Answers to questions on notice - Professor Carmelle Peisah - Capacity Australia - Received 15 April 2016 Trim: D16/11735

WELLBEING IN LATER LIFE YOUR GUIDE TO PROGRAMS AND ACTIVITIES



This resource was developed by the NSW Elderly Suicide Prevention Network (ESPN) and NSW Ministry of Health Mental Health and Drug & Alcohol Office (Older People's Mental Health Policy Unit) as a practical guide with information, programs and resources for enhancing the mental health and wellbeing of older people in NSW.

This resource includes a range of the latest tools, links and information available to aid recovery for older people with mental health problems and maintain wellness, and to support their families and carers. It also details professional development opportunities for community, hospital and residential services. Its focus is on those resources that are specifically concerned with older people's mental health and wellbeing and those resources that are generally accessible on a statewide basis.



Promoting Positive Mental Health & Wellbeing in Older People

NSW MINISTRY OF HEALTH

73 Miller Street NORTH SYDNEY NSW 2060 Tel. (02) 9391 9000 Fax. (02) 9391 9101 TTY. (02) 9391 9900 www.health.nsw.gov.au

This work is copyright. It may be reproduced in whole or in part for study or training purposes subject to the inclusion of an acknowledgement of the source. It may not be reproduced for commercial usage or sale. Reproduction for purposes other than those indicated above requires written permission from the NSW Ministry of Health.

© NSW Ministry of Health 2014

SHPN (MHDAO) 140397 ISBN 9781741870701

Further copies of this document can be downloaded from the NSW Health website www.health.nsw.gov.au

September 2014

Foreword

This guide provides a snapshot of current and emerging programs and activities that promote the mental health and wellbeing of older people in New South Wales. It is pleasing to see the burgeoning numbers of such programs, and it is inevitable that new ones will develop, or be recognised as a result of the release of this guide. I hope that it is forever out of date because of such activity.

Older people provide a wealth of support to others in Australia, whether as employees, employers, volunteers, carers, grandparents, a wise ear, or in a multitude of other roles. In difficult times their wisdom and life experience can provide them with incredible resilience, but the physical and social changes of aging can also generate vulnerability. This vulnerability is increased in the presence of mental illness. In difficult times it often feels as if there are no supports available, but it is more common that people do not know about the supports or how to access them. This guide is a practical tool to close this knowledge gap. More importantly, it opens possibilities for clinicians, consumers, carers and families and other professionals to work together to improve the mental health and wellbeing of individual older people living in NSW. Working together holds the potential to significantly improve the quality of life of individual older people. It may also assist in tackling the under-recognised problem of suicide in older people. Recognition and ownership of both mental illness and suicide in older people by a range of partners lies at the core of effective action.

Mental health clinicians rely upon, and are experts in developing partnerships. Such partnerships start with the consumer and those people important to the consumer, but also often involve other services. These partnerships, and the clinicians who form them, are the key to effective mental health care. Mental health clinicians are acutely aware of the need for older people with mental illness to access psychosocial interventions, but may also feel isolated or disempowered in doing this by the complexity of 'the system'. There have been, and will continue to be, increasing numbers of older people in NSW, with increasing numbers of services supporting them and increased complexity to negotiate. This resource can provide some assistance in negotiating this complexity.

Whilst the primary audience for this guide is mental health clinicians who work with older people, it appears likely to be useful to a much broader audience. Information is provided in a manner that should be useful and relevant to other professionals and services such as General Practitioners, other primary care workers, community support workers, hospital discharge planners or social workers, and residential aged care service staff. It also identifies services and resources that older people, as well as their carers or families, may access directly or use themselves.

This broader audience is important because the majority of older people with mental illness never see a mental health clinician. It is essential that those professionals and individuals who know older people with mental illness are equipped to assist them with knowledge and tools, with understanding that recovery from mental illness can occur in older people, and with partners so that they are not alone.

The NSW Elderly Suicide Prevention Network (ESPN) and NSW Ministry of Health Mental Health and Drug & Alcohol Office (Older People's Mental Health Policy Unit) should be lauded for this initiative that supports both the *NSW Ageing Strategy* and *Service Plan for Specialist Mental Health Services for Older People (SMHSOP) 2005-2015.* I commend this guide as a practical tool for all who are involved in improving the mental health of older people. The 'power of one' can be strong, but is even stronger when supported.

Dr Roderick McKay Old age psychiatrist, Older People's Mental Health Clinical Adviser to NSW Ministry of Health, and Conjoint Senior Lecturer, School of Psychiatry, University of NSW

Contents

1.	Intr	oduction	4
2.	For	older adults (consumers)	. 5
	2.1	Depression and anxiety	5
		Fact Sheet - Depression in older people	5
		Older People and Depression Booklet Fact Sheet 17	
		- Depression and anxiety disorders in older people	5
		Over bl**dy Eighty Booklet	6
		Late onset depression - Finding answers for older people and their carers	7
		This Way Up Clinic (Anxiety and Depression)	8
		Mindspot - The Wellbeing Plus Course	9
	2.2	Staying healthy and active	10
		Healthy Ageing Quiz and Tips for Healthy Ageing	10
		A mature approach to staying active	11
		Active & Healthy Website	.12
		Heart Foundation Walking, Active Body Active Brain	.13
		YMCA PrYme Movers	.14
	2.3	Social networks for older people	.15
		Probus	.15
		University of the Third Age and U3A Online	.16
	2.4	Men's wellbeing	17
		NSW Branch Australian Men's Shed Association including the Shed Online Website	.17
		Menshed's Australia	18
	2.5	Women's wellbeing	.19
		Jean Hailes: Women's Health - Anxiety and Worry 65+ years Toolkit	19
		Older Women's Network Inc	20
		Country Women's Association of NSW	21
	2.6	Socially isolated or at-risk of social isolation	22
		Australian Red Cross - Community Visitors Scheme	.22
		Australian Red Cross - Telecross, TeleCHAT & TeleYARN	.23
		Catholic Community Services - Community Links	.24
	2.7	Grief and loss	25
		The Bereavement Buddy (understanding grief in older adults)	.25
	2.8	Planning for later life	26
		Speaking for myself: Planning for late life decision making	.26
		Planning ahead tools - for future legal, health & financial decisions	
		Your rights at retirement	
		The Aged Care Rights Service (TARS)	.29

	2.9	Older people's rights	30	
		NSW Elder Abuse Helpline	30	
	2.10	Peer education	31	
		Council on the Ageing (COTA) - Free Guest Speaker Program	31	
	2.11	Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI)	32	
		ACON-programs and resources for LGBTI Ageing	32	
		National LGBTI Health Alliance	32	
3.	For	carers, family and the community	33	
		NSW Family and Carer Mental Health Support Program	33	
4.	For	community, hospital and residential care staff	34	
	4.1	Mental health training	34	
		Wesley Lifeforce Suicide Prevention Training for RACF staff	34	
		Suicide Prevention for Older People Training Manual	35	
		Mental Health Connect Aged Care	36	
		Training materials for Cert III & Cert IV in Aged Care & HACC	37	
		Depression Dilemmas	38	
	4.2	Ageing process on-line education	39	
		e-ageing	39	
	4.3	Research to practice - caring for older people	40	
		Research to Practice Resources and Social Issues Paper	40	
	4.4	Caring for older refugees	41	
		Enhancing the Lives of Older Refugees	41	
	4.5	Connecting service providers	42	
		Meet Your Neighbour	42	
5.	Spe	cial populations: Cultural and Linguistically Diverse Communities (CALD)	43	
	Hea	Ith and wellbeing of older people in our community	43	
6.	Eme	erging programs and resources	. 44	
	Men	tal Health First Aid for the Older Person	44	
	Age	d Care Multidisciplinary Care Coordination and Advisory Service Program (Pilot)	45	
7.	Useful contacts/websites			
8.	Ref	erences	49	

section one Introduction

Welcome to *Wellbeing in Later life: your guide to programs and activities promoting the mental health and wellbeing of older people in NSW*, a guide with information, programs and resources for enhancing the mental health and wellbeing of older people in NSW. The guide is primarily intended as a resource to assist mental health clinicians in working with older people. However, it may also be a useful resource for older people themselves, their carers, families and services such as community, hospital and residential aged care services, General Practitioners and Primary Health Networks.

Research is clear that physical activity, social connection, mental health literacy and a sense of purpose are key factors in enhancing and maintaining older people's mental health and wellbeing (NSW Institute of Psychiatry, 2007 and Jorm, 2000). Older people who live in societies that value them have better health outcomes. Indeed, research has shown that countries who appreciate the elderly's contribution, view them positively, and have a later retirement age, have fewer deaths from suicide (Yur`yev et al, 2010).

The emerging concept of recovery as '...a set of values about a person's right to build a meaningful life for themselves, with or without the continuing presence of mental health symptoms' (Shepherd et al, 2008) is central to the use of this guide. For particular consideration are three components of recovery that have been identified as being distinct to older people: the significance of an established and enduring sense of identity; coping strategies which provide continuity and reinforce identity; and the associated impact of physical illness (Daley et al, 2013). In line with the recovery concept, we want older people to be in the driver's seat when it comes to accessing these resources according to their own unique circumstances.

This guide includes a range of the latest tools, links and information available to aid recovery and maintain wellness for older consumers, and support their families and carers. It also details professional development opportunities for community, hospital and residential services. It is by no means exhaustive. Its focus is on only those resources that are specifically concerned with older people's mental health and wellbeing and only those resources that are generally accessible on a statewide basis. This should make it relevant for anyone in NSW. The guide also includes some emerging programs and resources that show promise so that you are aware of what may be on the horizon.

It is important to remember, however, that in your local area, Carelink, Home & Community Care (HACC) services, non-government organisations and the Council will offer a range of essential services/programs for older people that will directly benefit their mental health and wellbeing. So make sure you familiarise yourself with what's available and keep a regular eye out for new services and supports. Please see 'useful contacts' at the end of the document and particularly note the excellent statewide and national online information services that also provide a wealth of information not covered here.

The information, programs and resources have been organised with three intended audience groups in mind: older people (consumers); carers, families and communities; and staff working in community, hospital and residential services. Each page provides a description of the program or resource with contact details, some supporting literature, and examples of how it could be used in practice. It is hoped the guide encourages all to feel they can journey the road ahead together with new information, new plans and renewed hope.

SECTION TWO For Older Adults (Consumers)

2.1 Depression and Anxiety

Fact Sheet - Depression in Older People (The Black Dog Institute) www.blackdoginstitute.org.au/factsheets/

Description:

This is a four page free downloadable fact sheet that provides general information on depression in older people covering signs of depression, types of depression, causes of depression, treatment of depression, how it can be prevented in older people, where to seek help for older people with depression and where to get more information.

The fact sheet also recommends reading **'Managing Depression, Growing Older'** by Eyers, Parker and Brodaty (2012). This book offers a systematic guide to identifying depression in older people, supporting them at home or in an aged care setting and the importance of diet, exercise and attitude in recovery. The book is available for purchase through http://www.allenandunwin.com/.

Supporting literature:

A key strategy to address stigma and promote prevention and early intervention is the ongoing dissemination of mental health information to consumers, carers, families and the general public. As noted by Jorm (2000, 396) 'If the public's mental health literacy is not improved, this may hinder public acceptance of evidence-based mental health care. Also, many people with common mental disorders may be denied effective self-help and may not receive appropriate support from others in the community'.

It is widely recognised that the provision of consumer education improves mental health in patients with chronic and serious acute physical illness (Hawley 1995, Rawl et al, 2002 and Dew et al, 2004 cited in NSW IOP 2007). Kronmuller et al (2006) cited in NSW IOP 2007 found that consumers with less illness knowledge in the area of depression had a less favourable illness concept, poorer interpersonal relationships and more passive coping strategies. Lower health literacy is associated with less knowledge of chronic disease processes, poorer mental and physical health, limited use of preventive services, and higher rates of hospital admissions (Bostock & Steptoe, 2012).

Using this resource in practice:

This resource could be used to educate and inform consumers, carers, family, the community or services on the key aspects of depression in older people. The resource also allows the opportunity to explore this issue in greater depth via the book 'Managing Depression, Growing Older'.

Older People and Depression Booklet, Fact Sheet 17 – Depression and Anxiety Disorders in older people & 'Over Bl**dy Eighty' Booklet

www.beyondblue.org.au Phone: 1300 22 4636

Description:

The above free resources provide information on getting help for depression and tips for staying well. They also encourage adults over 60 to be aware of the signs and symptoms of depression and anxiety, seek help if they need it and not to be afraid or embarrassed to ask for it. The **'Over Bl**dy Eighty!'** booklet provides inspiring stories from people over eighty years of age on how they keep mentally and physically healthy.

Two related resources from beyondblue are also available for culturally and linguistically diverse communities: 'Depression in older people' (available in Vietnamese, Chinese Simplified, Chinese Traditional, Italian, and Greek) and 'Depression and dementia' (available in Chinese Simplified, Chinese Traditional, Greek, Italian, and Vietnamese).

Supporting literature:

Jorm, Christensen and Griffiths (2005 and 2006) have identified that in states where *beyondblue* activity was greater, there were a number of benefits: greater awareness of *beyondblue* activities, larger improvements in depression literacy, a stronger ability to recognise depression, a more positive belief about the potential helpfulness of treatments, and a greater openness about depression.

Using this resource in practice:

This resource could be helpful:

- As a tool for education/training support
- To promote awareness of signs and symptoms in depression and causes
- To provide general information on where to get help
- To provide information on how to keep mentally and physically well.

2010 Writing Competition – Late Onset Depression: Finding Answers for Older People and their carers

http://www.blackdoginstitute.org.au/personalstories/writingcompetition/2010competition.cfm

Description:

This is a writing competition. Older adults, their children and people who care for them tell their personal stories about how depression impacts the over 60's.

In this competition older adults, their children and people who care for them tell their personal stories in an insightful look into how depression impacts the over 60's. One essay writer declared that 'to fully understand the varying degrees of depression within our elderly population, it is necessary to take a moment, to put ourselves in their shoes and try to understand the enormous life changes that occur in our later years.' According to Professor Gordon Parker, Executive Director of the Black Dog Institute, the 76 entries in the Australia-wide writing competition have provided a 'treasure trove' of advice and experiences: 'I believe older people will find it useful to hear these stories from others, and what they found to be helpful in managing their depression'.

Supporting literature:

Several theories have been proposed for the therapeutic effects of narrative. Forming a coherent, meaningful narrative may adaptively transform and organize memory representations of stressful events, which may in turn reduce distress and improve health (Klein & Boals, 2001 and Pennebaker, Mayne, & Francis, 1997). According to cognitive change theory, traumatic memories that are not simplified into a narrative structure may be stored as sensory perceptions, obsessional ruminations, or behavioural re-enactments, as in the case of post-traumatic stress disorder (Smyth, Hockemeyer & Tulloch, 2008, Smyth & Pennebaker, 1999 and Smyth, True & Souto, 2001).

Using this resource in practice:

This resource can provide opportunities for older people to read stories from other people with similar experiences of depression and to write their own stories. It can help a person understand mental health issues, which may promote their understanding of a situation and their own recovery process. Essays of the winners in the Institute's sixth writing competition appear on the Black Dog Institute's website.

This Way Up - Clinical Research Unit for Anxiety and Depression (CRUfAD)

https://thiswayup.org.au/ Phone: (02) 8382 1408

Description:

This is an online program that provides treatment and education into anxiety and depressive disorders. A course (5-6 lessons) costs \$55 for 90 days access. The 'THIS WAY UP™' website is part of the Clinical Research Unit for Anxiety and Depression (CRUfAD) which is a joint facility of St Vincent's Hospital and the University of NSW established to reduce the impact of anxiety and depressive disorders on individuals. The online program provides treatment, education and research into anxiety and depressive disorders. THIS WAY UP empowers individuals by giving them access to online help and treatment for anxiety and depression. For clinicians, they provide the latest training manuals and Cognitive Behavioural Therapy (CBT) training to enable them to treat people with anxiety and depression. All their services are based on the principles of CBT and are clinically proven and backed by research.

Guided Treatment (or 'THIS WAY UP Clinic') provides extensive courses on a broad range of topics that general practitioners, psychologists and other clinicians can prescribe for consumers to complete. The format is a screening questionnaire, a cartoon story, and homework. These courses have more lessons to a course than Self Help courses and include help with other issues including sleep or anger management. The system notes a participant's level of distress and keeps them and the clinician informed. The courses are for people with anxiety or depressive disorders and cover:

- 1. Sadness (Depression)
- 2. Worry (Generalised Anxiety Disorder)
- 3. Worry and Sadness (Mixed Depression and Anxiety)
- 4. Shyness (Social Phobia)
- 5. Panic (Panic/Agoraphobia)

A course (which contains 5-6 lessons) costs \$55 for 90 days access.

Supporting literature:

Literature reviews have shown that when internet-delivered cognitive behaviour therapy (iCBT) is disseminated into practice, reductions in psychiatric symptoms and psychological distress are considerable, and commensurate with those achieved in randomised controlled trials. Recent research in relation to the 'THIS WAY UP' clinic has established that iCBT prescribed across a range of psychiatric disorders is effective and acceptable amongst older treatment-seeking populations (Mewton et al 2013).

Using this resource in practice:

There are two ways to use THIS WAY UP.

Clinic Pathway 1 - Prescription (common): The clinician maintains responsibility for the consumer and conducts assessment and prescribes a specific course. The clinician supervises the consumer while they complete the course, and receives consumer progress reports after completion of each lesson.

Clinic Pathway 2 - Referral (special circumstances): The team at THIS WAY UP Clinic takes on clinical responsibility for the consumer while the course is undertaken. The clinician refers the consumer to the team at THIS WAY UP Clinic, St Vincent's Hospital, Sydney for assessment and management and receives an email regarding suitability of the consumer for the course, whether or not the consumer has registered for the course, and if accepted into the program, then receives patient progress reports at assessment and discharge.

MindSpot... The Wellbeing Plus Course

www.mindspot.org.au Phone: 1800 61 44 34

Description:

This free online anxiety and depression course, developed and run by Macquarie University in conjunction with *beyondblue*, is designed to teach the older person about:

- Understanding anxiety and depression
- Strategies to help manage core symptoms
- Practical skills to practice each week to help recovery
- Stories about how others have applied the skills to help them recover.

Participants need to complete an initial assessment either online or via the phone. The course takes 8 to 10 weeks and there are 4 to 6 lessons.

After reading a lesson, participants can download a 'Do it Yourself' Guide containing simple tasks that are designed to help recognise symptoms, challenge thoughts and build better mental habits in day to day life. A number of real life examples are provided to give a glimpse into how people from all walks of life deal with anxiety and depression.

A trained MindSpot Clinic therapist will make contact with course participants at least weekly to:

- Guide them through the course and answer questions
- Help them learn and practice new skills
- Help motivate them and share what others have found helpful
- Help them solve some of the barriers to recovering from anxiety and depression.

Supporting literature:

Online programs based on cognitive behaviour therapy can be an effective treatment modality for older people with anxiety and depression (Dear et al, 2013).

Using this resource in practice:

This course is suitable for all adults (60+ years) who present with symptoms of stress, anxiety and /or low mood. Participants must want to improve the quality of their lives and emotional wellbeing and be able to allocate at least 4 hours per week to reading the material and practicing the skills taught.

2.2 Staying Healthy and Active

National Ageing Research Institute (NARI) — Healthy Ageing Quiz & Tips for Healthy Ageing www.mednwh.unimelb.edu.au/index.htm Phone: (03) 8387 2305

Description:

This is a quiz that can be done as a paper based document or online.

The Healthy Ageing Quiz and Tips for Healthy Ageing bring together research evidence about the key determinants of healthy ageing to improve older people's health and mental health literacy. In 2009 the National Seniors Productive Ageing Centre funded the National Ageing Research Institute (NARI) to develop the Healthy Ageing Quiz. This quiz will help an older person determine whether their current lifestyle choices are helping them age well. If the person is aged 50 years or over, male or female, this quiz is for them.

Tips for Healthy Ageing provide a range of useful tips to help the older person age well and includes resources about arthritis, nutrition, managing pain, avoiding falls, urinary incontinence, depression in later life, vision, dementia, memory, safe use of medicines, sleeping well, physical activity and older person's health assessment. The quiz and tips are based on research evidence about the key determinants of healthy ageing.

Supporting literature:

Jorm (2012) notes that for major physical diseases, it is widely accepted that members of the public will benefit by knowing what actions they can take for prevention, early intervention and treatment. He adds that increasing the community's mental health literacy needs to be a focus so that the whole community is empowered to take action for better mental health.

Using this resource in practice:

This quiz and tips for healthy ageing can be made available at mental health promotion events and with consumers as a way for them to explore whether their current lifestyle choices are helping them age well. The quiz can be done as a paper based document or online.

- The Healthy Ageing Quiz can be conducted online at: http://nationalseniors.healthyageingquiz.sgizmo.com/s3/
- The Healthy Ageing Quiz document can be accessed at: http://www.mednwh.unimelb.edu.au/nari_research/pdf_docs/Healthy-Ageing-Quiz.pdf
- The Tips for Healthy Ageing can be found online here: http://www.mednwh.unimelb.edu.au/nari_tips_for_healthy_ageing.html and a pdf version can also be downloaded for printing here; http://www.mednwh.unimelb.edu.au/nari_tips_for_healthy_ ageing/Files/Tips_on_Healthy_Ageing_HEALTHY_AGEING_01072012.pdf
- The six tip sheets for assessing dementia and depression in older people from culturally and linguistically diverse backgrounds can be accessed at: http://www.mednwh.unimelb.edu.au/nari_ tools/nari_tools_dementia.html.

A mature approach to staying active (Australian Government Department of Health and Ageing)

www.health.gov.au/ambassadorforageing Call the Aged Care Information Line on 1800 500 853

Description:

A mature approach to staying active is a free poster and brochure series (currently four pamphlets) promoting positive and active ageing including:

- A mature approach to staying active;
- Avoiding falls at home;
- Staying in touch with family, friends and,
- Good nutrition.

The posters and brochures have been widely distributed to senior citizens clubs, Commonwealth Respite and Carelink Centres, GPs and community health centres. Additional copies of the posters and/or brochures can be ordered at no cost from National Mailing & Marketing on (02) 6269 1000.

Supporting literature:

Resources that promote healthy ageing are important prevention and early intervention tools. Bostock et al (2012) notes that lower health literacy is associated with less knowledge of chronic disease processes, poorer mental and physical health, limited use of preventive services, and higher rates of hospital admissions. Research shows that how you perceive ageing affects how long you will live. In a study of 660 people, those with more positive perceptions of their own ageing lived an average of 7.5 years longer. This effect remained after other factors such as age, gender, income, loneliness and health status were controlled (Levy et al, 2002).

Using this resource in practice:

These resources provide information on promoting positive and active ageing within the community. They can be ordered directly, given to consumers and older adults, carers and family at promotion events or education sessions.

Active and Healthy Website

www.activeandhealthy.nsw.gov.au

Description:

The online Active and Healthy website provides older adults access to physical activity programs and falls prevention information to assist them to reduce their risk of falling, and provides health professionals access to falls related information and training opportunities. The website identifies a list of registered group exercise programs for each post code area in NSW that have specific exercises to improve balance and strength. A cost may be associated with some of the activities promoted through this website.

'Staying Active and On Your Feet', a downloadable booklet on falls prevention that has been produced by the NSW Department of Health is also available from this site.

Supporting literature:

Keleher and Armstrong (2005) and Hosman and Jane- Llopis (2005) among others have shown that exercise interventions that encourage regular physical activity in supportive, age-friendly environments are effective in helping older adults manage physical ailments and reduce the risk of depression. Research shows that we can substantially reduce our risk of a fall and the risk of depression by doing moderate exercise for at least 30 minutes on most days of the week, and by incorporating balance and leg strength exercises such as those found on this website, into a daily routine (NSW Department of Health, 2010).

Using this resource in practice:

This website can be used to find an exercise program and falls related information for consumers, family or friends in their local area. The booklet 'Staying Active and On Your Feet', which is the new community falls prevention resource produced by NSW Health, can also be downloaded. Free hard copies of the resource can be ordered from this site.

Heart Foundation Walking, Active Body Active Brain

www.heartfoundation.org.au/walking Phone: 1300 36 27 87

Description:

The Heart Foundation Walk is a free program offered as part of the Heart Foundation's broader Active Living program. The aim of the project is to make regular walking enjoyable and easy, especially for people who are not used to being active. The Heart Foundation works in partnership with Area Coordinators to set up groups in their local community. Area Coordinators may come from health or community centres, councils or workplaces and work with the Heart Foundation to assist volunteer Walk Organisers to recruit walkers and establish groups. Community-based volunteer Walk Organisers lead groups in their local areas. They are provided with resources, training and support to begin and maintain their group. They also receive complimentary Heart Foundation Walking merchandise for their role in organising a local walking group.

Walkers are provided with information outlining Heart Foundation Walking and can choose to participate in the Walker Recognition Scheme which includes certificates and other incentives when they reach walking milestones (e.g. 25 walks). The Heart Foundation provides ongoing assistance, support and resources to all Area Coordinators.

Supporting literature:

Keleher and Armstrong (2005) and Hosman and Jane- Llopis (2005) have shown that exercise interventions that encourage regular physical activity in supportive, age-friendly environments are effective in helping older adults manage physical ailments and reduce the risk of depression.

A Heart Foundation Walking Summary Report (2011) found that 80% of walkers stated their main reason for joining the program was to improve their fitness and/or health. When asked what they specifically liked about the program, more than 53% mentioned the social aspects of belonging to a Heart Foundation Walking group. Additionally, the report noted the following:

- Over 75% of walkers rated the Walker Recognition Scheme as important, with 45% rating it as very important, and;
- The majority of walkers believed the Heart Foundation Walk program was important to their physical, social and/or mental wellbeing.

Using this resource in practice:

Mental health clinicians can support consumers to access a group via the Heart Foundation website. If there is no current group in the local area, clinicians could liaise with the Heart Foundation Walking Area Coordinators to assist in identifying a Volunteer Walk Organiser (who could be a consumer) to organise an age appropriate walking group.

YMCA PrYme Movers

You will need to contact the specific YMCA in your area. To find your local YMCA go to: http://www.ymcansw.org.au/

Description:

This is a group fitness program for 50 plus adults, set to music, at an average cost of \$8 a session. The PrYme Movers philosophy embraces three elements: Fitness, Fun and Friendship for the mature population. Fitness is the essence through exercise to music with instructors who have empathy for mature adults. Pryme Movers welcome newcomers and foster and maintain an atmosphere of fun and friendliness to enable one and all to feel that they really belong. Through participation, new and common interests and new and shared experiences, friendships are forged. This in turn enhances the quality of life now and for years to come.

Benefits of Seniors Exercise highlighted in the YMCA material are:

- Self confidence: Being active and feeling strong will naturally help you feel more confident of yourself.
- Balance & flexibility: Will improve when you exercise regularly. Improved strength, flexibility and posture will help with balance and falls risk.
- Cardiovascular: Regular physical activity reduces risk of heart disease and high blood pressure.
- Bone density: Exercise protects against loss in bone mass. Better bone density will reduce the risk of osteoporosis.
- Chronic conditions: Regular physical activity lowers the risk of chronic conditions such as dementia, diabetes etc. It also helps in the management of cholesterol and arthritis pain.
- Immune function: A healthy, strong elderly body fights off infection and sickness more easily and more quickly.
- Social interaction: Exercise can be a great way to meet new people and will make training more enjoyable.

Supporting literature:

Keleher and Armstrong (2005) and Hosman and Jane-Llopis (2005) have shown that exercise interventions that encourage regular physical activity in supportive, age-friendly environments are effective in helping older adults manage physical ailments and reduce the risk of depression.

Using this resource in practice:

Health professionals could consider the availability of this program in their area for consumers and promote it at health promotion events. For more details or to enrol visit your local YMCA centre: Greenacre YMCA, lan Thorpe Aquatic Centre, Kurri Kurri Aquatic Centre, Caringbah YMCA, Cook + Phillip Park Aquatic and Fitness Centre, Bankstown City YMCA, Hawkesbury Oasis, The Entrance Ocean Baths, Mount Annan Leisure Centre, Raymond Terrace YMCA, Lake Haven Recreation Centre, Morris lemma Indoor Sports Centre, Macksville Memorial Aquatic Centre, Ryde Community Sports Centre, Broken Hill Regional Aquatic Centre, Great Lakes Aquatic and Leisure Centre, Epping YMCA and UNSW Fitness and Aquatic Centre.

Probus

To find your nearest club go to www.probussouthpacific.org, and to join Email: admin@probussouthpacific.org

Description:

Probus is an international association of retired and semi-retired people to meet friends.

Whilst it is sponsored by Rotary only 10% of Probus members are former Rotarians. Clubs are formed to provide social events, and schedule speakers to keep members up to date with community issues and happenings. Many members form smaller interest groups for hobbies such as sport, education, bridge, fishing, travel and computers. Probus is not a service club. Membership is open to anyone of good character and who has had some measure of responsibility or achievement in any field worthy of endeavour. Some clubs have a limit on membership until a vacancy arises. New clubs are formed when the need becomes apparent to the local Rotary Club.

Supporting literature:

In a meta-analysis of depression prevention, older people were found to benefit from social supports. Such social supports might include relationships, family contacts, community links, hobbies and interests and spiritual faith (NSW IOP, 2007). Probus has the potential to offer a range of these types of social supports.

Using this resource in practice:

If you are seeing an older person who has who has had some measure of responsibility or achievement in their work you could suggest Probus as a possible option for them as a way of making friends, being engaged, and linked to what's going on in their local community.

2.3 Social Networks for Older People

University of the Third Age and U3A Online

http://sydneyu3a.org/

Description:

The University of the Third Age is an international organisation whose aims are the education and stimulation of mainly retired members of the community – those in their third 'age' of life. It is commonly referred to as U3A. The self-help U3A movement began in Australia in 1984. This 'grass-roots' movement is driven by retired community enthusiasts receiving little or no assistance from governments, NGOs or paid adult educators. In 2011 there were 240 independent U3As in Australia (69,000 members).

U3A Online is the world-first virtual University of the Third Age delivering online learning via the internet. All that's needed to study online is access to a computer with an internet connection – and some basic computing skills.

Supporting literature:

There are many studies that support the value of the University of the Third Age in promoting active ageing and positive mental health. Broadly, Friedrich (2003) summarised findings from a number of large studies that promote the integration of physical, psychological and social domains for developing positive strategies to manage ageing-related issues. The MacArthur Foundation Study of Successful Ageing (Rowe & Kahn 1999) also identified the gains to mental health and wellbeing that can flow from such an integrated approach. Swindell, R. (2002) found that U3A Online helped reduce social isolation in at risk older people. Even older people that have not used computers before welcome the opportunity to have this opportunity in later life. Swindell and Mayhew (1996) showed that small groups of frail elderly people with active minds, who were confined to their homes by illness or incapacity, gained measurable benefits from educational programs that were delivered by teleconference.

Using this resource in practice:

Older people can be encouraged to attend a University of the Third Age course in person, or if they are unable to leave their home, they can join online. You can go online to find out the nearest courses in your area. For a person who lacks confidence in using a computer, a step before starting the U3A could be to access the Council of the Ageing (COTA) internet course and/or any computer courses run specifically for older adults. These courses are typically conducted in libraries (check your local council).

2.4 Men's Wellbeing

NSW Branch Australian Men's Shed Association including the Shed Online Website www.mensshed.org

Phone: 1300 550 009

Description:

Men's Sheds are community-based organisations that are accessible to all men and whose main activity is the provision of a safe and friendly environment where men are able to work on meaningful projects at their own pace in their own time in the company of other men. A major objective is to advance the wellbeing and health of members.

The NSW Australian Men's Shed Association Branch has been set up to represent and assist the independent community-based Men's Sheds in NSW. The Branch is affiliated with the Australian Men's Shed Association (AMSA) and is an incorporated body under New South Wales legislation. The Australian Men's Shed Association is funded by the Federal Government to provide initial and ongoing practical support for the development of all Men's Sheds.

Activities the AMSA delivers or actively supports include: register of sheds and membership register for State Branches; practical support for existing sheds and assistance in the development of new sheds; providing insurance services at affordable rates; providing usable shed specific OH&S, risk management systems and training support; organising and conducting the National Conference on a bi-yearly basis and, promoting men's health programs within sheds.

An AMSA-supported manual (by Ted Donnelly and Ruth Van Herk) is available on setting up a Men's Shed at **amsa@mensshed.net** AMSA services are provided freely to registered and non-registered sheds. Membership to the Association is FREE for all services except for membership that includes the discounted Group Public Liability Insurance Scheme.

The **Shed Online website www.theshedonline.org.au** was established as a joint collaboration between AMSA, beyondblue and the Movember Foundation to provide an online virtual Shed community where men can socialise and exchange ideas. The Shed Online also provides men with information on health and well-being.

Supporting literature:

Research undertaken by Hayes and Williamson (2006) found four major benefits of Men's Sheds:

- 1. Decreasing social isolation
- 2. Enhancing self-esteem
- 3. Increasing access to information about health,
- 4. Providing a link between the 'everyday world of men' and the health care system.

Golding (2011) found that most men involved in Men's Sheds are retired and usually in the process of one or more difficult transition involving areas such as family, work and finances.

Using this resource in practice:

Health professionals can provide information to interested older men who may want to join a current Men's Shed (by using the online locator) or start one in their own area. The website provides locations and contact details of local sheds, newsletters, news of current events and activities within zones, items available to other sheds free of charge or available for swap, and access to the discussion forum on the website. The Shed Online Website is particularly appropriate for older men who don't have a local shed to attend or cannot attend for other reasons.

Mensheds Australia (MSA)

http://www.mensheds.org.au/ Email: help@mensheds.org.au Phone Help Desk: 0457888387

Description:

Men's Shed programs engage and support older men and promote decreased social isolation, enhance self-esteem, increase access to specific information about health and provide a structural link between the 'everyday world of men' and the health care system.

Mensheds Australia (MSA) goal is to use the experience of other men's sheds to provide access to expertise about the formation, structure and operation of men's sheds. MSA have available a range of materials relating to the establishment, structure and operation of men's sheds .They have also established a help desk as a place where men's sheds can obtain information, discuss issues and exchange information.

The annual Membership for Men's Sheds is \$275 per year. However there is no charge for Associate Members, who receive:

- Access to the Mensheds Australia Helpdesk for support/advice (during business hours)
- A dedicated page on the Mensheds Australia locator on the website with their information displayed.

Supporting literature:

Morgan et al (2007) have shown that men's sheds have provided an opportunity for men and the people who work with them to engage their concerns in a partnership that has practical implications in the areas of social connectedness, mental health and suicide prevention. Golding (2011) found that most men involved in Men's Sheds are retired and usually in the process of one or more difficult transition involving areas such as family, work and finances.

Using this resource in practice:

This resource will help older men, their family and carers identify relevant men's sheds in their local area. In addition, this resource will help those who are interested in becoming involved in starting a men's shed, or needing some help with their existing men's shed, or just requiring further details about membership of Mensheds Australia.

2.5 Women's Wellbeing

Jean Hailes: For Women's Health - Anxiety and Worry 65+ Years Toolkit anxiety.jeanhailes.org.au/sixtyfiveplus-years

Description:

The 'Anxiety and Worry 65+ years' site has been developed by Jean Hailes to help older women understand more about worry, anxiety and anxiety disorders which can have a major negative impact on health and wellbeing. The site will help older women learn more about anxiety and worry think about how anxiety affects them and find ways to help with anxious thoughts and feelings. It also includes a self-assessment page for the person to explore their thoughts and feeling further.

Jean Hailes is a women's health organisation supported by the Department of Health and Ageing (Australian Government). The website supports physical and emotional health and wellbeing in all its dimensions for all women in Australia throughout their lives and offers a range of free resources and easy to understand information on women's health and wellbeing.

Supporting literature:

Jorm (2012) notes that increasing the community's mental health literacy needs to be a focus so that the whole community is empowered to take action for better mental health.

Using this resource in practice:

You can encourage consumers to review this site to increase understanding of their own condition. The site can also be promoted at education sessions and health events. Older women experiencing worry or anxiety can use this site to explore their concerns further and look at options for further assessment and management of their particular issue.

Older Women's Network Inc

www.ownnsw.org.au

Description:

The Older Women's Network Inc is a unique volunteer organisation run by older women for older women, embodying the principles of active ageing. The Older Women's Network has established a number of groups and wellness centres that encourage and make it possible for older women in their communities to access and participate in a range of social, educational, physical and intellectual activities. Groups and centres are run by volunteers. Prices are kept at a minimum to ensure affordability for all. A variety of groups are run for activities such as discussion, craft, walking, painting, drumming and dancing.

Supporting literature:

Evidence shows that friendship is important for wellbeing, particularly for older women. Meaningful friendship provides companionship and support and helps maintain a sense of self through difficult times (Hosman and Jane-Llopis, 2005). Volunteering has also been found to build social connectedness which promotes mental health (Keleher et al, 2005).

Using this resource in practice:

If a wellness centre or group exists near your health district you can refer older women to it, and promote its programs. The centres and groups welcome partnerships. Wellness Centres are at Blacktown, Bankstown, Sydney, Northside, Illawarra and Sutherland.

You can support any older women who would like to create a network via the email link on the website. Wellness Centres can be set up in other centres if willing volunteers are available.

Country Women's Association of NSW (CWA)

www.cwaofnsw.org.au Phone: (02) 9358 2923

Description:

The CWA is the largest women's association in Australia, and aims to improve the conditions for women and children and make life better for families, especially those living in rural and remote Australia. The CWA supports activities that enhance the value of country living, especially those associated with health and education. They advocate for improving conditions and welfare of all women and families residing in NSW. The Association also provides a forum for discussion and advocacy on a range of issues, including priority mental health issues.

To access the CWA program you need to get in touch with your local branch. There are approximately 400 branches connected to 30 groups across NSW. Contact details and meeting times are available on the Branches and Groups page of the CWA website. The full member's fee for 2012/2013 was \$38.80 (plus branch and group fees). Members also receive a bi-monthly journal, *The Country Woman*.

Branch members meet once a month and participate in many different activities ranging from fundraising, handcrafts and cultural activities to debating current social or environmental issues. Each Branch is unique which allows it to meet the needs specific to its community.

Supporting literature:

Positive supportive social networks and social ties have a beneficial effect on mental health outcomes, including stress reactions, psychological wellbeing, and symptoms of psychological distress (i.e. anxiety and depression) (Kawachi and Berkman 2001). Interventions such as community befriending programs can provide social support, thus reducing loneliness and depression. Evidence shows that friendship is important for well-being, particularly for older women. Meaningful friendships provide companionship and support and help maintain a sense of self through difficult times (Hosman and Jane-Llopis, 2005).

Using this resource in practice:

SMHSOP workers can link interested women to CWA as part of developing a holistic approach to helping them stay connected and supported within their local community, thereby reducing the risk of loneliness and depression.

2.6 Socially Isolated or at Risk of Social Isolation

Australian Red Cross - Community Visitors Scheme

http://www.redcross.org.au/community-visitors-scheme.aspx Contact for South East NSW: 1300 388 620 and NSW (02) 9229 4272

Description:

The Red Cross Community Visitors Scheme involves volunteers visiting people living in aged care homes to provide friendship and support. Volunteers visit residents of aged care homes who are socially isolated and whose quality of life would be improved by friendship and companionship. The visits are relaxed and social in nature. The resident and their visitor chat together, share a cup of tea, play a board game or take a walk around the home and its gardens. Regular visits by volunteers enhance the quality of life of residents by providing them with company and friendship. Volunteers are a welcome change to the routine and isolation that some residents in aged care homes face daily. For people living in aged care facilities who have limited mobility, may have dementia or other cognitive or mental health issues, a regular visit can make a world of difference. Volunteers are also enriched by the experience of visiting a resident. Red Cross volunteers regularly visit around 900 socially isolated residents of aged care homes around Australia.

Supporting literature:

People living in residential aged care have been recognised as being at greater risk of social isolation and disconnection from their community (Victorian Department of Health, 2006) with the negative impacts of social isolation, including depression, suicide, poor nutrition, decreased immunity, anxiety, fatigues and social stigma, being well established (Draper, 1996; Meril et al 1990). The Australian Institute of Health and Welfare (AIHW) report 'Depression in residential aged care 2008-2012' identified that over half (52%) of all permanent residents of aged care facilities experienced symptoms of depression (AIHW, 2012).

Using this resource in practice:

The Community Visitors Scheme should be considered for any older person living in an aged care facility who is socially isolated or at risk of becoming social isolated.

Australian Red Cross – Telecross

http://www.redcross.org.au/telecross.aspx Phone: 1300 885 698 and

TeleCHAT & TeleYARN

(see contact details below) http://www.redcross.org.au/telechat-service.aspx

Description:

Telecross is a free service that provides older people and those that cannot leave their home with a daily phone call to ensure that they are safe and well. If this call goes unanswered an agreed emergency procedure will be activated and help arranged if necessary. Telecross calls are made by trained volunteers daily at an agreed time that suits the recipient of the call. Telecross also has the added benefit of providing a degree of companionship, and contributes to a decrease in the sense of isolation many people experience. The service can also be provided on a temporary basis (i.e. carer is unavailable).

TeleCHAT and TeleYARN provide regular telephone calls to people who have little or no social connection with other people. Volunteers call participants at an agreed time, generally once a week, for an open ended chat. Participants are matched with volunteers based on their interests, hobbies and availability. TeleCHAT is a free service. People receiving calls speak of the companionship and friendship they feel from having another person to talk with.

- TeleCHAT is available in the ACT and SE NSW (Queanbeyan, Cooma Monaro, Goulburn Mulwarree, Palarang, Eurobodalla, Bega Valley, Tumut, Tumbarumba, Bombala, Gundagai, Yass Valley and Snowy River local government areas) for people over the age of 65 (or 55 for Aboriginal and Torres Strait Islander peoples) who live in the community and have limited opportunities to make their own social connections. Phone: 1300 913 941 or (02) 6234 7634
- **TeleCHAT** is available in Northern NSW, Hunter, Central Coast and Sydney for people who live independently and have minimal social contact. Phone: 1800 686 763
- TeleYARN is for older Aboriginal and Torres Strait Islander people anywhere in NSW who are living in the community and who don't get to speak to many other people particularly from their own culture. Phone: (02) 9229 4268

Supporting literature:

There is evidence that encouraging people to connect with telephone based support services, such as Telecross and Lifeline in Australia, can reduce isolation and suicidal ideation in the elderly (De Leo et al., 2002). A study on the use of telephone befriending services in the UK found that such services provide a low-cost means for socially isolated older people to become more confident and independent and develop a sense of self-respect potentially leading to increased participation and meaningful relationships (Cattan et al, 2011).

Using this resource in practice:

Socially isolated older people can refer themselves or be referred by a relative, friend or health professional.

Catholic Community Services – Community Links

www.catholiccommunityservices.com.au/services/programs/community-links Phone: 1800 225 474

Description:

Community Links is a volunteer service providing a regular phone call to support people who live alone and experience social isolation. This program also provides a security check to those who are at risk due to social isolation. This service is provided free of charge available across NSW and ACT to clients and their families. The Community Links Program does not receive Government funding and depends on support and donations from the general community and corporate groups. It is supported by Catholic Community Services.

Eligibility criteria:

- Someone who lives alone
- Is experiencing social isolation
- At risk due to a disability
- Is medically at risk
- Is experiencing loneliness
- Is frail and at risk of falling.

Supporting literature:

The negative impact of social isolation on mental health and wellbeing including depression, suicide, poor nutrition, decreased immunity, anxiety, fatigue and social stigma, has been well established (Draper, 1996; Meril et al 1990). A study on the use of telephone befriending services in the UK found that such services provide a low-cost means for socially isolated older people to become more confident and independent, and develop a sense of self-respect, potentially leading to increased participation and meaningful relationships (Cattan et al, 2011).

Using this resource in practice:

Health professionals can refer at-risk and socially isolated consumers to this free state-wide service (ACT included). Referrals can be made through the Catholic Community Services Customer Service Line 1800 225 474. Catholic Community Health can be accessed at: http://www.catholiccommunityservices.com.au/

2.7 Grief and Loss

The Bereavement Buddy (Understanding Grief in Older Adults)

www.nalag.org.au Email: www.info@nalag.org

Description:

The Bereavement Buddy is an e-newsletter published by the NALAG Centre for Loss & Grief in Dubbo 3 times per year.

The National Association of Loss And Grief (NALAG) Inc. has been involved in establishing many of the loss and grief support groups throughout Australia. Their primary objective is to build the capacity of individuals, organisations and communities in order to enhance well-being following loss, grief, bereavement and trauma. NALAG centre and branch locations in NSW are available to assist with support and/or education.

The Bereavement Buddy is an e-newsletter which provides NALAG members and the wider community with a featured professional journal article and a detailed list of upcoming support and education provided by NALAG in NSW. The e-Newsletter is FREE to download. NALAG has the following centres and branches in NSW:

- NALAG Centre for Loss & Grief, Dubbo: Phone: (02) 6882 9222
- NALAG Belligen/Nambucca Shires Branch, Mindala Phone: 0488 084 792
- NALAG Mid North Coast Branch Phone: (02) 6881 2554
- NALAG Central Coast Branch Phone: (02) 4369 1431
- NALAG Gunnedah and District Loss & Grief Branch Phone: 0429 431 138
- NALAG Telephone Grief Support Branch, Sydney Phone: (02) 9489 6644

Supporting literature:

The death of a spouse or significant other can be one of the most stressful life events resulting in increased morbidities and much higher risk of mortality, especially for older adults (Nseir and Larkey, 2013). There are strong links between bereavement, unresolved grief and mental illness. Older people with poor health at the time of widowhood have been found to have significantly higher risks of complicated grief and a major depressive disorder (Utz et al, 2012). Lazar (1979) estimated that 10-15% of people seen in the Mental Health Clinics of Massachusetts General Hospital had an unresolved grief underlying their particular psychological condition.

Using this resource in practice:

The Bereavement Buddy and related information can be used as an education resource on understanding grief in older adults and connecting them to appropriate bereavement supports to prevent adverse health and mental health impacts.

2.8 Planning for Later Life

Speaking for myself: planning for later life decision making (Legal Aid NSW & The Benevolent Society – Consumer Booklet)

http://www.legalaid.nsw.gov.au/

http://www.legalaid.nsw.gov.au/publications/factsheets-and-resources/speaking-for-myself

Description:

The Benevolent Society and Legal Aid NSW have prepared this booklet to help people take control of later life decisions including accommodation, lifestyle, healthcare and financial issues. Speaking for myself is about taking steps to protect the person's interests, making sure their future is in good hands and that things are done the way they would want.

Supporting literature:

In research among community-based older people without dementia, higher levels of health and financial literacy were associated with better decision making, suggesting that improvements in literacy could facilitate better decision making and lead to better health and quality of life in later years (James et al, 2012).

Using this resource in practice:

Older people, carers and family can get this resource off the website to guide important lifestyle, health and financial decision making. Health professionals can also give the booklet to consumers, carers, and families. The booklet could also be made available at health and mental health promotion events for the general community.

Planning Ahead Tools – for future legal, health and financial decisions (NSW Office for Ageing, NSW Trustee and Guardian and NSW Public Guardian)

http://www.planningaheadtools.com.au/ Phone: 1300 887 529

Description:

The Planning Ahead Tools website contains information on all aspects of planning ahead, including Advance Care Planning, Wills, Powers of Attorney, and Enduring Guardianship. Interactive tools are a feature of the website, allowing individuals to prepare their future plans and to tailor information for their needs. The website also includes links to relevant publications and other useful resources.

The Planning Ahead Tools Fact Sheet, which summarises information on preparing a will, making power of attorney and appointing an enduring guardian is available to download from this site in a range of languages including: English, Arabic, Cantonese, Mandarin, Croatian, German, Greek, Hindi, Italian, Korean, Macedonian, Spanish, Tagalog, Vietnamese and for Aboriginal people.

Supporting literature:

In research among community-based older people without dementia, higher levels of health and financial literacy were associated with better decision making, suggesting that improvements in literacy could facilitate better decision making and lead to better health and quality of life in later years (James et al, 2012).

Using this resource in practice:

Older people, carers and families can access this website to help guide important lifestyle, health and financial decision making. The material is also available in other languages. There is also information for health professionals who can not only promote the resources for older people, carers and the community but can support consumers to include these issues in their care plans.

Your Rights at Retirement: A guide to making decisions and navigating your entitlements in later life (Australian Human Rights Commission)

http://www.humanrights.gov.au/publications/your-rights-retirement http://www.humanrights.gov.au/sites/default/files/document/publication/yrar_2013.pdf

Description:

This booklet helps to navigate the different phases of ageing. It covers topics from setting up a retirement budget through to considering options for aged care.

Supporting literature:

In research among community based older persons without dementia, higher levels of health and financial literacy were associated with better decision making, suggesting that improvements in literacy could facilitate better decision making and lead to better health and quality of life in later years (James et al, 2012).

Using this resource in practice:

The booklet can be used as a reference guide when you need to check a topic, or it can be read from cover to cover to get a snapshot of the services and supports on offer. You can also give the booklet to consumers, carers, and families and make it available at health and mental health promotion events for the general community. Older people, carers and family can download this resource from the website to guide important lifestyle, health and financial decision making.

The Aged Care Rights Service (TARS)

http://www.tars.com.au/

Description:

The Aged-care Rights Service Inc (TARS) is a community legal centre that provides:

- Non-legal advocacy for the residents of Commonwealth-funded hostels and nursing homes and recipients of in-home aged care in NSW.
- Legal advice and advocacy for residents of self-care retirement villages.
- Legal advice, assistance, referral and education for older people throughout NSW including rural, regional and remote areas of the state through the Older Persons Legal Service (OPLS). This service is specifically for people over 60 who are socially or economically disadvantaged.
- A team of aged care advocates and solicitors who are available to visit aged care homes, funded in-home aged care providers, retirement villages, seniors community groups, professional groups and organisations to provide information sessions on issues effecting older people.

Supporting literature:

Ellison et al, in their review of the legal needs of older people (2004) found that older people are often reluctant to complain about issues affecting them. The review goes on to point out that given older people's distrust of the legal system, and limitations of the law in addressing their legal problems sufficiently, there was a danger that the legal needs of older people could be largely hidden from legal and non-legal service providers, and this further impacted on a group already recognised as socially and economically disadvantaged (Ellison et al, 2004). The Human Rights Commission's (HRC) submission to a House of Representatives inquiry into older people and the law (2006) also points to the need for community education and awareness raising in relation to the legal rights of older people and information campaigns to encourage older people to take action in relation to those rights. A 2009 review conducted by Gray R, Gray H & Associates Pty Ltd, found that the stated aims of the Older Persons Legal and Education Program (OPLEP) were being met through the direct service delivery and associated activities. This included establishing and promoting the OPLEP; developing networks amongst service providers; providing legal information, advice and promoting self-advocacy both face-to-face and via telephone; casework (including a focus on elder abuse and representation of older persons in the Guardianship Tribunal); the provision of education often in partnership with other service providers; and submissions concerning reform of legislation and policy.

Using this resource in practice:

The Aged Care Rights Service can be contacted to provide advocacy, legal advice, assistance and referral for older people throughout NSW. The service is also available to provide education for health, community and aged care services on legal issues effecting older people.

2.9 Older People's Rights

NSW Elder Abuse Helpline: Information, Advice, Referrals

www.elderabusehelpline.com.au/

Phone: 1800 628 221

Description:

NSW Elder Abuse Helpline is a confidential helpline offering information, advice and referrals for people who experience, witness or suspect the abuse of older people living in their homes in NSW. Elder Abuse is any act within a relationship of trust, which harms an older person. It includes financial, psychological, physical, verbal, sexual abuse, and neglect.

Supporting literature:

A research review by Dong et al (2013) highlighted that population-based studies reported that depression, anxiety and post-traumatic disorder were the most prevalent psychological consequences of elder abuse. Compared to non-victims, abused older adults were more likely to report a higher level of psychological distress.

Using this resource in practice:

The Elder Abuse Helpline is available for anyone to contact and seek information, advice and referral if they have concerns or suspicions that an older person is being abused in their home in NSW. This helpline does not cover people living in residential aged care facilities. Information regarding residential aged care facilities can be found at: www.health.gov.au/internet/main/publishing.nsf/content/ageing-complaints-index.htm

2.10 Peer Education

COTA Free Guest Speaker Program

www.cotansw.com.au Phone: COTA on (02) 9286 3868 Email: spec@cotansw.com.au

Description:

The Council on the Ageing (COTA) offer free guest speakers to deliver peer education to groups and clubs with members over 50 years of age.

'Mate to Mate' is a one hour information session that aims to raise awareness about how Home and Community Care (HACC) services can enable older men to live independently. Most people want to be able to remain living independently in their own home as they age, even if they experience problems with their health. HACC services aim to reduce a person's risk of being prematurely or inappropriately admitted to residential care and this session will help a person determine what might help them remain at home. 'Mate to Mate' is run in partnership with the Department of Family and Community Services: Ageing, Disability and Home Care and the University of Western Sydney.

'Internet Safety: be confident online': is a one-hour information session that seeks to increase knowledge and confidence about safely using the internet. With education, older people can enjoy the benefits of the internet as much as anyone else and fully engage in the digital world. The sessions have been running for over 12 months and a feedback form is completed by participants. 'Internet Safety' is run in partnership with the Department of Broadband, Communications and the Digital Economy. Confidence in using the internet will assist older adults in accessing online therapy (outlined in this guide) such as 'Mindspot' and 'This Way Up' and accessing websites such as 'My Agedcare' and 'Active and Healthy'.

Supporting literature:

Peer mentors have been found to be effective in a range of physical and mental health areas including the provision of basic counselling necessary to help others (Kirkpatrick et al, 1987). Among older adults, peer mentors are empathetic and respectful towards one another and through positive role modelling they can challenge ageing stereotypes more effectively than younger professionals (Bratter et al 1990). Research on the effectiveness of peer-mentored older adult fitness programs found them superior to programs mentored by young professionals with older adults reporting overall improvements in physical and mental wellbeing and better social functioning (Dorgo et al, 2009).

Using this resource in practice:

When you have requests for talks this is a useful option to consider using. You can also proactively promote the program to existing groups, for example men's sheds, other clubs, and councils. As well, COTA has new programs in development so it's worth looking at their website for the latest offerings.

2.11 Lesbian, Gay, Bisexual, Transgender and Intersex

ACON – Programs & Resources for LGBTI Ageing

http://www.acon.org.au/home http://www.acon.org.au/ageing/glbt-ageing

National LGBTI Health Alliance

http://www.lgbthealth.org.au/ageing

Description:

ACON is New South Wales' leading health promotion organisation specialising in HIV and lesbian, gay, bisexual, transgender and intersex (LGBTI) health. ACON has a number of programs focusing on ageing and LGBTI groups. Until comparatively recently, there has been minimal examination and inclusion of the needs of older Australians of diverse sexual orientation. They are a diverse group requiring particular attention due to their experience of discrimination and the limited recognition of their needs by service providers and in policy frameworks and accreditation processes.

Specific aged-related services include:

The Community Health and Wellbeing Division which aims to improve the health and wellbeing of older people in our communities by providing support groups, developing health promotion initiatives and advocating for improved mainstream and aged care services.

The LOVE (Living Older Visibly and Engaged) Project: LOVE (Living Older Visibly and Engaged) is a new ACON project that aims to kick-start a conversation in communities about LGBTI aged care, support needs and preferences to help develop better services. http://www.acon.org.au/ageing/loveproject

Reaching Out: Ageing and LGBTI Rights (with the Aged Care Rights Service): The project will reach out to existing LGBTI populations across NSW where ACON has metro or regional offices. It involves the facilitation of education sessions to LGBTI audiences regarding aged care rights, elder abuse, retirement village living and advocacy for recipients/prospective recipients of aged care services. http://www.acon. org.au/ageing/glbt-ageing/legal-issues

Contact The Aged-Care Rights Service Inc. Phone: (02) **9281 3600** Freecall: **1800 424 079** (for Country NSW) or visit: www.tars.com.au

'Out late' a resource for older men coming out': Mature Age Gay Men's Project. http://www.acon.org.au/sites/default/files/OutLate07_webversion.pdf

'Useful Resources for Sexually, Sex and Gender Diverse Older People' including organisations and support, community and social groups, literature, films, policies and programs and research http://www.acon.org.au/sites/default/files/Resource-sheet-older-people.pdf

The National LGBTI Health Alliance is the national peak health organisation in Australia for organisations and individuals that provide health-related programs, services and research focused on LGBTI people and communities. Ageing and aged care has been a priority issue for the Alliance and information on ageing and issues facing older LGBTI people can be accessed at http://www.lgbthealth.org.au/ageing

Supporting literature:

The growing numbers of LGBTI people accessing aged care services represents an emerging and potentially challenging area for aged care service providers (DoHA, 2012). Historically Historically, Australian LGBTI persons have faced stigma and discrimination in accessing and using aged care services, there is an ongoing need for services need to shift towards being more sensitive to and supportive of older LGBTI people's needs (Pachana 2013).

Using this resource in practice:

You can link consumers to the Community Health and Wellbeing Division, the Love Project or the Mature Age Gay Men's Project and resources. You can also inform service providers and the community of available resources in this area.

SECTION THREE For Carers, Family and the Community

Family and Carer Mental Health Program

http://www.health.nsw.gov.au/mhdao/Pages/family-mh-program.aspx or contact your LHD Family and Carer Mental Health Program coordinator.

Description:

NSW Health funds five non-government organisations (NGOs) to deliver the Family and Carer Mental Health Program across NSW. NGOs provide support and advocacy services for families and carers of people with a mental illness, including older persons. A list of the funded NGOs and local contacts for the program are available via the NSW Health website. http://www.health.nsw.gov.au/mhdao/Pages/family-mh-program.aspx.

Following referral or contact, the NGO may conduct a free and confidential individualised needs assessment for the carer and/or family to identify the level of support required. Following the needs assessment the NGO will facilitate the direct provision of individual support, information, advocacy and peer support via a strongly linked service model.

Mental Health Family and Carer organisations also help to establish and provide infrastructure to peer support groups in their local areas. The specific needs of families and carers from Aboriginal and Torres Strait Islander and culturally and linguistically diverse communities are addressed through partnerships with other organisations, which already have connections with these communities.

Supporting literature:

The findings outlined in the Carer Life Course Framework (Paganini 2005) provide supporting evidence for the Family and Carer Mental Health Program based on a comprehensive literature review and consultations with focus groups that support service linked models and underpin Paganini's (2005) six phase approach to carer education and support. Domestic and international literature demonstrates the importance of providing information to families and carers of someone with a mental illness. The 'connecting with carers through education' resource (Hossack et al 2010) is another key resource for the Family and Carer Mental Health Program, underlining the importance of mental health education in reducing risk and fostering positive outcomes and understanding for mental health consumers and their carers.

Using this resource in practice:

The Family and Carer Mental Health Program can assist in providing support and advocacy for families and carers of older people with mental illness, including individualised needs assessment and support for carers, tailored to each particular family situation.

SECTION FOUR For Community, Hospital and Residential Care Staff

4.1 Mental Health Training

Wesley Mission – Wesley Lifeforce Suicide Prevention Training for Residential Aged Care Facility (RACF) Staff

www.wesleymission.org.au

Wesley LifeForce Sydney office, 93 Milton Road, Ashfield, NSW 1800, PO Box 576, Ashfield, NSW 1800 Phone: (02) 8922 9095, Toll Free: 1800 100 024, Fax: (02) 8922 9096 Email: lifeforce@wesleymission.org.au

Description:

Wesley LifeForce Suicide Prevention Programs are aimed at training residential aged care facility staff on how to manage a suicidal crisis appropriately and confidently. Participants learn about the problem of suicide in Australia and gain an understanding of risk and protective factors, and recognition of warning signals. Participants are also taught effective, simple strategies to manage a suicidal crisis. This training is free and fully funded via a Commonwealth Government grant (National Suicide Prevention Strategy) from 2013 to 2015.

The training is available in two formats;

- 1. A four hour workshop for Registered Nurses and Enrolled Nurses identify, assess and intervene.
- 2. A one hour workshop for other frontline aged care staff identification and reporting.

There may be the possibility of the training also being provided to Home and Community Care (HACC) Services. Trainers generally are Certificate 4 qualified with experience in mental health training.

Supporting literature:

The training is informed by the latest research in suicide prevention and vetted by an expert advisory committee including Mindframe, Hunter Institute of Mental Health. Gatekeeper training around suicide has been proven to positively affect the skills, attitudes and knowledge of people who undertake the training in many settings (Isaac et al, 2009).

Using this resource in practice:

There is an opportunity for mental health clinicians to partner with RACFs to help facilitate training being made available in their local area. One option may be to centralise training and have staff from several RACFs attend rather than each facility trying to organise their own. There may also be the opportunity to promote and/or clarify your own local service's role in this area at the training.

Suicide Prevention for Older People: Early intervention, assessment and referral options for staff working with older people who may be at risk of suicide – Training Manual.

http://www.health.nsw.gov.au/pubs/2003/pdf/suicide_prevent.pdf

Description:

The NSW Health Suicide Prevention for Older People Training Manual provides a guide for mental health educators on how to conduct a one-day workshop focussing on suicide prevention and older people. This workshop has been designed to provide education on suicide prevention for older people for both health and non-health workers. The appropriate target audience are workers with clinical and/or assessment and referral responsibilities for older people. The workshop focuses on understanding suicide in older people, strategies for early intervention and prevention, as well as methods of responding to varying levels of risk.

The online manual includes information on the four sessions that comprise the workshop and relevant course handouts:

- Session one: Overview of ageing, mental health and suicide
- Sessions two: Understanding suicide in older people
- Session three: Working with older people at risk of suicide
- Session four: Ongoing care and support of older people.

To access the DVD which accompanies this resource please contact:

Patrick Livermore C/- Gosford Mental Health Centre PO Box 361, Gosford NSW 2250 Telephone: (02) 4320 2952 Fax: (02) 4320 2715

Supporting literature:

Gatekeeper training as a preventative intervention for suicide has been proven to positively affect the skills, attitudes and knowledge of people who undertake the training in a range of settings (Isaac et al, 2009).

Using this resource in practice:

You can use the extensive material provided in the training manual for mental health staff, other health and community service staff. It is recommended that some information such as statistics be updated for current training purposes.

Mental Health Connect Aged Care - Mental Health Coordinating Council (MHCC)

www.mhcc.org.au

http://www.mhcc.org.au/learning-and-development/professional-development-2-day-workshops/mental-health-connect-aged-care.aspx

Description:

Mental Health Connect Aged Care is a two day workshop for community and residential aged care staff and volunteers that enables workers to gain confidence and skills in assisting older people with mental health conditions. It brings together knowledge and experience from aged care, mental health and people who have lived experience of mental illness and recovery. Each course is delivered by 2 trainers, one of whom will draw on their lived experience of mental health problems or caring for an older person living with mental health problems. Training is delivered across NSW – see MHCC Learning and Development calendar on the website for details **www.mhcc.org.au**. Costs for individual MHCC members is \$450 and for non-members \$500. In-house or customised training is available on request at your venue, or MHCC can book a suitable venue.

Email: training@mhcc.org.au Phone: 9555 8388 extension 106 or Access: www.mhcc.org.au

Supporting literature:

This type of training is crucial since there is evidence that depressive disorders and disability are highly correlated (Baldwin et al., 2002 cited in NARI, 2009) and that depression rates in older people receiving a high level of support at home are approximately twice as high as less frail community-dwelling older people (Baldwin et al., 2002 cited in NARI, 2009). Therefore, older people in settings where disability is high such as in residential aged care facilities (where depression has been identified in 52% of all residents (AIHW, 2013)) and hospitals, frail older people at home, and those suffering a chronic illness are at greater risk of depression.

Using this resource in practice:

You can help promote this training to service partners in the community and residential care sectors.

Training materials for Certificate III and IV in Aged Care and Home & Community Care

http://www.beyondblue.org.au/about-us/programs/older-adults-program/aged-care-education/training-materials-for-rtos

Description:

beyondblue has developed training materials to assist eligible Registered Training Organisations (RTOs) in delivering content on depression and anxiety as part of Certificate III and Certificate IV aged care courses. These include Certificate III 'Understanding depression and anxiety in older people' and Certificate IV 'Working to reduce depression and anxiety in older people' aged care courses.

Training materials for Certificate III in Aged Care and Home and Community Care

The training materials at the Certificate III level have been mapped to the CHCICS303A unit of competency – 'Support individual health and emotional wellbeing'.

RTO staff will need to complete the registration form to access the appropriate materials. The program, which is free for eligible RTOs, consists of a student workbook, facilitator guide DVD clips (via restricted YouTube), Worksheets (blended learning only) and podcasts to orientate facilitators to the materials.

Training materials for Certificate IV in Aged Care

The training materials at the Certificate IV level have been mapped to the CHCAC412B unit of competency – 'Provide Services to older people with complex needs'. The resources include a student workbook, facilitator guide, DVD clips (via YouTube) and a podcast to orientate facilitators to the materials.

The accredited training resources build upon *beyondblue*'s **Professional Education to Aged Care (PEAC) Program**, which is aimed at improving the aged care workforce's understanding of depression and anxiety in older people. Aged Care facilities should contact eligible RTO's to determine training costs for staff.

Supporting literature:

The AIHW report 'Depression in residential aged care 2008-2012' identified that over half (52%) of all permanent residents of aged care facilities experienced symptoms of depression (AIHW, 2013). It is vital that aged care staff understand how to recognise and respond appropriately to depression and anxiety in older people.

Using this resource in practice:

You have an important role in supporting staff caring for older people to promote the ability to recognize early changes in older people's mental status. Promoting formal staff training helps ensure early interventions and appropriate referrals to relevant specialists/specialist services thereby reducing the negative impact of mental disorders on the older person.

Depression Dilemmas

www.blackdoginstitute.org.au/gptrainingcalendar Phone: (02) 9382 8518

Description:

'Depression Dilemmas' is a training workshop on depression and alcohol use disorders, late life depression and depression that is failing to respond to regular treatments. The 6 hour workshop focuses on practical knowledge and skill development. It holds accreditation: Cat 1 ALM, providing 40 QI and CDP points, Mental Health Skills Training (Formally level 1) for those who complete requirements, 30 PRPD points with ACRRM. The program involves pre workshop activities/readings, which are sent following registration. The workshop itself is interactive and the learning objectives include:

- Identify the interrelationship between depression and problem alcohol use
- Delineate the use of pharmacological and psychological treatments in the management of co-morbid depression and problem alcohol use
- Recognise common presentations of late life depression
- Develop a comprehensive management plan to treat late life depression
- List common factors that underpin difficult to treat late life depression
- List common factors that underpin difficult to treat depression.

The course uses a systematic based approach to work through treatment options for the patient with difficult to treat depression. For information on cost email: **education@blackdog.org.au**

Supporting literature:

The programs offered by Black Dog Institute have been developed from material based over 19 years of clinical and research experience at the Black Dog Institute and in collaboration with general practitioners, the NSW Alliance of General Practice Division, the College of Psychological Medicine, NSW Health and the Commonwealth Government. General Practice and primary care have been identified as important settings for action around the delivery of mental health services including the need for ongoing professional education and training to improve the detection, treatment and management of mental illness (Pirkis, 2004 and NSW Health, 2008). With studies finding that depression and anxiety is often undetected and underdiagnosed in older people these initiatives are of particular importance (NARI, 2009 and NSWIOP, 2007).

Using this resource in practice:

This training course is designed for people who are trained as either a General Practitioner or psychologist and explores the clinical challenges of caring for patients with depression that are difficult to treat. Information on 'Depression Dilemmas' can be provided to health professionals seeking further information on education in this area.

4.2 Ageing Process Online Education

e-ageing - Western Australia Centre for Health and Ageing

http://cms.wacha.org.au/index.php?id=826

Description:

'e-ageing' provides online education modules about the ageing process and associated diseases for both medical and paramedical professionals.

Interactive modules include continence, delirium, dementia, depression, falls, geriatric assessment, healthy ageing, stroke, rehabilitation and residential care. The aim of the multi-disciplinary online education modules are to promote:

- improved knowledge regarding common age-related conditions
- improved skills in the management of these conditions
- development of positive attitudes towards older people
- effective teaching and learning

Supporting literature:

A recent research article (Watson et al, 2013) on the development of the program noted that the educational needs of each discipline related primarily to foundation level knowledge in major aged care topics. Stakeholders sought modules incorporating communication skills, cultural and social issues and the importance of a multidisciplinary approach to aged care. Students from all disciplines sought online materials that were interactive, engaging, case-based and locally relevant. Importantly, a subsequent evaluation of the modules by users has been strongly positive.

Using this resource in practice:

Although this is a Western Australian resource it is freely available for use in NSW by health and mental health professionals working with older people.

4.3 Research to Practice - Caring for Older People

The Benevolent Society Research to Practice Resources and Social Issues Paper

The Research to Practice resources can be accessed at: www.benevolent.org.au/think/practice--resources

The Social Issues document can be accessed at: www.benevolent.org.au/think/social--issues?page=3

The Benevolent Society can be contacted at: www.benevolent.org.au Phone: 02 8262 3400 Fax: 02 9360 2319

Description:

The following research to practice resources summarise the latest research and evidence to help front-line staff to deliver a consistent, quality service to the older people they support.

- Working with older Aboriginal and Torres Strait Islander people research to practice briefing 8 (2013).
- Supporting older people experiencing mental distress or illness research to practice briefing 7 (2012).
- Supporting the independence of older people research to practice briefing 6 (2011).
- Supporting older people from culturally and linguistically diverse backgrounds research to practice briefing 4 (2010).
- Responding to abuse of older people research to practice briefing 3 (2010).
- Promoting social networks for older people research to practice briefing 2 (2009).
- Caring for older Australians discussion questions (2009).
- The role of careworkers in caring for older Australians research to practice briefing 1 (2008).
- Social Issues: A roadmap for ageing well Independence, opportunities and care (2010). The Social Issues Paper outlines The Benevolent Society's position on changes needed to harness opportunities for older people to participate more fully in economic, social and family life, and to better support quality of life in older age. This provides health professionals a broad overview of some of the key determinants for ageing well.

Supporting literature:

Ensuring staff have access to evidence based resources and information is an important workforce development strategy which promotes consistently good practice and better outcomes for consumers, their carers and family (Department of Health, 2009, NSW Health, 2008, and Hoffman et al, 2010).

Using this resource in practice:

These resources should be promoted and shared with your colleagues, service partners and networks.

4.4 Caring for Older Refugees

Enhancing the Lives of Older Refugees – A Self Improvement Resource for Community Service Providers

http://www.swslhd.nsw.gov.au/refugee/rhs_guides.html

pdf: http://www.swslhd.nsw.gov.au/refugee/pdf/Enhancing_The_Lives_Of_Olde_Refugees.pdf

Wall. S, Santalucia. Y, Salem. M, Giacomin. D, McDonald. R and Bosnjak. F, (2011). 'Enhancing the Lives of Older Refugees – A Self Improvement Resource for Community Service Providers'. Older Refugee Working Committee, Fairfield City Council/ South Western Sydney Local Health District.

Description:

Older refugees face a number of challenges that are additional to those of the Australian-born and migrant elderly population. Refugees, by definition, have fled serious human rights violations as a result of war or organised violence. Some will be survivors of torture, some will have had children, siblings or parents who were killed, and all will have lost their homes, way of life and community. These experiences can have a profound impact on their mental health and wellbeing, the way they will access services and the way aged care services should be provided. This resource aims to raise awareness, provide guidance, information and resources for aged care workers when working with older people from a refugee or refugee-like background. This resource refers to these people as older refugees.

The goals of the resource are to:

- build the capacity of aged care services to recognise and respond to the care needs of older refugees;
- increase the capacity of aged care services to provide care and support to older refugees;
- help staff undertake assessments of older refugees and plan for their care in a way that is culturally competent;
- improve communication and relationships between different services as well as between staff working in these services, and,
- inform and assist the ongoing development of policies, practices and procedures related to caring for older refugees.

Supporting literature:

This resource promotes trust, access and equity and social justice. These values are very important for working with older refugees and are based on international, national and state service policies, plans and legislation. Education and training focused on cultural awareness and competency for health care workers is a key strategy for delivering culturally appropriate services (Wall et al, 2011).

Using this resource in practice:

This resource aims to give managers and service coordinators the knowledge and resources to help community care workers provide a more informed level of care for older refugees. Understanding these issues better can help staff to work more effectively and sensitively with older refugees.

4.5 Connecting Service Providers

Meet Your Neighbour – Mental Health Coordinating Council (MHCC)

http://www.mhcc.org.au/sector-development/promoting-partnerships/meet-your-neighbour. aspx

Description:

A local two-and-a-half hour networking event to encourage organisations to meet, learn more about each other and find ways to work better together. The event is somewhat informal and allows plenty of time for networking. MHCC runs Meet Your Neighbour around NSW with a local service that volunteers to host the event. MHCC works with the host organisations to send out the invitations, manage the responses and to provide support as needed – all the host organisation has to do is provide a venue which comfortably seats at least 40 people and put on a light morning tea. Events are advertised in MHCC's weekly FYI e-newsletter, contact info@mhcc.org.au to subscribe.

Supporting literature:

There has been ongoing recognition of the critical role increasing numbers of services play in the delivery of mental health care and the urgent need for these government and non-government services, supports and providers to be better coordinated to maximise positive outcomes for consumers, their carers and family (Department of Health, 2009, NSW Health, 2008, and MHCC, 2011). The mental health of older people has been a particular area of focus to enhance coordination between mental health and aged care services 'to find those areas of commonality and difference and so start to address service and care coordination issues and improve the experience of older people with mental health conditions living in their own homes as well as better addressing the needs of those transitioning from home into aged care facilities' (MHCC & ACS 2012, p.3). Positive relationships and understanding of roles between services has the potential to enhance outcomes. A tangible benefit of Meet Your Neighbour may be the establishment of clearer referral pathways that enable consumers and carers to be better matched to programs and services in their local area.

Using this resource in practice:

You can host an event specifically for older people. The program requires a local service to contact the MHCC to volunteer to host an event. As such, it is a great opportunity for the mental health clinician working in aged care, or other aged care service provider, to volunteer (or support a service partner to volunteer) to host an event to promote greater understanding and coordination between service providers (i.e. residential aged care facilities, community services, non-government organisations, local neighbourhood and seniors centres, council, Centrelink and community legal services) around mental health issues in older people. Remember that the MHCC will assist with invitations and the management of responses and you provide the morning or afternoon tea.

SECTION FIVE

Special Populations: Cultural and Linguistically Diverse Communities (CALD)

Health and wellbeing of older people in our community

http://www.dhi.health.nsw.gov.au/Transcultural-Mental-Health-Centre/Resources/ Translations-/Translated-Resources2/default.aspx Phone: (02) 9912 3850

Description:

This free resource developed by the Transcultural Mental Health Centre uses the stories of two older people from culturally and linguistically diverse (CALD) backgrounds, Anna and Sanji, to explore some of the issues that impact on the mental health and wellbeing of older people. These include social isolation, linguistic issues and perceptions of mental illness. The resource also looks at some practical steps that can be taken to address these issues and support older people. 'Health and Wellbeing of older people in our community' is available in 11 languages: Arabic, Chinese, Croatian, English, Greek, Indonesian, Italian, Polish, Spanish, Tagalog and Vietnamese.

Supporting Literature:

The need for this resource is highlighted in a study by Bajekal and Blane et al; (2004) comparing ethnic differences in quality of life in older age groups that revealed the relative disadvantage of older members of ethnic minority communities in terms of social networks and community participation. A literature review by Rao and Warbuton et al (2006) emphasises the importance of improved communication and information resources for older people and their families from CALD backgrounds to help address this social isolation.

Using this resource in practice:

This resource will be useful to assist older people from CALD communities who are isolated or experiencing depression to realise that they are not alone and to assist them to find help and support and to connect with the community. It will also help service providers, families and carers to better understand the experiences of older people and to recognise signs of loneliness and depression as well as to assist older people to address these issues.

SECTION SIX Emerging Programs and Resources

Mental Health First Aid for the Older Person

www.mhfa.com.au in early 2015.

Description:

Mental Health First Aid for the Older Person (OMHFA) is a new initiative to address mental illness in the context of ageing. It is a training course designed for adults working with or caring for older adults aged 65 and over, to be delivered in aged care settings and other community and health settings. The OMHFA program aims to increase mental health awareness and literacy across the community, remove stigma and get First Aid help to older people.

The MHFA for the Older Person is an adapted version of the standard MHFA course to be applicable to older people and will include an additional module on Confusion which will cover Delirium and Dementia. Instructor training is planned to be rolled out early in 2015. There will be eligibility criteria for instructors who set the fee for the course and purchase the manual. The course will run wherever instructors are, sometimes in workplaces. Instructors will set a fee of between \$70 and \$300 for participants and will pay Mental Health First Aid \$20 per participant. Train the trainer options will cost \$3,500. Instructors will need excellent presentation and communication skills, a data projector, a laptop and speakers to show DVDs.

Supporting literature:

A review of evaluation studies of the Mental Health First Aid Training (Kitchener and Jorm, 2005) found the following statistically significant benefits 5–6 months post-training: improved concordance with health professionals about treatments, improved helping behaviour, greater confidence in providing help to others and decreased social distance from people with mental disorders. Only one trial evaluated the mental health benefits to participants and this found positive effects. The program is based on further evidence with over 20 studies supporting the original Mental Health First Aid course and variants. These studies are available at www.mhfa.com.au/cms/Evidence-publications/

Using this resource in practice:

As noted, Mental Health First Aid for the Older Person is designed for people working with or caring for older adults aged 65 and over, to be delivered in aged care settings and other community and health settings. Mental health clinicians and community and residential staff working with older people should consider advocating for their service to support local instructors being trained to deliver this course to key services/staff and older people's groups.

Mental Health First Aid also runs two courses for specific CALD communities; Vietnamese MHFA: The 12-hour first edition Standard Mental Health First Aid Course has been culturally adapted and translated for the Vietnamese community within Australia and taught by Vietnamese Instructors who are also accredited to teach the Standard MHFA Course. https://mhfa.com.au/courses/public/types/vietnamese.

There is also a MHFA for Chinese People Living in Australia: The 12-hour Mental Health First Aid course teaches Chinese Australian adults (18 years and over) how to provide initial support to adults who are developing a mental illness or experiencing a mental health crisis. https://mhfa.com.au/courses/public/types/chinese.

Aged Care Multidisciplinary Care Coordination and Advisory Service Program (Pilot)

Contact Telehealth Technical Support Officer, Western NSW Medicare Local Phone: 0419 832 404

Description:

This program provides an opportunity for more consistent liaison and consultation between treating GPs and Residential Aged Care Facilities (RACFs).

Trial - Aged Care Coordination and Advisory Service (2013 -2017)

Pilot – General Practitioner consultations for residents of aged care facilities via video consultation (2013-2017)

This initiative provides funding for a pilot delivering GP consultations to aged care recipients in RACFs by videoconference for up to 30 RACFs around Australia over a three and a half year period. RACFs have been recruited for the pilot following approval by DoHA. Aged Care Coordinators have been appointed to provide coordination between older people and a range of multidisciplinary care providers to facilitate improved access to a wider range of service providers. Coordinators are located within the existing infrastructure of Medicare Locals (or work very closely with Medicare Locals) to create efficiencies and avoid duplication of effort and responsibilities. The trial and pilot participants have already been selected. Information is available regarding services, their accessibility and relevant contacts in the participating regions to aid in care delivery. Coordinators will be responsible for monthly reporting from participating RACFs and GPs and participate in all evaluation activities.

The Pilot is expected to demonstrate:

- Improved resident's access to primary health care services and facilitate GP involvement in multidisciplinary care
- Reduced acute events, emergency admissions and hospitalisations
- Reduced premature entries into residential aged care facilities
- Improved health outcomes and increase independence for aged care recipients
- Promote uptake of innovative practices in aged and health care, such as the use of telehealth, and better management of workforce shortages.

Supporting literature:

This program provides an opportunity for more consistent liaison and consultation between treating GPs and RACFs. This in turn promotes opportunities for earlier detection of changes to an older person's mental health status and early referral to appropriate disciplines and services. Similar studies have been conducted in Canada (Cornish et al, 2003) where reports of the project's impact included expanded knowledge of mental health issues, increased cross-disciplinary connections, and greater cohesion among professionals. The results suggest that, with some refinements, telehealth technology can be used to facilitate mental health training and promote interdisciplinary collaboration among professionals in a rural setting.

Using this resource in practice:

This program can be referenced as a model for other programs.

SECTION SEVEN Useful Contacts/Websites

mindhealthconnect

http://www.mindhealthconnect.org.au/

The mindhealthconnect website aggregates mental health resources and content from the leading health focused organisations in Australia. A range of mental health resources including online programs, fact sheets, audio and video, and online communities provided by trusted content partners can be accessed. Mindhealthconnect, which was launched in July 2012, is a national initiative operated by Healthdirect Australia, on behalf of the Australian Federal Government as part National E-Mental Health Strategy. Mindhealthconnect provides access to online mental health resources for all Australians who are concerned with their own or someone else's mental health. This includes different age groups, stages of life and cultural backgrounds. The website is also a useful resource for health professionals.

myagedcare website

http://www.myagedcare.gov.au/ Phone Contact Centre: 1800 200 422

The specific section on healthy and active living can be accessed directly at http://www.myagedcare.gov.au/healthy-and-active-living

The myagedcare website has been established by the Australian Government to help you navigate the aged care system. The Gateway is part of the Australian Government's changes to the aged care system which have been designed to give people more choice, more control and easier access to a full range of aged care services. You can find more information about these and other improvements to Australia's aged care system on the site, as well as information about the aged care workforce and a glossary of definitions that may help you to understand any unfamiliar terms that you come across while finding out more about aged care. Some of the information on the 'myagedcare' website has been translated into Arabic, Croatian, German, Greek, Italian, Simplified Chinese and Traditional Chinese and can be downloaded in PDF format by selecting the appropriate language from the following page: http://www.myagedcare.gov.au/other-languages

Myagedcare comprises the website and a national contact centre. Together they can provide you with information on aged care, whether for yourself, a family member, friend or someone you're caring for. Information can be provided in other languages and in other formats if you have a hearing difficulty or vision impairment.

Your Health Link, health information the right way

http://yourhealthlink.health.nsw.gov.au/

Your Health Link is a non-commercial, government funded initiative of the Mid North Coast Local Health District which, through its Strategic Plan 2012-2016, aims to improve health literacy and health outcomes in the community via initiatives aimed at increasing community access to health related information. Your Health Link is designed to assist consumers, health professionals, teachers and students in their search for information, by providing a centralised gateway to health related websites chosen by health professionals. There are a number of accessibility options on the site including free access to text to speech services to ensure equitable access to health information for members of our community who have low literacy or who have a visual impairment.

Transcultural Mental Health Centre

http://www.dhi.health.nsw.gov.au/tmhc/default.aspx/

The NSW Transcultural Mental Health Centre (TMHC) is a state wide service that was established in 1993. The TMHC's mission is to work in partnership with mental health services, consumers, carers and the community to improve the mental health of people from culturally and linguistically diverse communities living in NSW. TMHC's programs emphasise the importance of recognising and responding to cultural, linguistic and religious diversity in improving the mental health and wellbeing of people from CALD communities in NSW.

TMHC clinicians can assist in accurately assessing CALD clients and in the development of culturally appropriate treatment plans. In addition to its clinical services, TMHC develops resources and provides workforce development opportunities. TMHC's workforce development programs are designed to provide ongoing professional learning and clinical skill development to enhance the ability of mainstream services to provide appropriate care for consumers from CALD backgrounds. These can be delivered as in-service programs, specific training sessions or as clinical supervision.

Partners in Culturally Appropriate Care (PICAC) NSW and ACT

http://www.picacnsw.org.au

Partners in Culturally Appropriate Care (PICAC) NSW and ACT is funded by the Department of Social Services and is auspiced by the Multicultural Communities Council of Illawarra (MCCI). The Partners in Culturally Appropriate Care Program aims to equip aged care service providers to deliver culturally appropriate care to older people from culturally and linguistically diverse (CALD) communities. To achieve the aim of the PICAC program, the team offers a variety of free cultural resources, support and professional development. These opportunities support staff to recognise diversity, identify and resolve possible barriers CALD older people face when accessing aged care services and create cultural awareness and competence within services. PICAC NSW & ACT currently does not send any printed material or multimedia. However, their resources can be downloaded for free.

Under the Aged Care Act 1997, older people from non-English speaking (culturally and linguistically diverse) backgrounds are identified as a special needs group. As such, specific policy and programs have been designed to enhance the access of these older people to aged care services and information, as well as build capacity for aged care providers to deliver culturally appropriate care. The Partners in Culturally Appropriate Care (PICAC) Program and the Aged Care Service Improvement Grant (ACSIHAG) Culturally and Linguistically Diverse (CALD) Focus programs have been developed to assist providers in the delivery of culturally appropriate care.

Alzheimer's Australia National Cross Cultural Dementia Network

www.fightdementia.org.au/understanding-dementia/cultural-diversity.aspx/

The National Cross Cultural Dementia Network (NCCDN) was established in early 2003 and is funded under the National Dementia Support Program. Members of the NCCDN are drawn from a wide range of relevant disciplines and a variety of cultural and linguistic backgrounds. This network provides information and advocacy to Alzheimer's Australia and other non-government and government organisations regarding people from culturally and linguistically diverse backgrounds who live with dementia.

Australian Indigenous HealthInfoNet

http://www.healthinfonet.ecu.edu.au/

The Australian Indigenous HealthInfoNet is an innovative internet resource that aims to inform practice and policy in Indigenous health by making research and other knowledge readily accessible. In this way, this initiative contributes to 'closing the gap' in health between Indigenous and other Australians. The Australian Indigenous HealthInfoNet is a Level II Research Centre within Edith Cowan University (ECU), Western Australia's oldest tertiary education institution and newest university. Awarded university status in 1991, ECU is a large multi-campus institution serving communities in WA and a significant cohort of international students.

ECU's work in the area of translational research with a population health focus makes research and other information available in a form that has immediate, practical utility for practitioners and policy-makers in the area of Indigenous health, enabling them to make decisions based on the best available evidence. The Australian Indigenous HealthInfoNet also encourages and supports information-sharing among practitioners, policy-makers and others working to improve Indigenous health. The 'yarning places' (electronic networks) that are part of the initiative allow people with common interests and purposes to share information, knowledge and experience from different states, territories, regions and sectors.

The Aged-Care Rights Service (TARS)

www.tars.com.au/

The Aged-care Rights Service Inc (TARS) is a community legal centre that provides non-legal advocacy for the residents of Commonwealth-funded hostels and nursing homes and recipients of in-home aged care in NSW, legal advice and advocacy for residents of self-care retirement villages, and legal advice and information to older people in NSW. All calls to TARS are confidential. TARS can be contacted via telephone on 1800 424 079 or via the above listed website.

Legal Aid NSW Older Persons legal and education program

www.legalaid.nsw.gov.au/what-we-do/civil-law/a-service-for-older-people

The Older Persons' Legal and Education Program is a specialist service of Legal Aid NSW run in partnership with The Aged-care Rights Service (TARS). This service provides free legal information, advice and assistance to older people to promote and protect their legal rights.

SECTION EIGHT References

Anglicare. *Care to live or live to care? An insight into the experiences of ageing parent carers*. ANGLICARE Diocese of Sydney. 2010.

Australian Human Rights Commission & Equal Opportunity Commission. *Submission of the Human Rights and Equal Opportunity Commission to the House of Representatives Standing Committee on Legal and Constitutional Affairs.* Australian Human Rights Commission, Sydney. 2006.

Australian Institute of Health and Welfare. *Depression in residential aged care 2008–2012*. Aged care statistics series No. 39. Cat. no. AGE 73. Canberra: AIHW. 2013.

Bajekal, Madhavi; Blane, David; Grewal, Ini; Karlsen, Saffron; Nazroo, James. Ethnic differences in influences on quality of life at older ages: a quantitative analysis. *Ageing and Society* 24 (Sep 2004): 709-728.

Baldwin R, Chiu E, Katona C, Graham N. *Guidelines on depression in older people: Practising the evidence*. London: Martin Dunitz Ltd. 2002.

Bostock S, Steptoe A. Association between low functional health literacy and mortality in older adults: longitudinal cohort study. *BMJ.* 2012;344:e1062.

Bratter B, Freeman, E. The maturing of peer counselling. Generations. 1990;14(1):49-52.

Cattan M, Kime N, Bagnall A. The use of telephone befriending in low level support for socially isolated older people – an evaluation. *Health & Social Care in the Community*. March 2011; 19(2):198–206.

Cornish P, Church E, Callanan T, Bethune C, Robbins C, Miller R. *Telemedicine Journal and e-Health*. March 2003;9(1):63-71.

Daley S, Newton D, Slade M, Murray J, Banerjee S. Development of a framework for recovery in older people with mental disorder. *International Journal of Geriatric Psychiatry*. 2013 May;28(5):522-9.

Dear BF, Zou J B, Titov N, Lorian C, Johnston L, Spence J, Anderson T, Sachdev P, Brodaty H, Knight RG. 013). Brief internet-delivered cognitive behavioural therapy for depression: A feasibility open trial for older adults. *Australian and New Zealand Journal of Psychiatry*. 2013;47:169-176.

De Leo D, Buono M, Dwyer J. Suicide among the elderly: the long term impact of a telephone support and assessment intervention in Northern Italy. *British Journal of Psychiatry*. 2002;18:226-229.

Department of Health. Fourth National Mental Health Plan: An agenda for collaborative government action in mental health 2009–2014. Commonwealth of Australia. 2009.

Department of Health and Ageing (DoHA). *National Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Ageing and Aged Care Strategy*. Commonwealth of Australia. 2012.

Dong XQ, Chen RJ, Chang E-S, Simon M. Elder Abuse and Psychological Well-Being: A Systematic Review and Implications for Research and Policy – A Mini Review. *Gerontology* 2013;59:132–142

Dorgo S, Robinson KM, Bader J. The effectiveness of a peer mentored older adult fitness program on perceived physical, mental and social function. *Journal of the American Academy of Nurse Practitioners*. 2009;21:116-122.

Draper B. Attempted suicide in old age. International Journal of Geriatric Psychiatry. 1996;11:577-587.

Ellison S, Schetzer L, Mullins J, Perry J, Wong K. *Access to justice and legal needs, Volume 1 – The legal needs of older people in NSW.* Law and Justice Foundation of NSW, Sydney. 2004.

Friedrich D. Personal and societal intervention strategies for successful ageing. *Ageing International*. 2003;28(1):3-36.

Golding B. Older men's wellbeing through community participation in Australia. *International Journal of Men's Health*. 2011;10(1):26-44.

Gray R, Gray H & Associates Pty Ltd. *Review of the Older Persons Legal and Education Program: Report to the Chief Executive Officer Legal Aid NSW*. Sydney. 2009.

Hayes R, Williamson S. *Draft evidence-based, best-practice guidelines for Victorian men's sheds*. Office of Senior Victorians, Department of Victorian Communities. Melbourne. 2006.

Heart Foundation. Heart Foundation Walking Summary Report 2011. Heart Foundation. Adelaide SA. 2011.

Hoffman T, Bennett S, Del Mar, C. *Evidence based practice across the health professions*. Elsevier Australia. 2010.

Hosman C, Jane-Lopis E. The Evidence of Effective Interventions for Mental Health Promotion. In H. Herrman, S. Saxena & R. Moodie(Eds.) , *Promoting Mental Health: Concepts, Emerging Evidence and Practice* (pp169-188). Geneva: World Health Organisation. 2005.

Hossack, K. Nair, J & Bickerton, A. Connecting with carers through education: a guide for mental health service providers. Working with families and carers program, South Eastern Sydney Illawarra health service; NSW Health. 2010

Isaac M, Elias B, Katz LY, Belik S, Deane FP, Enns MW, Sareen J. Gatekeeper training as a preventative intervention for suicide: A systematic review. *Canadian Journal of Psychiatry*. 2009;April 54(4):260-268.

James BD, Boyle PA, Bennett JS, Bennett DA. The Impact of Health and Financial Literacy on Decision Making in Community-Based Older Adults *Gerontology*. 2012;58(6):531–539.

Jorm AF. Mental health literacy. Public knowledge and beliefs about mental disorders. *British Journal of Psychiatry*. Nov 2000;177:396-401.

Jorm AF. Mental health Literacy: empowering the community to take action for better mental health. *American Psychologist.* Apr 2012;67(3):231-243.

Jorm AF, Christenensen H, Griffiths KM. The impact of beyondblue:. The national depression initiative on the Australian public's recognition of depression and beliefs about treatments, *Australian and New Zealand Journal of Psychiatry*. 2005;39:248-254.

Jorm AF, Christensen H, Griffiths, KM. Changes in depression awareness and attitudes in Australia; The impact of beyondblue: The national depression initiative. *Australian and New Zealand Journal of Psychiatry*. 2006;40:42-46.

Kawachi I, Berkman LF. Social ties and mental health. Journal of Urban Health. Sep 2001; 78(3):458-67.

Keleher H, Armstrong R. *Evidence-based mental health promotion resource*. Report for the Department of Human Services and VicHealth, Melbourne. 2005.

Kirkpatrick R, Patchner MA. The utilization of peer counsellors for the provision of mental health services to the aged. *Clinical Gerontologist*. 1987;6(4):3-14.

Kitchener BA, Jorm AF. Mental Health First Aid training: review of evaluation studies. *Australian and New Zealand Journal of Psychiatry.* 2006;40:6-8.

Klein K, Boals A. Expressive writing can increase working memory capacity. *Journal of Experimental Psychology: General.* 2001;130:520–533.

Lazare, A. Unresolved grief. In Alazar (Ed) *Outpatient psychiatry: Diagnosis and Treatment*. Baltimore: Williams and Wilkins; 1979: 498-512 [cited in Worden JW. *Grief counseling and grief therapy: A handbook for the mental health practitioner* (4th edition) 2008.]

Levy BR, et al. Longevity increased by positive self-perceptions of aging. *Journal of Personality and Social Psychology*. Aug 2002;83(2):261-70.

Mental Health Coordinating Council (MHCC). *Care Coordination Literature Review and Discussion Paper.* MHCC, Rozelle. 2011.

Mental Health Coordinating Council (MHCC) & Aged and Community Services Association of NSW & ACT (ACS). *Mental Health of Older People: Connecting Sectors – Forum Summary Report and Recommendations*. MHCC & ACS, NSW. 2012.

Meril J, Owens L. Age and attempted suicide. Acta Psychiatrica Scandinavica. 1990;82:385-88.

Mewton L, Sachdev PS, Andrews G. A Naturalistic Study of the Acceptability and Effectiveness of Internet-Delivered Cognitive Behavioural Therapy for Psychiatric Disorders in Older Australians. *PLoS ONE*. August 2013;8(8):e71825. doi:10.1371/journal.pone.0071825

Morgan M, Hayes R, Williamson M, Ford C. Men's sheds: A community approach to promoting mental health and well-being. *International Journal of Mental Health Promotion.* 2007;9(3):50-54.

National Ageing Research Institute (NARI). beyondblue depression in older age: a scoping study. Final Report. September 2009.

NSW Health. Suicide Prevention for Older People - Training Manual. NSW Health, North Sydney. 2003.

NSW Health. *NSW community mental health strategy 2007–2012:From prevention and early intervention to recovery*. NSW Department of Health. 2008.

NSW Institute of Psychiatry (NSW IOP). Older adults: Overview of the literature. Monograph 4 in A. O'Hanlon, A. Patterson & J. Parham (Series Eds.), *Promotion, Prevention and Early Intervention for Mental Health in General Practice*. Adelaide: Australian Network for Promotion, Prevention and Early Intervention for Mental Health (Auseinet). 2007.

Nseir S, Larkey KL. Interventions for spousal bereavement in the older adult: an evidence review. *Death Studies*. 2013;37:495-512.

Pachana N. A global snapshot of mental health issues, services, and policy. *Generations 03:2013*, 7(1): 27-32.

Pagnini, D. Carer Life Course Framework: an evidence-based approach to effective carer education and support. Carers NSW 2005.

Parslow RA, Lewis VJ, Nay R. Successful aging: Development and testing of a multidimensional model using data from a large sample of older Australians. *Journal of the American Geriatrics Society*. 2011;59(11):2077-2083.

Pennebaker JW, Mayne TJ, Francis ME. Linguistic predictors of adaptive bereavement. *Journal of Personality and Social Psychology*. 1997;72:863-871.

Pirkis J. beyondblue: the national depression initiative 2000-2004 An independent evaluation report Program. The University of Melbourne. 2004.

Rao, D. V., Warburton, J. and Bartlett, H. (2006). Review article: health and social needs of older Australians from culturally and linguistically diverse backgrounds: issues and implications. *Australasian Journal on Ageing*, 25(4):174-9.

Rowe J, Kahn R. Successful Aging. New York: Random House. 1999.

Shepherd G, Boardman J, Slade M. *Making Recovery a Reality*. London: Sainsbury Centre for Mental Health. 2008.

Smyth JM, Hockemeyer JR, Tulloch H. Expressive writing and post-traumatic stress disorder: Effects on trauma symptoms, mood states, and cortisol reactivity. *British Journal of Health Psychology*. 2008;13:85–93.

Smyth J, Pennebaker JW. Sharing one's story: Translating emotional experiences into words as a coping tool. In: Snyder CR, editor. *Coping: The psychology of what works*. Oxford University Press; New York: 1999;70–89.

Smyth J, True N, Souto J. Effects of writing about traumatic experiences: The necessity for narrative structuring. *Journal of Social and Clinical Psychology*. 2001;20:161–172.

Swindell R, Mayhew C. Educating the isolated ageing: Improving the quality of life of the house-bound elderly through educational teleconferencing. *International Journal of Lifelong Education*. 1996;15:85-93.

Swindell R. U3A Online: a virtual university of the third age for isolated older people. *International Journal of Lifelong Education*. 2002;21(5):414-429.

Utz R, Caserta M, Lund D. Grief, depressive symptoms, and physical health among recently bereaved spouses. *Gerontologist*. Aug 2012; 52(4):460–471.

Victorian Department Health. *Count us in! – social inclusion for people living in residential aged care*. Victorian Government, Melbourne. 2012.

Wall S, Santalucia Y, Salem M, Giacomin D, McDonald R, Bosnjak F. *Enhancing the lives of older refugees: A self- improvement resource for community service providers*. Older Refugee Working Committee. 2011.

Watson N, Massarotto A, Caputo L, Flicker L, Beer C. e-ageing: Development and evaluation of a flexible online geriatric medicine educational resource for diverse learner. *Australasian Journal on Ageing*. Dec 2013;32(4):222–228.

Windsor TD, Burns RA, Byles JE. Age, physical functioning, and affect in midlife and older adulthood. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*. May 2013;68(3):395-9.

Yur`yev A, Leppik L, Tooding L, Sisask M, Värnik P, Wu J, Värnik A. Social inclusion affects elderly suicide mortality. *International Psychogeriatrics*. 2010; 22:1337-1343.

SHPN (MHDAO) 140397