



## Enhancing Socialization through Making Meaningful Volunteer Connections during COVID-19 June 3, 2020

Social interaction [is essential for physical and mental health and well-being](#). The health benefits of human social interaction are plentiful; delaying memory loss, improving mood, stimulating appetite, and decreasing mortality. Aging experts have known the value of socialization for a long time, which is why the Older Americans Act (OAA) nutrition programs has three primary goals:

- reduce hunger, food insecurity and malnutrition,
- **promote socialization**, and
- delay the onset of adverse health conditions

Unfortunately, social isolation and loneliness are nonetheless [prevalent among older adults](#), and can [lead to functional decline and death](#). [A recent ACL funded study](#) of older adults receiving nutrition services *before COVID-19* revealed 1 in 5 meet key suicide predictors (thwarted belongingness and perceived burdensomeness), and 15.6% were at increased risk of suicide. Experts expect feelings of social isolation, loneliness, and potentially suicidality to be exacerbated by this crisis; however, the Aging Services Network (ASN) is well positioned to foster meaningful social interactions that help decrease social isolation and promote life with older adults during this trying time.

The OAA congregate and home delivered meal programs have functioned as “more than a meal” for many years. These programs provide an essential means for connecting older adults with each other and the community, and have been found to provide many benefits. A recent evaluation of the OAA nutrition program found that (in comparison to non-participants) congregate meal participants were more satisfied with their social interactions, and less likely to be depressed (among other benefits).

Both the nutrition and regular connection that the OAA nutrition programs provide are now more important than ever since some form of social distancing interventions will be needed for a prolonged period due to COVID-19, which [disproportionately impacts older adults](#). It is important to consider how nutrition programs can [effectively promote socialization while social distancing](#). As nutrition services programs look for ways to return to a “new normal”, volunteers are a critical resource for helping *make warm calls/connections* that will help older adults feel supported and engaged. The ASN has been innovative in equipping big-hearted volunteers to promote [the health and well-being of at-risk older adults in novel ways](#). Here are some tips for your volunteers (many of which you are likely already doing) to build and strengthen these important connections:

1. When possible, **use the same volunteers each time** to increase familiarity and build rapport. It may take a few iterations of the check-in calls to develop sufficient trust between the volunteer and older adult. Be patient, and persistent.
2. **Use active listening.** Active listening is a helpful way to demonstrate your care and concern. Active listening is hard work. It requires listening with your ears and with your heart. The older adult (or anyone for that matter) can tell when someone is really listening. Try to minimize distractions and make contacts when you are present and available.
3. **Be aware of euphemisms** that may indicate an older adults is feeling lonely, depressed, or anxious. They may not flat out say they are struggling, but instead they may allude to feeling "tired," "blue," or "not myself." Try to listen for these cues and gently respond with a clarifying question such as, "You said you're feeling tired. Is that similar to feeling down or depressed?"
4. **Normalize experiences**, such as feeling lonely, depressed, or anxious, to remove any perceived stigma about these feelings. You might say, "I know this is a difficult time and many people in your situation are feeling [lonely], [down and depressed], [jittery and anxious]. Do you ever feel that way?"
5. **Provide empathic responses** when older adults share struggles. You can simply name what they are feeling when you get a sense of what that is (Examples: "it's scary", "you miss having meals with your friends", "it's lonely", "you've got a lot on your mind", etc.).
6. **Don't give advice or problem solve, listen instead!** What is needed is for someone to take the time to listen, care, and understand. Paradoxically, they feel better when someone else has heard them and genuinely cares, not when advice has been given.
7. When you think you understand the story, **listen some more.** It takes time and investment to really connect. When you have truly connected, the other person may share more things that are going on that are below the surface.
8. **Ask open-ended questions** as opposed to closed-ended questions. Open-ended questions are not answered with Yes-No. Instead, they elicit a dynamic response from the other person. Open-ended Example: "What is on your mind?", "What did you have for dinner?", "Last time we talked about x, y, z, how are you doing with those?", or "Can you share with me a low, and a high experience since the last time we spoke?". Closed-ended question, such as "Do you have any needs? Are you ok?" are unlikely to elicit discussion.
9. **Ask about their lives.** People have amazing life stories, and are often eager to share. Ask them things like "How far back can you remember?", "Can you share a favorite childhood memory?", "Might you remember what it was like in elementary school?", "What is the most impressive thing you can remember from your teenage years?", "Are there meaningful life events that come to mind from middle age or older adulthood?", "Who were the influential people in your life?", "Can you tell me about... College (if attended)? Your work/career? Significant relationships? Major life events? Marriage? Kids?"
10. Many older people love talking about their families, prior professional lives, and happy memories from their past. When they start talking about these, **you can always reflect** that they "love talking about their loved ones", and ask them "what else", "what

happened next", "what happened just before", etc. to get them to elaborate on something that matters to them.

11. It may be helpful to **take notes** either during your conversation or immediately afterwards. That will allow you to reference information you learned in prior conversations. It means a lot when you remember specifics that are important to the person you are talking to, e.g. remembering the name of their child or grandchild.
12. Consider **preparing for the conversation**. It is not necessary to have a script, but try to have some general conversation prompts handy in the event that older adult that isn't very talkative.
13. **Remind the older person you're speaking with that they are not a burden**. During hard times it is easy to believe you need more than you have to give. Note that we all need help at times.
14. **Foster a sense of belonging** by listening for meaningful relational connections in the older person's life. Describe how the older person matters to others, and to you.
15. If you hear references to not wanting to live, **be with them in their pain**. Ask directly about suicide (e.g. "*sometimes when there are so many problems, people start to think about suicide, are you thinking about suicide?*"). Contrary to the myth that it is a danger, research shows that asking about suicide will bring relief -- they are no longer alone with those thoughts. You can't take away the stressful life events, but you can hear and understand their suffering. The hard work is the heart work. Your sincere care and concern is a strong life promoter, and buffers suicide. Be sure that you understand and follow your organization's protocols for seeking help when an older adult expresses suicidal thoughts. The National Suicide Prevention Lifeline is also available to help: 1-800-273-8255.
16. Ask whether the client is planning to come back to **congregate meal site** if/when it's possible again. Let them know that you are looking forward to seeing them again *in person* when it's safe.
17. **Express gratitude**. There will be things you will get from the calls that you might not even know you needed or wanted. Thank older adults for talking with you, and for sharing their wisdom.

Related resources:

- Talking Points Table (see below)
- [Social Isolation and Loneliness Among Older Americans during COVID-19: Evidence, Policy, and Advocacy](#) (2020, National Council on Aging)
- [Addressing Social Isolation for Older Adults during the COVID-19 Crisis](#) (2020, ADvancing States)
- [Tools for Reaching a Remote Audience](#) (2020, National Council on Aging)

Contributors: [Matthew Fullen](#), Ph.D. and [Laura Shannonhouse](#), Ph.D., ACL Innovation in Nutrition Grantee (project summary at: <https://acl.gov/programs/nutrition/innovations-nutrition-programs-and-services-0>)



***Talking Points Table***

Day/Time of Call \_\_\_\_\_

Older Adult Name \_\_\_\_\_

<b>Names to keep track of...</b>	
Children	
Grandchildren	
Siblings	
Parents	
Friends	
<b>Favorite things...</b>	
Hobbies / activities	
Places	
Movies / Shows	
Sports teams	
Foods	
Other...	
<b>Significant Life Events...</b>	
Career	
Education	
Military service	

<b>Challenges / Stressors...</b>	
Medical Issues	
Significant Losses	
Thwarted belongingness	
Perceived burdensomeness	
Suicide risk (y/n)? Contact nutrition services coordinator?	
<b>“Reasons for Living” ...</b>	
Specific Family/Friends	
Strengths and Hopes	
Things to look forward to	
<b>Congregate Meal site</b> Returning (y/n)?	