

# University of Washington program tries unique approach to help older adults with depression

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Sitting in his Capitol Hill apartment, Russ Welti knew the answer to his problem. Still, he felt stuck, as a familiar sensation weighed on him.

Even in adolescence, he had faced depression. Now at 63, he was retired and taking care of aging parents, facing mobility issues that limited his ability to exercise, and enduring the short, dark days of Seattle winter.

He was on medication and had spent years in and out of talk therapy. Still, this time, he was unsure how to break the spell.

A mailer from Gen Pride, a local nonprofit aimed at serving older LGBTQ+ adults, kept appearing in his mailbox.

It advertised a program aptly titled "Do More, Feel Better," a research project from the University of Washington that trains coaches across Washington state to help adults 60 and older break through their depression.

"I was reluctant to do it but I kept seeing it for like six months," he said

Researchers were searching for volunteers to join as test subjects. One group would receive traditional psychotherapy from a mental health counselor. The other group would get connected to a trained coach and meet with them over Zoom or a [phone call](#) for nine weeks as part of a depression intervention.

"I'm sitting there (thinking) I don't want to do that, but the name 'Do More, Feel Better' was calling me," Welti said.

These coaches would be peers—older adults from senior centers around Washington state who would undergo their own curriculum to then help participants manage their depression.

The million dollar question was: Would the trained coaches do as well as the professionals and, if so, what could this mean for treating more people?

The program, a couple years in the making, is an attempt to bring more accessible services to the state and a nation grappling with a shortage of mental health professionals, even as more people face [mental illnesses](#) like depression and anxiety.

According to a 2023 report from the American Psychological Association "Stress in America," 37% of surveyed adults said they have a diagnosed mental health condition, and almost half said they wish they had someone to help them manage their stress. Chronic illnesses like [high blood pressure](#) or cholesterol, which can be stress-related, have also risen over the last few years, according to the report.

Though adults 65 and up had the fewest mental health diagnosis compared to younger age groups, 74% of them in the report also felt like their problems were not "bad enough" to be stressed about believing others have it worse, indicating older adults downplay their own stress levels.

When it comes to depression: "Invariably, if somebody's feeling sad and not interested they do less," said Patrick Raue, a clinical psychologist and professor in the Department of Psychiatry at the University of Washington leading the research.

"They're withdrawing from other people. They isolate themselves. They're not as physically active or involved in their recreation and hobbies," he said. "We counteract that vicious cycle by helping [them] get in touch with things that are important, that are rewarding or enjoyable and give [them] a sense of accomplishment."

So far the team has four Spanish-speaking coaches and four who provide services in English. They're supervised by Raue through check-ins and the calls with clients are recorded to make sure coaches follow the curriculum. Together, peer coaches provide remote, weekly sessions to

an estimated 60 people who are paid \$150 to participate in the program.

The overall process Raue developed is based on what's called behavioral activation. It falls under the umbrella of cognitive behavioral therapy, a gold standard for treating anxiety and depression.

Raue and his team at the UW are still collecting data, as are other colleagues in New York and Florida but the hope is that a program will prove to be a useful, low-cost intervention that's potentially scalable to senior centers across the U.S. some day.

"It's a high bar, but we're doing our best and we're getting really good results," Raue said.

An article from the National Council on Aging published last year found that clients in Florida reported reduced severity of their depressive symptoms and loneliness through the program.

Do More, Feel Better is inspired by an international movement in low and middle income countries that are similarly facing a dearth of service providers. For example, in Uganda clinicians have been taught how to operate ultrasound machines to help out emergency departments that are understaffed.

Called task shifting or task sharing, the philosophy comes from the health care sector where staff are trained to provide certain services who are then able to meet the needs of more patients. This can include clinicians who aren't doctors, midwives or lay people who can then assist in the health care world without extensive, traditional training.

"It's looking to empower [community members](#) to be able to provide this care for people within their community," said Alex Dillabaugh, a research assistant at the UW working with Raue to reach the Latino- and

Spanish-speaking community.

Coaches are instructed to help their clients start small and to focus on specific and tangible goals. Rather than a general one like losing weight, they advise clients to instead set a plan to take a 20-minute walk outside a couple times a week. Other clients return to old hobbies like knitting or try new activities like calligraphy.

Then, as the nine weeks come to an end, coaches help clients create their own plans to stay healthy and active, to find their own motivation and become their own coach.

Elizabeth Hansen from Moses Lake first got trained last spring and now serves as a coach for older adults who speak Spanish. She has two clients and found the training meaningful for herself and others.

"It's been very rewarding to let them know that depression, it's another illness like diabetes, but we can work it out with the help of this program," she said.

Wolti said he first went into the coaching sessions a little skeptical. As he put it, he already expected doing more activities like cleaning his house and cooking more would make him feel better based on his experience in therapy.

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