

Book Review

Kropf, N. P., & Cummings, S. M. (2017). *Evidence-based treatment with older adults: Theory, practice, and research*. New York, NY: Oxford University Press.

Reviewed by Ann M. Callahan, Ph.D., LCSW
Eastern Kentucky University

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Demographic shifts over the next thirty years will reflect the “Graying of America.” A majority of baby boomers, people born between 1946 and 1964, will be over 85 years old (Ortman, Velkoff, & Hogan, 2014). This means that one out of four people will be elderly (Kropf & Cummings, 2017). Birth rates have decreased and people are living longer due to advances in medicine, occupational safety, and public health campaigns (i.e., smoking cessation) (Ortman, Velkoff, & Hogan, 2014). Given the size and composition of the baby boom generation, social service and other professionals will need to be prepared to address the demand for services that are specific to older adults (Kropf & Cummings, 2017). Professionals will also need to be sensitive to the implications of culture, race, and ethnicity as well as immigration status as baby boomers are more diverse than previous generations (Ortman, Velkoff, & Hogan, 2014). Toward this end, the book *Evidence-based Treatment with Older Adults: Theory, Practice, and Research* provides a foundation for the effective delivery of social and psychotherapeutic services.

The book is divided into three parts with the first part (Chapters 1 and 2) presenting an overview of later life issues, the second (Chapters 3-12) evidence-based interventions, and the third (Chapters 13 and 14) challenges in implementing evidence-based treatment. The first part addresses the demographic trends including diversity issues as well as potential medical, mental health, and social issues later in life. This includes basic suggestions for conveying respect (i.e., formal address) rather than defaulting to stereotypes (i.e., terms of endearment) in

approach. The second part addresses the contexts for geriatric care with issues that can emerge while living in a shared household or alone with the support of formal and informal caregivers. Then challenges in transitioning to communal living, such as an assisted living facility or a nursing home, are addressed with an emphasis on care coordination and recognition of a clients’ rights as a resident. Lastly, issues associated with acute care in a hospital for medical care or hospice for end-of-life care are discussed with recommendations for preserving a client’s life quality.

The second part of this book presents a pairing of chapters that describe a practice approach followed by a chapter that reviews research on that approach. Only practice approaches that have been implemented and tested with older adults or with a substantial number of older adults are discussed. These approaches include cognitive behavioral therapy, problem-solving therapy, motivational interviewing, psychoeducational and social support interventions, and life review and reminiscence. In the chapters on each approach, the authors describe the theoretical foundation and application with reference to a case example that demonstrates the practice approach. Then the subsequent chapter presents the results of meta-analyses and systematic reviews on that practice approach. The results are collated in a table which outline study components (i.e., type of study, participants, findings, etc.). The authors conclude each chapter by summarizing the strengths and weakness of each approach to help the reader consider potential efficacy with older adults.

The final part of the book attends to the challenges associated with manualized intervention. Here the topic of treatment fidelity provides a fascinating review of issues to consider both as a clinician and a researcher. Challenges and strategies to enhance treatment fidelity are provided. Again, the authors demonstrate the importance of understanding research evidence when applying a particular practice approach, but caution that some variation may be necessary to accommodate the specific needs of older adults or contextual limitations. The authors provide examples to demonstrate how minor adaptations can be employed and still preserve the integrity of an approach. The authors conclude with a chapter on what they identify as being promising interventions but require further testing with older adults. They review mindfulness-based stress reduction and behavioral activation, which is described as a variation of cognitive behavioral therapy used to modify the environment or tap into natural rewards that reinforce behavior.

Evidence-based Treatment with Older Adults: Theory, Practice, and Research provides a comprehensive review of evidence-based practice with older adults. Kropf and Cummings demonstrate why social workers must be able to understand research and use best evidence to inform practice. They also translate their findings so that practitioners are able to understand treatment implications. The authors do this by dividing chapters between practice approach and related research; however, this treatment ends up creating an uneven flow between these chapters which extends throughout the narrative. Perhaps, this style of presentation also reflects how challenging it can be to integrate practice and research. Nevertheless, this book reveals the strengths and weaknesses of the literature and addresses how issues of fidelity might influence treatment efficacy. This book ultimately serves as an excellent resource for gerontological social workers and other practitioners, particularly those on the graduate level. It demonstrates how to critically analyze research, which helps to build skills beneficial for post graduates as well.

Reference

Ortman, J. M., Velkoff, V. A., & Hogan, H. (2014, May). *An aging nation: The older population in the United States*. Retrieved from <https://www.census.gov/prod/2014pubs/p25-1140.pdf>