



Psychology and Ageing Interest Group

Newsletter Issue No. 18

2014

Forward

We are pleased to present our new format for the newsletter. The focus is on providing access for our members to the latest information, research and training in the field of ageing. We believe that this provides real value to our group and hope that it gives our members the ability to keep trained, informed and aware of relevant and helpful topics.

This year we will hold our AGM via teleconference. Our National conference will be in 2015 and we will keep you updated with regards to dates, venue and speakers.

Carol Hunter
Chair/Editor

CONFERENCES

PSYCHOLOGY CONFERENCES

- **Australian Psychology Society (APS)**
 - 49th Annual Conference. Hobart, Tasmania. 30th September – 3rd October, 2014.
 - 50th Annual Conference. Gold Coast, Queensland. 28th September – 2nd October, 2015.
 - APS Clinical Neuropsychologists Conference. Adelaide. 27th-29th November, 2014.
 - APS College of Counselling Psychologists Conference. Melbourne. 26th February – 1st March, 2015.
 - APS College of Health Psychologists Conference. Sydney. 10th – 11th April, 2015.

- APS College of Clinical Psychologists Conference. Adelaide. 25th-28th June, 2015.

- **International Congress of Applied Psychology (ICAP)**
 - Tokyo, Japan. 28th-29th May, 2015.

GERONTOLOGY, GERIATRICS AND PSYCHOGERIATRICS CONFERENCES

- **Australian Association of Gerontology (AAG)**
 - Adelaide, SA. 26th -28th November, 2014.

- **International Association of Gerontology & Geriatrics (IAGG)**
 - European Region congress. Dublin, Ireland. 23rd – 26th April, 2015.
 - Asia and Oceania conference. Chiang Mai, Thailand. 19th-22nd October, 2015.
 - San Francisco, USA. 23rd – 27th July, 2017.

- **International Psychogeriatric Association (IPA)**
 - International meeting. Beijing, China. 23rd– 26th October, 2014.
 - European Regional meeting. Brussels, Belgium. 3rd-5th December, 2014.
 - International congress. Berlin, Germany. 13th – 16th October, 2015.

- **Royal Australian and New Zealand College of Psychiatrists, Faculty of Psychiatry of Old Age**
 - Annual Scientific Meeting. Sydney, NSW. 13-14th November, 2014.

AGED CARE CONFERENCES

- **Aged & Community Services Australia (ACSA)**
 - Adelaide, SA. 7th-10th September, 2014.
- **Leading Aged Services Australia (LASA)**
 - Adelaide, SA. 20th-22nd October, 2014.

WORKSHOPS

Cognitive behavioural therapy with older adults.

- Presenter: Sunil Bhar
- Dates: 22nd August, 2014 (Adelaide), 23rd August, 2014 (Melbourne), 6th September (Perth).
- Locations: Multiple, see website below.
- For more details: <http://www.psychology.org.au/Events/Default.aspx?ID=1206>

Psychological assessment and treatment of older adults.

- Presenters: Bob Knight and Nancy Pachana.
- Date: 26th September, 2014.
- Location: UQ Women's College Playhouse Theatre, St Lucia, Queensland.
- For more details: <http://www.psychology.org.au/Events/EventView.aspx?EventID=14741>

Two days on Ageing Well with George Vaillant and Friends

- Presenter: George Vaillant
- Date: 7th-9th November, 2014.
- Location: Swinburne University, Hawthorn, Melbourne, VIC.
- For more details: Lauren Rossi (lrossi@swin.edu.au) - to find out more and to register

Psychology and residential aged care facilities: Where is the research?

Sunil Bhar, Senior Lecturer in Psychology, Swinburne University of Technology, 2014

Introduction

Is there a role for psychologists in residential aged care? We often hear that the rates of depression, anxiety and other types of psychiatric morbidity are significantly higher in residential aged care settings than in the community¹. Yet, what research exists to show that psychological approaches are helpful for older adults who live in residential aged care facilities (RACFs)? Such individuals are typically older than those living in the community, are more frail, have a greater number of medical comorbidities and/or are living with more severe levels of cognitive impairments? Can psychological treatments help in such a context? Where is the research?

Unfortunately, research in this field is lacking and is of poor quality. Most outcome studies are based on community dwelling older adults rather than on those living in RACFs. Community-dwelling populations are easier to recruit for research, and constitute the primary population for studying evidence-based psychological treatments for late life psychiatric and behavioural problems. Unfortunately, there is low resemblance between such participants and those individuals living in residential aged care facilities (RACFs).

Therefore, it is timely to examine recent research on the effectiveness of psychological treatments for older residents with high prevalent psychiatric conditions such as depression, anxiety and dementia. What has the research found about the effectiveness (or efficacy) of psychological treatments for such conditions in RACFs. A full review of the literature is not feasible in this column, but we can peak.

Depression

Cognitive-Behavioural Therapy (CBT), behavioural activation, interpersonal therapy, reminiscence therapy and problem solving therapy are amongst the most well-known evidence-based treatments for late-life depression. There is encouraging evidence for the effectiveness of reminiscence therapy and CBT for depression amongst residents.

Reminiscence therapy: Chippendale & Bear-Lehman² found that compared with a wait-list control group, aged care residents from the USA receiving 8-once-weekly autobiographical writing workshop sessions had less prevalent depressive symptoms. Similarly, in a Taiwan based study, Chiang and colleagues³ found that compared with a wait-list control group, residents who underwent group life review therapy showed significant improvement in loneliness, psychological wellbeing and depression.

Cognitive-behavioural therapy: A small study was conducted by Hyer and colleagues⁴ that compared the outcomes of GIST (group, individual, and staff therapy), against treatment as usual (TAU) in a residential aged care setting. Twenty five residents with depression were randomized to GIST (n = 13) or TAU (n = 12). Compared to TAU, GIST participants were less depressed. Similarly, Konnert and colleagues⁵ found that compared with the TAU group, residents receiving a group based CBT intervention (e.g., increasing pleasant events, reducing negative cognitions) showed considerable improvement over the 6-month follow-up on the Geriatric Depression Scale.

For a more complete review on psychotherapies for depression in RACFs, see Cody and Drysdale⁶.

Anxiety

CBT, relaxation training, supportive therapy and bibliotherapy have been classified as evidence-based treatments for late-life anxiety. However, there is a dearth of studies that have examined the effectiveness of such treatment in RACFs. In fact, I could not find any that used a randomised-controlled trial to examine

the effectiveness of psychological interventions for anxiety in such settings. Kraus and colleagues⁷ reported results from two patients who were treated with a modified version of cognitive-behavioural therapy for anxiety in dementia (CBT-AD). They concluded that CBT-AD was potentially useful in treating **anxiety** in dementia patients and hence may be useful in RACF settings.

Dementia

A recent meta-review⁸ on psychosocial interventions for dementia patients in RACFs found that the most effective psychosocial interventions were:

(a) Behavioural management techniques, such as individualised management plans and behaviour therapy emphasising pleasant events, (b) cognitive stimulation activities, such as engaging in word association tasks and number games, and (c) physical exercises including walking, isotonic exercises and chair exercises. The reviewers found that the treatments were effective for different problems in dementia patients. While all three interventions were effective in reducing the behavioural symptoms of dementia, only behavioural management technique and cognitive stimulation were effective in decreasing depression; and physical exercises were effective in improving physical and cognitive function.

While this review of the literature is far from complete, it does highlight the need for researchers to extend the scope of such research to include older adults living in RACFs. While certain therapies may be classified as evidence-based interventions for late-life disorders, it is crucial to examine their effectiveness for individuals who are older, frailer and living with greater comorbidity than those usually sampled for research.

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Regular meetings of the State Interest Groups are held in Sydney (NSW), Brisbane (QLD), Perth (WA), Adelaide (SA), Melbourne (VIC) and Canberra (ACT). On occasion these forums are held jointly with groups whose interests extend into the Ageing arena. The Interest Group is also active at the National Australian Psychological Society conferences, with symposia and papers of interest to researchers and practitioners as well as those involved in the teaching and supervision of psychologists. Social activities as well as student opportunities such as research and travel awards are also available to members. Contact your local convener for details!