

## Getting Old is Not for Sissies...Mental Health Challenges in Older Adults

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## Presenter Biography

Keri Williams, MSSW, LCSW

- \* Outpatient Psychiatric Treatment Experience
- \* Behavioral Health Consulting and Management at UltraGroup Healthcare
- \* Hospice and Palliative Care Experience




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## Getting Old is Not for Sissies

### Objectives:

1. Identify challenges older adults have as they age.
2. Recognize the symptoms of depression and anxiety in older adults.
3. Identify warning signs for suicide among the elderly.
4. Determine strategies for assisting older adults transition to their new reality

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Aging is a gradual, life-long process, we ALL experience this phenomena. It occurs throughout life, not just at the end. The stages are different for everyone, yet similar.

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- ❖ Everyone that gets older goes through common adjustments and changes. While all of these adjustments are normal processes they also serve as risk factors for mental health issues.
- ❖ Depression and anxiety are not a normal part of aging.
- ❖ Depression and anxiety are not natural reactions to loss, chronic illness, or social transition.
- ❖ However, due to this societal belief, depression and anxiety often go untreated in adults 60 and over.
- ❖ Many symptoms of depression and anxiety are often overlooked by family members and doctors treating a geriatric patient because many of these symptoms can also be attributed to the aging process.

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## The Older Adult Population

- \* Since 1980, people 65 and older have increased from 11.3% to 16.8% of the total population.
- \* Looking at data on the total US population, there were 35,069,568 adults aged 65 and older in 2000.
- \* As of 2020, there were 55,659,356 adults aged 65 and older living in the US. (16.8% of the total population as compared to 1950 when those aged 65 and older made up only 8.2% of the total US population)
- \* By 2030, it is expected that the population of those 65 and older will reach 98.1 million or 23.6% of the US population.
- \* What does this mean for mental health care in general within the US, let alone within rural communities?

USA Facts. (2020). How is the population changing and growing? <https://usfacts.org/state-of-the-union/population/summary-source-long-term-medium-cp-short-term-campaign/10>  
 Statista. (2020). Baby Boomer population in the United States. <https://www.statista.com/statistics/1014000/baby-boomer-population-in-the-us/>  
 United States Census Bureau. (2020, June 25). 65 and Older Population Grows Rapidly as Baby Boomers Age. <https://www.census.gov/newsroom/press-releases/2020/65-older-population-grows.html>

## Aging and Health

- WHO defines health as “a state of complete **physical, mental, and social** well-being and not merely the absence of disease or infirmity”
- The pace of population ageing is much faster than in the past.
- The US is not alone in facing the major challenges of ensuring that health and social systems are prepared going into this demographic shift.
- Some of the more common conditions that we do see in older age include hearing loss, changes in vision such as cataracts, pain and osteoarthritis, COPD, diabetes, depression and neurocognitive disorders such as dementia.
- As people age, they are more likely to experience an increase in comorbidities as well.

Centers for Disease Control and Prevention and National Association of Chronic Disease Directors. The State of Mental Health and Aging in America Issue Brief: What Do the Data Tell Us? Atlanta, GA: National Association of Chronic Disease Directors; 2018.  
 World Health Organization. (2021, October 4). Ageing and Health. <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health---state-of-the-world-2020>

## Aging and Health

- \* Social environments are heavily influencing the health of older adults.
- Healthy lifestyle will improve not only physical but mental capacity
- Having a supportive physical and social environment enables individuals to do what is needed despite challenges including changes and losses.
- Resources that support recovery, adaptation and psychosocial growth are extremely important as a part of the public-health response to aging.

World Health Organization. (2021, October 4). Ageing and Health. <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health---state-of-the-world-2020>

## Common Challenges of Aging

- \* Loss of independence-No longer able to drive or live alone.
- \* Retirement-Difficulty adjusting, sense of self defined by work.
- \* Family changes-Often roles change.
- \* Loss of family members-Losing a significant other, friends, siblings.
- \* Social participation-Often declines due to health, transportation, independence.
- \* Physical changes and limitations-Potential health decline, illnesses, chronic pain, and possibly an increase in awareness of one's own mortality.

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## Mental Health in the US

- \* According to the NIMH, nearly one in five US adults live with a mental illness.
- \* In 2020, there were around 52.9 million adults living with mental illness and only 24.3 million (46.2%) received mental health services in the past year.
- \* We know that around 14.5% of these adults are age 50 and over.
- \* We also know that females tend to receive mental health services more often than males with it being 51.2% received by females versus 37.4 % of males having received.

National Institute of Mental Health (2022). Mental illness.  
<https://www.nimh.nih.gov/health/statistics/mental-illness>

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## Mental Health in the US – Most Common Conditions for Older Adults

- \* Mood disorders such as depression or bipolar disorder
- \* Anxiety
- \* Cognitive Impairments

Centers for Disease Control and Prevention and National Association of Chronic Disease Directors. The State of Mental Health and Aging in America Issue Brief 1: What Do the Data Tell Us? Atlanta, GA: National Association of Chronic Disease Directors; 2008.

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## US Mental Health in Adults 65 and Over - Depression

- \* Most prevalent for older adults
- \* Persistent sadness, withdrawal, sleep disturbances, physical discomforts and feeling "slowed down"
- \* Risk factors include widowhood, physical illness, less than a high school education, impaired functioning and heavy alcohol consumption.
- \* One of the most successfully treated mental illnesses
- \* More than 5% of Americans aged 65 and over will suffer from some form of depression.
- \* Depression should not be considered a normal part of aging. It is a medical illness that should be treated.
- \* The likelihood of depression occurring in older adults, increases with other physical health conditions.
- \* Symptoms of depression are often overlooked and untreated when they coincide with other medical illnesses or life events that are common in older adulthood.

Centers for Disease Control and Prevention and National Association of Chronic Disease Directors. The State of Mental Health and Aging in America Issue Brief: What Do the Data Tell Us? Atlanta, GA: National Association of Chronic Disease Directors; 2008. Mental Health America (2022). Depression in Older Adults: More Facts. <https://www.mhanational.org/depression-older-adults-more-facts>.

## US Mental Health in Adults 65 and Over - Depression

- \* Depressive disorders adversely affect the course and complicate the treatment of other chronic diseases.
- \* Older adults with symptoms of depression have roughly 50% higher healthcare costs than non-depressed older adults.
- \* Depression in older adults is associated with increase visits to the doctor and emergency room, increased use of medication and higher outpatient charges along with longer inpatient hospital stays.
- \* Depression is a significant predictor of suicide in older adult Americans.

Centers for Disease Control and Prevention and National Association of Chronic Disease Directors. The State of Mental Health and Aging in America Issue Brief 1: What Do the Data Tell Us? Atlanta, GA: National Association of Chronic Disease Directors; 2008. Mental Health America (2022). Depression in Older Adults: More Facts. <https://www.mhanational.org/depression-older-adults-more-facts>.

Major depression is reported to be 1-5% for those living in their own community

**This percentage increases to 11.5% in those living in assisted homes or health care facilities**



## US Mental Health in Adults 65 and Over - Anxiety

- \* Among the most prevalent mental health problems faced by older adults.
- \* Often occurs alongside depression
- \* Often goes missed or underestimated in older adults due to the decreased likelihood for the older adult to report actual psychiatric symptoms versus physical complaints.

Centers for Disease Control and Prevention and National Association of Chronic Disease Directors. The State of Mental Health and Aging in America Issue Brief 1: What Do the Data Tell Us? Atlanta, GA: National Association of Chronic Disease Directors; 2008.

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## Recognizable signs of depression and anxiety in the Elderly

- \* Dramatic changes in mood
- \* Seems anxious or easily agitated
- \* Report no sense of purpose or reason for living
- \* Extreme worry over things/situations
- \* Appetite changes in which a loved one can notice a weight loss/gain within a month
- \* Too much or too little sleep almost every day
- \* Slowed or exaggerated physical movement that is recognizable to others
- \* Reporting guilt feelings
- \* Being unable to make common decisions on a daily basis
- \* Reporting thoughts of death, a plan, or an attempt of suicide
- \* Withdrawing from family and friends
- \* Increased use of alcohol or drugs

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## Effects of Depression and Anxiety

- \* Depression and anxiety can take a heavy toll on physical health and illness; which can increase recovery times and increase medical expenses.
- \* It prevents adults from enjoying the life they could have.
- \* Older adults who suffered from depression at a younger age are at greater risk for developing depression than those that did not experience depression at a younger age.
- \* Depression can contribute to suicide risks and is the main precipitator.

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## Suicide among the elderly

- \* The American Foundation for Suicide Prevention reported that people 85 and older have the highest suicide rate of any other age group at 19.3%
- \* Most common forms of suicide among the elderly are firearms (67%), poisoning (14%), suffocation (12%)
- \* Older adults are almost twice as likely as those under the age of 60 to use firearms as a means of suicide.

Centers for Disease Control and Prevention (2022). Disparities in Suicide.  
<https://www.cdc.gov/suicide/facts/disparities-in-suicide.html>.

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## COMPARISON

- \* For every 4 attempts of suicide made by those 65 and older at least 1 is completed as compared to 1 in 150 for younger people
- \* More than 5,000 older adults die of suicide per year
- \* 80% of those suicides are white men

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## Warning Signs for Suicide among the Elderly

- \* Talking about dying
  - \* "I have had a great life. If I die tomorrow, I am ready."
  - \* "Death would solve all my problems."
  - \* "I just want to die."
  - \* "No one would miss me if I died tomorrow."

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## Warning Signs cont.

- \* Looking for ways to kill themselves
  - \* Stockpiling pills (using multiple MD's or pharmacies)
  - \* Buying or requesting a firearm
  - \* Stealing knives from the kitchen/garage
  - \* Refusing medications/food

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## Prevention of Suicide in the Elderly

- \* Provide education on suicide prevention hot lines or local crisis lines
- \* Limit access to "means" such as firearms (Is this realistic and how best can it be implemented?)
- \* Focus interventions/services more on enhancing independent functioning, rather than taking more control (an elderly person who is able to maintain independence longer also maintains his/her sense of purpose.)
- \* Train staff in medical and non-medical settings to screen for suicide risk
- \* If "red flags" for depression or suicide are presented in the geriatric population, research states that quick intervention can decrease the suicide significantly.

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## Rural Demographics

- \* In the U.S., there are approximately 60 million people living in rural areas (20% of the US population).
- \* More than 25% of Americans 65 and older live in rural areas.
- \* Rural living brings higher rates of chronic illnesses, disability, and poverty, along with lower rates of healthy behaviors.
- \* Rural living brings less access to healthcare overall and a larger percentage overall of uninsured.
- \* Migration of younger individuals to cities
- \* Struggling small businesses
- \* Fewer financial resources in local-government
- \* Higher suicide rates
  - \* Greater access to firearms, higher rates of drug and alcohol use and fewer health-care providers and emergency medical facilities (p. 63).

Arbore, P. (2019). Suicide prevention among rural older adults. *Generations/Rural Demographics*, 43(2), 62-65.

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## Rural Demographics

- \* Physical health intertwines with mental health in older adults
- \* “When farmers got older, their children often were not interested in farm life and moved away. For an older farmer to experience a loss of dexterity and mobility, increased aches and pains, loneliness and social isolation, and to face approaching death, all of these challenges can lead to a host of mental health problems, including undiagnosed depression and-or anxiety”.

Arbore, P. (2019). Suicide prevention among rural older adults. *Generations*, 43(2), 62-65.

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## Challenges in Rural Communities

- Availability and Accessibility
  - \* Few, if any, providers (Psychiatric, SW, Counseling, etc.)
  - \* Specialization in geriatrics
- \* Stigma and other Negative Attitudes
- \* Ability to Identify Psychological Needs
- \* Lack of Referrals/Collaboration
- \* Distance and Costs
  - \* Physical and Financial Service Accessibility in rural communities
  - \* Insufficient insurance coverage
  - \* Lack of Transportation
- \* Understanding of Types of Services/Providers
- \* Self-Sufficiency – fierce attachment to independence and autonomy
- \* Erosion of anonymity (Arbore, p. 64).

Knight, B. C., & Winterbottom, S. (2000). Rural and urban older adults' perceptions of mental health services accessibility. *Aging & Mental Health*, 4(6), 578-584.

Arbore, P. (2019). Suicide prevention among rural older adults. *Generations*, 43(2), 62-65.

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## Challenges in Rural Communities

- \* COVID-19
- \* Time, Resources, and Expertise
  - \* Unequipped staff must rule out medical conditions that can produce psychiatric symptoms
  - \* Many symptoms of depression and anxiety are often overlooked by family members and doctors treating a geriatric patient because many of these symptoms can also be attributed to the aging process.
- \* Social Isolation and Loneliness
- \* Opioid Epidemic (Benson, 56, 58)
- \* Weather Restrictions

Huber, J. (2022). Mental Health Services Under Strain in Rural America.

Arbore, P. (2019). Suicide prevention among rural older adults. *Generations*, 43(2), 62-65.

Benson, W., Kuehn, K., & Weirich, M. (2019). Why Are Rural Older Adults Turning to Opioids? *Generations*, 43(2), 55-61.

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## Effective Strategies to Assist the Aging Population in Transition

C.O.U.R.A.G.E.

It takes "COURAGE" for the aging population to adapt and survive the changes.

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## Effective Strategies to Assist the Aging Population in Transition

### How Can We Help

- \* C is for CAREFULLY choosing our words
- \* O is for OUTREACH (give hands-on support)
- \* U is for UNDERSTANDING
- \* R is for RESPECT (don't force, build trust)
- \* A is for ADJUST (your own expectations)
- \* G is for GETTING it
- \* E is for ENGAGE (include the person fully)

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## How Do We Address Barriers and Needs

- \* Education – But who?
- \* Collaborate/Refer
- \* Increase awareness
- \* Create Conversations
- \* Provide Options

Knight, B. G., & Winterbotham, S. (2020). Rural and urban older adults' perceptions of mental health services accessibility. *Aging & Mental Health*, 24(6), 978-984.  
Arbore, P. (2019). Suicide prevention among rural older adults. *Generations*, 43(2), 62-65.

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## Educate

- \* Older Adults
- \* Primary Care Providers/General Practitioners and other providers–
  - \* Recognize role as gatekeeper
  - \* Opioid epidemic – educate on appropriate use, implementing opioid prevention and treatment campaigns, implementing prescription-drug monitoring programs
- \* Mental Health Providers
  - \* Mental health and medical professionals should receive continuing education on issues related to older adults living in rural communities.
- \* Your Community
- \* Yourself

Knight, B. G., & Winterbotham, S. (2020). Rural and urban older adults' perceptions of mental health services accessibility. *Aging & Mental Health*, 24(5), 928-946.

Arbore, P. (2019). Suicide prevention among rural older adults. *Generations*, 43(2), 62-65.

Benson, W., Kuehn, K., & Weirich, M. (2019). Why Are Rural Older Adults Turning to Opioids?. *Generations*, 43(2), 55-61.

## Collaborate/Refer/Network

- \* We can enhance efforts to prevent suicide in rural areas by increasing/improving the collaborative efforts among multiple stakeholder
- \* Recognize, Respond, Refer
- \* Network to develop key partnerships in the community

Knight, B. G., & Winterbotham, S. (2020). Rural and urban older adults' perceptions of mental health services accessibility. *Aging & Mental Health*, 24(5), 928-946.

Arbore, P. (2019). Suicide prevention among rural older adults. *Generations*, 43(2), 62-65.

## Increase Awareness

- \* Community education
- \* Marketing strategies
- \* Social Media
- \* Networking
- \* Presentations
- \* Educational Campaigns
- \* Event Participation
- \* Education Series

## Provide Options

- \* Outpatient Services
- \* Intensive Outpatient Services
- \* Inpatient Services
- \* Substance Use Disorder Treatment Options
- \* Case Management Services
- \* Integrated Behavioral Health
- \* Trained ED Staff
- \* Mobile Crisis

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## Outpatient Services

- \* Services geared toward older adult age group
- \* Treatment for depression, loneliness and loss
- \* Focus on building social networks and coping with change
- \* Medication Management
- \* Psychotherapy
- \* Nursing

Park, S., Shin, O., Lee, S., & Baek, J. (2021). Multi-Dimensional Social Relations and Mental Health among Rural Older Adults. *Research on Aging*, 43(5-6), 191-202.

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## Intensive Outpatient

- \* Group Psychotherapy as an effective model
- \* More intense level of treatment
- \* Economic advantage
- \* Interpersonal environment
- \* Psychosocial needs and structure
- \* High rates of recovery with adequate treatment

Smith, R., Wuthrich, V., Johnco, C., & Belcher, J. (2021). Effect of group cognitive behavioural therapy on loneliness in a community sample of older adults: a secondary analysis of a randomized controlled trial. *Clinical Gerontologist*, 44(4), 439-449.

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## Substance Use Disorder Treatment

- \* Medication Assisted Treatment
- \* Church and Community Based Groups
- \* Support to end small community stigma

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## Case Management Services

- \* Linkages to services specific for older adults
- \* Encourage collaboration and networking
- \* Care Coordination

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## Other Options Mentioned

- \* Inpatient Services
- \* Integrated Behavioral Health in Primary Care (IBHPC)
- \* Trained ED Staff
- \* Mobile Crisis

Huber, J. (2022). Mental Health Services Under Strain in Rural America.

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## Why Invest?

- \* People are suffering
- \* Longer life spans and aging baby boomers
- \* Significant number of older adults living with a mental health challenge

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## Take Away

- \* Understand what is happening
- \* Recognize these individuals in your communities who are suffering with emotional pain
- \* Respond to their needs
- \* Refer them to those that can help

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## QUESTIONS?

If you have any questions regarding this information, please contact  
[kwilliams@ultragrouphealthcare.com](mailto:kwilliams@ultragrouphealthcare.com)




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## References and Recommended Resources

- Mental Health America (2022). Depression in Older Adults: More Facts. <https://www.mhanational.org/depression-older-adults-more-facts>.
- National Institute of Mental Health (2022). Mental illness. <https://www.nimh.nih.gov/health/statistics/mental-illness>.
- Park, S., Shin, O., Lee, S., & Baek, J. (2021). Multi-Dimensional Social Relations and Mental Health among Rural Older Adults. *Research on Aging*, 43(5-6), 191-202.
- Smith, R., Wuthrich, V., Johnco, C., & Belcher, J. (2021). Effect of group cognitive behavioural therapy on loneliness in a community sample of older adults: a secondary analysis of a randomized controlled trial. *Clinical Gerontologist*, 44(4), 439-449.
- Terlizzi, E. P., & Norris, T. (1921). Mental health treatment among adults: United States, 2020.
- United States Census Bureau. (2020, June 25). 65 and Older Population Grows Rapidly as Baby Boomers Age. <https://www.census.gov/newsroom/press-releases/2020/65-older-population-grows.html>.
- USA Facts. (2020). How is the population changing and growing? [https://usafacts.org/state-of-the-union/population/?utm\\_source=bing&utm\\_medium=soc&utm\\_campaign=ND-StatsData&msclkid=8d0cd9c654511e640cb2bb97a66f2bd2](https://usafacts.org/state-of-the-union/population/?utm_source=bing&utm_medium=soc&utm_campaign=ND-StatsData&msclkid=8d0cd9c654511e640cb2bb97a66f2bd2).
- World Health Organization. (2021, October 4). Ageing and Health. <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health>.

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