The recently released, Get Connected: Linking Older Adults with Resources on Medication, Alcohol, and Mental Health toolkit reports that with longer life expectancies, more older adults develop chronic diseases, and therefore more depend on prescription medicines. Although people 65 years of age and older comprise only 13 percent of the population, they account for almost 30 percent of all medications prescribed in the U.S. Many of these prescriptions are for depression and anxiety, and an estimated one in four older adults has symptoms of mental illness in a given year. Perhaps not surprisingly, more than 80 percent of emergency room department visits made by older adults result from adverse drug reactions.

The good news is that prevention and treatment of substance misuse and abuse and mental health conditions among older adults is possible. Local community organizations can play an important role in preventing, identifying, screening, educating, and referring at-risk clients for further care. These organizations can help clients lead more productive and healthier lives.

This topic is important because:

- Untreated alcohol, medication, and mental health conditions can significantly reduce the quality of life for older adults and cause serious health problems.
- Prevention and treatment are effective, particularly among older adults.
- Recognizing problems and overcoming discomfort in talking about difficult issues can improve health and quality of life.
- Many of these problems can be prevented with education and information.
- There is a need to decrease the prejudice and discrimination and isolation that results from mental health conditions.
- Older adults have a need for more mental health services that are accessible and affordable.
- Older adults are more likely to be prescribed pain medications, which could lead to improper use and addiction.

Seeking and Receiving Help

Generational differences in attitudes about substance misuse and abuse and mental health conditions make it difficult for older adults to seek help. In addition, health care providers often overlook these problems for the following reasons:

- Signs of treatable mental health conditions and substance misuse and abuse can mimic signs commonly attributed to aging.
- Many older adults are reluctant to seek help. Unfortunately, many would rather avoid the shame, prejudice, and discrimination associated with substance misuse and abuse and mental health diagnoses.
- Many people mistakenly believe that these problems are not preventable or worth treating in older adults.
- Many people mistakenly believe that symptoms of mental health conditions, such as sadness, depression, and anxiety, are a natural part of the aging process or are a grief response to retirement or loss of a spouse instead of a mental health condition requiring treatment.
- Personal stereotypes and bias may prevent health and social service providers from screening older adults.
- Health and social service providers may lack the information and training needed to effectively screen at-risk older adults and refer them to appropriate resources for assistance.
Integrating Physical and Behavioral Health for Older Adults

The Substance Use and Mental Health Services Administration (SAMHSA) and the Health Resources and Services Administration (HRSA) Center for Integrated Health Solutions released a report on “Growing Older: Providing Integrated Care for An Aging Population.” The report outlined the following:

The number of Americans age 65 and older increased by 25 percent from 2003 to 2013 and the next 25 years promise another 50 percent increase. From 2018 to 2038, the number of Americans age 85 and older is expected to more than double from 6 million to 14.6 million. Nearly one in five older adults have one or more mental health or substance use conditions. About 16 percent of women and 11 percent of men age 65 and older experience symptoms of depression. The majority of older adults’ behavioral health issues are identified and treated in primary care settings instead of specialty behavioral health settings.

Older adults are distinct from other populations in key ways:

- **Complex chronic health conditions.** Older adults are more likely than any other age group to have complex chronic health conditions, including mental health conditions, substance use disorders and cognitive impairments. About two-thirds of older adults have two or more chronic conditions.

- **Drug use and abuse.** Older adults receive a high proportion of prescription drugs in the U.S. due to increased likelihood of being prescribed long-term and multiple medications. Improper use is common, whether because of cognitive decline or attempting to save money by using their medications sparingly or taking another person's remaining medications. Additionally, commonly prescribed medications – opioids for pain and benzodiazepines used to treat anxiety and sleep disorders – are addictive and can increase the risk of falls and memory/retention issues affecting up to 17 percent of older adults. Co-morbid health conditions, age-related changes in drug metabolism; potential interactions with prescribed drugs, over-the-counter medications, dietary supplements and alcohol; and cognitive decline make drug misuse a special concern.

- **Health disparities.** Life expectancy and overall health have improved for most Americans in recent years, but factors related to economic status, race, sexual orientation, gender identity and rural status, as well as limited access to adequate housing and transportation services, keep many older adults from benefiting from these gains.

- **Safety concerns.** Individuals become more frail as they age and their risk of falls and injury increases. One in every three adults aged 65 or older falls each year and falls are the leading cause of both fatal and nonfatal injuries for older adults.

- **Loss is common.** Some older adults may experience loss. Loss of spouses, friends, physical functioning, independence, routine and sense of purpose affects overall health, including mental health and substance use. Health care providers and older adults often mistake depression for a natural response to aging. This can lead providers to not screen for or treat depression and older adults to not seek help.

- **Elder abuse.** Elder abuse is a serious problem, with an estimated 8 to 10 percent of older adults experiencing abuse, not including financial exploitation. Other estimates found that between one and two million older adults are mistreated each year, while only 27 percent of hospital emergency departments have elder abuse protocols (compared with 75 percent for child abuse).

- **Negative attitudes and discrimination toward people with behavioral health concerns.** These attitudes can be a barrier for all age groups. Generational and cultural differences may be a barrier to identifying concerns, treatment follow-through and active engagement in behavioral health treatment.

Local Recovery-Oriented Systems of Care, led by Ohio’s Alcohol, Drug Addiction, and Mental Health Boards are continuing to work toward ensuring that a full continuum of prevention through recovery support services are available for all members of their community, including older adults. Primary care providers, behavioral health agencies, community-based organizations, caregivers, neighbors, and friends play a vital part in supporting older adults’ primary and behavioral health. Effective communication, coordination, screening, and care-planning are all critical to ensuring that older adults are able to achieve and maintain health and productivity in their community.