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Understanding the Socioeconomic Impact of Progressive Diseases in the Geriatric Population

By: Ivy Anderson, Priscilla Owusu, Kaylon Smith, Cassidy
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Abstract

The purpose of this study is to discuss the economic repercussions that progressive diseases, such as Alzheimer's and Parkinson's, have on the geriatric population. We began by looking at Alzheimer's disease; we found that people who have Alzheimer's disease have more financial hardships, than those who don't have Alzheimer's. We also found that an increasingly growing number of geriatric patients with Alzheimer's suffer from late-life depression because many older patients lack appropriate social/familial interactions or appropriate care. The cost of ongoing care for Alzheimer's patients is significant. We also found that Parkinson's disease is an expensive disease. What is worse, it can be difficult for geriatric patients with Parkinson's disease who are living on a fixed income to pay for medical treatments, which in turn can exacerbate the disease. As part of our research, we also wanted to explore youth perceptions on the geriatric population. So, we conducted a random, anonymous, qualitative survey on college students between the ages of 18-24 years old. Our hypothesis was that students who were surveyed may use more positive adjectives to describe their relatives than they would to describe the geriatric population. However, we found that most participants stated positive adjectives to describe elderly people but when asked to provide adjectives about a grandparent or older relative, they provided more negative adjectives. We concluded that the participants in our mini-study lacked positive social interactions with older family members, leading them to respond with negative adjectives. This study enabled us to realize how important it is to foster positive social interactions with the geriatric population. Our research also brought to light the economic cost of progressive diseases on the geriatric population. Our research is particularly important because as future nurses we will need to provide consistent, exceptional care for the growing geriatric population.

Introduction

- As a group, we researched various types of progressive diseases such as Alzheimer's disease, dementia, depression, and Parkinson's disease.
- The challenges we faced while doing this research was finding specific causes of these diseases, how it affects the individual, those around them, and the economic impacts it has on them and the country.

Our research question:

What are the economic repercussions that progressive diseases have on senior citizens?

A Look at Alzheimer's and Parkinson's Diseases

- Alzheimer's and Parkinson's diseases are an irreversible, progressive brain disorder that slowly destroys memory and cognitive skills.
- This can affect patient's ability to carry out even the simplest of tasks.
- Symptoms of this disease typically start to appear in people during their mid-60s.
- Currently there are 5.5 million people living with Alzheimer's and 1 million people living with Parkinson's in the United States (National Institute on Aging, 2016).
- These diseases are the most common cause of dementia among senior citizens.
- The early symptoms for Alzheimer's disease is memory loss while the symptoms for Parkinson's disease varies per individual. Some older Parkinson's patients may experience muscle stiffness and slower movements.

Economic repercussions of these diseases.

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- In 2012, more than 15 million caregivers provided more than 17 billion hours of unpaid care at a value of \$216 billion (Singeltary, 2013).
- According to Singeltary (2013), the total payments for health and long-term care service for people with Alzheimer's and dementia totaled \$203 billion in 2013. The majority of this was paid by Medicare and Medicaid with combined costs of \$142 billion.
- The out of pocket cost for the treatments of Alzheimer's disease stated by Singletary (2013), totaled \$34 billion. Other funding from sources like HMO, private insurance, etc. also totaled \$27 billion.
- In 2018, treatment of Alzheimer's and other dementia-related diseases will cost a projected \$277 billion. It is expected to reach \$1.1 trillion by 2050 (Alzheimer's, 2018).
- The U.S. spends between \$2,500-\$10,000 per year to help provide medications for the treatments of Parkinson's disease. (Michael J Foundation for Parkinson's. (n.d.)

A Look at Local Resources for Alzheimer's Patients and Caregivers:

Anderson et al.: Understanding the Socioeconomic Impact of Progressive Diseases II

- The Alzheimer's Association Georgia Chapter is a health organization specializing in Alzheimer's disease care, serving 159 counties in Georgia with offices in Atlanta, Augusta, Columbus, Dalton, Macon, Savannah and Tifton. This organization provides local support groups, educational classes and other local resources. In 2014, this group became even more involved in Alzheimer's disease outreach because over 130,000 Georgians live with Alzheimer's disease. Tens of thousands more experience other forms of dementia (Department of Human Services, 2014).
- This organization provides community resources to understanding Alzheimer's disease, such as: tips for resolving family conflicts, discussing caregiving responsibilities, and continuing to talk by keeping the lines of communication open.
- They also provide resources for teens and kids in the forms of books like "Curveball, The Year I Lost My Grip, When the Brain Dies First etc." to help them cope with and understand the effects of Alzheimer's (Alzheimer's Association Georgia Chapter, 2018).
- Lastly they provide patient resources. Some of the resources offered involve educating the patient on what to expect, providing them with advice of how to share the news with close friends and families, providing them with treatments options (such as knowing what drugs are approved by the FDA and informing them about future clinical trials). They also provide support groups such as their 24/7 helpline, Greenwood Gardens, Belmont Senior living village etc.

A Look at National Resources for Parkinson's Disease

- The Michael J. Fox foundation is a patient-focused research group which offers both short-term and long-term services (Michael J. Foundation for Parkinson's, n.d.). Since Parkinson's is a disease with such little background information, the foundation attempts to provide educational resources to inform both the patient and caregivers in order to help them better navigate the course of the disease.
- This foundation provides treatments that can slow the effects of the disease, treatments for the under-addressed symptoms, and treatments to avoid the debilitating side effects of Parkinson's. They also provide services that help both caregivers and patients.
- This foundation is known for their million dollar research for finding a cure. Currently they have funded a total of \$800 million towards this research efforts and 45% of these funds go towards altering the disease, 35% for defining the disease, 14% for untreated symptoms and the 5% for efficient equipments and advanced technology (Michael J. Foundation for Parkinson's, n.d.).

A Look At Late-Life Depression

Depression is the leading cause

Of the 34 million population of people in the U.S, 2 million suffer from depression each year are over the age of 65. (6% of the elderly)

Late-life depression is caused by a number of contributions. There is a big linkage between depression and other diseases.

Increasing aging population= more future healthcare workers such as Nurse Practitioners, Psychiatrists, Psychologists, Internal Medicine and Family Medicine Physicians. (Which is something we need more of)

“It was estimated that depression cost the US \$83.1 billion in economic costs, including \$26.1 billion in direct healthcare costs and \$51.9 billion in workplace costs based on absenteeism, in the US alone.” (McCall)

Conclusion on Research Question

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- What we found from our research is that the economic toll on both patients and caregivers who battle these diseases is significant.
- In addition, it is important for patients and caregivers who are confronting these debilitating diseases to create social support networks to help them overcome loneliness and depression, which can be side effects of these diseases. Depression can be exacerbated by the isolationary aspect of these diseases.
- Therefore, we recommend that patients and caregivers alike should seek out local and national support services to help them through the progression of the disease.

Data Collection

- As future healthcare professionals, we are interested in advocating for the youth to develop an understanding of the socioeconomic effects of progressive diseases on the geriatric population.
- Therefore, another component of our research was to understand how the youth perceive the geriatric population.

Method

- We conducted a random, anonymous qualitative survey on 5 college students ranging in ages from 18-24.
 - We asked participants two questions:
 - 1. Provide three adjectives that describe an older relative.
 - 2. Provide three adjectives that describe someone over the age of 70.
 - Then we coded the data into either positive or negative adjectives based on their responses.
-

Hypothesis

We predicted that participants will provide more positive responses when describing an older relative than when describing the geriatric population as a whole.

Data analysis

What methods did you use in your experiment?

- We considered the responses to each question.
- We considered the way people may act in regards to the questions.
- We understood that this research is a descriptive survey and includes data based on the judgments of others.

Results

- As we thought about our hypothesis, we discovered that the people surveyed had more positive responses about the general geriatric population and a less positive responses about their older relatives.
- We considered that these reactions could be based negative interactions with older relatives.

Data

Question 1:

Negative: 2

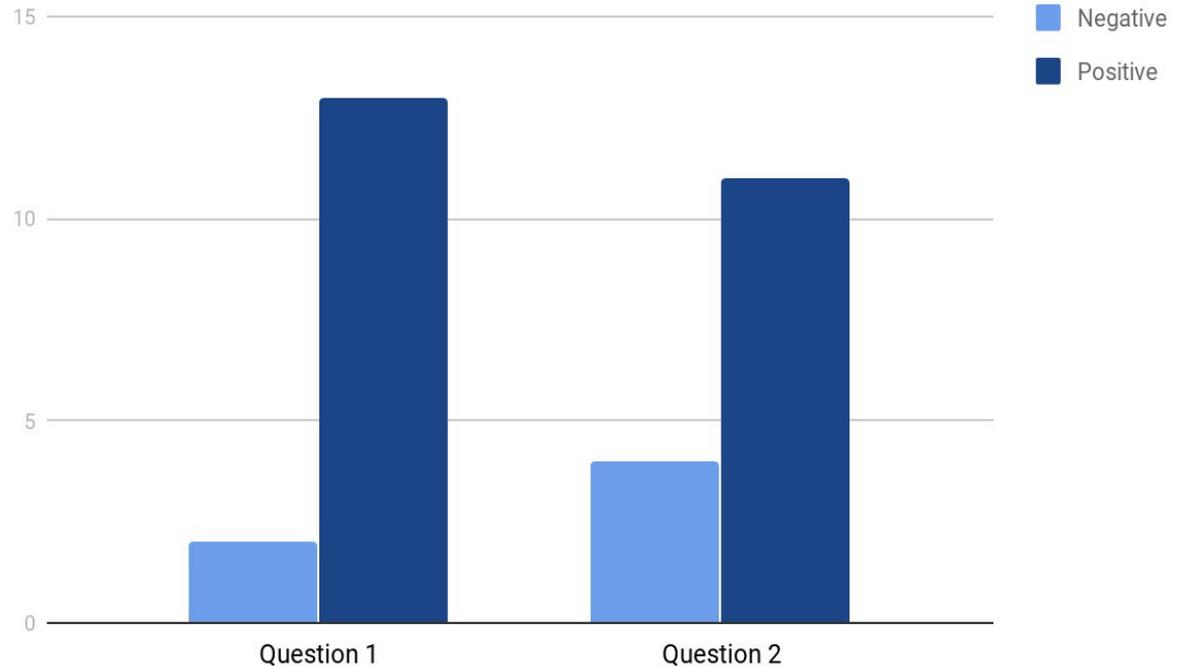
Positive: 13

Question 2

Negative: 4

Positive: 11

Points scored



Interpretation of data

- Based on our interpretations of the data, we found that Question Two elicited positive responses, most likely due to participant's positive personal interactions with the geriatric population.
- However, Question One elicited more negative responses than Question Two. This could be due to the respondent's personal negative experiences with older relatives.
- Nevertheless, more positive than negative adjectives were used to describe the geriatric population.



Conclusion

- Based on the research we conducted on the economic repercussions of progressive diseases such as, Parkinson's and Alzheimer's, we feel that it is important for us as nursing students to understand the socio economic challenges that the geriatric population faces.
- In addition, from our survey, we realized that social interactions with members of the geriatric population can shape they way the youth perceive older people. Thus, we found it equally as important to educate ourselves about this population so we can provide the best care possible.

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