

The University of Western Ontario  
School of Health Studies

Health Sciences HS4702B-001  
The Aging Mind

Instructor: Dr. Savundranayagam

January 2013

Email: msavund@uwo.ca

Office Room Number: HSB219

Office Hours: Thursdays, 2:00-4:00 p.m.

Course Meeting Times: Tuesday, **12:30-1:30 p.m.**, Thursday, **11:30 a.m. - 1:30 p.m.**

Location: TH-3102

### **Prerequisite Checking**

Unless you have either the requisites for this course or written special permission from your Dean to enrol in it, you may be removed from this course and it will be deleted from your record. This decision may not be appealed. You will receive no adjustment to your fees in the event that you are dropped from a course for failing to have the necessary prerequisites. Please refer to the Western's current Academic Calendar at [www.westerncalendar.uwo.ca](http://www.westerncalendar.uwo.ca).

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### **Course Information**

This course examines the complexities of aging from a psychological perspective and provides students with learning opportunities to examine psychological theories of aging, the mind-body connection, strategies to optimize cognitive vitality with advancing age, and common conditions associated with aging such as Alzheimer's Disease and other related dementias.

**Learning Outcomes:** Participation in this course will enable students to:

1. Describe the effects of aging processes on psychological functions (e.g., memory, intelligence, personality).
2. Identify implications of psychological theories about aging as they relate to practice with older adults.
3. Apply knowledge of normal age-related changes in psychological functions to create an evidence-informed presentation on healthy aging.
4. Communicate knowledge about healthy aging in a manner that is appropriate for older adults.
5. Compare patterns of normal aging with patterns of psychological dysfunction in later life.
6. Describe mental health changes that occur with normal and pathological aging.

## Course Materials

### Required Textbooks:

1. Segal, D., Qualls, S.H., & Smyer, M.A. (2011). *Aging and Mental Health* (2<sup>nd</sup> Edition). Cambridge, MA: Blackwell Publishers.
2. Selected Readings: Cavanaugh, J. C. and Blanchard-Fields, F. (2011). *Adult Development and Aging* (6th Edition). Belmont, CA.: Wadsworth.
3. Selected Readings: Schaie, K. W. & Willis, S. L. (2011). *Handbook of Psychology and Aging* (7<sup>th</sup> Edition). Boston, MA: Elsevier/Academic Press.

<b>Session: Date</b>	<b>Readings/Assignments</b>
1: Jan. 8	<p><b>Mental Health and Aging; Working with Older Adults</b></p> <ul style="list-style-type: none"> <li>• Segal et al., 2011, Ch. 1-2</li> </ul>
2: Jan. 10	<p><b>Theories &amp; Models of Adult Development and Aging: How does the study of aging proceed?</b></p> <p>Example of applying theory: Moving to a life care community: Selective Optimization with Compensation</p> <ul style="list-style-type: none"> <li>• Cavanaugh et al., chapters 1 (Studying Adult Development and Aging), 5 (Person–Environment Interactions and Optimal Aging)</li> <li>• Baltes, P.B. (1997). On the Incomplete Architecture of Human Ontogeny. <i>American Psychologist</i>, 52(4), 366-380.</li> </ul>
3: Jan. 15	<p><b>Neuroscience and Structural Changes in Brain</b></p> <ul style="list-style-type: none"> <li>• Cavanaugh et al., Chapter 2 (Neuroscience as a Basis for Adult Development and Aging)</li> </ul>
4: Jan. 17	<p><b>Memory</b></p> <p>How does memory decline with age?</p> <ul style="list-style-type: none"> <li>• Cavanaugh et al., chapter 6 (Attention and Memory)</li> <li>• Schacter, D. L. (1999). The seven sins of memory: Insights from psychology and cognitive neuroscience. <i>American Psychologist</i>, 54(3), 182-203.</li> </ul> <p><b>Reaction Question:</b> What is the most important "sin" of memory and why?</p>
5: Jan. 22	<p><b>Intelligence: How does intelligence change with age?</b></p> <ul style="list-style-type: none"> <li>• Cavanaugh et al, chapter 7 (Intelligence and Reasoning)</li> </ul> <p><b>Reaction Question:</b> Can you teach an old dog new tricks?</p> <p><b>Wisdom</b></p> <ul style="list-style-type: none"> <li>• Schaie &amp; Willis, Ch. 18 (Wisdom, Age, and Well-Being)</li> </ul>
6: Jan. 24	<p><b>Language Comprehension and Production in Normal Aging</b></p> <ul style="list-style-type: none"> <li>• Thorton, R. &amp; Light, L. L. (2006). Language Comprehension and Production in Normal Aging. In K.W. Schaie &amp; J. E. Birren (eds.), <i>Handbook of the Psychology of Aging</i>. (6<sup>th</sup> ed.). (pp. 261-288). New York: Academic Press.</li> <li>• Williams, K., Herman, R., Gajewski, B., &amp; Wilson, K. (2009). Elderspeak communication: Impact on dementia care. <i>American Journal of Alzheimer's Disease and Other Dementias</i>, 24(1), 11-20.</li> </ul>
7: Jan. 29	<p><b>Teaching Older Adults (no readings)</b></p>

8. Jan. 31	<p><b>Aging Mind: Out of the laboratory and into the social context of daily life</b></p> <ul style="list-style-type: none"> <li>• Cavanaugh et al., ch. 8 (Social Cognition)</li> </ul> <p><b>Personality:</b> What is it? Does it become set at a certain age?</p> <ul style="list-style-type: none"> <li>• Cavanaugh et al., ch 9 (Personality)</li> </ul> <p><b>Reaction Question:</b> Does personality change with age? Why or why not?</p>
9. Feb. 5	<b>Groups:</b> work on "Education Session" project
10. Feb. 7	<b>Midterm Exam</b>
11: Feb. 12	<p><b>Cognitive Interventions</b></p> <ul style="list-style-type: none"> <li>• Schaie &amp; Willis, Ch. 10</li> </ul>
12: Feb. 14	<p><b>Emotional Experience and Regulation in Later Life</b></p> <ul style="list-style-type: none"> <li>• Schaie &amp; Willis, Ch. 19</li> </ul> <p><b>Aging and the Intersection of Cognition, Motivation, and Emotion</b></p> <ul style="list-style-type: none"> <li>• Carstensen, L.L. &amp; Mikels, J. A., &amp; Mather, M. (2006). Aging and the Intersection of Cognition, Motivation, and Emotion. In K.W. Schaie &amp; J.E. Birren (eds.), <i>Handbook of the Psychology of Aging</i>. (6<sup>th</sup> ed.). (pp. 343-362). New York: Academic Press.</li> <li>• Carstensen, L. L., Isaacowitz, D. M. &amp; Charles, S. T. (1999). Taking time seriously: A theory of socioemotional selectivity. <i>American Psychologist</i> 54, (3): 165-181</li> </ul>
13: Feb. 19	Reading Week
14: Feb. 21	Reading Week
15: Feb. 26	Group Presentations (2 presentations)
16: Feb. 28	Group Presentations (5 presentations)
17: March 5	Group Presentations (2 presentations)
18: March 7	Group Presentations (5 presentations)
19: March 12	<p><b>Models of mental health &amp; Illness</b></p> <ul style="list-style-type: none"> <li>• Cavanaugh et al., chapter 4 p357-367 (Clinical Assessment, Mental Health, and Mental Disorders)</li> <li>• Segal et al., - chapter 3 (Psychodynamic Model)</li> <li>• Segal et al., - chapter 4 (Cognitive-Behavioral Model)</li> </ul> <p><b>Reaction Question:</b> Is mental illness part of normal aging?</p>
20: March 14	<p><b>Models of mental health &amp; Illness (con't)</b></p> <ul style="list-style-type: none"> <li>• Segal et al., - chapter 5 (Stress and Coping)</li> </ul> <p>Segal et al., - chapter 6 (Family Systems) and Summary/Commentary</p>
21: March 19	<p><b>Cognitive Impairment</b></p> <p>How do we differentiate normal memory changes from Alzheimer's?</p> <ul style="list-style-type: none"> <li>• Segal et al., chapter 7 (Cognitive Impairment)</li> </ul> <p><b>Reaction Question:</b> Will we all become demented if we live long enough?</p>
22: March 21	<p><b>Cognitive Impairment (con't)</b></p> <p>Assessment: How to distinguishing depression and dementia? Assessment tools for dementia</p> <p>Documentary (The Memory Loss Tapes): Discussion</p>

23: March 26	<p><b>Depression and Suicide</b></p> <p>“If you were this old, wouldn't you be depressed?”</p> <ul style="list-style-type: none"> <li>• Segal et al., chapter 8 (Depression)</li> <li>• Blazer, D. (2010). The origins of late-life depression. <i>Psychiatric Annals</i>, 40(1), 13-18.</li> </ul> <p><b>Case Study: Interview (Screening for Depression) and Discussion</b></p> <p><b>Reaction Question:</b> What would you recommend for an older person who is depressed? Why?</p>
24: March 28	<p><b>Depression (con't)</b></p> <p>Bereavement</p> <p>Suicide among older adults</p> <p><b>Case Study: Interview and Discussion</b></p>
25: April 2	<p><b>Other Disorders and Difficulties</b></p> <ul style="list-style-type: none"> <li>• Do anxiety disorders and personality disorders get better with age?</li> <li>• Bipolar Disorder</li> <li>• Segal et al., chapter 10 (Anxiety, p 178-187)</li> <li>• Segal et al., chapter 11 (Personality disorders, p 207-215)</li> </ul>
26: April 4	<p><b>Serious Mental Illness</b></p> <p>Does chronic mental illness mellow with age?</p> <p>And what should we do with the seriously mentally ill?</p> <p><b>Required Readings:</b></p> <p>Segal et al., chapter 9 (Severe Mental Disorders)</p>
27: April 9	<p><b>Creativity and Aging</b></p> <ul style="list-style-type: none"> <li>• Miller, W. &amp; Cohen, G. D. (2010). On creativity, illness, and aging. <i>Journal of Aging, Humanity, &amp; the Arts</i>, 4, 302–311.</li> </ul> <p><b>Decision Making and Competence</b></p> <p>Schaie &amp; Willis, Ch. 24 (Decision Making Capacity)</p> <p>Review</p>

### Evaluation

Class attendance is mandatory. The midterm and final exams will be comprised of multiple choice, true/false, and/or short answer questions. The content of examinations will be facilitated through lecture material and assigned readings.

Midterm examination = 35% (Feb. 7, 2013; content up to session 8 will be on the exam)

Class Project/Presentation = 25% (scheduled b/t Feb. 28 to March 7, 2013)

Final Examination = 40% (to be scheduled between April 13-30, 2013; content from sessions 15-27 will be on the exam)

Note: Examinations must be taken on the day and time they are scheduled unless other arrangements are made due to health reasons that can be fully documented according to the requirement of the School of Health Sciences program and the University of Western Ontario. If

an examination is missed without appropriate documentation as required, no make-up examination will be offered and the student will forfeit that portion of the exam weighting. All approvals for make-up exams must be processed through the School of Health Studies; once approved, they will notify the instructor as to whether a make-up exam is to be scheduled.

**Student Inquiries:** Students may contact the instructor after class or via email at msavund@uwo.ca. Please include “HS 4702B” in the email subject line. It is expected that email communication will be used respectfully and judiciously.

#### Statement on Use of Electronic Devices

No electronic devices will be allowed during tests and examinations, with the exception of a computer for online tests/exams. For final exams, use of communication equipment (e.g., cell phones) is prohibited.

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### **ADDITIONAL STATEMENTS**

#### **Student Code of Conduct**

The purpose of the Code of Student Conduct is to define the general standard of conduct expected of students registered at The University of Western Ontario, provide examples of behaviour that constitutes a breach of this standard of conduct, provide examples of sanctions that may be imposed, and set out the disciplinary procedures that the University will follow. For more information, visit <http://www.uwo.ca/univsec/board/code.pdf>.

#### **English Proficiency for the Assignment of Grades**

Visit the website <http://www.uwo.ca/univsec/handbook/exam/english.pdf>.

#### **Accommodation for Medical Illness or Non-Medical Absences**

[http://www.uwo.ca/univsec/handbook/appeals/accommodation\\_medical.pdf](http://www.uwo.ca/univsec/handbook/appeals/accommodation_medical.pdf)

The University recognizes that a student’s ability to meet his/her academic responsibilities may, on occasion, be impaired by medical illness. Illness may be acute (short term), or it may be chronic (long term), or chronic with acute episodes. The University further recognizes that medical situations are deeply personal and respects the need for privacy and confidentiality in these matters. However, in order to ensure fairness and consistency for all students, academic accommodation for work representing 10% or more of the student’s overall grade in the course shall be granted only in those cases where there is documentation indicating that the student was seriously affected by illness and could not reasonably be expected to meet his/her academic responsibilities.

A UWO Student Medical Certificate (SMC) is required where a student is seeking academic accommodation. This documentation should be obtained at the time of the initial consultation

with the physician or walk-in clinic. An SMC can be downloaded under the Medical Documentation heading of the following website:  
<https://studentservices.uwo.ca/secure/index.cfm>.

Documentation is required for non-medical absences where the course work missed is more than 10% of the overall grade. Students may contact their Faculty Academic Counselling Office for what documentation is needed.

Whenever possible, students who require academic accommodation should provide notification and documentation in advance of due dates, examinations, etc. Students must follow up with their professors and their Academic Counselling office in a timely manner. Documentation for any request for accommodation shall be submitted, as soon as possible, to the appropriate Academic Counselling Office of the student's Faculty of registration. For BHSc students, you may go to the School of Health Studies Office in HSB room 222.

### **Scholastic Offences**

Scholastic offences are taken seriously and students are directed to read the appropriate policy, specifically, the definition of what constitutes a Scholastic Offence, at the following website:  
[http://www.uwo.ca/univsec/handbook/appeals/scholastic\\_discipline\\_undergrad.pdf](http://www.uwo.ca/univsec/handbook/appeals/scholastic_discipline_undergrad.pdf) .

Additionally,

1. All required papers may be subject to submission for textual similarity review to the commercial plagiarism detection software under license to the University for the detection of plagiarism. All papers submitted for such checking will be included as source documents in the reference database for the purpose of detecting plagiarism of papers subsequently submitted to the system. Use of the service is subject to the licensing agreement, currently between The University of Western Ontario and Turnitin.com (<http://www.turnitin.com> ).
2. Computer-marked multiple-choice tests and/or exams may be subject to submission for similarity review by software that will check for unusual coincidences in answer patterns that may indicate cheating.

### **Support Services**

There are various support services around campus and these include, but are not limited to:

1. Student Development Centre -- <http://www.sdc.uwo.ca/ssd/>
2. Student Health -- <http://www.shs.uwo.ca/student/studenthealthservices.html>
3. Registrar's Office -- <http://www.registrar.uwo.ca/>
4. Ombuds Office -- <http://www.uwo.ca/ombuds/>

## Appendix A

### Class Project/Presentation (25% of grade)

You have been asked by the director of a local senior center to help her formulate and design a “Healthy Aging” educational program for the membership. There are 150 seniors who come to the center on a regular basis, but on any given day, there are usually about 60 or 70. Most come to take advantage of the lunch program at the center. Most will leave between 2:00 – 3:00 p.m.

The seniors are relatively healthy and can ambulate on their own to get to the center. Nevertheless, they have their share of chronic diseases and sensory impairments. They have a special day program for those members who have early stage dementia or who are in wheelchairs. The general membership on occasion has protested having to interact with their more confused, disabled peers.

The center director has shared with you that the well seniors are concerned about staying well and remaining independent for as long as possible. They worry about being a burden to their families and/or having to leave their homes.

With the members of your small group (3-4 students), create an educational session on “Healthy Aging”. In your session, address the following questions based on your understanding of relevant content in 4702 (e.g., learning, memory, intelligence, specific educational needs of older adults, etc.). Your participation during all presentations will be part of the project grade.

1. How will you assess the learning needs of this population in order to select topics that are meaningful to this group of seniors?
2. When and where would you hold the educational session? How long will it be?
3. Identify a topic for your educational session that meets the criteria of helping seniors stay healthy and independent for as long as possible. Then identify the three most important “need to know” learning points you would like to get across.
4. What interactive learning activities would you use to engage seniors without lecturing at them?
5. What visuals would you use to support your presentation and to help seniors’ learning retention?
6. What would you do to make learning fun?

25% of grade; Due on Owl/Sakai 24 hours prior to presentation time.

Each group will prepare a **20-minute “educational session” on healthy aging.**

**Target audience:** older adults in senior center. The goals of presentations are to show that you can integrate key course concepts, use the course concepts in a real-life application, and present the material concisely and creative manner. Options include video clips, case scenarios, handouts, etc. If you require audiovisual equipment, please let me know **one week in advance** so that I can make the arrangements. Peer evaluations are part of the grade.

### Grading scheme for the presentation

- \_\_\_\_\_ 1. Did you assess learners' needs to determine learning objective?
- \_\_\_\_\_ 2. Does your educational design reflect "need to know" rather than "nice to know" material?
- \_\_\_\_\_ 3. Have you adapted your materials and approach to address the memory, visual and hearing changes, information processing changes, and external factors that influence the older adult's ability to learn?
- \_\_\_\_\_ 4. Is your design problem-centered rather than subject-centered?
- \_\_\_\_\_ 5. Does your design allow for and expect learners to take an active role in their own learning?
- \_\_\_\_\_ 6. Have you addressed all three domains of learning (cognitive, affective, and practical) as they apply to your topic? Integrated course content into presentation.
- \_\_\_\_\_ 7. Does your design employ a variety of educational techniques besides lecture?
- \_\_\_\_\_ 8. Are your materials at the 5<sup>th</sup> to 8<sup>th</sup> grade reading level?
- \_\_\_\_\_ 9. Have you made it easier for learners to learn by providing handouts that summarize your learning points or guide note taking?
- \_\_\_\_\_ 10. Are all your visuals visible and readable by an older adult population?
- \_\_\_\_\_ 11. Have you considered how to make the learning climate informal, respectful, and collaborative?
- \_\_\_\_\_ 12. Have you considered the need to involve family/informal/formal caregivers in the learning process?
- \_\_\_\_\_ 13. Have you made learning fun?
- \_\_\_\_\_ 14. Presented information in logical, interesting sequence which audience could follow.
- \_\_\_\_\_ 15. Answered class questions with explanations and elaboration.
- \_\_\_\_\_ 16. Overall delivery (maintained eye contact with audience, used clear voice, did not rely heavily on notes, stuck to the time limit)