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Decreasing Social Isolation in Adults via a Cognitive Wellness Program

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**RESULTS (continued)**

In October 2015, Buzzards Bay Speech Therapy and Coastline Elderly Services, Inc., collaborated to address concerns regarding healthy aging in New Bedford. According to the 2014 Massachusetts Healthy Aging Data Report, New Bedford scored lowest in the state with regard to healthy aging, with 31 health indicators rated below the state average, including depression, mental illness, stroke, and Alzheimer’s disease. Recognizing that these indicators can lead to social isolation and further exacerbate health concerns, we developed a program focusing on cognitive wellness in order to enhance social engagement.

**METHODS**

The program uses class-based instruction and lively activities to educate and engage participants while practicing tips and techniques to improve thinking, memory, communication, and socialization skills. Our program travels throughout the community, as we hold classes in local Senior Centers, Councils on Aging and congregate housing.

**OUTCOME MEASURES/TOOLS**

To assess response to our classes and the impact we were having on participants, our team created a 3-part research project designed to:

- **Quantitatively** assess program outcomes.
- **Qualitatively** assess program impact on participants, and
- Engage participants and community stakeholders in Participatory Action (Bergold, Thomas, 2012) to more broadly impact service delivery in the community.

**RESULTS**

**PART 1: QUANTITATIVE RESULTS**

Using the pre/post questionnaire and calculating Gain Scores, we determined that the classes were most helpful in:

- **Top 5 ordered by average gain scores, most to least helpful:**
  - Providing participants with a sense of optimism (Q13)
  - Increasing participants’ likelihood to socialize outside of their home (Q11)
  - Decreasing participants’ willingness to have others speak for them (Q7)
  - Decreasing participants’ avoidance of situations where communication is necessary (Q6)
  - Increasing participants’ confidence in their communication skills (Q9)

**Benefit of Classes to Participants as measured by Average Gain Scores**

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Avg Gain Score = Group avg post score – Group avg pre-score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enjoyed Class (Q1)</td>
<td><strong>5</strong></td>
</tr>
<tr>
<td>Communication Skills (Q5)</td>
<td><strong>3.2</strong></td>
</tr>
<tr>
<td>Perceived Stress (Q6)</td>
<td><strong>2.8</strong></td>
</tr>
<tr>
<td>Fun (Q8)</td>
<td><strong>2.5</strong></td>
</tr>
<tr>
<td>Satisfaction w/Instructor (Q10)</td>
<td><strong>2</strong></td>
</tr>
</tbody>
</table>

**Results of Satisfaction Survey**

**Qualitative Analysis**

- **Arching Themes**
  - Enjoyed Class (Q1)
  - Communication Skills (Q5)
  - Perceived Stress (Q6)
  - Fun (Q8)
  - Satisfaction w/Instructor (Q10)

- **Qualitative Analysis**
  - Arching Themes
    - Enjoyed Class (Q1)
    - Communication Skills (Q5)
    - Perceived Stress (Q6)
    - Fun (Q8)
    - Satisfaction w/Instructor (Q10)

**Research Design**

- **Part 1: 2015-2017**
  - To quantitatively assess response to our classes, we developed two outcome measures:
    - A 13 question pre/post questionnaire using a 5-point Likert scale adapted from the OASES (Yarus, Coleman, Quesal, 2007) and
    - A 7 question binary (Y/N) response satisfaction survey administered post participation in our program.
  - Sample questions from the pre/post questionnaire:
    - (Q6) I avoid situations where I have to communicate with others.
    - (Q7) I let other people speak for me.
    - (Q9) I do not have confidence in my ability to communicate.
    - (Q11) I leave my home at least once a week to socialize.
    - (Q13) I am optimistic.
  - Sample questions from the satisfaction survey:
    - (Q2) I have more confidence in my communication skills since taking this class. (Y/N)
    - (Q5) I have formed or renewed a friendship since taking this class. (Y/N)
    - (Q7) I recommend this class to other friends with similar issues. (Y/N)

- **Part 2: 2017-2018**
  - To qualitatively assess the impact our classes were having on participants, we conducted semi-structured interviews (Edwards and Holland, 2013) using open-ended questions and multi-modal communication techniques to address the needs of participants with communication challenges. We then determined the benefit of our program through content analysis of video/audio recorded material and written responses.

- **Part 3: 2018-2019**
  - Finally, we wished to engage participants and community stakeholders in Participatory Action to more fully identify the needs of those in the community at risk for social isolation, the barriers to access and the resources that may be available/created for them in order to effect social change.

**SELECT REFERENCES**


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- All of the participants and caregivers who have supported our program through their time, attendance and advocacy.

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