Social Connection is Medicine:

How Making A Connection Plan Can Mitigate Loneliness

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Introduction

Social connection is medicine

Social connections that create a sense of caring, contributing, and community have a range of benefits for health, well-being, and longevity at all ages. Social connection remains malleable throughout our lives.

Learning objectives

1

Identify at least two reasons social connection is medicine.

2

Learn about what Connection Planning involves and how it might help.

3

Try out making your own connection plan.

WHAT IS SOCIAL CONNECTION?

Social isolation & Ioneliness (SIL). Holt-Lunstad & Perissinotto (2023), NEJM

Humans are social creatures.





We have a need to belong.

Our Epidemic of Loneliness and Isolation

Key takeaways from the U.S. Surgeon General's Advisory on the Healing Effects of Social Connection and Community

Humans are wired for social connection, but we've become more isolated over time

Social connection is as essential to our long-term survival as food and water. But today, loneliness is more widespread than other major health issues in the U.S. Our epidemic of loneliness and isolation is a major public health concern.

Social connection significantly improves the health and well-being of all individuals

Social connection reduces the risk of premature mortality. It can predict better physical and mental health outcomes and ease stress. Higher levels of connection can influence health-related behaviors. Educational and economic achievement are even impacted by connection.

Social connection is vital to community health and success

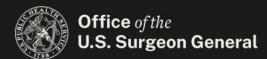
Socially connected communities enjoy better population-level health. They are more prepared for — and resilient in the face — of disaster situations. They also experience greater economic prosperity and reduced levels of crime and violence.

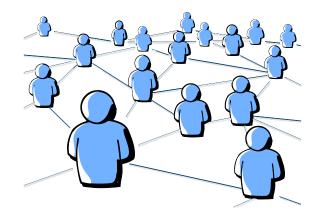
Together, we can advance social connection and improve our nation's public health

Fostering social connection requires that we each commit to our relationships and communities. Our actions today can create sustainable changes to society and bring better health to all.

We all have a role to play in supporting social connection. Learn how you can take action by reading the advisory at: surgeongeneral.gov/connection











1

Structure:

How often & who you connect with

2

Function:

The support you get from your connections

3

Subjective:

How you feel about your connections

Social isolation vs. integration



Not able to leave your home



Not talking to friends and family every day



Not joining groups

Social support



Help with daily tasks



Emotional support



Information & advice

Loneliness vs belonging



Lacking companionship

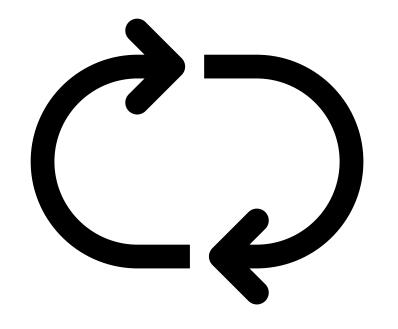


Feeling left out



Feeling isolated

Social isolation & loneliness



Brain health







1 Memory

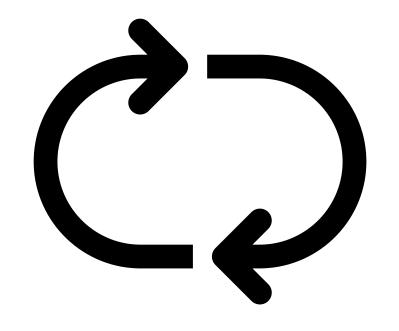
Executive functioning

Dementia

Having strong social connections was associated with a 46% reduced likelihood of developing dementia in one prospective study

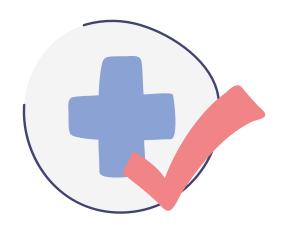
Saito T, Murata C, Saito M, Takeda T, Kondo K. Influence of social relationship domains and their combinations on incident dementia: a prospective cohort study. J Epidemiol Community Health. 2018;72(1):7-12. 10.1136/jech-2017-209811 PMC5753026.

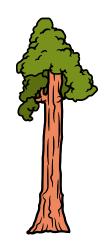
Social isolation & loneliness



Physical Health







1

Health conditions
(e.g., high blood
pressure,
cardiovascular
disease)

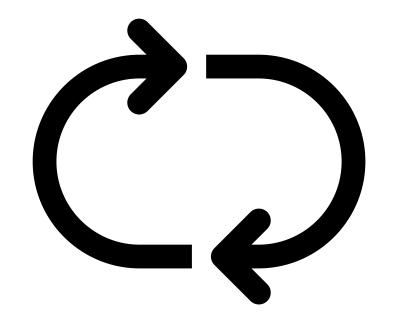
2

Self-rated health

3

Longevity

Social isolation & loneliness



Mental Health



Depression & anxiety symptoms



2

Poor quality of life & low meaning in life



3

Suicide ideation, attempts, and deaths

Challenges to staying connected



Barriers: Working remotely, physical illness or mobility difficulties, hearing/vision loss



Transitions: Retirement, caregiving, bereavement



Mental health concerns: depression, anxiety, guilt

How does connection help?



Social interactions are cognitively stimulating



Relationships promote healthy behaviors



Buffer stress

Introduction to Connection Planning

My connections plan



1. Way	s I can change my perspective:
a	
b	
 2. Way	s I can change how my body feels:
э	
 3. Way	rs I can connect:
a	
o	

Connection Planning An evidence-informed brief intervention

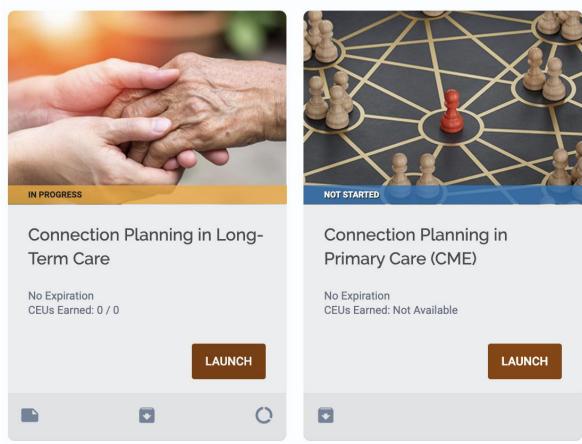
- Analogous to Safety Planning for suicidal behavior
- In primary care, akin to a robust form of 'Social Prescribing'
- Social prescribing is a person-centered approach to address healthrelated social needs (i.e., social determinants of health, including SIL) via linkage with community support services.
- Connection Planning includes linking patients to community support services, but does so in a specific, systematic way to personalize services to individual needs while also increasing motivation for follow-through.

Developed in collaboration with Dr. Emily Bower Van Orden, Bower et al. (2021), Am J Geriatr Psychiatry. 2021 Aug;29(8):816-827. doi: 10.1016/j.jagp.2020.05.004. Epub 2020 May 18.

Online training in Connection Planning

https://www.urmc.rochester.edu/medicine/geriatrics/flgec/online-training

- Via Finger Lakes Geriatric Education Center
 - Connection Planning in Long Term Care
 - Connection Planning in Primary Care



Connection Planning Includes 'EAR' Components

	EAR Framework for Addressing Social Isolation and Loneliness.				
Е	Educate	Social connection is part of a healthy lifestyle. Social connection, isolation, and loneliness affect risks for illness and death. Social connections help patients maintain their health, manage existing medical conditions, and adhere to medical regimens.			
A	Assess	Document social support, isolation, and loneliness in the electronic health record. Identify patients at risk with the use of validated measures of social isolation and loneliness. Track risk and progress over time.			
R	Respond	Reinforce the need for social connection alongside other health risks and protective factors. Integrate psychosocial support from all members of the care team (e.g., clinicians, volunteers, family or caregivers) into patients' treatment. Offer referrals tailored to patients' needs and partner with local community resources. Reassess patients regularly for changing circumstances and needs and respond accordingly.			



Social Isolation and Loneliness as Medical Issues

Julianne Holt-Lunstad, Ph.D., and Carla Perissinotto, M.D., M.H.S.

In the spring of 2021, one of us (J.H.-L.) lost both directly discussed; other times, her parents, within 17 days of each other - but they become evident indirectly -Covid-19 was not the direct cause of either death. As is the case for many families trying to protect

the couple had been isolated de- He died 2 weeks later. Grieving Social isolation (being alone or spite their family's desire to be the loss of her companion of having few or infrequent social together. Their doctor visits had nearly 60 years, their mother was connections) and loneliness (the grown less frequent and were of- surrounded by family and no subjective and distressing feelten brief or remote. Despite reg- longer socially isolated but was ings stemming from a discrepular calls, the lack of regular in- profoundly lonely. Reaching for ancy between one's desired and person contact made it hard for him out of habit, she fell out of actual social connection) co-occur their children to see how much bed, fracturing her shoulder and frequently, but not always. Both their health was declining. The hitting her head. She died 3 days independently contribute to the father was physically exhausted, later, 17 days after her husband. risks of poorer health and prewhile the situation took more of As in so many other cases, isola-mature death. Yet a patient's level an emotional toll on the mother, tion and loneliness may have con- of social connection was largely and neither was eating much or tributed to both deaths but were treated as a personal issue until getting much physical activity. never explicitly acknowledged. the pandemic forced governments, These seemed like normal re- Health care professionals work- institutions, and medical systems sponses to being confined to ing in myriad settings and spe- to reckon with the potential secone's home for nearly a year - cialties are seeing patients with ondary effects of social distanceveryone seemed tired and frus- heightened concerns about their ing and other isolating policies. trated. By the time the children own or family members' social These effects go far beyond psyrealized their father needed ur- isolation and loneliness (SIL). chological and behavioral health. gent medical attention, physicians Sometimes these concerns are Although psychological distress

loved ones during the pandemic, found he had late-stage cancer. else to turn for conversation.

manifesting, for instance, in overuse of clinic services because there is no one to help with medication management or nowhere

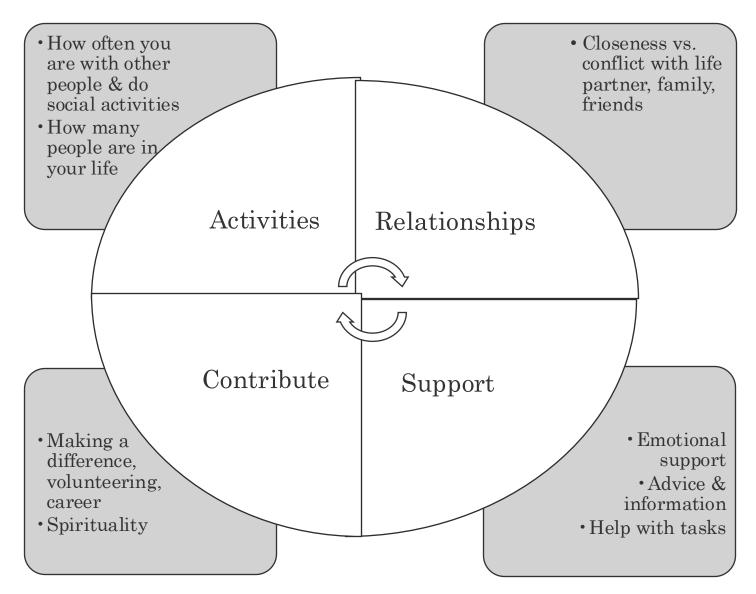
Download a worksheet to follow along!

My Connection Plan

1. Ways	s I can change my perspective:
a.	
b.	
c.	
2. Ways	I can change how my body feels:
a.	
b.	
c.	
3. Ways	s I can connect:
b.	
c.	

This handout is from Van Orden et al.'s (2020) article "Strategies to Promote Social Connections Among Older Adults During 'Social Distancing' Restrictions."

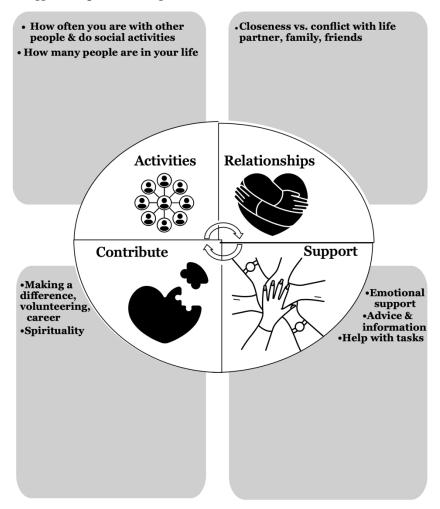
Social pie of life: What matters to you? Barriers?



Download a worksheet to follow along!

Pie of Social Life

Consider the pieces of your social life now, how they were in the past, and what you hope for them to be in the future. What pieces would be smaller? Bigger? Are pieces missing?



https://rochester.box.com/v/SocialPieofLife-Form



Examples. Consider your own pie!

Is Connection Planning a good fit?

- Consider loneliness.
 - The Three Item Loneliness Scale is a quick way to do that.
 - If you scored a 5 or more, you may be experiencing loneliness that could have an impact on your health and well-being if unaddressed.
- Other indicators are low social support or isolation.
- Or just feeling unsatisfied with relationships.
- Or being proactive and planning ahead for transitions.

Three-Item Loneliness Scale

The next questions are about how you feel about different aspects of your life. For each one, tell me how often you feel that way.

- 1. First, how often do you feel that you lack companionship: Hardly ever, some of the time, or often?
- 1 [] Hardly Ever
- 2 [] Some of the Time
- 3 [X] Often
- 2. How often do you feel left out: Hardly ever, some of the time, or often?
- 1 [] Hardly Ever
- 2 [] Some of the Time
- 3 [X] Often
- 3. How often do you feel isolated from others? (Is it hardly ever, some of the time, or often?)
- 1 [] Hardly Ever
- 2 [X] Some of the Time
- 3 [] Often

The Cognitive Behavioral Model of SIL: What's getting in the way & how do we tackle it?

Thinking (self-talk) Feeling Doing (in your body) (actions)

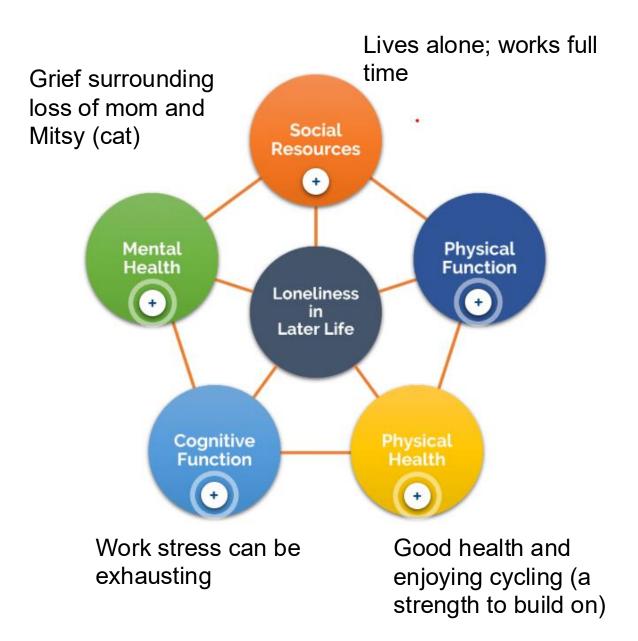
Being aware of the importance of social connection for health is a great first step.

But making a change isn't simple!

Connection Planning can help us increase the likelihood that we follow through with our goals, including recommendations from others.

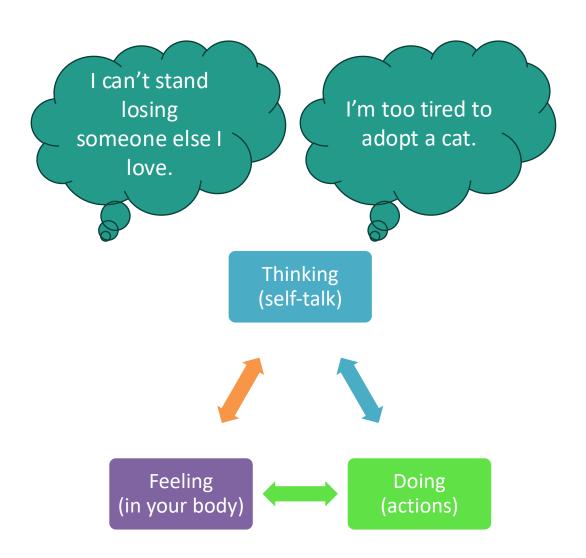
Example: Kim's barriers

- Here are some of my barriers.
- Think about what might be barriers for you!
- The model on the right was developed for loneliness in later life (because that is what Kim studies) but it can apply to adults of any age.



Thinking (cognition) Think about a time you felt isolated, like you lacked companionship, or left out this week?

- What thoughts went through your mind when this was happening? What did you tell yourself about why this was happening? What concerns did you have?
 - Tip: Pay attention to thoughts that may be extreme or unhelpful that could be targeted in the Connection Plan.
 - Tip: Don't believe everything you think!



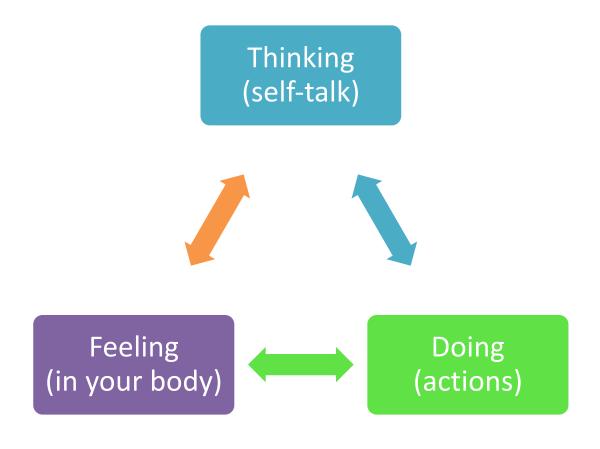
Ways to change your perspective

- Use these 3 prompts to use helpful self-talk:
 - How can I view the situation from a different perspective?
 - Think of someone optimistic whose opinion you highly value: how would they perceive the situation?
 - · Remind yourself: Don't believe everything you think!
- Examine the evidence for your thoughts:
 - Write down your thought (e.g., no one cares about me)
 - List the evidence in support of the thought (ask yourself: would this hold up in a court of law?)
 - List the evidence that contradicts that thought (if not sure, ask yourself: what would someone who cares say?)
- "Three Good Things"
 - Think of 3 good things that happened during the day (e.g., The weather was nice, My granddaughter texted me)
 - Ask yourself the following:
 - Why did this happen?
 - · Why was this good thing meaningful?
 - How can I experience more of this good thing?
- Engage in a mindful self-compassion exercise to practice self-compassion
 - https://cih.ucsd.edu/mindfulness/guided-audio-video
 - https://self-compassion.org/guided-self-compassion-meditations-mp3-2/
- Engage in an activity to connect with a sense of our shared humanity (could also be in Connection section)
 - Loving-kindness meditation https://ggia.berkeley.edu/practice/loving_kindness_meditation
 - Prayer
 - Listening to a symphony

Material courtesy of Dr. Emily Bower

Feeling (body)

- What were you feeling in your body when this happened?
- Did you notice any tension in your body, and if so, where was the tension? Some people notice feeling slowed down, lethargic, or tired when they feel left out did that come up for you?
- Other people notice feeling nervous, keyed up, or agitated when they feel left out - did that come up for you?
- Tip: start with a broad, open-ended question and then consider more specific feelings as needed.



Strategies to change your body sensations



Soothe all five senses

Listen to music, smell freshly baked cookies, pet your dog/cat, look at artwork, taste your favorite food, step outside



Practice calming activities

Mindful breathing
Muscle relaxation
Imagery

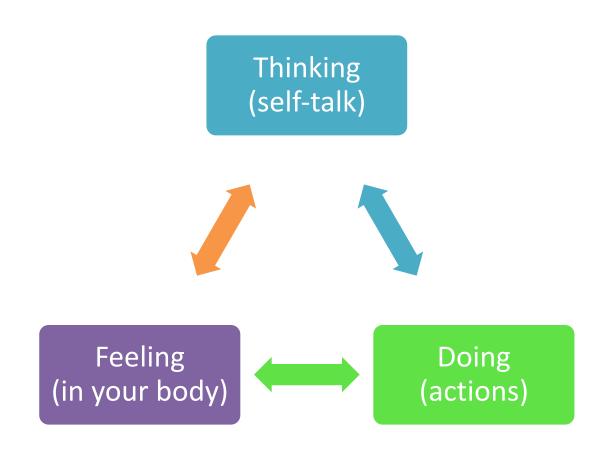


Change your temperature

Warm up by taking a bath or sipping warm tea. Cool down by splashing cold water on your face or holding an ice cube.

Doing (actions)

- What did you do when this happened?
- Did you try to do anything to change how you were feeling?
- Is there anything you wish you did differently?
- Commit to take one small action; create SMART goals



My Connection Plan



Body

Ways I can change how my body feels:

Go for a bike ride or sit in my garden if I'm feeling lonely or stressed about considering adopting a cat.



Mind

Ways I can change my perspective:

"Don't believe everything you think!" Adopting a new cat will take energy, but it will also give me energy—love!



Connection

Ways I can connect:

Text a friend to met up for coffee to chat about pros and cons of adopting a cat; Visit my friend and her cat; See if a friend will meet me at a cat cafe

Sample Completed Connection Plan

My Connection Plan



Rody

	body				
Т.	Ways I can change how my body feels:				
Every day after lunch I will sit in my chair and practice noticing my muscles and					
relaxing	them from my toes to the top of my head.				
	Mind				
	Ways I can change my perspective:				
When	I notice I am having the thought, "Nobody likes me," I will look at photos				
of mysel	f spending time with close friends and family members who care about				
me.					
	Connection				
	Ways I can connect:				
	•				
	a list of 4 people from my church that I miss seeing while church is				
<u>closed. I</u>	will call one of them every Sunday afternoon to say hi and ask how they				
<u>are doin</u>	g				

Experiential Exercise

Step 1: Reflect on how often and who you connect with; the support you get from your connections (e.g., physical, emotional); how you feel and how you want to feel about your connections (e.g., lonely vs belonging). Barriers and facilitators (thinking, feeling, doing).

Step 2: Create your Connection Plan! Write down:

- Ways you can change your perspective. (Mind)
- Ways you can change how your body feels. (Body)
- Ways you can connect with others. (Connection)

Take the Surgeon General's Challenge!





Sample 5-for5 Connection Challenge Actions:

Visit SurgeonGeneral.gov/Challenge to find inspiration for your 5 actions. Here are a few examples:

Express Gratitude	Offer Support	Ask for or Accept Help
Call, text, or send a note — tell someone you're grateful they're in your life!	Check in with someone and let them know you're there	Let someone know you're having a hard time
Compliment someone who deserves recognition	Offer to help someone with daily tasks	Tell a loved one how they can better support you
Thank someone for a specific time they helped you	Volunteer with a local organization that's important to you	Reach out for professional mental health support, like calling 988

More Information on the Surgeon General's Social Connection Priority:

SurgeonGeneral.gov/Connection

Connection Planning Resources

- Free handouts:
- https://www.eenet.ca/resource/social-connection-isolated-older-adul
- Article in The American Journal of Geriatric Psychiatry (free download)
- https://www.ajgponline.org/article/S1064-7481(20)30333-X/fulltext
- VA VISN 5 MIRECC Connection Plans manual:
- https://www.mirecc.va.gov/visn5/training/connection_plans.asp
- FREE Training online (Finger Lakes Geriatric Resource Center):
- https://www.urmc.rochester.edu/medicine/geriatrics/flgec/onlinetraining.aspx



Connection Planning Resources Guide

Connection Planning Resource Guide

The Connection Planning Resource Guide contains national resources as well as spaces to provide local programs to tailor the resources to your community. Clinics providing Connection Planning can personalize this document for their community so that Connection Planning coaches have resources at their fingertips to include in Connection Plans. The Guide assists Connection Planning coaches on identifying resources and programs that may be most relevant to a given patient (personalization).

How to use this guide: Each section of the Guide contains a category of programming that can be used to target social isolation and loneliness. Each category corresponds to the "Drivers of Social Isolation and Loneliness" Diagram discussed in the training and reproduced below. There are numerous pathways to social disconnection in later life. The figure depicts factors that may function as both causes and consequences of social isolation and loneliness; these will vary across patients, so working with a patient to identify which apply to them is one way to personalize resources provided in Connection Planning. The model includes programs that have shown efficacy (or a signal for efficacy) in either reducing SIL in older adults or reducing psychological distress/improving functioning among older adults experiencing SIL. Programs can be selected based on which driver for SIL they appear close to in the figure. For example, an older person with several chronic conditions (physical health) and functional impairment who cannot leave the home might benefit from a friendly calling program. An older person experiencing loneliness and depression who is able to leave the home might benefit from a group exercise program, such as Tai Chi. A one-size-fits all approach to reducing SIL in later life is unlikely to be most effective or acceptable to older adults. Rather, considering personalized drivers as well as factors that impact ability and willingness to engage in an intervention may result in the best outcomes.



Connection Planning Resource Guide (November 2024), Created by Drs. Kim Van Orden & Emily Bower with support from the Finger Lakes Geriatric Education Center (see last page).

To personalize this guide: A key community resource that cuts across numerous categories is the nationwide network of Area Agencies on Aging (AAA) that offer non-medical programs to support older adults and their caregivers, including information, referrals, and guidance on services to promote social connection—such as congregate meals and senior centers—and provision of care navigation (to address barriers to social connection). Some offer in-home geriatric assessment (a holistic tool that assesses social health, mental health, physical health, financial stability, and safety); assistance with housing; and caregiver consultation and services.

- To find the AAA near you, search the Eldercare Locator (or call 1-800-677-1116).
- <u>USAging</u> is the national association representing and supporting the network of Area Agencies on Aging and advocating for the Title VI Native American Aging Programs.

engAGED: The National Resource Center for Engaging Older Adults is administered by USAging to serve as a national resource to expand and enhance the Aging Network's capacity to offer social engagement programs to older adults, people with disabilities and caregivers. engAGED also partners and aligns efforts with Commit to Connect, a social connection initiative led by the Administration for Community Living (ACL) and administered by USAging. Commit to Connect and engAGED partner on activities such as webinars and office hours, a Social Engagement Innovations Hub and an annual Virtual Summit. The Center provides training and technical assistance opportunities; their outreach materials provide way to learn more about how engAGED can support your organization's social engagement programming. In particular, the Innovations Hub can be used to find local programs and resources for social connection to add to the Resource Guide provide to Connection Planning coaches.

Here are national resources to aid in finding programs and strategies tailored to the needs of older adults from marginalized communities:

- SAGE Social Isolation Resource Finder: SAGE is a national agency that conducts advocacy
 and promotion of services for older adults in the LGBTQ+ Community. Their website
 includes resources on social isolation in the aging LGBTQ+ community.
- The National Indian Council On Aging, Inc. (NICOA) is a national nonprofit organization focused on aging American Indian and Alaska Native elders. Fact sheets and resources on social isolation and loneliness are available.
- National Hispanic Council on Aging Resource Center: The NHCOA is a national organization
 working to improve the lives of Hispanic older adults, their families, and caregivers. The
 online Resource Center provides information about resources, including socialization and
 access to healthcare and is available in English, Spanish and Portuguese. It can be
 accessed with the Center's chatbot by messaging the hotline number via WhatsApp.
- National Caucus and Center on Black Aging (NCBA): The NCBA provides technical
 assistance, resources, and support to further advancements and innovations that serve
 older African Americans and their families. Information and resources are available on topics
 relevant to social connection, including the Health and Wellness Program.
- National Resource Center on AAPI Aging: The National Resource Center on AAPI Aging is
 the nation's technical assistance resource center dedicated to building the capacity of longterm service and support systems to equitably serve AAPI older adults and their caregivers.
 <u>Education and technical assistance</u> on issues relevant to social disconnection, including
 elder abuse, financial exploitation, caregiving, social inclusion, and healthy aging are
 available, as well as toolkits to conduct community needs assessments.

Connection Planning Resource Guide (November 2024), Created by Drs. Kim Van Orden & 2 Emily Bower with support from the Finger Lakes Geriatric Education Center (see last page).

I realized that when I was connected to others there was hope.

COACHING PARTICIPANT

Vivek Murthy, MD US Surgeon General



Unlike many other illnesses, what I find profoundly empowering about addressing loneliness is that the ultimate solution to loneliness lies in each of us. We can be the medicine that each other needs. We can be the solution other people crave. We are all doctors and we are all healers.

Stay connected!



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- Emily Bower, PhD
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- Behavioral Health & Aging Research Lab: https://www.pacificu.edu/directory/college-health-professions/school-graduate-psychology/research-research-labs/behavioral-health-and-aging-research-lab