# Health Geropsychology

# **Chapter Summary**

Older adults represent the fastest-growing segment of the US and Canadian populations, with the leading edge of the baby boomers turning 65 in 2011. This chapter considers the prevalence of chronic illness among older people in the US and Canada, clinical needs in working with these patients (e.g., considerations of multi-morbidity, the need for interdisciplinary teams, and a focus on the family), the impact of pain and falls, and how individuals cope with chronic illness. Chronic pain affects at least 50 per cent of older adults who live in the community and as many as 80 per cent of seniors who live in long-term care (LTC) facilities.

This chapter also describes specific areas of intervention, including behavioural interventions in long-term care, reminiscence therapy, and cognitive rehabilitation. Ability to decrease risk factors is important for health geropsychology, but the childhood and adult obesity epidemic threatens longevity and health for people as they grow older. Because the number of older adults is growing rapidly and, the life expectancy has increased, the public health burden of chronic disease and multimorbidity will impact health-care costs, policy, and employment opportunities for the foreseeable future. In particular, increasing numbers of individuals with dementia, particularly Alzheimers, furthers the need for more trained resources to deal with this issue. A multi-faceted approach is critical to train the numbers of health geropsychologists needed to meet this burgeoning need.

Further understanding of the grief process for both family as well as the patient enables health psychologists to assist in a healthy grief process, as well as identify unhealthy behaviours.

# Essay Topics

- 1. How can interdisciplinary collaboration and increased focus on health geropsychology mitigate the public health crisis in caring for older adults with chronic illness? (p. 327)
- 2. What is the role of health psychologists in the assessment and management of pain in older adults? (pp. 313–316)
- 3. How can health psychologists assist family members caring for older adults? (pp. 311–313)
- 4. What are the interventions offered to seniors in long-term care facilities which have been successful in managing depression? (pp. 316–317).
- 5. How do health psychologists assist family and the patient with the grief process? (pp. 317–319)

### Weblinks

#### http://www.alzheimer.ca

The website of the Alzheimer Society provides detailed information regarding Alzheimer's disease and other dementias, including warning signs, current research, and diagnosis.

#### http://www.alz.org/

The Alzheimer's Association is a voluntary health organization with a detailed website that includes a caregiver centre, message boards, and links to various publications.

#### http://www.pbs.org/wgbh/pages/frontline/facing-death/

In this *Frontline* documentary, patients, families, and health practitioners discuss difficult end-of-life choices for the terminally-ill.

#### http://www.go4life.nia.nih.gov/

The website of the National Institute of Aging describes a range of different exercises older adults can do and encourages older adults to be physically active.

## Glossary

Advance care planning making decisions about the care you would want to receive if you become unable to speak for yourself (National Hospice and Palliative Care Organization (2017).

**Cognitive empothy** Shared or complementary emotional experience in response to another person's physical and emotional suffering.

**Cognitive rehabilitation** Any intervention strategy or technique intended to enable clients or patients, and their families, to live with, manage, bypass, reduce, or come to terms with deficits precipitated by injury or other damage to the brain.

**Collaborative care** An approach in which physicians and mental health-care providers work together to manage common mental disorders and chronic disease.

**Conditioned emotional responses** When the family member has paired certain emotions with past experiences of the older person's suffering (i.e., becoming angry when the older relative displays fatigue or pain), which can cause defensive emotions and withdrawal from the older patient.

**Dementia** Cognitive loss beyond what would be expected as a result of normal aging. Among the most common types of dementia are Alzheimer's disease and vascular dementia.

**Discibility** A condition that limits an individual's mobility, senses, speech, or activities.

**Health disparities** Preventable differences in the burden of disease, injury, violence, and opportunities to achieve optimal health experienced by socially disadvantaged populations.

Life review A structured, potentially multi-session interview focused around one or more life themes such as family, work, major turning points, the impact of historical events, the arts, aging, dying and death, and socialization issues such as meaning, values, and purpose in life.

**Primary control** An individual's attempts to maintain equilibrium and a sense of efficacy by using active, problem-focused coping strategies to change environmental circumstances.

**Reminiscence** The universal, passive recall of memories.