Dear Members of the Mental Health and Disability Services Legislative Interim Committee:

As we move forward with a comprehensive effort to re-design our public mental health system, the need to deal with the challenges of Iowa’s growing aging population in a systematic and cost-effective manner is critically important. Older Iowans are the fastest growing segment of our population, representing 1 out of every 5 persons living in the state. Currently there are 838,000 Boomers aging in place in Iowa, nearly 30% of the total population. The first wave of Boomers born in 1946 turns 65 this year.

The Iowa Coalition on Mental Health and Aging is an organization of over 500 mental health and long-term care providers, practitioners, older adults and persons in recovery who advocate for appropriate mental health care for older Iowans in their local communities, delivered by qualified providers. For further information about the Coalition and a recent state-wide training survey, please access the website: www.icmha.org.

Older adults have separate and distinct behavioral disorders (i.e. dementia, altered states of consciousness, and late-onset depression and anxiety) requiring age-appropriate identification and screening efforts. Since many behavioral health disorders among older Iowans go undetected and are treated in primary care and long-term care facilities rather than in community mental health centers, a system re-design should support the integration of specialty mental health care into primary care (i.e. co-location of service delivery). State departments and divisions (e.g. Iowa Department of Human Services, Iowa Department on Aging, and Iowa Department of Public Health) need to maximize federal supports to finance program development of evidence-based, community-based specialty programs targeting older Iowans—especially in our rural areas.

Pilot programs of co-location of service for older adults are being implemented in Clarinda, Des Moines, Harlan, Manchester, Spencer and Waverly where a mental health specialist helps physicians and other primary care staff identify older adults with mental health needs, complete a diagnostic assessment and develop a treatment plan (medications, problem-solving therapy, and case management services). Training sessions have been offered in many locations across the state in evidence-based depression care models PEARLS (Program to Encourage Active, Rewarding Lives for Seniors) and Healthy IDEAS (Identifying Depression, Empowering Activities for Seniors) conducted by Aging Resources of Central Iowa and should be widely disseminated.

Studies have demonstrated that when older adults are properly treated for depression and other forms of mental illness that their quality of life improves significantly. They become more independent and less prone to exhibit physical
symptoms, the treatment of which can drive up the cost of medical care and result in premature and costly out of home placement.

Together we can make a difference in health care in our state, beginning with the re-design of our mental health system.

Thank you for your kind consideration.

Respectfully,

Joel L. Olah, Ph.D., LNHA
Policy Chair
Iowa Coalition on Mental Health and Aging