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3rd World Conference on Psychology, Counselling and Guidance (WCPCG-2012) Importance of Counselling for Elderly Before Institutionalization

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Abstract

The institutionalization of the elderly is a complex problem, because a decision of this nature is associated (in many situations) with depression and isolation feeling (according to recent researches). Therefore, elderly counselling is very important in this situation. Also, equally important is the counselling of the family members, they are contributing decisively to the decision of institutionalization. The current paper proposes to detail theoretical aspects regarding institutionalization of the elderly and the counseling's importance before the event. The final conclusions will be presented which are the main stages to go before making a decision to institutionalization the elderly and how important social support network in this situation.

© 2013 The Authors. Published by Elsevier Ltd. Open access under CC BY-NC-ND license. Selection and peer-review under responsibility of Prof. Dr. Huseyin Uzunboylu & Dr. Mukaddes Demirok, Near East University, Cyprus *Keywords: elderly, counseling, institutionalization, family.*

1. Introduction

In recent years, concern for the situation of elderly has led to rethinking and restructuring of specific problems of old age. In short, the main problems of the elderly such as health problems, financial problems, poverty, addiction, social exclusion, retirement, the ageism, abuse. Each of them, all combined or part of them can lead to institutionalization of elderly.

Although the current trend is to keep the Elder family, possibly to receive services in day care centres, long-term institutionalization will remain as a necessary solution required the development of an aging population and increasing number of people with high degrees of dependency. However when absolutely necessary institutionalization decision, bear in mind that it is an act of great responsibility. First, Elder is to be free to choose their own lifestyle, as long as possible. Family with multidisciplinary team (physician, social worker, psychologist, etc.) are those who decide institutionalization only when Elder has no mental capacity to decide for yourself. To act as an efficient team of specialists is necessary to build a training complex, including Fellowships geriatric medical knowledge and concepts of psychology of the elderly, psychiatry, sociology and social work, rehabilitation. This team should include people who possess the qualifications required to diagnose any problems and therapy in particular.

Elder care in the family if the family is one with a balanced homeostasis, which is able to cope with obstacles successfully, stress agents, problems inherent in life, is the ideal, and the benefits are especially psychologically. The family gives the elderly the opportunity to conduct everyday life in a normal, natural, enjoying autonomy in movements and decisions; it requires skills and trains them in a way that life in the institution cannot harness. The advantage of such situations is that the elderly person is surrounded by love, which is essential for us all, as is well

Corresponding author name: Stanciu Mariana Carmen Tel.: +739213740 Email: stanciucarmen@gmail.com

1877-0428 © 2013 The Authors. Published by Elsevier Ltd. Open access under CC BY-NC-ND license. Selection and peer-review under responsibility of Prof. Dr. Huseyin Uzunboylu & Dr. Mukaddes Demirok, Near East University, Cyprus doi:10.1016/j.sbspro.2013.07.004 known that love is the glue of family members. Feeling the love around him, Elder will have more inner strength, will move more easily over the problems faced will be stronger in the fight against disease. In this way, he will build a perception of self image and self-esteem increased. While the family is the relaxation space, freedom and autonomy, is a closed institution, within which freedom and autonomy seem to be lost, simply because they are established strict rules of conduct required surveillance, which have a binding nature.

2. Counseling elderly and family members

One major health concern for those elderly who are tucked away from society is depression. According to Eckert and Lambert (2002), "the psychological and emotional needs of older adults have been virtually ignored over the past century...By the year 2020, the second most disabling disease for the elderly will be depression" (p.5).

Also, one of the major problems specific to institutionalized elderly is depression and the feeling of isolation. They are associated with social withdrawal and often with stereotyped behaviours. Therefore, counselling elderly more likely to be required in these situations, especially in the run-institutionalization.

The absence of psychological support, presence of chronic diseases, family conflicts are factors that lead to depression among the elderly. Depression among institutionalized elderly is very often undiagnosed and untreated. In this context, requires a multidisciplinary approach to social organization, strengthen family and community. To avoid institutionalization of the elderly has an important role advising elderly family members who are at risk of institutionalization. Most times, one reason is the institutionalization of elderly and fear of family responsibilities, lack of power to cope and to help the aged. Counselling is an important step in determining early institutionalization. Such advice may overlap at some point with the other professionals in the social field, but its purpose is to identify real problems and needs. Unlike other social actors, the counsellor focuses on subjectivity and independence, the beneficiary is one who identifies and overcomes the problems. Besides the support they need elderly, it is necessary and re-educating society, meaning combat myths about the elderly. Especially elderly families need to be educated and counselled in this regard; the re-structuring of perception and cognition of what is elderly person.

Relationship counselling is to enable the elderly to freely express their problems, situation, relationships and even entire past, no matter how confused and think about them with his interlocutor. Specialist task is through a game of questions and answers, in helping the elderly to understand the situation, its difficulties and possibilities of solving them.

A key feature of advisers is to facilitate understanding, change, acceptance of new situations, to overcome some dramatic moments, integration and development.

The elder may to explore and clarify the strengths and weaknesses, to improve their quality of life and evolve into a higher form of welfare. Counselling is not only a unilateral benefit from counsel, but rather its specific interaction with a helping relationship. Each of the two, comes in the interaction with specific field of age, culture, religion, class of origin, language, etc. Are important trust, respect and confidentiality, so that seniors can feel safe to be able to reveal and probe their lives in terms of knowledge, affection and action.

3. Important social support network

The term social network refers to "a person-centered web of social relationships" and social support refers to "aid and assistance exchanged through social relationships and interpersonal transactions" (Heaney & Israel, 2002, p.187) Social networks and support concepts help us understand health behaviors, as well as guide designs for interventions that attempt to change health behaviors. Framed conceptually, social networks and support are believed to be the "starting point or initiator of a causal flow toward health outcomes" with many relationships exerting a reciprocal influence on those outcomes (Heaney & Israel, 2002).

A key role in preventing institutionalization of elderly is a social support network, which consists of a set of public and / or private in the community and people close to the elderly. So there are two types of social support:

- formal social support, in which are included all of the community social services (day centers, home care, senior clubs, etc.). They can add and community health services.
- informal social support, which includes family, friends, neighbors, church, etc.

In both cases it is essential to prevent and overcome problematic situations. With both modes of social support received from various network sources, difficult periods in the life of elderly can be avoided or minimized. As each person is unique, as the context in which each elder is in a difficult time in life, is unique and that is why, how they can intervene in situations of difficulty depending on the specificities of each situation.

Members making up the informal social support network to be the main source of support, while formal social support as a supplement to come through which it can benefit from professional services.

For various reasons (different cultures, social policy inadequate, insufficient professional, different mentalities, etc.), such situations are rare. In this direction, however, should focus on the future of social protection system for the elderly.

Informal social support is a concept that includes specific types of support, regular contact with others, seeking, support person in difficulty. The main source of informal social support for elderly family is represented. In the family, spouses (husband / wife) are the most important sources of informal support, followed by adult children already arrived. In fact, according to studies conducted so far, people in all stages of their lives are more convenient to have relations with relatives than with strangers.

When, due to death of spouse, Elder suddenly loses (in whole or in part), informal social support, can be triggered or exacerbated serious health problems. To avoid these situations, which can be critical, it is necessary to intervene quickly as other forms of social support.

The relations between the elderly and their children, they are very important and although in many cases elderly do not live with their children, they see and have frequent contact. A recent study indicates that: about 50% of elderly have daily contact with children, nearly 80% are seen with one of the children once a week, over 75% of older children talk on the phone at least weekly; children elderly, but especially girls, maintain contact with parents more frequently.

The elderly initially call informal social support when they have certain problems and later, formal relations usually when things get worse and is absolutely necessary intervention specialists. Those who require more frequent support from formal relations are elderly who live alone, without family and no support from other people. This category of elderly, are unable to benefit from informal social support are more prone to institutionalization, the lack of other alternatives.

Informal social support is a basic element of life for older people and difficult situations account for many positive aspects, such as physical and mental well-being, sense of personal control, autonomy and competence in reducing the negative effects of stressful life situations, covering period of aging more easily and as shown by studies, even reducing mortality risk.

In terms of formal social support, it depends largely on social policies applied by each country. In the developed world's social services network is well established, there are multiple alternative or supplement compensation cases informal social support.

The social support network is essential in cases of difficulty the elderly through them at some point in their lives and as stated LaVeist, Sellers, Brown, Elliott and Nickerson (1997) "a strong social support network may have major contributions during aging, while extreme social isolation may contribute to increased mortality ".

Conclusions

To prevent institutionalization of the elderly should take into account a number of issues. It is important that before making a decision of institutionalization of the elderly people who are part of informal social support network and mainly family members to take all necessary steps to prevent such a decision.

According to Robert Thomas (1998) there are many factors that are predictive of institutionalization. Five major factors are:

- Loss of physical function
- restricted mobility
- social resources/support
- health perception
- socio-economic status.

To the extent that to take account of these five factors, institutionalization can be prevented, given the fact that such a major change in life elderly, can lead to several negative consequences such as: depression, isolation, cognitive impairment, loss of control over health and other personal affairs, malnutrition (weight loss), impaired physical functioning, etc.

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