

COUNSELLING THE OLDER PERSON

(INTEGRITY VERSES DESPAIR)



ERIK ERIKSON'S PSYCHOSOCIAL THEORY



AGEING IS A NATURAL PROCESS



MYTHS ABOUT AGEING

- Older people automatically slow down lose their mental capacity and end up senile.
- The elderly tend to become inflexible, and will not change (You cannot teach an old dog new tricks)
- Old people are unhappy, the elderly prefer to withdraw into themselves.
- The elderly are dependent, they are not productive members of Society.
- Once old, physical deterioration is inevitable



AGE AFFIRMING PRACTICE

Challenge ageism in all its forms.

Challenge our own beliefs about ageing.

Treat an ageing client like anybody else.

Encourage client autonomy .

Identify ageing myths in supervision.

Educate ancillary staff.

Support our own ageing staff.



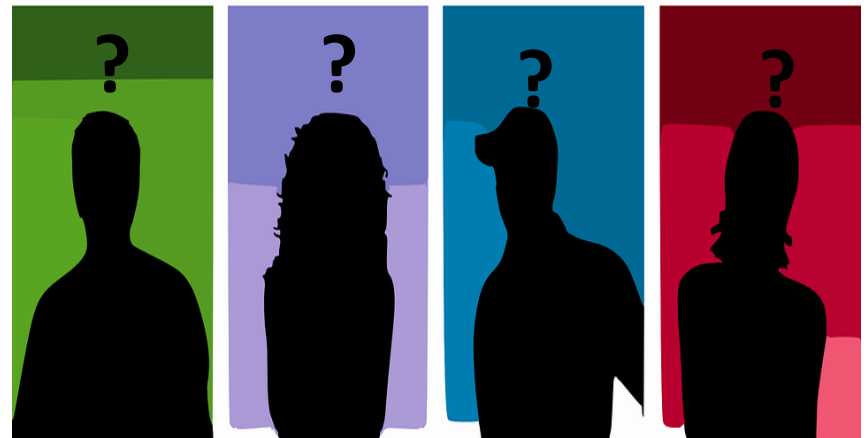
WHAT TO WATCH OUT FOR

- Respect. Do we shake hands, call by first name ?
- Are we speaking loud enough or too loudly?
- Infantilisation.
- How do we address a client?
- Balance of power.
- Flexibility ?
- Polypharmacy



WHO IS BEST EQUIPPED TO HELP?

- Ideally, counsellors will be mature and qualified.
- Have life experience.
- Be flexible and able to adapt.
- Enjoy listening to peoples memories.
- Have a sense of history.
- Show common sense, patience and compassion



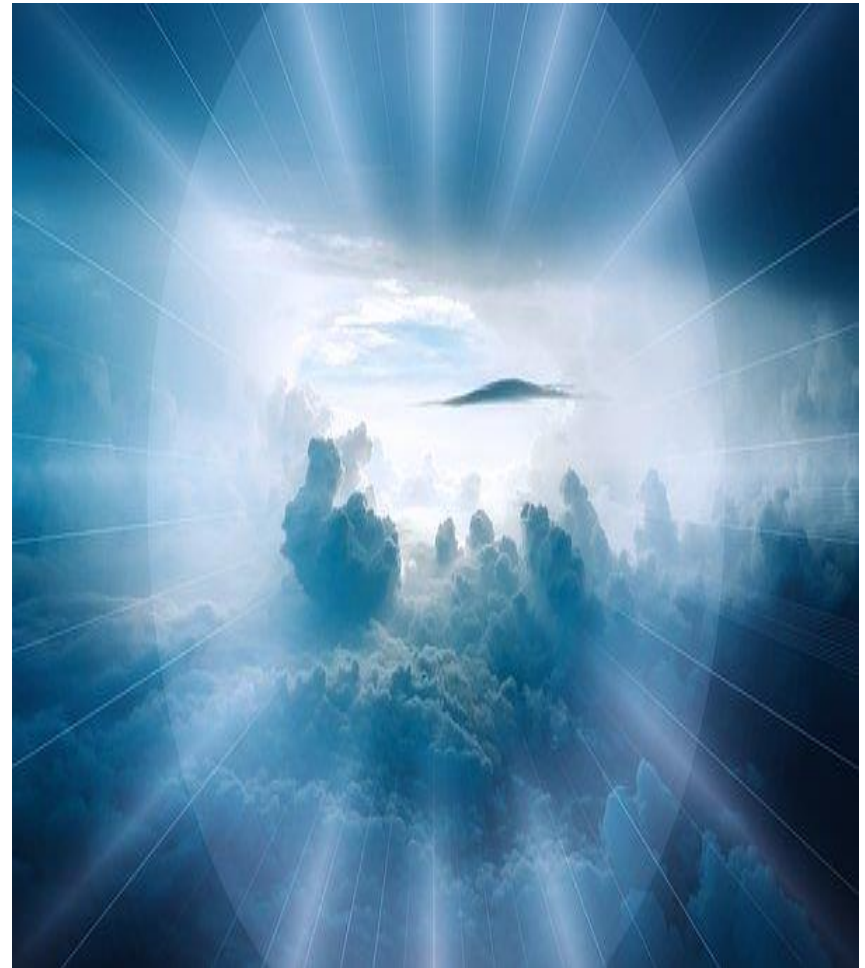
ISSUES

- Coping with transitions.
- Bereavement and loss.
- Declining physical abilities.
- Poor health.
- Fear of dependence.
- All the issues associated with any other age group including stress, depression and sexual issues.
- Dementia.
- Ageism.
- Financial issues.
- Issues /fears surrounding death



DEATH AND DYING

- How do we feel about death, Are we willing to discuss this with clients?
- What are our feelings about euthanasia?
- Can we sit with our own sense of helplessness?
- What about God?
- What are your thoughts on attending a client's funeral?



CONSULTING AREA

- Counselling room and waiting rooms should be well lit with natural light where possible.
- Signage should be clear.
- Orientate client to place and time by using large dial clocks and clear bold calendars with date, day and month clearly represented.
- Have different floor covering in rooms.



DEMENTIA

Alzheimer's Disease-comprises 60-80% of all diagnosed dementia.

Vascular Dementia- comprises of 17% of diagnosed dementia.

Lewy Body Dementia -comprises of 15% of diagnosed dementia

Frontotemporal Dementia (Pick's Disease)- Second most commonly diagnosed dementia in under 65's.

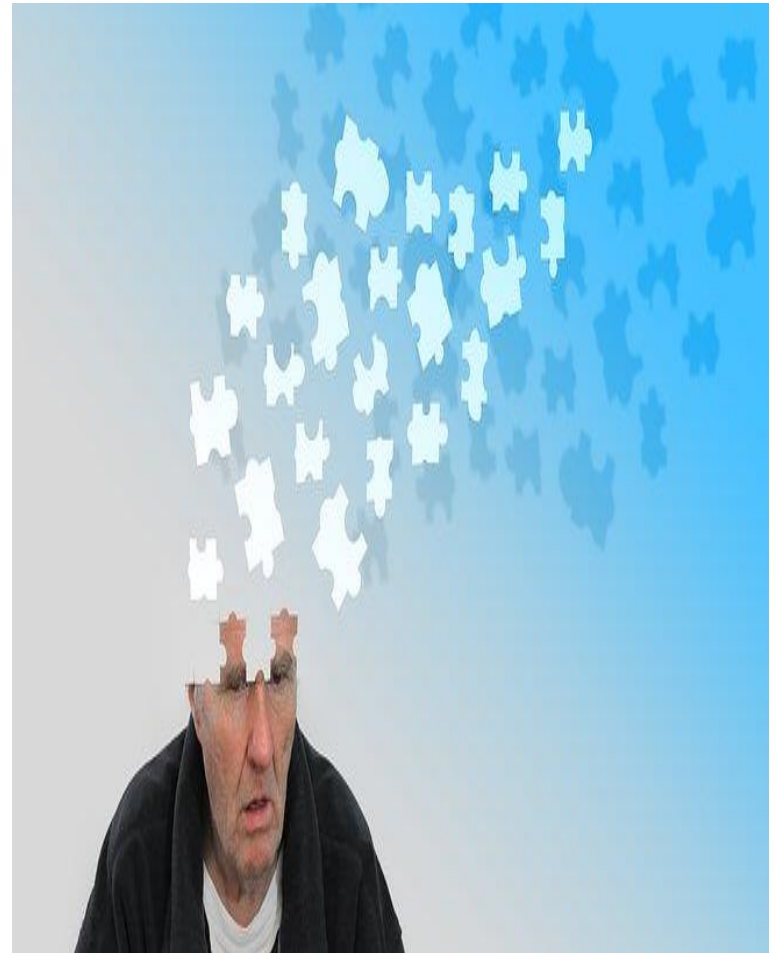
SO WHATS HAPPENING IN THE BRAIN?

- **Alzheimer's Disease**-Destruction of brain cells faster than is normal.
- **Vascular Dementia**- Disruption of blood circulation to the brain.
- **Lewy Body Dementia**- Build-up of proteins, damaging the way nerve cells communicate with each other.
- **Frontotemporal Dementia**-Nerve cells in the brain die and nerve pathways are damaged in the frontal and temporal lobes .



COMMON SIGNS OF DEMENTIA

- **Memory problems.** Difficulty in retaining and retrieving new Information.
- **Declining cognitive ability .** Difficulties orientating in time and place.
- **Communication issues.** May be repetitive, Aphasic or Dysphasic.
- **Emotional changes.** Lack of emotional responses, depression and anxiety
- **Behavioural changes.** Socially withdrawn, self-neglect .



THERAPY

- Time limited. Cognitive behavioural therapy or for those with dementia Cognitive stimulation therapy.
- Group therapy -Ideally a closed group
- One to one- Open ended or time specific.
- Relaxation- In groups or one to one.
- Reminiscence- Works well in groups
- Life stories- One to one or in family group.
- Activities- groups or one to one.
- Deep Release therapy, including Expressive arts therapy

SELF CARE

- Supervision.
- Peer discussions.
- Personal counselling.
- Adequate time off work.
- Time with own family where possible .
- Specialist training.
- Mindfulness, laughter, play, exercise.
- Spirituality.





- **Steps towards Peace**

- **1 Knowledge is Power** — learn about the aging process
- **2 Talk About It** — Verbalizing our fears helps to diminish them
- **3 Focus on the Present** . We cannot change the past or predict the future
- **4 Be thankful** — focus on what's good in your life now
- **5 Explore your options** —look at what is possible for you now
- **6 Create a Legacy** — live on after you're physically gone through your legacy

EXPRESSIVE ARTS

Focuses on four therapeutic Modalities.

- Expression
- Imagination
- Active participation
- Mind body connection

Dr Cathy Malchiodi



Options for Expressive therapy.

- Many Deep Release creative interventions. Including Fairy tales, safe place work, court room scene. Roles played in family cards etc.
- Drawing and painting
- Sculpting
- Mask making
- Movement
- Writing. Including journaling, life story ,and poetry.
- Role play.
- Collage.