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Case Study: Irene Johnson©

Irene Johnson is an 84-year-old Caucasian female currently residing in Oakwood Assisted Living in Campbell, Oklahoma. Mrs. Johnson has been a resident at Oakwood for approximately two months. Prior to her admission to Oakwood, Mrs. Johnson resided with her daughter who has been her primary care giver for the last five years.

The social worker was asked to evaluate Mrs. Johnson and provide suggestions in order to help the facility staff decrease and effectively manage Mrs. Johnson's disruptive behavior. This behavior includes: constantly yelling out "help me, help me," agitation as evidenced by attempting to get out of bed at all hours, her confusion between day and night evidenced by sleeping in the day and staying up at night, and hitting the staff. Mrs. Johnson has previously been diagnosed with non-specific dementia and is currently taking Aricept, Namenda, and Celexa.

Due to Mrs. Johnson's dementia, she was unable to provide historical information so the social worker interviewed Ms. Donna Johnson, Irene's daughter and legal guardian. According to her daughter, Irene Johnson was born to Edna and William Smith on 2/13/1926 in Altus, Oklahoma. Irene was the eldest of two children; her sister Bernice was born two years later and the family lived in a small house on two acres of land.

Irene's father, William, was a farmer and her mother was a homemaker. Neither parent had more than an 8th grade education. Irene had told stories of how "stern" her father was when she was a child. Irene shared that often her father's "sternness" would be displayed by using a leather belt. Irene attributed her own strict parenting style as the result of the way she was raised. Irene's father was an alcoholic and died from alcohol related complications and her childhood was fraught with chaos and unpredictability due to her father's drinking.

Irene met and married Homer Johnson at the age of seventeen. The two met in high school and remained married until Homer's death five years ago. Irene prided herself on having a loyal and faithful husband that never drank or smoked his whole life. Irene did not work outside the home but kept herself busy with raising her two children and serving on many community boards and committees throughout the years. Irene generally maintained a positive, upbeat attitude despite having severe bouts of depression throughout her life.

Irene's husband died in a horrible tractor accident five years ago. His death was tragic and sudden. Irene suffered from vivid and disturbing dreams and intense complicated grief for the six months following her husband's death. After this time period, Irene's daughter began to notice changes in her mothers' behavior. Irene was no longer bathing, not engaging in any social activities and had lost approximately twenty pounds. It soon became evident that Irene could no

longer live independently and she reluctantly moved in with her daughter. After Irene moved in, her daughter began to notice her mother was having severe trouble with her short-term memory, often would have periods of confusion, and would become agitated and hostile for no apparent reason. Irene's daughter traveled with her mother to Oklahoma City, where a geriatric neurologist tested and confirmed Irene's dementia.

Up until a recent car accident that Irene's daughter was in two months ago, she had been able to provide full time care for her mother. Irene's daughter can now no longer assist her mother with her activities of living, such as bathing, dressing and eating. Therefore, Irene is now living in Oakwood Assisted Living. This social worker will complete an assessment and treatment plan in order to assist facility staff in managing Mrs. Johnson's behaviors. Possible interventions may include the use of aroma and music therapy combined with light therapy, which are discussed briefly below.

According to Burns, Byrne, Ballard, and Holmes (2002), aromatherapy has a long history and is the fastest growing of all complementary therapies. Ballard, O'Brien, Reichelt, and Perry (2002) found that aromatherapy significantly improved quality of life in dementia patients whereas antipsychotic medications seem to be associated with a detrimental impact on wellbeing. Aromatherapy is the use of distilled, pure, essential oils from plants for specific therapeutic effects that are either inhaled via devices known as diffusers or absorbed topically through the skin (McBee, 2008). Therefore, aromatherapy may have a calming influence on Mrs. Johnson during the day and may also allow her to fall into a deeper state of relaxation during the night.

Burns et al. (2002) also noted the promising research results involving the therapeutic use of bright light that have proven particularly effective in sleep disturbances. Therefore, like aromatherapy, light therapy may have the potential to deepen Mrs. Johnson's sleep, which may positively affect her other agitated behaviors. In a study by Ziv, Granot, Hal, Dassa, and Halmov (2007), the playing of popular music, assumed to be familiar to patients, in an Alzheimer's nursing home during free time resulted in a significant increase in positive social behaviors (e.g. eye contact, talking, laughing, smiling, attempts to calm each other, humming, singing, tapping rhythm of music, etc.) and a significant decrease in negative social behaviors (e.g. agitation and aggression). Therefore, the introduction of stimulating, familiar background music to Mrs. Johnson may also be beneficial after assessing what type of music she enjoys.

In the midst of her agitation, these interventions may be helpful in preventing Mrs. Johnson's behavior. Using music with Mrs. Johnson that focuses on the *here and now* may provide her with necessary grounding and singing a song that includes elements of the current situation could do this including singing about the current season, the current time, the current year, etc. Another music therapy intervention that would focus Mrs. Johnson on the here and now and potentially decrease her negative behaviors would be the singing of a meaningful song from Mrs. Johnson's life. Providing Mrs. Johnson with the reality of a well-known song may in and of itself be enough to bring Mrs. Johnson back in touch with the here and now, even if only for the duration of the song. However, this song would need to be determined from family or neighbors if Mrs. Johnson's confusion is too severe to provide this information herself.

References

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