

***THE GERIATRIC MENTAL HEALTH ALLIANCE OF NEW YORK***

**PROMOTING SUCCESSFUL AGING  
OF OLDER ADULTS FACING MAJOR  
MENTAL HEALTH CHALLENGES**

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**by**

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# OLDER ADULTS WITH MAJOR MENTAL HEALTH CHALLENGES ARE NEGLECTED

- OLDER ADULTS ARE NOT MENTIONED IN THE BIDEN ADMINISTRATION ANNOUNCEMENT OF A MENTAL HEALTH CRISIS IN AMERICA
- DISCUSSIONS OF GERIATRIC MENTAL HEALTH RARELY FOCUS ON OLDER ADULTS WITH MAJOR MENTAL HEALTH CHALLENGES
- GOAL TODAY IS TO STIMULATE ATTENTION TO THESE PEOPLE AND TO IDENTIFY KEY ISSUES

# KEY ISSUES

- LOW LIFE EXPECTANCY
- MENTAL HEALTH OUTPATIENT AND REHABILITATION PROGRAMS ARE NOT DESIGNED FOR OLDER PEOPLE
  - DESIGNED FOR WORKING AGE PEOPLE
- MENTAL HEALTH HOUSING PROGRAMS USUALLY CANNOT DEAL WITH THE DEVELOPMENT OF CHRONIC HEALTH CONDITIONS, PHYSICAL DISABILITIES, OR DEMENTIA
- MANY OLDER ADULTS WITH MAJOR MENTAL HEALTH CHALLENGES ARE SERVED IN THE LONG-TERM CARE SYSTEM, WHICH IS NOT DESIGNED OR STAFFED FOR THEM, INCLUDING:
  - RESIDENTIAL CARE: NURSING HOMES AND ASSISTED LIVING (INCLUDING ADULT HOMES)
  - ADULT MEDICAL DAY CARE
  - HOME CARE
- LOSS OF IMPORTANT RELATIONSHIPS IN THE TRANSITION FROM THE MENTAL HEALTH SYSTEM TO LONG-TERM CARE
- LOSS OF FAMILY SUPPORT AS PARENTS BECOME DISABLED OR DIE

# ABOUT AGING PEOPLE WITH MAJOR MENTAL HEALTH CHALLENGES

- CONTROVERSY ABOUT TERMINOLOGY: MAJOR MENTAL HEALTH CHALLENGES VS. SEVERE AND PERSISTENT MENTAL ILLNESS (SPMI) VS. PSYCHIATRIC DISABILITY VS. “LIVED EXPERIENCE”, ETC.
  - DOES CHOICE OF LANGUAGE REALLY AFFECT STIGMA?
- WE ARE TALKING ABOUT PEOPLE WITH WHO ARE DISABLED BY MENTAL ILLNESS AND IN NEED OF ONGOING SUPPORT
- GROWING POPULATION, EXPECTED TO DOUBLE IN THE FIRST HALF OF THE 21<sup>ST</sup> CENTURY
  - UNLESS THEIR LIFE EXPECTANCY INCREASES
  - UNLESS THERE IS A BREAKTHROUGH IN TREATMENT
- PEOPLE DIAGNOSED WITH SCHIZOPHRENIA AND OTHER PSYCHOSES HAVE HIGH RATES OF DEPRESSION AND DEMENTIA

# LOW LIFE EXPECTANCY

- VARIOUS ESTIMATES: 10 TO 25 YEARS LESS THAN THE GENERAL POPULATION
- HIGH SUICIDE RATES AMONG YOUNGER PEOPLE WITH MAJOR MH CHALLENGES
- POOR HEALTH DUE TO
  - OBESITY, DIABETES, CARDIAC CONDITIONS, CANCER, ETC.
    - MEDICATIONS MAY CONTRIBUTE TO THIS
  - HARD LIVES INCLUDING HOMELESSNESS
  - ADDICTION TO DRUGS
  - SMOKING
  - POOR DIET AND LACK OF EXERCISE
- POOR ACCESS TO POOR HEALTH CARE

# DAY TREATMENT AND REHABILITATION PROGRAMS

- ORIENTED TOWARDS EDUCATION AND WORK
- PERSONAL LIFE GOALS CHANGE WITH AGE
- NOT DESIGNED TO SERVE PEOPLE WITH CHRONIC HEALTH CONDITIONS OR PHYSICAL DISABILITY
- NOT DESIGNED TO SERVE PEOPLE WITH CO-OCCURRING DEMENTIA

# HOUSING PROGRAMS

- NOT DESIGNED FOR PEOPLE WITH CHRONIC HEALTH CONDITIONS, PHYSICAL DISABILITY, OR DEMENTIA
  - LIMITED ACCESSIBILITY FOR PEOPLE IN WHEELCHAIRS
  - STAFF NOT PREPARED FOR THE ADMINISTRATION OF MEDICATIONS FOR COMPLEX HEALTH CONDITIONS
  - HOUSING PROGRAMS ARE DESIGNED TO AVOID MIX OF PEOPLE WITH MAJOR MH CHALLENGES AND DEMENTIA
    - ALTHOUGH MANY PEOPLE WITH MAJOR MH CHALLENGES DEVELOP DEMENTIA

# LONG-TERM CARE

- NURSING HOMES AND ASSISTED LIVING NOT DESIGNED FOR PEOPLE WITH MAJOR MENTAL HEALTH CHALLENGES
- ADULT MEDICAL DAY CARE DESIGNED PRIMARILY FOR PEOPLE WITH DEMENTIA IS ALSO USED FOR PEOPLE WITH MAJOR MENTAL HEALTH CHALLENGES
- HOME HEALTH CARE PERSONNEL ARE RARELY TRAINED TO SERVE PEOPLE WITH MAJOR MENTAL HEALTH CHALLENGES



# TRANSITION TO LONG-TERM CARE

- LOSS OF “HOME”
- LOSS OF IMPORTANT RELATIONSHIPS IN MENTAL HEALTH PROGRAMS
- LOSS OF SUPPORTIVE PARENTS DUE TO DISABILITY OR DEATH

# NEEDS

- ADDRESS LOW LIFE-EXPECTANCY
  - BETTER ACCESS TO BETTER HEALTH CARE
  - WELLNESS INITIATIVES
- DEVELOP AGE-APPROPRIATE OUTPATIENT AND REHABILITATION PROGRAMS
  - SPECIALIZED OUTREACH AND ENGAGEMENT PROGRAMS SUCH AS ACT TEAMS FOR OLDER ADULTS
  - LINKIAGES TO SENIOR SERVICE PROGRAMS SUCH AS SENIOR CENTERS
- DEVELOP HOUSING PROGRAMS THAT CAN PROVIDE CARE FOR PEOPLE WITH MAJOR MENTAL HEALTH CHALLENGES AND CHRONIC HEALTH CONDITIONS, PHYSICAL DISABILITY, AND/OR DEMENTIA
- MENTAL HEALTH-INFORMED LONG-TERM CARE
  - CONTINUITY OF RELATIONSHIPS
  - IMPROVE QUALITY OF STAFF
- ALTERNATIVES TO PARENTAL SUPPORT

# **CONTACT INFORMATION**

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