

Texas Behavioral Health and Aging

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Texas Health and Human Services

HHS oversees the operation of the health and human services system. HHS has responsibility for strategic leadership, administrative oversight of Texas health and human services system programs, and provides direct administration of some programs.

HHS oversees:

- Eligibility Determination
- Licensing and Regulatory
- System Planning and Evaluation
- Policy Development and Rule-making
- Ombudsman Services
- Aging Programs



Aging Services Coordination Office

HHS Aging Services Coordination office (ASC) vision is that older Texans have opportunities to age and live well.

ASC supports older Texans in aging and living well through a variety of initiatives including:

- Age Well Live Well
- Aging Texas Well
- CMP Project
- Aging Program
 Database

- Innovators in Aging
- Opioids and Older Adults
- Texas Talks
- Texercise



Behavioral Health & Aging Statistics

- An estimated 15 percent of adults age 60 and over live with a mental health condition.
- Up to 20 percent of older adults misuse some type of substance, including prescription drugs.
- People aged 65 and older account for 17.9% of suicide deaths.





HHS Behavioral Health & Aging Workgroup

The Behavioral Health and Aging workgroup was established with internal and external subject matter experts to support older adult's behavioral health needs through the development and promotions of behavioral health resources, trainings, policies and best practices. The BHA workgroup currently has four priority focus areas:

- 1. Social Isolation
- 2. Peer Support
- 3. Telehealth
- 4. Holocaust Survivor Resources

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HHS BHA – Social Isolation

Social isolation and loneliness can lead to negative health outcomes including premature death, increased hospitalization, higher risk of dementia, heart failure and stroke. In the United States:

- 25% of older adults are socially isolated.
- 43% of adults 60 and older identify as feeling lonely.
- 61% of Texans 65 and older are at risk of social isolation





Peer support is an evidenced-based practice proven to lower the overall cost of mental health services by reducing re-hospitalization rates and days spent in inpatient services, increasing the use of outpatient services, improving quality of life, increasing and improving engagement with services.





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HHS BHA - Telehealth

Telehealth allows long-distance patient and clinician contact, care, advice, reminders, education, intervention, monitoring, and remote admissions. It can positively impact older adults by meeting them where they are at, reduce wait time to see care provider, and avoids need for commuting/transportation.

- 1. In 2019, the Texas Comptroller reported that more than 2 million Texas households did not have high-speed internet.
- 2. In a 2018 report by the National Digital Inclusion Alliance Brownsville and Pharr held the top two positions for the worst-connected cities.





HHS BHA – Holocaust Survivor Resources

Holocaust survivors endured events and experiences that can affect their long-term health and associated needs, including difficulty accessing long-term services and supports. In 2017:

- There was an estimated 100,000 – 300,000 Holocaust survivors lived in the U.S.
- The Older Americans Act of 1965 was amended to include provisions and guidance to State units on Aging to use PCTI approaches to greatly improve the overall quality of care and quality of life for Holocaust survivors.





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Opioid Misuse in Older Adults



Opioids and the Aging Population

- Chronic pain is a primary driver of opioid use in older adults. Approximately, three in four older adults experience chronic pain and many are prescribed opioids to help them cope.
- Older adults who take opioids for chronic pain are :
 - At increased risk to misuse opioids and develop substance use disorder.
 - Four to five times more likely to fall than those taking overthe-counter medications like ibuprofen and aspirin.



Texas Targeted Opioid Reduction

In May 2017, Texas Health and Human Services implemented Texas Targeted Opioid Reduction supported by SAMHSAs State Targeted Response funds.

HHS Office of Aging Services Coordination received TTOR funds to focus on opioid use/misuse in older adults.





HHS ASC Opioid Misuse in Older Adults - AAAs

As part of HHS ASC TTOR funding, ASC contracted with Texas area agencies on aging to increase:

- 1. Medication Reviews
- 2. Evidence-Based Programs
- 3. Capacity Building Efforts







Texas Opioid Misuse in Older Adults – Regional Symposiums



HHS ASC hosted six regional *Opioid Misuse Prevention in Older Adults Symposiums* that were:

- Included presentations from national, state, and local subject matter experts
- Held virtually due to COVID-19



Behavioral Health & Aging

Person-Centered, Trauma-Informed Care



Older Adults and History of Trauma

- As many as 90% of adults aged 65 and older have experienced at least one potentially traumatic event in their lifetime.
- PTSD may develop after experiencing or witnessing a traumatic event with 8 million adults in the U.S. experiencing PTSD each year.
- In 2017, an estimated 100,000 300,000
 Holocaust survivors lived in the U.S. Holocaust survivors endured events and experiences that can affect their long-term health and associated needs, including difficulty accessing long-term services and supports.



Uncovering Trauma History in Older Adults

It can be difficult to gather trauma histories from older adults. Older adult survivors of trauma may experience challenges seeking help because:

- May not see the role/impacts of trauma in their health
- May fear the stigma associated with their trauma history
- Healthcare providers may not recognize the signs and symptoms of trauma in older adults
- Healthcare providers may not know how to provide treatment for trauma symptoms
- Limited access to person-centered, trauma-informed care



ACL Initiative to Address Needs of Holocaust Survivors

- January 2017 the Older Americans Act of 1965 was amended to include provisions and guidance to State units on Aging to use person-centered, trauma-informed (PCTI) approaches to greatly improve the overall quality of care and quality of life for Holocaust survivors. The guidance included recommendations for key service and support need areas including:
 - Mental health
 - Physical health
 - Nutrition
 - Transportation
 - Caregiving (Paid and Family)
 - Outreach and Identification

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Person-Centered, Trauma-Informed Care

PCTI care is a holistic approach to service provision that promotes the dignity, strength, and empowerment of trauma victims by incorporating knowledge about the role of trauma in victims. PCTI care can improve patient:

- engagement,
- treatment adherence, and
- health outcomes.

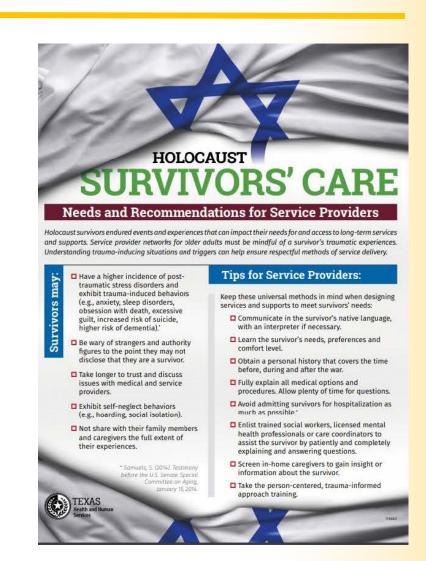




Holocaust Survivor Resources

Texas BHA developed resources to educate providers caring for Holocaust survivors including:

- Fact Sheet Recommendations for Service Providers
- Three part training series
 - Session I: Introduction to Serving the Holocaust Survivor
 - Session II: Person-Centered Thinking
 - Session III: Trauma-Informed Care
- Dedicated email <u>Holocaust-Survivor@hhs.Texas.gov</u>





Questions



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