

Best Practices

guiding principles

People across the country have found a number of positive approaches that work well with older adults who are experiencing an alcohol or medication use problem.

Below are a few starting points to guide counselling or offering other types of help to older adults. The principles are also useful when planning and implementing resources in the community.

1. Build Trust

Older adults experiencing alcohol problems often feel alone and unsure of themselves. It is very important to support and motivate the person wherever possible. While this effort may take somewhat more time in the short run, it often leads to better outcomes in the longer term for the older adult.

Starting Points

- Take the needed time to build rapport and trust with the person.
- Draw on that trust by being available at key points, (for example, if the older person seems unsure, offer to accompany him or her when meeting a new service provider, or attending a support group for the first time).

2. Be Flexible and Accessible

Any addiction or other health care service must be accessible to the senior to be of optimum use. There are several common barriers to service for older adults with alcohol use problems. These can include

- the agency's admission/ discharge policies,
- staff attitudes,
- overlooking important individual differences (such as difficulty with hearing or memory), and

- environmental barriers (such as the physical location of the service, stairs, lack of elevators for people who have difficulty walking).

In reaching out and offering help to older adults, recognize they may need extra time, and give them that needed time. Go at the individual's speed. This often means going much slower. Focus on the individual's needs. Design and provide services that are appropriate and relevant for this population.

Starting Points

- Develop a good understanding of the differences that can occur with age. Recognize these differences, but don't generalize them to all older adults.
- Discover any gaps in or barriers to addiction services and other services in your community or region, by consulting with older adults and service providers who are familiar with older adults' needs.

3. Understand and Respect the Older Person

People demonstrate respect in many ways, including

- by acknowledging older adults' needs for independence and control over their own lives,
- through the language that they use, and
- in the ways that they act towards older adults who are experiencing alcohol use problems.

Service providers also demonstrate respect when they understand community values and perspectives, are sensitive to cultural and generational differences among older adults, and when they turn to older people for ideas on how to effectively reach peers in

their community. Respect includes recognizing and building upon the older person's life experience in treatment and health care planning.

Starting Points

- Listen to the person.
- Reinforce that the alcohol problem is not a sign of personal weakness.
- Avoid stigmatizing and labeling language such as "alcoholic", or "enabling" when talking with the older adult or with others.
- Avoid imposing your own personal or professional values on the older person's goals when offering help.
- Recognize that ethical issues around risk, autonomy, and paternalism can arise in the context of helping older adults. Address these with the individual, family, or other service providers if the issues arise.

4. Take a "Whole Person" Approach

There are frequently many interrelated difficulties in the older person's life. Alcohol use is only one facet of the person's life and the person has many strengths that he or she can draw on.

When helping the older person, it is important to not focus exclusively on the alcohol use. Look to positive parts of the person and take into account all aspects of the older person's physical, psychological, social, financial and spiritual needs.

Starting Points

- Use approaches that will promote the older person's physical, mental, and social wellbeing.
- Place any discussion of alcohol use in a normalizing context.
- Do not talk with the older person only about the alcohol problem. There are many other sides to this person.
- Use humour and other positive techniques to lighten up the discussion, and to facilitate what can otherwise be an anxious atmosphere.
- Give the person opportunities to express and show parts of his or her life, strengths, skills, capabilities etc. Facilitate opportunities to use those personal strengths and skills.

- When evaluating new or existing programs, look at them from older peoples' perspectives, particularly for indicators of "success".

5. Recognize the Diversity of Older Persons' Needs and Their Lives

Older adults have all the psychological needs that other people have, including the need to be wanted, needed, and valued. Older adults are often experiencing many changes in their lives, including loss of a spouse and friends, and changes in health. Some older adults are struggling with a loss of job or other important roles.

Older adults who are experiencing alcohol problems are a very diverse group. Older women and older men often face different types of experiences. People in their 60s are in a different stage of their lives than people in their 80s. Rural and urban older adults can have very different life experiences, circumstances, needs, and expectations from each other. Older members of different ethnic or cultural minority groups can face significantly different social expectations around aging, alcohol use, and other issues, when compared to older adults in mainstream groups.

6. Actively Reach Out

Many older persons experiencing an alcohol problem become very isolated because of their physical, psychological, social or economic condition. Helping will typically mean taking active efforts to reach and support them. It means providing services that are readily available, user-friendly, flexible and accessible. This may include offering outreach, home visiting, or telephone support, as well as assuring there are reliable ways to get the person to services and to help the person reconnect in the community.

Starting Points

- Use approaches and opportunities to reach out to the person, rather than expecting the person to find you.
- Start by helping to meet the person's basic needs or other things that the person feels is causing the most concern.
- Focus on ways of reducing distress for the person.

- Recognize and build on small successes with the person.
- Recognize that changes which you or others feel are needed may not match the older person's priorities.
- Recognize transportation can be a barrier. Look at ways to address the transportation problem when developing programs.

7. Understand Age and Other Relevant Differences

The educational needs and other needs of older adults with alcohol problems can be quite different from older adults who do not have alcohol use problems. The life issues affecting older adults who have alcohol use problems are also different from younger people with these problems.

Starting Points

- Recognize the differences among clients.
- Be flexible in program requirements and expectations.
- Be flexible when developing and using prevention and education materials. Know your audience.
- Use age and gender appropriate materials.

8. Be an Advocate

The needs of older adults are often overlooked or ignored. It is important to help encourage older adults to speak on their own behalf, and help them ensure their needs are being met. Sometimes it will be necessary to speak on older people's behalf to get their needs recognized and addressed at an individual or systems' level.

Policies in hospitals, emergency, addiction services, long term care facilities, day programs, housing programs, etc. frequently act as a barrier to the person getting needed help and services. People helping older adults with alcohol use problems will often need to be strong advocates to help remove the policy barriers if they occur.

Starting Points

- Recognize the stigmatization and common misconceptions that arise in this area.
- Actively counter the stereotypes that exist about aging or about alcohol problems in later life.
- Actively question "neutral" policies in addiction, health and community services that can discriminate against older adults or act as a barrier to an older person receiving help.

9. Foster Common and Realistic Expectations

People (including family members, addiction workers and other service providers) can have very different expectations about how best to help older adults who are experiencing alcohol use problems. They sometimes focus on trying to get an older adult to stop drinking and overlook or resist offering other types of help the person may need.

It is beneficial to recognize that alcohol problems exist on a continuum. Abstinence is one of several possible goals. Sometimes abstinence is not needed, and in other cases, it may not be possible.

Harm reduction (discussed in Best Practice Sheet # 3) is a public health concept that does not require abstinence. It offers the option of working from the person's present drinking pattern to stabilize the situation, and achieve health and other gains. Harm reduction strategies can be adopted within many different contexts.

Starting Points

- Encourage people to openly discuss their personal and professional understanding about the nature of alcohol problems. People's views often differ.
- Help people understand the limitations of focussing on any one type of approach, particularly if it does not seem to be helping this person.

10. Work with Others

No one can tackle all the issues affecting the older adult alone. Draw on the skills of a variety of community resources, professionals, and support services to provide a comprehensive range of community-oriented services for the older adult. Work towards collaboration between volunteer and formal organizations, as well as inter-agency cooperation. Try to work together in an integrated way.

Starting Points

- Whatever service you are offering, avoid working in isolation.
- Look for natural partners in your community such as mental health workers, home support, health care and health promotion workers, housing services, and pharmacists.
- Look for help in the context of other community and older adults' services, including seniors' groups.
- Become creative in the individual and community strategies used.
- Provide people connected to the older adult with feedback to build hope.
- Promote the belief that change is possible for this individual and other older adults in similar circumstances.

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