Foreword

Most older adults live independently in the community, free of behavioural, psychological or cognitive problems. However, a substantial minority face significant challenges associated with substance use, mental health problems or gambling. For instance, five per cent of community-dwelling adults 65 and older have dementia and about the same percentage have clinical depression. These proportions increase dramatically in care settings: 25 to 50 per cent of older adults living in long-term care homes have dementia or clinical depression.

The proportion and number of adults 65 and older are increasing more rapidly than those of all other age groups, and the fastest growth is occurring among the oldest (i.e., over 85). Because of this, in the coming years, Canada's health care system will experience an unprecedented influx of older adults with substance use, mental health and gambling problems. Due to what has been referred to as the inseparability of physical and mental health in old age, most of the older adults with one of these problems will also have various other age-related illnesses, making their care more complex, and also more necessary.

Supervisors, managers and staff working with older adults have to be ready to address these problems. Fortunately, major advances in several relevant fields over the past 30 years—particularly geriatric psychiatry, behavioural neurology, gerontology and psychogeriatric nursing—have led to a dramatic increase in empirical data and evidence-based knowledge related to these problems. Building on these advances, clinicians now have the ability to diagnose and address these problems.

This guide covers not only the conditions that are most prevalent in older adults—dementia, depression, anxiety, addiction to tobacco, delirium, abuse of prescription medications—but also those that afflict a smaller number of older adults but cause significant distress and disability (e.g., alcohol use, gambling problems, bipolar disorder, schizophrenia and personality disorders). Additional sections address challenging situations that can occur in late life (e.g., isolation, elder abuse, aggression, suicidality, self-neglect, hoarding, homelessness).

Other sections cover a variety of other relevant topics (e.g., ageism, diversity in late life, components of care, barriers to referral, community resources). A series of information sheets that can be given to older adults or their family members is also provided. Screening or diagnostic information and intervention strategies are presented in a clear and practical way so all professional caregivers, regardless of their background and experience, can use them.

Improving our response to older adults with addiction and mental health problems is both a clinical possibility and a demographic imperative. The authors hope that the information and tools provided in this guide will help readers in their work to improve the health and quality of life of older adults and their caregivers.

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