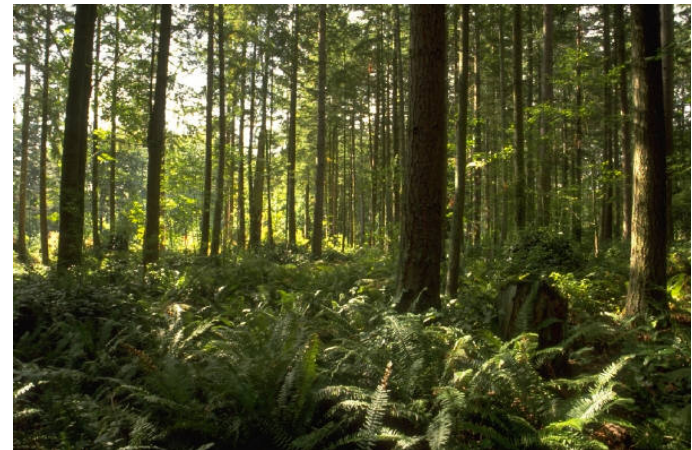

*"Seeking Solutions,
Finding the Answers"*

SWAP Annual General Meeting,
Burnaby, BC
September, 2003

Or, the little project
that grew



And grew...and
grew..



Seeking Solutions: Canadian Community Action on Seniors and Alcohol Issues

Seeking Solutions: The National Project

- Initiated by SWAP
- Develop information” Best practices”
- Develop a Canadian network
- Create a starting point for communities
 - “Most starting from scratch”
- The involvement of seniors: as organizations; as advisory committee members; as focus group members; as “vetters” of materials

First, some figures

Basic Statistics

- Over than half million seniors in BC (551,000) and just under 4 million in Canada (3,989,000) (Stats Canada, 2002)
- 67% of seniors in Canada aged 65-74 are occasional or regular drinkers,
 - More men than women drink (72% and 62% respectively).
- Among people aged 75 and over, about one half (51%) are occasional or regular drinkers.
 - 61% men, compared to 45% women.

The Project

-
- Funded by Health Canada, National Population Health fund
 - 3 year initiative
 - Coordinator, administrative, & student translator (so materials can be used throughout Canada, particularly Quebec, Northern Alberta, Manitoba, New Brunswick etc.)
 - Immense contribution of volunteer (in-kind) effort by people across Canada

What has the project been doing?

- Our network:
 - Connecting people across Canada by teleconference, email,
 - OPAAL (Older persons and alcohol listserve; free email; way to share ideas; most current practice & research)
 - 2 national meetings (Ottawa, Vancouver)
- Best Practice info sheets

And so much more...

- Website (www.agingincanada.ca)
 - Over 145 separate topics on alcohol, aging; over 8600 visitors to home page... over 300,000 hits on the pages
- Seniors Speak Out ... About
 - Stigma, Loneliness, Ageism
- Brochures
 - Fast Facts; Alcohol and Heart Health
- Resource/Clearinghouse
- Policy Issues

Our Advisory Committee

- Service providers, senior organization, seniors
- Vancouver
- Calgary
- Winnipeg
- Rankin Inlet (Nunavut)
- Thunder Bay
- Ottawa
- Toronto
- St. John's
- Montreal



Challenges of a National Project

- 10 provinces, 3 territories
- English & French
 - Can be a big challenge to reaching communities, but committee members and volunteers have been wonderful
- Rudimentary or non-existent networks on alcohol issues, in the provinces especially for counsellors
- Technology
 - Many communities not tied into email or other technologies; or it only exists at administrative level; info can't get to the frontline staff person
- Appropriate Treatment Model?
 - Harm reduction is not embraced in all jurisdictions
- Integrating all the pieces: This is much more “just addictions”

Integrating the pieces.



This is much more than...
“just additions”.

Issues cross many sectors, e.g.:

- Housing
- Health
 - Physical
 - Mental : depression, cognitive impairment
- Legal & Ethical
- Family Systems: caregiving
- Elder Abuse/victimization
- Access to Health Care
 - Palliative care
- Workplace issues:
 - Retirement; layoff

Listening to Seniors



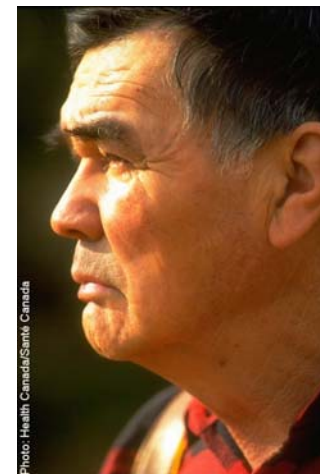
Focus Groups

- Victoria, Vancouver, Thunder Bay, Ottawa, Toronto, Halifax, St. John's
 - “Alcohol affected”
- Some with alcohol problems: what works and doesn't work for them
- Understanding the social expectations of their age
- Remembering when...
- Understanding the depth of the stigma around alcohol issues & how gender and stigma intersect

Generational Experiences

- “In our day, everyone did it in the 1960s and 1970s, everyone drank, the social drinking”.
- “You were brought up with the Hollywood movies, where you laughed at people in the movies who had too much to drink, and fell down drunk.”
- “I remember hotels that had separate rooms for ladies and escort, and you could not go into a hotel without an escort.”

Recognizing the Diversity of Seniors around this Issue



Recognizing Diversity of Seniors

Although there are many commonalities... and no community is immune...

- May be different issues for older women and older men
- Services and circumstances in rural communities may be different than urban (e.g. lack of transportation is major issue, “everybody knows everybody’s business”)
- Near seniors, young senior (65-75), and older seniors are in different life stages
- Life situation (poverty, lack of affordable housing) will be factor for some, and not for others

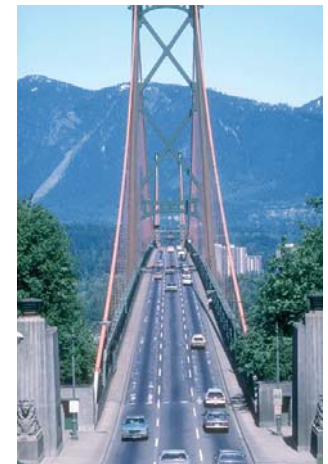
Overview of Canadian Approaches

What is Available Across Canada

- 14 senior specific programs across the country
- 5 have celebrated their 20th anniversaries
- Rest of the country – sole practitioners working in isolation, struggling
- But efforts to change the *status quo*

Types of Approaches

- Strong emphasis on harm reduction among the seniors' programs
- Different locations and different ways of reaching seniors
 - outreach (SWAP, VISTA, LESA, COPA)
 - volunteer coordinated (Groupe Harmonie)



More approaches to prevention/ treatment/ support

- ❑ health care clinic (Calgary)
- ❑ hospital (SUMMIT, Winnipeg; SAILL, Calgary)
- ❑ long term care facility (Safe Haven, Edmonton),
- ❑ outpatient (OPUS -55)
- ❑ residential treatment (St. Joseph's Care Group, Thunder Bay)



Best Practices

“My boss told me today I’m going to be the counsellor for seniors. I know nothing about seniors. Where do I get some training?”

... Saskatchewan

Best Practice Topics

- Intro
- Guiding Principles
- Harm Reduction
- Identifying Alcohol Problems
- Formal Assessment tools
- Alcohol Withdrawal
- Depression
- Support Groups
- Chronic Pain
- Elder Abuse
- Too Hard to House, too Hard to Help??
- Rural
- Plus in depth information

Community Development

- Recognizing there is a role for everyone
- Addressing many parts of the issue
- Recognizing the effect is more than alcohol
- Housing, physical and mental health, social wellbeing, sense of purpose in society

OPAAL (an email listserve)

- Est. by Bill Mckim, Memorial University of Newfoundland
- Breaking the isolation
- Identifies cutting edge research/ knowledge
 - What we thought we knew, we do not know, e.g. effects on women
- Integrating information
- Sharing issues; ideas; practices

Purpose of the Best Practice information

- Introduce issues
- Workshops, and short sessions
- Promote cross training and working together

Some Milestones During the Project

These are among our Partners' own achievements:

- Newfoundland has conducted first survey on alcohol problems among seniors in the province
- Manitoba has initiated “ Seeking Partners” to aid community development on alcohol issues
- Addiction agencies, health organizations and policy bodies in several provinces are beginning to consider as an important group to be reaching
- Collaborations
- Mutual support
- Building links into mental health

Prevention and Education

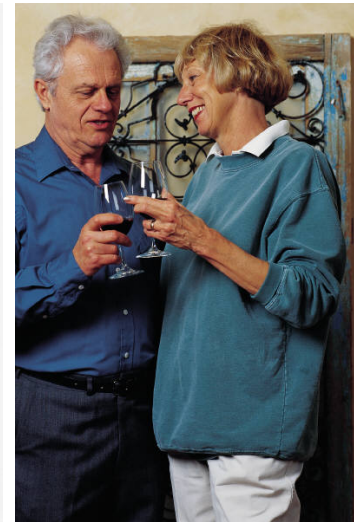
Prevention

- Very little has been happening in prevention: seniors are invisible; seen as low risk group, because % of people who are drinkers tends to decrease with age
- Misconceptions: false sense of security



What age group is most likely to...

- Consume 7-13 drinks a week on average
- Consume 14+ drinks a week
- Hint: It is not young adults

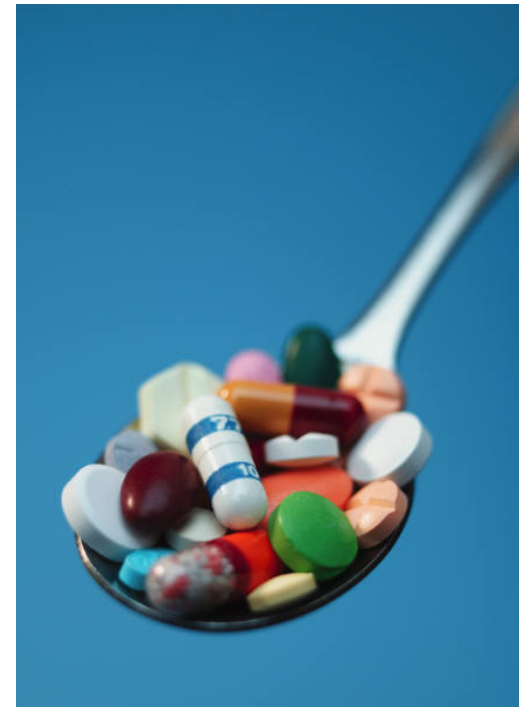


The ‘Winner’ is...

- 24% of drinkers aged 65-74 and aged 75+ (24%) consumed 7-13 drinks a week
- Versus 20 to 24 year olds (21%).
- Highest percentage of people of any age group drinking 14+ drinks a week is men aged 65-74.
- Source: National Population Health Survey (Statistics Canada, 2002)

Understanding Alcohol Risks: Medications

- Most common prescription medicines for older adults include
 - pain relievers (60% used these within the past month),
 - heart and blood pressure (11-30% use),
 - stomach remedies and laxatives (10-11% use),
 - sleeping pills (8% use) and
 - cough and cold medications (8% use).
- In 1994/95: 1 in 10 older Canadians taking 5+ drugs during the two days before the survey.



Need to think about the reality of how people live their lives:

- Advertising Medications

- An aspirin to prevent a heart attack +
- An aspirin for my arthritis +
- My blood pressure medication +
- A few drinks with the boys

Understanding the different kinds of information needs

1. Understanding the alcohol & health information
 - The shift in messages
 - The push to promote alcohol as part of “healthy” lifestyle
2. Well seniors or low risk seniors
 - Keeping well, low risk guidelines that make sense; tying it to other health info (falls; heart health; diabetes; cancer)

Education/Prevention/Early Intervention

3. Those experiencing alcohol problems (may be recent problem or long standing problem)
 - Positive, normalizing messages, help is available
 - Health info about alcohol, but needs to be tied to the specific health problems people are facing

4. Those in contact with older adults
 - Positive, normalizing messages, older adults do well, help is available

Some Creative Methods of Getting the Alcohol Education Message Across

- Goal: Normalize the topic and inform
- Use of plays, skits by seniors
- Problem gambling: crosswords, word searches, that can be left in waiting rooms, warm up exercise for workshop
- Integrating alcohol info into other information
 - Falls prevention calendar (e.g. FOCUS, Ont.)
 - Caregiving groups
 - 2004 Prevention Education Calendar- dozens of way of integrating alcohol-health info in a non stigmatizing way

Seniors Speak...

- “Kinds of messages that needed to get are.. [that] somebody cares about us, that some one is reaching out to us, that somebody gives a darn.”
- “Need to get message out that there is help for you. All you have to do is ask.”
- “It’s one thing to say, “Say no to drugs, drinking, or gambling, but what you want to know is “How to say ‘No’ to yourself.” Need to know where to go to fix the problem.”
- “Put the messages where people see it, and put a phone number.”
- “Every doctor’s office is the best place to put the information.”
- “The information also needs to be public places, like bus stops.”

Prevention Education Calendar includes..

- Alzheimer Awareness Month
- Dealing with the Winter Doldrums
- Heart Month
- Cancer Awareness Month
- Mental Health Week
- Elder Abuse Awareness Week
- Stroke Awareness Month
- Heading into the Summer Heat “Keep Your Cool”
- Healthy Aging Month
- Fall Prevention Month
- Pain Awareness Month
- National Drug Awareness Week

Alcohol and Access to Addiction Services

Profits to Gov'ts on alcohol sales

- \$3.9 Billion (2002); \$3.2 billion remitted to provinces
- 187\$ per capita (age 15+) for BC;
- >\$600 million dollars profit to BC government in 2002

- How much \$ in alcohol taxes is received over the course of a 75 year old person's lifetime
- ... and yet why "can't afford to have appropriate services for them"???

Role of Seniors in Society Generally

- A closing comment from one of the focus groups:
- “I’d like to see a message that it’s ok to be a senior. ... an attitudinal change. I’d love to see on the side of a bus ‘We love our seniors’.”



Thank you

Please feel free to visit our website:
“Seniors and Alcohol” www.agingincanada.ca

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