

# **Exercise Interventions for Older Adults with Depression**

## **What is Depression? How is it different in older adults?**

Depression is defined as “a 2 week or longer period of depressed mood, anhedonia, disturbance in appetite, disturbance in sleep, poor concentration, poor energy, disturbance in psychomotor activity, and suicidality” (Barney & Perkinson, 2016, Page 26). Depression is the most common psychiatric illness in the gerontological population, and 50% of geriatric population have their first onset of depression later in life (Barney & Perkinson, 2016). Depression is a common secondary disorder to many primary illnesses that affect the older generation such as dementia, alzheimers, and stroke. Older adult’s also may have decreased cognition and executive functioning making it difficult for the client to achieve their goals, no matter how big or small.

It is important to know that although depression is common in the older adult population, it is a serious mental illness that should be treated as any other physical illness. Stigma around depression can prevent older adults from seeking help because they may feel that it is part of getting older, but that is not the case.

## **What causes it?**

There are several causes and risk factors for depression according to the National Institute on Aging (2020). Depression can stem from genetics and family history or personal history of depression in early life. Another cause is brain chemistry changes. The brain has many neurotransmitters that control mood and sleep, and when there's an imbalance this can cause depression. Lastly, stress can also lead to depression. Losing a loved one, moving to a new place, or changes in routine can trigger the illness (National Institute of Aging, 2020).

## **How Depression hinders independence**

From an occupational therapy perspective, depression greatly impacts an individual's ability to engage in their normal occupations such as their activities of daily living (ADLs). ADL’s include activities such as showering, bathing, grooming, and simply taking care of one self. Since depression causes poor energy and depressed mood, many client’s have a hard time getting out of bed and performing these essential occupations that give client’s independence (Barney & Perkinson, 2016,).

Not only does decreased energy and depressed mood affect client's with depression ability to participate in ADL's, it affects their ability to engage in instrumental activities of daily living (IADLS). IADLS include driving, cooking, cleaning, social interaction, and much more.

### **Interprofessional Treatment**

The most effective treatment to depression is psychotherapy or talk therapy paired with medication (National Institute of aging). A psychologist or social worker can implement psychotherapy and provide skills to help the symptoms of depression. A physician or psychiatrist can prescribe medication such as antidepressants that will help increase mood (National Institute of aging, 2020). A physician can also prescribe or suggest occupational therapy services, group therapy, or other community programs.

### **How to find a therapist**

To find a therapist without going online, ask your primary care physician if they can refer you to one. Remember a psychiatrist prescribes medication and can diagnose depression, while psychologists and counselors can deliver talk therapy.

To find a therapist online, here is a link. To find a therapist, simply click on the link and type in your city and your insurance that you have. If you need help, ask a family member or friend to help you navigate the website.

**Link:** <https://www.psychologytoday.com/us/therapists>

### **Occupational Therapy Treatment Approaches:**

As mentioned early, Occupational therapy focuses on individual's abilities to complete their ADLs, IADLS, and other occupations. Depression can greatly decrease one's ability to participate in these activities. Aside from psychotherapy and medication, the third most effective depression treatment is exercise. Occupational therapist's can aid in an exercise program and or help find programs near the client's residence.

### **How does exercise help occupational engagement?**

Exercise has been proven to increase levels of serotonin, the neurotransmitter that helps the brain regulate mood, sleep and appetite. Exercise has also been proven to help reduce immune system chemicals that make depression work, and is also a way to interact with others ( Mura & Carta, 2013). Many studies look at how

exercise can help older adults with depression, and it was found that the most effective exercise that helped depression patients was supervised aerobic exercises (Mura & Carta,2013). Older adults who are depressed have low motivation, so it is noted that having others to hold them accountable and engaging socially is the best way to implement an exercise program. Also, exercise does not have to be “traditional” and can also be done on one’s own in order for it to be effective (Joshi et. al, 2016).

### **Getting started and being accountable for exercise**

- Exercise with family and friends
- Use an apple watch or step meter to help gauge your exercise
- Exercise at the same time each day to create a routine
- Set an alarm for exercising
- Journal after exercising to see how it makes you feel better

### **Higher intensity exercises that can be done with others**

#### ***Aerobic and strengthening exercises with others***

The evidence has shown that supervised aerobic exercise that focuses on balance, cardio, and strength and resistance exercises are most effective for reducing symptoms of depression (Joshi et. al, 2016). This type of exercise is usually the hardest to obtain because of expenses, but there are programs to help with this.



Silver sneakers is a low cost workout program and gyms that provide classes for all skill levels. You can find the link to find classes near you here:

<https://www.silversneakers.com/class/signature-classic/>

The senior Alliance also offers similar classes:

<https://www.thesenioralliance.org/programs/education/>

### **Lower intensity exercises that can be done alone**

#### ***Seated exercises***

Seated exercises are perfect for older adults who have weakness in their legs, wheelchair users, cardiac patients, or for anyone starting exercises and are worried about the intensity. This makes working out possible with just a chair! Studies have shown that seated exercises that were performed 3-4 times a week were just as effective as lowering symptoms of depression as regular aerobic exercise (Choi & Sohng, 2018).

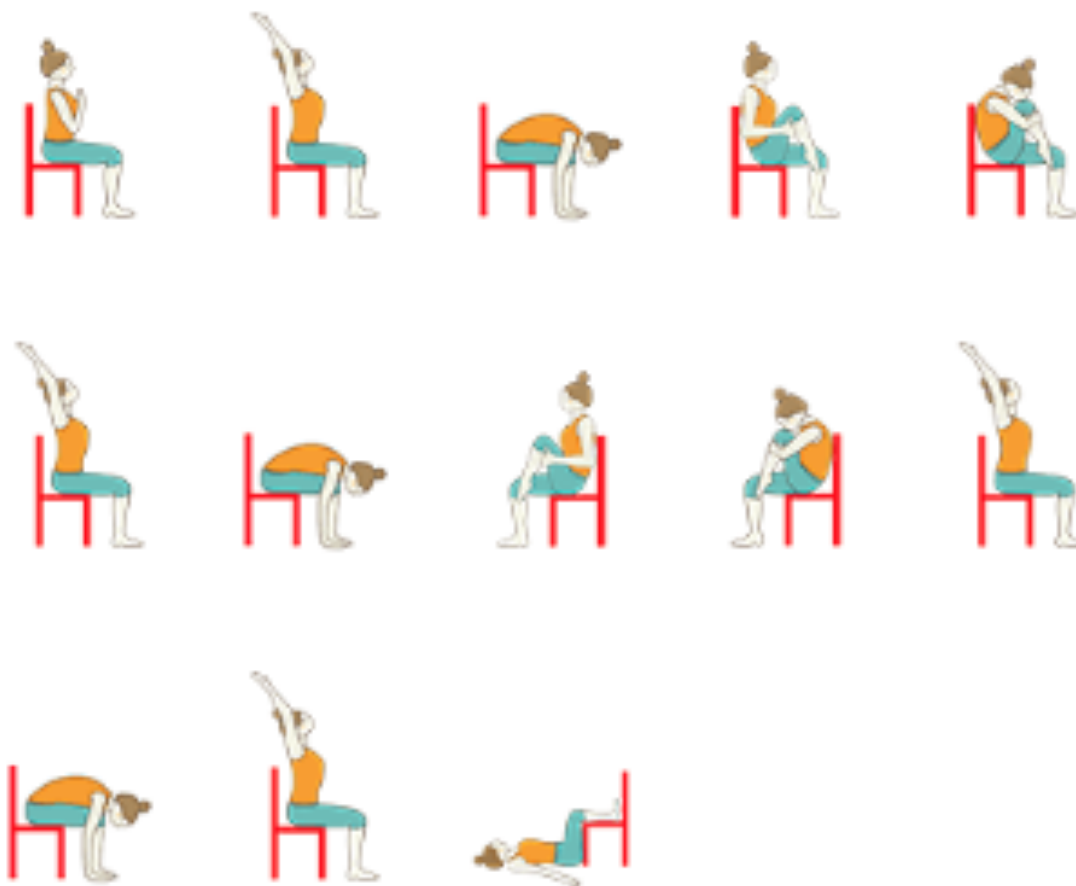


Here is the link for some seated exercises:

<https://californiamobility.com/21-chair-exercises-for-seniors-visual-guide/>

#### ***Yoga***

Yoga builds strength and flexibility as well as improving balance. Yoga is a great alternative to intense workouts because it is easy on the joints. Individuals with multiple sclerosis, low back pain, and unstable knees can benefit from yoga (Joshi et. al, 2016). Yoga has been proven to lower symptoms of depression because of its connection between deep breathing and movement (Joshi et. al, 2016). Poses can be used in seated and in standing. Here are some beginner yoga poses. When moving to the next pose, make sure to sync your breathing to inhale when moving to the next pose.



**A great yoga video to do on your own:**

**<https://www.youtube.com/watch?v=kFhG-ZzLNN4>**

***Walking + Gardening/ domestic activities***

If your body allows it, walking is a great exercise that can aid in decreasing the symptoms of depression, as well as gardening and other domestic activities (Joshi et. al, 2016). The hardest part of these activities is staying accountable and the weather. Walking with a friend or spouse can help you stay accountable. Contact your local mall to see if you can walk there in the winter as they usually have walking times.



If you are interested in starting a garden here is a link:  
<https://www.miraclegro.com/en-us/library/gardening-basics/10-top-gardening-tips-beginners>

### **ICF and Occupational Engagement**

Depression hinders independence by causing symptoms of loss of sleep, loss of appetite, and loss of motivation. But, exercise has been proving to decrease these symptoms which will then allow individuals to increase their engagement in their daily activities again. Activities such as mobility in the home and the community and physical activity and exercise in the ICF will be increased, as well as participation in self-care and social engagement.

## References

- Barney, K. F., & Perkinson, M. A. (2016). *Occupational therapy with aging adults: Promoting quality of life through collaborative practice*.
- Choi, M., & Sohng, K. (2018). The effects of floor-seated exercise program on physical fitness, depression, and sleep in older adults: A cluster randomized controlled trial. *International Journal of Gerontology, 12*(2), 116-121.  
doi:10.1016/j.ijge.2017.06.003
- Joshi, S., Mooney, S. J., Kennedy, G. J., Benjamin, E. O., Ompad, D., Rundle, A. G., . . . Cerdá, M. (2016). Beyond METs: Types of physical activity and depression among older adults. *Age and Ageing, 45*(1), 103-109.  
doi:10.1093/ageing/afv164
- National Institute on Aging. (2020). Depression and Older Adults. Retrieved August 6, 2020, from <https://www.nia.nih.gov/health/depression-and-older-adults>
- Mura, G., & Carta, M. G. (2013). Physical activity in depressed elderly. A systematic review. *Clinical Practice and Epidemiology in Mental Health : CP & EMH, 9*(1), 125-135. doi:10.2174/1745017901309010125

