



# OLDER ADULT BEHAVIORAL HEALTH & WELLNESS INITIATIVE PROJECT REPORT

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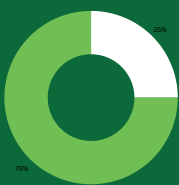


# PROJECT OVERVIEW

In January 2023, the Ohio Department of Mental Health and Addiction Services (OMHAS) Office of Community & Family Resiliency released a Request for Applications (RFA) for the Older Adult Behavioral Health & Wellness Project. The project is aimed at empowering older adults to make healthy lifestyle choices and navigate the use of medications and alcohol. The initiative utilizes the evidence-based program, Wellness Initiative for Senior Education (WISE). It is funded by The Substance Abuse and Mental Health Services Administration's (SAMHSA) State Opioid and Stimulant Response (SOS 3.0) grant. The project also incorporates early intervention strategies such as Question, Persuade, and Refer (QPR) for suicide prevention, and the integration of a screening and referral process utilizing the Screening, Brief Intervention, and Referral to Treatment (SBIRT) model. Among the applicants were the St. Mary Development Corporation, The Urban Minority Alcoholism & Drug Abuse Outreach Program of Dayton (UMADAOP), and Prevention Awareness Support Services (PASS) of Lima. OMHAS directed a collaborative approach to be supported by the Montgomery County Board of Alcohol, Drug Addiction, & Mental Health Services (ADAMHS).



## BACKGROUND



**More than 20%** of people aged 55+ are living with a behavioral health diagnosis



**Less than 3%** of older adults report seeing a mental health professional for their needs

- Between 2000-2020, drug overdose deaths for adults aged 65+ increased from 2.4 to 8.8 deaths per 100,000
- For men aged 65+, drug overdose deaths were highest among non-Hispanic Black men compared to Hispanic and non-Hispanic White men
- For women aged 65-74, drug overdose deaths were highest among non-Hispanic Black women compared to Hispanic and non-Hispanic White women
- White women aged 75+ had the highest rates of drug overdose deaths
- The rate of drug overdose deaths involving synthetic opioids other than methadone, such as fentanyl, for adults aged 65+ increased by 53% between 2019 and 2020





The goal of the Older Adult Behavioral Health & Wellness Initiative was to develop a statewide model aimed at reducing risk factors and increasing protective factors among Ohio's older adult populations.

## BUILD PARTNERSHIPS | TRAIN STAFF | IMPLEMENT PROGRAMS

### COLLABORATING WITH KEY STAKEHOLDERS

A partnership between OhioMHAS, Montgomery County ADAMHS, St. Mary Development Corporation (SMDC), UMADAOP of Dayton, and PASS was established to lead an OABHW Advisory Council, bringing together diverse stakeholders from across the state. Council members included representatives from UMADAOP chapters, county behavioral health boards, LeadingAge Ohio, Area Agencies on Aging (AAA), suicide prevention coalitions, drug-free prevention coalitions, the American Association of Service Coordinators (AASC), and more.

### DEVELOPING A STATEWIDE FRAMEWORK

The Advisory Committee met bi-weekly for six months to develop a statewide framework for the OABHW Project. Using SAMHSA's Strategic Prevention Framework (SPF), the committee established a roadmap to build the necessary state and local infrastructure to implement the project at scale.

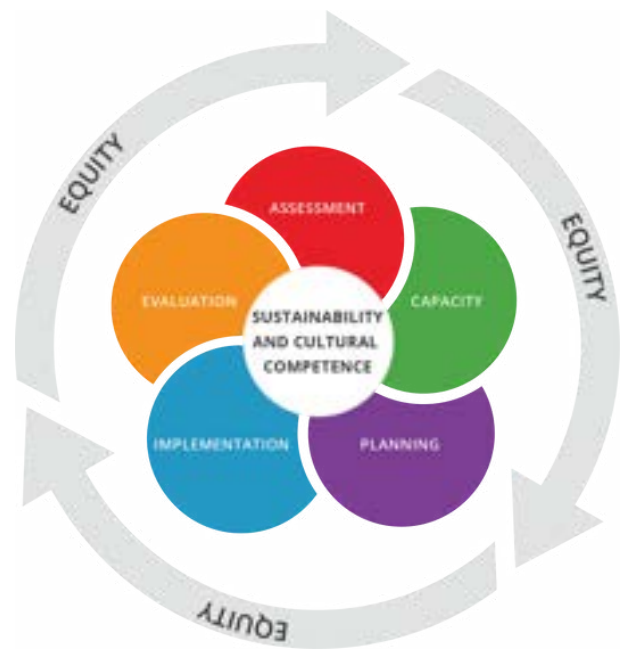
### PILOT IMPLEMENTATION

Representatives from Montgomery County and Allen County formed an implementation team, a subcommittee of the statewide Advisory Council, to pilot the OABHW Initiative at the local level.

### BUILDING REGIONAL CAPACITY

To ensure widespread implementation of the OABHW Initiative, five regional teams were established across Ohio: Southwest, Northwest, Central, Southeast, and Northeast. These teams are empowered to conduct local training and support, enabling the project to reach its full potential.

The OABHW Advisory Council issued a Request for Proposals (RFP) and awarded mini-grants to organizations that completed WISE training. These one-year grants enabled grantees to implement the OABHW Initiative in year two.



(SAMHSA Strategic Prevention Framework, 2023)

## LOCALIZING WISE

To enhance the OABHW Project's capacity and knowledge base, the project team partnered with the New Jersey Prevention Network (NJPN), the developers of the WISE program. NJPN provided valuable content expertise to the Advisory Council and facilitated train-the-trainer



<https://www.njpn.org/wise>

opportunities. This collaboration enabled local teams to become equipped with the necessary skills to deliver effective WISE programs across the state.

To ensure access to high-quality Mental Health First Aid, Question, Persuade, Refer (QPR), and SBIRT training, the project team partnered with local ADAMHS boards and OhioMHAS to identify certified providers and provided ongoing support to regional teams, including guidance, data collection training, and resource referrals.

The OABHW Initiative held 24 monthly meetings for facilitators, Master Trainers, and advisory/leadership groups. Master Trainer meetings focused on program implementation, sustainability, facilitator training, and program development.



## PROGRAM EVALUATION

The Ohio Colleges of Medicine Government Resource Center evaluated the SOS 3.0 grant using quarterly, mid-year, and end-of-year reports. These included SOR/TOR Program Instruments, Non-GPRA Surveys, and Performance Progress Reports. This comprehensive approach provided valuable insights into the program's effectiveness and areas for improvement. Additional local data- aggregation for project deliverables was managed by the team at SMDC and ADAMHS.

<https://grc.osu.edu>

## HIGHLIGHTS: YEAR ONE

52

Professionals across Ohio trained in WISE

18

New facilitators began teaching WISE

137

Older adults received WISE

14

Master Trainers certified in WISE



The OABHW Initiative focused on older adults who are defined as an underserved population by the National Institutes of Health. This program assists communities in implementing The WISE Program which celebrates healthy aging and educates older adults on a variety of topics including safe medication use, communicating effectively with healthcare providers, and strategies for healthy living. The unique approach of the OABHW Initiative implementation across the State of Ohio allowed for intentional engagement of special populations which may not have been reached if the project was siloed in urban counties. This allowed the project team to establish new partnerships in diverse communities reaching the most at-risk populations.

## RACIAL AND ETHNIC MINORITIES

The OABHW Initiative spanned across the State of Ohio, engaging individuals of various racial and ethnic minorities. Examples of intentional engagements include the work of The UMADAOP of Dayton who has conducted outreach to the twelve UMADAOPs of Ohio. Training was completed at The Ohio University in Dublin, Ohio by UMADAOP of Dayton.



## VETERANS AND ACTIVE SERVICE MEMBERS

The OABHW Initiative toolkit for WISE facilitators includes the **Older Veteran Behavioral Health Resource Inventory from the U.S. Department of Veterans Affairs** to aid in appropriately serving veterans and active service members.

## RURAL AND APPALACHIAN OHIOANS

The OABHW Initiative spans across the State of Ohio, including engaging individuals in rural and Appalachian areas. Partners sites which implemented WISE include a diverse group of urban and rural organizations. Additional outreach should continue in rural regions as not as many older adults were reached during the project period.

## DEAF & HARD OF HEARING

One significant challenge encountered in the OABHW Project was the difficulty in reaching the Deaf & Hard of Hearing community. Despite initial efforts to connect with the Ohio School for the Deaf and a specific facility for Deaf older adults in Westerville, Ohio, these attempts were unsuccessful.

The inability to effectively communicate with and engage the Deaf community limited the project's reach and potential impact. This highlights the importance of considering accessibility and inclusivity in future program development and implementation.



## **NEWCOMERS AND NON-ENGLISH SPEAKERS**

The UMADAOP of Dayton has led the engagement of the newcomer (immigrant and refugee) and non-English speaking populations through their work involving the twelve UMADAOPs across the State of Ohio. Successes include the commitment of the Lorain UMADAOP representing the Hispanic populations and aiding in the translation of the WISE training materials to make them accessible to Spanish-speaking facilitators and participants. The UMADAOP of Dayton has also been engaging with the local Hatain population in Springfield through WISE and other prevention programming, working to intentionally make resources accessible.

## **LGBTQIA2S+**

The project team of the OABHW Initiative joined the Public Health Dayton & Montgomery County's LGBTQ+ Health Alliance Life Span Action Team where they have reestablished a connection with Q+ identifying older adults to offer WISE training and participation in various community events. The manager of these programs is involved in OABHW project team meetings to ensure intentional inclusion and cultural competency. Locally, there is an increase in events focused on Q+ identifying older adults.



## **TESTIMONIAL**



*"The participants enjoyed the lesson on Diversity. We hear some great stories when we have them rate where they fall on the Access to Diversity Scale."*

## BUILD CAPACITY | EXPAND PROGRAMS | INCREASE IMPACT

Federal Fiscal Year 2024 Project	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Number of OABHW Project Team / Advisory Council Meetings	12	65	13	8	98
Number of Community Meetings to Promote WISE	9	21	58	56	144
<b>Number of WISE Master Trainers Certified *</b>	<b>16</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>16</b>
Number of WISE Master Trainer Training Sessions	2	0	0	0	2
<b>Number of WISE Facilitators Trained *</b>	<b>0</b>	<b>30</b>	<b>25</b>	<b>47</b>	<b>104</b>
Number of WISE Facilitator Training Sessions	0	2	3	2	7
Number of WISE Curriculum Cycles Facilitated	31	75	101	71	278
<b>Number of Individuals Trained in WISE (Goal: 1,240) *</b>	<b>374</b>	<b>542</b>	<b>1,117</b>	<b>581</b>	<b>2,614 **</b>
Number of Sites that Implemented WISE	58	41	97	56	252
Number of Medication Safety Boxes Distributed	24	18	168	104	314
Number of Mental Health First Aid Trainers Certified	0	1	0	0	1
Number of Mental Health First Aid Training Sessions	12	8	2	1	23
Number Trained in Mental Health First Aid	154	139	30	17	340
Number of QPR Trainers Certified	0	0	12	1	13
Number of QPR Sessions Taught	1	2	8	0	11
Number Trained in QPR	53	21	29	0	103
Number of Staff Trained in SBIRT	7	13	38	2	60
Number Screened Using SBIRT ***	0	13	2	0	15
Number of Mini-Grants Awarded	0	9	10	0	19

\* Deliverables written into the grant proposal  
 \*\* Final numbers may vary from regional map due to gaps in reporting  
 \*\*\* No Brief Interventions or Referrals resulted from SBIRT Screening

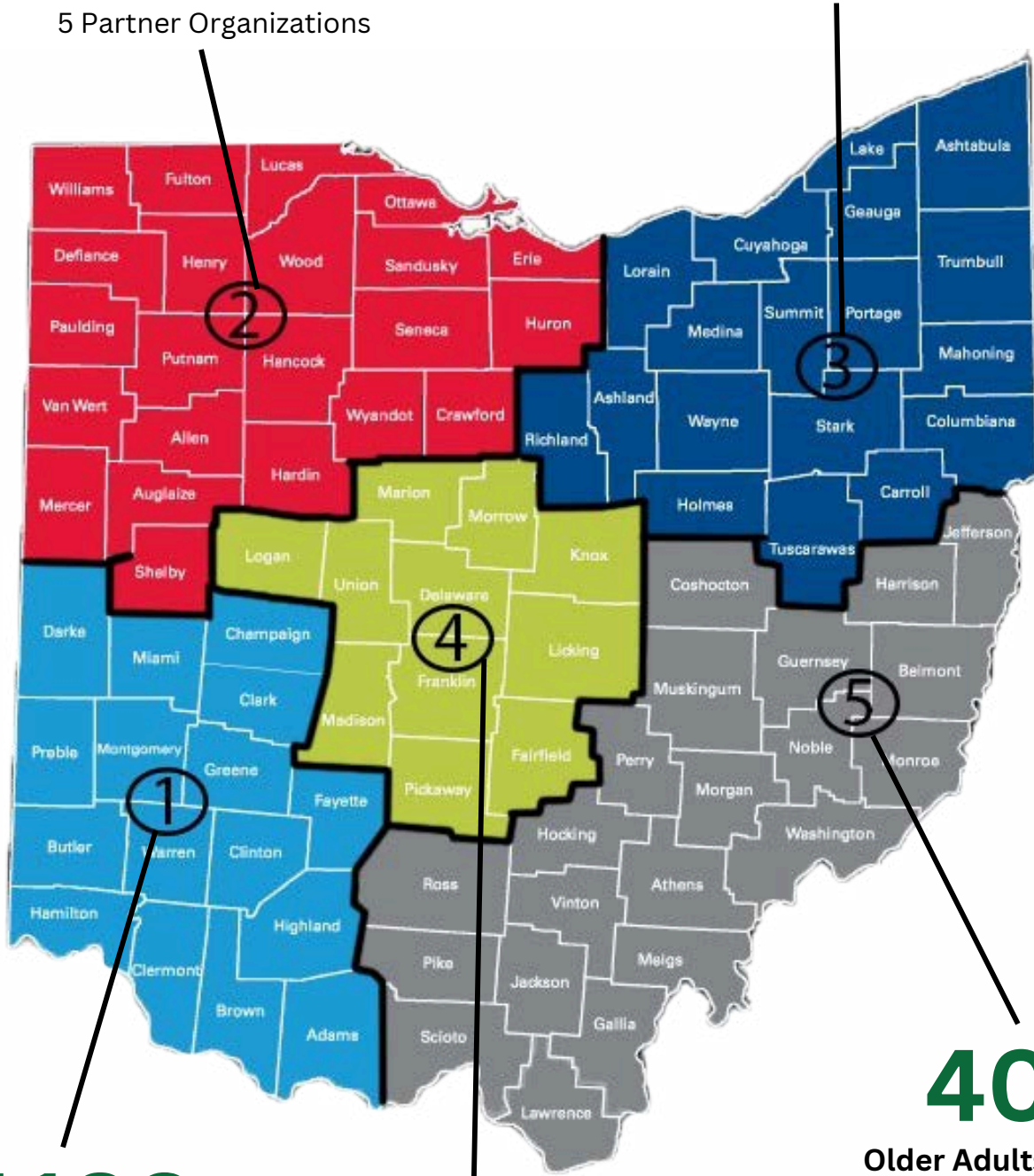


## 487

**Older Adults Served**  
5 Partner Organizations

## 77

**Older Adults Served**  
4 Partner Organizations



## 1126

**Older Adults Served**  
21 Partner Organizations

## 849

**Older Adults Served**  
5 Partner Organizations

## 402

**Older Adults Served**  
3 Partner Organizations

## TESTIMONIAL



*"I learned how the WISE program is used to empower and educate our seniors. I'm excited to share what I've learned with our senior community."*



## TESTIMONIAL



*"My obstacle is a bit like a success since I had additional people come for lessons after I started up. Participants would come back the next week and share stories about how they made difference to someone else in their apartment communities who they thought were struggling with aging issues and the participants also shared with me ways they changed behaviors themselves."*

## TESTIMONIAL



*"I enjoyed learning this information. The trainers did a great job. Kept us very engaged and positive vibes."*



# BARRIERS



*The project encountered significant challenges with the New Jersey Prevention Network, a key partner. These communication issues led to frustration of program participants, confusion, and ultimately, the withdrawal of several organizations. Key issues included:*

A Memorandum of Understanding with NJPN was not established prior to Request for Proposals, and they did not have a Train the Trainer program available which delayed program implementation. Due to this, certification requirements and the pricing for the ToT program frequently changed leading partner agencies to find the reporting and communication requirements excessive and inconsistent. Additionally, limited guidance on sustainability and recertification processes for the Master Trainers existed. Though SOS 3.0 funding has ended, the project team continues conversations with NJPN to resolve outstanding concerns and hopes to continue the program.

# OPPORTUNITIES



The project team is thankful for the strong partnership between OhioMHAS, ADAMHS, SMDC, UMADAOP, and PASS. Together, we have positively impacted the lives of older adults across the State of Ohio and look forward to the opportunity to continue this work in the future.

## SUSTAINABILITY

To ensure the long-term sustainability of the OABHW Initiative, the project team, in collaboration with the Advisory Council, developed a comprehensive sustainability plan aligned with the Strategic Prevention Framework (SPF). Key strategies include building partnerships, diversifying funding sources, providing ongoing training and technical assistance, utilizing data-driven decision-making, advocating for supportive policies, and regularly reviewing the sustainability plan. By implementing these strategies, the OABHW Initiative has established the start of a sustainable infrastructure to serve Ohio's older adults.

## COMMUNICATION

Ensure clear communication on initiative expectations and implementation early on in the project to promote a stronger impact of the program.

## EXPANSION

Develop WISE Facilitators trained to deliver the WISE curriculum and increase the number of older adults reached in the Northeastern, Region 3 and Southeastern, Region 5. Additionally, with the workforce now trained in SBIRT modalities, expansion in screening and referral processes for behavioral health interventions as well as social determinants of health needs is recommended.

## INCLUSION

Re-engage the Deaf & Hard of Hearing communities to ensure representation and cultural competency to promote appropriate access as the population is statistically at-risk of developing mental health concerns.

Continue engagement with LGBTQIA2S+ communities as the number of older adults continues to grow and many are not open with their identities or have past trauma from lack of acceptance.

Grow the resources available to educate and assist newcomer populations such as local Haitian and Hispanic groups which are seeing growth in the State of Ohio.

## POLICY & ADVOCACY

Advocate at the State and local levels for appropriate and increased support for older adults and their caregivers to integrate policies addressing mental health and substance use, including: Addressing social isolation and loneliness; Multigenerational supportive services; inclusion of partners, friends, or neighbors caring for an older adults; Raising awareness of the stress experienced by caregivers; Suicide risk assessment along with depression screenings; and Improving coordination of services..



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*“Empowering older adults to make healthy lifestyle choices and to navigate the use of medications & alcohol.”*

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## **MONTGOMERY COUNTY ALCOHOL, DRUG ADDICTION, & MENTAL HEALTH SERVICES**

409 East Monument Avenue  
Dayton, Ohio 45402  
937-443-0416



## **SAINT MARY DEVELOPMENT CORPORATION**

2060 East 5th Street  
Dayton, Ohio 45402  
937-277-8149



## **UMADAOP OF DAYTON**

1 Elizabeth Place, Suite #1  
Dayton, Ohio 45417  
937-276-2176



## **PREVENTION AWARENESS SUPPORT SERVICES**

309 West High Street, Suite A  
Lima, Ohio 45801  
419-549-8530



# Older Adult Behavioral Health & Wellness

UMADAOP

Ohio MHAS

St. Mary Development

ADAMHS

PASS