Mental Health Training for Home Support Workers

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Background

Home support workers help seniors with daily living tasks in their homes. Many home care clients have both physical and mental health problems. They may have symptoms such as sadness, worry, and confusion. In addition, they may be isolated and lonely. The training that home support workers receive usually focuses on physical care. There is often little emphasis on helping clients with mental health problems.

Alberta’s Continuing Care Strategy: Aging in the Right Place recognizes that seniors want to remain in their own homes (Alberta Health & Wellness, 2008). Yet, seniors may have difficulty continuing to live independently. For example, they might be physically weak, and therefore be unable to complete daily tasks like shopping and cleaning.

Physical illnesses often occur along with mental health problems such as depression or anxiety. One study conducted in Michigan estimated that 40.5% of seniors that receive support services have a recognizable mental health problem (Li & Conwell, 2007). Lonely seniors may cope by using alcohol or other substances, leading to further disability (Zarit S. & Zarit, J, 2007). Early detection of mental health problems can help to prevent this path of decline.

Unfortunately, support services tend to focus on activities of daily living, while mental health needs are neglected or misunderstood. There are serious consequences if mental health problems are not detected or treated. These can include unnecessary pain, a decline in overall health, and decreased physical or mental abilities. These symptoms can then increase the risk of admission to nursing homes, which can cause significant suffering for older adults and their family members (Anstey, et al., 2007; Chuan, Kumar, Matthew, Heok, & Pin, 2008; Parmalee, Katz, & Lawton, 1991).

Objectives

The general objective of this research was to assess the need for mental health training among home support workers caring for seniors in the community.

Method

Key administrators and service providers from Calgary Family Services collaborated on this project, providing guidance at every stage. Pilot research for this project was conducted with home support workers in Calgary with the aim of focusing the project and refining the objectives.

1. Conduct a systematic literature review of the types of training programs that are available for home support workers who provide assistance to older adults in their homes.

2. Conduct semi-structured interviews with home support workers to assess the types of mental health problems they encounter, their knowledge of mental health problems, their confidence working with these clients, and their attitudes about training:
   - Twenty-eight participants were recruited through community agencies that provide in-home services to seniors in the Calgary area. Participants responded to a series of open-ended questions about the types of mental health problems and symptoms they encounter when working with clients.
   - Participants also completed a 20-item questionnaire on basic mental health knowledge.
3. Conduct focus groups with key administrators and supervisors of home support workers to determine their views about the need for training, the types of training that would be useful, and obstacles to training.
   - Twelve managers, supervisors, and coordinators from two home support agencies in the Calgary area participated. Questions were developed based on the literature review and input from stakeholders. Topics included: types of mental health problems home support workers encounter, their knowledge of mental health problems, challenges they face helping their clients, and their training needs.
   - Transcripts from focus groups were coded to identify the most common themes.

4. Develop and evaluate a short mental health training program that can be used by service providers to teach home support workers strategies for working with clients with mental health problems.
   - The information collected was used to develop a 90-minute mental health training program. It was piloted with 15 home support workers. Topics included: definitions of mental health, common symptoms and problems, myths about mental health and aging, factors that influence mental health, strategies for working with clients with mental health problems, and self-care.
   - The workshop was evaluated using a 5-item anonymous survey.

Results
Seventy-nine percent of the home support workers reported that they worked with clients with mental health problems. Communication difficulties (including language barriers) and managing problematic behaviours were the most frequent challenges faced by home support workers working with clients with mental health problems. Eighty percent of participants found the mental health training program helpful.

Home support workers viewed themselves as quite knowledgeable about mental health, but test results revealed they had significant misconceptions about aging and mental health. For example, 30% reported that mental illness is a normal part of aging, and 36% reported that it is normal to be depressed when you are old. Despite this, 93% of home support workers felt they needed more training on working with clients with mental health problems.

Existing mental health training has often been too advanced for home support workers, or not relevant to their everyday work with clients. Home support workers expressed a desire to learn practical strategies like communication skills and conflict management.

Conclusions
The results of this study clearly indicate the need for better mental health training for home support workers. In particular, some general training could help clear up common misconceptions about aging and mental health. However, home support workers have many demands on their time, so training needs to be brief and hands-on, addressing the types of problems they regularly encounter. Future research should continue to expand the mental health training program developed in this study.

Lessons Learned
Recruitment was an ongoing challenge in this project as home support workers are very busy. They often work more than one part-time job, and may view research as less of a priority. In general, in-person recruitment was more successful than recruitment through e-mail. Nevertheless, there is widespread recognition of the need for mental health education, and program participants were very receptive to the content of our training program. Future research should focus on more in-depth evaluation of the program, including the extent to which it influences the day-to-day interactions between home support workers and clients, and whether new information is retained over time.

The full report can be found at [www.mentalhealthresearch.ca](http://www.mentalhealthresearch.ca).
References

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