
Mental Health and the Elderly - speech 31 may 1993

about Ann & the CCC team going to New York - need to look after one's own health to be able to look after others; importance of relationships

Thank you, Mme *****; and thank you, ladies and gentlemen, for your warm welcome. I would like to tell you a story.

I was giving a talk to a group of family members of mentally ill patients. During the question period afterwards, a man stood up and asked about a particularly difficult situation he and his wife were experiencing. His daughter, a woman in her thirties, had been hospitalized for many years at Douglas Hospital, and the couple, who were very devoted to her, would take her home on weekends. The problem was that she would swear and curse a blue streak, verbally abusing her parents endlessly. The parents felt powerless to do anything about it, as they had been told that their daughter's behaviour was caused by her mental illness.

I asked the father how his daughter's behaviour made him feel. He replied, "I get very angry and upset, particularly when she is so abusive towards my wife. But then I feel guilty; after all, my daughter is sick, and it's not her fault that she acts this way."

Show the vicious circle of anger, guilt, abuse.

Here's what I suggested to this father. We agreed that something had to change, and the father was willing to change his own behaviour. I suggested that he and his wife should refuse to have the daughter in their home if she behaved so badly. This was very hard for them to accept, but once they had reflected that if their daughter had not had a mental illness, she would have been asked to leave long before, they agreed to try.

The plan was, as soon as the daughter became abusive, she would receive one warning: "If you continue to talk like that, we will

take you back to the hospital". Then if she did continue, they would take her back, calmly, quietly, with as little fuss as possible.

So what do you think happened?

Well, it was predictable. The first weekend, no sooner had they gotten into the car when the abuse started. A warning was given, it had no effect whatsoever, so the father turned the car around and went back to the hospital.

What do you think happened the next weekend? This time, the daughter's abuse began, worse than ever before, even before they left the inpatient unit. You see, she was doubly angry at her parents for not taking her home, and she was determined to let them know how she felt. The parents didn't even take her off the unit.

The third weekend saw a chastened daughter. On quite a few occasions, however, she started with the abuse, but this time, the warnings were effective. Why? Because she had learned that her parents meant business. They had proved to her that they were ready to do what they said they would do.

I would like to return to this story later, but now its time for the boring part, statistics.

statistics re mental health

Percentage of elderly suffering from progressive dementias:	7.5
Percentage with anxiety disorders (panic, phobia, obsessional & somatization disorders):	4
most common is agoraphobia, especially in older women	
Percent of elderly who are dependent on alcohol or drugs:	1 to 2
Percent who are paranoid:	11
Percentage with depressions:	2 to 4
Fraction of short-stay psychiatric inpatients with major depression:	one half
Lifetime risk of dementia for people who survive to age 80:	1 in 3
Percent of people aged 80 who are demented:	20
Apart from cognitive impairment, the prevalence of most psychiatric disorders decreases with age.	
However, alcohol abuse increases in the very old, especially in men.	
Caregivers of persons with dementia are prone to develop clinically diagnosable depression	
Depression is particularly likely to be correlated with physical illness or disability.	
Fraction of major depressions associated with medication use:	one-third
Risk factor for deafness in late-onset paranoid disorder:	3

deafness is the conductive type which results from middle ear disease, not the type induced by aging
the deafness seems to begin many years before the onset of paranoid symptoms.

The elderly:

are able to cope well with physical illness and other age-related insults

less prone to self-blame regarding their disability

likely to receive calmly the reality or possibility of life-threatening illness such as cancer.

Depression:

recovery rates are comparable to younger people.

90% recover initially, but 75% relapse unless maintained on medication

Percent of elderly who need to live in highly sheltered residences such as nursing homes:

5

Have you had your fill of statistics? I certainly have! I'd like to share something with you, a little vignette.

It concerns my dear wife Ann, who died a little over a year ago after a long and difficult battle with cancer.

She worked in the mental health field also, as a psychiatric nurse. She was quite a remarkable person, and she left to me and to our children, and to all the people who were fortunate enough to know her, a rich heritage, a heritage that includes a positive attitude to life,

a conviction that handicaps are simply challenges to be overcome, and a belief that, given time and motivation, you can do anything you set your mind to.

Ann was one of the team at the Continuing Care Clinic of the Jewish General Hospital where Ann worked for a number of years. The Continuing Care Clinic is an excellent program providing treatment to adults with schizophrenia or other major psychiatric disorders, and it is staffed with dedicated and giving people. The team there recognized early on that, in order to be able to look after their patients well, they had to be able to look after themselves. And a very important part of looking after themselves well is to nurture their relationships. So the team would regularly get together for an evening or a whole weekend, not to discuss their work, but to have fun, to be with each other. One memorable long weekend they went to New York city. Maxine, who likes good food, made sure the team ate well at some of the city's best restaurants. Judith, whose motto is "shop until you drop", took the group on an expedition to Bloomingdale's. I won't say whose idea it was to watch the adult movies showing on the hotel room's TV, but everyone learned something new. Ann contacted a local running club, the New York Road Runners, and joined them for a race that weekend.

Messages: you can't look after anyone else if you can't look after yourself.

One of the most important ways to look after yourself is to nurture your relationships with other people.

death of Ruby's husband - the short illness with cancer, but the much longer depression which was in all likelihood treatable - years of suffering could have been prevented

interactive talk re the usual things

Get involved in self-improvement

give up drugs, alcohol, smoking, caffeine

dealing with obesity

exercise as an antidepressant

volunteer work

hygiene in sleep, eating habits, etc.

work on enhancing your relationships

relationships are necessary for growth, and even for life

interdependence instead of dependence or independence

learn to deal with impulses

impulses are short-lived

maturity brings better impulse control

successful control of impulses becomes easier with practice

learn to deal with feelings

anger

anger is OK as a feeling

has an evolutionary value - the mother in the jungle

everyone has a right to be angry

acting on anger gets people into trouble

the fight or flight response

decreased IQ leads to poor decisions

dealing with anger

passive vs. aggressive vs. passive-aggressive behaviour

assertive behaviour

find out what makes you angry

do what is necessary to avoid getting angry, the next time

fear and anxiety

relaxation techniques: yoga, meditation, self-hypnosis, prayer

behaviour therapy for phobias

motivational ideas

There are seminars, audiocassette, & videocassette programs dealing with specific topics. Aimed primarily at business people, they are nevertheless helpful for anyone.

assertiveness training

neurolinguistic programming

Relate story of depressed pt, who I got during a session to sit, walk, facial expression, breathe, think as if not depressed, and this lifted her depression (temporarily)

time management

my parents are busier than ever: social clubs, volunteer work, practising music, visiting their children and grandchildren, taking trips.

Managing time is important; it's a non-renewable resource. People talk about "saving time". Well, time is about the only thing that cannot be saved. Once a moment has gone by, it's gone for good.

getting along with difficult people

overcoming lack of motivation, depression, burnout

goal setting

dealing with anger

overcoming self-destructive behaviours:

drug and alcohol abuse

smoking

obesity

development of specific skills:

improving memory

negotiation and persuasion

listening and interviewing

giving feedback

judging character

identifying and dealing with blocks to success

What the mind can conceive and believe, it can achieve.

Be choosy about your goals — you'll get them!

Success is the progressive realization of a worthwhile goal.

setting small goals helps ensure the experience of success

We learn what we think about.

you are what you think

Treat everyone as the most important person on earth.

Success depends on how we relate to others.

Look for the best in people.

We must change — not wait for others to change.

Everything comes from people who are affected by our attitude.

Become successful by first adopting a successful attitude.

Be something before doing it.

Carpe Diem - seize the day.

Argue for your limitations and you get to keep them (Richard Bach).

The way things are is the way things are.

Your reward is proportional to your service.