

Alcohol Abuse and Prescription Drug Misuse Among Knox County Seniors Age 65 and Better

September 2006

Profile

- There are 7,052 citizens aged 65 or better in Knox County (17.2% of the population)¹
- Knox County has the second highest older population in Maine -- following Lincoln County by only 1%¹
- 12% of Knox County households include individuals of 65 years or older¹
- 5.3% of seniors over 65 live alone¹
- Knox County lacks racial diversity; 98.3% of our citizens are white¹
- There is a wide disparity of socio-economic status within the county - the highest average income of \$47,155 and home value of \$171,900 in the town of Rockport is in direct contrast with adjacent city of Rockland where the average income is \$30,209 and home values averaging \$82,400¹
- Rockland, the county seat, is the only city in Knox County¹
- Older Americans take an average of five prescription drugs each day in addition to at least one over-the-counter medication²
- Prevalence rates of alcohol abuse among adults age 65 and older range from an estimated 5-10% among primary care outpatients³ to 20 to 22% as reported in a recent survey in the Journal of the American Geriatric Society⁴

1. Facts based on the 2000 U.S. Census

2. American Society of Health-System Pharmacist. Snapshot of medication use in the U.S. ASHP Research Report December, 2000.

3. Fink, et al., 2002 as cited in Ruffin, L and Kaye, L. *Alcohol & Aging*. Social Work Today. May/June 2004: 24-27.

4. Kraemer, et al., 1999 as cited in Ruffin, L and Kaye, L. *Alcohol & Aging*. Social Work Today. May/June 2004: 24-27.

Study Design

The Knox County Community Health Coalition conducted a descriptive participatory action research pilot study between October 2005 and June 2006. Information came from community key informants and seniors. Participants were recruited from area municipalities, caregiving agencies, families, assisted living facilities, and senior groups.

Key informant interview questions were based on the Tri-Ethnic Center's Community Readiness for Change Instrument. There were nine interviews conducted on alcohol abuse and eleven interviews on prescription drug misuse. Senior surveys consisted of a mix of multiple choice and written response questionnaires. There were eighty surveys from a convenience sample of non-institutionalized seniors.

Protective Factors *	
Something within a person or due to his or her culture that decreases his or her chance of developing problems related to alcohol abuse or prescription drug misuse	
For Preventing Alcohol Abuse	For Preventing Prescription Drug Misuse
Prevent loneliness: social events, activities, community involvement, volunteering	Education by physicians
Discussion of alcohol issues in families	Oversight (of medication administration) by District Nursing or Kno-Wal-Lin
Knowledge, awareness	Knowledge about drugs and abuse of drugs
Plan for retirement (before it happens)	Communication with family
Visits for shut-in's	Social support
Risk Factors *	
Situations, actions, or beliefs that lead to alcohol abuse or prescription drug misuse	
For Alcohol Abuse	For Prescription Drug Misuse
Loneliness, isolation	Cost of prescriptions, lack of money
Economic issues, lack of money	Forgetfulness, dementia
Alcohol addiction, long term habit	Loneliness
Stress; emotional or mental illness	Not understanding how to take prescriptions and/or polypharmacy
Transportation, inability to get around	Vision or literacy problems

* The above protective factors came from key informant interviews and the risk factors are from senior surveys and key informant interviews. Factors are listed in order of frequency.

Community Readiness For Addressing These Senior Issues

The Tri-Ethnic Center for Prevention Research at Colorado State University has created a model and research tool for determining community readiness to take action on specific social issues. This model is based on the six dimensions of: community efforts; community knowledge of the efforts; leadership; community climate; community knowledge about the issue; and resources related to the issue. Knox County findings of Community Readiness for Change indicated the following steps for moving forward to raise awareness of these issues:

- Schedule one-on-one visits with stakeholders to continue to raise awareness
- Discuss in open forum descriptive local incidents related to the issue
- Engage local outreach programs to raise awareness and education for caregivers, family members and community stakeholders
- Offer articles for church bulletins and club/organization newsletters
- Create and disseminate flyers and posters
- Submit public service announcements and press releases to local radio programs and newspapers

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Knox County Community Health Coalition Senior Survey, 2006

Between December 2005 and April 2006, the Coalition gathered data through a convenience sample from 80 seniors living in Knox County.

- ▶ 17.5% survey respondents were men, 73.7% were women, and 13.8% did not respond
- ▶ 28.8% reported living with another person, 47.5% reported living alone, 10% reported “other” for living situation, and 13.7% did not respond
- ▶ 12.5% were between 65-74 years, 51.25% were 75-84 years, and 35% were 85+ years
- ▶ 43.75% of these seniors do volunteer work—of those who reported volunteerism, the average hours donated was 5.45 hours/week
- ▶ 31.25% of respondents reported contact with family members on two to seven days per week; 30% stated they have weekly contact with family members
- ▶ 70% of seniors reported contact with friends on two to seven days per week; 16.25% stated they have weekly contact with friends

Alcohol Consumption from Senior Survey

Twenty-seven seniors (33.75%) responding to the survey had an alcoholic drink on at least one occasion in the past month. Fifty-three (66.25%) respondents reported abstaining from alcoholic drinks in the past month.

Frequency of alcohol consumption	Number of alcoholic drinks per occasion	Number of respondents reporting combination of frequency and number of drinks	Definition of Alcohol Abuse
None	0	53	<u>Chronic Heavy Drinking</u> Two or more drinks daily for the past 30 days. <u>Binge Drinking</u> Five or more drinks on one or more occasions over the past 30 days
1 day/month	1	4	
1 day/month	5+	1*	
2 days/month	1	5	
2 days/month	5+	2*	
3 days/month	1	1	
1 day/week	1	4	
2 days/week	1	1	
3 days/week	2	1	
5 days/week	1	4	
7 days/week	1	3	
7 days/week	2	1	

*The 3 people reporting binge drinking also reported within a non-asterisk combination of frequency and number of drinks.

Prescription Drug Misuse Among Knox County Seniors Age 65 and Better

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Prescription Drug Use and Misuse

Seventy-five (93.8%) seniors reported taking one or more prescription medications and five (6.2%) reported not taking any prescription medications. Of those who take prescriptions, 71 have a list of their medications and instructions for taking each. The average number of prescriptions taken by this sample is 5.45. Seventy-four of those who reported taking prescriptions also identified the number of prescriptions they take.

Number of prescription medications	Number of people reporting this number of prescriptions (n=80)	Definition of Prescription Drug Misuse
0	5	Not taking medications as prescribed including: • Missing doses in order to save money • Missing doses to avoid side effects • Missing doses due to memory problems • Taking more medication than prescribed • Having medication stolen • Selling medication to earn additional income
1	4	
2	12	
3	10	
4	6	
5	12	
6	10	
7	5	
8	4	
9	3	
10	5	
13	1	
20	1	
24	1	
No Response	1	

For general information call: 207 594-5440

Technical questions related to statistical methods should be directed to:
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