

MENTAL HEALTH AND LONG-TERM CARE

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2022 Healthcare Leadership Conference



OVERVIEW AND OBJECTIVES

- Provide information for practitioners about how to deal with the ever diversified population of individuals living in long-term care and residential placement.
- Examine the mental health needs of residents and practitioners who work with them.
- Focus on varying activities that both staff and residents can use to improve coping skills, reduce stress, and improve engagement within their community.
- Strategies, materials, and resources will be shared and practiced.



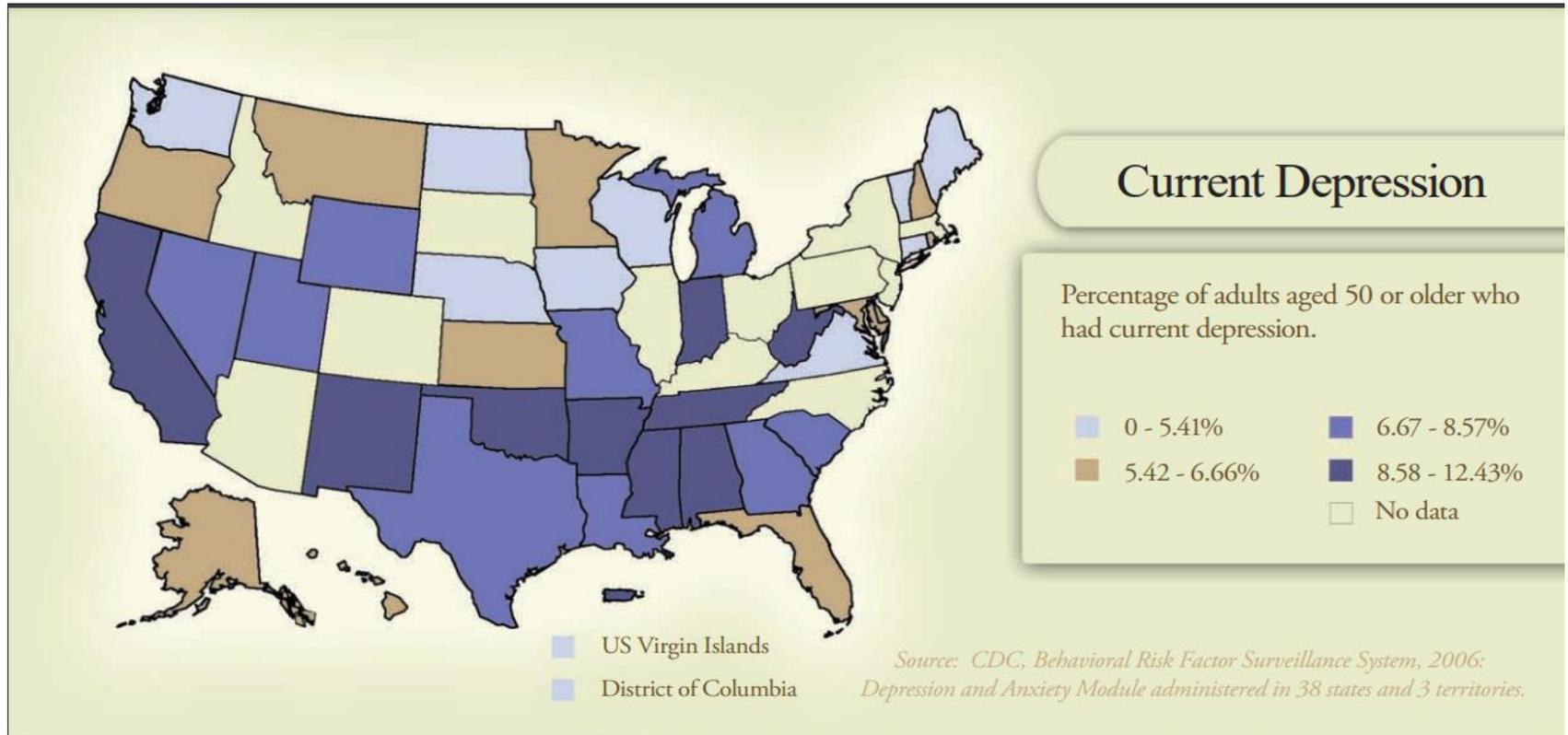
SENIORS AND MENTAL HEALTH

Key facts

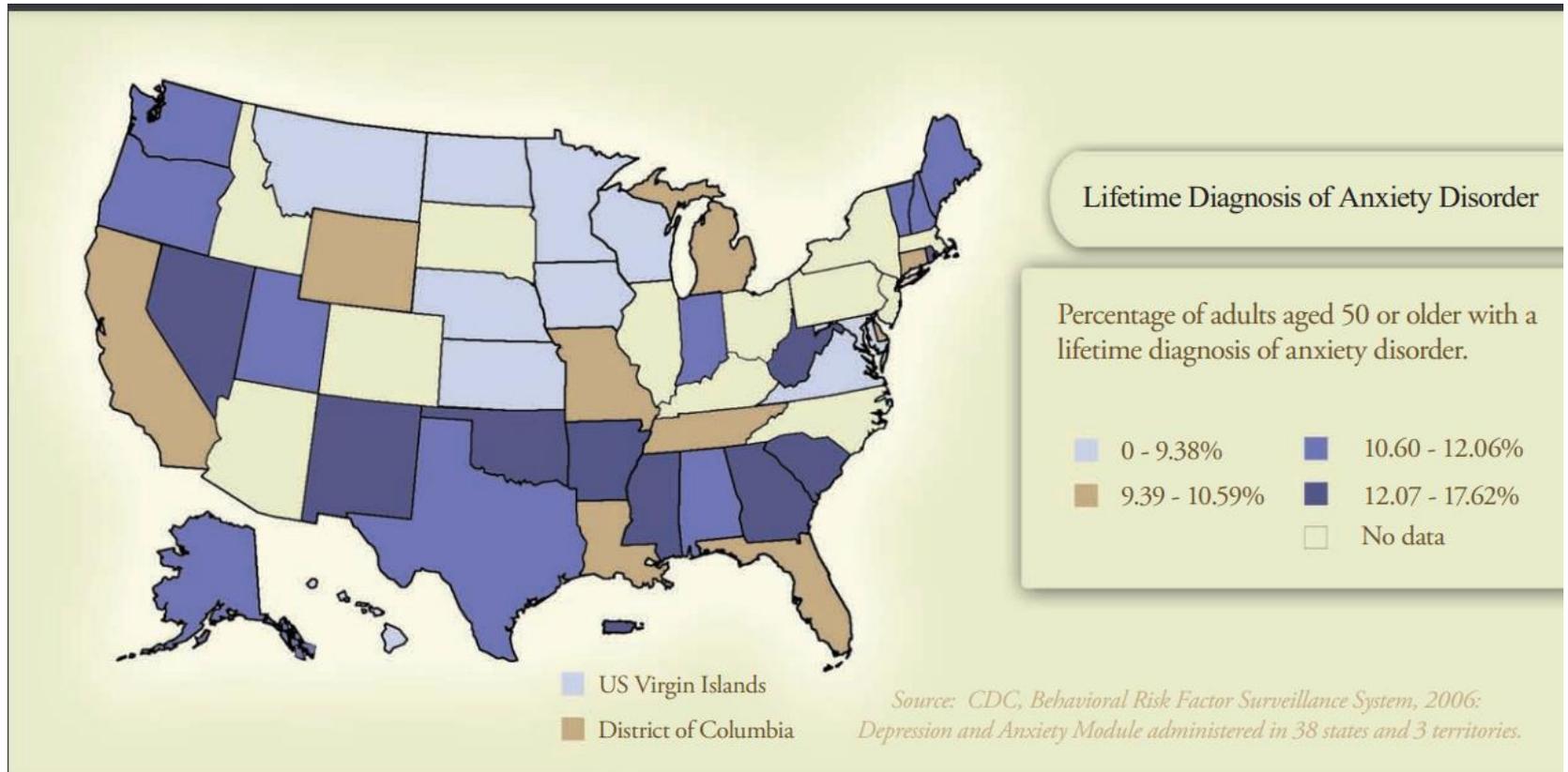
- At least one in four older adults experiences some mental disorder, such as depression, anxiety, or dementia.
- Due to population aging, the number of seniors with mental disorders is expected to double by 2030.
- Depression is the most common mental health problem in older people.
- People aged 85 and older have the highest suicide rate of any age group.
- Two-thirds of seniors with mental health problems do not get the treatment they need (the "treatment gap").
- Mental health services for older adults are extremely limited in most countries of the Americas (PAHO, 2022)



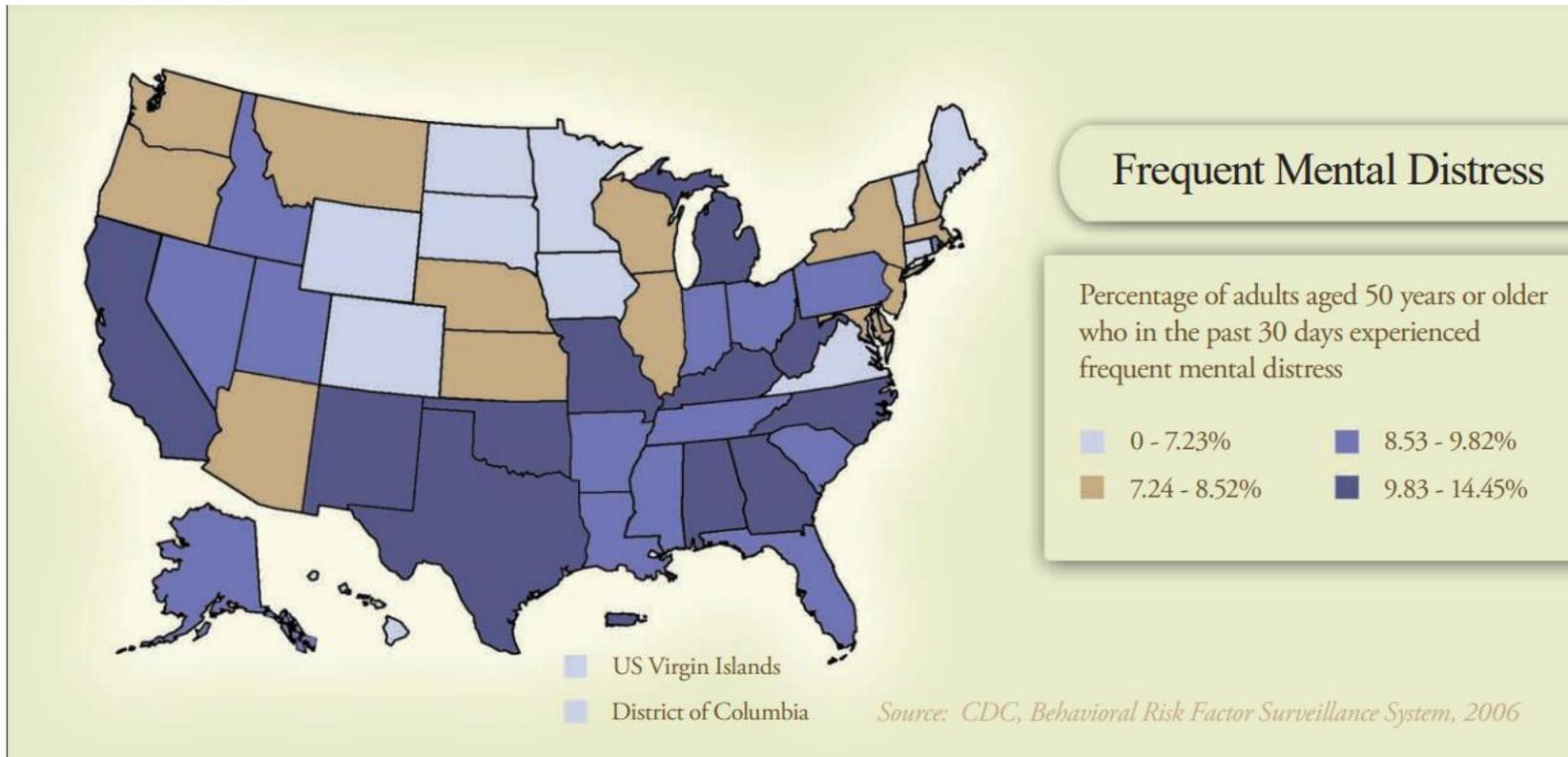
SENIORS AND MENTAL HEALTH - DEPRESSION



SENIORS AND MENTAL HEALTH - ANXIETY



SENIORS AND MENTAL HEALTH — DEMENTIA AND COGNITIVE IMPAIRMENT



EXAMPLE CASE – AMELIA (41 YEARS OLD)

- Amelia is a 41 year old woman living with two roommates at a group home. Amelia's family lives 30 minutes away and visits her often. Because Amelia has a Bureau of Developmental Disability Services (BDDS) waiver, she has full time 24-hour support at her home. Amelia gets easily frustrated when she is ignored, and loves being with other individuals. She loves games, puzzles, coloring, watching soap operas, and being in public. She struggles sometimes with finding the right words, and needs assistance with cooking, picking out the right clothes, and showering (she says she misses her “nooks and crannies”).
- Amelia has a boyfriend who lives at another group house in her town. They have been together for the past 18 years. Amelia sometimes wishes that they could get married and live in the same home. Amelia shares that she also wishes she could have a baby with her boyfriend, but cannot have her own resident. Amelia talks about feeling sad that she doesn't have the ability to have a family and live a “normal life” with her boyfriend.



EXAMPLES OF SUPPORT AREAS

TABLE 5.4 | Examples of Support Areas and Support Activities

Teaching and Education Activities:

- Interacting with trainers and teachers and fellow trainees and students
- Learning and using problem-solving strategies
- Using technology for learning
- Learning and using functional academics (reading signs, counting change, etc.)

Home Living Activities:

- Preparing and eating food
- Housekeeping and cleaning
- Dressing
- Bathing and taking care of personal hygiene and grooming needs

Community Living Activities:

- Using transportation
- Participating in recreation and leisure activities
- Visiting friends and family
- Shopping and purchasing goods

Employment Activities:

- Learning and using specific job skills
- Interacting with co-workers
- Completing work-related tasks with speed and quality
- Accessing and obtaining crisis intervention and assistance

Health and Safety Activities:

- Accessing and obtaining therapy services
- Avoiding health and safety hazards
- Accessing emergency services
- Maintaining mental health/emotional well-being

Behavioral Activities:

- Learning and making appropriate decisions
- Incorporating personal preferences into daily activities
- Maintaining socially appropriate behavior in public
- Controlling anger and aggression

Social Activities:

- Participating in recreation and leisure activities
- Making appropriate sexual decisions
- Making and keeping friends
- Engaging in loving and intimate relationships

Protection and Advocacy Activities:

- Managing money and personal finances
- Protecting self from exploitation
- Exercising legal rights and responsibilities
- Using banks and cashing checks



SPECIFIC EXAMPLES OF ADAPTIVE BEHAVIOR SKILLS

How can I work with residents to ensure that we work on wellness?

- Socially
- Physically
- Cognitively
- Emotionally
- Creativity
- Spirituality

TABLE 5.1 | Specific Examples of Adaptive Behavior Skills

Conceptual Skills
Receptive and expressive language Reading and writing Money concepts Self-directions
Social Skills
Interpersonal Responsibility Self-esteem Gullibility (likelihood of being tricked or manipulated) Naiveté Follows rules Obeys laws Avoids victimization
Practical Skills
Personal activities of daily living such as eating, dressing, mobility, and toileting Instrumental activities of daily living such as preparing meals, taking medication, using the telephone, managing money, using transportation and doing housekeeping activities
Occupational Skills
Maintaining a safe environment



TEACHING AND LEARNING ACTIVITIES

- Residents still able to learn and attend to new skills and work typical jobs
- Often susceptible to feelings of helplessness and frustration in their learning environments
- Residents are able to stay on task and develop goal-directed behavior with stimulating environments and caregiver support
- **Goals and Strategies**
 - Interacting with the public
 - Using problem solving strategies
 - Functional language – reading signs, counting change (in cases where there is cognitive dysfunction)



TEACHING AND LEARNING ACTIVITIES

- **Reading and writing** - Studies have proven that reading can enhance memory function, reduce stress and promote better sleep. Journaling can also help to manage and alleviate the effects of stress and anxiety.
- **Learning a new language** - Language learning exercises regions of the brain often affected by aging and can build confidence and even increase socialization with others who may know or are learning the language.
- **Playing an instrument** - Music stimulates the brain and improves memory in seniors with Alzheimer's and dementia. According to The Washington Post, not only is playing, or learning to play, an instrument fun, but it can improve verbal fluency and processing speed within a matter of months.
- **Playing puzzles and games** - In addition to being enjoyable, various puzzles have proven to delay memory decline and enhance senior mental health.



TEACHING AND LEARNING ACTIVITIES

- **Goals and Strategies**
 - Interacting with the public
 - Using problem solving strategies
 - Functional language – reading signs, counting change – working on new cognitive areas
- How might we work with Amelia in these areas?
- How might we also benefit from these activities?



COMMUNITY LIVING ACTIVITIES LANGUAGE AND SOCIAL BEHAVIOR

- **Goals and Strategies**
 - Using transportation
 - Participating in recreation and leisure activities
 - Visiting friends and family
 - Shopping and purchasing goods
- How might we work with Amelia in these areas?
- How might we also benefit from these activities?



EMOTIONAL AND BEHAVIORAL PROBLEMS

- Rate of emotional and behavioral problems is 3 times greater in residents than in those living in traditional housing
- Largely due to limited communication skills, additional stressors, and neurological deficits
- Mental health problems are common among seniors and may include **isolation, affective and anxiety disorders, dementia, and psychosis**



EMOTIONAL AND BEHAVIORAL PROBLEMS

- What behaviors might we see in our residents?
- How can we work with them to transition so these are less of an issue?
- How might we consider using behaviors and rewards to improve functionality?
- **Goals and Strategies**
 - Preparing and eating food as rewards
 - Housekeeping, cleaning, and chores
 - Bathing and taking care of personal hygiene and grooming needs
 - Finding hobbies and favorite activities



EMOTIONAL AND BEHAVIORAL PROBLEMS

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OTHER PHYSICAL AND HEALTH CHALLENGES

- Health and development are affected
- Degree of intellectual impairment is a factor
- Prevalence of chronic health conditions in ID population is much higher than in the general population (something to consider in our work)
- Life expectancy for individuals with Down syndrome is now approaching 60 years
- Goals and Strategies:
 - Accessing and obtaining therapy services
 - Avoiding health and safety hazards
 - Accessing emergency services
 - Maintaining mental health and emotional well being



OTHER PHYSICAL AND HEALTH DISABILITIES

- **Goals and Strategies:**
 - Accessing and obtaining therapy services
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SOCIAL AND PSYCHOLOGICAL DIMENSIONS

Health-care providers, especially those in primary care, can play a central role in promoting mental health for seniors by working with mental health professionals, local governments, civil society organizations, families, and communities to provide comprehensive mental health care and supportive environments. In addition, older people should be encouraged to actively participate in their communities and in society at large, while policymakers should ensure that seniors' mental health concerns are addressed in national health planning and policies (PANO, 2021).

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PREVENTION, EDUCATION, AND TREATMENT

- **6 Ways to Improve Mental Health in Seniors**
- **Play Mind Games.** Just as the body needs physical activity and stimulation to stay healthy, the brain needs stimulation to stay sharp and avoid cognitive decline as we age. ...
- **Get Physical.** ...
- **Stay Connected with Friends.** ...
- **Pick up a New Hobby.** ...
- **Volunteering.** ...
- **Caring for a Pet.**



QUESTIONS?

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