



## A community-based program to improve quality of life for older adults

**PEARLS**, the **P**rogram for **E**ncouraging **A**ctive **R**ewarding **L**ives for **S**eniors, empowers seniors through behavioral techniques to actively manage depression and improve their quality of life.

- Conceived in the 1990s by Ed Wagner, MD, MPH, and other key developers of the Chronic Care Model
- Further developed by the University of Washington Health Promotion Research Center and community partners
- Now available for implementation in your community!



**“I very much looked forward to my sessions. They helped me rediscover myself and like myself. I turned around a difficult time for the better.”**

**– PEARLS Participant**

**“Late-life depression** affects 15 to 20 percent of older Americans. Yet, doctors and their older patients often wrongly assume depression is an unavoidable consequence of aging. This needless psychological suffering, the costly health-care ramifications, and the large numbers of aging baby boomers are driving a national search for solutions. **PEARLS is one of these solutions.”**

- Dr. Paul Ciechanowski, Clinical Psychiatrist, Research Investigator & PEARLS Trainer

PEARLS uses a team approach, including psychiatric oversight, which provides a solid foundation to address any clinical issues that may arise.



**PEARLS is included in the National Registry of Evidence-based Programs and Practices of the Substance Abuse and Mental Health Services Agency (SAMHSA)**

### Features and Benefits

- “Here and Now” focus
- User-friendly toolkit
- High participant satisfaction
- Brief implementation
- Common-sense approach
- Team approach

### **A randomized controlled trial demonstrated the effectiveness of PEARLS.**

Research results published in the *Journal of the American Medical Association* report that participants who received the PEARLS intervention were **three times more likely than non-participants** to significantly reduce their depressive symptoms or completely eliminate their depression.\*

\*Ciechanowski, P., Wagner, E., Schmalig, K., Schwartz, S., Williams, B., Diehr, P., et al. (2004). Community-integrated home-based depression treatment in older adults: a randomized controlled trial. *JAMA*, 291(13), 1569-1577. (PubMed #15069044)

# PEARLS is a multi-faceted approach, empowering older adults through

## Problem Solving Treatment

Participants learn to recognize symptoms of depression, understand the link between unsolved problems and depression, and apply a highly effective 7-step approach to solving their problems.

## Social and Physical Activation

Involvement in social and physical activities improves the quality of life and mood of people with depression. Participants are encouraged to engage in activities that most interest them.

## Pleasant Activity Scheduling

People who are depressed generally stop doing enjoyable things. With the help of a counselor, participants identify and participate in personally pleasurable activities, which helps them to manage their depression.

### ***“PEARLS is particularly useful***

*because it is multi-faceted. PEARLS addresses physical and social activation, and helps individuals learn effective methods to solve problems.”*

– Dr. Mark Snowden  
Geriatric Psychiatrist

**“At the conclusion, I wasn’t even recognizable as the same person. With my counselor’s encouragement and understanding, I not only was able to make the health improvements necessary to avoid going to a nursing home, but I overcame my depression and anxiety so that I can now lead a more active and rewarding life, which is the whole purpose of PEARLS.”**

– PEARLS Participant



**PEARLS Web site: <http://depts.washington.edu/pearlspr/>**

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### **PEARLS Training**

- Didactic instruction
- Group discussion
- Delivered by experts who developed it and use it in real-world settings
- Demonstration sessions
- Practice exercises

### **PEARLS Toolkit**

- Comprehensive
- Detailed instructions
- All the forms you need
- User-friendly
- Guidance and tips
- Key element to successful implementation

PEARLS training is sponsored by CHAMMP, the Center for Healthcare Improvement for Addictions, Mental Illness and Medically Vulnerable Populations at Harborview Medical Center, a part of the University of Washington School of Medicine. The original PEARLS research study and subsequent dissemination work have been funded in large part by the Centers for Disease Control and Prevention, Prevention Research Centers Program under cooperative agreements with the University of Washington Health Promotion Research Center (HPRC): U48/CCU009654 and U48/DP000050. HPRC and CHAMMP are indebted to the following organizations, which have provided support and expertise to develop PEARLS training materials and implementation processes: Aging and Disability Services, City of Seattle Department of Human Services; Washington State Aging and Disability Services Administration; and Senior Services.

