

# Barriers to Mental Health for Rural Seniors: *“I don’t think I’ll ever get better”*

Presentation for the  
Canadian Rural Health Research Society (CRHRS)  
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Levi, Quebec

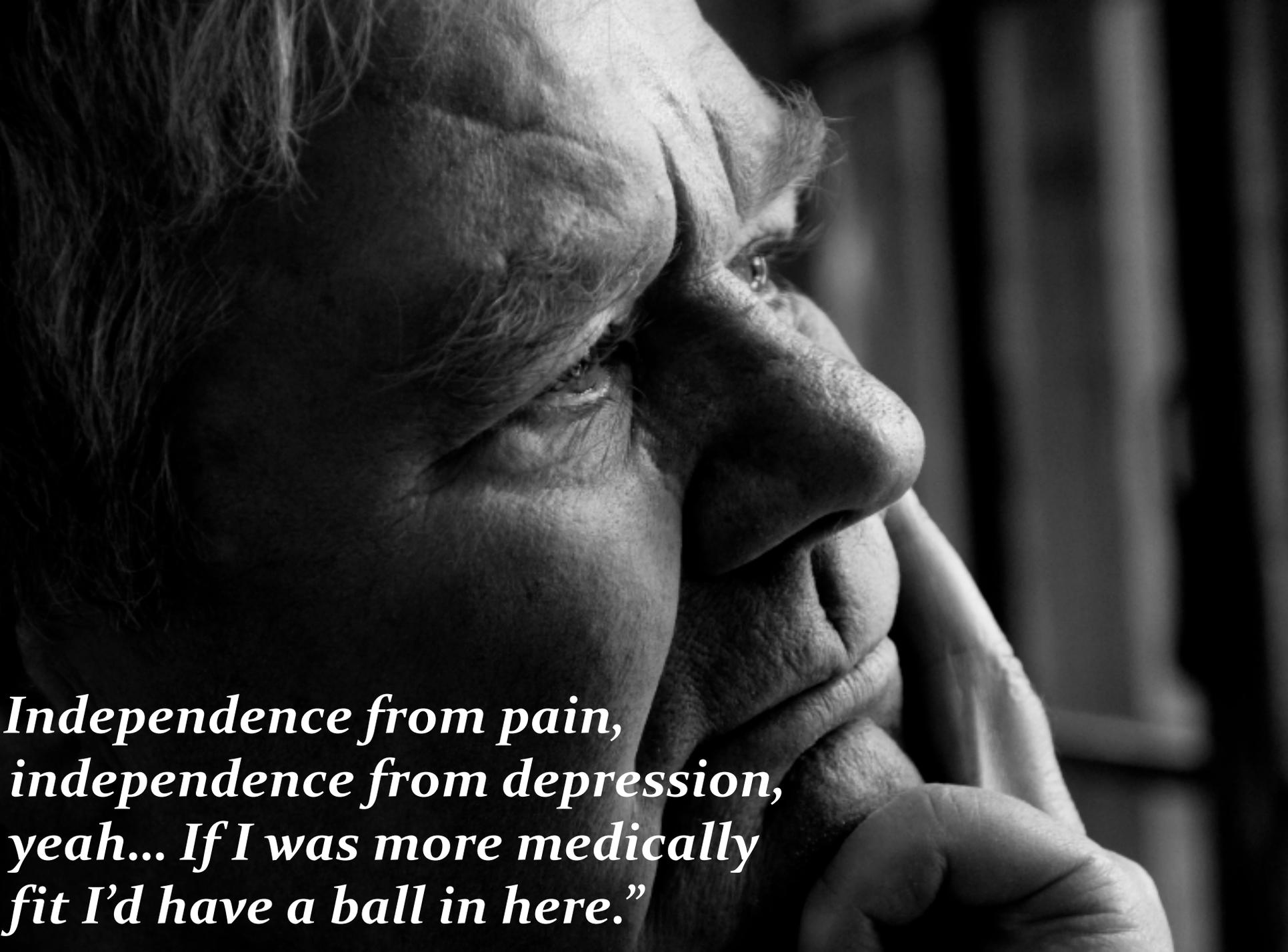
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We would like to acknowledge our funders  
for their contributions and support.



A black and white close-up photograph of a man's face in profile, looking towards the right. He has a thoughtful or pensive expression, with his hand resting against his chin. The lighting is dramatic, highlighting the contours of his face and the texture of his skin. The background is blurred, suggesting an indoor setting with vertical elements like a window blind.

*Independence from pain,  
independence from depression,  
yeah... If I was more medically  
fit I'd have a ball in here."*

# Presentation Overview

- Research Objectives
- Theoretical Framework
- Background and Methods
- Findings
- Next Steps

# Research Objectives

1. To address gaps in our understanding of the health service needs of seniors living in rural communities
2. To identify the interventions that enable rural seniors to stay independent and remain in their homes and communities longer .
  - This presentation will focus on the findings related to mental health

# Theoretical Framework

## Cantor's Social Care Model

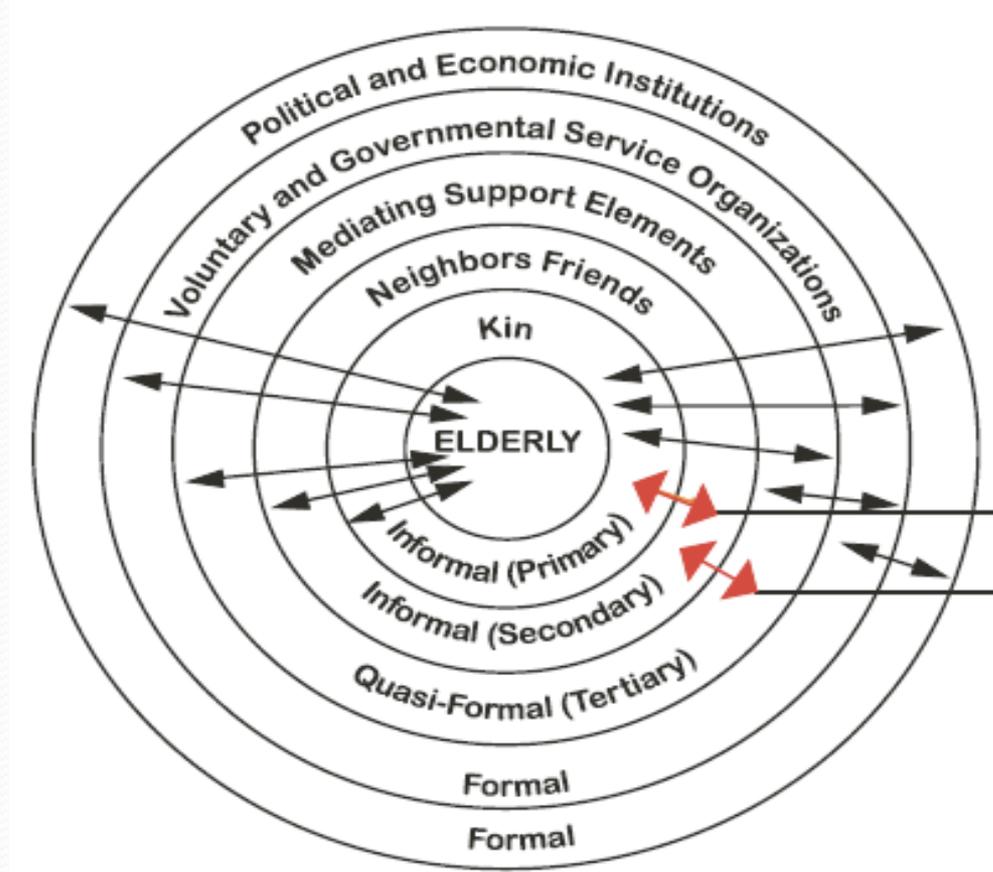


Image from J. Sims-Gould and A. Martin-Matthews, Family Caregiving or Caregiving Alone: Who Helps the Helper? 2007, Canadian Journal of Aging, 26(1), 27-46, originally adapted from M.J. Cantor, Family and Community: Changing Roles in an Aging Society, 1991, Gerontologist, 31(3), 337-346.



# Research Background & Methods

- 2009- 2010 - Pilot study conducted 42 interviews with seniors in rural towns of Watrous and Preeceville, SK, to test theoretical framework and research instrument.
- 2011-2014 – Longitudinal study with approximately 40 interviews every six months with seniors in rural towns of Watrous and Wolseley to follow changing needs of older adults over the aging process.
- This presentation will highlight key mental health findings that were shared in both the pilot study and the longitudinal study.



# Methods - Role of Interviewer

- Interviewer's relationship to the participant may influence participant responses.
- Participants interviewed by a community member more willing to share personal reflections.
- Respondents less willing to share information until trust established with the research interviewer.
  - Trust established over time and multiple meetings.
  - In the longitudinal study, interviews are being conducted every 6 months over a 3 year period.
  - After the first year of interviews, participants shared more personal information and became more candid in their reflections and responses.

# Findings

Five key themes were identified in relation to mental health:

- 1) Isolation
- 2) Mobility
- 3) Gender
- 4) Spousal Health
- 5) Finances



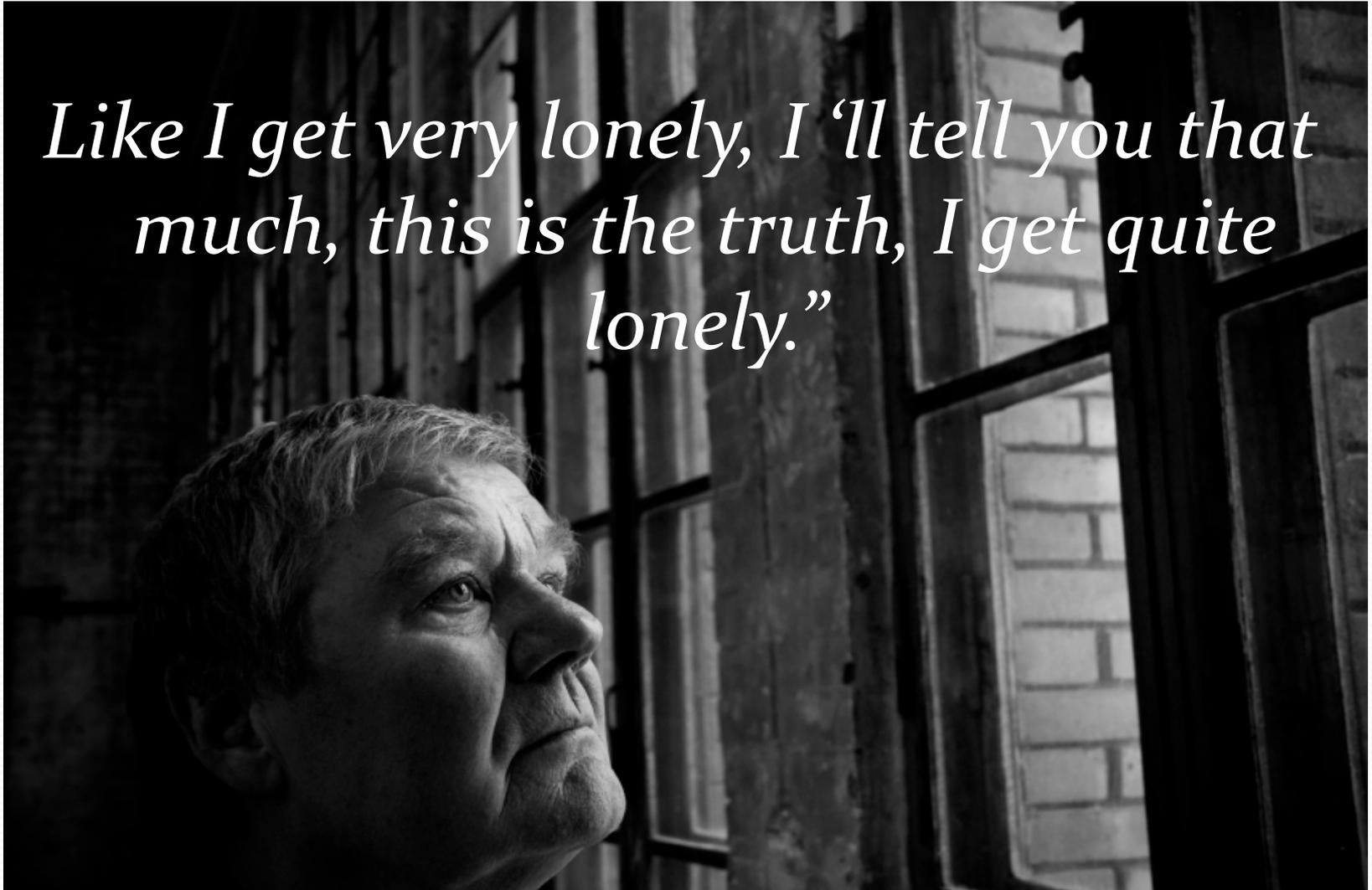
# Isolation

- *“No, nobody over here does play cards. No, no everything is dead here (laughter). And the main road, you know, you see the main road there. There’s nobody there.”*

Respondent who lives alone on a remote farm with no running water, little mobility and no driver’s license.

# Isolation

*Like I get very lonely, I 'll tell you that much, this is the truth, I get quite lonely.”*





# Mobility

- *“I don’t participate. I used to before my accident but after the accident, I was going up a ramp and the guy ahead of me, he knew me well, he opened the door and slammed the door at me, and I was going up in a wheelchair, from then on I said maybe I should stay away...”*
- *“We used to go back to the farm there, dancing, weddings, oh yeah I’ve got dresses hanging there I never even worn, since I come to town... not to town, after I got sick.”*



# Gender

- Men described greater difficulty in dealing with loss of mobility than women.
- Inability to complete outdoor work appeared to influence men more negatively than women.

*“Well if I was healthy I could do a heck of a lot more. But I have a hard time even looking after the yard...”*

- Women discussed concerns about taking on new tasks such as driving and managing finances, when their spouses were no longer able.



# Spousal Health

*“Now that my [spouse] is in the care home  
I have found this, you’re not doing anything...  
you’re going and sitting by the bed or you’re sitting  
by the chair, and you’re not doing anything,  
but I come home exhausted...”*



# Spouses Health

*“I’m doing okay, every once in a while it’s funny...  
I find I can get overcome with a little bit of grief...  
Not knowing what the future is as far as his  
health is concerned. Not knowing just where and  
what, but you know.”*

# Spousal Health

*“I am depressed ‘cause now I have more time to think... somehow I had this strange idea that because I’ve been running after him and doing things and making decisions for years that when he was gone it would be only a relief, it doesn’t work that way...”*

# Finances

*“I’m paying at the house and I’m spending an average of \$1500 a month for my [spouse] at the lodge and I’m cashing in terms quite often... my [spouse’s] system is shutting down... every time when I leave they say ‘anything happens we’ll phone you’ so day to day sort of thing and I’m kind of in Limbo, so maybe another year I’ll throw these things off my back.”*

# Coping Mechanisms

- Keeping busy, staying active and trying to occupy time.
  - Driving, playing cards, exercising, coffee.
- Fewer activities on Sunday, often more difficult day...
- Pet companionship.
- One respondent attended grief group sessions.
- Need for grief counsellors in care homes or available to seniors.
- Gap in knowledge about services available to deal with mental health supports.

# Mental Health

## Older Adult Education

- Respondents described the need for educational talks or pamphlets in the community on topics such as:
- *“Aging and depression because I’m getting old and I can’t do what I wanted to do.”*
- *Dealing with grief*
- *Mental health and poor nutrition*
- *How to learn new tasks such as driving or finances*
- *“To prepare ourselves to talk with our loved ones about death and how do you discuss such a subject.”*

# Next Steps

- We continue to gather data related to seniors and mental health through the longitudinal study.
- This data, as well as data from the original pilot study, is being used to inform and support efforts to secure funding for a research study to focus specifically on rural seniors and mental health.

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