Mental Health
Grief & Loss
Changes and Challenges

- Aging brings changes in:
  - Health
  - Functional abilities
  - Social status

- Many seniors report feeling:
  - More self-confident
  - Better adjusted
  - More accepting

Most seniors do very well, but some develop mental disorders.
Depression in Later Life

Prevalence in Canada – next to dementia, the most common mental health problem among seniors

- In the community – between 1.2%-11.2% depending on measurement – Women (14.1%) have a rate of depression almost twice that of men (7.3%)
- It is estimated that between 30-40% of seniors in institutions suffer from some form or degree of depression
Depression in Later Life

Cardiovascular death rate is 75% higher among depressed seniors than non-depressed seniors.

Diagnosis important

- Symptoms for at least 2 weeks
- Impair functioning
- Not a result of illness, medication, or bereavement

**Depression is not a normal part of aging**
Depression in Later Life

Some differences in later life

• Seniors may deny feeling sad, report loss of interest in life

• Greater incidence of illness complicates diagnosis
Depression vs. Dementia

Symptoms in Common
• Sleep disturbance
• Lost of interest
• Poor concentration
• Loss of appetite/weight loss
• Agitation/retardation of movement
• Irritability
• Memory impairment
# Depression vs. Dementia

<table>
<thead>
<tr>
<th>Depression</th>
<th>Dementia</th>
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<tbody>
<tr>
<td>• Loss of energy</td>
<td>• Difficulty organizing, losing things</td>
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<tr>
<td>• Feelings of guilt/regret</td>
<td>• Language difficulty</td>
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<td>• Thoughts of suicide</td>
<td>• Incontinence</td>
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Treatment for Depression

- Psychotherapy
- Medication
- Electroconvulsive therapy (ECT)
Anxiety Disorders

The highest rates of hospitalization for anxiety disorders in general hospitals are among those aged 65 years and over.

- Generalized anxiety Disorder (GAD)
- Phobias – Specific or Social
- Obsessive-Compulsive Disorder
- Post-Traumatic Stress Disorder
Treatment for Anxiety Disorders

- Psychotherapy
- Medications
  - Anti-anxiety
  - Anti-depressants
  - Beta-Blockers
Substance Abuse

- Alcohol abuse is estimated to affect between 5-11% if seniors in Canada.
- Men over 65 tend to drink alcohol more frequently than women over age 65.
- 1/3 of older Canadians with drinking problems began misusing alcohol after they became seniors.
- Between 40-70% of older persons seeking help for substance abuse also have a co-occurring mental health disorder.
Substance Abuse

Treatment Includes

• Detoxification

• Therapy, support
What You Can Do

• Remember the inherent worth of every person
• Explore the individual’s remaining strengths
• Identify ways to get them involved in the community
Loss in Later Life

- Physical
  - Normal aging
  - Illnesses

- Cognitive

- Independence

- Social Roles
Reactions to Loss

- **Bereavement**
  - Experience of the death of a loved one

- **Grief**
  - Emotional response to a loss

- **Normal grief**
  - Much variation
  - Common pattern of disruption in all areas of functioning
Stage Model of Grieving

- Denial
- Anger
- Bargaining
- Depression
- Acceptance
Denial

- Temporary defense
- Serves as a buffer after unexpected shocking news
- Allows time to collect ourselves
- Sustained denial rate
Anger

• When feeling out of control, reaction may be anger and rage

• People may seem defensive, resentful or belligerent

• Listen with tolerance, it’s not personal
Bargaining

• Usually brief
• An attempt to postpone the inevitable
• Most bargains made with God
• Usually kept secret, mentioned between the lines or with clergy
• Patience, understanding
Bargaining

- Prize for *good behaviour*
- Self-imposed deadline
- Promise: ask nothing more if postponement granted
Depression

• Some symptoms to be expected
• If symptoms persist beyond 2 months and interfere with functioning, may need to seek help
Reactive Depression

• lifts after vital issues taken care of
Preparatory Depression

➢ Does not occur due to past loss
➢ Takes into account impending losses
➢ Don’t try to cheer them up!

✓ “Don’t feel bad!”
✓ Personal agenda
Depression

When depression is a tool to prepare for impending loss of love objects – to attempt to facilitate a state of acceptance, offering encouragement and reassurances is not meaningful.
Acceptance

• Many think it means giving up
• Can bring sense of peace
• Neither depressed or angry
• Not a *happy* stage
• Gradual withdrawal
• Touch
Task Model of Grieving

• Complete a number of tasks facilitate a return to normal functioning and facilitate growth

• Do not need to complete one stage before moving to the next

• Can work on all of the tasks at the same time
Task Model of Grieving

- Accepting the reality
  - Coming to terms with loss and associated losses
  - Can be sensory recall
Task Model of Grieving

Doing one’s duty to deceased

• Following through on promises
• Taking up causes or activities deceased involved in
• Searching for Justice or Avenging Death
Task Model of Grieving

Regaining Control

• Feelings of loss can be disempowering

• Guilt may be an effort to gain control
Task Model of Grieving

Finding sense of purpose

• Particularly challenging for older adults who were caregiving for an extended time

Relearning the world

• Spiritually, Philosophically, Mentally and Physically
After a Death

- Dying person’s problems come to an end, family’s problems go on
- What is needed? A neutral outsider!

Provide Great Assistance

Listening
Support
Arrangements and practical assistance
STUG Reactions

When unbearable sadness comes after we have returned to a normal state of functioning. Fear lost all healing gains made to date

Sudden Temporary Upsurges of Grief

Normal occurrence – usually brief and in response to a trigger
Summary

- How to be helpful
- Be aware of your own attitudes
- LISTEN
- Don’t take it personally
- Don’t talk them out of their feelings
- Give them time
- Know bereavement resources in your communities