

Depression and Aging Workshop Notes- given by Marianne Gontarz York, M.S.W., L.C.S.W.

The talk given on Depression and Aging by Marianne York was an excellent overview of depression and causes as well as helpful ways we as volunteers can help our LITA friend navigate their depression.

The following highlight the most important concepts. Please use the articles displayed on our website www.LITamarin.org to further your understanding of depression and tools.

Almost all of the participants had LITA friends suffering from depression. The stories shared by each volunteer illuminated the pervasiveness of depression, the different faces and manifestations as well as the success stories of friendships being the catalyst for change.

The three most important things a volunteer can do:

Show up

Be Present

Listen

Understand the types of loss experienced by those moving to a facility (health, independence, food choice, friends, family, children, spouse/partner, car, pet, hobbies, and daily freedoms of choice and control). Understand basics of depression. [Symptoms and Causes of Depression](#), [Contributors to Mental Wellness](#)

We cannot cure, but we can listen and give the gift of our friendship.

Depression can be contagious.

Depression and Anxiety are the top 2 mental health issues in care facilities.

One of the most beneficial things we can do for anyone in a facility is to find ways to help them express themselves. We do this by finding out more about them, asking questions, understanding any limitations (sight, hearing, physical, memory issues?) . [Hearing and Sight Loss](#), [Tips for Visiting Residents with Hearing Loss](#), [Stages of Alzheimer 's Disease](#)

Understand the natural progression and Erik Erikson's developmental final stages of life that involve mortality and grief. Erikson's final developmental stages of life, Despair and Integrity, help us understand why a person may or may not be depressed in their final stages. [Integrity vs Despair](#)

While we may want to stay away from talking about mortality and death, elders may want to discuss and talk about these things and do not have anyone to share these thoughts and feelings with. Discussions about death, *suicide, leaving a legacy and loss of those around can be supported by implementing **ACTIVE LISTENING**. [How to Cultivate the Art of Active Listening](#)

***Note about suicide and mortality.** *The topic may come up often. It is important to listen and fully engage your friend. Those heading to the end stages of life often say things like: "She was so lucky to have died in her sleep. " "I wish it would have been me." (in reference to hearing about a death in the facility). "I wish I could die." There is a difference between talking about how lucky someone was to have died and to actually have a plan of action. It is important to know the difference between expressing thoughts vs. someone who has declared an actual plan to commit suicide. You need to report this, even if they wish you to keep your talk of an active suicide plan confidential. Depending on the type of facility you would report this to the nurse's station or the activity coordinator. It is also important to notify the nurse or activity coordinator should you feel your friend is depressed. The staff most likely already knows, but your information may be helpful.*

It is important to actively listen to your friend. Step back and assess how you communicate. Do you stop the conversation and insert your thoughts and ideas and offer suggestions? Or do you fully engage, listen and support and encourage more sharing by using pregnant pauses? (Allowing time and quiet to happen instead of filling each moment with talk.)

Be aware of several barriers to active listening:

Loss of hearing and/ or sight

Cultural accents

Noise (Lots of TV noise can be distracting)

Prejudices, assumptions, judgments

It takes time and energy to really actively listen, so be sure the setting allows for quality interactions.

It is also important to become a detective and really get to know your friend. Find out what is meaningful to them to build an atmosphere of trust. Remember you cannot cure depression but you can help attain peace.

The three top and most important symptoms of depression that are always present in a diagnosable case of depression are: low mood, inability to feel pleasure and loss of interest.

The most important thing volunteers can do is to break isolation. The mission of LITA is to break the circle of isolation felt by those in long term care facilities. All LITA volunteers are already participating in this crucial step.

Communication tools to help you create trust and build friendships are:

1. Get to know your friend. Ask questions. Find out what is inside. [Tips to Communicating](#), [What's Inside](#) and [Conversation Starter Questions, Compassionate Communication.](#)

2. Reminiscing Activities, [Volunteer Newsletter Focus](#) , [Every Picture Tells a Story](#) and [Linking the Past to the Present](#)
3. Create a reassuring ritual. One volunteer sings the same song at the end of each visit.
4. Share an activity with your friend within the facility to broaden their community.
5. Actively Listen- Let your friend share the difficult topics with you. Listen without judgment or need to solve or advise.