



“Anytime that you have an opportunity to get closer to people, it’s a good thing.” says Wil, 94 and CircleTalk™ participant. “This weekly meeting gives all of us another chance to create a sense of community here (in assisted living) and find some purpose. We use our brains and revisit important old memories.”

Background

Society is currently facing an epidemic of social isolation and this, in many cases, leads to loneliness as well. This epidemic is estimated to affect more than 8 million older adults. We now know that social isolation is linked to devastating health problems and cognitive decline.

As we age, connections remain as important as ever. CircleTalk™ was created in 2011 at the same time that a rising body of research had unveiled troubling trends and potential red flags, particularly in the areas of lack of connection and social isolation as they related to having other people and meaningful activity in the lives of aging adults. Findings from the Stanford Center on Longevity’s Sightlines project specified that as people age they eliminate less-essential relationships and connections and want to focus more on relationships that bring more meaning and joy in a process known as “social network pruning.” Consequently, older people seek to stay connected face to face and have smaller but more emotionally rich social networks than younger people.

There are many social trends affecting aging adults paint this grim scenario; more aging adults are living alone, are less likely to be married, and have weaker ties to family and friends. Fewer and fewer older adults are affiliated with churches, community and civic organizations.

Social isolation, defined as a lack of regular and meaningful interaction with others, has been shown to negatively affect health outcomes for older adults including increased mortality and morbidity, decreased recovery from illness, and increased utilization of health services such as hospital and skilled nursing admissions. Isolated *and* lonely individuals may be twice as likely to develop cancer and the type of dementia linked to Alzheimer’s disease.

CircleTalk™ innovators were committed to creating a *programmatic* response to social isolation, with a meeting format, group method and supportive curriculum that solely focuses on increasing social interactions in settings where older adults gather.

CircleTalk™ is a simple idea; a structured conversation program that increases a person’s sense of connection to a group and renewed sense of purpose. Ultimately, the goal of CircleTalk™ is to decrease loneliness and isolation for group participants.



The Cost and the Consequences of Social Isolation

- Social Isolation has comparable negative health effects including the well-known dangers of smoking cigarettes and obesity.
- People lacking social connections or who frequently feel lonely tend to suffer higher rates of morbidity and mortality, infection and cognitive decline. Socially isolated or lonely people are more likely to have a heart attack or stroke, compared to people with strong personal networks.
- Suicide is much more common among older adults. Men who are 65 and older face the highest risk of suicide, while adults 85 and older, regardless of gender, are the second most likely age group to die from suicide.
- Social isolation and loneliness have serious financial implications. Medicare spends approximately \$134 more a month on a socially isolated older adult as compared to a connected person, totaling \$6.7 billion a year.

The research findings on health and wellness impacts of social isolation and loneliness are now prolific. The following is a compilation of some of the illuminating and compelling research, to date:

A study conducted at the Rush University Medical Center in Chicago reported a link between loneliness, or the feelings of disconnection from others, and a higher risk of developing dementia later in life. Other research suggests that lonely people are at risk of developing cancer and high blood pressure.

John Cacioppo, a social psychologist at the University of Chicago in Illinois, studies the biological effects of loneliness, and in a steady stream of recent papers, he and collaborators have identified several potentially unhealthy changes in the cardiovascular, immune, and nervous systems of chronically lonely people. Their findings could help explain why epidemiological studies have often found that socially isolated people have shorter life spans and increased risk of a host of health problems, including infections, heart disease, and depression. Their work also adds a new wrinkle, suggesting that it's the subjective experience of loneliness that's harmful, not the actual number of social contacts a person has. "Loneliness is a lot more important than people thought it was," Cacioppo says.

An independently conducted study of needs of aging adults in Colorado (The 2018 CASOA Study) reports that, after food and housing, the second highest areas of need are for social engagement and opportunities for meaningful activities.

In research on the effect of positive emotions upon physical health, results suggest that positive emotions, positive social connections, and physical health influence one another in a self-sustaining upward-spiral dynamic. Although the mechanisms underlying the association between



positive emotions and physical health remain a mystery, researchers hypothesize that an upward-spiral dynamic continually reinforces the tie between positive emotions and physical health and is mediated by people's perceptions of their positive social connections.

Research has now delved into the concept that social connection is an actual biological need. This research makes the case that social interaction is vital to our physical survival and that the social isolation and loneliness epidemic represents a public health risk.

What Puts Us at Risk for Becoming Socially Isolated and Lonely?

Research has also informed us that we are vulnerable in our state of social isolation and loneliness. The risk factors below point us towards specific interventions that will help us innovate new supports as people and places change in all our lives as we age.

- Living alone, being unmarried (single, divorced, widowed);
- Poor physical and psychological well-being, including untreated hearing loss, poor mobility, psychological or cognitive challenges including poor mental health;
- Life transitions including social role changes, loss of family and friends and retirement and moving to a new location;
- Low income or limited financial resources;
- Being a caregiver for someone with a serious condition;
- Inadequate social support from family, friends and community;
- Lack of access to a social life including poorly designed communities, rural living or being part of a marginalized group (racial/ethnic, minorities, LGBT);
- Rural, unsafe and/or inaccessible neighborhoods;
- Transportation challenges including lack of affordable and accessible options;
- Language barriers; and
- Societal barriers including ageism and lack of engagement opportunities.

Research on Intentional Social Engagement that Drives the Design of CircleTalk™

Decreases in Dangerous Health Conditions: Research on social support programs have shown, through pre- and post-tests, that older adult participants have decreased rates of depression and dementia, mental and physical concerns, lowered mortality, and improved cognitive function. These social support programs include formal groups that can be tailored to men, women, or both, and social activities in a group format in which older people are active participants.

Accumulating research continues to show that social activity has a positive benefit on health and well-being, and multiple longitudinal studies have shown that more socially active older adults have better cognitive outcomes and are less vulnerable to progressive cognitive decline. For



example, one study showed that over a five-year period, individuals with the largest social networks had 39 percent less cognitive decline.

A Mindset for Positive Social Experiences: In a meta-analysis of 20 studies on interventions for loneliness, researchers concluded that simply providing social support doesn't seem to work, especially if people know they're being looked after. The most effective interventions were those that borrowed methods from cognitive behavioral therapy to shift people's attention and interpretation of social situations in a more positive direction. Examples include group processes that increase positive engagement to encourage participation and confidence level of participants.

Group vs Individual Engagement: Research also suggests that, although individual engagement does provide benefits as well, *group* engagement may offer unique cognitive benefits to older adults, and that this impact increases as people grow older. Researchers also note that there is particular value in directing investment towards helping older adults develop and maintain social group engagement. Beyond cognitive performance, other studies have also suggested that the quality of group life (as opposed to just individual relationships) also has additional pay-offs in terms of perception well-being and mental and physical health. This has important implications for the aging services industry, and suggests that fostering, enabling, and facilitating such group interactions is a worthwhile investment.

One promising intervention for alleviating loneliness is a group and training model known as the **Circle of Friends (CoF)** implemented and disseminated in Finland for over 10 years. Findings indicate that it improved lonely older people's well-being, health and cognition. It also decreased the use of health care services and reduced mortality among older people suffering from loneliness. **CoF** enhances interaction among its group members, encourages them to share their feelings, and supports them in continuing their group meetings and interactions within the group, ideally, without group facilitators. The **CoF** is based on rigorous training of professionals and activating group learning methods.

CareMore (a unit of Anthem Insurance that offers coverage and health care to more than 100,000 members across seven states) introduced "Be in the Circle: Be Connected" program to help some of the US population's most socially isolated older adults. They have redesigned their care centers, so the waiting areas will be repositioned as social spaces where seniors can drop into a social space to engage with others. They also have senior-focused gyms called "Nifty After Fifty" at most of its care centers, and a lot of the programs there are focused on creating social connections as well as helping them with exercise.

The **EngAGE** model provides life-enhancing onsite programs in affordable senior and multigenerational housing — classes, workshops and events in the arts, well-being, lifelong



learning, community building and intergenerational connectivity — in southern California, Oregon and Minnesota. They transform retirement communities into vibrant centers of life and social connection versus a final stop to just age and die.

EngAGE tries to model retirement like going to college. They are both new phases of life, where we can utilize our free time to better ourselves, continue to grow and become something new each day if we choose.

CircleTalk™: An Important and Adaptable Intervention™ to Increase Purpose, Meaning and Connection

It is indisputable, based upon research findings, anecdotal data and personal experiences of many who have observed their own parents and loved ones, that social isolation and loneliness is an unnecessary burden to adults as they age. CircleTalk™ was innovated as a strategy to address social isolation and loneliness for adults as they negotiate planned or unforeseen transitions and lifestyle changes that naturally occur with age.

CircleTalk™ was inspired by the work of Rachel Kessler, an educator in k-12 settings at PassageWorks Institute in Boulder, Colorado. Rachel innovated a model and tools to create caring, connected communities in classrooms. The same concepts of addressing social isolation in school age children apply to older adults as well.

CircleTalk™ engages differently than other programs. It is solely focused on supporting high quality interactions and participant engagement with others through conversations. At its core is the principle of purposeful engagement that is elicited through the exploration of universal life themes. Led by trained CircleTalk™ Leaders, participants are given an opportunity to relate their personal stories, experiences or thoughts about the theme. This purposeful and meaningful engagement technique allows for an almost ineffable outcome; the sense of belonging and connecting to others through shared life experiences. Given the opportunity for self-reflection and personal storytelling, participants can relate who they are to others, re-enforce their sense of self, and make connections with others in a rich and meaningful way. This direct interaction with others, combining both listening and self-expression, leads to different and more positive outcomes than a group entertainment activity or other therapy or specialized support groups.

CircleTalk™ is a turn-key solution to a providing social engagement opportunity in virtually all settings where older adults live and gather, and the curriculum is specifically designed to address both the interests and concerns of older adults.

CircleTalk™™ is designed for older adults who desire to:

- Experience a new way to connect and form quality relationships with others.
- Develop a sense of belonging to a small group.



- Transition into the social fabric of a new residential community.
- Become known within a smaller group by participating in new and interesting conversations about engaging life themes through interactive exercises.

How Does CircleTalk™ Work?

- CircleTalk™ Leaders convene a group (6 to 12 adults) for a series of one-hour meetings. Leaders guide the process and content to engage all in meaningful conversations in a safe and supported setting.
- Leaders follow a specific, mindfully developed and tested curriculum containing all program activities and discussion themes.
- CircleTalk™ meetings are easily modified so that all activities and discussion are accessible to people needing visual, auditory, and/or support to fully participate.
- Meetings are conducted in the same place and at the same time every week over multiple weeks to engender a sense of group familiarity and safety. CircleTalk™ has developed 36 weeks of distinctive curricula.

Research that has been published over the last decade leads to the undisputed conclusion that the lack of social engagement among aging populations is a threat to their health and well-being equivalent to more well-known health threats such as smoking cigarettes. CircleTalk™ is designed to combat this trend and is based upon proven principles of group engagement. All members have new opportunities each week to enjoy a healthy and supportive group environment that promotes person-to-person connection through spirited conversations. Based upon the research, CircleTalk™ participants will likely enjoy longer and happier lives as a result of their participation.

"I have known many of my friends for 50 years and more... I feel like I know these people in the circle better – and I just met them!"

~Ruth, 91, CircleTalk™@ member



Endnotes

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