Loneliness in Older Adults: Urgency and Opportunity
Jeremy Nobel, MD, MPH
U-Maine Colloquium- Oct 27, 2020
Welcome!

• Jeremy Nobel, MD, MPH
  - Faculty, Center for Primary Care, Harvard Medical School
  - President, Foundation for Art & Healing; Founder of the UnLonely Project
  - Member, State of Maine’s Age Friendly Advisory Committee
  - Poet (Maybe a reading with Gov. Janet Mills sometime?)
A Note of Urgency…

“History is a race between education and catastrophe.”

- H.G. Wells
TODAY’s “EDUCATIONAL” AGENDA

• Loneliness and isolation in older adults: Why should we care?
• Loneliness more important now than ever: COVID19; NAS Study; BLM & Social Justice
• Fresh Thinking: Creative arts engagement as a Population Health Intervention
• FAH’s Aging UnLonely as a case study
• Q&A
Loneliness corresponds to the discrepancy between desired and actual social relations
Polling Questions

Everyone is lonely from time to time, desiring better social connection than they feel they have.

- **Question One:** *In the last month, have you been often or very lonely? (Y/N?)*
- **Question Two:** *In the last month have you said to someone: “I feel lonely?” (Y/N?)*
- **Question Three:** *Are you more lonely now than before the COVID-19 pandemic began? (Y/N?)*
Social Isolation, Health and Older Adults: Reasons for Concern

• Mental Health
  o Depression
  o Addiction
  o Suicide

• Physical Health
  o Cardiovascular
  o Metabolic
  o Immunologic

• Social Health
  o Meaning
  o Thriving
  o Mutual Support
Aging exacerbates loneliness’ effects

- Greater effects on poor health behaviors (notably poor sleep), frequency of stressful events, bereavement, biological dysfunction, negative social cognition, and influences on brain activity
Noting a Particular Concern: 
Caregiver Loneliness is Increasing

Why Loneliness May Be the Next Big Public-Health Issue

INTRODUCTION

Loneliness as a contributing factor in the development of depression in the caregiver of a patient with Alzheimer’s disease (AD) has been given little attention despite the fact that researchers have found a moderate to high correlation between loneliness and depression in persons other than caregivers for some time (1–2). However, recent studies strongly suggest loneliness is a significant predictor of depression for caregivers and wise efforts for their AD relative in the same household (3–5).

The purpose of this chapter is to discuss those findings.

LONELINESS IS A SIGNIFICANT PREDICTOR OF DEPRESSION

It is estimated that there are approximately 5 million AD caregivers in the United States (6). Living with and caring for a family member with AD is a highly stressful experience. Advances in the mental health of the caregiver, especially in the form or expression of depression, have been reported across higher than other age- or gender-based population norms and demographically matched non-caregiver control groups (7–9). AD caregivers reporting symptoms of depression have ranged from 55% with female caregivers more likely to experience depression than males (9–11). The consequences of witnessing and adapting to a spouse negative, behavioral, and personality change often pose depressive symptoms.

Jeremy Nobel, MD, MPH
jnobel@hsph.harvard.edu
Timely New NAS Study: Social Isolation and Loneliness in Older Adults

Bottom Line: Its bad and getting worse. Health systems have an important role to play.

National Academies of Science, Engineering, Medicine
Quantifying Risks that Loneliness & Isolation Present to Older Adults

The COVID-19 pandemic has spotlighted underlying inequities and threats that our older loved ones face.

73% of older adults self-reported feelings of loneliness about one month into quarantine.

Chronic loneliness can lead to increased memory and cognitive decline, impaired physical health, and 27% greater risk of early death.

Loneliness can lead to a 29% increased risk of coronary heart disease, a 32% increased risk of stroke, and a 50% increased risk of Type 2 Diabetes.

$6.7B in additional health care costs spent annually associated with older adults' lack of social contact.

References:
- Special Senate Committee on Aging Testimony / University of California, San Francisco
- The National Academies of Sciences, Engineering, Medicine / PLOS Journal
- AARP
- BMC Global Health Research & Policy / Diabetologia
A Pyramid of Vulnerability: Population Health Approach

- Individualized health and social strategies
- Screening for depression, suicidality, etc.

- Recognize as a health issue
- Early identification & support

- Loneliness awareness
- Risk factor mitigation

Highly Isolated

Beginning to Disconnect and Isolate

At Risk for Isolation

Collaborate with the transforming delivery system

Promote a culture of health

Communicate broadly and effectively

Measure both isolation burden and impact of programs

• Loneliness awareness
• Risk factor mitigation

Jeremy Nobel, MD, MPH
jnobel@hsph.harvard.edu
Back to the NAS Study: What can Age-Friendly Health Systems Offer?

Bottom Line: It's bad and getting worse. Health systems have an important role to play.

National Academies of Science, Engineering, Medicine
Doctors in Montreal will start prescribing visits to the art museum

By Esphal Liens – October 23, 2018
Telehealth offers new possibilities ... Especially if thoughtfully applied

Rapid Adoption of Anytime/Anywhere Connectivity
- Seamless Information Exchange
- Build & Maintains Relationships
- Coordinate Effective Action

High Tech + High Touch
For Health Systems, Providers, and Payers: Addressing Loneliness Increasingly Matters!

*Here’s Why (Hint: Follow the Money):*
*Outcomes are central to emerging payment and care delivery models…*

- **New payment models:** MACRA/MIPS, ACO Plans, MA Plans, Medicaid/DSRIP,
  - Outcome based payments reward increased patient engagement
  - Patient engagement increases patient satisfaction (HCAPS and Beyond)

- **Advanced primary care (Patient-centered care)**
  - Collaborative care models that better integrate mental/physical/social services
  - Care models emerging that explicitly identify loneliness as a health risk (CareMore)

- **“Engagement” is key enabler for telehealth and other population health strategies**
  - Supports real-time risk identification and personalized intervention
  - Optimizes care coordination, improves health, reduces costs
Isolation and Older Adults: Summing Up

• A **diverse group** of individuals and circumstances
• A set of **complex** and overlapping drivers, concerns and solutions
• Consequently, no “silver bullet”
One Intriguing Possibility…
Maybe the Arts Can Connect Us?

“I think that people do go to art in general as a way of addressing very deep, very intimate, very mercurial and elusive, ineffable things in a communal setting. It ends a certain kind of inner loneliness. Or it joins one's own inner loneliness with the inner loneliness of many other people. And I think that that can be healing.”

Tony Kushner
There has never been a culture without art…
Maybe it helps us connect?
A powerful underlying principle: Creative arts rewires our brains

The arts stimulate thoughts, moods and feelings that change our brain and our bodies…impacting our health!
How we ”make sense” of our world has profound physiologic impact

- **Neuro-endocrine Outflow**
  - Hormonal Regulation
  - Immune System
  - Somatic Organ Function

- **Autonomic Outflow**
  - Blood Pressure
  - Heart Rate
  - Respiration

- **Neuro-peptide Outflow**
  - Neurotransmitter Modulation
  - Mood and Emotion
  - Endorphins
Can the Arts Connect Older Adults?
Seeing is Believing!
If we can demonstrate that emotion affects outcomes and art affects emotion, then a logical path to better outcomes would involve more attention to engaging people in artistic pursuits.

Harlan Krumholz, MD, SM
Professor, Yale University
If we can demonstrate that emotion affects outcomes and art affects emotion, then a logical path to better outcomes would involve more attention to engaging people in artistic pursuits.

• A multi-faceted initiative that seeks to reduce the burden of loneliness and its stigma.

• Pursuing a three-fold goal: to promote awareness, reduce stigma, activate programming
Unique Feature of the UnLonely Project: Leveraging the Power of Creative Arts!

- A fun and non-threatening way to engage people of all ages and in any circumstance
- Gives people a chance to express who they are and what matters to them
- Activates people, emotionally and intellectually
- A way to connect people to themselves and others
- A way to promote a general sense of wellbeing and belonging
ARTFULLY ADVANCING TREATMENT OF DIABETES

Jeremy Nobel, MD, MPH; Lewis E. Kazis, ScD; Howard Cabral, PhD, MPH; Marina Soley-Bori, PhD, MA; Harris Allen, PhD; and James Rosenzweig, MD

In this article ...
A study into creative expression as a way to increase patient activation in the management of Type 2 diabetes shows promising results as a high-value, low-cost tool for improving health in underserved populations.
Current Aging UnLonely Community Partners

With Lead Sponsorship by AARP Foundation and UJA New York:
Our Fall 2020 series includes 9 pilot sites in 3 geographic regions
UnLonely Creativity Circles:
An Innovative Blend of Components:
A Community-Led Public Health Model

Effective public health programs that address health concerns for the community.
Key to Scalability:
Empowering Field Use

EXAMPLE SETTINGS

Libraries
Museums
Community-based Organizations
Schools
Supports a Pop Health Ecosystem

Proven Programs & Curriculum

Community-Based Organizations

Vulnerable Populations

Health Centers

Social Services

Housing

Schools

Workplaces

Places of Worship
Supports the Health System’s Role in Community Population Health

Proven Programs & Curriculum → Community-Based Organizations → Vulnerable Populations

Health Centers

Housing

Social Services

Places of Worship

The Foundation for Art & Healing
Supports the Health System’s Role in Community Population Health

Proven Programs & Curriculum  Community-Based Organizations  Vulnerable Populations

- Health Centers
- Housing
- Social Services
- Places of Worship

The Foundation for Art & Healing
Summary: Social Isolation and Loneliness in Older Adults

• What we know:
  o Challenges are significant and increasing
  o High levels of diversity, variability and complexity

• What we need to better understand:
  o Assessment of prevalence, root causes and variations
  o Assessment of intervention opportunities and barriers

• What we need to do:
  o Innovate and measure; Share promising practices; Keep going!
  o But seriously…that’s why we’re here, isn’t it? Thanks again!
Now is the Time!
Addressing senior loneliness in partnership with Health Systems and CBOs

- Ramp up Education and Awareness
- Promote Engagement and Connection
- Make it Easy to Get Assistance