

Clark County

Commission on Aging

2017
Annual
Report



CLARK COUNTY
COMMISSION
on
AGING

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Commission on Aging Mission

As community ambassadors, the Commission on Aging provides leadership, advocacy, community awareness and partnerships to initiate change toward an all-age-friendly, livable community.



From the Chair



Dear community members,

Thank you for helping make this year's focus on supportive services a success. Your attendance, questions and comments at our public meetings were invaluable. We heard your passion as you shared personal stories and expressed a desire for help and understanding as you or a loved one seeks the support needed to age in place with dignity. You are our strongest partner.

We took what we learned from you and our speakers and developed the findings and recommendations in this report to the Clark County Council. The recommendations will help strengthen supportive services for people 60 and over who desire to age in place.

Our report details our year-long focus on supportive services. We thank our speakers and look forward to continuing our partnership with them, especially at our summit with the Southwest Area Agency on Aging and Disabilities in March of 2018.

Looking ahead, we remain steadfast in our charge to educate, raise awareness and advocate through focus areas outlined in the Aging Readiness Plan. They are supportive services, transportation, housing, healthy communities and community engagement. Nearly 90 percent of people age 50 and older want to live in their own home as they age, and these focus areas are crucial to ensure that desire is within reach for each of us.

Next year's focus will be on transportation. We will seek help identifying speakers with the expertise to inform us as well as listen and respond to you.

We are grateful to Clark County for creating the Commission on Aging in 2012 as a forum to address important issues. Our goal then and now is to achieve an "all-age friendly, livable community." We continue to count on you.

Thank you and take care,

A handwritten signature in black ink that reads "Marjorie A. Ledell". The signature is written in a cursive style.

Marjorie A. Ledell
Chair

Who we are



Current members

Marian Anderson
Ali Caley
Chuck Frayer
Amy Gross
Pat Janik
Marjorie Ledell
Temple Lentz
Linda O'Leary
Donna Roberge

Past COA members

Gary Beagle
John Correa
Patricia Gray
Bob Holdridge
Herb Maxey
Kathy McLaughlin
Scott Perlman
Lisa Rasmussen
Bill Ritchie
Randy Scheel
Kiersten Ware
Karin Woll

Past COA chairs

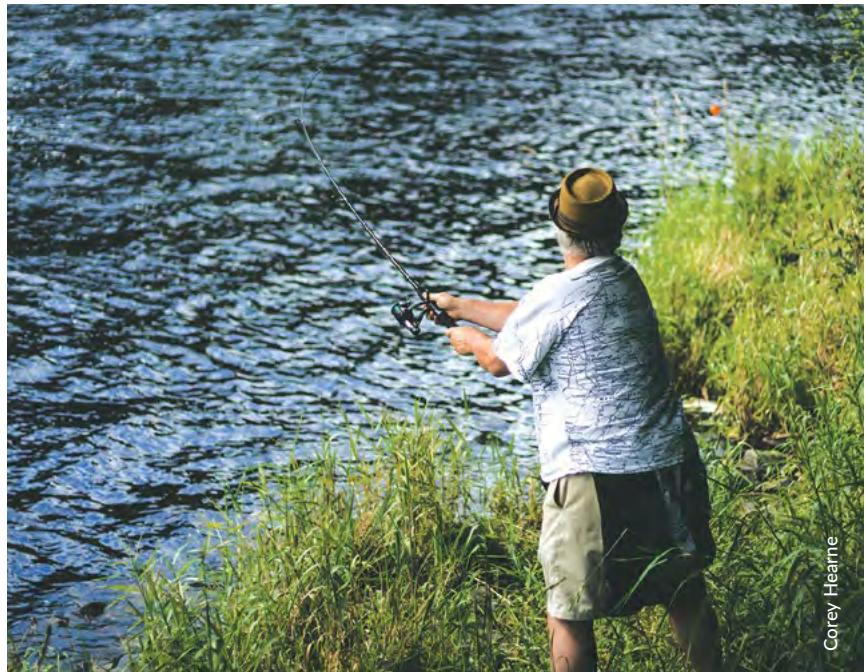
Gary Beagle
Bill Ritchie
Kiersten Ware

Aging Readiness Plan

In 2010, knowing more than 10,000 people nationwide turn 65 each day, the then-Board of County Commissioners appointed a 24-member panel to assess the county's capacity to serve its older residents. The Aging Readiness Task Force developed the Aging Readiness Plan, which identified five focus areas: housing, transportation, supportive services, healthy communities and community engagement. The plan includes perspectives about how to effectively cultivate and protect what residents say they want most – the ability to age in the home and community where they live.

Commission on Aging

The Commission on Aging was established on May 20, 2012 and is tasked with leading and managing the implementation of the Aging Readiness Plan and fostering countywide awareness, dialogue and insight into challenges and opportunities for residents of all ages, incomes and abilities. The commission is supported by volunteer members appointed by the Board of County Councilors and staff in Clark County Community Planning. Commission members provide leadership, education, advocacy and community awareness and serve as community ambassadors.



2017 Focus on supportive services



The Commission on Aging dedicated its fifth year to the issue of supportive services, especially for our citizens 60 and older. At each meeting, a local expert provided insights on a specific aspect of supportive services. The presentations were to:

Educate commission members and the public

Direct questions to the expert to gain further information

Seek comments and questions from the public

Identify ways to shape policy



The Commission on Aging will conclude its 2017 focus on supportive services by co-sponsoring a summit with the Southwest Area Agency on Aging Disabilities on March 29, 2018. The agency is one of the commission's long-standing partners in helping address the needs of our older residents.

Highlights from the supportive services series



Caregiver resources

Lexie Bartunek | *Area Agency on Aging and Disabilities of Southwest Washington*

Although family members are a large portion of unpaid caregivers, many are not aware of community resources designed to assist them. The Area Agency on Aging and Disabilities of Southwest Washington connects seniors, adults with disabilities and family caregivers to a full range of free and other community resources designed to offer choice, respect independence, and support people in living and aging well.

1. The Information and Assistance program is a free, confidential service that helps people with challenges and connects them to information and resources that match their needs.
2. The Family Caregiver Support Program supports family and friends who provide at-home care for a loved one, guides people to needed services, and keeps people connected to the community.
3. Respite options: Many options include private care and home care agencies. Some families prefer to hire a caretaker and want to know how to do it safely. Adult day care and short-term facilities are other care options. Most long-term facilities offer short-term options by the hour, day and overnight.
4. The Veterans Administration offers financial assistance to pay for long-term care for veterans who served in war, a fact not well known.
5. Caregiver resources are available to all residents of Clark County 18 and older, regardless of income. Medicaid programs are income-based but not community-based resources.



Normal aging

Shanti Potts, instructor and senior advocate

Aging reflects changes over the course of life. Some changes are normal and expected, and others, such as memory loss, confusion, dementia and Alzheimer's disease, are not. What is normal and what is not normal aging?

1. Normal aging characteristics can include: forgetting names; increased time and energy needed to learn new skills; decreased ability/dexterity with multitasking; decreased ability to readily recall data; decreased response/reactionary time; and decreased ability to learn/decide in a short time.
2. Dementia is when brain cells die and some of the brain's functioning stops.
3. Dementia has many forms, including:
 - a. Alzheimer's
 - b. Young onset Alzheimer's affects a person younger than 65
 - c. Vascular dementia
 - d. Lewy Body Disease
 - e. Parkinson's Disease
 - f. Frontotemporal dementia
4. Dementia should only be diagnosed by professionals in the field of geriatrics. Some medications are contraindicative for memory loss, so it's important to be diagnosed correctly and in a timely manner.



Home innovation and safety

Sue Doyle, PhD, OTR/L, CRE

Smart home innovation that supports independent living can help people remain in their homes as long as possible. Occupational therapy can help maintain independence, prevent injury and provide guidance about technological tools that can better enable seniors to function effectively at home.

1. Persons with visual impairments/low vision can make adaptations to improve safety, such as:
 - a. Automation of some lighting
 - b. Color contrasts for changes in rooms or elevations
 - c. Magnification options for some tasks
 - d. Medication management strategies
2. Three main types of assistive technology improve home safety: alerts for those hard of hearing; alarms to signal help; and assistance/compensation for persons with physical and/or cognitive challenges. These systems can be monitored by a family caregiver, company or home care provider, or even your medical provider. Some examples include:
 - a. Door alarms, wandering alerts
 - b. Locked medication dispensers with alarms
 - c. Fall sensors and vitals monitoring
 - d. Stove motion sensors
 - e. Electronic/telehealth supported cottages
3. Once a home is modified for safety, an occupational therapist can evaluate the person in the home to ensure the modifications are working for them or identify other modifications that need to be made.



Medication and pain management

Clara Chambers, PharmD
and Nancy Beth Trester, PT

Many older adults take medications for chronic pain. Although medications help with pain, they can cause other health problems, and some medications can make some pain worse. Being able to understand and manage your pain properly can help decrease it.

1. Providers and patients should make a detailed list of all medications prescribed by a provider, purchased over the counter and supplements and list how frequently each is taken. Also make a list of medications that cause allergic or other adverse reactions.
2. Over-the-counter medications and supplements can interfere with prescription medications and may make other health symptoms worse.
3. A pharmacist can review a medication list to see if any over-the-counter, OTC, medication will interfere with your prescription medications. For example, some OTCs could potentially increase risk for falls, make prescription medications less effective, or cause fluid or urine retention.
4. People should be mindful of where to store medications and how to safely dispose of old medications. Your pharmacist will likely have suggestions and can refer you to law enforcement offices that have drop boxes for old prescriptions.
5. When threat or danger in one's body is greater than safety, there will be pain. When safety is greater than threat and danger, there will not be pain.
6. People in pain often avoid moving and must remember to regain activity gradually.

Protect yourself

Don't include personal information on checks

Never give private information over the phone

Don't keep your social security card or unused credit cards in your wallet

Always shred personal documents

Protect your passwords

Elder abuse

Detective Mike Day | *Vancouver Police Department*

Elder abuse and neglect is a significant public health and criminal justice issue. Our community's response to the problem was greatly enhanced when the Clark County Elder Justice Center opened in 2011. The Elder Justice Center helps prevent abuse, neglect and exploitation of vulnerable adults by responding to reports of elderly residents and other vulnerable adults in Clark County.

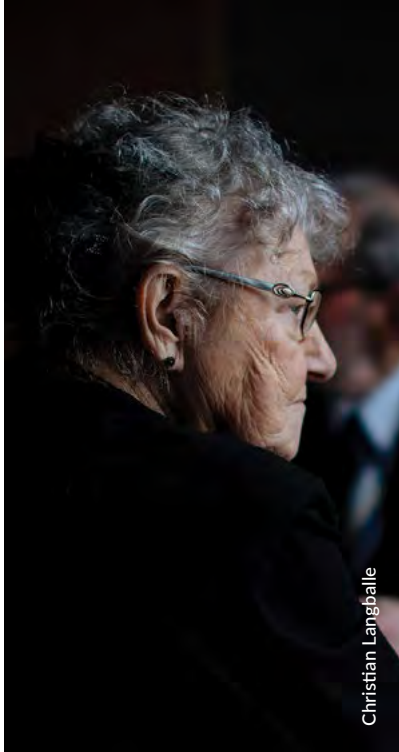
1. Elder abuse is a significant public health and criminal justice issue.
2. Nationally, at least 5 percent of older adults are subjected to abuse, neglect or exploitation.
3. Prevalent criminal scams of older adults include:
 - a. A fictitious relative calling to request money or fake sweepstakes
 - b. Construction companies—check references, check Labor & Industry website, make sure they are licensed and bonded, don't pay in-full up front
 - c. Having a "sweetheart"—older victim may be taken advantage of by a younger suspect
 - d. Abuse of Power of Attorney—make sure wording is clear about financial management
4. Tips to protect yourself:
 - a. Include name/address on checks, but not extra information such as birth date
 - b. Never give your private information over the phone
 - c. Remove your social security number or unused credit cards from your wallet
 - d. Always shred and completely dispose of personal documents/information
 - e. Protect your passwords

Elder Justice Center

To report abuse call **877.734.6277**

If you suspect physical or sexual abuse dial **911**

Adult Protective Services investigates allegations of abuse of any person who lives at home. Confidentiality of the person reporting the abuse can be maintained.



Mental health concerns in older adults

Peggy McCarthy & Janet Ragan | *National Alliance on Mental Illness*

The toll depression can take on an older adult's health can be severe. Depression can complicate treatment of chronic medical conditions such as diabetes, heart disease or cancer and make caring for oneself or seeking treatment more difficult.

National Alliance on Mental Illness provides niche mental health services that are unavailable or inaccessible elsewhere to individuals and families through education, support and advocacy.

1. Depression is not a common part of aging. But chronic health conditions are the biggest contributing factor in depression. Other contributing factors are death of a loved one, loss of independence and loss of societal roles.
2. Signs of depression and clinical diagnosis are the same regardless of age and include unexplained physical complaints, expressions of hopelessness, anxiety, worry, confusion, memory loss and loss of pleasure.
3. Anxiety in older adults is not related to age and includes risk factors such as overall feelings of poor health, sleep disturbance, drinking too much, stressful life events, fear of falling, and being home bound.
4. Evidence based treatments include therapy, medication and complementary and alternative treatments.
5. Barriers to receiving help include: the stigma involved in securing mental health services; denial; failure of professionals to identify the signs and symptoms of mental illness and their comfort level in prescribing antidepressants; and shortage of trained geriatric providers.
6. Older adults have the highest rate of suicide of any age group. According to the National Strategy for Suicide Prevention, on average, one person 65 and older commits suicide every 90 minutes. Older adults are 13 percent of the nation's population but 19 percent of suicides.
7. More alarming are those who committed suicide after recently reaching out for help. Twenty percent had seen a physician that day, 40 percent had seen a physician that week, and 70 percent had seen a physician that month.

Socialization as a human need

Judy Canter, Licensed Independent Clinical
Social Worker

Socialization is a basic human need throughout our lifetime. Unfortunately, with the number of seniors who live alone, isolation is not an uncommon problem. Studies show that 10 minutes of social interaction a day can improve memory and mental performance.

1. Human need for socialization is critical throughout our lifetime and important for a healthy life.
2. Particular to aging residents, the loss of mobility, isolation, illness and mental health challenges can impede healthy socialization.
 - a. Older adults and caregivers can lose their social networks.
 - b. Mobility challenges and cognitive decline reduces socialization.
 - c. Isolation can lead to depression, and the more a person is depressed, the less motivation he or she has to engage in social activities.
 - d. Older adults who live in facilities can isolate because they feel they are being housed waiting to die.
 - e. Aging in place is preferred with a variety of social networks for a balanced life.
 - f. People need spontaneity to keep their brains young and their spirits fresh.
3. Isolation can cause loneliness, increase depression and anxiety, increase chances of stroke, impact sleep, raise blood pressure, increase stress, and shorten lifespan.
4. Roadblocks to socialization include:
 - a. Transportation—limited mobility when you can no longer drive, especially for those who live in rural areas

- b. Institutional living—people may not participate in activities
 - c. Mental health—depression, grief, loss and anxiety
5. Ideas for socialization include volunteering, joining clubs/groups, connecting with family/friends, getting a pet, attending church, taking a class, learning to use the Internet.





Complementary alternative medicine

Dr. Jaymie Mackler

Complementary Alternative Medicine, CAM, collectively are diverse medical and health care systems, practices and products not now considered part of conventional medicine. CAM offers safe, effective treatments for common concerns among older residents.

The 10 most common complementary health approaches among adults in 2012, listed in order of popularity, were: Natural products; deep breathing; yoga; tai chi or Qi Gong; chiropractic or osteopathic manipulation; massage; special diets; homeopathy; progressive relaxation; and guided imagery.

Common CAM practices include:

Biologically based approaches such as diets, herbs and vitamins

Energy therapies such as Reiki, magnets and Qigong

Alternative Medical Systems include homeopathy, naturopathy and Ayurveda

Mind-body interventions such as yoga, spirituality and relaxation

Manipulative and body-based therapies such as massage, chiropractic and osteopathy

Many patients stop using conventional medicine and only use one CAM practice, which can be detrimental. When looking at CAM therapies, it's important to go to a practitioner who can evaluate the best approach for each patient's needs.

Benefits of CAM include: pain relief; improved quality of life; fewer side effects; slowing the effects of dementia; and helping combat gastro-esophageal reflux disease. For some people, CAM treatments better align with their philosophical orientation.

CAM providers include licensed practitioners, naturopathic physicians, licensed acupuncturists, chiropractors, massage therapists, and osteopathic physicians.

Other types of CAM providers include life coaches, hypnotherapists, herbalists and lay homeopaths.

Many insurance plans cover naturopathic physicians. But because Medicare does not cover naturopathic care, many patients over 65 have to pay out of pocket.

2017 Focus on Supportive Services

major findings



Through meetings about major supportive services issues, the commission gathered facts and public comments that comprise findings and recommendations for the Board of County Councilors.

In recent news articles, Washington has been praised as one of the best states in which to age. According to the American Association of Retired Persons (AARP), the state ranks high for providing support for people needing long-term assistance and support for family caregivers. Why? Because Washington officials have made supporting home and community-based care a state priority. As our older population continues to grow, we will need to increase that support at both the state and local levels.

Support for family caregivers

The physical, emotional and financial challenges of caring for a family member can be daunting. Balancing this important role with a full time job or a family of your own can make it even more difficult. Nationally, nonpaid caregivers save taxpayers millions of dollars. However, less than 1 percent of caregivers in Washington tap into caregiver services because they don't think of themselves as caregivers or they mistakenly believe the services are programs based on income. Clark County has the third highest number of unpaid family caregivers in the state. We will need to continue to provide support and resources as the 60+ population grows.



Mental health and aging

Mental health disorders, such as depression and anxiety, are frequently considered part of the aging process for older adults, although they are not. Family members and health professionals may mistakenly think persistent depression is an acceptable response to other serious illnesses and the social and financial hardships that often accompany aging – an attitude often shared by older people themselves. This contributes to low rates of diagnosis and treatment in older adults. Depression and anxiety are not intrinsically age-related.

Social engagement

People need engagement and human touch. Isolation can lead to depression, and the more a person is depressed, the less motivation they have to engage in social activities. When a person experiences mobility challenges and cognitive decline, they lose opportunities for socialization.

Aging and suicide

Older adults in the U.S. have the highest rates of suicide of any age group. According to the National Strategy for Suicide Prevention, on average, one

person 65 or older commits suicide every 90 minutes. Older adults comprise 13 percent of the population, but 19 percent of all suicides. More alarming is how many die by suicide after reaching out for help. Twenty percent had seen a physician that day, 40 percent had seen a physician that week, and 70 percent had seen a physician that month.

Connecting services to seniors

Many organizations and agencies in Clark County provide supportive services for our older residents. These services include fitness and nutrition programs, in-home care, housing referrals, adult day care, family caregiver support and mental health support. Unfortunately, many seniors and family members are unaware of the resources.

Our local agencies, the Area Agency on Aging and Disabilities of Southwest Washington, National Alliance on Mental Illness, Clark County Public Health, Community Services and the Elder Justice Center, among others, are essential in residents' choosing to age-in-place safely and successfully. We need to continue to inform county residents of these important organizations and where to find them.

Recommendations

The recommendations from the supportive services speaker series in 2017 are:

1. **Work with our community partners and county council to increase efforts to raise awareness about the range of services available for people 60 and older.**

- a. Support and participate in the March 2018 Supportive Services Summit co-sponsored by the Area Agency on Aging and Disabilities of Southwest Washington, or AAADSW, to help raise awareness of community resources.
- b. Continue to find ways to partner with AAADSW to raise awareness of available services, including support for unpaid caregivers, and continue to partner with the National Alliance on Mental Illness to raise awareness of services available for mental health issues. Clark County established these partnerships in 2012 with the Aging Readiness Plan. The positive results need to be celebrated and enhanced.
- c. Work with community partners to raise awareness about addressing depression, anxiety and suicide. For example, develop public awareness campaigns geared towards caregivers and geriatric care workers.

2. **Work with community partners to advocate for development of additional memory care homes and facilities.** Clark County needs to

better prepare not only for the growing number of older people, but also for a growing number of people with dementia. We need more facilities able to accommodate the anticipated increased in dementia patients, some with behavioral issues, in the next 10-15 years.

3. **Work with community partners to advocate for further development of smaller assisted living communities** as alternatives to large traditional nursing homes. They could be licensed as nursing homes, assisted living facilities or adult

family homes and would be built in residential neighborhoods. Residents of these homes have shown increased reports of mobility and social interaction and fewer reports of weight loss and depression compared with residents of traditional skilled nursing facilities.

4. **Work with community partners to encourage development of programs that support isolated elderly people.** Intergenerational focused programs such as assisted living and joint day care facilities are possibilities. ElderFriends, for example, is a national program that matches a trained volunteer with an isolated senior to create a bond designed to reduce isolation and loneliness. ElderFriends was once active in Clark County, and the community should advocate for funding to reestablish the program, which could be administered by a local supportive service provider.



5. **Work to have a Clark County Sheriff's deputy assigned to the Elder Justice Center team.**

Currently, no county officer is dedicated to the Elder Justice Center team. The commission can encourage the addition of a deputy to the team.

6. **Next year as the Commission on Aging delves into transportation, we will be mindful of roadblocks to socialization due to mobility constraints** and consider possible initiatives that could enhance older driver safety and other transportation options.

Implementing the Aging Readiness Plan

The Commission on Aging has developed several programs to implement the aging readiness plan, including advocacy of Universal Design for homes and raising awareness of issues important to our aging population. In 2016, the commission began to revisit the focus areas outlined in the plan, those of Housing, Supportive Services, Transportation and Healthy Communities.



Housing

The Commission on Aging’s work on housing centered on recommendations that encouraged the construction and remodeling of homes and neighborhoods to be places anyone could visit regardless of ability. The commission introduced the term “visitable,” which means barrier-free housing accessible to all residents and visitors. The Clark County council and some city councils have taken these recommendations seriously, and we expect policy and administrative changes that will help reshape housing to better serve the needs of the 90 percent of people who want to age in place.

Future of Housing Summit: Realities and Possibilities

The commission and Clark County hosted a housing summit Feb. 9, 2017. The summit brought



community leaders together to discuss how we can help better shape the housing market to meet the needs of all consumers. The keynote speaker, Elliot Eisenberg, a nationally acclaimed economist, public speaker and author, presented the issues surrounding our housing market and problems we face nationally. He concluded with a list of solutions that could help mitigate the lack of affordable housing, ideas that included encouraging development of all types of housing and greater density.

In addition to Dr. Eisenberg, a panel of local experts discussed whether the housing market is meeting the needs of Clark County consumers and shared ideas about what may need to change to better meet those needs. Our panelists were:

Alan DeLaTorre, Environmental Gerontologist
Research Assistant, Portland State University
Institute on Aging

Chuck Frayer, Commission on Aging Housing chair

Leah Greenwood, partner, Halstead Greenwood
Consulting

Aaron Marvin, president, Building Industry
Association of Clark County

The closing speaker was Patrick Roden, founder,
aginginplace.com.

2017 NW Natural Parade of Homes

The 2016 Commission on Aging's housing recommendations and marketplace ideas included encouraging the Building Industry Association to showcase a Universal Design home in the Clark County 2018 Parade of Homes. Quail Homes stepped up a year early with a house named "The Empty Nester" in the 2017 Parade of Homes. The house incorporated the Universal Design elements of wider doorways and hallways and a sophisticated lighting plan to better illuminate rooms. Some features of Universal Design were highlighted in the home's informational page for the event, helping raise awareness of these design elements that can make a home work for any age and ability.

Remodeled Homes Tour

Another marketplace idea from the Commission's 2016 Annual Report was to collaborate with the BIA to promote "visitability" choices for new and existing homes. The 2017 Remodeled Homes Tour included a home with an addition that provided independent space for an aging family member. The home, remodeled by ReNew Creations, featured a ramp to make the home accessible for someone with changing mobility needs. Inside, the space featured an open floor plan and accessible bathroom for



someone using a wheelchair. Several commission members accepted the builder's invitation to tour the home and provide information on Universal Design and aging-in-place strategies to visitors.

Habitat for Humanity

Another marketplace idea in the Commission's 2016 report was to work with housing nonprofits, such as Evergreen Habitat for Humanity, to ensure new affordable housing projects are built to ensure access for all potential residents. Evergreen Habitat continues to collaborate with the Commission on Aging on housing plans that will incorporate Universal Design elements.



Housing policy and code changes

Since the Commission on Aging's focus and recommendations on housing last year, several jurisdictions have been working on how to encourage development of age-friendly housing. Clark County is participating in communitywide efforts to provide a greater variety of housing choices, including increasing housing types for smaller households and promoting housing affordability. Ridgefield has developed an incentive program to increase the number of "visitable" homes in the city and Camas adopted a comp plan policy that could increase the number of "visitable" homes in new developments.



Education, awareness and advocacy

Throughout the year, the commission worked to provide education, community awareness and advocacy to move toward an all-age-friendly community. Below are some events commission members attended to provide information on topics related to aging in Clark County.

City councils

Commission members presented the 2016 Commission on Aging Annual Report and housing recommendations to all city councils to keep them updated on the commission's progress.



The Future of Housing Summit

Clark County and the Commission on Aging hosted the summit to bring community leaders together to discuss how to better shape the housing market to meet the needs of all consumers.

2017 Remodeled Homes Tour

Several members participated in the open house tour to talk with attendees in an effort to raise awareness of aging-in-place options for remodeling.

Clark County Association of Realtors

Marjorie Ledell, commission chair, presented the housing recommendations. We are continuing to work with the association to revise and increase designations for accessibility features in the Multiple Listing Service.

Evergreen Habitat for Humanity

Commission members Chuck Frayer and Marian Anderson worked with this group to suggest ideas for plans that would include designs for potential residents regardless of age or ability.

Clark County Youth Commission

Marjorie Ledell met with Elizabeth Hill, the program coordinator, to discuss potential intergenerational collaboration on shared initiatives.

Fort Vancouver Library all-staff training day

Commission staff member Jacqui Kamp and Christina Marneris and Staci Levison of the Area Agency on Aging and Disabilities of Southwest Washington spoke about "Serving Seniors in Clark County and Beyond." Their presentation raised awareness of the variety of resources and services the agency provides.

Proclamations

The commission successfully advocated for the county council to proclaim May as Older Americans Month and November as National Caregivers Month.





Helpful references

AARP

www.aarp.org

AARP, Livability Index

<https://livabilityindex.aarp.org>

The livability index scores neighborhoods and communities across the U.S. on services and amenities that most impact people's lives.

Area Agency on Aging of Southwest Washington (AAADSW)

www.helpingelders.org | 360.694.8144 or 888.637.6060

<https://washingtoncommunitylivingconnections.org/consumer/index.php>

www.helpingelders.org/im-a-family-caregiver

www.facebook.com/HelpingElders

American Association of Suicidology

www.suicidology.org/resources/facts-statistics

Administration on Aging (2001). *Older Adults and Mental Health: Issues and Opportunities*. Washington, DC: U.S. Department of Health and Human Services.

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www.apa.org/advocacy/health/older-americans.aspx

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American Psychological Association. (2008). *Survey of Psychology Health Service Providers.*

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Byers, A. L., Yaffe, K., Covinsky, K. E., Friedman, M. B., & Bruce, M. L. (2010). High occurrence of mood and anxiety disorders among older adults. *Archives of General Psychiatry*, 67(5), 489-496.

Chambers, Clara. "Medication Management: The challenge of managing ever changing medication regimens." June 20, 2017. Veteran Affairs.

Clark County Commission on Aging March meeting minutes, Topic: Caregiver Resources. March 21, 2017.

www.clark.wa.gov/sites/default/files/fileattachments/community_planning/meeting/16538/2017-3-21_minutes.pdf

Clark County Commission on Aging April meeting minutes, Topic: Normal vs. Not Normal Aging. April 18, 2017.

www.clark.wa.gov/sites/default/files/fileattachments/community_planning/meeting/17296/2017-4-18_final_minutes.pdf

Clark County Commission on Aging May meeting minutes, Topic: Home Innovation and Safety. May 16, 2017.

www.clark.wa.gov/sites/default/files/fileattachments/community_planning/meeting/17141/2017-5-16_minutes_final.pdf

Clark County Commission on Aging June meeting minutes, Topic: Medicine and pain management. June 20, 2017.

www.clark.wa.gov/sites/default/files/fileattachments/community_planning/meeting/17956/2017-06-20_final_minutes.pdf

Clark County Commission on Aging August meeting minutes, Topic: Elder Abuse. Aug. 15, 2017.

www.clark.wa.gov/sites/default/files/fileattachments/community_planning/meeting/18911/2017-08-15_final_minutes.pdf

Clark County Commission on Aging September meeting minutes, Topic: Mental Health and Seniors. Sept. 18, 2017.

www.clark.wa.gov/sites/default/files/fileattachments/community_planning/meeting/19241/2017-09-19_final_minutes.pdf

Clark County Commission on Aging October meeting minutes, Topic: Socialization as a human need. Oct. 17, 2017.

Clark County Commission on Aging November meeting minutes, Topic: Complementary Alternative Medicine. Nov. 14, 2017.

Dementia Action Collaborative – Washington

www.dshs.wa.gov/sites/default/files/AL TSA/stakeholders/documents/AD/DFC-WA%20Fact%20Sheet%20-%20Short%20Version.pdf

Electronic Home Safety Monitoring Systems – Keeping safe at home, OT Lifestyle Solutions

www.clark.wa.gov/sites/default/files/dept/files/community-planning/aging/Support/Electronic%20Home%20Safety%20Monitoring%20Systems.pdf

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www.aarp.org/caregiving/basics/info-2017/long-term-care-support-varies-nationwide.html

National Alliance on Mental Illness (NAMI)

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