

# SEX, DRUGS, and ROLLING WALKERS

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## Assessing Human Needs



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## A Changing Demographic

- Major changes in the demographic profile of the United States are under way, and these changes are projected to accelerate in the next several decades. Important demographic shifts include:
  - The aging of the population and the projected growth of the oldest old (those 85 years of age or more);
  - The changing racial and ethnic composition of the population resulting from immigration and the rapid growth rates of the minority populations, especially those of Hispanic and Asian origin;
  - The shifts in family patterns (particularly the trend toward smaller family size, childlessness, and divorce); and
  - Increasing poverty.

Source: Institute of Medicine (US) Committee on the Adequacy of Nursing Staff in Hospitals and Nursing Homes; Wanderlich GS, Sloan F, Davis CK, editors. Nursing Staff in Hospitals and Nursing Homes: Is It Adequate? Washington (DC): National Academies Press (US); 1996. 2. Implications of Population Change. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK232661/>

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## A Changing Demographic



The growing elderly population will be a major determining force in the next century for the demand and supply of health services and, therefore, for the type of resources needed to provide those services.

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## A Changing Demographic

The growth in the number of older people of different racial and ethnic backgrounds, changes in disability rates among the different racial and ethnic groups, and patterns of both formal and informal long-term supportive service use among these groups need to be considered in state and national planning for future long-term services.

[https://www.aarp.org/home-garden/livable-communities/info-2005/6119\\_1tc.html](https://www.aarp.org/home-garden/livable-communities/info-2005/6119_1tc.html)

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## The Growing Shift to Home and Community-Based Care

- Many older people and people with disabilities who need long-term care services prefer non-institutional settings.
- Government payers like non-institutional services because they are less costly than nursing homes that are certified for participation in the Medicare or Medicaid programs, or both.
- Between 1995 and 2008, the percentage of Medicaid long-term care dollars spent on home and community-based services increased from 19% to 42%.

Source: <https://medicareadvocacy.org/the-changing-demographics-of-nursing-home-care-greater-minority-access/>4E2%80%A6-good-news-bad-news/#:~:text=Recent%20research%20regarding%20racial%20and,elderly%20African%20American%20living%20in

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## What is Quality of Life?

- Subjective, multidimensional, encompassing positive and negative features of life.
- A dynamic condition that responds to life events

<http://www.forbes.com/sites/iese/2013/09/04/quality-of-life-everyone-wants-it-but-what-is-it/>

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## Long-Term Care: Mourning the Losses



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Grief is a reaction to loss.

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## Recognizing Grief



Denial – Anger – Bargaining – Depression - Acceptance

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## Accommodation of a Fading Personality



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## New Considerations

- Capacity determinations for medical and psychosocial decision making;
- Marijuana;
- Pain management – opioids and addiction;
- Sexuality/LGBT populations;

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## Medical Marijuana



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## Medical Marijuana

### “Cannabis Use Rising Among Older Adults, Study Shows”

- The number of older Americans using cannabis has increased by 75% in recent years.
- The proportion of adults ages 65 and older who reported past-year marijuana use increased from 2.4% to 4.2% from 2015 to 2018.
- While the increase appears to be driven by seniors who do not have multiple chronic diseases, evidence shows that people with diabetes are among the groups turning to greater use.

SOURCE: <https://www.mcknights.com/news/clinical-news/cannabis-use-rising-among-older-adults-study-shows/>

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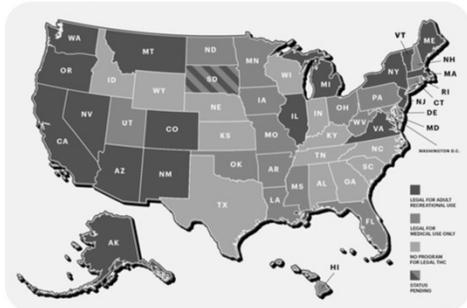
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## Legalization of Marijuana by State



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## Smoking Policy

If the residence permits smoking, it shall have a policy that includes the following:

- a. Location of designated smoking area(s) separate from the common area;
- b. Prohibition of smoking in any area other than the designated area(s);
- c. Adequate ventilation in smoking areas; d. Assessment (upon admission, quarterly, and when a significant change in function occurs) of all residents that smoke to ensure safe smoking capabilities.

2.4.13 Management of Services

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### Amazon Announced Tuesday it Supports the Federal Legalization Of Marijuana

Dave Clark, CEO of Amazon's worldwide consumer division, said changing state laws on marijuana mean Amazon will no longer include the substance in the company's pre-employment drug tests and that the drug will now be treated the same as alcohol.

Positions subject to regulation by the US Department of Transportation will still include the marijuana test, Clark said, adding that the company will "continue to do impairment checks on the job and will test for all drugs and alcohol after any incident."

(CNN Business 6/2/21)



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## LGBTQ A Growing Population

- More than 39 million people in the U.S. are age 65 years or older including 2.4 million people who identify as lesbian, gay, bisexual or transgender (LGBT).
- As the baby boomer generation ages, the older adult population will increase from 12.8 percent to an estimated 19 percent in 2030.

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## LGBTQ+ A Growing Population

Psychological service providers and care givers for older adults need to be sensitive to the histories and concerns of LGBT people and to be open-minded, affirming and supportive towards LGBT older adults to ensure accessible, competent, quality care.



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## Sexuality and Sexual Expression

- Transgender older adults face profound challenges and experience striking disparities in areas such as quality of health and access to health care services, mental health care, employment, housing and other areas of livelihood.
- Many transgender elders routinely encounter both a health care system and a national aging network that are ill-prepared to provide culturally competent care and services and create residential environments that affirm the gender identities and expressions of transgender older people.

Source: <https://transequality.org/issues/aging>

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## Psychosocial Considerations

- Trauma Informed Care
- Identification of Stress-Related Illness
- Mental/Behavioral Disorders
- Recognition of Substance Use and Addictions
- Dementia Care Standards
- Non-Pharmacologic Interventions

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## Cultural Competency

- **Cultural competence** is the ability to understand, communicate with and effectively interact with people across **cultures**.
- **Cultural competence** encompasses: being aware of one's own world view, developing positive attitudes towards **cultural** differences, gaining knowledge of different **cultural** practices and world views.

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## Prevalence Of Serious Mental Illness (SMI) In Assisted Living (AL)

- The prevalence of SMI in AL increased by 54%, rising from 7.4% in 2007 to 11.4% in 2017.
- Residents with SMI were more likely to be dually eligible for Medicare and Medicaid than residents without SMI.
- The prevalence of SMI in AL ranged from to 3.2% in Wyoming to 33.1% in New York.
- Approximately 10% of AL communities had over half of the sample's AL residents with SMI.

Am J Geriatr Psychiatry  
2021 May;29(5):434-444.  
doi: 10.1016/j.jagp.2020.09.011. Epub 2020 Sep 19.

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## Mental Illness: Drug and Alcohol Dependence



50 % of individuals diagnosed with severe mental illness are affected by substance abuse.

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### **Caring for the Woodstock Generation**

- Four million baby boomers suffer from substance abuse/addiction
- About half of all baby boomers have experimented with illicit drugs
- Nearly 5 percent, or 4.3 million, of adults 50 years and older have used an illicit drug in the last year
- About 26.2 percent of new addictions started in the last five years among baby boomers involved cocaine

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### **Caring for the Woodstock Generation**

- Following close behind cocaine, about 25.8 percent of new addictions in this age group involved prescription drugs
- Nearly 75 percent of baby boomer admissions to rehab centers are for addictions that began before the age of 25
- Illicit drug use among this age group has increased by over 3 percent in the last eight years  
<http://www.promises.com/articles/addiction/drug-use-surges-among-baby-boomers/>

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### **Caring for the Woodstock Generation**

Some baby boomers feel compelled to self-medicate with drugs to lower the impact of stress related to:

- Caring for family
- Dealing with potential health issues
- The uncertainty of retirement in a stagnant economy

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## Symptoms of Addiction in the Elderly

- Memory trouble after having a drink or taking a medication
- Loss of coordination ( walking unsteadily, frequent falls)
- Changes in sleeping habits
- Unexplained bruises
- Being unsure of yourself
- Irritability, sadness, depression
- Unexplained chronic pain

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## What Keeps Us from Better Behavior?

“When you don’t get what you want,  
you get an attitude.”

-Regina, (57), Brooklyn, NY  
Nursing Home Resident

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## Understanding the Individual

- Known or potential triggers to behavior
- Known self-soothing remedies
- The pre-dementia or pre-illness personality
- Social and occupational history
- Family dynamics
- Preferences and routines

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## Behavioral Health Assessment Considerations

Manifestations of mental and psychosocial adjustment:

- Impaired verbal communication; <sup>117</sup>SEP
- Social isolation (e.g., loss or failure to have relationships); <sup>117</sup>SEP
- Sleep pattern disturbance (e.g., disruptive change in sleep/rest pattern as related to one's biological and emotional needs); <sup>117</sup>SEP
- Spiritual distress (disturbances in one's belief system); <sup>117</sup>SEP
- Inability to control behavior and potential for violence (aggressive behavior directed <sup>117</sup>SEP at self or others); and <sup>117</sup>SEP
- Stereotyped response to any stressor (i.e., the same characteristic response, regardless of the stimulus). <sup>117</sup>SEP

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## Is Your Family DYSFUNCTIONAL?



The Nature of Relationships

- Assessing personalities, office politics, and respect issues.
- What sort of first impression does your organization make?
- What resources or support systems does your organization foster to improve relationships?

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## Relationships

- How well do staff interact with residents?
- How well do staff foster friendships between residents?
- How effective are the procedures for resolving grievances and conflicts?



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## Social Groups



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## SOCIAL REACTIONS

### Have you ever:

- Declined an invitation because you didn't know anyone else who would be attending or because you learned someone you didn't like would be there?
- Moved from your original seat because of the behavior of someone else at the table?
- Left a gathering or program because you found it wasn't as interesting as you'd thought it would be or because another guest arrived wearing your dress?

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## Behavioral Health

### Assessment & Care Plan Considerations

Clinical conditions that may produce apathy, malaise, and decreased energy levels that can be mistaken for depression associated with mental or psychosocial adjustment difficulty are: (This list is not all inclusive.)

- Metabolic diseases (e.g., abnormalities of serum glucose, potassium, calcium, and blood urea nitrogen, hepatic dysfunction);
- Endocrine diseases (e.g., hypothyroidism, hyperthyroidism, diabetes, hypoparathyroidism, hyperparathyroidism, Cushing's disease, Addison's disease);

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## Behavioral Health

### Assessment & Care Plan Considerations

- Central nervous system diseases (e.g., tumors and other mass lesions, Parkinson's disease, multiple sclerosis, Alzheimer's disease, vascular disease);
- Miscellaneous diseases (e.g., pernicious anemia, pancreatic disease, malignancy, infections, congestive heart failure);
- Over-medication with anti-hypertensive drugs; and
- Presence of restraints.

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## Evaluate Existing Medications

- Consider the following issues:
  - Drug induced cognitive impairment
    - **Anticholinergic Load**
  - Medication induced electrolyte disturbance
  - Recent medication additions that may alter metabolism of a drug that the person has been taking for a while
  - Withdrawal reaction to a recently discontinued medication

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## Behavioral Health

### Unnecessary Drugs: Evaluation

To determine if each resident receives:

- Only those medications that are clinically indicated in the dose and for the duration to meet his or her assessed needs;
- Non-pharmacological approaches when clinically indicated, in an effort to reduce the need for or the dose of a medication; and
- Gradual dose reduction attempts for antipsychotics (unless clinically contraindicated) and tapering of other medications, when clinically indicated, in an effort to discontinue the use or reduce the dose of the medication.

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## Behavioral Health Care Plan Strategies

Appropriate treatment and services for psychosocial adjustment difficulties may include:

- Providing residents with opportunities for self-governance;
- Systematic orientation programs;
- Arrangements to keep residents in touch with their communities, cultural heritage, former lifestyle, and religious practices; and
- Maintaining contact with friends and family.

Appropriate treatment for mental adjustment difficulties may include crisis intervention services; individual, group or family psychotherapy, drug therapy and training in monitoring of drug therapy and other rehabilitative services.

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## Non-pharmacological Interventions

- Increasing the amount of resident exercise;
- Reducing underlying causes of distressed behavior such as boredom and pain;
- Improving sleep hygiene;

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## Non-pharmacological Interventions

- Accommodating the resident's behavior and needs by supporting and encouraging activities reminiscent of lifelong work or activity patterns;
- Using massage, hot/warm or cold compresses to address a resident's pain or discomfort; and
- Enhancing the dining experience.

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## 101 ACTIVITIES ANYONE CAN DO

1. Listen to music
2. Make homemade lemonade
3. Count trading cards
4. Clip Coupons
5. Sort poker chips
6. Rake leaves
7. Write a poem together
8. Make a fresh fruit salad...

Source: Alzheimer's Association Web Site - [www.alz.org](http://www.alz.org)

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## "Sheltered Workshops"

A facility or program, either for outpatients or for residents of an institution, that provides vocational experience in a controlled working environment.

- For residents with dementia the workshop also offers the opportunity to find comfort in doing familiar tasks.
- For the non-traditional resident who plans to return to the community, the workshop provides an opportunity education, life skills programming, and helps prepare the resident for community reintegration.

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## CREATIVE, ARTISTIC, AND EXPRESSIVE THERAPIES FOR PTSD

A number of non-traditional creative/expressive therapies have demonstrated at least preliminary effectiveness in reducing PTSD symptoms, reducing the severity of depression (which often accompanies PTSD), and/or improving quality of life.

SOURCE: Joseph, Judith. PTSD Creative, Artistic, and Expressive Therapies for PTSD. Foundation for Arts and Healing, Pennsylvania State University. [www.artsandhealing.com/content/uploads/2013/02/PTSD-Workshop\\_Paper\\_022112.pdf](http://www.artsandhealing.com/content/uploads/2013/02/PTSD-Workshop_Paper_022112.pdf)

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CREATIVE, ARTISTIC, AND EXPRESSIVE THERAPIES FOR PTSD

- **Expressive Writing:** is a brief intervention that instructs individuals to write about their deepest thoughts and feelings about a stressful event without regard to the structure of the writing
- **Dance and Body Movement Therapies:** propose that one's negative, emotion-laden experiences are represented in the body in the form of tension and pain.
- **Art Therapy:** involves residents using some medium (e.g., painting, drawing, collage) to represent their feelings or emotions related to their trauma;
- **Music Therapy:** engages residents to use music in a variety of ways (e.g., playing music, beating a drum, listening to and sharing songs) to encourage emotional expression in a non-threatening environment.

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CREATIVE, ARTISTIC, AND EXPRESSIVE THERAPIES FOR PTSD

- **Drama Therapy:** creates safe, playful environments where patients are able to act out anxieties or conflicts due to their trauma
- **Nature Therapy:** involves a set of related activities that utilize a mix of relaxation and creative approaches involving nature.
- **Mindfulness Therapies:** focus primarily on observing one's internal and external states and accepting one's past experiences, so as to better tolerate the distress associated with trauma reminders

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**JOURNALING**



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## Combining ADL, Leisure and Therapeutic Activity

The simplest way to begin improving the manner in which meaningful activity is made available to residents is by redefining what "meaningful" is.

Find ways to turn ADL activity into activity that occurs between leisure and therapeutic groups. Consider all the disciplines that could contribute real and valuable programming to the day. There may be more resources than you think.



There are hundreds of tasks that make up a person's daily routine. Evaluate what already happens in your environment with regard to common sense ADL and leisure tasks.

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*Creating Meaningful, Satisfying Lives One Person at a Time*



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