SAMHSA/CMHS

Older Adults Mental Health
Targeted Capacity Expansion
Grant Program

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Agenda for Today’s Presentation

• Background - SAMHSA and the Older Adults Mental Health Services Program
• NASMHPD Technical Assistance Center
• Evidence Based Practices for Older Adults Mental Health
• Current Program Grantees and Results of Technical Assistance
Mental Illness in Older Adults

- Mental illness – diagnosable disorder – continuum of symptoms
- Older Adults – age range for SAMHSA program
  – over 60 years of age
- By 2030, number of older adults with major mental illnesses projected to reach 15 million
- Older adults comprise about 12% of U.S. population, yet account for nearly 17% of all suicides
Mental Illness in Older Adults

- Depression, anxiety and substance misuse are not part of “normal” aging; often are associated with:
  - Chronic physical health conditions
  - Loss of spouse
  - Loss of sensory or other physical abilities and independent living skills
  - Re-emergence of response to earlier life trauma

- Results/Costs – higher levels of care needed (e.g., nursing home); disability; mortality
Improvements in Behavioral Health Services for Older Adults Are Needed

- Older adults receive poorer mental health care than younger adults, or older adults with other health conditions
- Barriers
  - Access-ibility
  - Fragmented services
  - Quality of Care
  - Poorly trained workforce
  - Discrimination
  - Poor recognition of illness state
  - Lack of help seeking behavior
Substance Abuse and Mental Health Services Administration (SAMHSA)

- **SAMHSA** - agency of U. S. Department of Health and Human Services
  - **Center for Mental Health Services (CMHS)**
  - **Center for Substance Abuse Prevention (CSAP)**
  - **Center for Substance Abuse Treatment (CSAT)**
SAMHSA

• Reduce impact of substance abuse and mental illness on America’s communities
  – Prevention works, treatment is effective, people recover
  – Behavioral health services
    • Improve overall health status
    • Reduce healthcare and other costs to society
  – Continued improvements provide cost effective opportunity to advance and protect Nation’s health
SAMHSA Strategic Initiatives

• Prevention of substance abuse and mental illness
• Violence and Trauma
• Military Families – Active, Guard and Veteran
• Housing and Homelessness
• Jobs and Economy

• Health Insurance Reform Implementation
• Health Information Technology for BH Providers
• BH Workforce in Primary and Specialty Care Settings
• Public Awareness and Support

**Goal 2** - Mental Health Care Is Consumer and Family Driven.

**Goal 5** – Excellent Mental Health Care is Delivered and Research is Accelerated.

http://www.mentalhealthcommission.gov/reports/reports.htm
Consumer and Family Involvement

• Examples
  – Planning service programs/grant application
  – Peer support specialists
  – Recruitment – Mental Health Promotion
  – Advisory boards
  – Feedback on services and programs
Driving Excellent Health Care Through Use of Evidence Based Practices

• SAMHSA Requires Evidence Based Practices in all Service Program Requests for Applications (RFAs), including Older Adult Mental Health TCE
  – Adaptations are acceptable to accommodate diversity (and when EBPs are not recognized)
• National Registry of Evidence-based Programs & Practices (NREPP)
• Evidence Based Practices Toolkits
Background of the Older Adult Mental Health TCE Grant Program

- Discretionary Grant - PRNS
- Section 520A of Public Health Service Act, as amended
- RFAs in 2002, 2005 and 2008
Objectives of the Older Adult Mental Health TCE Grant Program

- Address diverse mental health needs of older persons using evidence based practices
  - Expand direct services
  - Build infrastructure to support
  - Address gaps prevention, treatment
  - Health promotion
  - Needs of families and communities
  - Help specific populations with serious emerging mental health problems
Eligible Applicants

• Public and private non-profit organizations including:
  • States
  • Local government units
  • American Indian or Alaska Native tribes and tribal organizations
  • Community non-profit organizations
  • Faith based organizations
Scope of the Older Adults Mental Health TCE Grant Program

• $36 million in awards since 2002
• Grant awards are approximately $400,000/year for three years
• 30 awards have been made since 2002
• Programs serve broad and diverse array of populations and geographic areas
Persons Served by Older Adult Mental Health TCE Grant Program

- Community dwelling adults over age 60 in rural and urban areas
  - Individual homes and assisted living facilities
- Diverse populations – for example, older adults who are:
  - Latinos
  - Holocaust survivors
  - Lesbian, Gay, Bi-sexual and Transgender
  - Vietnamese boat people/torture survivors
  - Yaqui Indian
  - Hmong
  - Russian
Meeting the Mental Health Needs of Older Adults
SM08-08 2008 Grantees

Michigan
Florida (2) (Jacksonville & Sarasota)
Wisconsin
Illinois
California
Oklahoma
Kansas
Massachusetts
Indiana

Location of 2008-2011 Grantees
Locations of Older Adult Mental Health TCE Grantees since 2002

- Arizona (5)
- California (2)
- Colorado
- District of Columbia
- Florida (2)
- Hawaii
- Illinois
- Indiana
- Kansas
- Massachusetts (2)

- Michigan
- Missouri
- New York (2)
- Ohio
- Oklahoma
- Tennessee
- Texas (3)
- Wisconsin (2)
- Virginia
Older Adult Mental Health TCE Grant Program Services

- Must propose Evidence based service program
  - Outreach, engagement and care coordination
  - Gatekeeper training
  - Primary care integration
  - ACT/intensive care management
  - Psychotherapy
  - Activity based therapies
  - Behavioral activation
  - Treatment of co-occurring conditions
Older Adult Mental Health TCE Grant Program Infrastructure Activities

- Strategic planning
- Service linking
- Partnership building
- Quality improvement
- Prevention and promotion through public education
- Sustainable financing
- Provider training
Outcomes of Older Adults Mental Health TCE Grant Program

- Improvements in infrastructure serving older adults
- Decrease in symptoms of depression, anxiety, isolation, substance misuse
- Increase in engagement in meaningful activity, social connectedness and community integration
- Support for families and caregivers
- Public education to reduce discrimination and identify older adults in need of services
Impact Examples – 2005 - 2009

- Senior Reach Program, Jefferson County, Colorado
  - 8,000 people trained as gatekeepers
  - 800 individual older adults received services
  - 4200 people visited booths/fairs and received prevention and public education materials
  - Initiated wellness and collaboration with primary care physicians
Impact Example- 2005-2009

• Sambrando Salud/ Sowing Wellness
  – Community garden and therapeutic activities in addition to counseling and psychotherapy
  – “…has significantly changed this small rural area of Arizona and there is much local support for continuance…incredible positive mental health outcomes for our seniors and have provided many with new meaning in their lives.”
Challenges to Implementation and Sustainability

- Ageism and mental health stigma
- Regulatory mechanisms
- Difficulty recruiting qualified staff
- Economic downturn
- Impact of current financial crises on older adults, retirees
For More Information

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