



Challenges and Solutions to Mental Health Services for Older Adults

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CHRIS ROSENTHAL, LISW
JEWISH FAMILY SERVICE AND MENTAL HEALTH PROGRAMMING FOR
OLDER ADULTS

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JFS AND MENTAL HEALTH PROGRAMMING FOR OLDER ADULTS

- ▶ JFS has a 106-year history as a multi-service organization
- ▶ Aging and Disability Services (ADS) - care coordination, caregiver coaching and support, grief and dementia-support groups (for those experiencing dementia and for caregivers).
- ▶ In 2011 focus on supporting the mental health needs of older adults
 - ▶ Specific focus on depression
- ▶ Creation of LEAP (Life Enrichment Action Program) - a blend of creative arts and counseling programming

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WHY THE FOCUS ON MENTAL HEALTH NEEDS OF OLDER ADULTS - PARTICULARLY DEPRESSION?

- ▶ Survey of local community
- ▶ Recognition of issue within our client base
- ▶ Inability to locate services for clients
- ▶ Research indicating we were not alone in our experience

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DEPRESSION IN OLDER ADULTS & IMPACTS

▶ Depression in older adults

- ▶ 1 in 5 older adults have experienced depression
- ▶ Half have late-life onset

▶ Impacts

- ▶ Quality of life
- ▶ Function
- ▶ Chronic conditions and health care costs

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BARRIERS TO RECEIVING MENTAL HEALTH SUPPORT

- ▶ Stigma - no one wants to talk about depression
 - ▶ Depression is a normal part of aging
- ▶ Lack of providers with experience/interest in older adults
- ▶ Medicare's narrow definition of who can provide therapy/counselling
- ▶ Low reimbursement rates by insurance
- ▶ Home-bound status for some older adults

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CREATIVE ARTS

- ▶ Kairos' Dance
- ▶ Northern Clay
- ▶ Rivers Edge Play Back Theater
- ▶ Mia project
- ▶ Art therapy

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EXPLORED DIFFERENT COUNSELING/EVIDENCE-BASED INTERVENTIONS

- ▶ In 2011, implemented a program called Healthy IDEAS through a CS/SD grant
 - ▶ Three years with Healthy IDEAS
 - ▶ Two years with a modified Healthy IDEAS program
- ▶ In 2016 researched the PEARLS model
 - ▶ Sent staff to a two-day training in Seattle
 - ▶ Slowly expended program - currently 3 PEARLS counselors
 - ▶ Received a Live Well grant in 2019 to deliver PEARLS
 - ▶ tele-counseling in rural and metro areas
 - ▶ additional emphasis to serve caregivers

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Beth Johnson, LMFT
PSYCHOLOGY OF DEPRESSION IN OLDER ADULTS



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OUTPATIENT THERAPY WITH SENIORS

- ▶ Trauma
- ▶ Treatments
- ▶ Grief and Loss



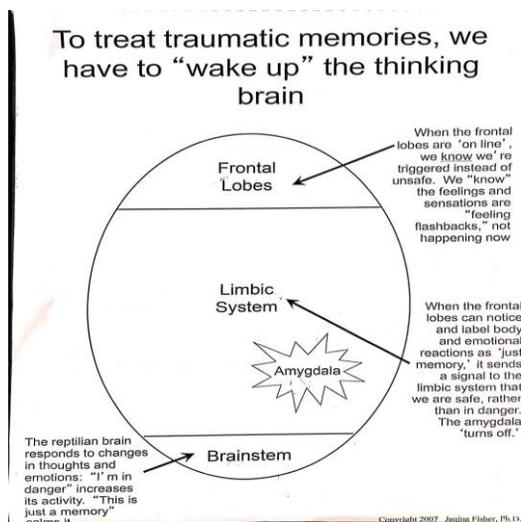
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DEFINITION OF TRAUMA

- ▶ A deeply distressing or disturbing life experience
- ▶ Approximately 70-90% of adults aged 65+ have been exposed to at least one potentially traumatic event during their lifetime

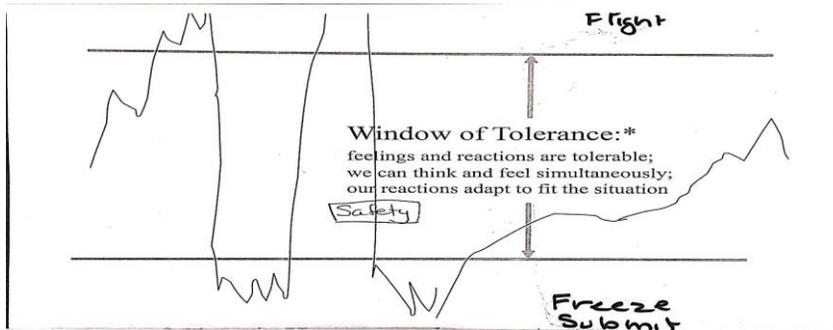
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THE AMYGDALA



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WINDOW OF TOLERANCE



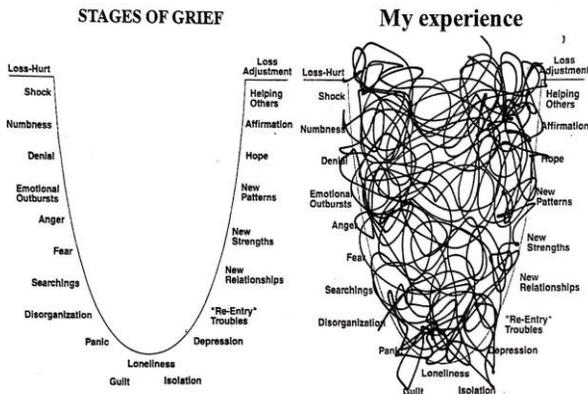
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DEFINITION OF EYE MOVEMENT DESENSITIZATION AND REPROCESSING THERAPY

- ▶ An 8-phase treatment in which a person recalls elements of a memory while engaging in lateral eye movements. It is similar to the eye movement and processing that occurs in REM sleep.

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GRIEF IS NOT LINEAR



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AMBIGUOUS LOSS

- ▶ When a person is physically absent but psychologically present or physically present but psychologically absent.

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ANTICIPATORY LOSS

- ▶ Grief that starts when one becomes aware that death is a likelihood.

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KACI CHRISTNOVICH, MA
PEARLS IN-HOME COUNSELING

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PEARLS.

- ▶ Program to Encourage Active and Rewarding Lives
- ▶ A program of Jewish Family Service of St. Paul (JFS) to address depression in adults 55+

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OUTLINE

- ▶ 1. History of PEARLS
- ▶ 2. Describe the PEARLS intervention
- ▶ 3. Define the client that is best served by this intervention
- ▶ 4. PEARLS Master Training

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HISTORY OF PEARLS

- ▶ Evidence-based
- ▶ Developed at the University of Washington-Seattle specifically for older adults with depression
- ▶ Behavioral Activation
 - ▶ Problem solving
 - ▶ Activity scheduling/participation:
 - ▶ Pleasurable - Social - Physical

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PEARLS Intervention

- ▶ Eight 1-hour in-home sessions, and four monthly phone follow-up sessions if requested
- ▶ Supports client's in taking manageable action toward goals that support mood and well-being
- ▶ Focus on behavioral activation, problem solving, and goal setting

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CLIENT PROFILE AND SCREENING

- ▶ Screening: PHQ-9, rule out SPMI diagnoses or chemical dependency
- ▶ Best suited for adults 55+ with mild to moderate depression
 - ▶ Sad vs. Depression
- ▶ Can be used in conjunction with traditional psychotherapy
- ▶ Starter Therapy

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OPPORTUNITIES

- ▶ In-person and tele-counseling
- ▶ Three counselors available: Avi Zadaka, Rachel Potter, and Kaci Christnovich
- ▶ PEARLS Master Trainers

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HOW TO REFER

- ▶ On our website: JFSSP.ORG
- ▶ Must have an ROI to give information if referring on the behalf on another person
- ▶ Via Fax: 651-698-0162
- ▶ Via Phone: Avi Zadaka 651-410-7822

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RACHEL POTTER, LSW & AVI ZADAKA, MSW
PEARLS TELE-COUNSELING

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OUR GRANTS & PARTNERS



TELE-COUNSELING HOW DOES IT WORK?

- ▶ Using technology to offer mental health services to our clients
- ▶ iPads and Zoom
- ▶ Built in data package



OUR GOALS

- ▶ Reach 75 caregivers
 - ▶ 50 urban
 - ▶ 25 rural
- ▶ Reach 50 rural and urban older adults

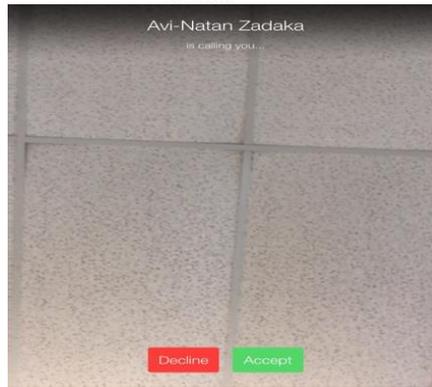
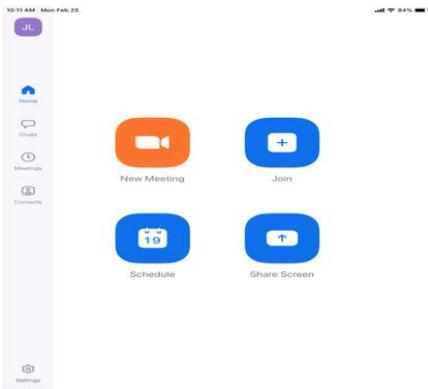
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INITIAL SESSION WITH TELE-CLIENT

- ▶ Perform initial intake with client
- ▶ Go through the “iPad Manual” with client
- ▶ Test call with client to ensure the client understands the process for tele-counseling.

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WHAT'S IN THE iPad MANUAL?



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CASE SAMPLES

► “What’s an iPad?”

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SARA WELLINGTON, LPC, ATR

ART THERAPY WITH OLDER ADULTS

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WHAT IS ART THERAPY

- Art therapy
 - Facilitates self-expression
 - Enhances communication
 - Encourages psychological healing
- Research has shown that art therapy is effective with
 - Decreasing depression and anxiety
 - Coping with physical illnesses
 - Increasing self esteem
 - Processing difficult emotions
 - No artistic experience needed



(American Art Therapy Association, 2013; Malchiodi, 2003).

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HOW IS ART THERAPY USED?

- “Art *as* therapy”
 - Engaging in the creative process of making art is inherently therapeutic
- “Art *in* therapy”
 - Art can be a symbol or metaphor of one’s inner psychological experiences



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COMMON CHALLENGES FOR OLDER ADULTS

- ▶ Depression
 - ▶ Loneliness
 - ▶ Social Isolation
 - ▶ Low Self-esteem
 - ▶ Sadness
 - ▶ Anxiety
 - ▶ Sense of Hopelessness and/or Helplessness
 - ▶ Multiple Losses
 - ▶ Memory Loss
- Role Reversal with Adult Children
 - Decline in physical functioning
 - Chronic illness
 - Pain
 - Cognitive decline
 - Boredom
 - Difficulty Seeing or Hearing

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CHANGING HOW WE THINK ABOUT AGING

Ageism worsens the problems

“Whatever loss of confidence older adults may feel as their motor, perceptual, and memory skills decline is exacerbated by the popular bias that old people cannot learn, be creative, show initiative, or continue to be productive” (Kerr, 1999, p.37).

Antidote to ageism is empowerment

“Research suggests older adults with higher rates of conscientiousness, emotional stability, persistence, optimism, and control have better subjective wellbeing, psychosocial connection, and physical health outcomes” (qtd. in Partridge, 2019, p. 19).



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BENEFITS OF ART THERAPY WITH OLDER ADULTS

- Focuses on holistic wellness instead of disease or disorders
- Express and share inner experience in a visual manner
- Healthy outlet for intense feelings (fears and anxiety)
- Learning, new art materials, skills, problem-solving
- Helps identify areas of concern
- Helps give purpose, meaningfulness
- Provides continued growth and development
- Encourages self-awareness
- Reduce stress
- Acknowledges strengths
- Increase self-esteem

• (Buchalter, 2011; Partridge, 2019)



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QUALITIES OF ART THERAPISTS



- ▶ Creative
- ▶ Attentive to non-verbal communication
- ▶ Bearing Witness
- ▶ Non-judgmental

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ART THERAPY SETTINGS FOR OLDER ADULTS

- ▶ One-on-One
- ▶ Small Groups
- ▶ Open Studio
- ▶ Community Projects
- ▶ Visiting Museums



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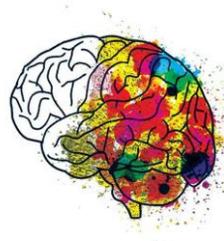
ART THERAPY AND DEMENTIA

- ▶ Person-centered care
- ▶ Goals of art therapy for people with dementia:
 - Increase self-confidence
 - Decrease anxiety and agitation
 - Increase socialization
 - Provide meaning-making
- ▶ Therapeutic relationship is essential
 - “I’ve learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.”
-Maya Angelou

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BENEFITS OF ART THERAPY FOR DEMENTIA

- ▶ Honors capacity, integrity and strengths
- ▶ Activates multiple senses
- ▶ Elicits memory and emotions
- ▶ Evokes muscle memory/improves fine motor skills
- ▶ Promotes social connection
- ▶ Provides structure and organization
- ▶ Offers a sense of control and decision-making
- ▶ Gives a sense of purpose



(MacCarthy, 2010; Baines, 2007)

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CONCLUSION

“All of us need to know what we are heard, seen, responded to, and valued, and we thrive when we inhabit a world that provides us with these experiences” (Abraham, 2005, p. 31).

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