Weill Cornell Medicine Psychiatry

Psychology Grand Rounds





Thursday, December 11, 2025 12:00pm-1:00pm



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Elissa Kozlov, PhD

Assistant Professor
Population Aging Concentration Director



<u>Financial Disclosure</u>: Dr. Kozlov has no relevant financial relationship(s) with ineligible companies to disclose and DOES NOT INTEND to discuss off-label or investigational use of products or services.

Elissa Kozlov, Ph.D., is an assistant professor and the Director of Population Aging in the Department Health Behavior, Society, and Policy at the Rutgers School of Public Health. She received her doctoral degree from Washington University in St. Louis in clinical psychology and aging and developmental psychology. Following graduate school, she completed an internship in geropsychology at the Palo Alto Veterans Affairs Medical Center in Palo Alto, California. She then pursued a T32 fellowship at Weill Cornell Medicine in Behavioral Geriatrics. Dr. Kozlov focuses on improving psychological outcomes for older adults and adults with serious illness and their care partners. Dr. Kozlov completed a KL2 grant to pilot mHealth mindfulness therapy with caregivers of older adults with cognitive impairment to determine its feasibility, acceptability, and preliminary efficacy at improving quality of life and reducing caregiver stress, anxiety, and depression. She is currently funded by a K76 Beeson Career Development Award for leaders in clinical aging to study dyadic mHealth mindfulness therapy for older adults with serious illness and their care partners and an R34 from NIMH to adapt DBT for suicide prevention for older adults living with HIV to be delivered via Al-chatbot and video.

MENTAL HEALTH AND PALLIATIVE CARE

ABSTRACT

Psychological distress is prevalent among adults with serious illness and their caregivers, yet mental health remains underintegrated in palliative care delivery. This talk highlights a programmatic line of research aimed at alleviating psychological suffering at the end of life through systematic review, national survey, and intervention development. Meta-analytic findings indicate that palliative care interventions have limited impact on psychological distress, though variability in intervention type and delivery remains high. A national survey of over 700 hospice and palliative medicine clinicians revealed limited access to mental health consultation, few formal protocols for suicidality, and inconsistent use of validated screening tools. These structural gaps underscore the urgent need for scalable, evidencebased approaches. Novel interventions, including mHealth mindfulness programs for caregivers and seriously ill dyads, demonstrate feasibility and acceptability. Together, these studies illuminate pathways to integrate evidence-based psychological care into routine palliative practice and reduce avoidable suffering at the end of life.

LEARNING OBJECTIVES

- 1. Describe the prevalence and impact of psychological distress among adults with serious illness and their caregivers, and explain why mental health care is a critical component of high-quality palliative care.
- 2. Identify current gaps in psychological care within hospice and palliative care settings.
- 3. Evaluate emerging, scalable interventions that aim to improve psychological well-being and reduce disparities in access to mental health care for seriously ill patients and caregivers.

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