

**FORMING WORK SKILLS AND ABILITIES
THROUGH AN EDUCATIONAL CURRICULUM
TAILORED TO GERONTOLOGICAL SOCIAL WORK
INTERVENTION IN ALZHEIMER DESEASE¹¹**

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Abstract: The purpose of this theses is to identify and describe the present situation regarding the intervention of social work in the specific work with people who suffer from Alzheimer dementia, on one side, and on the other side to indentify the necessary needs of the curriculum in training the social workers who will work with elderly people as well as with people with Alzheimer dementia and their relatives.

Considering it is a current social issue I will make an inventory of the methods and working technics which are necessary in the work of the social worker with these social categories, creating in this way an understanding (of the pacient and it's relatives) as they are found at the base of the acquisitions of the social work skills in Romania, as well as on the international level, as a result of the educational process of traing on the university level.

The study conducted in the west of Romania, in the Arad county, Timisoara and Hunedoara, used the method of basic survey, evaluation of the educational curriculum of the program of study for social work on a sample of 100 participants (40 relatives, 27 specialists, 33 students - years I, II, III in social work studies) of the University "

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Vasile Goldis " in Arad as well as in the 9 day centers, residential centers identified in the three counties, in the work with people suffering from dementia.

The result of the study skores on one side the needs of a personalized intervention in the work with people suffering from dementia and with their relatives and the importance of family support for prevention of institutionalized abandonment, but especially the need of gerontological specialists in social work offered by those in the social work area, through an adaptat/ tailored curriculum to intervention in this non- contoured social category.

Key words: curriculum, Alzheimer dementia, systemic approach, work skills and technics, social gerontology.

1. Introduction

Taking into account the difficulty of an exact diagnostic, the geriatric assessment should represent a multidimensional, multidisciplinary approach, designed to evaluate an older person's physical and mental health, as well as socioenvironmental circumstances. All of these are relevant for the correct diagnosis and for the process of identifying the adequate strategies for prevention, treatment and rehabilitation. Clinical gerontology represents the biology and pathology of getting old, incorporating both gerontology and geriatrics(Hurjoi, 2004). In treating patients with Alzheimer dementia, social intervention is as important as medical treatment, due to the fact that humans are essentially social beings and any form of intervention must be holistic and include the social dimension. This implies defining the needs and existing problems and develop adequate and integrated strategies for problem solving. Today, gerontological social work represents all the professional activities for elderly people, aimed at assisting them in improving and increasing the quality of life (Stanciu, 2008).

In this context, the social worker has to possess a strong set of values and moral standards, as well as skills and abilities suited for the specific needs of this group. He must represent their rights and interests, offering the necessary support, but also respecting them as individuals with special needs and a voice of their own.

The intervention for elderly people with Alzheimer dementia follows the same procedure as the services provided in gerontology, but the individual needs differ significantly (Morcan, 2012). Specifically, the social worker must adopt an ecosystem approach, which allows him to focus on identifying resources best suited to the assessed needs

(Coulshed, 1993) and on facilitating the adjustment process between man and environment. Searching for the causes of the problem represents a waste of time and resources, without any positive consequence for intervention or treatment.

In order to provide the best services for this category of patients, the social work should be aimed towards three directions of intervention (Morcan, Tranca, 2012). First, the accurate identification of these clients is essential for developing individualised intervention models for their needs. Second, the social worker must facilitate and offer support services and access to resources, help to identify solutions for problems, as well as monitor the progress of the client during intervention. Third, but not last, the social worker must be involved in creating and implementing strategies for the development of social services for people with mental illnesses, based on the needs of patients and their caregivers.

This multilevel approach can be implemented only by highly trained professionals, which underlines the importance of a university curricula adapted to the specific domain of gerontological social work.

Family assessment must include basic demographic data, educational and occupational background. The genogram contains relevant information regarding name, age, health, the relationship and the frequency of contact with the person with Alzheimer dementia or with other family members. Other important information refers to the description of the problem, onset, and previous case management of the illness and so on. By using the Vickery method and presenting the information to the family, the social worker can help them clarify and establish the goals, monitor the existing change and identify problems or challenging situations from their family background.

2. Methodology

2.1 The Research Objective

In this study we aimed to identify and describe the present situation regarding the intervention of social work in the specific work with people who suffer from Alzheimer dementia, on one side, and on the other side to test the effectiveness of the university curricula regarding the gerontology domain by assessing the level of knowledge and skills of students enrolled at the Social Work department, UVVG Arad.

2.2 Hypothesis

- The lack of appropriate preparation of the specialists at Gerontological Social Work department, can determine the decrease of the number of concrete actions meant to improve and

to protect the life of people with Alzheimer dementia, as well as the prospective of reducing the inequalities regarding the health status of these people and of their relatives, in the studied zone;

- We assume that applying the lobby and advocacy policies shall determine the increase of the awareness of the population regarding Alzheimer dementia, seen as a stand-alone syndrome as well as a part of the mental health domain ;
- If the adapted educational curriculum for the Social Work department level thesis will take into consideration the formation of specialists through the development of skills and working techniques specific for the Gerontological Social Work department, then we shall be able to intervene by increasing the quality of life for both the person suffering from Alzheimer dementia and the relatives.

2.3 Variables

In order to test our hypothesis we used a correlation with the following variables: the family functionality (conduct, emotional, cognitive and social disorders of families). Also, in order to test the efficiency of the university curricula, we assessed the knowledge and skills level of students enrolled at the Social Work department, UVVG Arad.

2.4 Participants

The study was conducted in Arad, Timisoara and Hunedoara. For the first study, we involved a sample of 40 caregivers of patients with Alzheimer dementia, which were treated in 9 day centres and residential centres from the three counties, specialised in the work with people suffering from dementia.

The second study involved a sample of 60 people (27 specialists in social work and 33 students enrolled at the University "Vasile Goldiş" in Arad, the Social Work department - years I, II, III).

2.5 Instruments

For the assessment of depressive symptoms, we applied the Beck Depression Inventory. For measuring the other variables, we developed three questionnaires: one for assessing the community perception of the general characteristics of Alzheimer dementia, one for identifying the activities of specialists working in care centres for patients with Alzheimer dementia (20 questions with open and closed answers) and one for evaluating the level of knowledge and skills of university students.

2.6 Procedure

For the first hypothesis we used a descriptive design, with the following variables: the level of knowledge regarding public health policy, new directions for government programs better adapted to the characteristics of Alzheimer dementia, the positive or negative perception of developing social services for patients with Alzheimer dementia and their caregivers, as well as the perceived functionality of social services provided to patients with Alzheimer dementia.

For the assessment of the level of knowledge developed on the basis of existing university curricula, we developed and applied a questionnaire. The results can offer a perspective on the current situation of the training level of students enrolled in the courses at the Social Work department and the degree to which they respond to the real needs of patients with Alzheimer dementia and their caregivers.

The research also used observation methods, structured interviews and questionnaires.

3. Results

In order to test the hypothesis, we statistically analyzed item 8 of the general questionnaire regarding Alzheimer dementia. This item refers to the public health policies known in the general population. The results were the following: 89% of the respondents (122 people) gave a negative answer, meaning that they didn't know any public health policy regarding people with Alzheimer dementia and only 11% (15 people) gave a positive answer.

We used the statistical test chi-square in order to test the significance of the results. The value obtained ($\chi^2 = 0,983$, $p = 0,005$) suggests that only 11% of the general population are aware and have knowledge about the existing public health policies designed for people with Alzheimer dementia and their caregivers. The answers included the mention of mental health laboratories, the Memory Centre, the existence of residential centres for people with Alzheimer dementia, media campaigns for public awareness, community centres and so on.

For the second hypothesis, item 14 from the specific questionnaires for specialists and caregivers is very important and it refers to the direction that the governmental programmes should go in order to be more adequate to the needs associated with Alzheimer dementia. Taking into account that the respondents are confronted daily with the problems and difficulties associated with Alzheimer dementia and know the problems very well, we could classify the most needed governmental programmes in the community and the residential centres. The most important program would be home care services for patients

and caregivers, followed closely by the development of service centres, as an alternative to home care. Also, an important dimension would be the development of good practice models regarding the relationship with patients and caregivers, as well as implementing governmental programmes for educating and training caregivers, so they can stimulate and support the long term autonomy of the people with Alzheimer dementia, by focusing on their strengths, not their weaknesses. So the hypothesis regarding the need to apply the lobby and advocacy policies it is maintained, a fact that shall determine an increase of the level of awareness of the population regarding Alzheimer dementia, seen as a stand-alone syndrome as well as a part of the mental health domain. Using the statistical test chi-square, we tested the significance of the results and the value obtained ($\chi^2 = 8,212$, $p = 0,00$) indicated significant differences between the responses.

Regarding the positive aspects associated with the development of social services for people with Alzheimer dementia, for caregivers and for specialists working in this domain (item 15 from the specific questionnaires for specialists and caregivers), 92% of the respondents gave a negative answer.

From the point of view of the community perception of public health services in the three counties, the positive aspects associated with specific actions in this domain were poorly represented. The same percent was registered also regarding the positive aspects which can support the development of social services for people with Alzheimer dementia and their caregivers, with 92% of the answers being negative. The few positive aspects mentioned are undermined by the lack of structure at a national level and the discriminating management, in contrast with other European countries. In this context, the few funds allocated to this health segment, the lack of community services, the bureaucracy, the attitude of marginalization and the lack of interest adopted by officials, all contribute and nourish the negative perception of people with Alzheimer dementia, which spreads to every aspect of their life.

All the results indicate the weak representation of the positive aspects associated with specific actions in the domain of Alzheimer dementia.

The results of the questionnaires applied to evaluate the level of assimilated knowledge during the three years of study, level thesis, at the Social Work department, indicate a rather low level of training, with the value of over 65% of specific gerontological knowledge, in conformity with the present educational curricula. The level of knowledge provided at the Social Work department, has proved not to be sufficiently adapted

to the gerontological intervention, in general, nor to the intervention in the case of Alzheimer dementia in particular.

The adaptation to the content is possible by consulting the legislation in force, the job responsibilities of the social worker that works with the person suffering from dementia or the relatives; respectively by creating some educational offers, degree type, specialised in supporting counselling in the respiro centers for the caregivers.

4. Discussions

In the era of “social psychiatry”, the patient is approached as a whole system, a “bio-psycho- social being” (Dr. I. Cucu). From this point of view, a new profile of the psychiatric social worker should be derived, who could assume part of the responsibilities of the psychiatrist, by offering professional social assistance in a hospitalised environment, in the community, but most of all in the person’s home, as a way of prevention, support and intervention.

The social worker must intervene in the rehabilitation process, as a link between the person and the existing services, while ensuring that the person has the possibility to work, to establish a relationship with the community, to act and decide on his own, to benefit from a secure family environment. All of these are important so the person with Alzheimer dementia can receive support, but at the same time feel confident to act in an independent manner. To attain this objective, the social worker offers counselling services and intervenes in the person’s environment and contact, being able to offer a psycho-social response in a nondirective and no manipulative manner.

The new approach of social intervention in psychiatry evolved from “the sufferance of a social organism”, the way it was defined in the first forms of institutionalised intervention, with a strong religious character, towards “the social being created by society”, a concept which emerged at same time with a new science – anthropology.

Although the university curricula of social work departments introduced new disciplines, like psychiatry, psychopathology, and criminology and so on, we cannot assume the students are really trained in psychiatry related aspects. The social policies should focus on introducing a new dimension of training in social work, from the point of view of psychiatry. The action plan developed for the reform of mental health is based on the idea of improving mental health care services and has clear short and long term objectives. But the human resources section of the action plan doesn’t include the necessity of hiring more social workers, so, in reality, the link between the mental health system and the social services in week and, most of the time, unproductive.

An efficient public health policy in Romania should be based on training specialists in working with persons with Alzheimer dementia, in geriatric assistance centres: professionals trained in psycho geriatrics, medical staff, social workers, psychologists, occupational therapists and operators.

5. Conclusions

The direct contact with the client can reveal important facts about his interaction with others, as well as his strengths and difficulties in communication. At the community level, a successful family intervention for a patient with Alzheimer dementia involves team work. This means establishing specific objectives, with the same meaning for all family members, otherwise the results can be catastrophic. (Kirst, Grafton, Hull, 2001).

Ch. Zastrow referred to the social worker's "intuition", based on fact that they must develop the capacity of "reading" beyond the image presented by the client, mostly in a concealed manner.(Zastrow, 1998)

In the general practice, the most representative model is the interlock between individual intervention (micro) and community intervention (macro). Social work policies must reconsider the approach of patients with Alzheimer dementia and their caregivers, by offering individualized services, which go beyond the diagnosis and focus on the real needs. At the same time, a new course of action should be aimed towards establishing a distinct legislation for Alzheimer dementia and adequate services and facilities for people affected by this illness.

The current trend is to transfer the responsibility of care from institutions into the community and the family, but long term care in a specialized institution remains a necessary solution, required by the demographic aging of population and the increase (Ory, Hoffman, Sanner, 2003) of severely disabled people, which depend on constant care.

In this context, the image and role of the social worker as a specialist in gerontological social work remains the only hope and support for increasing the quality of life of patients with Alzheimer dementia and their caregivers, but also underlines the importance of specialized (Revista Română de Sănătate Mintală, 2007) training (Buzducea, 2009) in this field.

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References:

- Buzducea, D.,(2009), *Sisteme moderne de asistență socială. Tendințe globale și practici locale*, Editura Polirom, Bucuresti
- Coulshed,V., (1993), *Practica asistenței sociale*, Editura Alternative, București
- Hurjoi, I., (2004), *Compendiu de geriatrie*, Editura Alfa, Iasi
- Kirst, K.K., Grafton, A., Hull, H., Jr., (2001), *Macro Skills Workbook, A generalist approach*, Second Edition, F.E.Peacock Publishers, Inc.Hasca, Wadsworth, Illinois
- Morcan, O., Trancă, L., (2012), Model de bună practică în intervenția în demența Alzheimer. Centru respiro pentru aparținători, în Gal, D., (coord.) *Îngrijirea vârstnicului: Studii și modele de bune practici*, Casa Cărții de Știință, Cluj-Napoca, pp.145-162
- Morcan,O., (2012), *Alzheimer: bolnav, familie,societate: intervenție asistențială*, Editura ProUniversitaria, Bucuresti
- Ory, M., Hoffman, M., Hawkins, K., Sanner, M., (2003), Challenging Aging Stereotypes for Creating a More Active Society, *American Journal of Preventive Medicine*
- Stanciu, C., (2008), *Noțiuni introductive în asistență socială gerontologică*, Editura Solness, Timișoara
- Zastrow, Ch., (1998). *The practice of social work*, Sixth Edition, Books, Cole Publishing Company
- *** (2007), Dosar: Psihogeriatrie, *Revista Română de Sănătate Mintală*, Vol.16, Nr.2, pp.1-68.