Your approach during care can either increase or decrease motivation to maintain cognitive and emotional health and adaptive behaviors and, if ill, to participate in treatment or rehabilitation. Acute illness at any age influences aging behavior, affective responses, and cognitive function. These aspects of the person are also affected by chronic illness and pain. Careful assessment is essential. Helpful approaches toward successful aging and health promotion include (90, 141):

1. Set a definite goal with the client to embrace the aging process.
2. Reinforce and support the basic drives or character/personality structure of the client. Do not label the preoccupation with achievement or the persistence in practice as obsession or compulsion. Realize that the former “toughness” or “survival traits” of the person are now an asset, not to be diminished by your traditional approach.
3. Convey caring, be kind, and share “power” or control with the client rather than trying to be the boss. In turn, the client will feel, and be, more “cooperative.”
4. Encourage or reinforce with attention the person’s behavioral attempts as well as achievements.
5. Use humor gently and appropriately to release tension or encourage. Do not use sarcastic humor.
6. Convey a positive attitude that the person can achieve the goal, at least to the extent possible. Avoid negative comments, an attitude that “puts down” the client, or nonverbal behavior that conveys you do not perceive capability.
7. Avoid a power struggle, insistence on the client doing an activity your way, or domination of the client. Let the person go at his or her own pace and in a way that is safe but will still achieve results.

Hoarding: Personal Environmental Adaptation

Hoarding may be an adaptive behavior, although it is usually regarded as a disagreeable, messy, and unsafe characteristic of the elderly or a sign of illness or dementia. (It may be maladaptive behavior signaling illness at any age.)

The elderly may hoard and collect various or specific items for various reasons (8, 96, 191):

1. It may be a lifelong habit. In the younger years the person was considered a “pack rat,” or someone who always had what was needed in an emergency, or “someone who had everything handy.” The behavior, if part of the person’s self-concept and previously rewarded, is likely to continue to be valued and practiced.
2. It may be the mark of a creative, intelligent person, an artist, or a former teacher who keeps supplies that can be used in the vocation or hobby.
3. The articles that are saved, potentially useful or likely to be used, represent security, especially if the person (a) lived through the Great Depression and World War II and remembers severe scarcity or poverty, and will not waste; (b) was an immigrant or displaced person from another country; or (c) buys food or supplies in large quantities to save money, even if not used.
4. The articles may be symbolic of a happier past or represent a future.
5. The gathered objects may represent a sense of control.
6. The articles may compensate for loneliness and recent losses or be a way to keep in touch with family or friends now dead or relocated.
7. The collecting, observing, handling, and sorting of objects may be a pleasant diversion, especially for the old who are less socially active.
8. The person may have difficulty categorizing objects or differentiating important from worthless items.
9. Articles may be kept close at hand rather than stored in cabinets or closets to save energy in retrieving them when needed.
10. When cognitive impairment occurs, the person may be unable to discriminate between needed and unneeded objects.