

## Scotland Older People Round-table Meeting Edinburgh - Friday 22<sup>nd</sup> March 2019

### Background

The British Association for Counselling and Psychotherapy (BACP) is the UK's leading professional body for counselling and psychotherapy. We have over 47,000 members in the UK, of which 2,000 live in Scotland.

Research and reports have consistently demonstrated that the mental health of older people is often overlooked, with much depression and anxiety in older adults unrecognised, undiagnosed and untreated. The likelihood of being prescribed medication and not referred to talking therapy increases with age.

BACP believes that age should not be a barrier to receiving choice of treatment and support whenever it is needed and that's why we have developed our older people strategy.

Working with BACP members, policy-makers and partner organisations, we are working with members and exploring ways to:

1. increase the numbers of older people who access therapy
2. increase the availability and provision of counselling to older people

BACP takes a broad view of the definition of 'older people' focusing on the life events and transitions that happen more frequently (though not exclusively) to people aged 50+. This covers many issues, age-ranges and experiences, including long-term conditions, end of life, 'empty-nest', retirement and bereavement.

### Older People Round-table Meeting

17 BACP members with experience of working with older clients in private practice and within the voluntary sector in Scotland shared their experiences and reflections and considered how these can be represented within BACP's older people strategy. Discussions identified barriers and enablers to older people accessing therapy in Scotland.



## Key Messages from the Meeting

- Counselling offers support to make sense of later life transitions and restore or renew identity.
- Language of ‘mental health’ and alignment with mental health services can present barriers to engagement.
- Encouragement to access counselling comes from trusted sources - friends, family, GP.

Attendees shared information about their backgrounds, revealing a mix of private practice, GP surgery, and voluntary sector organisations including [PF Counselling](#), [Cruse Bereavement Care](#), and [Relationships Scotland](#).



Initial discussion of the older people strategy focussed on the wide age-range (50+) and it was recognised that this is not a homogenous group and includes people with a vast range of experiences, background and expectations. A concern was raised that by identifying ‘older people’ as a distinct group there is a danger that we generate rather than remove stigma (an issue explored in detail in [this recent blog](#)). The decision to make older people a strategic priority for BACP is rooted in consistent data showing that older people do not access counselling to the same extent as younger people<sup>1</sup> and that the likelihood of being prescribed anti-depressants rather than being offered a choice of therapy increases with age<sup>2</sup>.

### Issues raised

It was emphasised that it is important not to generalise or make assumptions about the lives of ‘older people’ - statistically older people are less likely to access talking therapies and it is overcoming barriers to access that is the concern of the older people strategy.

Work with some older clients can require adaptation of practice to be ‘enabling’ and responsive to expectations. Older people may ask more questions about the counsellor. Some older clients take longer to settle into the session or take longer to leave at the end of the session.

It was pointed out that older people face the same range of problems as younger clients and that problems with drugs and alcohol, relationships and other life events are common. Providing support for carers of people with dementia through the ‘long goodbye’ was identified as an older people’s issue.

‘Loneliness’ has been the given considerably policy focus in recent years and the Scottish government published its strategy *A Connected Scotland*<sup>3</sup> in 2018. For older people loneliness is closely associated with retirement and partner loss and therapists have seen this ‘sense of aloneness’ in some older clients.

Issues that matter to older people vary widely - many are focussed on new beginnings, relationships and challenges whilst others are reflective and focussed on existential concerns.

BACP’s Policy Team has focused on lobbying the Scottish Government to provide paid employment opportunities for counsellors, successfully securing £80 million investment in Scotland’s schools, colleges and universities. The group emphasised the importance contribution of the volunteer sector in Scotland. We fully support practitioners choosing to offer their skills/ services on a voluntary or pro-bono basis - **where this is a choice rather than a requirement it should be supported and championed.**

BACP believes that the promotion of voluntary jobs or roles for qualified counsellors contributes to the underfunding of counselling services, reduces paid recruitment opportunities for qualified counsellors and maintains the status quo of low income/ salaries for many counsellors and psychotherapists. We believe that the public and the membership will derive maximum benefit from a profession which is both well respected by other professional groups as well as one that facilitates careers for counsellors and psychotherapists as financially viable.

## Sharing experience of working with older people. ‘Barriers’ and ‘enablers’ to work with older people.

### Barriers

- It was suggested that alignment of counselling to mental health services works against the objective of increasing access to counselling for older people and that a broader approach focussing on where the people see themselves could be more effective.

**“When I am feeling sad, or angry, hurt or upset,  
I don’t think I am mentally ill.”**

The initial contact needs to be subtle, with emphasis on *maintaining wellbeing*. Counselling for older people could be packaged in terms of supporting them through changes in identity that are common in later life - focus should be on the experience of the older person and what they are dealing with.

- Closely linked to this is the issue of language and how comfortable people of any age feel with terms like ‘mental wellbeing’ or even ‘counselling’ itself. There may be a tension between ‘demystifying’ counselling by explaining therapy whilst not diminishing the value of what the therapist does.
- Reluctance to talk about death or face one’s own mortality may present a barrier for some older people; however, examples were given of the value of counselling to those who are at point of reflecting and making sense of the life they have lived.
- GPs will recommend but rarely formally refer people to counselling services but will more readily prescribe anti-depressants. This implies that they do not believe in the efficacy of counselling and reinforces a message that medication is the only option.



**My older client was asking herself ‘Who am I?’ - in our session together we reframed that to ‘What matters to me?’**

### **Enablers**

- Recommendation from a trusted source was considered a key driver to older people accessing counselling. This could be from GP or other healthcare professional or from a friend or family-member. An example was given of a young people who had accessed counselling at school and went on to explain it to their grandparents and advocate to them the value of therapy.

**“Younger people saying to older people ‘You maybe don’t know about counselling but it’s great - you should give it a go.’”**

- The BACP web site ‘Find a Therapist’ directory is an important source of information for prospective clients. Including age-friendly, inclusive content may encourage older people to get in touch.
- Some members report finding the BACP web site difficult to navigate since its update.

- It was suggested that older people who have had counselling could be supported to be spokespeople or 'champions'.
- Campaigns and events such as '[Death on The Fringe](#)' or Mental health Foundation Scotland's [art and film festival](#) present opportunities to promote counselling to a wider audience.

## **Attendee comments**

Very useful event. I enjoyed hearing others' experiences.

Perhaps discussion of experiences session could have been more focussed on our experiences of work with older clients.

Good to hear about BACP's work.

Useful information. Got me thinking. Hope I'll take some action!

Most beneficial meeting counsellors from different places and disciplines.

Even with my hearing-aids, hearing counsellors across the room was difficult as they tended to speak to the chair! Poor acoustics. Lovely lunch!

Good to have a forum to highlight this neglected group in counselling

Follow on to continue to push the agenda with individual contributions.

Good to have a chance to talk about issues that often 'go under the radar'.

Discussion sometimes side-tracked by details of experience unrelated to policy.

## **Useful Agencies**

The Common Weal

Human Development Scotland

Alzheimer's Scotland

Relationships Scotland

Crossreach / "Join the Dots" Project

## Appendix - Key facts on older people's mental health

Issue	
Long-term conditions	The prevalence of long-term conditions rises with age, affecting about 50 per cent of people aged 50, and 80 per cent of those aged 65 and many older people have more than one chronic condition - <i>The Kings Fund (2013) Delivering better service for people with long-term conditions</i>
Depression	<p>Nearly half of adults (7.7million) aged 55+ say they have experienced depression and around the same number (7.3 million) have suffered with anxiety.' <i>Age UK <a href="https://www.ageuk.org.uk/latest-news/articles/2017/october/half-aged-55-have-had-mental-health-problems/">https://www.ageuk.org.uk/latest-news/articles/2017/october/half-aged-55-have-had-mental-health-problems/</a></i></p> <p>IAPT data shows that patients receiving treatment for anxiety and depression aged 65+ have better outcomes (60.4% recovery) than younger patients (45.4% recovery). <i>NHS Digital (2016). Psychological therapies. Annual report on the use of IAPT services 2015-2016.</i></p>
Work	<p>Over 30% of people in work in the UK are aged 50 and over - <i>CIPD (2015) Avoiding the demographic crunch</i></p> <p>There are 3.6 million people aged 50–64 who are not in work - <i>Centre for Ageing Better (2017) Addressing worklessness and job insecurity amongst people aged 50 and over in Greater Manchester</i></p>
Relationship breakdown/ divorce	An Ipsos/Mori poll commissioned by BACP in 2017 indicates that rates of depression are highest (31%) amongst older adults (55+) who had experienced divorce or relationship breakdown in the past five years
Loneliness	More than 1 in 3 people aged 75 and over say that feelings of loneliness are out of control - <i>Independent Age (2016) <a href="https://www.independentage.org/news-media/press-releases/one-third-of-older-people-say-feelings-of-loneliness-are-out-of-their">https://www.independentage.org/news-media/press-releases/one-third-of-older-people-say-feelings-of-loneliness-are-out-of-their</a></i>
Retirement	Retirement has been recognised as a risk factor for depression - <i>Gabriel H. Sahlgren (2013) Work longer, live healthier - the relationship between economic activity, health and government policy. Institute of Economic Affairs discussion paper no.46</i>

<p><b>Drugs and alcohol</b></p>	<p>Older men are at greater risk of developing alcohol and illicit substance use problems than older women. However, older women have a higher risk of developing problems related to the misuse of prescribed and over-the-counter medications - <i>Royal College of Psychiatrists, London (2011) Invisible addicts.</i></p> <p>Only 6-7% of high-risk people with substance misuse problems over 60 years of age receive the treatment that they require - <i>Royal College of Psychiatrists London (2015) Substance misuse in older people - an information guide</i></p>
<p><b>Bereavement</b></p>	<p>Whatever the circumstances, the loss of a loved one is associated with intense suffering and can lead to serious mental and physical health problems - <i>Stroebe, Schut,&amp; Stroebe, (2007) The health consequences of bereavement: A review. The Lancet.</i></p> <p>A 2017 research project suggests that community-based bereavement counselling may have long- term beneficial effects to people experiencing or at risk of complicated grief - <i>Newsom et al (2017) Effectiveness of bereavement counselling through a community-based organisation: A naturalistic, controlled trial</i></p>
<p><b>Dementia</b></p>	<p>There are over 40,000 people with early-onset dementia (onset before the age of 65 years) in the UK and in older adults, prevalence increases from 1.3% among those aged 65-69 to 32.5% among those aged 95 years and over. - <i>Alzheimer's Society (2014) Dementia UK update</i></p> <p>Counselling does not appear to have a significant effect on dementia symptoms, but it may contribute to improving the quality of life of people with the disease in the short and medium term - <i>Hill, A. and Brettle, A. (2005) The effectiveness of counselling with older people: Results from a systematic review Counselling and Psychotherapy Research</i></p>
<p><b>Suicide</b></p>	<p>Whilst suicide rates in the older population are generally lower than for younger people, there is an increased risk of suicide amongst men aged 80+ - <i>The Samaritans (2017) Suicide statistics report 2017</i></p>
<p><b>LGBTQ</b></p>	<p>LGBT older adults may disproportionately be affected by poverty and physical and mental health conditions due to a lifetime of unique stressors associated with being a minority, and may be more vulnerable to neglect and mistreatment in aging care facilities -<i>American Psychological Association (online) lesbian, gay, bisexual and Transgender Aging.</i></p> <p>Prevalence of depression in older gay men and lesbians is higher than the general population - <i>Institute of Medicine (US) (2011) The health of lesbian, gay, bisexual, and transgender people: Building a foundation to better understanding.</i></p>

Care homes	There is an absence of specialised support, including counselling and assistance with communication in care homes - <i>Bowers H et.al (2009) Older people's vision for long-term care. Joseph Rowntree Foundation</i>
Prisons	<p>The numbers of older people in prison is rising. 16% of the prison population in Northern Ireland aged 50 and over (<i>Department of Justice 2016</i>)</p> <p>Some older prisoners have a physical health status of 10 years older than their contemporaries in the community. This can be due to a previous chaotic lifestyle, sometimes involving addictions and/or homelessness. <i>House of Commons justice committee (2013) Older Prisoners. Fifth report of session 2013-14: Volume 1</i></p>

### Further reading

Lipinska D (2009) *Making Sense of Self - person-centred counselling for people with dementia*. Jessica Kingsley Publishers.

Kewell H (2019) *Living Well and Dying Well - Tales of counselling older people*. PCCS Books.

Please visit the [older people page](#) on the BACP web site



## Next Steps

- Members are invited to provide case-studies, accounts and examples of work with older clients that can be shared with other practitioners and the wider public.
- Voluntary organisations holding service data are invited to contact the BACP research team to discuss analysis of anonymised data by age as part of work to increase understanding of perceptions and efficacy of counselling.

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<sup>1</sup> [Age UK \(2016\) Hidden in Plain Sight. The unmet mental health needs of older people.](#)

<sup>2</sup> [Frost R et al \(2019\) Management of depression and referral of older people to psychological therapies: a systematic review of qualitative studies. British Journal of General Practice.](#)

<sup>3</sup> [Scottish Government \(2018\) A Connected Scotland: our strategy for tackling social isolation and loneliness and building strong social connections](#)

***Sincere thanks to the attendees for their contributions and willingness to share experience of their work.***