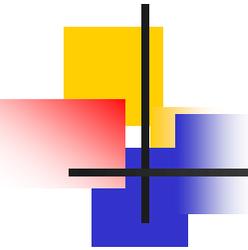


goals for the sixth evening

6

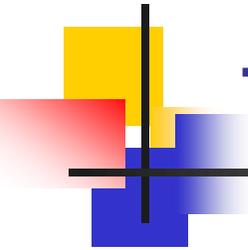
- ✧ review last week's intentions
 - ✧ autogenics: belly, mindfulness, reminder dots, 12 breath exercise
 - ✧ exercise, diet (grains), alcohol, weight, sleep – make personal intentions for these 'basic skills'
 - ✧ relationships: health & wellbeing relevance, charting & intentions for personal community map
-



1st five sessions: progress so far

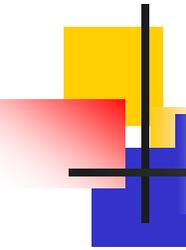
*how did last week's intentions go
and any lessons for this week's intentions?*

- ✧ autogenics: breath focus, second differential & eleven breath exercises
 - ✧ exercise: stamina, strength, quantity, variety
 - ✧ diet/alcohol/weight: breakfast & lunch, etc
 - ✧ rumination/worry & the appreciations exercise
-



focus for sessions five to eight

- ✧ autogenic training: continuing to develop depth in formal sessions and application/mindfulness
 - ✧ continuing with exercise, diet, alcohol & sleep ...
 - ✧ worry & rumination and the garden of eden!
 - ✧ savouring, appreciations and gratitude
 - ✧ emotions – both so-called ‘negative’ & ‘positive’
 - ✧ relationships, ‘personal community’, intentions
-



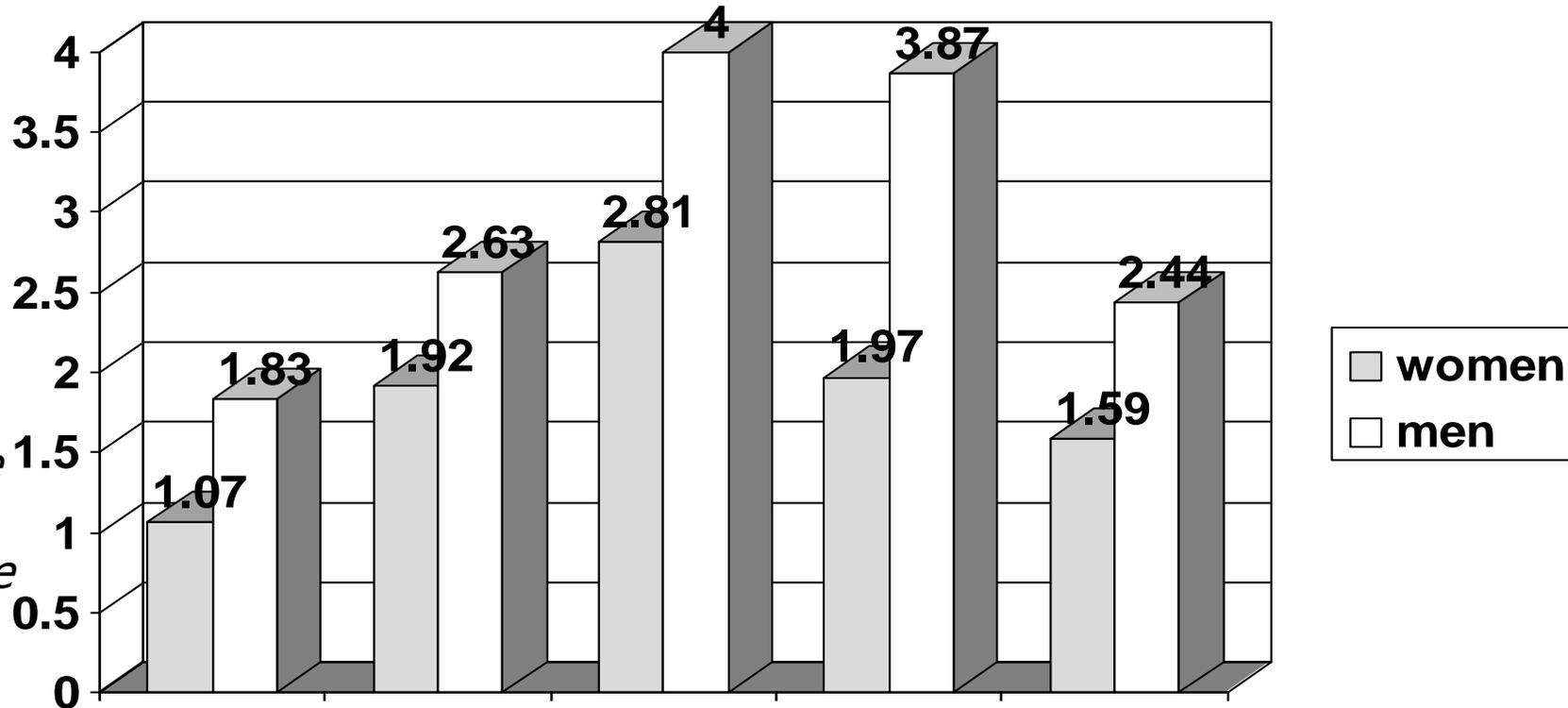
relationships & mortality: research

- ❖ Berkman LF et al *Social networks, host resistance, and mortality: a nine-year follow-up study of Alameda County residents* Am J Epidemiol 1979; 109:186-204
 - ❖ House JS et al *The association of social relationships and activities with mortality* Am J Epidemiol 1982;116:123-40
 - ❖ Welin L et al *Prospective study of social influences on mortality* Lancet 1985;i:915-18
 - ❖ Orth-Gomer K et al *Social network interaction and mortality: a six year follow-up study of a random sample of the Swedish population* J Chron Dis 1987;40:949-57
 - ❖ House JS et al *Social relationships & health* Science 1988;241:540-5
 - ❖ Rosengren A et al *Stressful life events, social support, and mortality in men born in 1933* Br Med J 1993;307:1102-5
 - ❖ Olsen O *Impact of social network on cardiovascular mortality in middle aged Danish men* J Epidemiol Community Health 1993;47:176-80
-

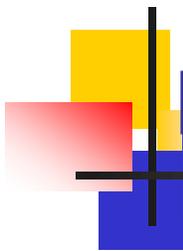
relationships & mortality: figures

relative risk for all cause mortality

these figures are age-adjusted & typically compare the lowest and highest quartiles



this shows the differences found in 5 studies between the those with the lowest & those with the highest levels of social integration



relationships & mortality: comments

- ❖ age-adjusted relative mortality risk between lowest and highest social integration levels (mainly quartiles) in 5 studies are 1.83, 2.44, 2.63, 3.87 & 4.00 for men (3x) and 1.07, 1.59, 1.92, 1.97 & 2.81 for women (2x)
 - ❖ biological, health behaviour, personality and health status variables do not explain away this association
 - ❖ social integration is as strong or stronger as a risk factor than smoking, high b.p., cholesterol & family history
 - ❖ social integration seems to be deteriorating due to changes in divorce rates, proportions of those who are old or living alone, city lifestyles, etc
-