





Overview of Behavioral Health For Aging Information and Referral/Assistance Professionals

Marian K. Scheinholtz, MS, OT/L I and R/A Training Teleconference January 9, 2013





Goals of Presentation

- Increase participants' understanding of the definition of Mental Health and the relationship between Mental Health/Illness and Behavioral Health
- Increase participants' understanding of various Mental Health problems/needs
- Provide resources to participants to use with people in your communities



Mental Health

- More than absence of mental illness; some people are "mentally healthier" than others (About.com, 2005)
- How people think, feel and act in their daily life
- Way which people cope with everyday stress
- Good mental and physical health are important in every age and stage of life
 - even in the face of physical illness or adversity (Scheinholtz, 2010)



What is Behavioral Health?

- As defined by SAMHSA (2011)
 - a state of mental/emotional being and/or choices and actions that affect wellness
 - Substance abuse and misuse are one set of behavioral health problems
 - Other behavioral health problems include (but are not limited to) serious psychological distress, suicide, and mental illness
 - Such problems are far-reaching and exact an enormous toll on individuals, their families and communities, and the broader society.





Behavioral Health is Essential To Health



Prevention Works





Treatment is Effective



People Recover

Functional Aspects of Behavioral Health

- Characteristics of Behavioral (emotional and cognitive) Health
 - Ability to enjoy life
 - Resilience Able to bounce back and handle stress
 - Balance in life choices
 - Social vs. time alone
 - Work vs. Play
 - Flexibility versus Rigidity
 - Life skills that promote self actualization (realization of one's own potential, Maslow, 1954)

World Health Organization (WHO) Definition and Statistics

- A state of well being where the individual
 - realizes his or her own abilities
 - copes with the normal stresses of life
 - works productively and fruitfully
 - makes a contribution to his or her community
- Mental and neurological disorders are responsible for 12% of all disability adjusted life years (DALYs) lost due to disease and injury
- 25% of families worldwide have a person with a mental disorder - these are common problems experienced by many people across their life span



Depression

- Disorder of mood, thinking and life force
 - Symptoms include:
 - Sadness
 - Hopelessness
 - Difficulty concentrating
 - Suicidal thoughts, plan or actions
 - Weight change
 - Frequently co-occurs with another physical or mental disorder
- 1 in 4 women will have depression in her lifetime
- One of the most common mental disorders in older adults

Substance Misuse, Abuse and Addiction

- Illegal and legal substances may be used for purposes other than their "prescribed" or designated use
 - or in greater quantities
 - or in combination with other substances
- Substance use disorders may co-occur with other mental or physical health disorders
- Prescription misuse is a major concern for older persons

Depression and Anxiety in Older Adults

Neither depression, nor anxiety are a part of normal aging;

Being mentally healthy <u>is</u> a part of growing older

But depression and anxiety (worrying) are frequently experienced by older persons.



Behavioral Health Problems in Older Persons

- Older adults comprised 12 percent of the U.S. population in 2004, while people age 65 and older accounted for 16 percent of suicide deaths
 - Older adults die by suicide at a higher rate than the national average; these rates increase after age 64, primarily among white men
 - One in four persons aged 55 and over do experience behavioral health disorders that are not part of the normal aging process
 - Older adults are significantly less likely to receive any mental health treatment when compared to younger adults.

Traditional Treatment for Behavioral Health Disorders in Older persons

- Medications, counselling and psychotherapy may be used with some older adults
- Older adults may not be willing or able to utilize these modalities
- Stigma is a large factor for current generations
 - May change with baby boomers
- Medications may be limited by side effects and/or drug interactions



Evidence Based Practices/Programs For Mood and Anxiety Disorders in Older Persons

- Screening, outreach and engagement
 - SBIRT > BRITE
- Gatekeeper training and service linkage
 - Mental Health First Aid is one type
 - Senior REACH
- Healthy Ideas and PEARLS
- Primary care integration Health Homes
- Psychosocial Rehabilitation



Older Adult BH Programs Utilize:

Evidence-Based Practice Modalities

- Problem Solving Therapy
- Behavioral Activation
- Telehelp/telecheck Befriending
- Targeted Care management
- Development of social networks
- Activity Based Intervention



Institute of Medicine (2012) Reports severe Lack of BH Practitioners with training in geriatrics

- IOM Report 2012- Currently there is lack of trained providers to address behavioral health disorders in older adults; coming baby boomers will increase demands
- Methods must be used which are evidence based and produce positive outcomes
 - May arise from consumers, faith based communities or other social networks
 - Positive outcome May drive training opportunities and funds for professionals and para-professionals in geriatrics



SAMHSA and ACL/AOA Webinars and Issue Briefs

Information and examples of:

- misuse and abuse of alcohol in older adults
 - innovative screening, prevention, intervention, and treatment methods for alcohol and drug
 - critical behavioral health conditions and problems affecting older adults
 - prescription medication misuse and abuse,
 - suicide, depression, and anxiety
 - evidence-based prevention and treatment programs to address these problems
- Available at NCOA.org, NASUAD.org and AOA.gov



E CPR -- Emotional CPR

- Goal -- C = Connecting> P = emPowering> R = Re Vitalizing
 - Assist people experiencing an emotional crisis
 - Make this practice accessible to people around the world
- Training involves
 - deepening listening skills,
 - practicing presence, and
 - creating a sense of safety for the person experiencing a crisis.
- Trainings through the National Coalition for Mental Health Recovery (NHCMHR)
- http://www.emotional-cpr.org/index.htm



Resources

- SAMHSA Get Connected ToolKit- can order from SAMHSA website
- Evidence based Treatment of Depression in Older Persons - available to download from SAMHSA website
- SAMHSA NREPP (National Registry of Evidence Based Programs and Practices)
 - http://www.nrepp.samhsa.gov/Index.aspx



Thank you

Questions?

Marian.scheinholtz@samhsa.hhs.gov (240) 276-1911

