

Introduction

- One of the greatest barriers to the provision of behavioral health services is the lack of a trained workforce.
- This leads to unrecognized, undiagnosed, and untreated mental health issues that are costly and even lethal.
- Senior Centers are community focal points for aging well.
- During COVID senior center professionals have focused on delivering essential needs, fostering social connection and referrals as older adults are experiencing more isolation.
- There is limited training and information available on best practices in training Senior Center staff in behavioral health issues.

Methods & Objectives

The project tested a 19-hour online certificate in Behavioral Health and Aging developed by the Center for Aging & Disability Education & Research (CADER) at Boston University School of Social Work. Learners completed five competency-based online courses in these important areas:

1. Mental Health and Aging
2. Substance Use among Older Adults
3. Suicide Prevention Among Older Adults
4. Alzheimer's Disease and Other Dementias
5. Mental Wellness and Resilience among Older Immigrants and Refugees

- In year 1, we enrolled 200 senior center professionals in partnership with Florida Association of Senior Centers & Association of Illinois Senior Centers. In Year 2, we enrolled 50 senior center professionals from Wisconsin in partnership with The Greater Wisconsin Area Agency on Aging (GWAAR) and the Wisconsin Association of Senior Center (WASC) Directors
- The goals were the following: (1) evaluate whether and to what extent the training participants have mastered the competencies needed for effective practice; (2) evaluate the training content and applicability to practice; (3) assess knowledge and skills gained from the training program; (4) evaluate Senior Center capacity to identify and refer older adults to mental health services; and (5) assess organizational changes, in terms of programming and practice, as related to behavioral health issues with older adults. This was achieved through pre-post assessments, course evaluations, and key informant interviews.

Results

We are identifying new programs and new policies. We used the knowledge and we have now identified better ways to deal with concerns. We now need to develop the right process, the right referral steps to make sure we don't make it a lot of work but ensure that the clients get the help they need".

"I had a receptionist that was reactionary to almost every situation and we've seen a dramatic sense of calm and understanding that I hadn't seen before she took this course. That's what I would tell a director...if you have someone who seems uncomfortable or reactionary, that's the person who should take this program."

Florida & Illinois Cohort: 200 learners enrolled, 167 learners completed (84%)

- 99% of learners answered "Great extent," "A lot," or "Somewhat":
"To what extent do you believe that the training taught you what to do differently when caring for people with behavioral health concerns?"
- Preliminary analysis show that 100% of competencies are statistically significant from pre to post competency score with some of the greatest increases in areas around identifying those at risk for substance use and suicide

Wisconsin Cohort: 50 learners enrolled, 50 learners completed (100%)

- 94% of learners answered "Great extent," "A lot," or "Somewhat":
"To what extent do you believe that the training taught you what do differently when caring for people with behavioral health concerns?"

"The topics were highly relevant and gave us the knowledge to identify the signs and symptoms of mental illness and how to refer".

"I feel that before this program, I have missed many cues during my conversations with my clients. Having taken the modules, it has expanded my personal knowledge to identify the cues and ask additional information which then turned into a referral which then turned into the help that the person might need."

Conclusions

Senior Centers can increase protective factors by offering programming to support the development of social connections, which is critical to combating social isolation and improving mental wellness. It can be a challenge for Senior Center staff to implement new programming related to behavioral health, substance use, and suicide prevention because they often have had little training and feel less comfortable in creating and running these types of programs. Through this program, Senior Center staff had significant increases in competencies and new knowledge, which led to increased behavioral health programming. Currently, there are no state or national standards for training the workforce in Senior Centers in the areas of behavioral health. This project aims to lead this effort by suggesting best practices in statewide training initiatives based on the results from this program.

References & Acknowledgements

This is a collaboration between the Center for Aging and Disability Education and Research (CADER) at Boston University School of Social Work and the National Council on Aging (NCOA)

Funded by RRF Foundation for Aging