

Counseling for Individuals with Early Stage Dementia

The decision to see a therapist is a very personal one. Many times, people seek therapy when faced with depression, loneliness, difficulty in relationships, the aging process, constant worries or obsessions or stress in the face of a chronic or terminal illness or other health problems.

Therapy can be provided by a **Psychiatrist** (a trained medical doctor who specializes in mental disorders and is licensed to practice medicine and has had formal training in treating mental disorders), **Psychologist** (a trained professional who is licensed and has completed a doctoral degree from a university program with specialized training and experience), **Clinical Social Worker** (a licensed professional with a master's degree or doctoral degree in social work and at least 2 years post-graduate experience in a supervised clinical setting) or a **Marriage and Family Therapist** (a state licensed counselor with a master's degree and two years of supervised post-graduate experience who is trained to provide psychotherapy and counseling for families, couples, groups, and individuals). Each of these types of therapists must pass a board certified exam specific to their profession.

Finding a Therapist:

You may have to shop around before finding someone with whom you are comfortable and have a sense of rapport. The steps to choosing a mental health practitioner include:

1. Rule out a medical cause for your problem through your primary care physician
2. Find out what the mental health coverage is under your insurance policy or through Medicare/Medicaid
3. Get two or three referrals from your primary care physician, your faith leader, a family member or friend. You can also consult a Provider Directory such as www.NetworkTherapy.com or your State Mental Health Counselors Association. Or call the Alzheimer's Association 24/7 Helpline at 800.272.3900 for a list of counselors who are experienced with dementia related issues.
4. Call to find out about appointment availability, location and fees. Select a therapist with an office location that is easy to get to from home or work. Ask the receptionist if the mental health professional offers a sliding-scale fee based on income or if they accept your health insurance or Medicaid/Medicare
5. Make sure the therapist has experience helping people whose problems are similar to yours. Ask about the therapist's expertise, education and number of years of practice.
6. If you are satisfied with the answers, make an appointment
7. During your first visit, describe the feelings and problems that lead you to seek help. Find out:
 - a. What kind of therapy/treatment program the therapist recommends;
 - b. If it has proven effective for dealing with problems such as yours;
 - c. What the benefits and side effects are;
 - d. How much therapy is recommended; and

- e. If the therapist is willing to coordinate your care with another practitioner if you are interested in exploring credible alternative therapist, such as acupuncture.
8. The best therapists will work with you to create a treatment program that works for you.
9. Although the role of a therapist is not to be a friend, rapport is important. Consider whether:
 - a. You felt comfortable with the therapist
 - b. He/she listened to you
 - c. He/she seemed to understand your concerns and address them
 - d. You feel you can trust the therapist
 - e. He/she seemed knowledgeable about your problem and suggested a therapy or treatment program that suits you
 - f. The “chemistry” was right
10. If the answers to these questions and others you identified are “yes”, schedule another appointment to begin the process of working together to understand and overcome your problems. If no, call another therapist from your list and schedule another appointment.

Purpose of Counseling:

1. support in facing the diagnosis
2. information to understand the illness
3. an opportunity to talk and work through issues that is usually not available elsewhere (others don't understand)
4. provide kindness, respect, and attention
5. focus on strengths or competence rather than disabilities
6. improved coping ability

Benefits to the person with dementia:

1. increased well-being and acceptance from understanding and acknowledging the illness
2. improved self-esteem and mood from working through feelings
3. increased capacity to manage daily symptoms and challenges
4. knowledge of good self-care skills
5. adaptations to changes in abilities and lifestyles
6. education about the disease, research, available meds, programs and resources
7. decreased isolation
8. connection with the dementia service and support system before times of crisis
9. a sense of going on with life, and having the best life possible

Benefits to families (if they are brought into the counseling discussions)

1. emotional catharsis
2. problem-solving around needed adjustments at home
3. decisions about important legal, financial, health and care planning

The person with dementia needs to be able to consent to counseling, be receptive to help and be able to benefit in a meaningful way. Paul S. Appelbaum, MD (2007) published some research stating that in order to be able to give consent, a person must:

1. be able to communicate a choice

2. understand relevant information
3. appreciate the situation and its consequences
4. rationally manipulate information.

They also said that the engagement in decision making varies depending on the level of capacity, ranging from no decision making if they completely lack capacity to full decision making if they have full capacity

Dr. Edmund Howe states in an article he wrote titled "Improving the Quality of Life in Patients with Alzheimer's Disease" (2008) that: "A goal of therapy should be on helping the person with dementia maintain their self-esteem by talking about past interests, abilities and successes, encouraging them to have responsibilities, and maximizing gains from their medication".

According to Bloch (1979), treatment goals for Supportive Psychotherapy should be to:

1. Restore and reinforce the ability to cope with changes and challenges of life
2. Increase self-esteem and self-confidence by highlighting assets and achievements
3. Make patients aware their own limitations and those of treatment, and of what can and cannot be achieved
4. Forestall a relapse of their clinical condition and thus try to prevent deterioration or re-hospitalization
5. Prevent undue dependency and to transfer the source of support from professionals to relatives/friends

Cognitive Behavior Therapy (CBT) can be beneficial for people with early stage dementia. CBT focuses on the "here and now" looking for ways to improve the person's current situation. CBT focuses on specific goals worked on by the therapist and client with the aim of teaching the person better ways of coping with difficult problems. When selecting a counselor who uses this approach, ask for specific examples.

Contact the Alzheimer's Association 24/7 Helpline (**800.272.3900**) for additional information in identifying appropriate counseling goals for individuals with early stage dementia.