Combating Loneliness in Assisted Living Facilities: An Evidence-Based Practice Guide for Social Work Practitioners Working with Older Adults

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COMBATING LONELINESS IN ASSISTED LIVING FACILITIES

AN EVIDENCE-BASED PRACTICE GUIDE FOR SOCIAL WORK PRACTITIONERS WORKING WITH OLDER ADULTS

WRITTEN BY

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Introduction

It has been well documented that social needs do not change with aging (Teater, Chonody, & Davis, 2021), but often, older adults are left out of the conversation when it comes to loneliness and the feelings that come with social isolation. In the same way that researchers are de-stigmatizing the mental health conversation for youth and middle-aged adults, we need to bring to light the issues that come with those who live in assisted living facilities or nursing homes and the social issues presented in that population.

There are a few factors that can play into older adults feeling lonely; these include the loss of friends and living alone (Lubben, Gironda, Sabbath, Kong, & Johnson, 2015), and the COVID-19 pandemic has only increased these issues. The issue of loneliness has shown to impact quality of life (Sandilya & Singh, 2020) which is why evidence-based recommendations are necessary. Some of the outcomes of loneliness include a higher risk for mortality, lower health ratings, and an increased number of medical conditions and chronic illnesses (Teater, Chonody, & Davis, 2021). This evidence-based guide is for staff and clinicians servicing assisted living facilities who want to help combat the issue of loneliness in their residents and patients.
Recommendation 1

Have a family member call the resident in the morning and/or evening to help the individual stay connected.

Although some assisted living facilities are not allowing visitors such as family and friends to see their loved ones due to the COVID-19 pandemic, they can use modern technology to their benefit and ensure a positive connection via a phone call or facetime at certain points in the day. Because relations with family can impact an older adult’s sense of loneliness (Trybusińska & Saracen, 2019), it is vital that we encourage such interactions with a resident’s circle of people.

Individuals with dementia or related diseases are especially at risk for losing connection with family as their memory of such persons can decrease over time (Simard & Volicer, 2020). Being able to talk with a familiar voice, even if it is a short visit, can make all the difference for someone in an assisted living facility who is experiencing loneliness.
Recommendation 2

ENCOURAGE ACTIVITY, WHETHER PHYSICAL OR MENTAL.

Long periods of inactivity is common among adults in assisted living facilities and has a negative impact on an individual's all-around health (Resnick et al, 2018). It is common knowledge that exercise helps keep us in shape and our body healthy, but only recently has it become part of the conversation that moving our bodies helps us mentally as well. Some residents may be able to walk on their own, with a walker, or be pushed in a wheelchair by a staff member. If an individual is unable or unwilling to participate in physical activity, encouraging mental activities such as painting, writing, or doing puzzles is another way to stay active.

Beauchet et al (2020) suggests that participating in creating art allows emotions to sustain themselves and eventually resolve. Because art is often multisensory and is a creative process, it has the ability to energize individuals, help get their memory going, allow emotions to run their course, and in some cases can allow room for social interaction while participating in creative activities.
Recommendation 3

WHERE ALLOWED, CREATE ACTIVITIES AND OPPORTUNITIES FOR RESIDENTS TO ALLOW THEM TO SOCIALIZE WITH ONE ANOTHER, OUTSIDE OF THEIR ROOMS.

Studies done with assisted living residents report positive impacts of social engagement on life satisfaction, physical and mental well-being, and retention (Jang et al, 2014). It is critical that residents of assisted living facilities are able to have that social interaction with fellow residents and establish a sense of belonging. Although older residents with functional disabilities have a more difficult time with social engagement, any available opportunity for them to interact has been shown to bring substantial psychological benefits.

Successful social engagement can be seen as more meaningful and valuable for those who struggle to connect. Results from a study done by Park et al (2020) show that higher social engagement promoted a sense of belonging, and that sense of belonging improved psychosocial outcomes for participants. The evidence is clear; developing ways for residents to socialize with one another even in the COVID-19 pandemic is vital to their psychological well-being.
Recommendation 4

WHERE ALLOWED, HAVE FAMILY, FRIENDS, AND VOLUNTEERS DO WINDOW VISITS OR VISIT INSIDE THE FACILITY.

Due to the COVID-19 pandemic, visitors have not been as commonly allowed into assisted living facilities. Window visits and those over technology such as facetime and zoom have been good alternatives, but there is something about in-person connection that makes all the difference. Kemp (2021) found that a positive of family coming into the facility is that the family members typically advocate for the resident’s needs and are able to bring supplies needed to care for the individual. “A Dutch national study involving 26 nursing homes reported that lifting visitor restrictions by allowing families to return under certain conditions (e.g., use of personal protective equipment, social distancing) was welcomed by all stakeholders, brought joy to residents, staff, and families, and had a positive influence on resident well-being” (Kemp, 2021).

Another study done by Martin-Cook et al. had results that suggested visits from a family member “led to a significantly lower number of agitated behaviors (from assisted living residents) displayed during the visits with family members”. Because the visit is structured, residents with dementia may find much more pleasure in knowing this is part of their daily routine in addition to the socialization it gives them. The important part of this is to ensure plenty of education for family and friends coming to visit on how to interact with an individual if they have a dementia-related disease. This will make for an even more effective visit in combating loneliness for the resident.
Recommendation 5

INVITE THE INDIVIDUAL TO PARTICIPATE IN SOME MENTAL HEALTH TREATMENT, WHETHER THAT IS INDIVIDUAL THERAPY, GROUP THERAPY, OR SHORTER TERM HELP FOR THE SPECIFIC ISSUE OF LONELINESS.

The last recommendation of this guide is to help the resident participate in a mental health treatment if their loneliness has been impacting their daily life and ability to function in a healthy way. Two examples of these treatments include Animal Assisted Intervention (AAI) and music therapy. Casey et al (2018) conducted a study in which animals were brought to visit assisted living residents and even measured the staff’s emotions during data collection. It was found that AAI had a positive impact on the residents and the employees who were reported to have been calmer throughout their shift. Residents were also found to be more engaged after the AAI.

Music therapy has shown much promise in recent years, and Hsu and colleagues (2015) saw through their study with music therapy sessions in assisted living residents that their negative behaviors decreased significantly. Marx et al recommends that these facilities continue to develop non-pharmacological interventions to manage residents’ negative feelings and behaviors because of how successful treatment has been.
REFERENCES


https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7205644/
