

# Supporting Rural Aging Populations

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October 12, 2021



Mountain Plains (HHS Region 8)

MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

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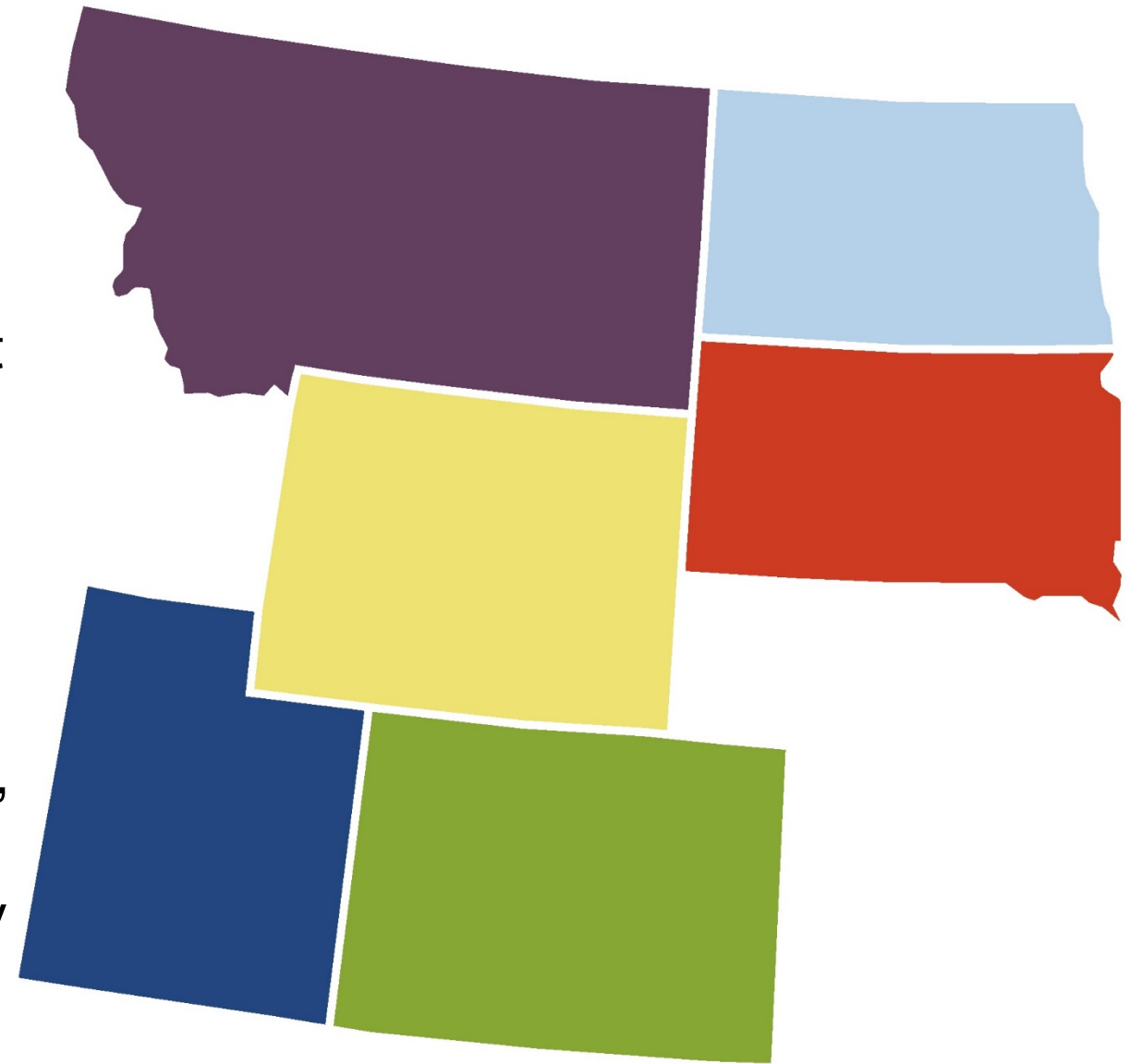
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The work of the Mountain Plains MHTTC is supported by grant H79SM081792 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

# The Mountain Plains Mental Health Technology Transfer Center

The Mountain Plains Mental Health Technology Transfer Center (Mountain Plains MHTTC) provides training and technical assistance to individuals who serve persons with mental health concerns throughout Region 8 (Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming).

We belong to the Technology Transfer Center (TTC) Network, a national network of training and technical assistance centers serving the needs of mental health, substance use and prevention providers. The work of the TTC Network is under a cooperative agreement by the Substance Abuse and Mental Health Service Administration (SAMHSA).



The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED  
AND HOPEFUL

INCLUSIVE AND  
ACCEPTING OF  
DIVERSE CULTURES,  
GENDERS,  
PERSPECTIVES,  
AND EXPERIENCES

HEALING-CENTERED AND  
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS  
PARTICIPATING IN THEIR  
OWN JOURNEYS

PERSON-FIRST AND  
FREE OF LABELS

NON-JUDGMENTAL AND  
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR  
AND UNDERSTANDABLE

CONSISTENT WITH  
OUR ACTIONS,  
POLICIES, AND PRODUCTS

*Series Title*  
Addressing  
Rural Co-  
Morbidity of  
Mental Health  
and Social  
Conditions

Individuals living in rural communities face **unique challenges** when attempting to access care for mental health concerns.

The “four A’s” of rural treatment barriers often reference the difficulty of finding services that are available, accessible, affordable, and acceptable care for persons in remote and rural settings.

**Co-morbid mental health and social conditions** increase the complexity of treatment and make delivering evidence-based care challenging for mental health providers of all professions.

The series will review practices that **providers can utilize to support rural populations** presenting with a variety of co-morbid conditions.



Series  
Topic  
Areas

Employing Treatment and  
Environmental Interventions to  
Support Rural Populations


*Supporting Rural Aging  
Populations*

Mental Health Faith Supports in  
Rural Communities



# *Today's Webinar*

## Supporting Rural Aging Populations

- **Aging in a rural setting** can present unique and changing difficulties that can have negative effects on the mental health of individuals.
  - The aging process can be complicated by a lack of resources that **support connections**, and difficulty maintaining living environments.
  - Learn evidence-based **practices for supporting individuals aging in rural settings**.
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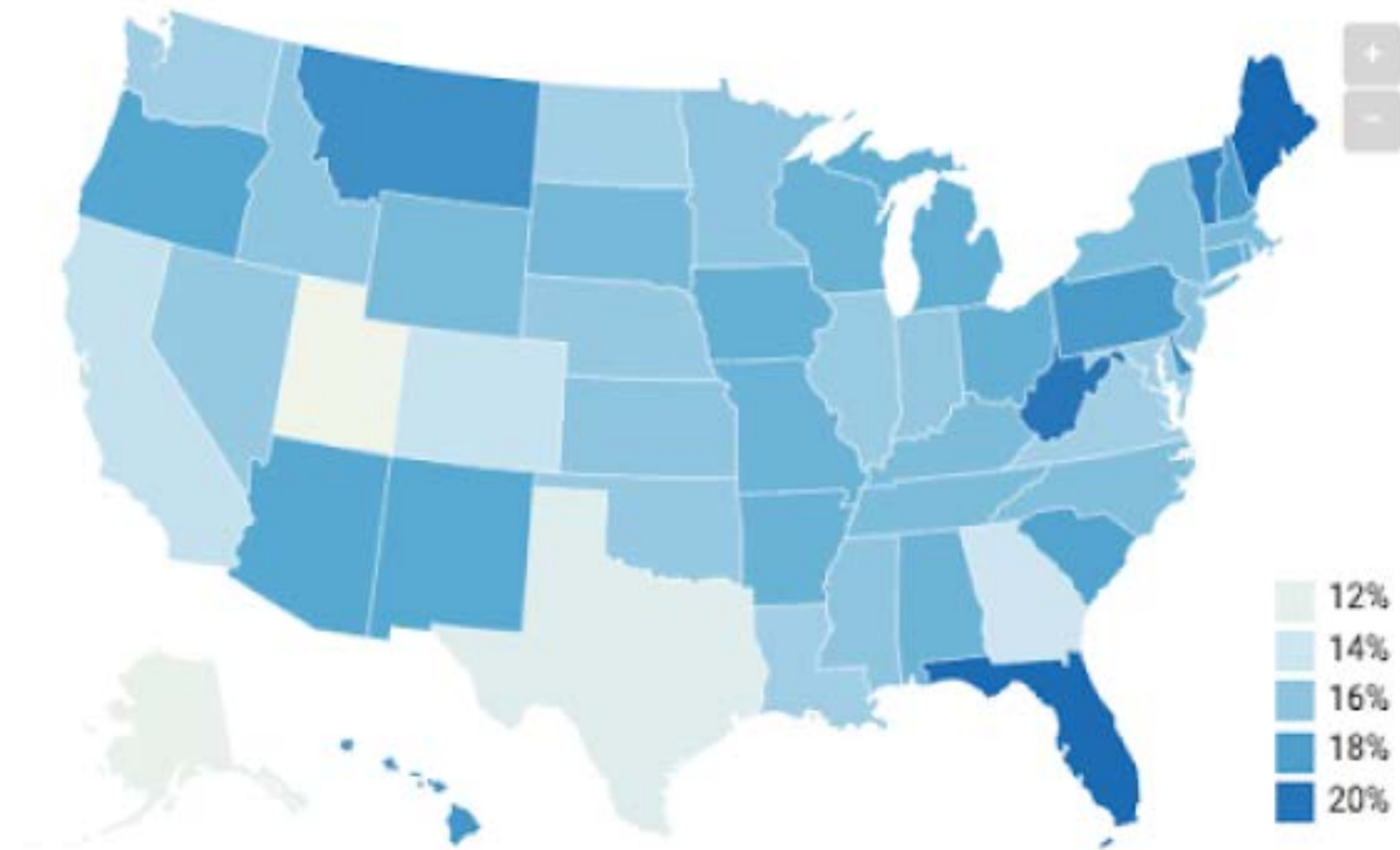




# Aging Overview



## Share of Population Aged 65 or Older in 2018

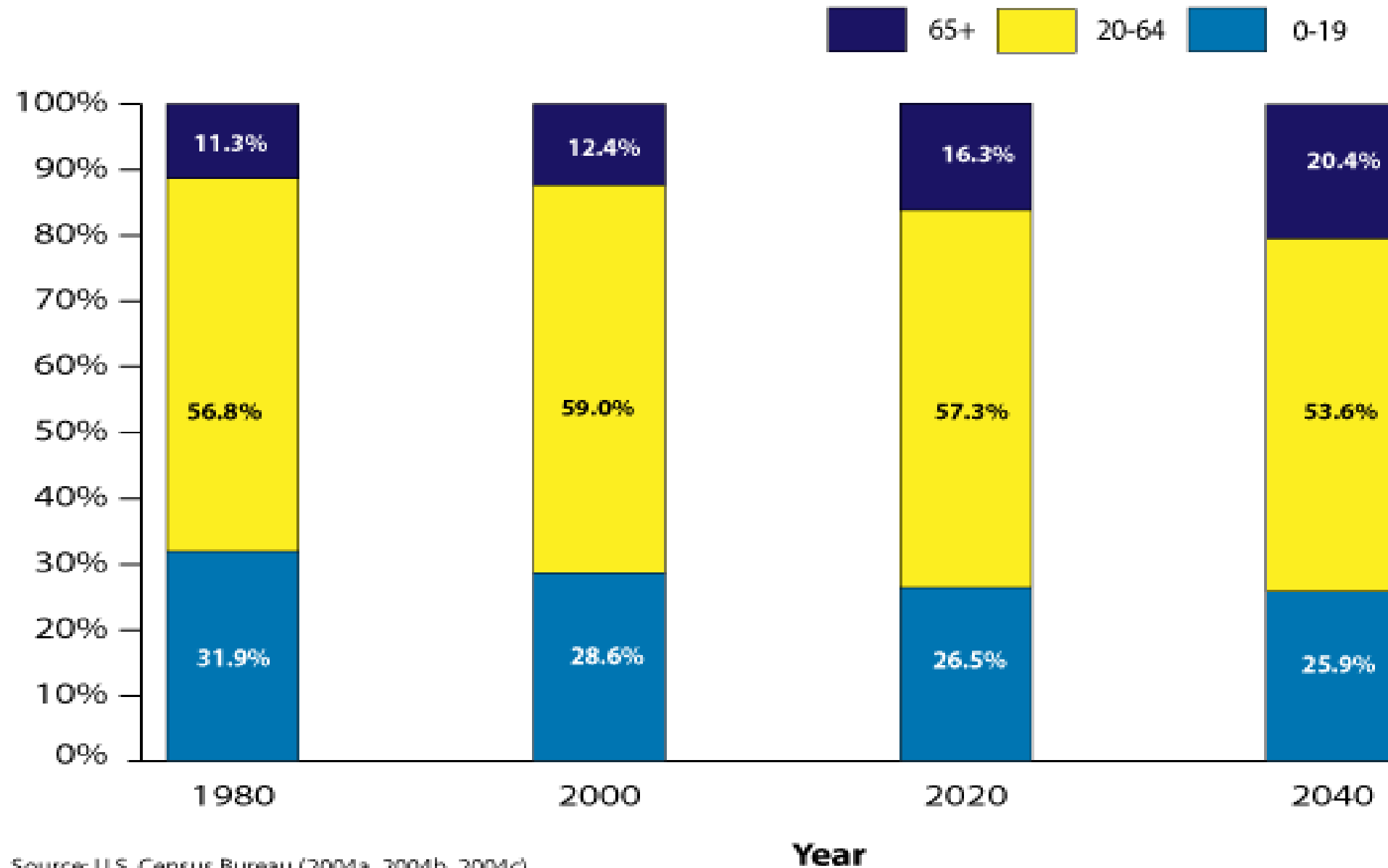


July 2018 population estimates

Map: U.S. News & World Report • Source: U.S. Census Bureau • [Get the data](#)

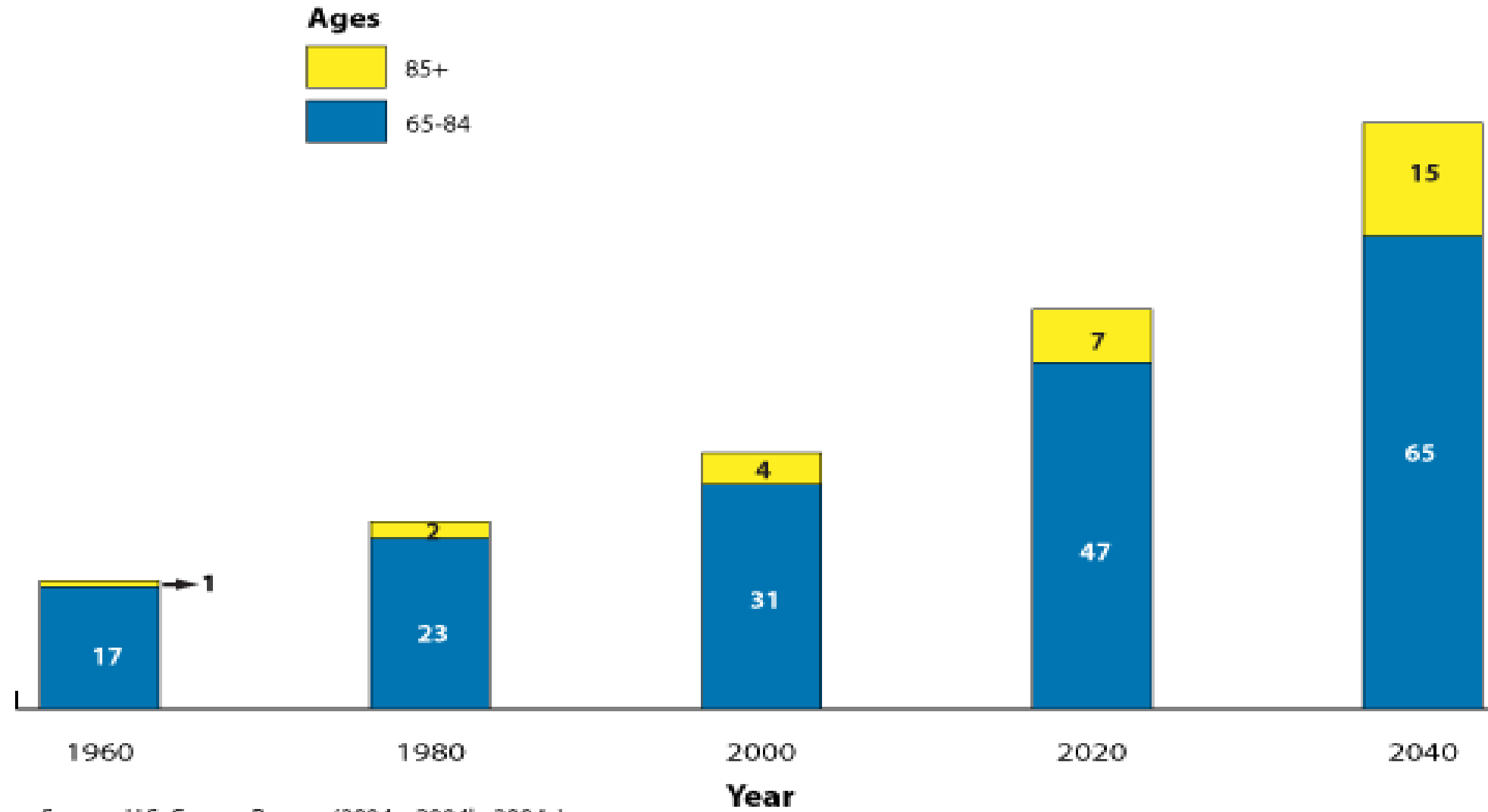
U.S. News & World Report

## Age Distribution of the Population, 1980-2040



Source: U.S. Census Bureau (2004a, 2004b, 2004c).

### Number of Older Americans, 1960-2040 (in millions)



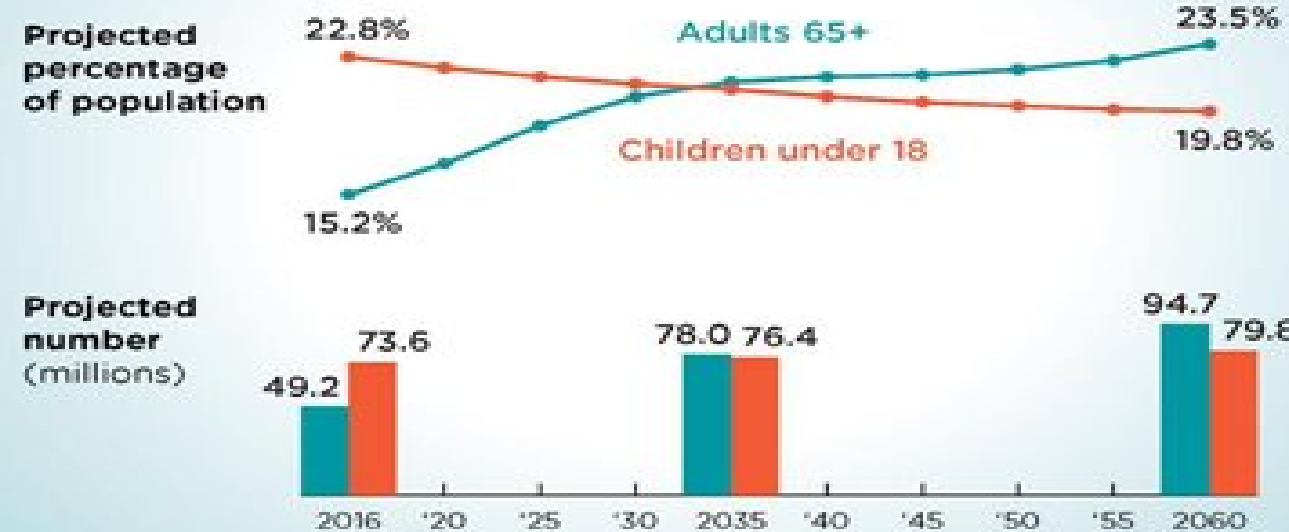
Source: U.S. Census Bureau (2004a, 2004b, 2004c).



# An Aging Nation

Projected Number of Children  
and Older Adults

For the First Time in U.S. History Older Adults Are  
Projected to Outnumber Children by 2035



Note: 2016 data are estimates not projections.

United States™  
**Census**  
Bureau

U.S. Department of Commerce  
Economics and Statistics Administration  
U.S. CENSUS BUREAU  
census.gov

Source: National Population  
Projections, 2017  
[www.census.gov/programs-surveys/popproj.html](http://www.census.gov/programs-surveys/popproj.html)

# U.S. Population Predictions for Seniors and Children

Population values in millions

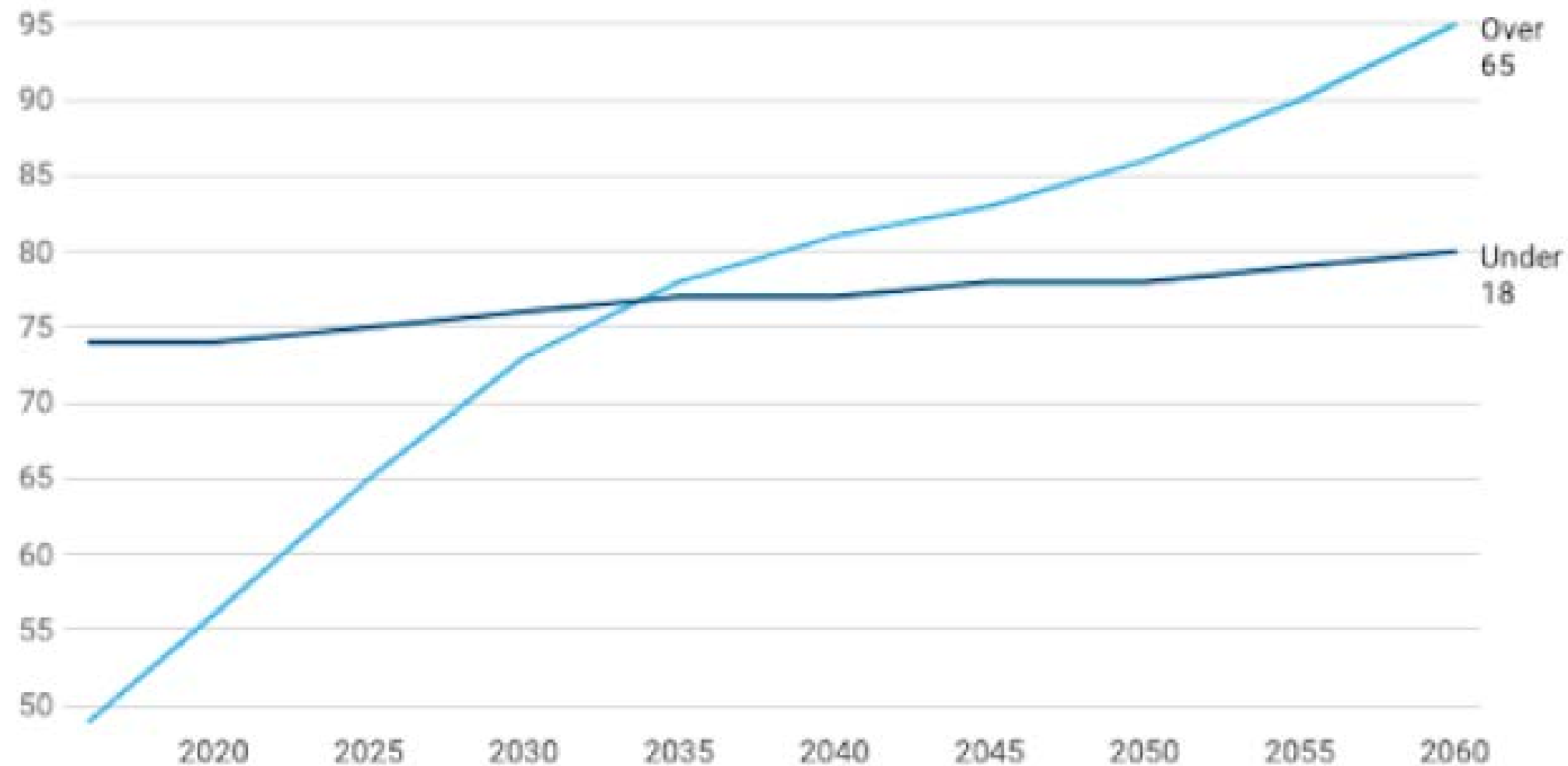
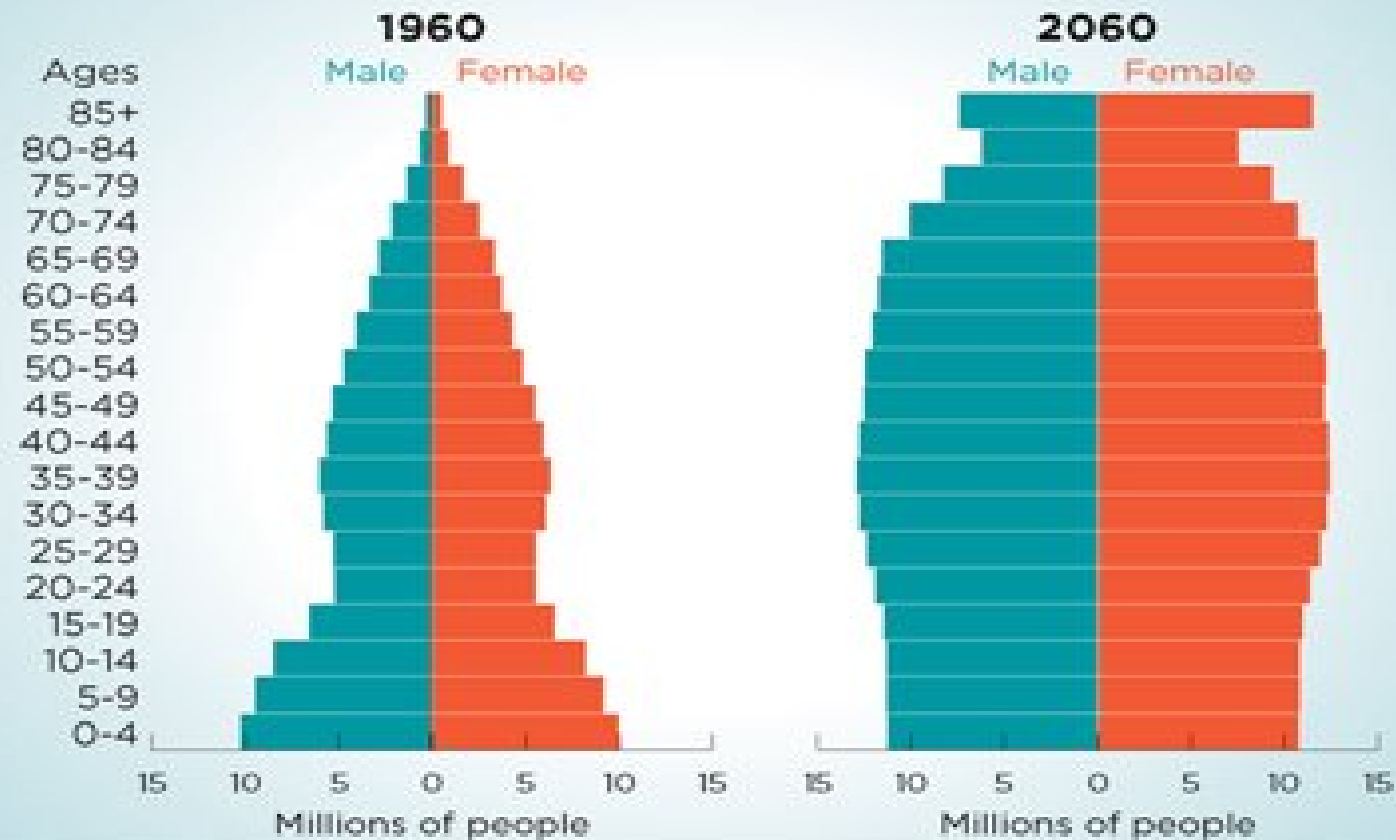


Chart: U.S. News & World Report - Source: U.S. Census Bureau - [Get the data](#)



# From Pyramid to Pillar: A Century of Change

Population of the United States



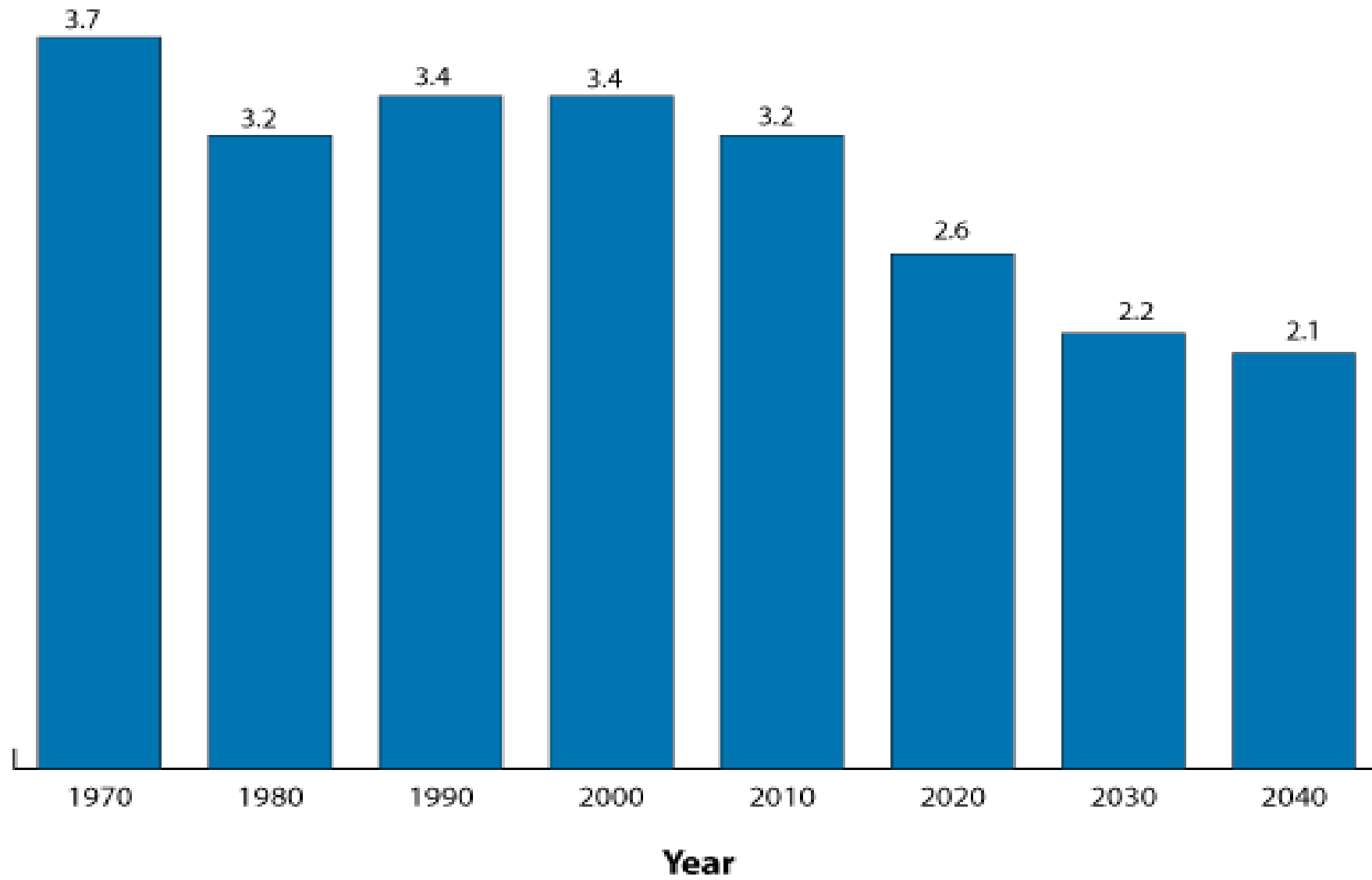
United States<sup>™</sup>  
**Census**  
Bureau

U.S. Department of Commerce  
Economics and Statistics Administration  
U.S. CENSUS BUREAU  
[census.gov](http://census.gov)

Source: National Population  
Projections, 2017  
[www.census.gov/programs-surveys/popproj.html](http://www.census.gov/programs-surveys/popproj.html)



### Number of Workers Per Social Security Beneficiary, 1970-2040



Source: Table IV.B2 in Social Security Administration (2008b).



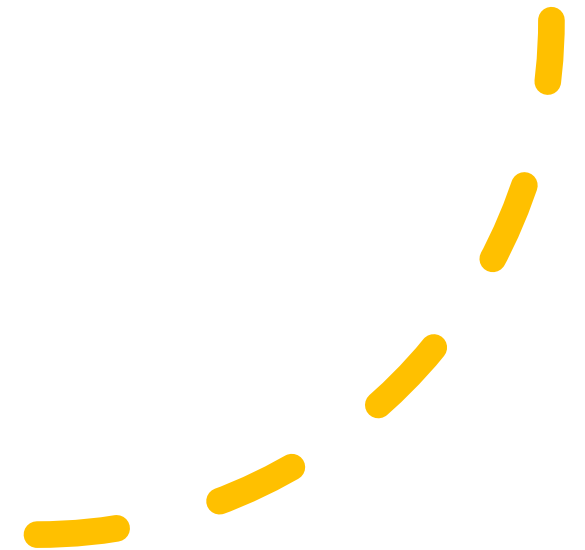
# Aging in Place

The Rural Context

# Definition

- One's journey to maintain independence in one's place of residence as well as to participate in one's community

(Rogers et al 2020)



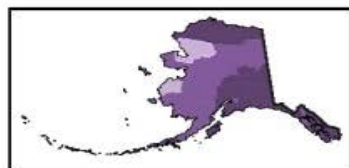
# Rural Aging

- have higher poverty rates, lower incomes, and fewer employment opportunities;
- live in less adequate and older housing;
- rely more heavily on themselves and informal networks for transportation;
- are less healthy;
- have less access to a wide range of community-based social, health, and mental health services; and
- have fewer long-term care options.

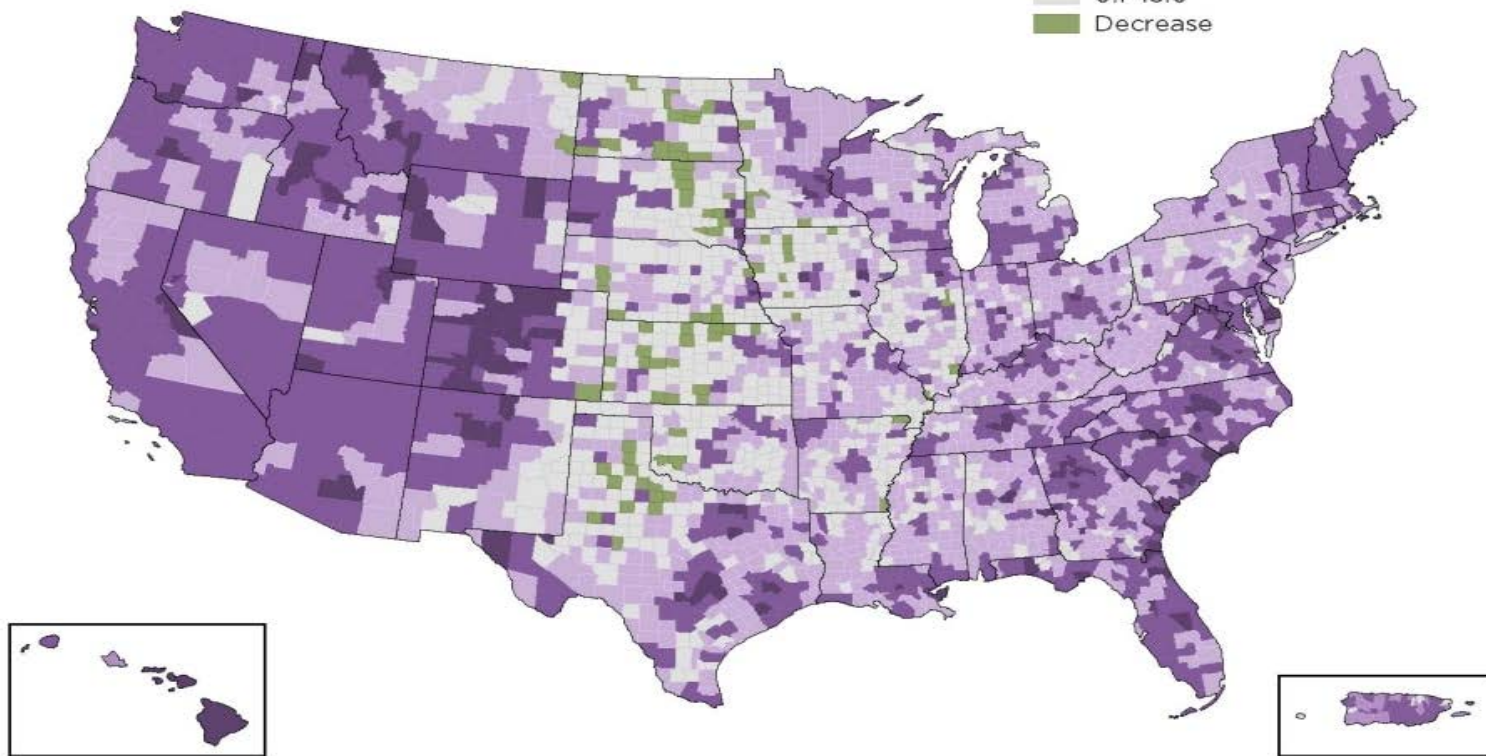
<https://www.giaging.org/issues/rural-aging/>

# Older and Growing

Percent Change among the 65 and Older Population: 2010 to 2019



**Percent change**  
60.1 and higher  
30.1-60.0  
15.1-30.0  
0.1-15.0  
Decrease



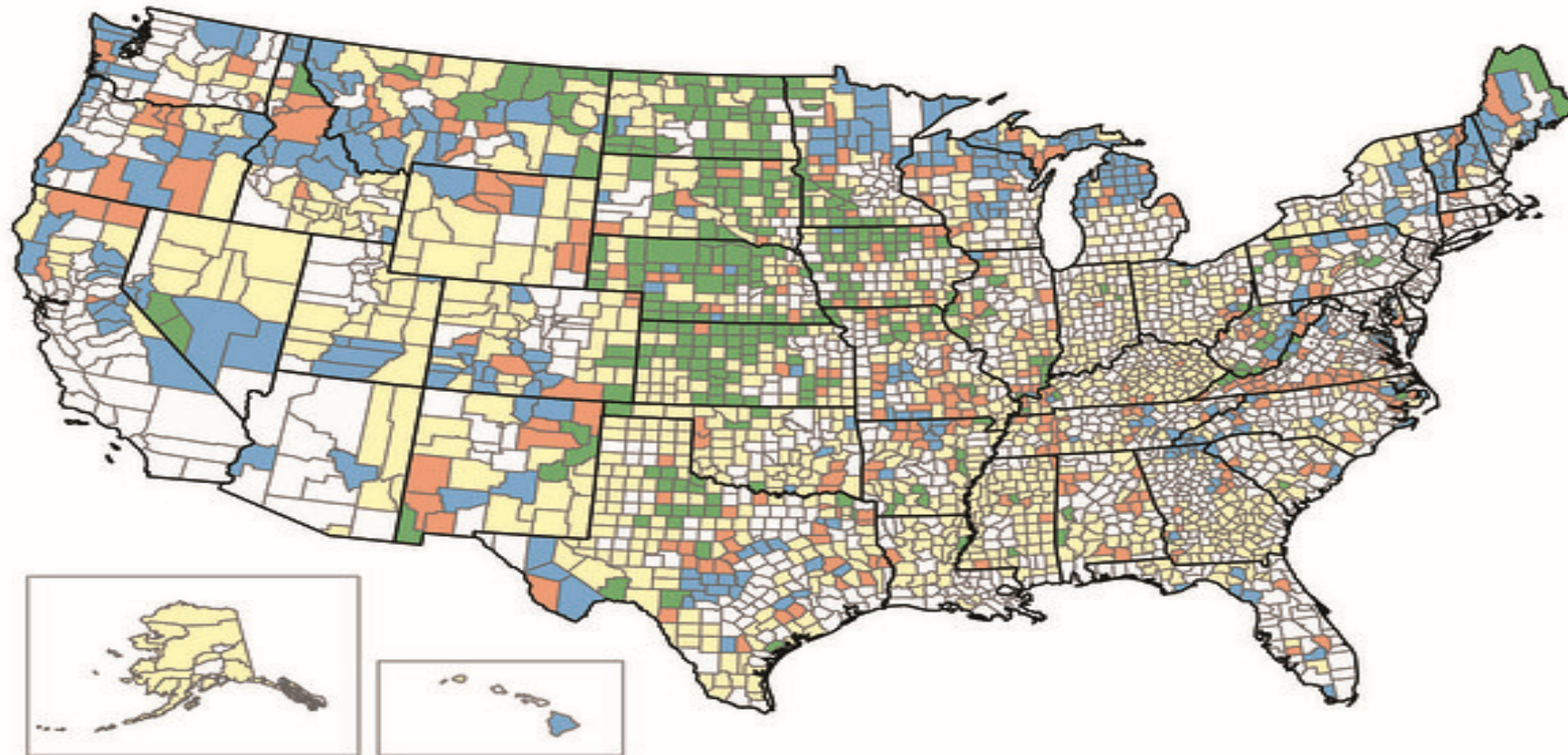
United States<sup>®</sup>  
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U.S. Department of Commerce  
U.S. CENSUS BUREAU  
[census.gov](https://www.census.gov)

Source: Vintage 2019 Population Estimates  
[www.census.gov/programs-surveys/popest.html](https://www.census.gov/programs-surveys/popest.html)



## Most older-age counties are in scenic or chronic population loss areas



### Population 65 years or older, 2017

- 20 percent or higher, recreation/retirement destinations (306 counties)
- 20 percent or higher, persistent population loss (304 counties)
- Other 20 percent or higher (310 counties)
- Less than 20 percent (1,056 counties)
- Metro counties (1,166 counties)

Source: USDA, Economic Research Service using data from the U.S. Census Bureau Population Estimates Program.





# Aging and Mental Health

Areas of Concern

# Facts

- As many as 15% of older adults in community settings have anxiety disorders
- At least one in four older adults experiences some mental disorder, such as depression, anxiety, or dementia.
- Due to population aging, the number of seniors with mental disorders is expected to double by 2030.
- Depression is the most common mental health problem in older people.
- People aged 85 and older have the highest suicide rate of any age group.
- Two-thirds of seniors with mental health problems do not get the treatment they need (the "treatment gap").
- Mental health services for older adults are extremely limited.

[https://www3.paho.org/hq/index.php?option=com\\_content&view=article&id=9877:seniors-mental-health&Itemid=40721&lang=en](https://www3.paho.org/hq/index.php?option=com_content&view=article&id=9877:seniors-mental-health&Itemid=40721&lang=en)



# Considerations

## ***Ageism***

Ageism refers to the stereotypes (how we think), prejudice (how we feel) and discrimination (how we act) towards others or oneself based on age.

(WHO 2021)

## ***Stigma***

Stigma is discrimination against an identifiable group of people, a place, or a nation that can lead to labeling, stereotyping, discrimination, and other negative behaviors toward others.

<https://www.cdc.gov/mentalhealth/stress-coping/care-for-yourself/index.html>

# Seniors Reporting Frequent Mental Distress in 2017

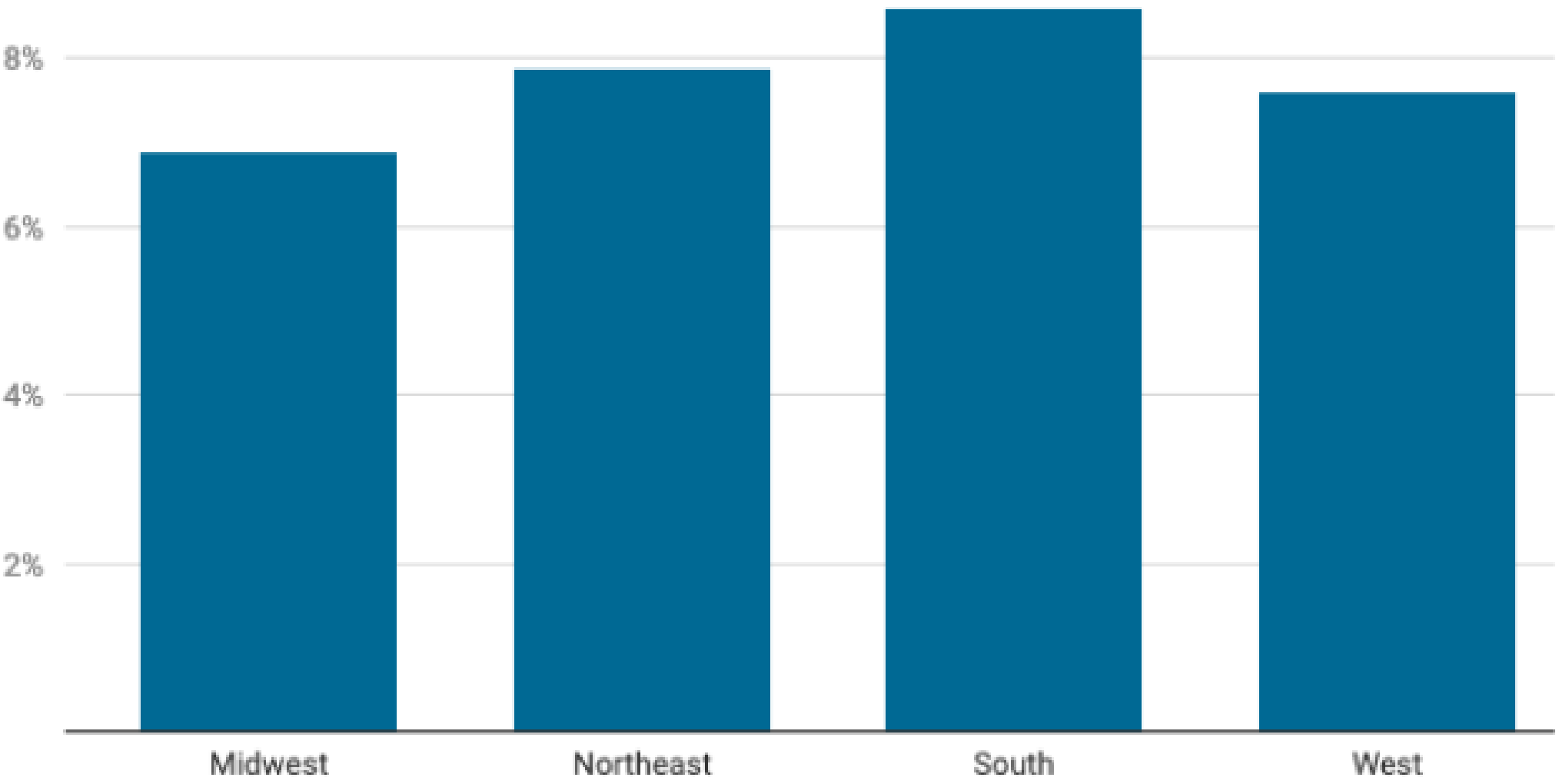


Chart: U.S. News & World Report • Source: Centers for Disease Control and Prevention • [Get the data](#)



# Warning Signs

- Changes in mood or energy level
- A change in your eating or sleeping habits
- Withdrawing from the people and activities you enjoy
- Feeling unusually confused, forgetful, angry, upset, worried, or scared
- Feeling numb or like nothing matters
- Having unexplained aches and pains
- Feeling sadness or hopelessness
- Smoking, drinking, or using drugs more than usual
- Anger, irritability, or aggressiveness
- Having thoughts and memories that you can't get out of your head
- Hearing voices or believing things that are not true
- Thinking of harming yourself or others

<https://medlineplus.gov/olderadultmentalhealth.html>

# Assessment Concerns

(Zarit &  
Zarit, 2007)

Overlapping symptoms of mental health and physical problems.

Stroke/TIA's

Nutritional Issues

Infections

Medication Side Effects

Danger of Diagnostic Overshadowing



# Assessment Process

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Presenting Problem

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Medical History

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Current Medications

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Mental Status Exam

<https://www.slu.edu/medicine/internal-medicine/geriatric-medicine/aging-successfully/assessment-tools/mental-status-exam.php>

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Psychosocial History

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Mental Health/Substance Use History

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Risk Assessment

# Depression/Dementia/Delirium

(Zarit & Zarit, 2007)

Confusion

Labile

Irritable

Low energy

Memory

Change in  
eating  
patterns

# Screening Tools

- Geriatric Depression Form- Short
- Confusion Assessment Method – Short
- Michigan Alcohol Screening Test Short Form Geriatric Version

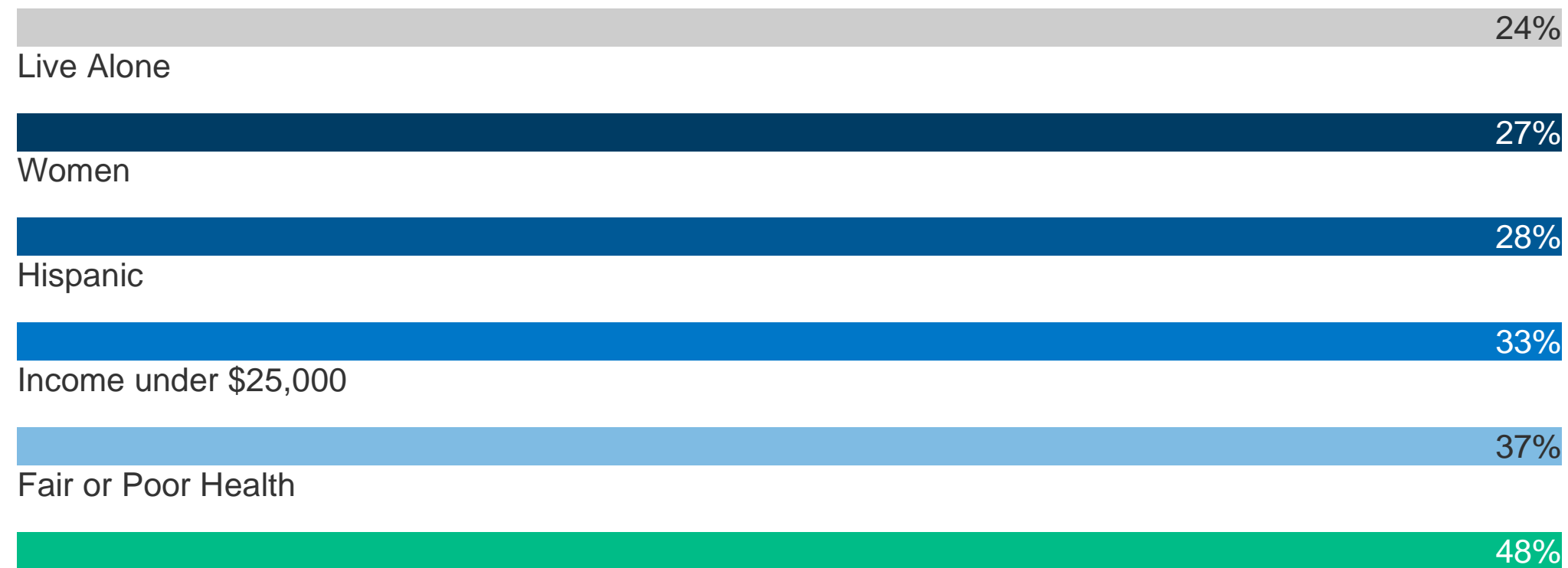
# Depression

Estimates of major depression in older people living in the community range from less than 1% to about 5% but rise to 13.5% in those who require home healthcare and to 11.5% in older hospitalized patients.

<https://www.cdc.gov/aging/depression/index.html>

# A Quarter of Older Adults Reported Anxiety or Depression Amid the Coronavirus Pandemic, while Some Groups Reported Higher Rates

Overall, 65 and older



NOTE: Analysis is among adults age 65 and older. Self-reported health status. Adults of Hispanic origin may be of any race, but are categorized as Hispanic for this analysis; All other groups are non-Hispanic. SOURCE: KFF analysis of U.S. Census Bureau's Household Pulse Survey, August 19-31, 2020.

# Dementia

- It is estimated that 6.2 million Americans age 65 and older are living with Alzheimer's dementia in 2021. Seventy-two percent are age 75 or older.
- One in nine people age 65 and older (11.3%) has Alzheimer's dementia.
- Almost two-thirds of Americans with Alzheimer's are women.
- Older Black Americans are about twice as likely to have Alzheimer's or other dementias as older Whites.
- Older Hispanics are about one and one-half times as likely to have Alzheimer's or other dementias as older Whites.
- <https://www.alz.org/alzheimers-dementia/facts-figures>



# Delirium

- A serious, time-limited condition with a **sudden onset** and short/fluctuating course marked by **impaired or altered consciousness and cognition.**
- Difficulty thinking clearly or perceiving the world around them.
- **Incoherent speech, confusion, memory impairment, disorientation.**
- Symptoms can include Hyper-arousal (overly alert/agitated) &/OR hypo-arousal (sleepy/groggy)
- Can be a sign of a serious medical condition that can lead to brain damage or death.
- Multiple causes: surgery, infection, medication, nutritional deficiencies(B-12), alcohol/drugs, head trauma, chemotherapy or environmental changes.

# Anxiety

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Anxiety is a common illness among older adults, affecting as many as 10-20 percent of the older population, though it is often undiagnosed. Phobia—when an individual is fearful of certain things, places or events—is the most typical type of anxiety. Among adults, anxiety is the most common mental health problem for women, and the second most common for men, after substance abuse.

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<https://www.aagponline.org/index.php?src=gendocs&ref=anxiety>

# Signs of Anxiety

- Excessive worry or fear
- Refusing to do routine activities or being overly preoccupied with routine
- Avoiding social situations
- Overly concerned about safety
- Racing heart, shallow breathing, trembling, nausea, sweating
- Poor sleep
- Muscle tension, feeling weak and shaky
- Hoarding/collecting
- Depression
- Self-medication with alcohol or other central nervous system depressants

<https://www.aagponline.org/index.php?src=gendocs&ref=anxiety>

# Trauma

- Up to 90% of older adults have experienced at least one traumatic event in their lifetime.

*(Pietrzak, Goldstein, Southwick & et.al, 2012)*

- Approximately 70% to 90% of adults aged 65 and up have been exposed to at least one potentially traumatic event during their lifetime.

*(National Center of PTSD, 2017 <https://www.ptsd.va.gov/> )*

- ACE and older adults

<https://www.pacesconnection.com/blog/supporting-older-trauma-survivors-as-they-heal-their-pasts-grow-their-futures>

# Elder Abuse

- An estimated 5 million seniors suffer from abuse each year
- Approximately 1 and 10 over age 60 experience some form of elder abuse.
- According to a 15.7% of people over age 60 experienced some type of abuse, but it is likely underestimated since only 1 in 24 cases of elder abuse is reported.

*(Acierno et al 2010; Rosay et al 2017; Yon et al 2017)*

# Physical Signs of Elder Abuse



Dehydration  
or unusual  
weight loss



Missing  
daily living  
aids



Unexplained  
injuries, bruises,  
cuts, or sores



Unsanitary living  
conditions and  
poor hygiene

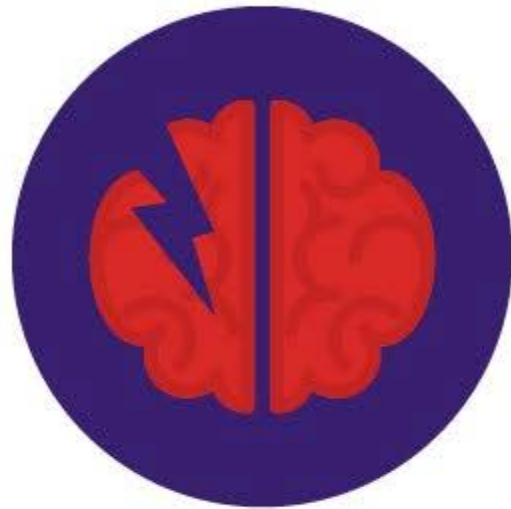


Unattended  
medical  
needs

To learn more, visit [ncea.acl.gov](https://www.ncea.acl.gov)



## Emotional/Behavioral Signs of Elder Abuse



Increased fear  
or anxiety



Isolation from  
friends or family



Unusual changes  
in behavior or sleep



Withdrawal from  
normal activities

To learn more, visit [ncea.acl.gov](https://ncea.acl.gov)

# Financial Signs of Elder Abuse



Fraudulent signatures  
on financial documents



Unpaid bills



Unusual or sudden changes  
in spending patterns, will, or  
other financial documents

To learn more, visit [ncea.acl.gov](https://ncea.acl.gov)



# Suicide

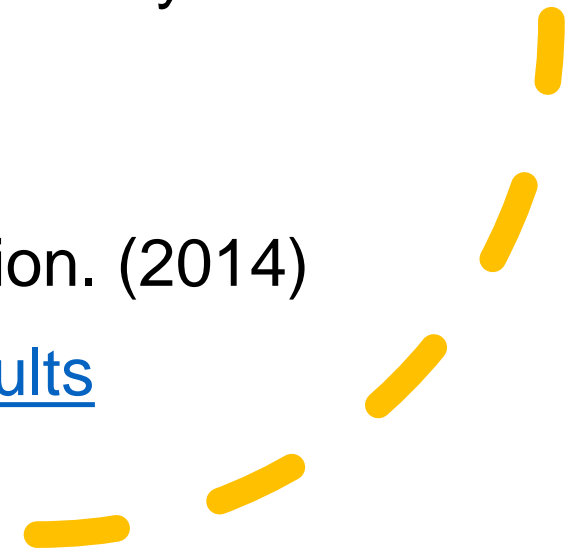
- Suicide rates are high among older men, with men ages 85 and older having the highest rate of any group in the country.

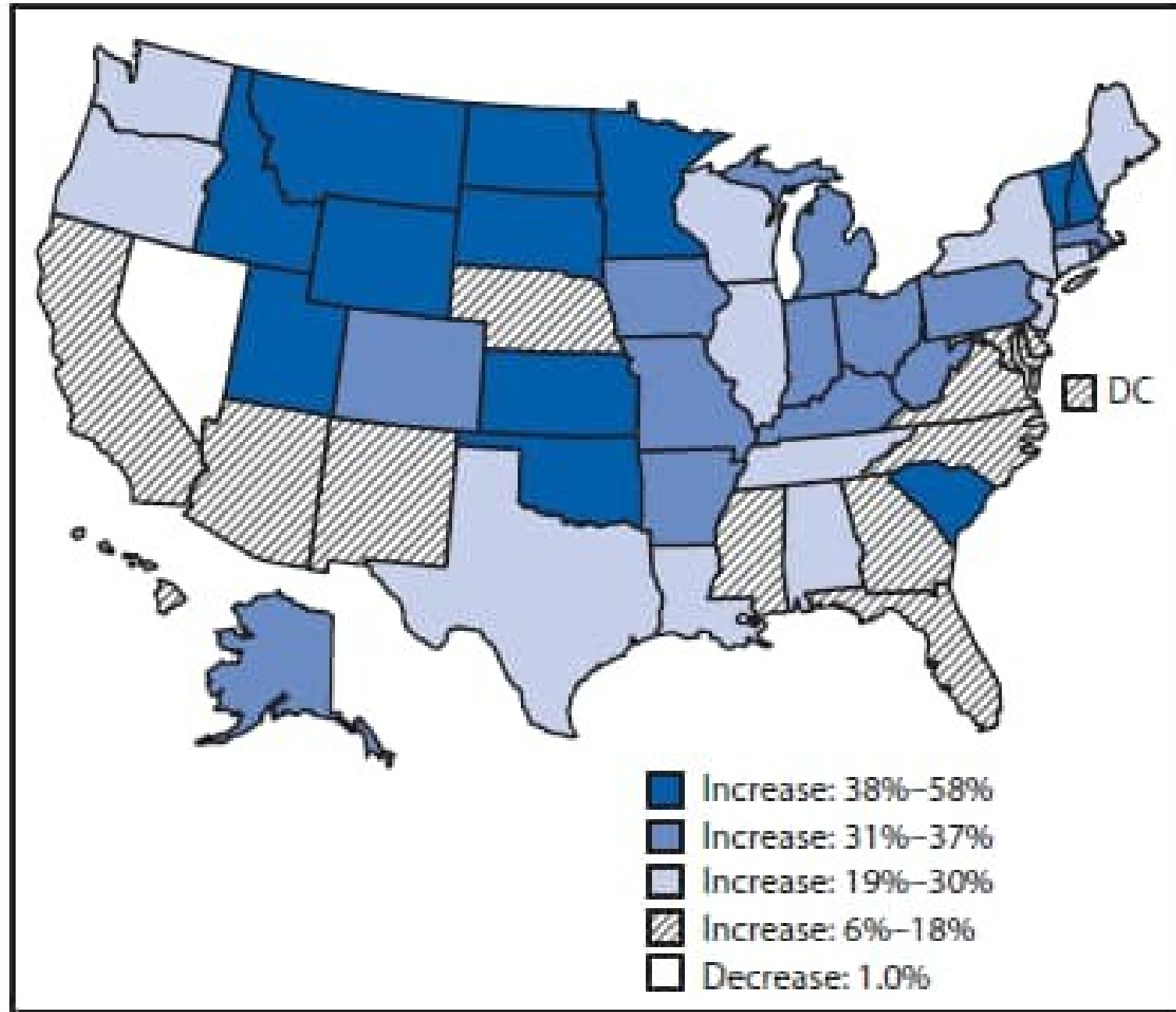
“Suicide attempts by older adults are much more likely to result in death than among younger persons. Reasons include:

- Older adults plan more carefully and use more deadly methods.
- Older adults are less likely to be discovered and rescued.
- The physical frailty of older adults means they are less likely to recover from an attempt.”

(Centers for Disease Control and Prevention. (2014)

<https://www.sprc.org/populations/older-adults>





\* Per 100,000 population, age-adjusted to the 2000 U.S. standard population.

# Grief & Loss

- Experience multiple losses sometimes in a short period of time
- Social network is more constricted
- Loss of relationships and possible roles
- May not be aware they are grieving
- Decreased physical, emotional and social capabilities
- Sometimes means other life changes will follow the loss





# Interviewing Considerations

- Environmental
- Engagement
- Strategic





Promoting  
Social  
Connections



# Social Isolation

- Social isolation vs. loneliness
- Social isolation refers to having few social contacts and relationships (objective measure). » Loneliness is the sense of being alone that includes distress or unpleasant feelings associated with having fewer-than-desired social relationships (subjective concept).  
<https://sprc.org/sites/default/files/Reducing%20Loneliness%20and%20Social%20Isolation%20Among%20Older%20Adults%20Final.pdf>
- One-third of adults aged 45 and older feel lonely, and nearly one-fourth of adults aged 65 and older are considered to be socially isolated.

*(National Academy of Sciences, 2020)*

# Impact

- Social isolation significantly increased a person's risk of premature death from all causes, a risk that may rival those of smoking, obesity, and physical inactivity.
- Social isolation was associated with about a 50% percent increased risk of dementia.
- Poor social relationships (characterized by social isolation or loneliness) was associated with a 29% increased risk of heart disease and a 32% increased risk of stroke.
- Loneliness was associated with higher rates of depression, anxiety, and suicide.
- Loneliness among heart failure patients was associated with a nearly 4 times increased risk of death, 68% increased risk of hospitalization, and 57% increased risk of emergency department visits.

*(National Academy of Sciences, 2020)*

EBP – Emotional  
Wellness of  
Older Adults:  
Maintaining  
Connections

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# Resources

<https://www.lutherservices.org/content/great-plains-senior-services-collaborative>

<https://depts.washington.edu/hprc/programs-tools/pearls/>

<https://tools.silversneakers.com/>

<https://www.ruralhealthinfo.org/project-examples/1092>

# References

- Acierno, R., Hernandez, M. A., Amstadter, A. B., Resnick, H. S., Steve, K., Muzzy, W., & Kilpatrick, D. G. (2010). Prevalence and correlates of emotional, physical, sexual, and financial abuse and potential neglect in the United States: The National Elder Mistreatment Study. *American journal of public health, 100*(2), 292-297.
- Centers for Disease Control and Prevention. (2014). Fatal injury reports, national and regional, 1999–2014. Retrieved from [http://webappa.cdc.gov/sasweb/ncipc/mortrate10\\_us.html](http://webappa.cdc.gov/sasweb/ncipc/mortrate10_us.html)
- <https://www.kff.org/medicare/issue-brief/one-in-four-older-adults-report-anxiety-or-depression-amid-the-covid-19-pandemic>
- National Academies of Sciences, Engineering, and Medicine. 2020. *Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25663>

# References

- <https://www.kff.org/medicare/issue-brief/one-in-four-older-adults-report-anxiety-or-depression-amid-the-covid-19-pandemic>
- Pietrzak, R. H., Goldstein, R. B., Southwick, S. M., & Grant, B. F. (2012). Psychiatric comorbidity of full and partial posttraumatic stress disorder among older adults in the United States: results from wave 2 of the National Epidemiologic Survey on Alcohol and Related Conditions. *The American Journal of Geriatric Psychiatry*, 20(5), 380-390.
- Rosay, A. B., & Mulford, C. F. (2017). Prevalence estimates and correlates of elder abuse in the United States: The national intimate partner and sexual violence survey. *Journal of elder abuse & neglect*, 29(1), 1-14.
- Wendy A Rogers, PhD, Widya A Ramadhani, MArch, Maurita T Harris, MS, Defining Aging in Place: The Intersectionality of Space, Person, and Time, *Innovation in Aging*, Volume 4, Issue 4, 2020, igaa036, <https://doi.org/10.1093/geroni/igaa036>
- Yon Y, Mikton CR, Gassoumis ZD, Wilber KH. Elder abuse prevalence in community settings: a systematic review and meta-analysis. *Lancet Glob Health*. 2017 Feb;5(2):e147-e156. doi: 10.1016/S2214-109X(17)30006-2. PMID: 28104184.
- Zarit, S & Zarit, J. (2007). *Mental Disorders in Older Adults: Fundamentals of Assessment and Treatment*. (2nd Ed.). *Mood and Anxiety Disorders*.

# Upcoming Webinars

*Tuesday October 19<sup>th</sup>*

- Mental Health Faith Supports in Rural Communities

# Stay Connected



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## Acknowledgements



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