

## ABSTRACTS

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Abstracts are arranged numerically by session and in the order of presentation within each session.

### SESSION 5 (PAPER)

#### AGING AND TECHNOLOGY: FRIENDS

##### PROTOTYPE GOOGLE MAPS WEB SITE TO SELECT NURSING HOMES: USABILITY TESTING BY OLDER ADULTS

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The National Library of Medicine of the National Institutes of Health is developing a web site – called “Nursing Home Screener” (NHS) – for quick and convenient screening of U.S. nursing homes by the public. NHS incorporates Google Maps to display nursing home locations and quality ratings. Such applications of electronic maps are gaining in popularity, facilitated by increasing adoption of broadband Internet access. We report a usability study of a prototype NHS site conducted in April of 2008. The study took place at a health-related computer training class for older adults in a Maryland public library. Participants were ten adults between 57 and 83 years of age ( $M=69.75$ ,  $SD=7.87$ ) with little prior computer experience. Data were collected from interviews, surveys, and observation. Overall, participants felt positive about the information potentially available from NHS, yet less positive about the site’s navigation and information presentation. The map page was particularly puzzling to the majority of these older adults. Lack of knowledge and skills, age-related declines in vision and fine motor skills, prototype shortcomings, and the public library setting all contributed to participants’ difficulties in using NHS. Based on the test findings, we suggest design and training accommodations to facilitate older adults’ adoption and use of Web map applications. Specific simplifications, choice of controls, and alternative ways of presenting search results are proposed. These findings have been applied to a NHS redesign as it heads towards a beta release, and have implications for designing electronic maps for older adults beyond the nursing home domain.

##### THE RELATIONSHIP BETWEEN COMPUTER GAME CONTENT AND INTERACTION RELATIVE TO OLDER ADULTS

H.R. Marston, P. van Schaik, C. Fencott, *School of Computing, University of Teesside, Middlesbrough, United Kingdom*

The evolution of computer gaming since the 1960’s has significantly evolved forming an entertainment medium which for many is perceived as a young persons pasttime and life style. Would older adults consider playing games with their children/grandchildren or within social networks given the current technology and game content? This study investigated the notion of game content and interaction in two phases, the first through a step-by-step approach of individuals designing their own game idea related to a hobby or interest, the second through playing three games from the sports genre on one of two consoles (Wii and PS2). Qualitative and quantitative data reported positive results from participants in both phase one and two. Examples of positive results from phase one included: 1) “The computer game for the elderly must encompass an exercise element and purpose;” 2) “I would like to play computer games to play with my grand-daughter;” 3) “If a game was of help to

any particular hobby I could be interested. Come a time when I am not very active, computer games could have a place in my life;” and 4) “I still think that playing games is educational and fun”. Results from participants in phase two have seen a significant response to game interaction and flow during game playing of the Nintendo Wii. The findings from this study indicate game content needs to be addressed further by the games industry and consideration of game design guidelines, to enable additional success, well-being and benefits towards older adults.

##### BRIGHTEN OUTCOMES: BRIDGING RESOURCES OF AN INTERDISCIPLINARY GERO-MENTAL HEALTH TEAM VIA ELECTRONIC NETWORKING TO IMPROVE PATIENT AND PROVIDER ACCESS TO MENTAL HEALTH CARE

E. Emery, A. Eisenstein, R. Golden, L. Bederow, *Rush University Medical Center, Chicago, Illinois*

Introduction: The BRIGHTEN initiative seeks to address the growing problem of undiagnosed and untreated depression in older adults through use of an interdisciplinary “virtual team.” Methods: Older adults completed a three-item depression screen in primary and specialty care clinics. Those with depression symptoms were interviewed by the BRIGHTEN Project Coordinator. A summary of the interview was sent out electronically to the virtual team for discussion and recommendations for a treatment plan. The virtual team included a social worker, psychologist, psychiatrist, primary care physician, occupational and physical therapists and nutritionist. The Project Coordinator relayed the recommendations and developed a treatment plan with the participant. Three and 6-month outcome assessments were completed. Results: 660 older adults completed screening forms, 11% pursued further evaluation; 50% of those were African American or Hispanic. The nutritionist saw the greatest number of participants. Summary scores on the SF12 for mental-health and the GDS improved significantly between enrollment and 6-month follow-up. Discussion: The BRIGHTEN project has shown that (a) providing a mechanism for assessing and treating older adults with depression and anxiety in medical practices is a critical part of care, (b) health care providers not typically associated with depression management can play an effective role in treatment activities, and (c) virtual teams are an effective mechanism for provider communication and treatment planning.

##### TRAINING AND DEVELOPMENT IN GLOBAL PERSPECTIVE: INSIGHTS INTO AGING WORKFORCES

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As workforces age, the training and retraining practices of firms take on special importance to older workers thinking about recareering or further advancement within their current careers. From an organizational perspective, training and development of workers should lead to higher levels of organizational productivity, profitability, and innovation. However, little is known about the efficacy of various strategies for training, such as a focus on managerial or nonmanagerial workers or a focus on strengthening one training program as opposed to offering a larger variety of options, particularly the role that different age structures might

## TERMINALLY ILL ELDER'S ANTICIPATION OF SOCIAL SUPPORT IN DYING AND AFTER DEATH

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Social support has been found to play a key role in the dying process of terminally ill elders; however, scant information is available regarding the type of support these elders receive and prefer. The purpose of this study was to ask elders who had less than six months to live about their support. In-depth, audiotaped face-to-face interviews were conducted with 100 terminally ill elders and data were content analyzed to identify and categorize the main themes. Although not asked specifically about anticipated support, preliminary findings revealed that 85 of the 100 elders identified such support as important. Four themes emerged: 1) reasons for anticipating support from others, 2) feelings of guilt about anticipating support, 3) anticipating both helpful and unhelpful support, and 4) support anticipated both in dying and after death. These research findings have implications for those seeking to provide appropriate support to an elder in his/her dying process.

## SESSION 1645 (SYMPOSIUM)

### NEW INSIGHTS IN LIFE REVIEW: FROM THEORY TO THERAPY

Chair: *G.J. Westerhof, Psychology and Communication of Health and Risk, University Twente, Enschede, Netherlands*

Discussant: *P. Cappeliez, University of Ottawa, Ottawa, Ontario, Canada*

Reminiscence and life review have a long tradition in gerontology, but the link between research and applications has been rather weak. This led us to conduct a systematic review of scholarly publications relating reminiscence and life review to mental health. We found three basic functions: social functions include the exchange of positive memories in social interactions; negative functions relate to the use of positive memories to reduce boredom and to the continuous revival of bitter memories; positive functions include the integration of both positive and negative memories into one's present life and identity. In this symposium, we draw implications from this research for interventions, focusing in particular on the use of life review in psychotherapy. First, we present a new classification of interventions based on reminiscence functions. Life review therapy is added as a new type of intervention besides simple reminiscence and structured life review. This classification also makes it possible to formulate more precisely why certain interventions will be effective in promoting particular aspects of mental health. Second, we assessed reminiscence functions in people with symptoms of depression and anxiety. Reminiscence is systematically related to mental health problems in this population, showing that it is important to address reminiscence functions in psychotherapy offered to this group. Third, an RCT of an intervention combining life review with creative therapy is presented. The program is found to be effective in promoting personal meaning and thereby in alleviating depression. The study provides evidence of the importance of integrating life review in psychotherapy.

### THE EFFECTS OF LIFE REVIEW THERAPY ON PERSONAL MEANING AND DEPRESSION

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An intervention based on life review and creative therapy was developed to increase personal meaning and decrease depression by the integration of positive and negative recollections of one's life. A multicenter RCT was conducted with an intervention group (N=73) and a control group (N=67). Measurements took place before and after the intervention and three months later using a sentence completion questionnaire for personal meaning and the CES-D for depression. The inter-

vention group increased significantly more in personal meaning than the control group and remained stable at follow-up. Baseline personal meaning and improvements in meaning during the intervention predicted decline in depressive symptoms later in time. Personal meaning is a positive asset in the lives of older people that can be supported by means of life review therapy. The focus of the intervention on the promotion of meaning in life contributes to the mental health of the older participants.

### NEW DEVELOPMENTS IN RESEARCH ON REMINISCENCE AND LIFE REVIEW IN RELATION TO MENTAL HEALTH: A SYSTEMATIC REVIEW

E.T. Bohlmeijer, G.J. Westerhof, *Psychology and Communication of Health and Risk, University Twente, Enschede, Netherlands*

Life-review is used to treat depression in later life, but its evidence is contradictory. Therefore, recent research on reminiscence and life-review and their relation to mental health was systematically reviewed (period 1990 – 2008). Three basic functions of reminiscence and life review were found for mental health: social, positive, and negative functions. It is proposed that these functions are addressed in different types of interventions: simple reminiscence stimulates social functions to promote positive feelings, life review uses positive functions to enhance personal well-being, and life review therapy is directed at change in negative functions to alleviate symptoms of mental illness. The distinction between life-review and life-review therapy is new and offers a possible explanation for the inconsistent results of effect studies. It is concluded that it is relevant to distinguish between different reminiscence functions and the ways in which interventions use these functions to promote different aspects of mental health.

### REMINISCENCE FUNCTIONS AND MENTAL HEALTH IN OLDER ADULTS WITH MODERATE DEPRESSION

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Since moderate depression and anxiety are by far the most important risk factors of late-life clinical disorder, it is relevant to study the functions of reminiscence in this group at risk. We assessed positive reminiscence functions (identity, problem solving) and negative reminiscence functions (bitterness revival, boredom reduction) in 171 Dutch older people with depressive symptomatology. Furthermore, we measured depressive and anxiety symptoms, important life-events and serious illness. Depression was positively correlated with negative reminiscence functions, in particular with bitterness revival. Anxiety has a positive relation with negative functions, as well as a negative relation with problem solving. Moreover, problem solving mediates the relation of negative life events with anxiety. To reduce clinical symptomatology and prevent mental disorder, we advise mental health care professionals to use techniques which reduce bitterness revival in people with depressive symptoms, and to use problem solving techniques in people with anxiety symptoms.

## SESSION TEMP (SYMPOSIUM)

### THE EXPLORATION OF DEEP SPIRITUALITY: MEANING MAKING AT THE END OF LIFE

Chair: *L.K. Manning, Sociology/Gerontology, Miami University, Oxford, Ohio*

Discussant: *R.C. Atchley, Sociology/Gerontology, Miami University, Oxford, Ohio*

Spirituality is a commonly used term that permeates popular culture. It is a term used by many to describe religious world-view and understanding of life experience, while for others it reflects an indescribable state of being having little to do with religiosity. Spirituality has been