LONELINESS & KUPUNA HEALTH

Lucas Morgan, Ph.D.

Licensed Psychologist

Kilolani Counseling

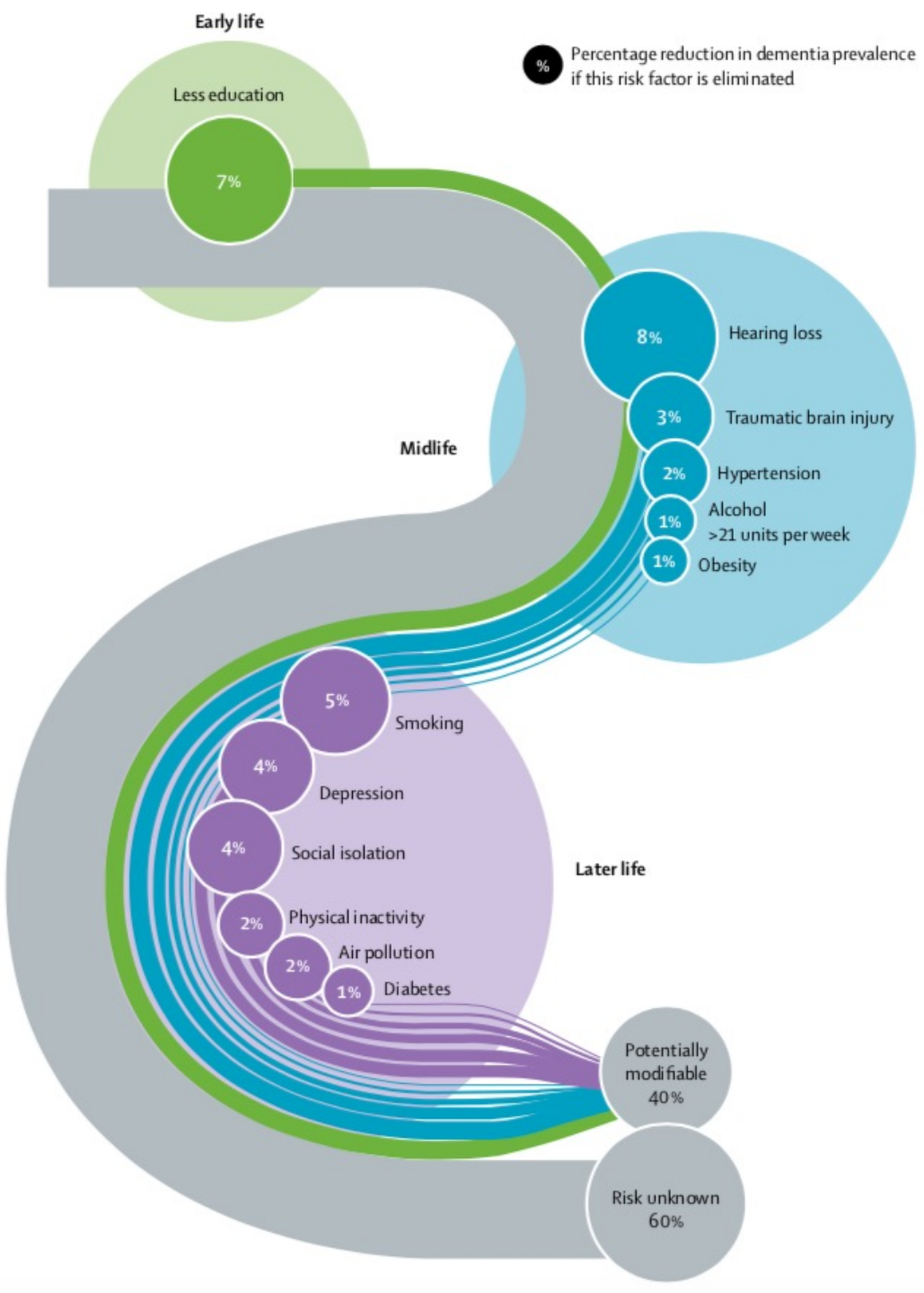
AGENDA

- Explore loneliness in older adults
- Identify challenges to social engagement
- Discuss interventions for loneliness

LONELINESS: AN EPIDEMIC

LONELINESS IN OLDER ADULTS

- Widely ranging prevalence estimates of loneliness in older adults: 25-47% (Ong et al., 2015; Perissinotto et al., 2012)
- Significantly increased due to COVID-19 pandemic
- Review of longitudinal studies looking at loneliness identified major risk factors in older adults (Dahlberg et al., 2022):
  - Not being married, partnered; partner loss: being divorced/widowed
  - Limited social network
  - Low perceived health, functional limitations
  - Low level of social activity
  - Depression/low mood, Anxiety
- Loneliness and social isolation have been found associated with
  - Poorer health behaviors
  - Poorer sleep
  - Poorer health, increased morbidity and mortality
  - Comparable in its negative effects on health with smoking cigarettes (Hold-Lunstad et al., 2010)
  - Dementia (Livingston et al. 2020) (next slide)


Early life
Less education
7%
Percentage reduction in dementia prevalence if this risk factor is eliminated
Midlife
8% Hearing loss
3% Traumatic brain injury
2% Hypertension
1% Alcohol >21 units per week
1% Obesity
5% Smoking
4% Depression
4% Social isolation
Later life
2% Physical inactivity
2% Air pollution
1% Diabetes
Potentially modifiable 40%
Risk unknown 60%

LONELINESS, SOCIAL ISOLATION, & DEPRESSION

- Overlapping but distinct constructs
- Loneliness: subjective experience
- Social isolation: few to no positive/close social relationships

MYTH ABOUT OLDER ADULTS AND DEPRESSION & LONELINESS

- **MYTH: "Depression & loneliness are a *normal* part of getting old"**
- False! Most older adults are not depressed
- Media portrays older adults as sad, lonely, isolated
- Doctors often believe the myth too, so don't try to treat what might be treatable
  - Your left knee hurts, you say it's your age. But does your right knee hurt too? It's just as old!
- This myth leads to lack of screening and treatment of older adults with actual depression
- AGE DOES NOT CAUSE DEPRESSION OR LONELINESS
- Older adults with depression are often treated only with medication and not evidence-based psychotherapy, even though
  - ***they benefit just as much from it as younger adults***
  - ***and often prefer counseling to taking more medications***

WHY IS YOUR PATIENT LONELY?

- Paring down of relationships over time
- Ageism (e.g., elderspeak)
- Barriers to increasing the number and quality of relationships and increase social interaction
  - It's tough to make friends!!
  - Shame, social anxiety
    - Older adults want to be liked just as much as kids, teens, and you!
    - My memory is too bad
    - I don't know what to talk about
  - Limited transportation: can't drive, Handi-Van takes hours, taxi/Uber too expensive
  - Fear of COVID and other illnesses
  - Aversion to other "old people" esp with disabilities and/or dementias; aversion to Day Programs (aka adult day care)
  - Married but in a very distant/bad relationship; stuck
  - Hates small talk
  - Senior groups are hard to find

INTERNALIZED AGEISM

- Self-stereotyping
  - belief that "senility," depr
    inevitable; leads to a "self
    useless, shameful, burden
  - Reduced self esteem; apa
  - If I believe depression is a
    likely to think it's treatable
- Health care providers can also have ageist beliefs without knowing it: "What do you expect? You're old."
- For more info check out: "This Chair Rocks: A Manifesto Against Ageism" by Ashton Applewhite

INTERVENTIONS TO REDUCE LONELINESS

- Ask about loneliness!
- Motivational interviewing for social engagement attempts
- Validation, validation, validation
- Tap into what they already do, or used to do, with others
- Ask single seniors about their interest in meeting a romantic partner; have they tried to meet people? How? Apps?
- Pets? (concerns about pet outliving them…)
- Help increase social network and social interaction
  - Senior groups
  - Increase family involvement
  - Adult day programs (aka "adult day care")
  - Religious community involvement
  - Adult courses
    - Osher Lifelong Learning Institute (OLLI)
- Mindfulness interventions
- Treat depression if it's there
- FACT: Our society is not built to facilitate social involvement for retired or differently abled people/older adults!
- Efforts to increase social connectedness as a public health priority in the US (Hold-Lunstad et al., 2017); UK has a Minister

ENGLAND: TACKLING LONELINESS FROM A SYSTEMS PERSPECTIVE

- Currently in 3rd year of governmental initiative to reduce loneliness in England
- An appointed "Minister of Loneliness"
- Research, funding for community social organizations
- developing "social prescribing": to recruit, train and support social prescribing "link workers" between institutions and community resources
- https://www.gov.uk/government/publications/loneliness-annual-report-the-third-year/tackling-loneliness-annual-report-february-2022-the-third-year

MAHALO!

- Questions?
- How do you address loneliness in your patients?
- drmorgan@kilolanicounseling.com

REFERENCES

- Dahlberg, L., McKee, K. J., Frank, A., & Naseer, M. (2022). A systematic review of longitudinal risk factors for loneliness in older adults. *Aging & Mental Health*, *26*(2), 225-249.
- Holt-Lunstad, J., Smith, T. B., & Layton, J. B. (2010). Social relationships and mortality risk: a meta-analytic review. *PLoS medicine*, *7*(7), e1000316.
- Livingston, G., Huntley, J., Sommerlad, A., Ames, D., Ballard, C., Banerjee, S., ... & Mukadam, N. (2020). Dementia prevention, intervention, and care: 2020 report of the Lancet Commission. *The Lancet*, *396*(10248), 413-446.
- Ong, A. D., Uchino, B. N., & Wethington, E. (2016). Loneliness and health in older adults: A mini-review and synthesis. *Gerontology*, *62*(4), 443-449.
- Perissinotto, C. M., Cenzer, I. S., & Covinsky, K. E. (2012). Loneliness in older persons: a predictor of functional decline and death. *Archives of internal medicine*, *172*(14), 1078-1084.