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Issues impacting the quality of mental health in older adults

Abstract

Older adults are confronted with a variety of developmental and unexpected issues that can impair or strengthen their mental health. Affective and anxiety disorders, substance abuse, and suicide are some of the mental health issues when older adults experience difficulty with the aging process. On the other hand, the quality of their physical and mental health, their support system, the resolution of grief and loss issues, and the strength of their spirituality assist older adults in recreating meaning. Thus, they are able to live their senior years with purpose. These issues will be addressed and recommendations will be described with the purpose of enhancing the mental health needs of this population.

ISSUES IMPACTING THE QUALITY OF MENTAL HEALTH

IN OLDER ADULTS

A Research paper

Presented to

The Department of Educational Leadership, Counseling,

and Postsecondary Education

University of Northern Iowa

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

by

Rachel I. Pettit

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IN OLDER ADULTS

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Abstract

Older adults are confronted with a variety of developmental and unexpected issues that can impair or strengthen their mental health. Affective and anxiety disorders, substance abuse, and suicide are some of the mental health issues when older adults experience difficulty with the aging process. On the other hand, the quality of their physical and mental health, their support system, the resolution of grief and loss issues, and the strength of their spirituality assist older adults in recreating meaning. Thus, they are able to live their senior years with purpose. These issues will be addressed and recommendations will be described with the purpose of enhancing the mental health needs of this population.

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Issues Impacting the Quality of Mental Health in Older Adults Since the growth of people ages 65 and older in the 21st century is expected to increase, counselors are likely to have older clients who are confronted with a variety of issues that can impair their mental health. Some of the variables influencing the quality of mental health in this population are the quality of their support system, their physical health, the amount of autonomy in their personal issues, resolution of grief and loss issues, and the strength of their spirituality. As this population reminisces on their life experiences, they can feel both remorse and acceptance. Lack of control and acceptance can influence the development of affective and anxiety disorders, substance abuse, and suicide attempts. On the other hand, older adults who feel they have control over their lifestyle choices in both personal and professional realms rather than perceiving other persons and institutions as controlling their lifestyle, often are able to be more flexible in resolving unexpected life events. Consequently, a stronger self-confidence results that empowers older adults to take risks to improve their lifestyle.

Older adults generally experience issues of loss such as physical and cognitive abilities, family members and friends in their support system, financial resources, and living status. Furthermore, grieving can occur for persons who have unfulfilled dreams and aspirations. The grieving process is unique for each individual, however, when persons have an internal locus of control and a strong Ч

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social support network during challenging times, their life journey can be easier and more successful.

The depth of spirituality older adults possess influences the movement through the grieving process as well as lifestyle choices. Persons are often motivated to find meaning and purpose in living during both stable and challenging times. Spiritual maturity can give guidance to older adults who are working through various life transitions influencing their mental health.

Quality of mental health in older adults influences choices made concerning physical, social, financial, and spiritual well being. When persons have an internal locus of control, take responsibility for self-improvement, and have a sense of connectedness with people and community, their mental health is strengthened.

For these reasons, the purpose of this paper is to describe a profile of older adults, discuss their mental health issues, specifically, affective and anxiety disorders, substance abuse, suicide, and identify other variables influencing mental health. Dynamics of the grieving process as well as specific losses (i.e., financial and personal losses, independent living status, aspirations, etc.) older adults experience will be identified. Recommendations will be made to enhance the counseling experience for older adults.

A Current Profile of Older Adults

Adults aged 65 and older have unique characteristics and developmental issues that counselors need to be aware of. In 1999, about one in eight Americans was 65 years or older, with the ratio of seven women to five men. Seventy seven percent of men were married compared to 43% of women and 83% were Caucasian. Sixty eight percent completed high school, and 52.5% reported having at least one disability (Duncker & Greenberg, 2000). The type of disability that persons have can impact their financial, social, emotional, and residential stability. Cognitive and/or physical disabilities are likely to impair functioning for older adults in many activities of daily living such as grooming, cooking, dressing, and mobility. These impairments may require older adults to reside with family, friends, or in a nursing facility. Duncker and Greenberg (2000) also reported 67% of adults aged 65 and older resided in a family setting, 79% owned their home, and had median incomes of \$19,079 and \$10,943 respectively for men and women. It can be anticipated that older women might be confronted more with financial challenges that impact many other domains in their lifestyles whether or not they are residing with family or alone compared to older males. Counselors can anticipate working more frequently with older women who have a disability, limited income, are single, widowed, or divorced, and need support with lifestyle

transitions. Each of these factors can influence the quality of their mental health which will be addressed in the next section.

Specific Mental Health Issues Among Older Adults

The more frequently researched mental health issues among older adults are affective disorders, anxiety disorders, substance abuse, substance dependence, and suicide. Older adults who are dealing with life transitions (i.e., impaired mobility, grieving losses, adjusting to changes in living arrangements, etc.) often struggle with one or more of these mental health issues. Primary care physicians may be the first professionals to come in contact with older adults who are struggling with these problems, yet may not take time to accurately assess if these patients require further medical or mental health interventions (Kaplan, Adamek, & Calderon, 1999). If left undiagnosed and untreated, older adults with mental health issues could be at a higher risk for affective disorders, anxiety disorders, substance dependence, suicidal ideation, and suicide. Since primary care physicians may be the initial gateway for older adults with mental health concerns to receive services, assessments for these symptoms need to occur by the primary care physician.

Affective and Anxiety Disorders

A variety of symptoms can be observed in older adults with possible affective and anxiety disorders. Several studies (Barusch, Rogers, & Abu-Bader, 1999; Beck, Stanley, & Zebb, 1996; Duberstein, Conwell, Seidlitz, Denning, Cox, & Caine, 2000) identified that older adults diagnosed with affective and anxiety disorders expressed generalized worry, social fears, and thoughts reflecting an external locus of control. These symptoms were in reaction to declines in their physical health, uncertainty with financial and living status, and changes in their social support system. Older adults possessing an external locus of control were more likely to feel powerless over changes in their lifestyles as well as choosing not to take action when possible to remedy a problem. Worries about money, physical health, friends, family, and living arrangements kept older adults immobilized to make choices, to ask for assistance, and thus not able to fulfill their responsibilities of daily living. When these fears persist, older adults might engage in substance abuse with alcohol or medications to cope with symptoms of affective or anxiety disorders.

Substance Abuse and Dependence

Older adults struggling with normal life transitions and/or unexpected life events might engage initially in social drinking, taking prescription and over the counter medications that can lead to substance abuse and possible dependency to cope with feelings of anxiety, sadness, or anger. Ludwick, Sedlak, Donehy, and Martsolf (2000) identified forgetfulness, self-neglect, tremors, weight loss, and an increase in physical injuries as signals that older adults could be abusing substances. Persons working at community service agencies (i.e., congregate meals, senior centers, etc.) who see older adults on a daily basis are likely to notice these issues more quickly compared to family and friends who have infrequent contact with older adults. These individuals need to express their concerns promptly to provide support and make appropriate referrals to decrease the possibility of suicidal ideation and suicide attempts in older adults.

<u>Suicide</u>

Suicide thoughts and attempts can occur when symptoms of affective and anxiety disorders are ignored and continue over time. Alcohol and substance abuse developing into dependence may be methods that older adults could choose to attempt suicide to cope with affective and anxiety disorders. Some older adults have considered suicide when they are aware of having a terminal illness with prolonged suffering or when they are struggling with the grieving process with the loss of a loved one (Fry, 2000; Hegge & Fischer, 2000). Counselors are confronted with ethical issues and responsibilities when their older adult clients state their preferences in ending their lives in a rational state of mind and are at a high risk of attempting and completing suicide. Concerned significant persons in older adult's support system need to be proactive in making critical interventions to interrupt older persons from ending their lives when they are aware that suicide is being considered. Suicidal behaviors can be the outcome of older adults who have struggled with symptoms of affective and anxiety disorders, substance abuse, and problems coping with various lifestyle transitions. Each of these issues is often influenced by a variety of external and internal variables that counselors need to assess.

Variables Influencing Quality of Mental Health

The quality of mental health in older adults will vary greatly depending upon a wide range of both internal and external variables influencing their personality. The level of acceptance of lifestyle changes is influenced by the interaction between older adult's subjective experiences (i.e., attitudes, beliefs, self-esteem, locus of control, etc.) and their objective experiences (i.e., lifestyle choices, nutrition, physical activity, social interactions, etc.). The quality of older adult's support system also influences the degree of mental health. The grieving process with various losses, specifically, financial and residential losses, physical and cognitive abilities, and unfulfilled hopes and dreams can influence the mental health of older adults. The depth of spirituality older adults possess can also influence with adjustment to life transitions and degree of mental health. Each of these variables interacts with each other and need to be considered by counselors working with this population.

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Objective and Subjective Experiences

Counselors need to be aware of the interaction between the objective realities of their older adult clients with their subjective experiences and perceptions. When persons have positive self-esteem and possess an internal locus of control, they have more confidence to take risks to enrich their lives with meaningful relationships, select and engage in a purposeful career, adopt good nutritional choices, maintain independent residential status, and make wise financial decisions. Whether or not older adults experience challenges in their lifestyles is largely influenced by the degree of healthy choices they had made in their earlier years of life. However, the attitude older adults adopt towards unexpected and expected declines in their physical and cognitive abilities, financial challenges, living arrangements, and losses of significant persons in their support system influences their quality of mental health. When older adults have an internal locus of control and positive self-esteem, they are more likely to adjust better to unexpected and normal lifestyle changes, thus having good mental health. Furthermore, these variables also influence the quality of support systems older adults possess to cope with lifestyle changes.

Social Support System

A wide variety of individuals and agencies can be components of older adult's social support system. Medical professionals, mental health professionals,

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senior centers, support groups, individual friends, and family members are potential sources of support. When older adults have impairment in their physical health, often isolation occurs due to limited face to face interactions with significant members of their support system (Fees, Martin, & Poon, 1999). When older adults lose their spouse or life partner due to death, a significant decline is experienced in their support system when persons have relied primarily on their partner for emotional and physical support. Sixty percent of older adults reported fears and concerns with being alone and without social support at the end of life (Fry, 2000). When deep conflicts and unresolved issues exist in the relationships between older adults and their immediate family members, this can also impair the quality of their support system. If loneliness persists and is untreated, older adults are prone to developing affective or anxiety disorders, and may engage in substance abuse. The support system of older adults is one powerful variable to assist them with a variety of losses when encountering the grieving process. Grief and Loss Issues

When older adults experience various personal or material losses in their lifestyles, the quality of their mental health is challenged. Persons can experience many types of losses, specifically, a loss of significant family members and friends in their support system, loss of their home due to financial or physical issues, and a loss of their physical ability to care for themselves. Older adults whose support

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systems have decreased due to death or to geographical moves often encounter the grieving process and loneliness. Some older widows who were grieving experienced feelings of numbness, panic, anger, guilt, despair, remorse, and loneliness before arriving at acceptance with the loss of their partners (Hegge & Fischer, 2000). Complicated grieving, when uninterrupted, can influence the onset of affective or anxiety disorders and possibly substance abuse. Personal losses can also influence a decrease in financial resources, a strain in independent living status, and a loss of unfulfilled hopes and dreams in older adult's social support system. Financial losses interact with a variety of domains in older adult's lifestyle.

<u>Financial loss.</u> A loss of financial resources can occur when older adults have chronic health issues, limited insurance benefits, and lose their spouse or life partner to death. Financial losses can also trigger the grieving process when older adults lose some of their independence and need to make changes in their living arrangements to adapt to the losses. Older adults of African and Latino cultures expressed concerns with having affordable housing and adequate financial resources in their lifestyles to maintain independent living (Napoles-Springer, et al., 2000). When financial resources are inadequate, older adults would need to determine which lifestyle issues take priority. For example, they might need to choose between making their house payment or rent, paying utilities, buying medication, selecting healthy foods, participating in counseling, and social

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activities. When the priority is to maintain their residential status and money is unavailable for medications and/or good nutritional choices, both physical and mental health could become impaired for older adults. A loss of physical and emotional health and limited financial resources with older adults could result in a loss of their independent living and a possible move into a long-term care facility if family members or friends are unavailable for support. Counselors providing therapy to older adults need to consider the interaction and interdependence between each of these issues to adequately understand and support their older adult clients facing these issues.

Grieving unfulfilled hopes and dreams. Unfulfilled hopes or aspirations of older adults are an additional area of importance for counselors to consider when working with this client population. As older adults reflect on their life experiences, they could encounter feelings of sadness, frustration, regret, and anxiety with missed career or educational opportunities, lack of healthy relationships with friends or family members, and unexpected chronic health conditions. The quality of education and career decisions often influences the financial, social, emotional, physical, and spiritual well being of older adults in their later years. The support system that persons develop and maintain in their earlier years of living influences the level of mental and physical health in their senior years. Chronic health conditions such as diabetes, cancer, heart disease, and Alzheimer's disease can impair the achievement of personal goals and aspirations of older adults when coping with adaptations to their chronic health conditions and possibly trigger the grieving process with some older adults.

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Grieving Process. The journey through the grieving process for older adults encountering losses with finances, physical or cognitive abilities, with people, and with their aspirations is very unique based on both internal and external variables. When many unexpected losses occur, persons could develop a stronger external locus of control and develop feelings of powerlessness, anxiety, depression, and meaninglessness in reaction to their losses. Barusch, Rogers, and Abu-Bader (1999) found that older adults with an external locus of control might increase their likelihood for developing affective disorders. Differences in gender and racial identity can also influence the degree of perceived control within oneself and with life events experienced thus impacting quality of mental health. In a study of 321 adults ages 65 to 94, older women perceived themselves as having more control over the solutions for problems compared to older men. Furthermore, men viewed themselves as having more control over the causes of the problems they encountered, and persons of African American origin viewed themselves as being more responsible for both causes and solutions for problems (Nemeroff & Midlarsky, 2000). Thus, when older adults feel confident and empowered to make effective decisions to resolve their challenging issues, they are more likely to have

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a successful outcome. As older adults take responsibility for their life situations and make rational choices to resolve their issues, quality of mental health is enhanced. In a study of 81 persons diagnosed with depression, it was found that older adults who were more extroverted were less likely to attempt suicide compared to persons showing stronger traits of introversion (Duberstein et. al., 2000). Older adults who are more extroverted are likely to have a strong social support system and utilize their support system in both pleasant and challenging times. Those who tend to be more introverted may have difficulty asking for help and consequently have their mental health at a higher risk for affective or mood disorders when encountering adversity. When older adults experience difficulty working through the grieving process, they could exhibit some traits of anxiety disorders. Consequently, it is important for counselors to consider the interaction between the grieving process, self-esteem, locus of control, and stability of social support system with their older adult clients and how these variables influence the quality of mental health. As older adults reflect on and engage in activities to strengthen their spirituality, their grieving becomes less intense, thus enhancing mental health.

Spirituality and Mental Health

The level of spirituality older adults possess largely influences the journey they encountered throughout their life time and especially in times of grieving losses. Spiritual development begins at an early age and is impacted by both internal and external variables. The degree of stability in childhood, adolescence, and early adulthood years older adults experienced within their family of origin influences their physical and emotional health, the quality of their support system, and their academic or career success (Witmer & Sweeney, 1992). Values instilled in the family of origin frequently influence persons in their choices with academic pursuits, selecting careers, and in their social support systems. Older adults who have acted in congruence with their values and personal ethics to select their career and social support system are likely to have a stronger sense of spirituality and purpose in living. When older adults have a strong positive sense of worth, confidence, and clarity with the meaning and purpose of their lives, their mental and physical health are likely to be stable even when faced with challenges of physical, social, financial, and residential changes (Agren, 1998; Levy, 1999; Witmer & Sweeney, 1992). The interactions between the internal and external experiences older adults encounter can strengthen or threaten their sense of spirituality and meaning in life. Older adults who have engaged in a lifestyle of altruistic and ethical actions and have a strong sense of meaning and purpose are more likely to have a strong sense of serenity and less fears of dying when reflecting on their earlier years of living (Meddin, 1998). Counselors might need to support their older adult clients whose lives have lacked meaning to grieve their

missed opportunities and then recreate their life goals to decrease symptoms of anxiety and depression (Coleman, 1999; van Selm & Dittmann-Kohli, 1998).

Objective and subjective experiences, social support systems, grieving, and spirituality interact together throughout the life span and influence the quality of persons' mental health in their senior years of living. When older adults have an internal locus of control and high self-esteem, they are likely to have a stable support system to assist with grieving various losses that can impair mental health. When confronted with developmental and unexpected changes in living, older adults' ability to refocus energy to recreate meaning and purpose will influence their mental health. Since counselors play a critical role in supporting older adults challenged by the life events identified above, they need to be knowledgeable and familiar with various interventions and resources.

Interventions and Resources to Enhance Mental Health

Older adults have encountered numerous experiences throughout their life span. Therefore, a holistic approach is needed in order to assess their physical, emotional, social, financial, vocational, residential, and spiritual well being. It is also beneficial to be aware of research findings. When older adults are involved with support groups, senior centers, and other professional agencies, counselors need to work collaboratively with these groups in order to be effective in identifying their mental health issues. Individual and group therapy modalities allow older adults opportunities to increase their support system and to work through issues challenging their mental health. Narrative therapy provides older adult clients the opportunity to recreate their life story, embrace subjective and objective experiences, and move towards acceptance of their lifestyle. Existential therapy offers ways to enhance meaning in their lives so that the reality of death becomes more acceptable. Each of these recommendations will be addressed in the subsequent sections.

Holistic Approach

The domains of physical health, emotional health, social support system, spirituality, career, finances, and living status are interconnected and interdependent with each other. When one or more domains is impaired, it influences stability with other areas of living and could impair mental health (Richman, 1994; Witmer & Sweeney 1992). For example, older adults who have struggled with work and career issues could experience deficiencies in their finances, medical insurance, support system, and living arrangements. When older adults encounter challenges with limited finances over a period of time, symptoms of affective or anxiety disorders could occur. Furthermore, if these symptoms are untreated, substance abuse and suicidal ideation can develop. Inadequate health insurance can deprive older adults from getting routine health exams or seeking treatment for acute illnesses. When these issues are neglected over time, impairments in physical and mental health can develop. Older persons with limited finances and health insurance sometimes have to choose between medication and paying their rent or utilities. Counselors need to complete a thorough social history to assess each of the above domains, select appropriate interventions, and make referrals to support their older adult clients.

Older adults who are challenged with impairments in physical and emotional health, finances, insurance, and in their living situation can also question their belief in religion and spirituality. Some older adults who have found comfort and meaning in religious activities earlier in their lives may become angry with "God" or "Higher Power" for allowing adversities in their life. Nevertheless, spiritual and religious beliefs often times can offer a comfort for older adults when facing adversities in living. Spirituality can influence older adults with their decisions about their careers, their relationships with significant persons, and the ways in which they interact with their community and the world. With the support of counselors, older adults can work through challenges in their life style and become clearer with their purpose in living as they consider changes to improve their physical, emotional, and social well being.

Counselors can provide meaningful therapeutic services when they view older adults as the experts of their living situation, respecting their opinions and desires, and considering these when developing treatment goals and interventions (Fry, 2000; Ranzijn & Luszcz, 2000). Information from research findings can guide counselors in assessing older adults from a holistic perspective and developing effective treatment plans.

Research Findings.

Counselors can enhance their therapeutic interventions working with older adults by reviewing and integrating research findings from both quantitative and qualitative studies with this population. Quantitative research with older adults has documented the existence of affective and anxiety disorders (Barusch, Rogers, & Abu-Bader, 1999; Beck, Stanley, & Zebb, 1996; Duberstein, et. al., 2000). The condition of loneliness and its impact on physical and mental health was identified and at times resulted in anxiety and affective disorders (Fees, Martin, & Poon, 1999). Pachana (1999) discussed the possibility of combining therapy and psychopharmacological interventions for treatment of older adults with depressive symptoms. These studies provide validation of the existence of mental health issues and relevant interventions to improve the quality of life for older adult clients.

Qualitative research adds an added dimension in that it allows research participants the opportunities to disclose their subjective experiences in relation to the issues under investigation. Counselors can be more effective in working with older adults as they closely attend to information about values, interests, and beliefs that interact with their physical, emotional, mental, and spiritual well being. The Philadelphia Geriatric Center Morale Scale and The Centre of Epidemiological Studies-Depression Scale were two measures used to assess levels of morale and affective states in older adults (Ranzijn & Luszcz, 2000). Counselors would be able to apply results from these assessment scales to select relevant interventions to work with older clients struggling with mental health issues. Questionnaires and personal interviews with open-ended questions are additional methods for researcher to gain insights into the subjective experiences of older adults. Respondents disclosed their perceptions of what factors constitute a high quality of life, along with their worries about aging by completing the Self-Evaluation of Life Experiences (SELE) questionnaire (van Selm & Dittmann-Kohli, 1998). The results of the study reflected that the older population desires to have autonomy, control, and as much independence as possible in making decisions influencing their lifestyles. Counselors need to thoroughly assess the personal strengths and social support of their older clients and incorporate interventions to empower them to maintain a high level of independence for as long as possible. Research findings will empower counselors with knowledge of personal perspectives of clients and the importance of senior centers and support groups that can influence their quality of mental health.

Senior Centers and Support Groups

Levels of morale, social support, and independence can be increased in older adults who are physically able to leave their homes to participate in senior adult centers and support groups. Furthermore, many centers offer recreational activities, congregate meals, physical and intellectual activities, volunteer opportunities, and artistic activities (Wacker, Roberto, & Piper, 1998). Paid and volunteer staff working at senior centers have the opportunity to informally assess older adults who may benefit from additional services to enhance their emotional and physical well being. Support groups offer opportunities to work on specific issues (i.e., Alzheimer's disease, grieving losses, etc.) providing both information and emotional support. Support groups give persons the opportunities to reminiscence on their past experiences, to reflect on and possibly recreate their life stories, and to provide emotional catharsis for unresolved feelings and issues (Coleman, 1999). Counselors need to collaborate with other professionals by referring older adults to specific support groups and to participate in senior centers.

Collaboration with Other Professionals

Counselors often will need to work as a support team along with medical and social service programs to provide thorough services to older adults. Kaplan, Adamek, and Calderon (1999) recommend psychosocial interventions to enhance the overall well being of older adults. Exploring the interaction among physical, emotional, social, residential, financial, legal, and spiritual components of older adult's living situations will provide older adults with opportunities for stability in their remaining years. Counselors act as liaisons referring and receiving referrals from primary care physicians, nurses, and other agencies providing physical care, social support, or residential support to older adults. As counselors work collaboratively with other professionals providing services to older adults, the quality of individual and group therapy sessions can be enhanced.

Individual and Group Therapy

Both individual and group counseling modalities can be effective in working with older adult clients with affective disorders, substance abuse issues, and suicidal ideations and suicide attempts. Individual counseling offers an opportunity for counselors to begin the working alliance built on acceptance, trust, and respect. It also allows counselors to assess persistent symptoms of depression and potential risks for suicide attempts by examining social and personal factors impairing mental health (Richman, 1994). Group counseling interventions provide older adults the opportunity to become aware that their peers have similar issues coping with loss, loneliness, isolation, and feelings of uncertainty in living (Solomon & Zinke, 1991). Groups may also be more cost effective for older adults with limited financial resources and can occur in both the counselor's office and in long-term care facilities. Older adults with substance abuse issues may resist traditional group therapy and prefer to find support for abstinence by participating in Alcoholic Anonymous or other related twelve step support groups (Ludwick, Sedlak, Doheny, & Martsolf, 2000). Whether individual, group therapy or support group modalities are selected, older adults need to be active in determining their counseling goals and interventions to enhance their levels of selfconfidence. Specific interventions from Narrative and Existential therapies can provide valuable ways for counselors to support their older adult clients with mental health issues.

Narrative Therapy

Interventions from Narrative therapy can empower older adult clients to process earlier life events, identify personal successes and limitations, build on the internal qualities that influenced earlier successes, and eventually arrive at acceptance of one's life. As older adults reflect on their life story, a variety of feelings can be encountered ranging from pleasure to disappointment. Counselors engaging in Narrative therapy need to support older adults in unraveling the history in their life story, identifying positive and negative feelings, motivations, and events that have shaped one's life. The next phase is for older adult clients to accept the events of their life story and determine how they desire to have their current and future life story unfold. Clients need to be aware of their important life themes, work through challenging events, resolve disappointments, and discover genuine and lasting commitments to enhance their present and future life story (Coleman, 1999).

Existential Therapy

Existential theory compliments Narrative theory in that counselors actively attend to their client's reflecting on past and present events in their lives and finding ways to recreate meaning from the life events. New meaning can give older adults direction for selecting goals and engaging in purposeful activities to enhance their support system, their mental health, and their final years of living. Existential theorists encourage clients to accept responsibility for their life decisions, embrace feelings of aloneness and anxiety, and to make free choices about behaviors that will create meaning in living. Furthermore, existentialism assists older adults to consider death in the dimension that it can give significance to living by taking responsibility in making meaningful choices.

When older adults encounter multiple unexpected personal losses and feel ambivalence with their life goals after experiencing losses, a sense of meaninglessness and anxiety often follow (van Selm & Dittmann-Kohli, 1998). Counselors can be one component in the older adults' support system to identify and release feelings of anxiety and depression and select new goals to embrace the meaning and value of the challenging life events. To successfully work through the grieving process of multiple losses, older adults need an emotionally safe environment to explore unresolved feelings, accept responsibility for the direction their life has taken, and determine the course of their life for their remaining years of living (Coleman, 1999). Counselors empower their older adult clients emotionally when they explore possible activities to increase and maintain their support systems thus enhancing meaning and purpose in living their senior years (Schindler, 1999). The depth of meaning and purpose older adults are able to achieve through processing their life events independently and with the support of individual and group counseling influences the quality of their mental health.

Conclusion

Understanding issues influencing the quality of mental health in older adults and knowledge of various means of support are prerequisites in working with this population. As counselors assess their older adult clients from a holistic perspective identifying strengths and limitations in the domains of physical and emotional health, social support system, residential situation, financial stability, and career, their understanding of clients will be enhanced. Counselors who integrate concepts from Narrative and Existential therapies provide older adults the opportunities to work through the grieving process to resolve personal and material losses and to recreate meaning and purpose in their lives. Consequently, levels of mental health, spirituality, and quality of support system are enhanced. Older adults have the opportunity to improve their mental health as they utilize their support system to resolve feelings of depression, anxiety, and loneliness. This population has the opportunity to move beyond enduring to enjoying their later years of life as their sense of meaning and purpose in living becomes clear and intentional.

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