**Case study 2: Alex**

**Alex** is a 74 year old widower (and retired postman) whose wife **Grace** died a year ago.

**Alex** has two sons, John who lives several miles away and is divorced, his son **Martin** (11 years old) lives with his mum and step-dad in Leicester now. A long-distance lorry driver; **John** is away for long periods, but visits his dad ‘whenever I can…’

**Terry**, a graduate, lives in England with Maureen his wife, Sarah age 13 and Darren age 11. **Terry** has tried to persuade **Alex** to come and stay several times since mum died, but **Alex** hasn’t been up for it. **Terry** worries and he calls regularly, but all he gets back is ‘Sure I’ll be fine son, anyway you’ve got your own to be looking out for now …’

**Alex** enjoys reading and gardening, although the arthritic pain in his hips makes it a slog. **Alex** is a keen bowler, but hasn’t been for a while either. A couple of pals from the club called round in the first few weeks then phoned a few times, but **Alex** just kept saying ‘you guys go ahead without me, I’ll be back when my hips sorted out, don’t worry about me…’ The calls tailed off as time passed…

The pain is bad, but **Alex** knows he can still walk, he just can’t be bothered. He can’t even concentrate on reading; **Alex** just can’t put his finger on why…

**Alex** see **Dr Singh**, his GP, who reviews the pain medication, recommends gentle exercise and tells **Alex** to come back if the pain does not improve.

**Alex** gazes out of the window as **Dr Singh** is talking and he asks. ‘So how are things? It looks to me like you have lost some weight, are you eating **Alex**?’ **Alex** pauses for a few seconds before responding ‘I’ve not felt myself since Grace passed on. Life feels a bit of an effort, but I’m okay, I can still get out for my messages; and there is plenty of folk with bigger worries than me…’
**Dr Singh** looks concerned, ‘You’ve been through a lot this past year **Alex**, and as you say yourself you aren’t getting any younger. But we could try some anti-depressants if you think they might help to elevate your mood?’

‘Sorry **Dr Singh**, I’m not taking happy pills, what if I get addicted!’ retorts **Alex**.

‘Okay **Alex**, you’re the boss, but if it gets any worse do come and see me again, and please remember to take the painkillers regularly and not just when you get sore - that should help keep the pain at bay.’

**Alex** assures **Dr Singh** that he will; and Alex leaves thinking the doctor is probably right enough. **Grace** has left a hole that can’t be filled, and he is getting older. Maybe he does just need to just get on with things…

**Questions**
As you work your way through Bridging the Gap, you will find prompts to return to this case study and consider questions relevant to the section.

**Section 1: Understanding Health Inequalities**
1. In what ways do you think Alex is at risk in terms of his health?
2. How do you think Dr Singh managed the consultation with Alex?
3. Would you handle the situation the same way? If no, what would you do in this situation?

**Section 2: Health in Scotland**
4. Scotland’s population is ageing. Do you see any implications for the health and social care services?

5. What implications do you think an ageing population has for
   - Government health and social policy?
   - Society more widely?
Section 3: Identity and Health

6. What about Alex’s expectations for himself, do you think he is right to accept things as they are?

7. Would it have made any difference to how Dr Singh’s handled things if
   • Alex had been 44?
   • Alex had no other family?

Section 4: Discrimination and Barriers to Equality

8. Alex is clearly sad, and struggling to cope. Do you think there are any barriers preventing Alex getting the kind of support he might need?

Section 6: Values and Principles, Policy and Practice

9. What do you think might help Alex? What would you suggest?