1

A COMMUNITY-BASED APPROACH TO ADDRESS SOCIAL ISOLATION AND LONELINESS

Fyzeen Ahmad, Project Blue Star
Angel Hight, CentraCare
Steve Hoover, Central Minnesota Council on Aging
Melissa Pribyl, CentraCare
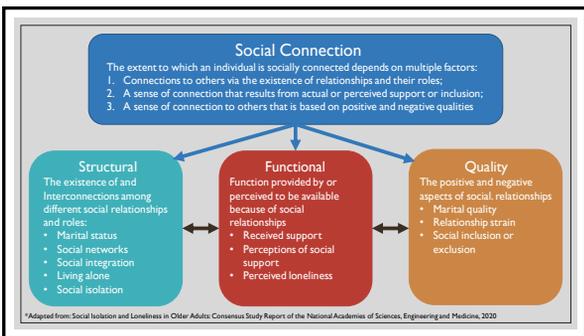Kylie Weller, Whitney Senior Center

2

OUR AFFILIATES & SPONSORS

3

Social Isolation and Loneliness

- Key Terms and Definitions:
  - **Social Isolation**: The *objective* lack of social contact with others.
  - **Loneliness**: The *subjective* perception of feeling lonely – of not having another person(s) with whom to have meaningful connection(s).
  - **Social Connection**: an umbrella term that encompasses aspects of aspects of how individuals connect to one another.

4

Social Connection
The extent to which an individual is socially connected depends on multiple factors:
1. Connections to others via the existence of relationships and their roles;
2. A sense of connection that results from actual or perceived support or inclusion;
3. A sense of connection to others that is based on positive and negative qualities

Structural
The existence of and interconnections among different social relationships and roles:
- Marital status
- Social networks
- Social integration
- Living alone
- Social isolation

Functional
Function provided by or perceived to be available because of social relationships
- Received support
- Perceptions of social support
- Perceived loneliness

Quality
The positive and negative aspects of social relationships
- Marital quality
- Relationship strain
- Social inclusion or exclusion

*Adapted from: Social Isolation and Loneliness in Older Adults: Consensus Study Report of the National Academies of Sciences, Engineering and Medicine, 2020

5

Health Impacts

- Existing research has shown isolation is associated with:
  - High blood pressure
  - Coronary artery disease
  - Obesity
  - Anxiety
  - Depression
  - Cognitive decline
  - Lower quality sleep
  - 50+% increased risk of developing dementia
  - 59% increased risk of functional decline
  - 26% increased risk of premature mortality

6

Slide 7

Impact on Health of Social Isolation and Loneliness

Social isolation significantly increases a person's risk of mortality from all causes, a risk that may rival the risks of smoking, obesity, and physical activity (Holt-Lunstad et al., 2017);

Being socially connected in a variety of ways is associated with having a 50 percent greater likelihood of survival, with some indicators of social integration being associated with a 91 percent greater likelihood of survival (Holt-Lunstad et al., 2010)

Social isolation has been associated with a 29% increased risk of all-cause mortality and a 25% increased risk of cancer mortality (Fleisch Marcus et al., 2017; Holt-Lunstad et al., 2015);

Loneliness has been associated with higher rates of clinical depression, anxiety and suicidal ideation (Beutel et al., 2017);

Loneliness has been associated with a 59% increased risk of functional decline and 45% increased risk of death (Parsinotto et al., 2012);

Poor social relationships have been associated with a 29% increased risk of incident coronary heart disease and a 32% increased risk of stroke (Valtorta et al., 2016a)

Loneliness among heart failure patients has been associated with a nearly four times increased risk of death, 68% increased risk of hospitalization, and a 57% increased risk of emergency department visits (Manemann et al., 2018); and,

Social isolation has been associated with an approximately 50% increased risk of developing dementia (Kuiper et al., 2015; Penninkilampi et al., 2018)

7

Slide 8

Pandemic Impact on Social Isolation and Loneliness

Summarizing the emerging research, Holt-Lunstad noted that loneliness has increased by 20 – 30% during the pandemic and the immediate effects of social isolation related to the pandemic have been observed in surges in mental health concerns, substance abuse and domestic violence.

Appearing in the Star Tribune, April, 2020:

"Although she did not die directly as a result of the corona virus, she was absolutely a casualty of the pandemic. The forced isolation and extreme loneliness resulting from the restrictions on visitors at her assisted living facility took her will to live."

8

Slide 9

Greater St. Cloud Coalition to End Social Isolation and Loneliness (CESIL)

◦ Conceptualized in 2021
◦ Created a Call to Action Jotform to solicit interest/membership
◦ Three levels of involvement
  ◦ Interested in actively participating in a workgroup with monthly meetings (N= 18).
  ◦ Interested in sharing opinion and/or feedback on activities or programs developed (N = 10).
  ◦ Interested in being updated on activities (N=7).
◦ Funded by a United Way Grant

9

Slide 10

Four Objectives of CESIL:

(1) Raise awareness of social isolation and loneliness as public health issues and programs to combat them.

(2) Create a research-driven knowledge base to support and inform the activities.

(3) Improve access to meaningful and culturally relevant resources and services.

(4) Advocate for public policy solutions that combat the root causes and adverse consequences of social isolation and loneliness.

10

Slide 11

Grant Activities

◦ Offer classes twice: Tai Ji, Mindful Presence, Aging Mastery, Health Coaching for Hypertension, Diabetes Prevention Program, Social Connect, Guided Autobiography
◦ Purchase and distribution of robotic pets (60+)
◦ Men's Health Series
◦ Created Greater St. Cloud Men's Shed
◦ Presentations: local service organizations, KNSI radio, Wilder Foundation panel (radio); MPR Interview.

11

Slide 12
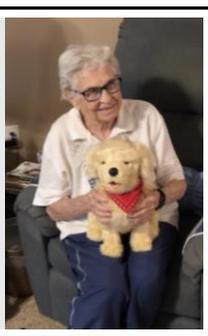
CentraCare™ Isolation Data
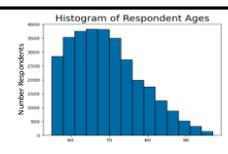
- From partnership with **CentraCare** (local healthcare system)
- Pulled from pre-appointment questionnaire and EMR
- Included adults ≥55 y.o., *all in Central MN*
- Data collected May 2020 – May 2022
- n = 30,989
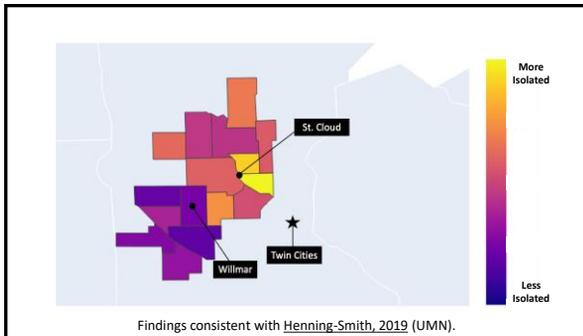- Recently finished collecting expanded dataset with measures for **individuals** 18+ (n=83,135)

Histogram of Respondent Ages

12

Slide 13:

Patient Background
- Age
- Primary Care Physician Department/Clinic Name
- Zip code
- Race (White, Black, Hispanic, Asian, Native American, Hawaiian/Pacific Islander)
- Ethnicity (Hispanic or non-Hispanic)
- Gender (M, F, X)
- Language (Many possibilities, primarily English)
- LGB (Heterosexual, Gay, Lesbian)

Health Conditions/Determinants
- Diabetes (Y/N)
- Depression (Y/N)
- Hypertension (Y/N)
- Tobacco Use (Y, N, Passive)
- Vape User (Y/N)
- COPD (Y/N)
- Congestive Heart Failure (Y/N)
- Alcoholism (Y/N)
- Active Care Coordination (Y/N)
- **Isolation (Y/N) – *modified* Berkman-Syme Social Network Index (SNI)** (Berkman & Syme, 1979)
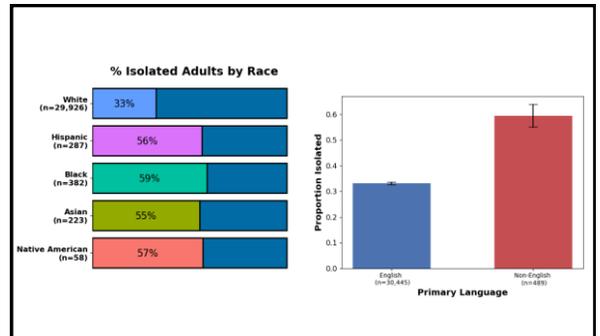
13

Slide 14:

Modified Berkman-Syme SNI =

- Patients receive 1 point for:
  - Being married or living together with someone in a partnership at the time of questioning
- Averaging 3 or more interactions per week with other people: assessed with the questions "In a typical week, how many times do you talk on the telephone with family, friends, or neighbors?" and "How often do you get together with friends or relatives?"
- Attending religious services 4 or more times per year
- Reporting that they participate in a club or organization such as a church group, union, fraternal or athletic group, or school group.
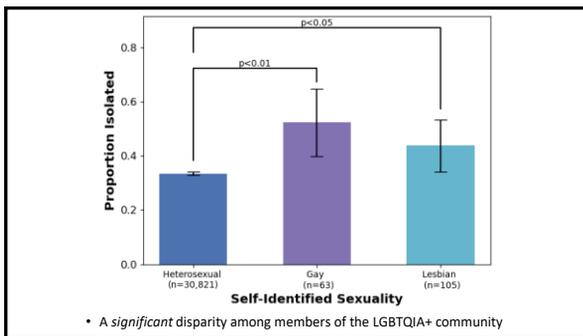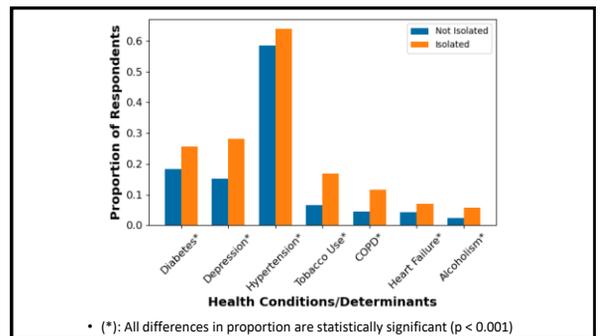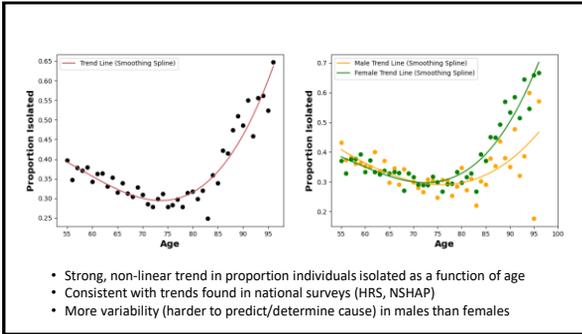- Score **< 3/4** was labeled as "isolated"

14

Slide 15:

Findings consistent with Henning-Smith, 2019 (UMN).

15

Slide 16:

% Isolated Adults by Race
- White (n=29,926): 33%
- Hispanic (n=287): 56%
- Black (n=382): 59%
- Asian (n=223): 55%
- Native American (n=58): 57%

16

Slide 17:

A *significant* disparity among members of the LGBTQIA+ community

17

Slide 18:

(*): All differences in proportion are statistically significant ($p < 0.001$)

18

- Strong, non-linear trend in proportion individuals isolated as a function of age
- Consistent with trends found in national surveys (HRS, NSHAP)
- More variability (harder to predict/determine cause) in males than females

19

Our Community Based Programs

20

Project Blue Star
www.projectbluestar.org

- A community-driven and evidence-based approach to addressing loneliness among **students and seniors**
- Students hold sessions that include music (making and listening), card making, origami, and *above all* **conversation** (Lee, 2016; Treiber, 2011)
  - To maximize meaningful connections, sessions are structured around guidelines for intergenerational programming (Drury, 2017)
  - Connects students and seniors on a regular (monthly) basis

21

Project Blue Star

- Building **connections** between the young and old
- Currently operates at large senior facilities in Central MN; Partnership with UMN CHAI to expand to Greater Twin Cities
- Limitations of this program:
  - Limited reach to community-dwelling seniors
  - Developing connections with BIPOC communities

22

BOUNCE BACK PROJECT™
promoting health through happiness
BOUNCEBACK**PROJECT**.ORG

23

What is Bounce Back Project?

Unique collaborative of physicians, nurses, healthcare leaders and community members

Single purpose – **to impact the lives of individuals, communities, and organizations by promoting health through happiness**

24

Bounce Back Project Tools

Purpose: to expand resilience by retraining our mind to focus on the positive, increase the feelings of well-being and decrease the feelings of depression

- Random Acts of Kindness
- Three Good Things
- Gratitude
- Social Connections
- Mindfulness and Self-Care
- Purpose
- Confidence and Adaptability

25

How has Bounce Back Project partnered with the community?

- Free community presentations (schools, business organizations, senior housing, faith groups, +)
- Collaborative grant opportunity with **RSVP** (Retired Senior Volunteer Program) to train volunteers to use Bounce Back Project's resiliency message for their "Happiness in Action" campaign and related service projects
- Free community event in collaboration with local school districts focused on families, connection, and mental well-being
- Internal presentations to CentraCare staff and leaders who live and work in our local communities of central MN
- More information: **bouncebackproject.org**

26

Whitney *Senior Center*
WSC

27

Mission

Whitney Senior Center (WSC) strives to promote the holistic well-being of all people 55+ in the greater St. Cloud area by providing opportunities for social interaction, recreation, and education.

We engage, enrich, and empower the diverse interests and needs of people with dignity, innovation, and joy

28

Whitney Without Walls

In 2006, Whitney Without Walls was launched

Allowed many programs and services to reach local satellite sites to facilitate greater accessibility to a larger number of seniors in Central MN.

Offering evidence-based health programs through this model.

Before the pandemic, we began a pilot for hybrid programming

Week of the shut down, we flipped our programming to virtual

As regulations changed, began hybrid.

Hybrid continued today.

Hybrid Programming
WHITNEY SENIOR CENTER
PROGRAM OF EXCELLENCE AWARDS
2022
ncoa national council on aging
NATIONAL COUNCIL ON AGING (NCOA)

29

Hybrid Programming

2022
39,324 visits in-person duplicated
15,030 visits virtually duplicated

30

31

32

33