



# Behavioral Health Disparities in Aging: Crisis Resources

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Grant#: 6H79FG000600-01M001

SAMHSA's mission is to reduce the impact of substance misuse and mental illness on America's communities.

1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TDD) • [www.samhsa.gov](http://www.samhsa.gov)





## Older adults with mental health issues are *more likely* than younger adults to have:

- Functional impairment<sup>1</sup>,
- Poor mobility<sup>2</sup>,
- Symptom burden<sup>3</sup>
- Longer hospital stays<sup>4</sup>
- Health issues that put them at risk for loneliness<sup>5</sup>

<sup>1</sup>Haigh et al, 2018; <sup>2</sup>Lampinen et al, 2003; <sup>3</sup>Abdel-Kader 2009; <sup>4</sup>Myers et al, 2012; <sup>5</sup>Ilgen et al, 2010

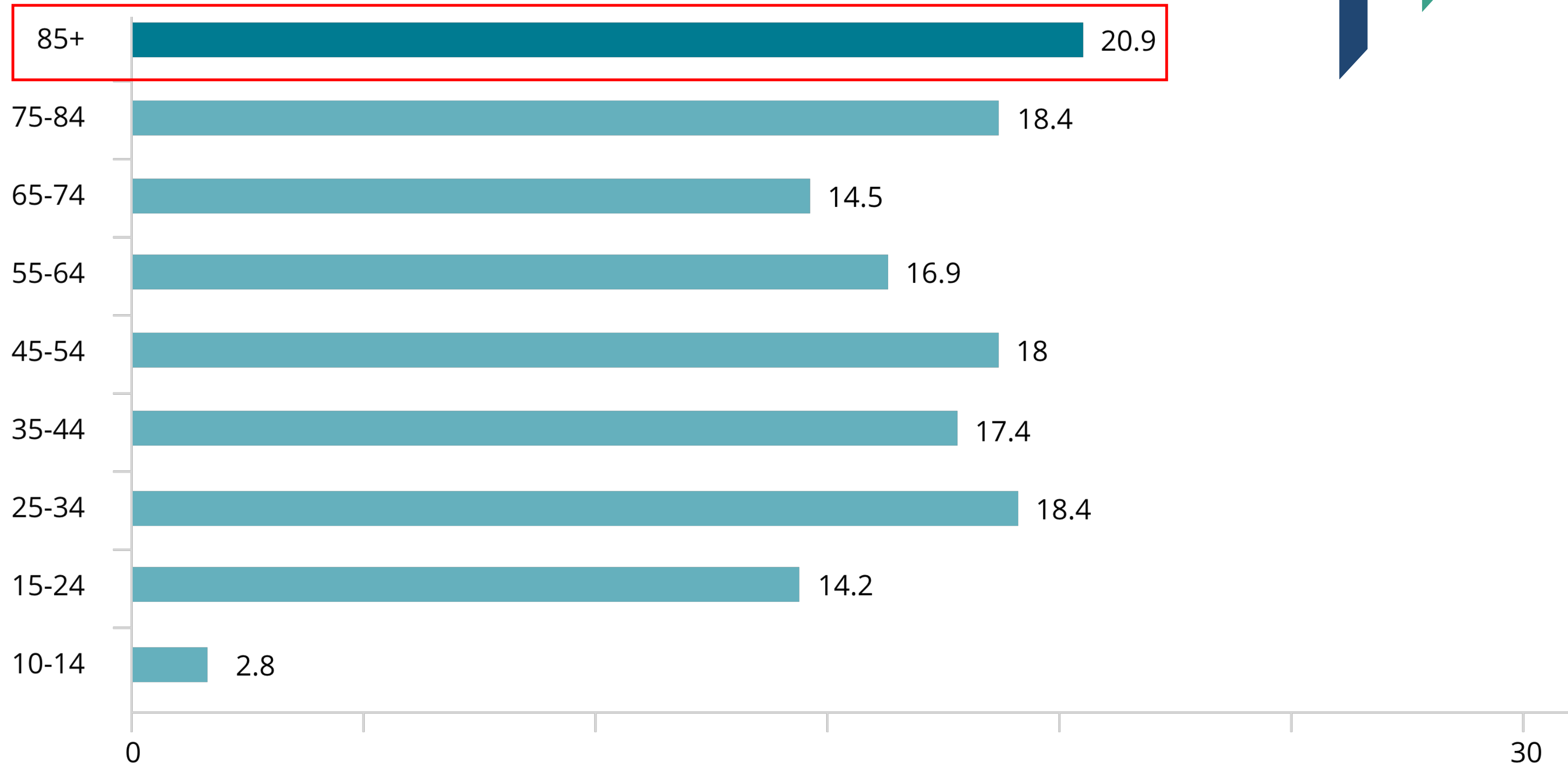


## Older adults are *less likely* than younger adults to:

- Pursue or engage in mental health<sup>1</sup> or SUD<sup>5</sup> treatment
- Receive adequate services<sup>2</sup> especially if Black or Latino<sup>3</sup>
- Survive a suicide attempt<sup>4</sup>

<sup>1</sup>Wang et al 2000; <sup>2</sup>Bartels et al 1997; <sup>3</sup>Jimenez et al 2013; <sup>4</sup>SAMHSA, 2015; <sup>5</sup>Huang et al, 2013

# Suicide Rates by Age Group per 100,000



YOU WOULDN'T  
BE OLD IF YOU  
JUST LIED ABOUT  
YOUR AGE LIKE A  
NORMAL PERSON



# Negative Self-Perceptions of Aging

- Greater disease burden, lower life satisfaction and greater loneliness than racism, sexism, and heterosexism/homophobia; effects grow over time<sup>1</sup>
- Increased functional impairment<sup>2</sup>
- Increased depression, anxiety, suicidal ideation<sup>3</sup>
- Increased mortality risk<sup>4</sup>
- *Positive SPA is protective*<sup>5</sup>

<sup>1</sup>Sutin et al, 2015; <sup>2</sup>Levy et al, 2009; <sup>3</sup> Levy et al, 2014; <sup>4</sup>Sargent-Cox et al, 2012; <sup>5</sup>Ng et al, 2016



7.5

Years added to your life with  
positive perceptions of aging

Levy, 2022



# QUICK START GUIDE - STARTING WITH

**Framing is the process of making choices about what to emphasize and what to leave unsaid. Here's a quick tour of themes to avoid and alternatives to advance**

# Why?

**Try:**

Talking affirmatively about changing demographics: "As Americans live longer and healthier lives . . ."

**Instead of these words and cues:**

"Tidal wave," "tsunami," and similarly catastrophic terms for the growing population of older people

**This matters because:**

Catastrophic language generates fears of irreparable doom and stifles motivation to work toward solutions. Focusing on realistic steps we can take to address the opportunities and challenges that comes from a growing population generates the momentum we seek.





**988**

SUICIDE  
& CRISIS  
LIFELINE

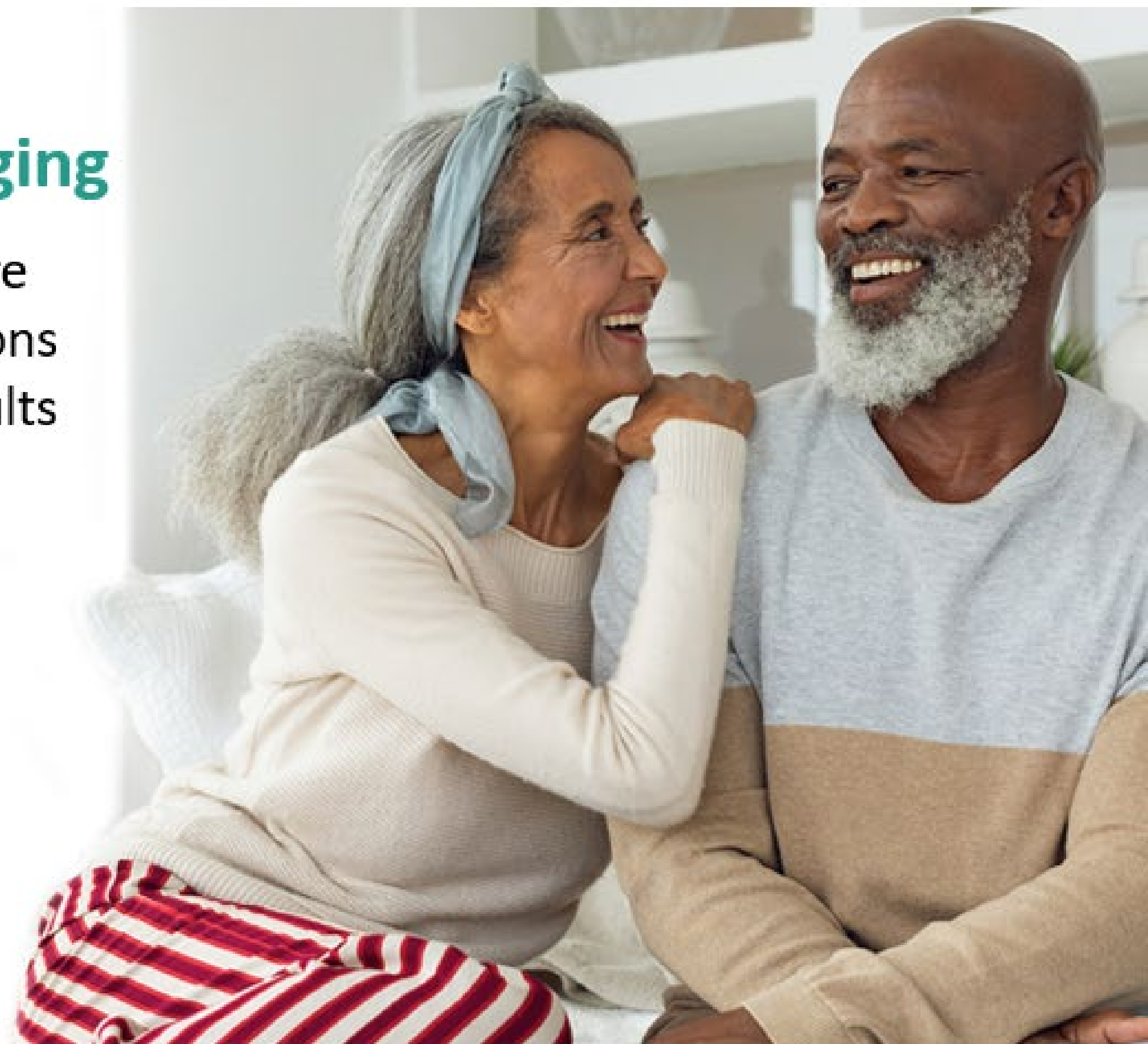
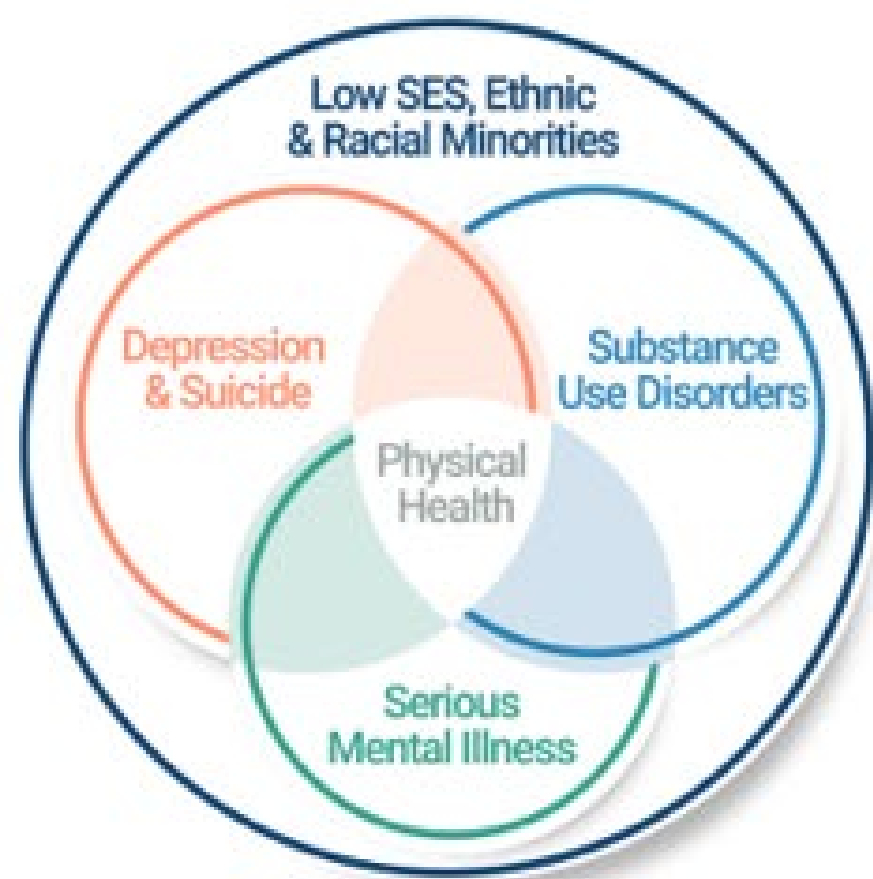
**In 2020, Congress designated the new 988 dialing code to operate through the existing National Suicide Prevention Lifeline.**

***SAMHSA***

Substance Abuse and Mental Health  
Services Administration

# E4 Center of Excellence for Behavioral Health Disparities in Aging

**Engage, Empower, and Educate** health care providers and community-based organizations for **Equity** in behavioral health for older adults and their families across the US.



988

# Older Adults In Crisis: Call Center Resources

Online educational modules developed for 988 and crisis call center staff



The introduction of the new 988 Suicide & Crisis Lifeline allows for a number that is easy to remember and easy to dial. As such, it is expected that calls will continue to increase, including calls by older adults and their family caregivers. Thus, call center staff must be prepared to understand and meet the needs of older adult callers.

## Modules available online:

- Ageism
- Anxiety & Depression
- Cognition
- Older Adult Life & Health
- Substance Use
- Suicide

## Each 15 minute module includes:

- Key information for crisis call center staff about unique aspects of older adult mental health and substance use
- Recommendations for addressing common issues
- A handy reference sheet for future use
- Resources to learn more



**Free continuing education is available for psychologists and social workers who complete all six modules.**

**Access modules here:**  
<https://www.catch-onlearn.com>

# Ageism

This handout  
crisis call ce



## Practical Strategies

- **Understand the attitude of the caller aging and older adults.** This information to help counteract damage resulting from negative beliefs related to aging.
- **Use a "teach back" or "close the loop."** If you are not sure if the caller understands what you are saying, ask them to repeat back their understanding of what you communicated in their own words (see below for Suggestive Say). This technique can help the caller confirm what was discussed and help you identify any misunderstandings that should be corrected.
- **Stay present and engaged in the conversation.** The conversation may be among the most important interactions the caller may have experienced. Listen carefully, demonstrate that you are listening, and convey understanding that the caller understands that you are concerned.

# Anxiety and Depression in Older Adults

This handout accompanies the [online module](#) for crisis call centers from the E4 Center on this topic



## Practical Strategies

- Know the risk factors and triggers for life anxiety and depression. Knowledge of risk factors and triggers can aid in the identification of older adults who may benefit from services and resources to reduce anxious feelings and manage distress. Because anxious people may be uncomfortable, many may be unwilling to seek health care if offered or seek other options to reduce their anxiety. Be aware that people from different cultures and age groups may describe the signs and symptoms of anxiety and depression in different ways.
- Ask about the beliefs of the caller regarding depression symptoms are determined.

# Cognition, Dementia, and Psychosis

This handout accompanies the [online module](#) for crisis call centers from the E4 Center on this topic



## Practical Strategies

- **Check in with yourself.** Your feelings (e.g., sadness) may impact your ability to address the caller's concerns. Most people believe that older adults and cognition (see [online module](#)).
- **Check your assumptions.** Conversations with older adults can be complex.

# Older Adult Life and Health



# Substance Use in Older Adults

This handout accompanies the [online module](#) for crisis call centers from the E4 Center on this topic



# Suicide

This handout accompanies the [online module](#) for crisis call centers from the E4 Center on this topic



Older adults can be very complex. What the person is experiencing. Is the person speaking abnormally or appearing to be using substances, dementia, delirium, stroke... the list goes on. Consider whether it's appropriate to discuss suicide with the caller.



## Key

- Wh
- gre
- S

# Upcoming E4 Center Events



## Foundational Competencies in Older Adult Mental Health Online Certificate Program

The growing population of older adults presents a unique opportunity for mental health professionals to expand clinical practice and experience deeply meaningful clinical work.

This peer-reviewed, 14-hour online certificate program provides foundational knowledge in older adult mental health for health care providers who work with older adults.



<https://bit.ly/MHcertificate>



## Depression in Older Adults: Clinical Characteristics and Innovative Psychosocial Strategies

Patrick J. Raue, PhD

Wednesday, June 7th

12 – 1:30pm CST

# Register Now!

6th Annual Older Adult Mental Health Awareness Day Symposium

May 11, 2023

CEUs offered for multiple disciplines

