

Counselling Older People

A systematic review of the research evidence commissioned by the British Association for Counselling and Psychotherapy (BACP)

Authors

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Objectives

- To identify both published and unpublished research written in the English language on counselling older people
- To provide a critical commentary on this research, focussing on the effectiveness, appropriateness and feasibility of counselling this age-group

Underlying Issues

- The under-detection of mental health problems in older people (particularly depression in nursing homes)
- Mental health problems seen as the inevitable consequence of ageing and therefore left untreated

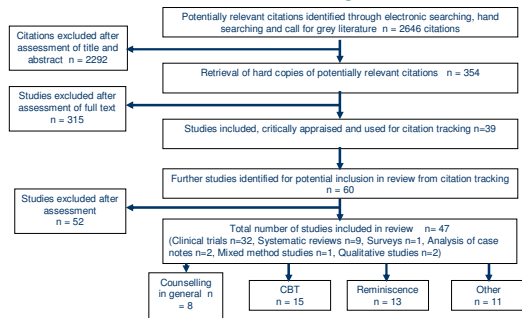
Literature search

- 6 databases searched from 1985-2004
- 10 journals hand-searched
- “grey” literature searched
- Citation tracking

Inclusion Criteria

- Counselling defined using terms developed by McLeod (2001) and the BACP Ethical Framework (2002). A generic term encompassing a range of therapeutic modalities.
- Definition of Older People: 50+
- Address dimension related to counselling (effectiveness, appropriateness, feasibility)
- Types of study: quantitative and qualitative

Overview of search process



Findings

Based on 47 included studies

Target problems:-

- Depression (n=21)
- Multiple problems/Quality of life (n=12)
- Cognitive decline/dementia (n=7)
- Anxiety (n=5)
- Physical/medical disorders (n=2)

Findings: settings

- Community: those receiving home health care are mostly 75+, as many as 50% have psychological problems (n=24)
- Nursing Homes: 6% of older people in nursing homes, over 50% have cognitive impairment/dementia (n=14)
- Hospitals: physical or psychiatric disorders (n=3)
- Mixed settings [e.g. systematic reviews] (n=6)

Findings: interventions

- CBT and related therapies (n=15)
- Reminiscence and Life-review (n=13)
- Multiple Approaches [e.g. systematic reviews] (n=8)

- Other therapies: Interpersonal therapy (n=3), validation therapy (n=3), task-centred/goal-focussed therapy (n=2), gestalt (n=2), Yalom's groupwork (n=1)
- Modality: >50% of studies were of group interventions

Conclusions: appropriateness

- Individual counselling is the psychological treatment of choice among community-dwelling elderly
- Community-dwelling older people prefer individual to group treatments
- The tendency for researchers to offer group treatments to older people in nursing home settings does not necessarily reflect a preference among older people for this modality of treatment

Conclusions: feasibility

- Home treatment is feasible
- Training therapists to counsel older people is feasible
- Good outcomes are associated with high qualification of therapist and specialised training in working with older people
- Group counselling is feasible in residential settings
- A proactive approach to the identification of psychological problems is needed

Conclusions: efficacy (>50% of studies significant positive outcomes)

- Evidence for the treatment (particularly RT+LR) of dementia and cognitive decline is weak
- CBT has the strongest evidence base and is efficacious in the treatment of anxiety and depression but when different approaches are compared outcomes are not significantly different
- Counselling is efficacious in the treatment of anxiety and depression and in improving subjective well-being

Conclusions:efficacy (cont)

- Counselling is as efficacious with older populations as it is with younger age groups
- Lack of evidence of efficacy of specific therapies: IPT, psychodynamic, client-centred, validation, goal-focussed, gestalt
