

NWRPA Newsletter May 2019
Ageing and ageism in the therapy room
Alessandra Merizzi
Friday 10 May 2019

Summary by Frank Kelley

Alessandra Merizzi made the difficult seem easy by structuring her presentation as a continuing discussion. This allowed us a deeper involvement in the themes of ageing and ageism.

Alessandra is a Gestalt Psychotherapist at the Manchester Gestalt Centre and a Clinical Psychologist at the Memory Assessment and Treatment Service in Oldham. For further information please see her website at:
<https://www.merizzi-psychotherapy.com>

She is planning a one day workshop on ageing and ageing stereotypes in the therapy room on Sunday 15th September at the Manchester Gestalt Centre. You can also contact her about clinical supervision including consultation.

Alessandra began by asking why we came to this seminar. Many of us work with older people. However we did share the experience of older clients being stigmatized by Mental Health Services. They are often referred to NHS services for older people rather than the mainstream services where most psychological therapists work.

GPs are more likely to prescribe medication than refer for therapy. There may also be a generational difference as the pre-baby boomers are less likely to seek therapy. This whole process tends to undermine the confidence of elderly people and foster dependence. This can reinforce the idea that old age is a second childhood, particularly where dementia might be present. There is a stereotype that old age consists solely of disabilities.

A realistic view of old age comes from the Psychologist Erik Erikson. He has the idea that each stage of life has a characteristic psychosocial crisis. In the last stage we can see our lives as unproductive, feel guilt about our past, or feel that we did not accomplish our life goal. We become dissatisfied with life and develop despair, often leading to depression and hopelessness.

Wisdom is the hard won virtue of successfully negotiating this crisis. This enables a person to look back on their life with a sense of closure and completeness, and also accept death without fear. Wise people are not characterized by a continuous state of ego integrity, but they experience both ego integrity and despair. Thus, late life is characterized by both integrity and despair as alternating states that need to be balanced.

The later stages of life give a greater sense of impermanence.

Alessandra was particularly concerned about the self fulfilling prophecies that flow out of false definitions of ageing. Elderly people and their family, friends and professional may act on these beliefs in a self reinforcing cycle.

A classic example is forgetfulness. It may genuinely be due to the aging process. Often it is more of a social process. An older person may be no more or less forgetful than others. However their lapses in memory may be treated by themselves and others as a sign of disability requiring help. For example an elderly woman forgets to phone her daughter. The daughter believes this is a change due to aging and starts to regularly phone to check her mother has remembered to carry out her daily tasks. Both Mother and Daughter are both now believing and acting quite differently. This continually reinforces the idea of ageing bringing memory loss.

These beliefs will come from general social beliefs. They will also come from our lived experience. We grow up seeing how elderly people are treated in our family and community. In particular we see how our parents treat their parents.

These dynamics can enter the therapy room. Elderly people can believe their issues are due to age and nothing can be done There can be a bewitching effect where the therapist accepts this leading to a therapeutic impasse. Bob Knight thinks that therapists interrupt older clients more and are more likely to end therapy than they would with younger clients.

This effect can also come into the transference, countertransference and the dynamics of supervision. It may seem helpful for older clients to see older therapists. However therapists are also affected by their own good and bad experiences of ageing and the grief of their impending loss of a working life and mortality.

Thank you to Alessandra Merizzi for a very engaging and thought provoking exploration of ageing and ageism in the therapy room. On a personal note can I add that her discussions helped me to reflect on my own ageing.

If you want to know more here is a reading list suggested by Alessandra.

Becca Levy – ageing stereotypes journal articles.

Bob Knight:

- CALTAP model (discussed journal articles and book chapters);
- book chapter 'Clinical supervision for psychotherapy with older adults' - in Pachana, N., Laidlaw, K., & Knight, B. (Eds.), Casebook of Clinical Geropsychology: International Perspectives on Practice (pp. 107-117).

<http://oxfordmedicine.com/view/10.1093/med/9780199583553.001.0001/med-9780199583553>

Peake & Philpot (1992) – 'Chapter 9: Psychotherapy with older adults'

http://dx.doi.org/10.1300/J001v09n01_09

Handbook of the Clinical Psychology of Ageing (**Bob Woods & Linda Clare Eds., 2008, 2nd edition**)

Being with older people: A systemic approach (Fredman, Anderson & Stott Eds., 2010)

. . . and finally, from The Love Song of J. Alfred Prufrock by T.S. Eliot.
I grow old... I grow old... I shall wear the bottoms of my trousers rolled.