



BOOST

Best-Practices in Oral Opioid agonist
Therapy Provincial Collaborative

Welcome
to the
***BOOST QI Network Educational
Webinar 6***

*****Please type your name, team name and location in the
chat*****

Tuesday, September 28th, 2021

**The session will be recorded for educational purposes,
if there are any concerns with this, please send a direct message to Angie Semple/CfE
BOOST (host)**



Welcome

We would like to begin by acknowledging that the land on which we gather is the unceded and traditional homelands of the Coast Salish peoples.

We also want to acknowledge that many others may be joining from different traditional homelands today



Santé
Canada

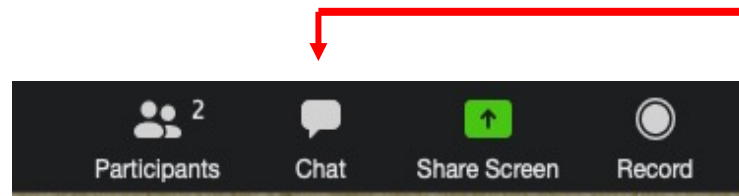


BRITISH COLUMBIA
CENTRE for EXCELLENCE
in HIV/AIDS

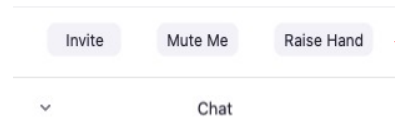


*Thank you
to all our funders and partners,
including
patient partners and family voices*

ZOOM Control Panel

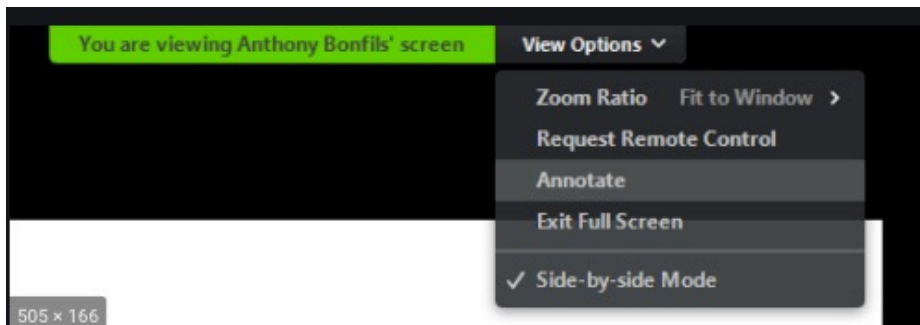


Chat or ask questions using the chat function



Use the “raise hand” feature to notify the host that you would like to be unmuted

Click “participants” and “raise hand” on the right-hand side of the screen



Click to use annotation tools

Agenda

Time		Topic	Speaker(s)
8:30AM	5 mins	Welcome and introductions	Valeria Gal
8:35AM	30 mins	Social Isolation: What is it and how can we deal with it?	Simon Elterman
9:05AM	10 mins	Q&A	All
9:15AM	30 mins	Action planning (group activity)	Cole Stanley
9:45AM	5 mins	Wrap-up & evaluations	All

Objectives



- To define and learn about what social isolation is (personally and societally)
- To learn how to assess and address social isolation from a cognitive, behavioural, and contextual perspective
- To use a QI approach to integrate the learnings into your own clinical practice

Social isolation: What is it and how can we deal with it?



Isolation & Loneliness

Simon Elterman, PsyD





DEFINITIONS

Social Isolation

- Various defined and often used interchangeably with “loneliness”
- The absence of social interactions, contacts, and relationships with family and friends, with neighbors on an individual level, and with society at large on a broader level.

Loneliness tends to be subjective while social isolation is objective. Loneliness reflects the quality as well as quantity of social interactions.

- Commonly examined in impoverished and elderly populations

Social Exclusion

- The involuntary and intentional separation from others E.g., ostracism, solitary confinement, and quarantine

Which of these people are lonely?



EFFECTS OF SOCIAL ISOLATION

Thoughts

- ↓ Cognitive functioning
 - Processing speed, attention, working memory, executive functioning, verbal memory, immediate recall
 - After controlling for mood
 - Increased incidence and progression of Alzheimer's Disease
- ↑ Hypervigilance and sensitivity to negative social information
- ↑ Positive and negative psychosis sx's
 - Esp paranoia, higher correlation in non-clinical groups
- ↓ Self-esteem

Feelings

- ↑ Psychiatric sx's in healthcare workers
- ↑ Depression (and anxiety to lesser degree)
 - Irritability, restlessness, clinginess in children
 - Increased suicidal ideation and attempts
 - Even following brief (14d) social distancing, after controlling for COVID-19 related distress
- ↓ Pleasure from positive social stimuli

EFFECTS OF SOCIAL ISOLATION CON'T

Behavior

- ↓ Self-regulation
 - Less exercise, more tobacco use, binge eating
- ↑ Maladaptive safety behaviors and negative social interactions
 - Vicious circle
- ↑ Rates of hospitalization and readmission

Physiology

- ↑ Salivary cortisol
- ↓ Immunity and ↑ inflammation
 - Under-expression of anti-inflammatory genes and over-expression of genes bearing response elements for pro-inflammatory response
 - Independent of cortisol levels, demographic, psychological, and medical characteristics
- ↑ Cardiovascular disease
- ↑ Blood pressure
 - Independent of age, gender, race or ethnicity, cardiovascular risk factors, medications, health conditions, and the effects of depressive symptoms, social support, perceived stress, and hostility
- ↑ Mortality (all-cause)
 - Comparable to impact of cigarette smoking

How the World's First Loneliness Minister Will Tackle 'the Sad Reality of Modern Life'

The U.K. Has Appointed a Minister for Loneliness

The newly appointed minister Tracey Crouch will lead a governmental group to tackle the issue



UK Has A Minister Of Loneliness: This Is How Bad Loneliness Has Gotten



Bruce Y. Lee Senior Contributor [Healthcare](#)

I am a writer, journalist, professor, systems modeler, computational and digital health expert, avocado-eater, and entrepreneur, not always in that order.

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WORLD

SMARTNEWS Keeping you current

The U.K. Now Has a “Minister for Loneliness.” Here’s Why It Matters

Tracey Crouch will oversee the government’s efforts to tackle “the sad reality of modern life”



Tracey Crouch, who will oversee issues related to loneliness and isolation in the U.K. (Wikimedia Commons)

The Two-Way

INTERNATIONAL

U.K. Now Has A Minister For Loneliness

January 17, 2018 - 4:56 PM ET

MERRIT KENNEDY



The New York Times

U.K. Appoints a Minister for Loneliness



Tracey Crouch, left, Britain's under secretary for sport and civil society, is to coordinate the government's response to loneliness. Stephen Pond/Getty Images for Sport England



Two years after hiring a Minister of Loneliness, people in the U.K. are still lonely

Published: Jan. 29, 2020 at 11:50 a.m. ET

By Grace Birnstengel

6

But despite minister turnover, Britain's mission against loneliness hasn't budged



Mar 28, 2018

Does BC need a UK-style Minister of Loneliness?

By Peter Prontzos

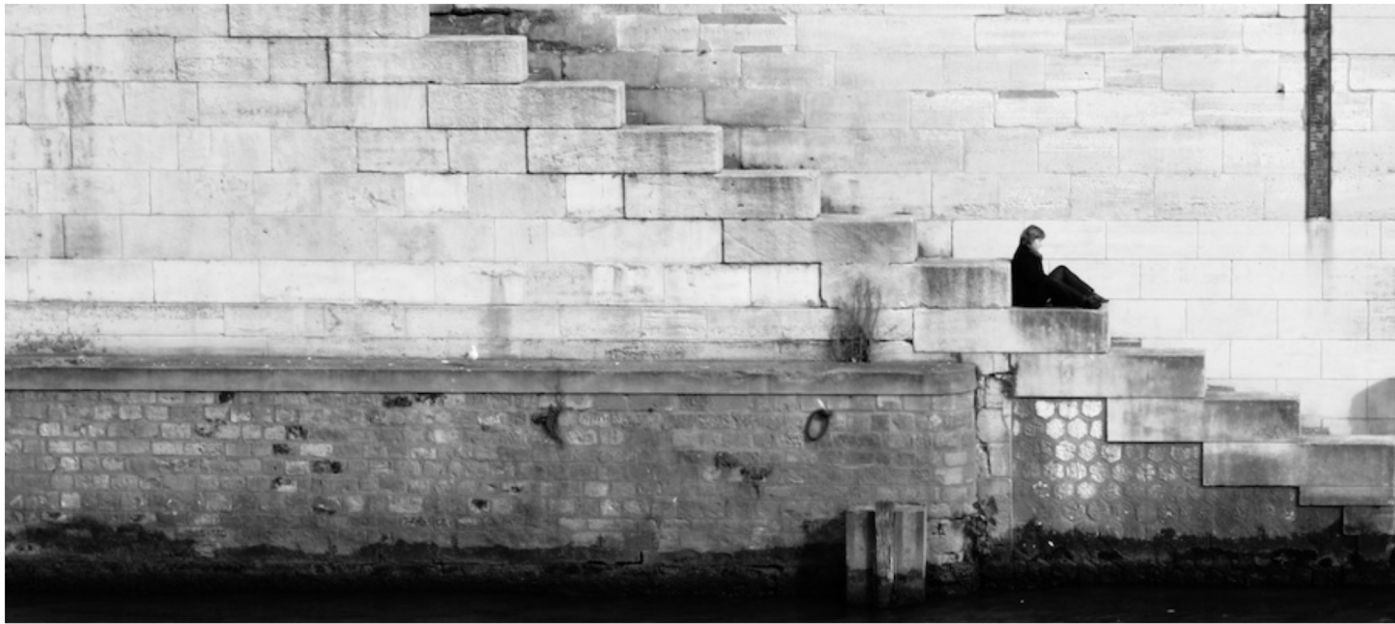


Image: Pxhere



Group Question

In the population you work with, what do you see as a driver for loneliness?

What shows up for
you when you see
this?





**It's not hard because
you're not good at it.**

It's hard because it's hard.

“I notice that I have the urge to come in and Fix how you're feeling, but I know that I can't “Fix” it with a capital “F”. If we took 1000 people and put them in your position, most of those people would be just as lonely.



Before any treatment, there must be alignment

Three things that must be present before any intervention:

1. Listening
2. Reflection
3. Validation



Now, to approaches

1. Cognitive
2. Behavioural
3. Contextual





Cognitive Interventions

- Ask yourself why you feel lonely
 - What is your contact with people like?
 - Are you around people but feel alone?
 - Have you been isolating yourself?
 - Are you comparing yourself to other people?
 - or how you think it should be?
 - Are you in a transitory/temporary state?
- Change your relationship with your thoughts
 - Write them down, imagine them on a billboard
 - Harder: Sing them
 - Don't try to argue with the thoughts/feelings
 - Sit with it
 - And even try to make friends with it





Contextual Approaches

Notice and name what story your mind is saying



- I'm lonely because X
- This loneliness means I'm Y
- I might as well Z

Again, normalize and validate

- There are no guarantees, only willingness to create opportunities

Exercise: An ecological assessment of your efforts!

Can we reframe loneliness as solitude?



There are two kinds of people



GUADA

Behavioural Interventions

Behavioural Activation

- Pleasure and Mastery list
- Activity scheduling
- **Volunteering/community meetings**
- Virtual meetings (build Belongingness)
 - Notice if your mind tells you a story here
 - "Virtual meetings suck!" "It won't work!"

Start small - Be strategic

- What is realistic?
 - 95% rule
- What did you like before?
- Small steps!

Activity Planning
Part of feeling good is about planning, and carrying out, activities that we enjoy. Try to plan an activity you enjoy for the morning, afternoon or next week. Record how you feel when you complete one of these. Try to include a mix of activities with other people as well as activities you do

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						
Evening						

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Thank you!

Questions?

On to our exercise with Dr. Stanley.

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Other links

<https://cmha.bc.ca/documents/coping-with-loneliness/>

<https://www.uwlm.ca/news/better-together-research/>

<https://bcmj.org/blog/many-facets-loneliness>

policynote.ca/does-bc-need-a-uk-style-minister-of-loneliness/

<https://globalnews.ca/news/7650743/loneliness-pandemic-mental-health/>

<https://globalnews.ca/news/7602406/loneliness-pandemic-canada/>

<https://www150.statcan.gc.ca/n1/pub/82-003-x/2020003/article/00003-eng.htm>

<https://www150.statcan.gc.ca/n1/pub/36-28-0001/2021007/article/00001-eng.htm>

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Questions & Discussion



A top-down view of a wooden desk. In the center-left is a black tablet displaying the text 'TIME TO EVALUATE!' in large, bold, black and red letters. To its right is a blue spiral-bound notebook with a wooden pen resting on it. Above the tablet and notebook are several items: a white mug of black coffee, a purple paperclip on an orange sticky note, a light blue paperclip on a yellow sticky note, a light blue sticky note, and a green paperclip on a pink sticky note.

**TIME TO
EVALUATE!**

Link in Chat 



BOOST

Best-Practices in Oral Opioid agonist
Therapy Provincial Collaborative

THANK YOU!

Upcoming Sessions:

- BOOST QI Network Annual Congress (Tuesday, November 30th, 9AM-12PM)

CONTACT US: boostcollaborative@bccfe.ca

VISIT THE WEBSITE: <http://www.stophiv aids.ca/oud-collaborative>