



## **Healthy IDEAS**

### Identifying Depression, Empowering Activities for Seniors

Healthy IDEAS is an evidence-based program that integrates depression awareness and management into existing case management services provided to older adults. This program addresses depression in older adults often occurring with chronic illness and other losses later in life.

Healthy IDEAS is a national program with measurable results and meets HHS/ACL criteria for an Evidence-Based Program for OAA Title III.

Healthy IDEAS is a one-on-one intervention that can be implemented in-person or virtually/telephonically. The program promotes social connections for older adults experiencing isolation or loneliness.

# HEALTHY IDEAS IMPROVES QUALITY OF LIFE BY:

- Screening for symptoms of depression and assessing their severity
- Educating older adults and caregivers about depression
- Linking older adults to primary care and mental health providers
- Empowering older adults to manage their depression through a behavioral activation approach that encourages involvement in meaningful activities.

#### FOR OLDER ADULTS

- Fewer symptoms of depression
- Decreased physical pain

- Better ability to recognize and self-treat symptoms
- Improved well-being through achievement of personal goals

#### FOR SERVICE PROVIDERS

- Expanded capacity to address depression
- Better communication and stronger partnerships with mental health providers
- Opportunity to deliver a proven, successful program that addresses critical client needs
- Improved staff knowledge and confidence in helping clients

# FOR COMMUNITY MENTAL/BEHAVIORAL HEALTH PARTNERS

- Increased opportunity to work with diverse populations of older adults
- Strengthened connections to community agencies
- Greater opportunity to reach and help under-served older adults

#### **MORE INFORMATION**

For more information call 978-946-1211 or visit <u>www.healthyliving4me.org</u> or <u>www.healthyideasprograms.org</u>.

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# CASE STUDIES: HEALTHY IDEAS IN THE COMMUNITY

**MARY** was an 88-year-old married woman who was feeling less than herself. She began Healthy IDEAS, took an initial assessment, and scored 13 on the validated PHQ-8 scale, which indicated moderate depression. After working with her care manager and working toward her goal of tutoring children after school, Mary received a post-intervention score of 1, indicating no depression. Mary reports this is the best she has ever felt and her family has commented on how much more energy she has and how her mood has improved. Mary self-reported that her health improved, she had increased confidence and participation in physical and social activities, and had improved communication with her healthcare provider (PCP).

**CLIFF** was a 70-year-old married man with moderate depression. Cliff experienced extreme anxiety and was concerned the Healthy IDEAS program wouldn't work for him. Cliff's goal was to learn how to ride the bus so he could go to medical appointments and the senior center. Cliff went through the program, eventually reaching a PHQ-8 score of 4, indicating no depression. Cliff was able to learn the bus route, take the bus to his appointments and get to the senior center. Cliff was so excited about making new friends that he was planning on offering a class at the senior center to teach others how to play guitar. Cliff reported his activities were no longer affected by his emotions. He was enjoying being around others, had increased confidence, improved physical and social activities, and he had improved his communication with his PCP.

**JOHN**, a 77-year-old divorced man, was screened for the Healthy IDEAS program after living in a nursing home for over a year. John

had suffered a stroke and reported to his care manager that he felt hopeless and wished he would die. John's PHQ prescore was 11, indicating moderate depression. After working with his care manager for three months in the program, John's PHQ-8 post score was 6, indicating mild depression. John told his care manager that he knows physical limitations will affect his ability to do certain things; however, he is thankful he is alive. John reported enjoying living back in the community and he now has confidence that he can do things to improve his mood. John also reported improved communication with his healthcare provider and said his depression no longer affects his ability to participate in activities. John was committed to continuing his work to decrease his depressive symptoms further.

**VIRGINIA** was a 69-year-old divorced woman with a PHQ prescore of 16, indicating moderately severe depression who screened positive on the suicide risk screening. Her care manager followed Elder Services' Suicide Prevention Protocol, and Virginia was given a thorough risk assessment to ensure her safety. Virginia set multiple goals, including wanting to knit and crochet again. Six months later, Virginia had a post score of 1, indicating no depression. While enrolled in the Healthy IDEAS program, Virginia was told she had skin cancer and would need to have surgery. She was able to take this distressing news in stride and continued to work on improving her mood. Virginia reported that she has increased her physical and social activity, has improved communication with her health-care providers, and she has complete confidence in her own ability to take on activities that improve her mood.



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