

Older Adults and Cognitive Problems

This handout accompanies the online module from the E4 Center on this topic



Older adults may experience and talk about mental health concerns differently than younger adults. Older adults also are at increased risk for death by suicide. Building your understanding about older adult mental health can help you more effectively support older adults (and possibly their caregivers) during a crisis. Be attentive to common life transitions, grief, medical conditions, medications, substance use, cognitive function, and social support, as these can all affect older adult mental health. Become curious about your own beliefs and attitudes about aging and older adults. Awareness of common ageist beliefs can ensure your callers get the proper support and referrals they need. Consult with your supervisor and consider whether it's appropriate to request an in-person safety check.



Key Facts

- Normal aging includes some changes in cognition, such as changes in processing speed, working memory, thinking through decisions, and other complex tasks.
- Delirium and depression can cause cognitive problems, and both conditions are treatable and potentially reversible.
- Dementia is not a normal part of aging. Dementia is more than being forgetful and can be caused by several different diseases.
- Alzheimer's disease and cerebrovascular disease are the most common causes of dementia.
- Psychosis is a symptom of multiple diseases, including mental illness, brain tumors, dementia, and infections.
- People experiencing psychotic symptoms, such as delusions or hallucinations, often believe that their experiences are very real.
- IMPORTANT: if someone's mental status has changed quickly (in a matter of hours to days) — it is critical for them to go to an emergency department.



Practical Strategies

- Use the teach-back method. To ensure the caller understands what you are telling them, ask them to repeat back to you their understanding of what was just communicated. Clarify as needed. This approach is helpful for callers who have cognitive impairments but can and should be used with all types of callers
- Refer for an evaluation. Callers who sound confused or are having difficulty communicating should be referred for a medical evaluation. It is possible that there is a medical condition, including hearing impairment, medication problem, substance use, depression, stroke, or other condition that needs immediate treatment.
- Reassure. Cognitive issues, memory problems, and psychotic symptoms can all be very frightening to the person experiencing them and to their caregivers and loved ones. Reassure callers that there is help for cognitive issues and some underlying causes, like depression and delirium, are very treatable.
- Caregivers. Caregivers for older adults who are coping with or worrying about their care recipient's cognitive difficulties can benefit from much of the information that is covered in this module. Information, understanding, and reassurance is important to caregivers.



Suggestions for What to Ask and Say

If your caller sounds confused, ask a few basic questions to obtain an understanding of their experience. Remember to ask just one question at a time.

EXAMPLE: "You mentioned feeling forgetful." "Can you describe what that is like for you?" "How does that impact your day-to-day?"

If you are having trouble following what they say, ask them to clarify.

EXAMPLE: "I think you said [repeat back what you think you heard]. I am sorry, but I don't really understand. Would you please tell me more? I want to understand."

Use the teach-back method.

EXAMPLE: I want to make sure that I explained things clearly. Can you tell me, in your own words, what you heard me say?

EXAMPLE: We talked about a lot of things today. I want to make sure I was clear during our discussion. Could you tell me how you would describe ______ to a friend or family member? [then later – just ask one question at a time!] Can you tell me what you will do after our call today?

Ask about their support system (including family or caregivers) and their living situation.

EXAMPLE: "It would really help me to learn a little more about your support system. Who are the important people in your life?" [after response, ask just one question at a time!] "How often do you see them?" "How often do you talk with them?"

Learn More:

The <u>HealthInAging website</u> provides information on aging, dementia, causes, symptoms, care and treatment, and lifestyle management.

Information is available for caregivers and others about various care options for people living with dementia.

Information is available about <u>living with psychosis and</u> providing care for older adults.

Information is available about <u>psychosis and older adults</u> <u>living with schizophrenia</u>.