

DATE: JUNE 27, 2017
FROM: Marin County Commission on Aging: Teri Dowling, Chair
SUBJECT: Recommendations for Addressing Mental Health Needs of Marin County
Older Adults in the MHSA 3-Year Integrated Plan

Marin County is a rapidly graying community where 27% of our residents (68,817) are age 60 plus; currently 1 of 4; in 2030 projected to be 1 out of 3.

In the 2016, HHS, Aging and Adult Service survey, two of the top 6 issues identified by older adults were “losing my memory/cognition” and feeling “isolated or depressed.” These two issues are articulated by members of our community. The twenty-three members of the Commission on Aging serves to educate and advocate for those 60+ and we stand united in advocating for the provision of further funds for older adults.

The Centers for Disease Control and Prevention (CDC) estimate that 20% of people age 55 or older experience some type of mental health condition, both mood and cognitive disorders. The CDC issued a Brief, “The State of Mental Health and Aging in America” and Brief #2 focuses on the topic of depression, “an important and emerging public health issue.”

Depression is not a normal part of growing older, and treatment works. The CDC recommends three effective evidenced based practice models for treating depression with older adults.

- 1) IMPACT (Improving Mood-Promoting Access to Collaborative Treatment), 2) PEARLS (Program to Encourage Active Rewarding Lives for Seniors), and 3) Healthy IDEAS (Identifying Depression, Empowering Activities for Seniors).

Of the many services presently funded under the Mental Health Services Act (FY2015-16), only two are specific to older adults and the number of clients served is very small.

- 1) Older Adult Prevention and Early Intervention (PEI) serving 105 individuals and 24 families.
- 2) and 2) HOPE/FSP (CSS) serving 67 individuals.

The passage of the Mental Health Services Act (MHSA), created immense opportunities to address the mental health needs of all Californians. However, as you can see from the numbers above, disparities in access to mental health services for older adults still exist.

The APA found that older adults underutilize mental health services due to stigma, denial of the problem, lack of collaboration among providers, lack of professionals trained in Geriatric mental health, and inadequate funding for services.

As Marin County develops its Mental Health Services Act Three Year Integrated Plan (2014-2017), we have an opportunity to address these concerns. The Commission recommends that the Plan is revised to include services commensurate with the fast growing and underserved needs and size of our older adult population. The Commission on Aging puts forward the following recommendations to responsibly address and prioritize the mental health needs of Marin's older residents.

- 1) Develop and implement at least one of the CDC-recommended evidenced -based, community-based practice programs, IMPACT, PEARLS, Healthy IDEA
- 2) Develop an experienced multi-disciplinary Professional Geriatric team within Behavioral Health and Recovery. Such a specialty team would be well versed in conducting thorough assessments that can address the frequent and complex overlap between mental health and medical conditions, mental health and dementia, etc. Additionally, these clinicians would be available for consultation with others in the community working with older adults.
- 3) Develop mental health training programs for staff of behavioral health and community care providers that include demographics, key risk factors and intervention models. Professionals need to understand how those in this population are like people of other ages and how they differ. The Mental health First Aide Training does not address common mental health issues related to aging.