

Psychology 750.06

Clinical Geropsychology

Fall 2016

Instructor:	Dr. Christine Knight	Lecture Location:	EDC 286
Phone:	403-955-6130	Lecture	Mon 9:00-11:45am
	Dr. Candace Konnert	Days/Time:	Sept 12-Oct 24
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Course Description and Goals

Why is this module important?

“A survey of American Psychological Association (APA) member/practicing psychologists indicated that the vast majority (69%) conduct some clinical work with older adults, at least occasionally, but that fewer than 30% report having had any graduate coursework in geropsychology, and fewer than 20% any supervised practicum or internship experience with older adults.”

(Qualls et al., 2002)

In Canada, there are no graduate programs with clinical geropsychology tracks and most programs do not offer specialized training in aging. Current population projections indicate that by 2036, 25% of the Canadian population will be over 65 and almost 8% will be 80 years of age or older (Statistics Canada, 2013). By 2051, the number of centenarians in Canada will increase eight-fold (Statistics Canada, 2012). As the baby-boom cohort ages, there will be even more demand for psychological services. Moreover, caring for an aging family member is now a normative experience and psychologists who work with families need to be knowledgeable about multigenerational families and issues pertaining to caregiving.

This module is structured in a manner that is consistent with guidelines provided by the American Psychological Association (2014). As such, students will learn about:

- 1) what it means to age successfully
- 2) students' personal attitudes and beliefs about aging, and how these might be relevant to their assessment and treatment of older adults, ethical issues
- 3) conceptual models, challenges and contexts of practice
- 4) psychopathology, assessment, and intervention

The lectures will focus on specific topics within this framework; however, the readings will be more comprehensive. You may also want to look at the following websites and their related links for further information about different topics on aging:

National Council on the Aging (www.ncoa.org)

Canadian Association on Gerontology (www.cagacg.ca)
 Gerontological Society of America (www.geron.org)
 APA Division 12, Section II – Clinical Geropsychology (www.geropsych.org)
 The Canadian Coalition for Seniors’ Mental Health (CCSMH) National Guidelines
 for Seniors’ Mental Health <http://www.ccsmh.ca/en/guidelinesUsers.cfm>
 National Initiative for the Care of the Elderly <http://www.nicenet.ca>
 International Psychogeriatric Association <http://www.ipa-online.org>
 GeroCentral <http://gerocentral.org>

Required Text

Knight, B.G. & Pachana, N.A. (2015). *Psychological assessment and therapy with older adults*. Oxford, UK: Oxford University Press. Available in the University Bookstore.
 This course also has required readings that will be made available on D2L.

Evaluation Class participation/discussion of the readings (50%)
 Final exam (50%)
 Format: essays and case study based on readings and lectures.
 No study aids, calculators, or computers can be used.
 Date: Oct. 24, 2016

Grading Scale: This course is evaluated as credit/no credit. Students must receive a grade of 80% on both the class participation/discussion and final exam to receive credit for the course.

Date	
M Sept. 12 (C. Konnert)	Working with older adults: The basics
M Sept. 19 (C. Konnert)	The Contextual Adult Lifespan Theory for Adapting Psychotherapy (CALTAP)
M Sept. 26 (C. Knight)	Considerations in assessment with older adults; Overview of the assessment and differential diagnosis of delirium, depression and dementia (3Ds)
M Oct. 3 (C. Knight)	Assessment and treatment approaches for hoarding disorder; Overview of psychotic disorders in older adults
M Oct. 17 (C. Konnert)	Evidence-based and emerging psychological treatments for older adults
M Oct. 24	Final exam

Reappraisal of Grades

A student who feels that a piece of graded term work (e.g., term paper, essay, test) has been unfairly graded, may have the work re-graded as follows. The student shall discuss the work with the instructor within 15 days of being notified about the mark or of the item's return to the class; no reappraisal of term work is permitted after the 15 days. If not satisfied, the student shall immediately take the matter to the Head of the department offering the course, who will arrange for a reassessment of the work within the next 15 days. The reappraisal of term work may cause the grade to be raised, lowered, or to remain the same. If the student is not satisfied with the decision and wishes to appeal, the student shall address a letter of appeal to the Dean of the faculty offering the course within 15 days of the unfavourable decision. In the letter, the student must clearly and fully state the decision being appealed,

the grounds for appeal, and the remedies being sought, along with any special circumstances that warrant an appeal of the reappraisal. The student should include as much written documentation as possible.

Plagiarism and Other Academic Misconduct

Intellectual honesty is the cornerstone of the development and acquisition of knowledge and requires that the contribution of others be acknowledged. Consequently, plagiarism or cheating on any assignment is regarded as an extremely serious academic offense. Plagiarism involves submitting or presenting work in a course as if it were the student's own work done expressly for that particular course when, in fact, it is not. Students should examine sections of the University Calendar that present a Statement of Intellectual honesty and definitions and penalties associated with Plagiarism/Cheating/Other Academic Misconduct.

Academic Accommodation

It is the student's responsibility to request academic accommodations. If you are a student with a documented disability who may require academic accommodation and have not registered with the Disability Resource Centre, please contact their office at 403-220-8237. Students who have not registered with the Disability Resource Centre are not eligible for formal academic accommodation. You are also required to discuss your needs with your instructor no later than 14 days after the start of this course.

Absence From A Test/Exam

Makeup tests/exams are **NOT** an option without an official University medical excuse (see the University Calendar). A completed Physician/Counselor Statement will be required to confirm absence from a test/exam for health reasons; the student will be required to pay any cost associated with this Statement. Students who miss a test/exam have up to 48 hours to contact the instructor and to schedule a makeup test/exam. Students who do not schedule a makeup test/exam with the instructor within this 48-hour period forfeit the right to a makeup test/exam. At the instructor's discretion, a makeup test/exam may differ significantly (in form and/or content) from a regularly scheduled test/exam. Except in extenuating circumstances (documented by an official University medical excuse), a makeup test/exam must be written within 2 weeks of the missed test/exam during exam make-up hours provided by the department <http://psychology.ucalgary.ca/undergraduate/exam-and-course-information#mues>.

Travel During Exams

Consistent with University regulations, students are expected to be available to write scheduled exams at any time during the official December and April examination periods. Requests to write a make-up exam because of conflicting travel plans (e.g., flight bookings) will NOT be considered by the department. Students are advised to wait until the final examination schedule is posted before making any travel arrangements. If a student cannot write their final exam on the date assigned by the Registrar's Office, they need to apply for a deferred exam. Under no circumstances will this be accommodated by the department.

Freedom of Information and Protection of Privacy (FOIP) Act

The FOIP legislation disallows the practice of having student's retrieve tests and assignments from a public place. Therefore, tests and assignments may be returned to students during class/lab, or during office hours, or will be made available only for viewing during exam review sessions scheduled by the Department. Tests and assignments will be shredded after one year. Instructors should take care to not link students' names with their grades, UCIDs, or other FOIP-sensitive information.

Evacuation Assembly Point

In case of an emergency evacuation during class, students must gather at the designated assembly point nearest to the classroom. The list of assembly points is found at

<http://www.ucalgary.ca/emergencyplan/assemblypoints>

Please check this website and note the nearest assembly point for this course

Student Ombudsman's Office

The Office of the Student Ombudsmen provides independent, impartial and confidential support for students who require assistance and advice in addressing issues and concerns related to their academic careers. The office can be reached at 403-220-6420 or ombuds@ucalgary.ca

(<http://www.ucalgary.ca/provost/students/ombuds>)

Safewalk

The safewalk program provides volunteers to walk students safely to their destination anywhere on campus. This service is free and available 24 hrs/day, 365 days a year.

Call 403-220-5333.

Important Dates

The last day to drop this course with no "W" notation and **still receive a tuition fee refund is September 23, 2016**. Last day for registration/change of registration is **September 26, 2016**. The last day to withdraw from this course is **December 9, 2016**.

Readings:

Date	
M Sept. 12 (C. Konnert)	Working with older adults: The basics Anderssen, E. (2010, April 1). Want to age well? Laugh it up. <i>Globe and Mail</i> . Depp, C., Vahia, I. V., & Jeste, D. (2010). Successful aging: Focus on cognitive and emotional health. <i>Annual Review of Clinical Psychology</i> , 6, 527-550. Karel, M. J., Gatz, M., Smyer, M. A. (2012). Aging and mental health in the decade ahead: What Psychologists need to know. <i>American Psychologist</i> , 67, 184-198. APA. (2014). Guidelines for psychological practice with older adults. <i>American Psychologist</i> , 69, 34-65. Carlos, M., & Moye, J. (2014). Tips for treating older clients. Retrieved from: http://psychologybenefits.org/2014/11/06/28-tips-for-treating-older-clients

	Knight & Pachana Chapter 11
M Sept. 19 (C. Konnert)	<p>The Contextual Adult Lifespan Theory for Adapting Psychotherapy (CALTAP)</p> <p>Knight & Pachana Chapter 1, 6, 7, 8, 10</p> <p>Yang, J. A., Garis, J., Jackson, C., & McClure, R. (2009). Providing psychotherapy to older adults in home: Benefits, challenges, and decision-making guidelines. <i>Clinical Gerontologist</i>, 32, 333-346.</p> <p>Pot, A. M., & Willemse, B. (2010). Clinical geropsychology practice in long-term care facilities. In N. A. Pachana, K. Laidlaw, & B. G. Knight (2010). <i>Casebook of Clinical Geropsychology</i> (pp. 263-277). Oxford: Oxford Press.</p> <p>Kasl-Godley, J. E., & Christie, K. M. (2015). Advanced illness and the end of life. In N. A. Pachana & K. Laidlaw (Eds.), <i>The Oxford Handbook of Clinical Geropsychology</i> (pp. 355 - 377). New York: Oxford University Press.</p>
M Sept. 26 (C. Knight)	<p>Considerations in assessment with older adults; Overview of the assessment and differential diagnosis of delirium, depression and dementia (3Ds)</p> <p>Knight & Pachana Chapter 2, 3 & 5</p> <p>APA. (2012). Guidelines for the evaluation of dementia and age-related cognitive decline. <i>American Psychologist</i>, 67(1), 1-9.</p> <p>Downing, L.V., Caprio, T.V., & Lyness, J.M. (2013). Geriatric psychiatry review: Differential diagnosis and treatment of the 3 Ds: Delirium, dementia and depression. <i>Current Psychiatry Reports</i>, 15, 365-374.</p> <p>Saykin, A.J., & Rabin, L.A. (2014). Dementias and neurocognitive diseases. In M.W. Parsons & T.A. Hammeke (Eds.), <i>Clinical neuropsychology: A pocket handbook for assessment</i> (3rd ed). (pp. 237-265). Washington, DC: American Psychological Association.</p>
M Oct. 3 (C. Knight)	<p>Anxiety disorders, Assessment and treatment approaches for hoarding disorder Overview of psychotic disorders in older adults</p> <p>Knight & Pachana Chapter 4 & 9</p> <p>Berry, K., & Barrowclough, C. (2009). The needs of older adults with schizophrenia: implications for psychological interventions. <i>Clinical Psychology Review</i>, 29, 68-76.</p> <p>Frost, R.O., & Steketee, G., & Tolin, D.F. (2012). Diagnosis and assessment of hoarding disorder. <i>Annual Review of Clinical Psychology</i>, 8, 219-242.</p>
M Oct. 17 (C. Konnert)	<p>Intervention with older adults</p> <p>Gillanders, D., & Laidlaw, K. (2015). ACT and CBT in older age. In N. A. Pachana & K.</p>

Laidlaw (Eds.), *The Oxford Handbook of Clinical Geropsychology* (pp. 637-657). New York: Oxford University Press.

Raue, P.J., & Areán, P. A. (2015). Interpersonal psychotherapy for late-life depression. In P. A. Areán (Ed.), *Treatment of late-life depression, anxiety, trauma, and substance abuse* (pp. 71-82). APA: Washington DC.

Bhar, S. S. (2015). Reminiscence therapy: A review. In N. A. Pachana & K. Laidlaw (Eds.), *The Oxford Handbook of Clinical Geropsychology* (pp. 675-690). New York: Oxford University Press.

Crabb, R.M., & Areán, P. A. (2015). Problem-solving treatment for late-life depression. In P. A. Areán (Ed.), *Treatment of late-life depression, anxiety, trauma, and substance abuse* (pp. 83-102). APA: Washington DC.

Qualls, S. H., & Anderson, L. N. (2009). Family therapy in late life. *Psychiatric Annals*, *39*, 844-850.