## Depression Seminar Survey Results

- On September 28th, the University of Maine's Clinical Psychology Program along with AgingME GWEP hosted a webinar in Distinguishing Cognitive Problems from Depression in Older Adults
- Twenty-three respondents responded to a survey about their learning outcomes, previous experience in the training topic, and suggestions for improvement and for future training topics
- All respondents indicated that they agree or strongly agree that they achieved all learning outcomes, including presentation of depression in older adults, differences between depression and cognitive problems, and resources and referrals for older adults with depression
- Attendees selected the content, presentation, and knowledge of the presenter as some of the most valuable aspects of the training
- Suggestions for improvement included a longer training session, more in-depth information, and case presentations or vignettes

As a result of participating in this seminar I gained knowledge in the following outcomes: (N=23)
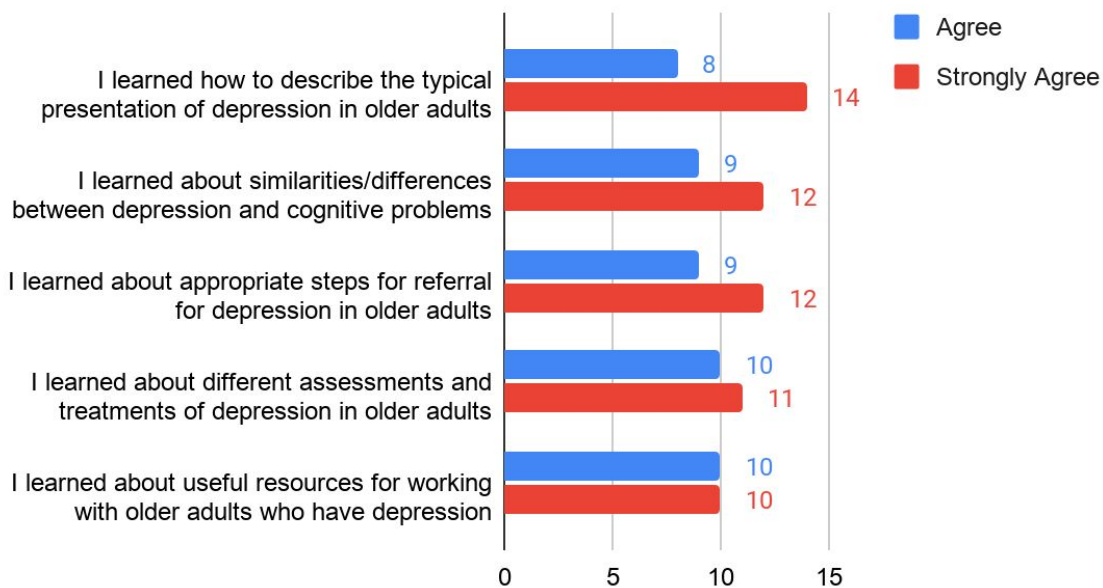
How much experience do you have working with older adults who have depression? (N=23)

- Quite a bit — 4.5%
- Some — 18.2% — 4
- None — 31.8% — 7
- A lot — 18.2% — 4
- A little — 27.3% — 6
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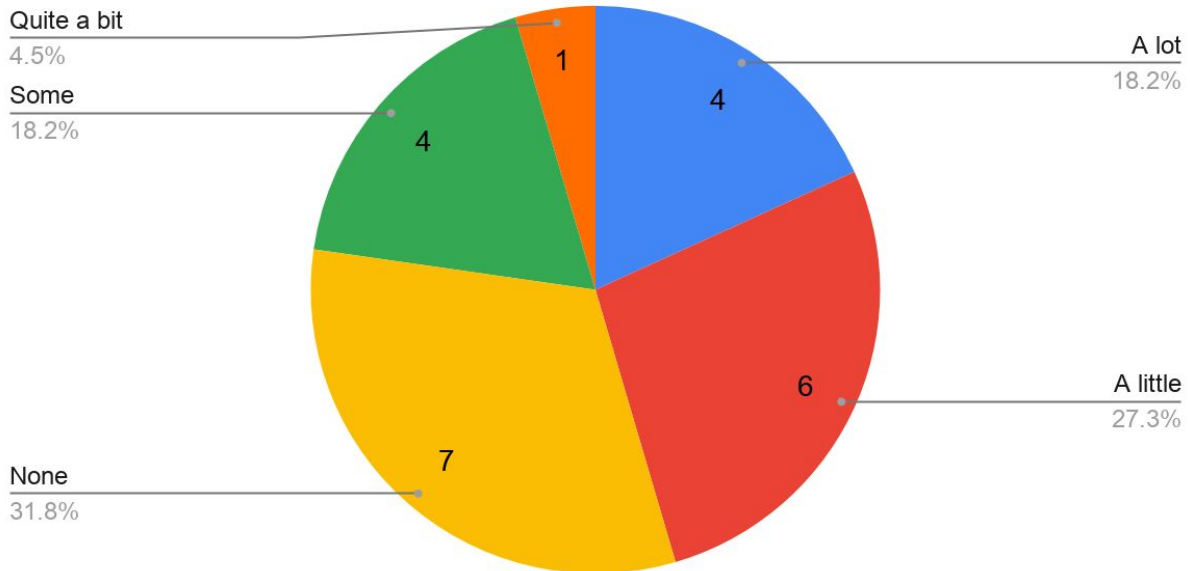
Q3. What did you like best or find most useful about this seminar?

Discussion
- The discussion around asking questions to avoid stigma.
- I really liked the discussion around telehealth and promoting quality of life
- The discussion surrounding cognitive versus depression functions for older adults
- recommendations for assessments and therapy tools

Presentation
- I appreciated the presenter's rate of speech. Speaking slowly and allowing for silence helps folks to process what is being said.
- I thought the presentation was very comprehensive and you also had a great presentation speed/voice
- The powerpoint presentation was well done
- It was very clearly outlined for someone who has little experience with this population and also for the general public. It was a lot of information, but was not presented in an overwhelming or rapid way.
- All of the information was presented in a way that was understandable! I feel like I learned so much, and the presentation was very organized and had a very nice flow.
- The depth of knowledge of the presenter

Content
- I like how it added in benefits and barriers to telehealth. It was interesting.
- Broadly useful topic addressed very well
- I appreciated the information
- The cognitive information

- I did not know there are differences between early onset and late onset depression.
- Research-based clinical information
- I appreciated the information
- Thinking about how to approach questions about it due to stigma

Q4. What would you add or change about the seminar to make it better?

- It might be fun/informative to add a mock patient description to show an example of how symptoms might present. This might also lend itself well to showing the differences between depression and cognitive problems in this population.
- I felt there needed to be more detail and specifics about depression vs cognitive changes
- Perhaps a bit more detail in each area. Time certainly would have allowed for that. There needs to be more of a distinction between depression and grief. Most folks do not realize there is a big difference.
- I would have maybe made it a bit longer so that more information could have been delivered and exchanged among other professionals who attended.
- More in depth information about cognition in older adults
- I think a little bit more background information/specific criteria on the assessments for geriatric depression would have been interesting, but that's really minor.
- Include more details about the topic and less about telehealth.
- Clinical vignettes/case presentations

Q5. What aging-related topics are you interested in learning more about?
- I am interested in learning about long term use of HRT.
- Social interactions, social roles, interpersonal behaviors
- LGBTQ issues in older adults
- More about the agencies and support that the elderly might have in certain areas. Maybe break it up by county
- Benefits of activity
- End of life decisions/dilemmas
- MCI, subjective cognitive decline, AD biomarkers, caregiver stress
- Late life psychosis
- Neuropsychology
- More on differential diagnosis for the three D's