Hancock County Needs, Resources, and Readiness Assessment on Older Adult Alcohol Abuse

August 2006

Key Project Recommendations: How You Can Help

This tip-sheet will provide you with key project recommendations and action steps you can use within your own community to implement project findings.

Healthcare Providers and Administrators

- Implement models of integrated healthcare strategies that streamline referral from healthcare providers to substance abuse providers, reducing the stigma of seeking help on this issue.

Advocates

- Engage healthcare providers including doctors, nurses, social workers, home health professionals, and direct care workers to engage older adults in conversations about alcohol use and abuse.
- Advocate for positive systems change within the State of Maine and Hancock County that increase treatment and prevention programs and older adult reimbursement for such treatment.
- Encourage funders to develop creative funding streams for implementation of both formal and community-based treatment and prevention programs.

Local Leaders and Officials

- Integrate older adults into local decision-making processes by creating a local senior council and ensuring representation from older adults on key community boards and committees.

Researchers

- Determine the impact current baby boomers will have on the alcohol and substance abuse treatment systems.
- Evaluate interventions with older adults and establish data tracking methods that can illustrate the impact of such interventions.
- Explore evidenced-based, cost-effective models of prevention and treatment with older adults and caregivers.
- Develop models of program reimbursement for programs based on successful reimbursement practices in other states.

Program Planners, Administrators, and Policymakers

- Encourage healthcare professionals to discuss this issue with older adults and their caregivers during routine medical visits and when health impacts are suspected.
Increase the number of interventions available to older adults and their caregivers and establish methods for measuring and tracking service efficacy.

Raise awareness of this issue through multi-media campaigns focusing on “breaking the silence” and healthy drinking modeled after currently successful campaigns for other health topics (smoking cessation, osteoporosis prevention, heart disease).

Develop local initiatives that empower older adults and provide social outlets and opportunities for community involvement (community health coalitions, discussion groups, exercise classes).

Create educational materials for older adults and their caregivers placed in locations that are accessible and anonymous, including libraries and healthcare offices.

Encourage communities, older adults, family members, caregivers, concerned citizens, and municipal officials to support initiatives that will raise awareness of the extent of the problem of alcohol abuse and to pursue strategic initiatives to increase prevention efforts within the community.

**Practitioners**

- Develop models of treatment and prevention that are integrated into community life.
- Create strategies for offering “elder-friendly” treatment that utilize methods that are both effective and accessible (i.e., local age-specific groups, individual, and home-based services).

**Potential Resources Available**

- Office of Substance Abuse Information Resource Center (Augusta, Maine)
- Substance abuse treatment and prevention professionals
- Recovery community
- Substance Abuse and Mental Health Service Agency (SAMHSA)
- Centers for Disease Control (CDC)

**Key Partners**

- Community members including older adults, caregivers, professionals, clergy, town leadership, and other interested parties
- Substance abuse treatment providers and groups
- Healthcare community-doctors, nurses, home health workers, and hospital administrators
- Local, county, and state government officials
- Local Healthy Hancock Collaborative members

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For general information call: 207-581-3444

Technical questions related to statistical methods should be directed to:

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