

In This Issue

Rural communities in the US are generally home to a higher proportion of older adults compared to urban or metropolitan areas, and the populations of adults aged 65 years and older is growing in these regions. People living in rural areas experience disparities in mental health and substance use disorder service access for a number of economic, structural, and social reasons. These gaps are even larger for older residents. Adding to the complexity involved in addressing disparities in care is that rural communities are diverse, and the issues affecting these regions differ vastly. It won't likely come as a surprise that mental health research in American rural communities of older adults is limited.

In this month's *Hot Topics Newsletter*, we feature the latest research exploring care for mental health and substance abuse disorders in older adults residing in rural communities. Central to the E4 Center's mission is working to engage healthcare providers to close these gaps in care to more equitably serve older adults in all communities. This was evident in the Policy Academy recently held in Health and Human Services Region 8 with state representatives from Colorado, Montana, Utah, and Wyoming, where plans were generated for increased awareness of resources and education for health care professionals about older adult mental health. Keep your eyes out for more on this work!

For more detailed background and data on rural mental health, check out these resources and policy briefs on rural mental health from the National Rural Health Association:

[Mental Health in Rural Areas](#)

[The Future of Rural Behavioral Health](#)

[Addressing Higher Risk of Suicide Among Farmers in Rural America](#)



Older Adult Mental Health in Rural Communities

[Partnering with community-based organizations to improve equitable access to depression care for underserved older adults in the U.S.: Qualitative formative research](#) *Frontiers in Public Health*. January, 2023

Accessing depression treatment in under-resourced communities is challenging, especially for older adults. Evidence-based programs (EBPs) that partner with community-based organizations (CBOs), such as the Program to Encourage Active and Rewarding Lives (PEARLS), can help close the gaps in depression care access. Steinman and colleagues interviewed CBOs serving older populations experiencing poverty, particularly

communities of color, linguistically diverse, and rural communities. They aimed to gain an understanding about CBO resources in order to improve equitable dissemination and implementation strategies to support PEARLS adoption. They found that CBOs generally value EBPs with cultural flexibility, stable funding, accessible training, staff investment, and that are a good fit with staff and community needs. These findings can inform ways to enhance EBPs for depression offered in the community and improve equity and dissemination to underserved older adults.

Trends in geographic proximity to substance use disorder treatment *American Journal of Preventative Medicine*. April, 2023

Kapinos and colleagues examined data from the 1992-2018 Health and Retirement Study to characterize trends in proximity to substance use disorder (SUD) treatment in older adults. Although older adults generally experienced a decrease in availability of SUD treatment facilities in their counties from 1992 to 2018, there was an increase in facilities accepting Medicare and Medicaid. Older adults living in rural areas experienced the most growth in SUD treatment facilities over this time period, but less growth in nearby facilities offering evidence-based treatments for opioid use disorder, a particularly important need in these areas.

Factors associated with quality of life, depressive symptoms, and perceived stress among rural older adults living with HIV in the United States *The Journal of Rural Health*. March, 2023

Medical advancements in HIV treatment means that more people are aging with HIV and managing it as a chronic illness. Walsh and colleagues examined factors associated with quality of life (QOL), depressive symptoms, and perceived stress in 446 rural-dwelling older people living with HIV (PLH). They found that low social support, HIV stigma and discrimination, lower quality of medical care, and structural barriers related to accessing housing, food, transportation, and internet were associated with poorer QOL and mental health outcomes. These findings highlight targets for intervention to best support older PLH in rural communities.



Written for the E4 Center by Susan Buehler, PhD

Substance use treatment services for older adults in five states in the Southern United States: A state-by-state comparison of available treatment services *Aging and Mental Health*. May, 2023

Older adults in the Southeastern region of the US have unique substance use and misuse needs, particularly for opioid use issues. Mumba and colleagues analyzed the N-SSATS-2019 dataset to learn about SUD treatment availability in five Southeastern US states (Alabama, Georgia, Kentucky, Louisiana, and Mississippi) as it pertains to older adult needs. There was a total of 1,215 facilities offering SUD treatment, with Kentucky having the most facilities. Only 20% of these facilities offered programs specifically tailored for older adults. Higher rates of poverty, rural geography and stigma, and lack of treatment availability complicate access for older adults..

Health disparities in Appalachian and other rural communities *The International Journal of Aging and Human Development*. May, 2023

Hash and colleagues review the health, mental health, and economic disparities among older Americans residing in rural communities, particularly those in the Appalachian region. They describe the role of social determinants of health such as X, Y, Z and ways to address these factors to reduce the gaps in care across the lifespan. Telehealth, recruitment and retention of professionals, building healthier environments, and engagement of multidisciplinary students are identified as important targets in addressing these disparities.

Rural/urban differences in mental health and social well-being among older US adults in the early months of the COVID-19 pandemic *Aging and Mental Health*. March, 2023

Henning-Smith and colleagues examined data from 6,873 older adults from the COVID-19 Coping Study to explore differences in mental health and social well-being in rural and urban locations in the early months of the COVID-19 pandemic. They found that mental health and social well-being outcomes were similar among rural and urban older adults. Older adults living in rural areas reported lower concerns about COVID-19 and more frequent social media use compared to older adults from urban communities. The authors speculate that these factors may have contributed to a greater risk of contracting illness in the later months of the pandemic.

Upcoming Events

You can register for these events or learn more by going to our website at e4center.org/calendar

SEPT

Practicing Anti-Ageism

September 6

@ 12:00 pm - 1:30 pm CDT