

## **Year-end Report & Reapplication Proposal Form**

**Date:**

September 12, 2025

**Organization:**

LiveWell Foundation ([www.livewell-foundation.org](http://www.livewell-foundation.org))

**TIN & Formal organization name:**

EIN# 81-4711726 (State of PA); LiveWell Foundation

**Contact name, phone, email:**

Stefanie Glick, Executive Director, 267.530.3739, [glick@livewell-foundation.org](mailto:glick@livewell-foundation.org)

**Amount requested:**

\$20,170

**Project title:**

LiveWell Seniors

### **1. What is the problem you have identified? How has it changed?**

Major Depressive Disorder is a leading cause of disability nationwide and is associated with greater functional impairment and higher societal costs than any other chronic health problem. According to the Center for Disease Control, Major Depressive Disorder is the most prevalent mental health problem among older adults (65+), and causes "significant distress and suffering." Both physical conditions (such as stroke, diabetes, cancer, dementia, chronic pain, and poor sleep) and emotional/social conditions (such as loneliness and social isolation) directly increase the risk of depression among the elderly; and the presence of depressive disorders often adversely affects the course and complicates the treatment of other health problems (NIMH).

Despite the high prevalence of seniors affected, depressive disorders are vastly untreated among older adults, with millions of seniors unable to get the mental health support they desperately want and need. Mental Health America (MHA) reports that less than 3% of people aged 65+ receive treatment from mental health professionals, and primary care physicians accurately recognize less than one half of patients with depression. In fact, untreated depression is the leading cause of suicide in elderly Americans. Comprising only 13% of the U.S. population, individuals aged 65 and older account for 20% of all suicide deaths, with nearly six times the average suicide rate for older males. Various factors contribute to the crisis of untreated depression among seniors including: a lack of affordable treatment options; expensive and exclusionary insurance networks; a critical shortage of mental health providers; and cultural stigma.

### **2. What actions did you take to address the problem?**

With both the private and public health systems failing to meet the needs of millions of elderly Americans, we're putting evidence-based depression treatment directly into the hands of seniors themselves. LiveWell Seniors is a one-of a kind psychosocial educational behavioral health program run by and for seniors with lived experience of depression and resilience.

During this grant year, we met all of our projected goals by:

- Providing sustainable mental health support to a wide and diverse population of seniors in need through our free and effective, educational-based depression support group.
- Serving a minimum of 1,000 logins to our weekly, virtual LiveWell Senior Support Group in a one-year period; led by trained volunteer senior peer facilitators.
- Creating unique leadership opportunities for seniors by training them to lead LiveWell's psychosocial program for their peers, and by participating in "continuing education" of trauma-informed peer-led interventions three times per
- Conducting a yearly program evaluation with a reputable third party—please see response to question #5 below.

### **3. What did you learn? Will you make any changes in the coming year?**

We continue to learn that our unique peer-driven, psychoeducational model is making a big difference in people's lives. And although many participants in our LiveWell Seniors group have made meaningful relationships (friendships) that now extend beyond the weekly virtual support group – helping to combat the "epidemic of loneliness" that contributes to the societal rise in senior depression and suicide – we want to do more to help seniors stay connected. In fact, in direct response to their request, we will launch an online LiveWell Seniors interactive Forum in the coming months, where they can share personal stories and successes, offer each other real-time support, and share mental health resources.

### **4. How have you engaged any partners/collaborators in implementation or funding? Have you considered how to sustain the program?**

Our Philadelphia-based grassroots nonprofit organization is currently funded by local individual donors and through foundational support. The same individual donor who contributed \$20K last year to help fund the LiveWell Seniors Program – 50% of the total program budget; and almost an exact match of our 2024 FFA award – has agreed to do the same again this year. For a relatively small nonprofit, renewable funding makes a big impact on our ability to sustain our critical and lifesaving direct mental health services.

### **5. How do you know your actions had an impact? Please describe those who participated, outputs and outcomes. Stories or photos are welcome.**

Our annual program evaluation is spearheaded by Dr. Emily Goldmann, mental health epidemiologist at Boston University School of Public Health. An anonymous online survey is designed to measure coping skill development (ability to decrease or better manage depression symptoms); feelings of hopefulness about managing one's own depression (agency); and feeling connected to and/or supported by others (one of the most significant protective factors for depression relapses and suicide).

The LiveWell Seniors Program is open to any senior (age 65+) who self-identifies as needing direct support for better managing their moods, decreasing symptoms and relapses of depression, and/or needing peer connection for better mental health outcomes. All groups are free and easy to access: no diagnosis, insurance, referral or registration required.

In the last FFA grant cycle:

- 154 seniors logged into the weekly LiveWell Seniors support group more than 1,400 times.
- 21% from Philadelphia area; 75% from U.S.; 4% international.

- Of the U.S. attendees, they represented a diverse population in need: 24% Black, 11% Multiple Race, 2% Asian, 5% Hispanic (any race), and 58% White.
- 97% “Learned new skills to better manage moods.”
- 96% “Feel more hopeful about managing depression.”
- 91% “Feel more connected to others.”
- 86% Report reduction or disappearance of depression symptoms.

In addition to being proud of our exceptional mental health outcomes, we are also pleased to report the cost-efficiency of our delivery model. For example, at only \$14 cost per beneficiary (based on all LiveWell support groups), we can deliver ten skill-based support groups to an individual for only \$140—versus \$150 per private therapy session. And research shows that peer-led psychoeducation performs better than psychotherapy for the depression recovery process.

#### **6. Is there anything else you would like FFA to know about this project?**

Although the LiveWell Foundation is not a Quaker organization, our Philadelphia-based grassroots nonprofit shares many of the FFA’s core principles, including service to diverse populations; potential to create change, leveraging resources, collaboration, and engagement of participants (peers).

#### **Feedback on your interaction with FFA would be helpful. Are there ways we can help beyond the grant?**

The personal interactions and attentive support from FFA (Susan and the Board) are very appreciated!

**Our 501c3 status has not changed.**

**See budget on next page.**

## LIVEWELL SENIORS – ANNUAL PROGRAM BUDGET

Program Budget = 20% of LiveWell Foundation direct-service program offerings

**2025 Seniors Program Budget = \$40,140**

**50% individual donor contribution + 50% Grant Request**

<b>Personnel &amp; Consultants (20% of operating)</b>	<b>Last Request</b>	<b>Actual Spent</b>	<b>New Request</b>
ED / Program Manager (FTE)	10,000	11,000	11,000
Payroll Taxes (7.65%)	125	125	125
Benefits	300	300	300
Volunteer Coordinator (Consultant)	3,600	3,600	3,600
Evaluation Consultant (20%)	1850	1850	1850
Support Group Peer Facilitators (In-kind hours)	0	0	0
Website maintenance	600	600	600
Accountant	250	250	250
Bookkeeper	375	375	375
<b>Non-Personnel Expenses (20% of operating)</b>			
Volunteer Appreciation	0	150	150
Rent	0	0	0
Office Supplies	50	50	50
Communications	450	450	450
Digital Platform	600	600	600
Insurance	300	300	300
Website Hosting	125	125	125
QuickBooks	45	45	45
Advertising (participant recruitment)	300	300	300
<b>Program Budget (50% Total)</b>	<b>18,970</b>	<b>20,170</b>	<b>20,170</b>