

**Australian Psychological Society  
Special Interest Group in Psychology and Ageing  
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*To tell the truth, Cephalus, I answered, I enjoy talking with very old people. They have gone before us on a road by which we too may have to travel, and I think we do well to learn from them what it is like, easy or difficult, rough or smooth.*  
The Republic of Plato (c. 423-348 BC)

**FORWARD**

Similarly to the process of ageing, the Special Interest Group in Psychology and Ageing keeps moving inexorably along, maintaining a quiet but active interest in issues of importance and concern, gaining a friend here, sometimes losing one there, but all the while learning from the experience!

This is the third edition of our Newsletter, so that in the developmental process we are still in the early stages. There is abundant scope for changes and improvement, additions and expansions. Your comments, suggestions and contributions are welcome, and would be appreciated, in order to keep the connections between those interested in this area of psychology alive and well. Thanks to those who contributed to and assisted in the production of this newsletter. For those who may have wished to contribute, but did not have a contact, note your State coordinator's details on the back page.

**EDITORIAL**

By way of acknowledging the International Year of Older Persons, the WA Interest Group on Child, Adolescent and Family Psychology invited me to speak at their July meeting on 'something to do with ageing' - the topic was my choice. Rather than focussing on a specific psychological disorder, intervention or issue related to the older population, I chose to discuss 'the whole business of ageing'. Although I have graduated from the Edith Cowan University Master's course in Clinical Geropsychology, and am now working as a clinical psychologist in the area of psycho geriatrics, it was nonetheless an interesting and very informative exercise to put together a summary of many of the factors implicated in ageing, from a psychological point of view.

To start with: What is ageing? Is it a social phenomenon or a biological inevitability? Is the chronological marker the deciding factor or does psychological well being play a major role? The logical answer is that these are all determinants in the ageing process.

Dictionaries blandly define ageing as a programmed process spanning the period from conception to death. Not surprisingly, medical definitions talk mainly about decline. A somewhat depressing psychological definition described ageing as "a random process of change in an organism that develops in a deterministic way, but thereafter becomes a victim of random degradations induced by the 'slings and arrows of existence' (Birren & Birren, 1990, p. 12).

An individual's psychological age is recognised as being far more complex than other measures of age. Theories and models have been presented in an attempt to understand this phenomenon, but as is the case with physical ageing, there are many exceptions and deviations from the norm.

The psychological disorders encountered in the older population are similar to those found in other age groups - its just that they are likely to be more complex in an older person, because there have been more years and more events to complicate the issue.

When we provide psychological interventions for older adults, we use the same models, based on the same theories as used for other adult age groups. However, treatments may need to be modified to allow, for example, for slowed cognitive

processing, impaired vision or hearing, and lack of familiarity with 'psychology-speak'.

And then there is the whole area of neuropsychology implicated in the dementias, Parkinson's Disease, Huntington's Disease, stroke and many other organic conditions. Not to forget possible psychological effects of acute and chronic physical illnesses.

I could go on - but then I would be preaching to the converted. Psychologists not engaged in this area often assume it to be less stimulating and less challenging than other areas of psychology. However, we who know, are aware that psychology and ageing is a complex, exciting, demanding and hence rewarding area in which to work.

#### **Reference**

J.E. Birren, & B.A. Birren (1990). The concepts, models, and history of the psychology of aging. In J.E. Birren & K.W. Schaie (Eds.), *Handbook of the Psychology of Aging*, (pp. 3-20). San Diego: Academic Press.

Joan Klingler

#### **FEATURE ARTICLE**

Dementia Support for ACATs: A Role for Clinical Geropsychology

Clinical geropsychology is a new specialty in Australia, concerned with the psychological functioning of the elderly. Recently the Commonwealth Government, understanding that dementia presents a growing problem in our society, founded a part time position for the Northern Rivers Area Health Service. Specifically, this position was to support the three local ACATs (aged care assessment teams) with complex assessments, behavioural management in aged care facilities, to provide an outreach service for those in their own homes and to provide dementia education to the area health professionals.

ACATs are multi-disciplinary in nature. However, in many instances a specialist in complex assessments, behavioural management and psychological functioning of the elderly is unavailable to many teams. This imbalance is unfortunately prevalent in many rural areas of Australia.

Because an ACAT's primary responsibility is the assessment of the elderly for placement purposes, it is in a unique position in the Australian health care system. This responsibility requires high standards of diagnostic accuracy and furthermore, many of the individuals who are seen by an ACAT are confused, lonely and physically frail. Presentations that involve physical, social and psychological problems are often comorbid with a dementing illness, so differential diagnosis becomes complex.

In many nursing homes and hostels there are residents who cause verbal or physical disruptions, which impact on both staff and other residents. Before behavioural interventions are commenced, careful analysis of the situation and exploration of possible antecedents is required. This is a time consuming process, as in many instances the behaviour may involve screaming or wandering and will require the cooperation of the staff to implement an effective behaviour modification that will ameliorate the problem.

The above are just a few examples in which a clinical geropsychologist can influence positive outcomes and make a worthwhile contribution to the mental health and well-being of the elderly.

*Ian F. Johnston*

*St Vincent's Hospital Richmond ACAT*

*Lismore NSW*

#### **ELSIE HARWOOD AWARD**

Every two years, the Psychology and Ageing Interest Group sponsors the Elsie Harwood Award for the best fourth year thesis project in psychology that is related to ageing. This is subject to the applicants having to submit a 2000 word summary of their thesis, so some worthy projects are never seen.

There was a fairly small pool of applicants this year, but there was a consensus this time on the winner. Fiona Kenvyn of the University of Ballarat will receive the award at the 34th Annual Conference of the APS in Hobart later this year. Her topic was The Effect of Former Occupation on Suicide Ideation and Suicide Attitudes in Retirees. Lisa Hopes supervised Ms Kenvyn.

I extend thanks to Colette Browning of Latrobe University and Rob Ranzijn of the University of South Australia for acting as reviewers for the Award.

*Ed Helmes*

### **APS ANNUAL CONFERENCE**

The 34th annual conference of the APS will be held from 29 September to 3 October at the Wrest Point Hotel Casino in Hobart. The Psychology and Ageing Interest Group's Annual General Meeting is on Friday, 1 October.

On Saturday, 2 October, there is a symposium on Aspects of Quality of Life for Older Adults. This is the same day on which Professor Mary Luszcz is presenting the Keynote Address on Ageing: Cognitive and Developmental Perspectives. A symposium on Current Perspectives in Research on Movement Disorders includes three presentations on Parkinson's Disease. The symposium on 30 September on Psychology in the Public Arena includes the presentation of the official APS policy paper on Psychology and Ageing as one of the major APS activities for the International Year of Older Persons.

There are thus several items that might attract members of the P&A Interest Group, in addition to the many attractions of Tasmania itself.

*Ed Helmes*

### **AACBT ANNUAL CONFERENCE**

This year's AACBT conference was held in July in Fremantle, WA. Age-related issues were well represented, with an all-day workshop and a symposium addressing issues of ageing. Both events were well-attended.

Mike Bird, of the Australian National University, held a well-balanced (theory and practice) and thought-provoking workshop on Challenging Behaviours in Dementia. The many case studies Mike presented excited lively debate.

Mike also convened the symposium on Clinical Psychology with Elderly People.

Mike presented a paper on Psychology and Challenging Behaviour in Dementia; Ed Helmes presented a paper on What is Special about Clinical Geropsychology? and another on Neuropsychology with Elderly Clients; and Joan Klinger presented a paper on CBT: A Therapy for All Ages, and another on Death by Choice: Suicide in Older People.

*Joan Klinger*

### **ACROSS THE NATION**

Currently, the P&A Interest Group has branches in New South Wales, South Australia, Victoria and Western Australia. Active memberships in each state are roughly equal, despite the differences in populations across these states. Whilst less populous states may not have the critical mass of members with sufficient interest to form a separate group to meet regularly, it is odd that there is no organised group in Queensland. Is there anyone in Queensland with some time and energy to attempt to organise one? One of the executive with experience in one of the other states could perhaps help with some advice.

*Ed Helmes*

### **New South Wales**

The Interest Group meets bimonthly to discuss relevant activities and share knowledge pertaining to psychology and older adults. Meetings usually have a business component to discuss relevant issues such as notifying everyone of APS activities, upcoming conferences, workshops, talks and publications of interest (including any new normative data).

The second part of each meeting includes a guest speaker who presents for 45 minutes on a topic highly relevant to clinicians working with the elderly. For example, speakers this year have covered topics on "Psychological Theories of Ageing", "The Potential Therapeutic Value of Transdermal Nicotine in Preventing Cognitive Decline in the Elderly", "Client Centred Psychotherapy with Older Clients" and "Draft APS Position Paper on Psychology and Ageing".

The interest group also conducted a one-day workshop at Macquarie University in May, which was well attended and had guest speakers covering topics on assessment and treatment issues.

Currently the interest group is exploring the possibility of obtaining general Professional Development (PD) points for attendance.

*Michael McMahon*

### **South Australia**

The South Australian branch was started in 1997 by Professor Mary Luszcz of Flinders University, who stepped down as convenor at the end of 1998. We are grateful to Mary for her enthusiasm and commitment to the group and for all of the hard work she did in getting the branch established and recruiting interested members.

Since August 1998 the South Australian branch has had four meetings and three more are scheduled for the remainder of 1999. Meetings usually involve informal drinks and nibbles, dealing with any formal business and then presentations on topics of interest by members or invited speakers. An AGM, followed by a meal in a local restaurant, is held at the end of each year. Seminar topics over the last year have included:

Contemporary Aging Research: including dementia and driving; metacognitive awareness and memory; clinical issues relating to metacognition and a review of Rabbitt's methodology of frontal and executive functioning. These presentations were given by group members.

Aging and Intellectual Disability: two invited speakers, Professor Roy Brown, Flinders University and Mr Dale Hassam, Clinical Psychologist at the Strathmont Centre, spoke on aging and quality of life in people with intellectual disability.

Statistically Modelling the Effect of Age on Well-Being: Dr Rob Ranzijn presented work from his PhD thesis.

The branch has a small but committed membership. Some issues we are grappling with include increasing attendance at meetings and involving more clinicians in the group.

*Lynn Ward*

### **Western Australia**

A small but committed group of members of the local branch in Perth reconvened in February 1999 for the first meeting in almost six months. After a two year period of enthusiastic leadership and hard work by Sue Lowe, all was temporarily quiet on the Western front.

In February, Marianela Cuevas presented findings from her Master's research investigating the alarmingly frequent, but often hidden mistreatment of older people: Perceptions of elder abuse among GPs and older people.

In her Master's research, Christina Petz found that older people generally had a positive attitude towards sexual activity, but that sexual affection may be differently expressed in later life: What sexuality? Sexual activity and affectionate sexual expression in a Western Australian sample of older adults was the title of our May seminar.

Jennie Hunt, an experienced worker in the field of ageing, and a Master of Social Ecology, will speak to us in September on an issue which is likely to become far more topical in the coming decades: Double jeopardy: Multicultural issues and dementia.

Our meetings are informal and friendly, focussing on sharing knowledge and experience with others whose psychological interest lies in the field of ageing.  
*Joan Klinger*

**National Coordinator**

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