, SD)	71.3 ± 7.9	70.5 ± 7.2	0.041
	Age Category, %			
	60-65	29.0	30.5	0.062
	65-75	42.0	45.7	
	>75	29.0	23.8	
	Female, %	67.1	53.5	<0.001
	Ethnicity, %			
	White	76.2	85.8	<0.001
	Black	14.7	8.6	
	Hispanic	7.8	4.8	
	Other	1.3	0.8	
	Married or Partnered	62.5	83.9	<0.001
SES Measures	<HS education, %	26.8	19.0	<0.001
	Income, median (IQR)	28K (16K – 46K)	39K (24K – 65K)	<0.001**
	Net worth, median (IQR)	147K (46K – 375K)	245K (88K – 554K)	<0.001**
	Working for pay, %	19.1	28.4	<0.001
Living Arrangements	Living in Urban Area, %	66.6	70.9	0.065
	Living Alone, %	26.7	10.5	<0.001

Results

Table 2: Incidence of Outcomes in Lonely vs Not Lonely Subjects

Functional Measure	Eligible for outcome	Outcome Frequency		Unadjusted RR/HR (95% CI)	Adjusted ^a RR/HR (95% CI)
		Lonely	Not Lonely		
ADLs	1233	24.8%	12.5%	1.98 (1.55, 2.53)	1.59 (1.23, 2.07)
Upper Extremities	1166	41.5%	28.3%	1.47 (1.25, 1.72)	1.28 (1.08, 1.52)
Tasks					
Mobility	1114	38.1%	29.4%	1.30 (1.10, 1.53)	1.18 (0.99, 1.41)
Climbing	1062	40.8%	27.9%	1.46 (1.23, 1.73)	1.31(1.10, 1.57)
Death ^b	1604	22.8%	14.2%	1.70 (1.35, 2.15)	1.45 (1.11, 1.88)

Study Conclusions:

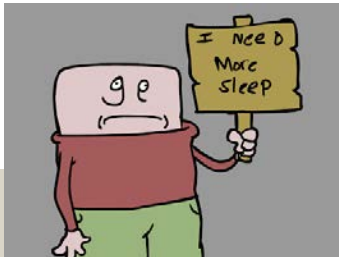
- **Loneliness is common**
- **It is an independent predictor of functional decline**
- **It is an independent predictor of death**

POTENTIAL MECHANISMS

Loneliness



WEAR AND TEAR



Other Results:

- Original Investigation|July 23, 2012
- **Living Alone and Cardiovascular Risk in Outpatients at Risk of or With Atherothrombosis**



Jacob A. Udell, MD, MPH; et al.

Arch Intern Med. 2012;172(14):1086-1095. doi:
10.1001/archinternmed.2012.2782.

“Loneliness Is Associated with Frailty in Community-Dwelling Elderly Adults”



Images and titles courtesy of Clinical Frailty Scale Geriatric Medicine Research, Dalhousie University, Halifax, Canada

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– JAGS March 2015

Alzheimer's and Loneliness

Research

JAMA Psychiatry | [Original Investigation](#)

Association of Higher Cortical Amyloid Burden With Loneliness in Cognitively Normal Older Adults

Nancy J. Donovan, MD; Olivia I. Okereke, MD, SM; Patrizia Vannini, PhD; Rebecca E. Amariglio, PhD; Dorene M. Rentz, PsyD; Gad A. Marshall, MD; Keith A. Johnson, MD; Reisa A. Sperling, MD

IMPORTANCE Emotional and behavioral symptoms in cognitively normal older people may be direct manifestations of Alzheimer disease (AD) pathophysiology at the preclinical stage, prior to the onset of mild cognitive impairment. Loneliness is a perceived state of social and emotional isolation that has been associated with cognitive and functional decline and an increased risk of incident AD dementia. We hypothesized that loneliness might occur in association with elevated cortical amyloid burden, an in vivo research biomarker of AD.

OBJECTIVE To determine whether cortical amyloid burden is associated with greater loneliness in cognitively normal older adults.

DESIGN, SETTING, AND PARTICIPANTS Cross-sectional analyses using data from the Harvard Aging Brain Study of 79 cognitively normal, community-dwelling participants. A continuous, aggregate measure of cortical amyloid burden, determined by Pittsburgh Compound B-positron emission tomography (PIB-PET), was examined in association with loneliness in linear regression models adjusting for age, sex, apolipoprotein E ϵ 4 (APOE ϵ 4), socioeconomic status, depression, anxiety, and social network (without and with the interaction of amyloid and APOE ϵ 4). We also quantified the association of high amyloid burden (amyloid-positive group) to loneliness (lonely group) using logistic regression, controlling for the same covariates, with the amyloid-positive group and the lonely group, each composing 32% of

[Invited Commentary](#)
page 1237

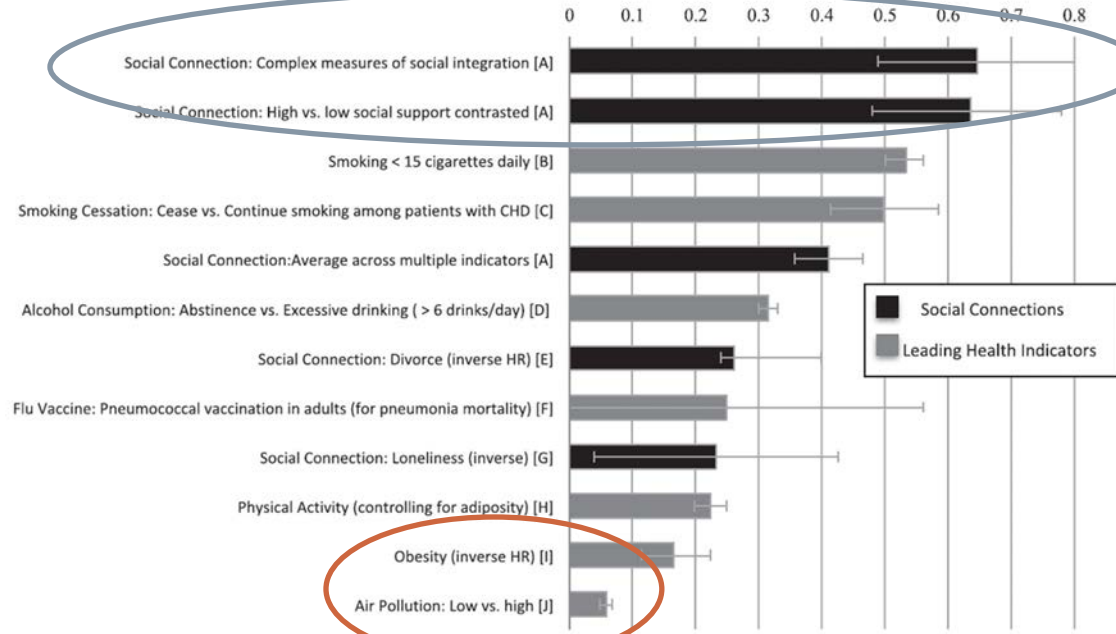
[Supplemental content at](#)
[jamapsychiatry.com](#)

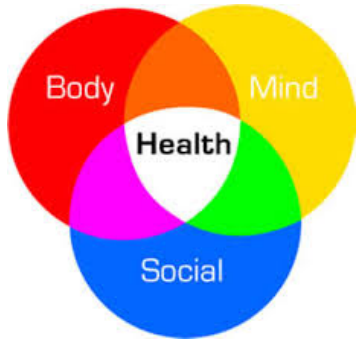
The Power of Social Connections

- Scientific evidence shows that being embedded in high-quality close relationships and feeling socially connected to the people in one's life is associated with **decreased risk for all-cause mortality as well as a range of disease morbidities**
- **Holt-Lundstad APA 2017**

Social Connection Compared to Other Health Risks

A Comparison of Decreased Mortality across Social Connection and Leading Health Indicators





Social Connection
=
Health Protections



Bottom Line

- Loneliness and Isolation is as dangerous as smoking 15 cigarettes a day

#Loneliness is the new smoking



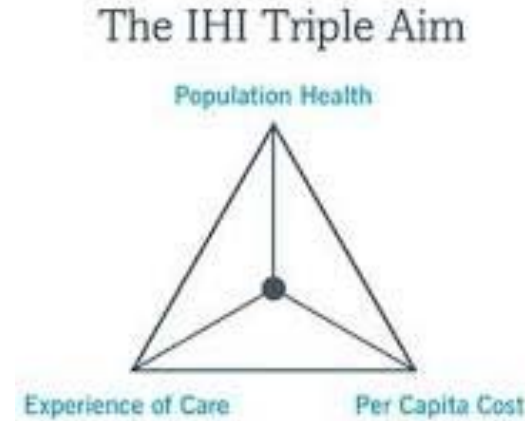
Are We Missing Ways to help prevent loss of independence and death?


Implications for Health Care



Current Topics in Health Care

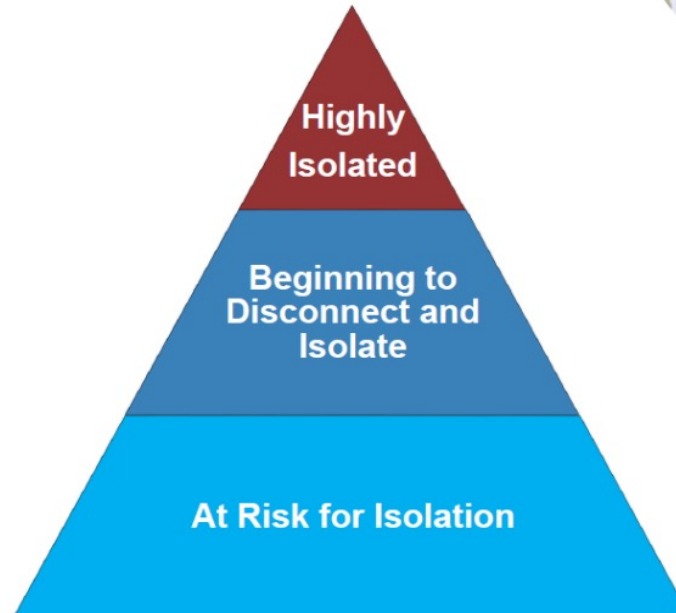
- The triple aim
 - Lower Cost
 - Population Health
 - Higher Quality



- 
- This is an opportunity to focus on what really matters to people in health and focus on the “social determinants of health”

Where are we on the spectrum of risk?

A Pyramid of Vulnerability:
Potential Healthcare Engagement

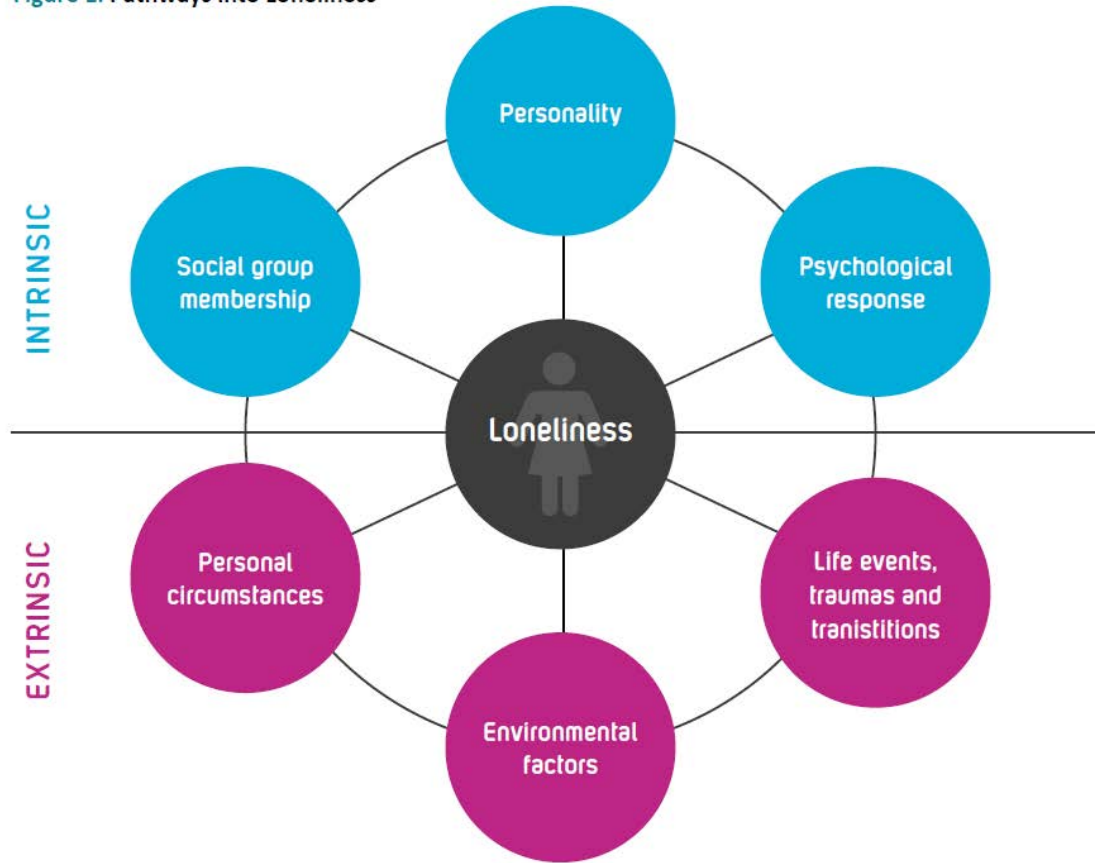


Slide: Nobel, J
2017

Loneliness is a Warning Sign

- Find our group
- Reconnect with others
- We track our lives in many ways (iwatch; fitbits, fitnesspal) But we do not do the same for our connections with others in a way that is meaningful (Holt-Lundstad).
- But there's no “device” to keep track of our attachments.

Figure 1: Pathways into Loneliness



Population Level

- Primary Prevention: Identify those at risk for loneliness and Isolation
 - Women, lower SES, older, LGBT
- Secondary Prevention: decrease the consequences for those who are lonely and or isolated
 - Requires screening
 - Knowing which interventions work

The Public Health Perspective

- The study of loneliness expands our focus to social-determinants
- THE CHALLENGE:
 - Social and emotional influences don't show up easily on blood tests or xrays

Cacciopo 2008

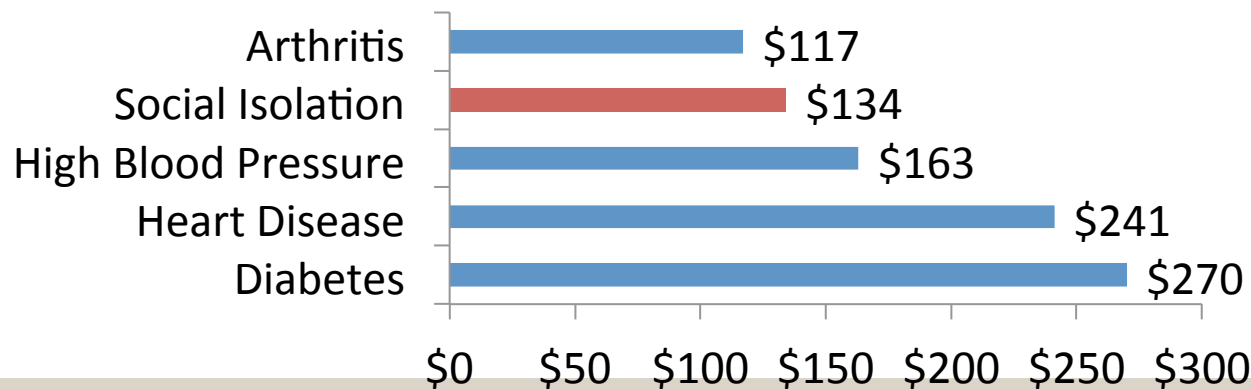
The Costs of Loneliness and Isolation

**Social isolation
increases Medicare
costs by at least
\$6.7 billion every
year.**



Cost of Social Isolation is Comparable to Cost of Certain Chronic Conditions

**Additional Monthly Cost to Medicare Due
to Social Isolation and Selected Chronic
Conditions**



Public Messaging and Public Health

Media Coverage and Beyond

NAVIGATING AGING

Like Hunger Or Thirst, Loneliness In Seniors Can Be Eased

By [Judith Graham](#) | May 18, 2017



Harvard
Business
Review

THE
BIG
IDEA

BY VIVEK MURTHY

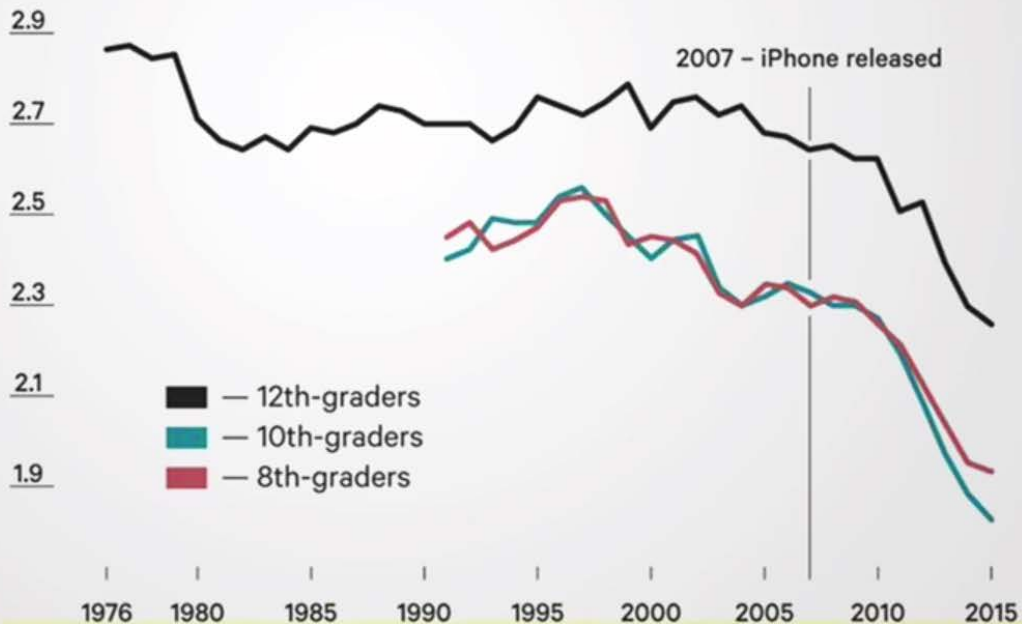
WORK AND THE LONELINESS EPIDEMIC

Reducing isolation at work is good for business.

➔ THE LINEUP

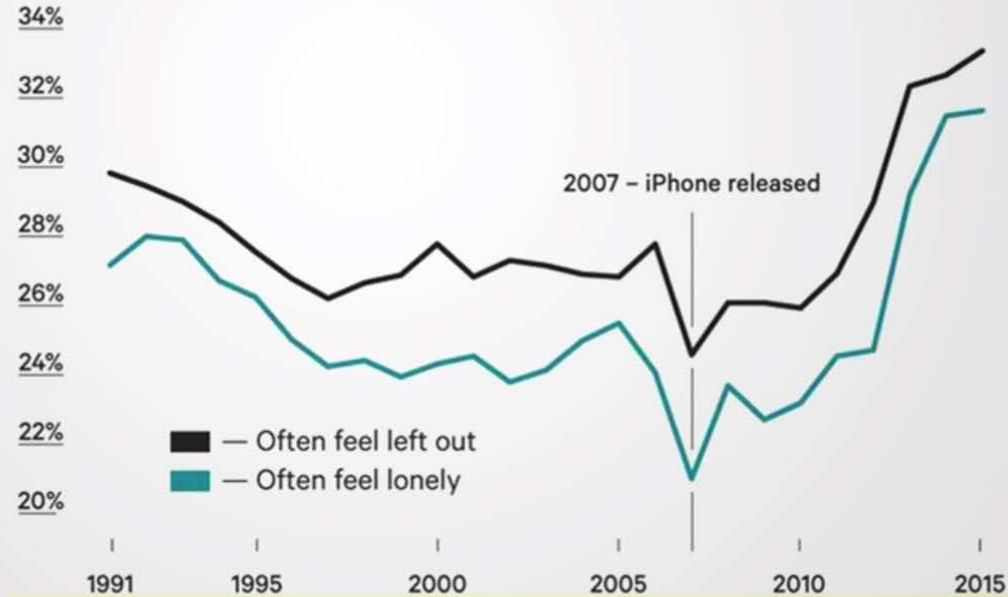
Not Hanging Out With Friends

Times per week teenagers go out without their parents



More Likely to Feel Lonely

Percentage of 8th-, 10th-, and 12th-graders who agree or mostly agree with the statement "I often feel left out of things" or "A lot of times I feel lonely"

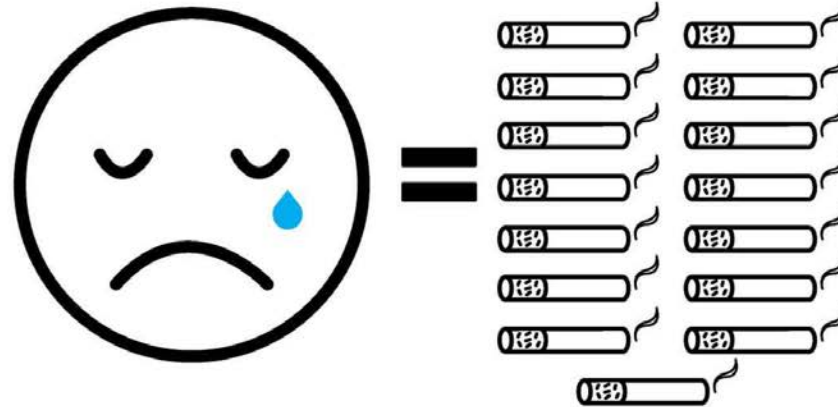




u.s.surgeongeneral

...

#ScienceAlert:
**Social isolation is as bad for
your health as smoking.**



source: Holt-Lunstad, 2015 & 2010

WHAT YOU CAN DO NOW: Assess Risk

For Patients, Families, Health Care Providers and Researchers

“If you want to go fast,
go alone. If you want
to go far, go together.”

~African Proverb, quoted in
“Loneliness” John T. Cacioppo and William Patrick

Spectrum of Risk:

A Pyramid of Vulnerability: Potential Healthcare Engagement



- Individualized health and social strategies
- Establish linkages to community services
- Be sensitive to mental health co-morbid conditions
- Close partnering with caregivers
- Other?

**Highly
Isolated**

- Recognize as a serious health risk
- Promote “early identification” of those at risk
- Include in “Patient-centered care” models
- Coordinate with and inform caregivers
- Other?

**Beginning to
Disconnect and
Isolate**

- Understand risk factors
- Promote risk factor mitigation
- Identify and support caregivers
- Promote broader social dialog
- Other?

At Risk for Isolation

Management of Loneliness

- Complex because of the complex ways people become lonely
- General approach
 - Improve social skills
 - Enhance social support
 - Increase opportunities for social interactions
 - Address maladaptive social cognition



The Framework



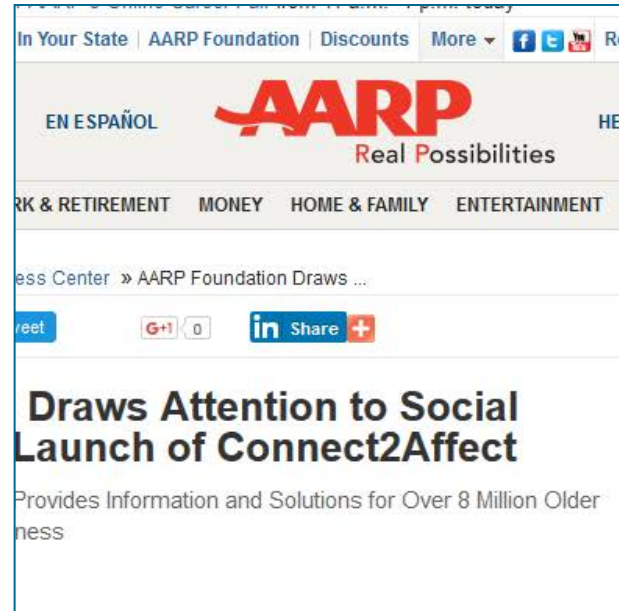
- Improve social skills
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- Address maladaptive social cognition

1. Talk about Loneliness



- **Improve social skills**
- Enhance social support
- Increase opportunities for social interactions
- **Address maladaptive social cognition**

**Awareness→Outreach
→Impact**



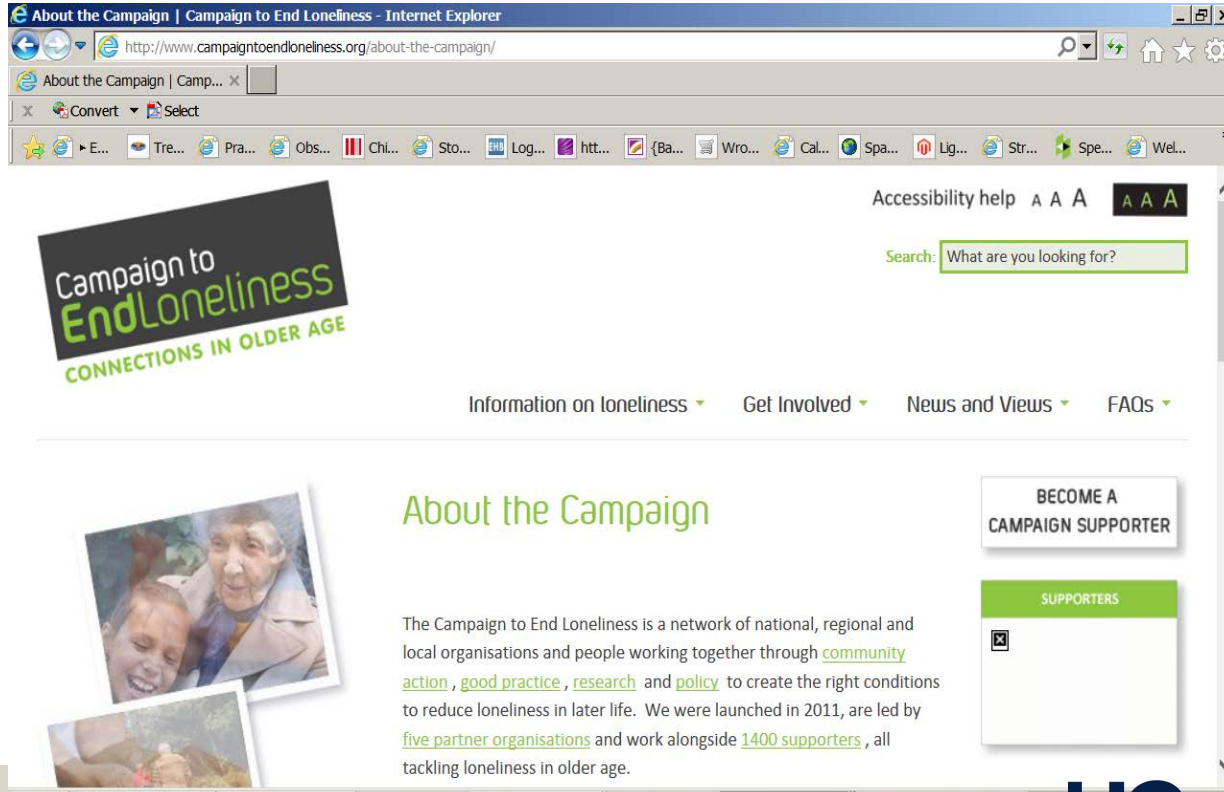
Medicare Can Lead



Require Screenings in the Medicare Program

- Use Welcome to Medicare and Annual Wellness Visits to identify people who are socially isolated.
- Screeners should connect people to evidence-based interventions.
- The private sector is likely to follow Medicare's lead.

Individual, Local, National and International Outreach



U.K. Appoints a Minister for Loneliness

By CEYLAN YEGINSU JAN. 17, 2018



4
ARTICLES REMAINING

Britain's under secretary for sport and civil society, is to coordinate the government's
> ss. Stephen Pond/Getty Images for Sport England

RELATED COVERAGE



Researchers Confront an Epidemic of Loneliness SEPT. 5, 2016



PERSONAL HEALTH
The Surprising Effects of Loneliness on Health DEC. 11, 2017



THE NEW OLD AGE
Loneliness Can Be Deadly for Elders; Friends Are the Antidote DEC. 30, 2016



A Generation in Japan Faces a Lonely Death NOV. 30, 2017



HUMAN TOUCH
How Social Isolation Is Killing Us DEC. 22, 2016

Asking about loneliness:

- Be prepared for the answer
- Sometimes you just need to listen
- Questions:
- Do we need training on how to address loneliness?

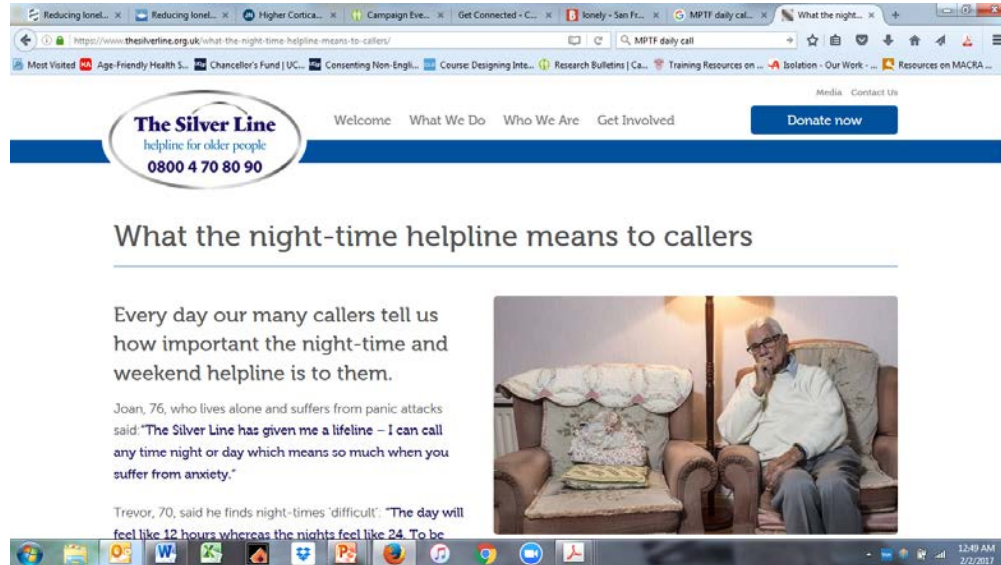
A Generation in Japan Faces a Lonely Death

Leer en español

By NORIMITSU ONISHI NOV. 30, 2017



Telephone Support



The screenshot shows a web browser window displaying the homepage of The Silver Line, a helpline for older people. The browser's address bar shows the URL <https://www.thesilverline.org.uk/what-the-night-time-helpline-means-to-callers/>. The website's header includes the logo for The Silver Line, the tagline "helpline for older people", the phone number "0800 4 70 80 90", and navigation links: "Welcome", "What We Do", "Who We Are", "Get Involved", and a "Donate now" button. The main content area features the title "What the night-time helpline means to callers" and a testimonial. The testimonial text reads: "Every day our many callers tell us how important the night-time and weekend helpline is to them." It then quotes Joan, 76, who lives alone and suffers from panic attacks, saying: "The Silver Line has given me a lifeline – I can call any time night or day which means so much when you suffer from anxiety." Below this, it quotes Trevor, 70, who finds night-times 'difficult', saying: "The day will feel like 12 hours whereas the nights feel like 24. To be". To the right of the text is a photograph of an elderly man with glasses, wearing a white shirt and grey trousers, sitting in a patterned armchair and resting his chin on his hand. The browser's taskbar at the bottom shows various application icons and the system clock indicating 12:40 AM on 2/2/2017.

The Silver Line
helpline for older people
0800 4 70 80 90

Welcome What We Do Who We Are Get Involved [Donate now](#)

What the night-time helpline means to callers

Every day our many callers tell us how important the night-time and weekend helpline is to them.

Joan, 76, who lives alone and suffers from panic attacks said: "The Silver Line has given me a lifeline – I can call any time night or day which means so much when you suffer from anxiety."

Trevor, 70, said he finds night-times 'difficult': "The day will feel like 12 hours whereas the nights feel like 24. To be

Finding a Connection

by Health... | Chancellor's Fund | U... | Continuing non-credit... | Counsel, designing inte... | Research builds | U... | Training resources on... | Solution - U...

95 | **MPTF**
95 years in a supporting role

[LOGIN / REGISTER](#)

[DONATE!](#)

to ilable

Frank Fassnacht enjoys golfing whenever he gets a chance.
[CLICK TO READ MORE.](#)

Elder Connection
call 323-634-3866

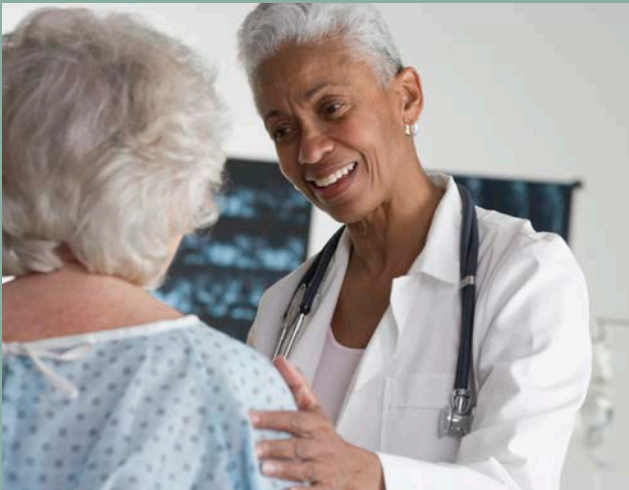
Are you eligible?
Sometimes different MPTF programs come with different

If YOU'RE OVER 65, we've got you covered. Whether you're looking for assistance in living on your own or want to continue your education, we can help you find the support you need to enrich your life.

MPTF has six health centers in the Los Angeles area and we're especially attuned to the needs of our senior community. Learn more in our [Healthcare](#) section.

Photo

2. Involve the Health Care Community



- Improve social skills
- **Enhance social support**
- Increase opportunities for social interactions
- **Address maladaptive social cognition**

Translating theories and implementing interventions

- There are many existing programs
- Most have not been evaluated
- Without evaluation it is difficult to know what to scale, and what to promote or what to Rx
 - Telephone intervention
 - In person
 - Group
 - Individual
 - Therapy related



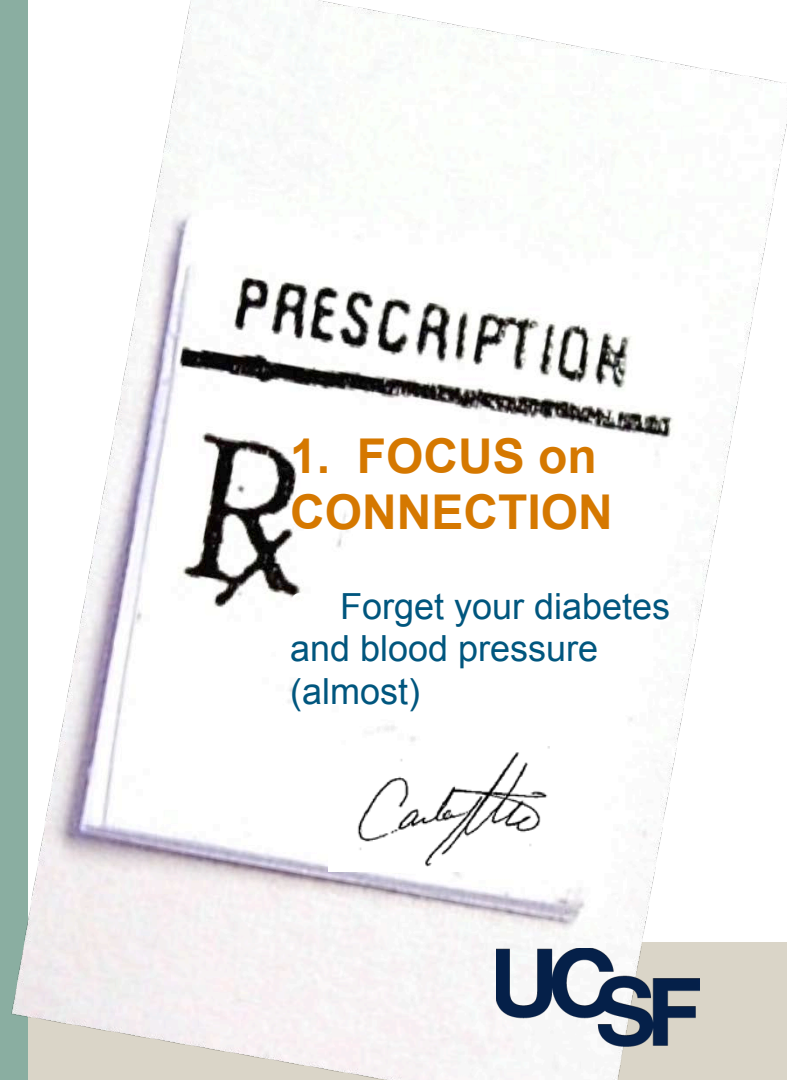
UCSF

My Social Prescriptions

There are many existing programs
Most have not been evaluated

Without evaluation it is difficult to know:

- what to scale
- what to promote
- what to Rx
- Understand what the intervention is targeting



3. Look to Our Communities

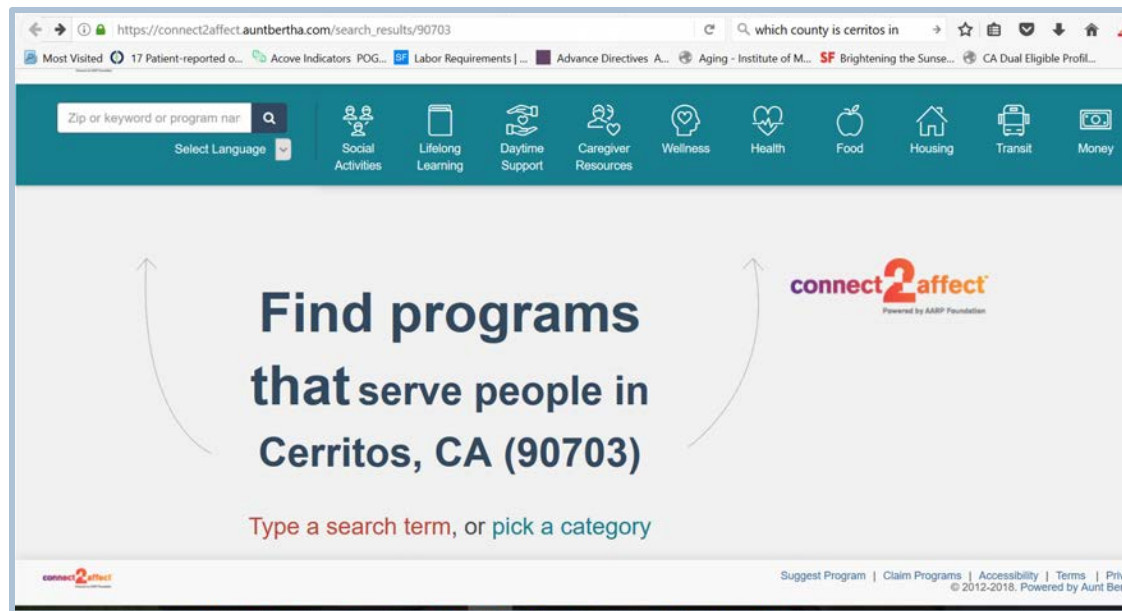


- Improve social skills
- **Enhance social support**
- **Increase opportunities for social interactions**
- Address maladaptive social cognition



EXPAND YOUR CIRCLES
Prevent Isolation and Loneliness As You Age

The Role of community: Finding resources



Resources in Your Area

- ADRC's
- Faith Communities
- Community Centers
- Senior Centers
- Veterans Administration
- OTHERS?



4. Making and Reinforcing Connections



- **Improve social skills**
- Enhance social support
- Increase opportunities for social interactions
- **Address maladaptive social cognition**

Increasing Connections

 **Institute on Aging**

Search 

[Blog](#) | [Services for Elders and Care Givers](#) | [Services for Adults with Disabilities](#) | [Elder Protection, Collaborations](#) | [Education, Training Expert Speakers](#) | [Giving](#)

Institute on Aging Blog

Compassion, Dignity, and Love:

Thoughtful Discussion on Senior Care and Lifestyle



[Institute On Aging Blog » Home Care » Aging and Mental Health: How The Friendship Line Supports Seniors](#)

Click to Watch Our Video 'Seniors Matter'



Aging and Mental Health: How The Friendship Line Supports Seniors Living at Home

 **Senior Center Without Walls**
An ESC Senior Resources Program

an award-winning community for seniors



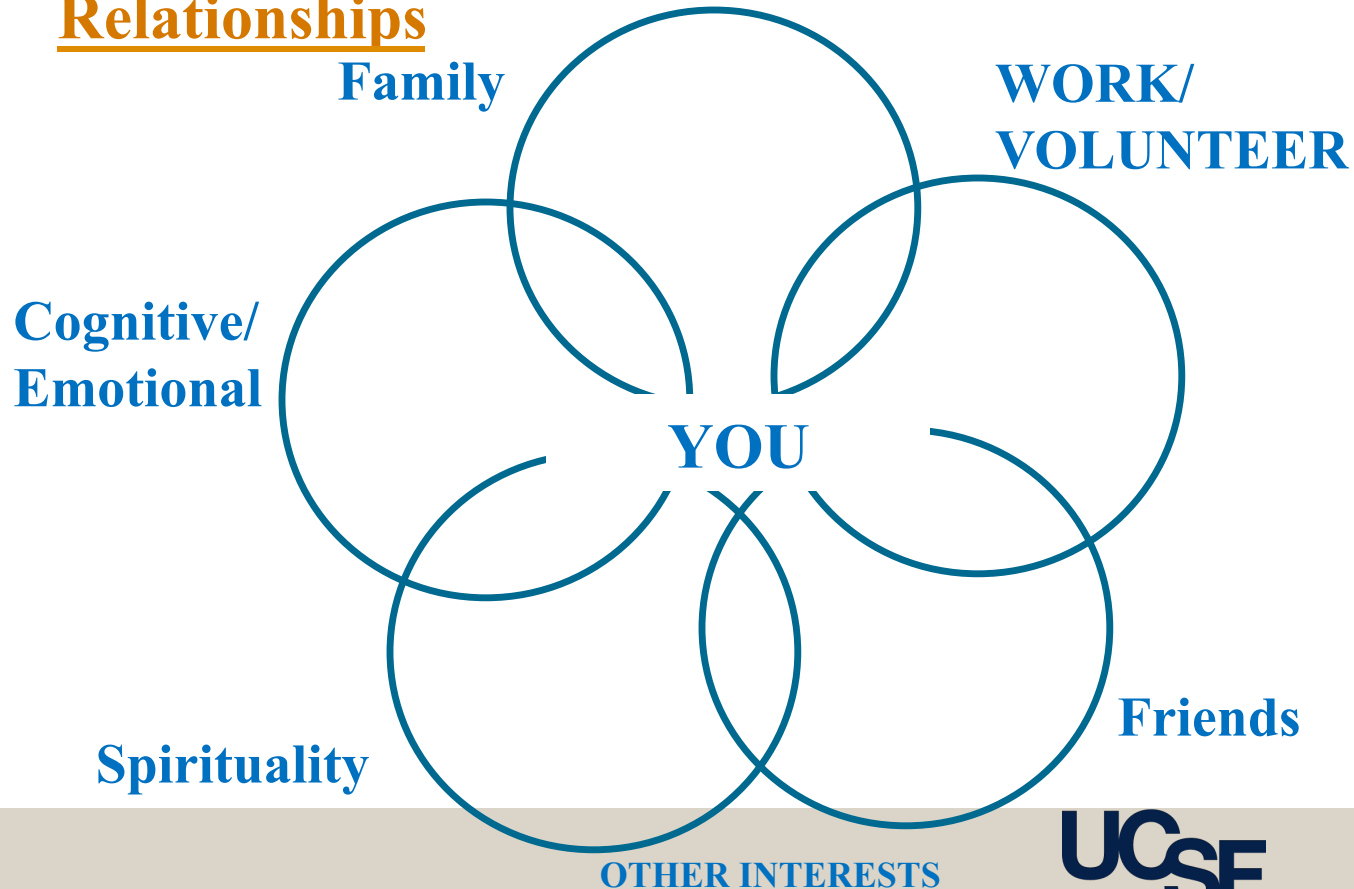
SPRING
2 0 1 7
April 10 – July 9
(877) 797-7299
scww@jtm-esc.org
seniorcenterwithoutwalls.org



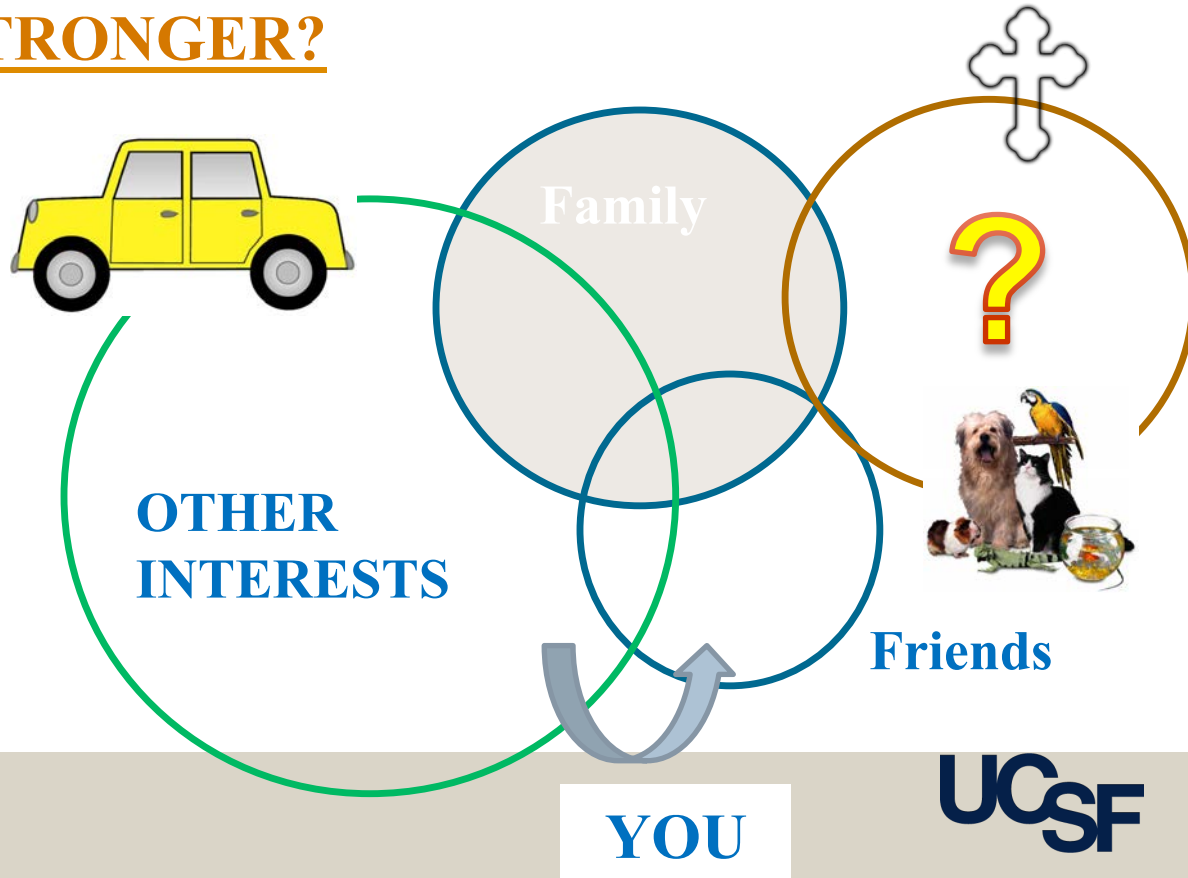




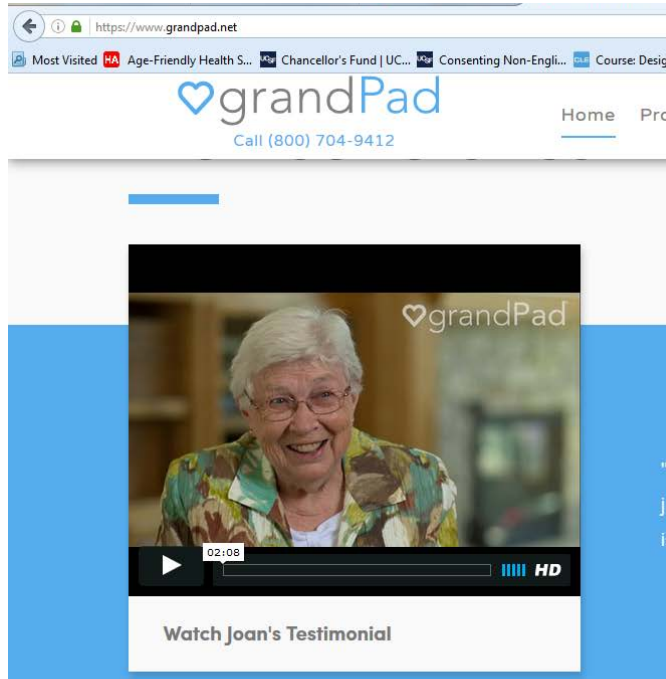
Where Do You Fit In? Who is in your web of Relationships



CAN YOU START TO FILL IN AND ADD Relationships OR MAKE SOME STRONGER?



Technology



Increase Social Connections → Protect your Health

5 Ways to Wellbeing



Take Home Points

- We need to be intentional about maintaining relationships
- Social connections can protect our health as much as loneliness and isolation decrease our health
- Unanswered questions:
 - What is the minimum contact we need?
 - What is a meaningful relationship?



In Summary:

Loneliness is:

- Common and affects our health and longevity
- May be more distressing than other conditions that affect our health

TALKING ABOUT LONELINESS is important

- We need to encourage health care organizations to focus on loneliness and isolation
- We need interventions evaluated so that health care providers can give evidence-based guidelines on prevention and treatment



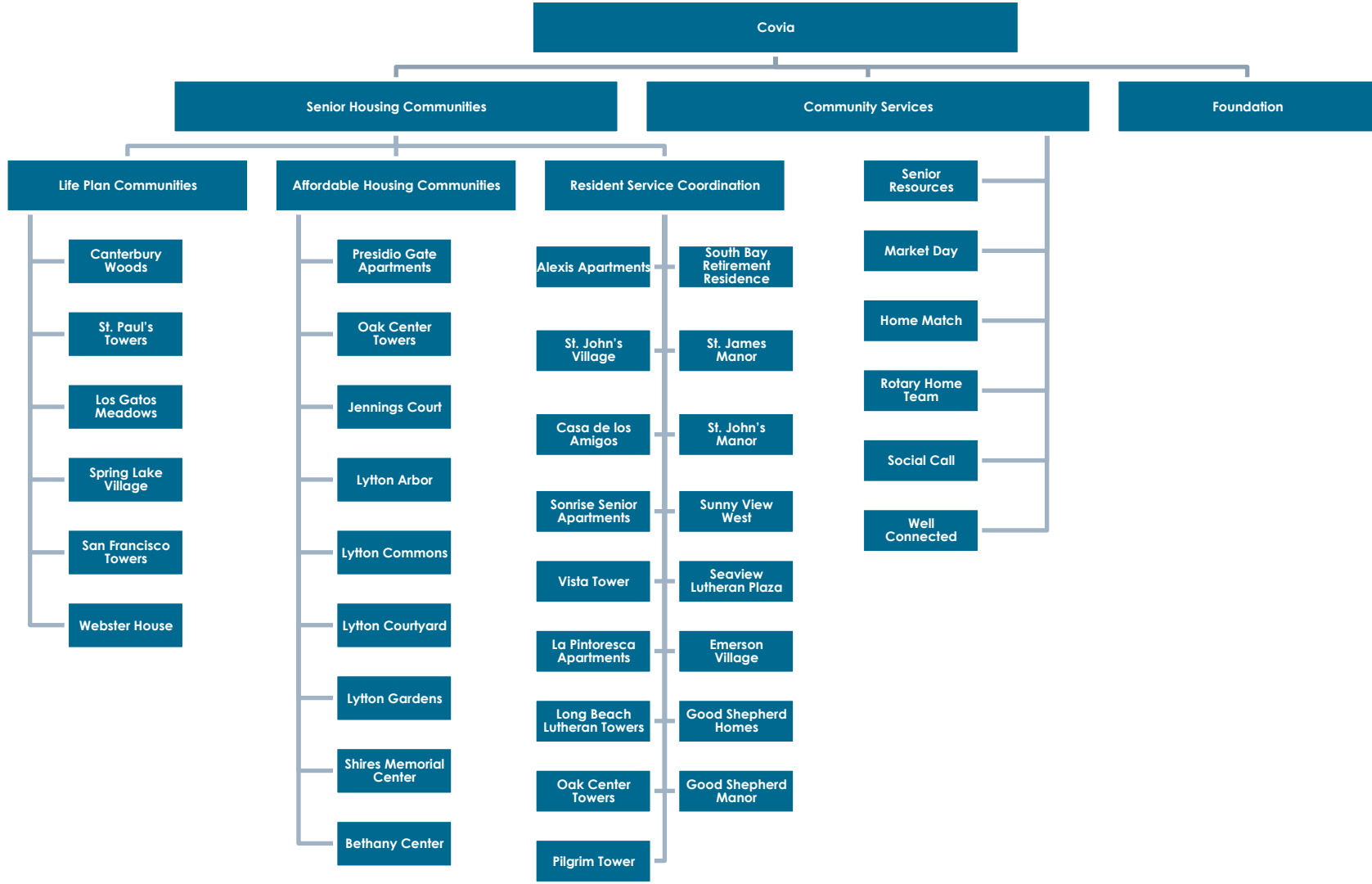
The Solutions Behind Social Connection in Older Age

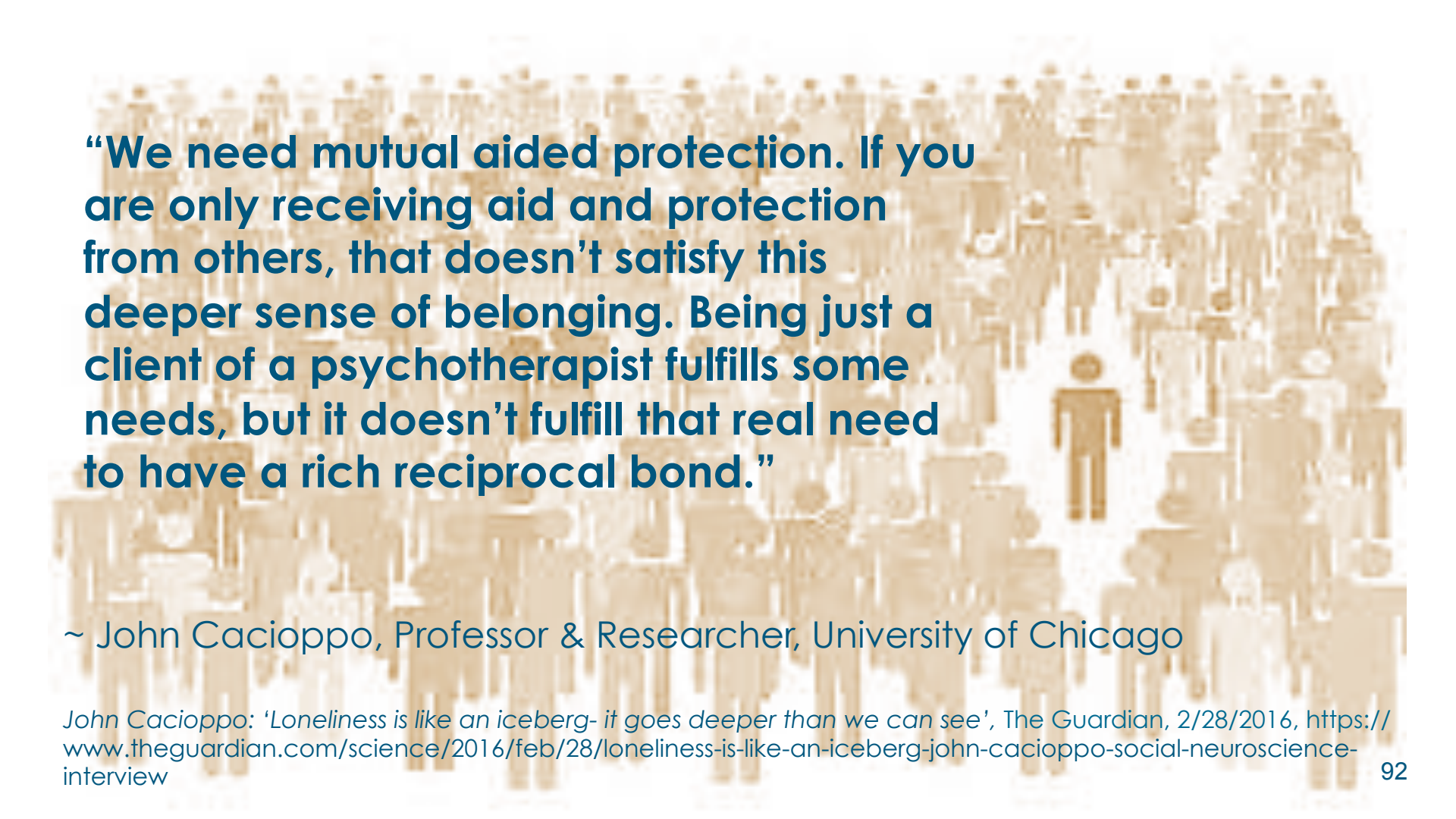
Presented by:

- Amber Carroll, Director, Well Connected and Social Call



Covia promotes positive aging by cultivating healthy and engaged communities with a continuum of innovative services that actively support intellectual, physical, emotional, spiritual, and social well-being.





“We need mutual aided protection. If you are only receiving aid and protection from others, that doesn’t satisfy this deeper sense of belonging. Being just a client of a psychotherapist fulfills some needs, but it doesn’t fulfill that real need to have a rich reciprocal bond.”

~ John Cacioppo, Professor & Researcher, University of Chicago

John Cacioppo: ‘Loneliness is like an iceberg- it goes deeper than we can see’, The Guardian, 2/28/2016, <https://www.theguardian.com/science/2016/feb/28/loneliness-is-like-an-iceberg-john-cacioppo-social-neuroscience-interview>

Covia Creative Aging Solutions

Senior Resource Directors

Alameda, Contra Costa, Los Angeles, Marin, Monterey, San Francisco, Santa Clara, Sonoma

Market Day

Alameda, Contra Costa, Los Angeles (in development), Marin, Monterey, San Francisco, Santa Clara, Sonoma

Home Match

Alameda (in development), Contra Costa (Concord), Marin, San Francisco

Rotary HOME Team

Alameda (Oakland), Contra Costa (Concord), Marin (Novato, San Rafael), Santa Clara, Los Angeles (in development)

Social Call

National

Well Connected

National

Connection Programs

Well Connected and Social Call are connection programs that aim to engage residents as participants and/or volunteers – all from the comfort of home!

- Participate in a group activity over the phone or online
- Receive one-on-one social visits (in-person or by phone) by a trained volunteer
- Facilitate a group activity over the phone or online
- Visit older adults in-person or by phone.

What is Social Call?

- A creative aging program of Covia
- Friendly visitor program by and for older adults
 - In-home visits are available in select California Counties
 - Phone visits are available throughout the United States.
- Friendly visitors are free to individual participants



Kaevallya
Well Connected Participant
and Facilitator

What is Well Connected?

- A creative aging program of Covia
- Phone & computer-based activities, education, friendly conversation, support groups, and presentations by and for older adults
- All activities are accessible by phone from the comfort of home
- Activities are free to individual participants



MON	TUE	WED	THU	FRI	SAT	SUN
Gratitude	Gratitude	Gratitude	Gratitude	Gratitude	Gratitude	Word Play
Advocacy Now	Cancer Support	Travel Sharing	Meditation	State of Well Connected	Bingo	Gratitude
Gratitude	Meditation	Coffee Break	Gratitude	Gratitude	Grief Support	Trivia
LGBTQ Chat	Introduction to Psychology and C.J Jung	Diabetes Support	Guided Imagery Meditation	Special Events	Pet Tales	Poetry
Socrates Café	Health & Wellness	Museums at Home	Living with Chronic Pain	Memorial Service	Mystery Melody	Meditation
Learning Spanish		Gratitude	Noggin Joggin'	Song Lyrics & Other Hysterics	Where Were You When?	Coffee Break
Deliberative Conversations	Gratitude	Across the Miles				Gratitude
	Support for the Blind	Low Vision Support	Read Aloud	Learning German For Beginners	Bird Talk	Picture My World
Meditation	Tall Tales	Poetically Speaking	Living with Vision Loss	Learning German Continued	Book Share	
Bible Reading	Personal Storytelling	Armchair Travel	Perfecting Our French	Learning German Continued	Story Time	Book Club
	All Request Music Hour			Meditation	Gratitude	Writing Workshop
		Meditation	Meditation	Three Oaks	Meditation	Conversations for Eclectic Minds
	Meditation	Sports Talk	Ungame Group		Keys to Joy	Meditation
	Perfecting Our French	Grief Support	Open Mic		Inspiring Stories	Keys to Joy
	Music's Memory Lane					Guided Imagery Meditation

Gratitude



How to Connect and Engage

- Decide how you'd like to engage.
- Contact us
- You will receive the information you need to:
 - Access group activities
 - Be connected to a friendly visitor
 - Volunteer



Janice
Well Connected Participant
and Facilitator and Social
Call Volunteer

Benefits of Connection Programs



Linnie
Well Connected Participant
and Facilitator

- Intellectual stimulation – 83%
- Social connections – 76%
- Improved mental health – 63%
- Improved physical health – 35%

What Can You Do?

- Ask/talk about loneliness and social engagement
- Join Well Connected and Social Call as a participant, or a volunteer
- Include Well Connected as a group activity
- Partner with Covia
- Join the annual Creative Aging Symposium



POWER TO CHANGE **CREATIVE AGING SYMPOSIUM**

January 23rd, 2019.

Keep an eye on CreativeAgingSymposium.org!

It works!

“I have had great experiences working with [Covia]. From referring my own patients, to being a guest speaker, I have seen first hand what this program can do to address feelings of loneliness. If there are any downsides, they are only that the program should be nationally recognized and known as a critical loneliness intervention.”

~ Carla Perissinotto, MD, MHS, UCSF Division of Geriatrics



Contact Us

For more information about Well Connected and Social Call:

coviaconnections@covia.org

(877) 797-7299

covia.org

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