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Item Type	Presentation
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Download date	2026-05-14 10:31:43
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Link to Item	https://hdl.handle.net/20.500.14849/1155

Alcohol Misuse in Elderly Care Facilities

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Background



While alcohol misuse is largely reported as a problem in younger populations, recent studies have shown that it may be a significant, underreported, and under-diagnosed problem in the senior population (1). Alcohol misuse in this population is further confounded by its association with serious co-morbidities including falls, confusion, and reactions with medications. These problems can be difficult to identify in the aging population, as they may be mistaken for dementia, depression, or other illnesses (2).

Even less studied than alcohol use patterns in the general elderly population are the prevalence and patterns of alcohol use in senior care facilities. In Chittenden County, Vermont, these facilities appear to vary widely in how they identify and assist residents with alcohol misuse issues. Understanding their policies will be an important step towards developing effective strategies for reducing alcohol misuse among residents.

The importance of understanding and identifying alcohol-related problems in the elderly is critical as the aging population in this country continues to grow (2, 3). Proper intervention has the potential to have a real impact; studies have shown that older people have a greater ability to adhere to treatment plans than those in younger age groups, which may contribute to treatment success (4, 5).

Objectives

The objectives of this study were to:

- Determine the prevalence of alcohol-related issues in area nursing, assisted living, and independent living facilities.
- Better understand the range of policies related to alcohol consumption at these facilities.
- Identify resources currently used by facilities for residents struggling with alcohol misuse issues.
- Gain an understanding of what additional resources may be beneficial in the future.

Methods

Participants: Staff members of 13 Chittenden County area nursing, assisted living, and independent living senior care facilities.

Survey: A contact at each facility helped to distribute an anonymous questionnaire to 112 administrators, social workers, nurses, nursing assistants, and other employees involved in direct patient care. The questionnaire consisted of 27 questions about alcohol use and abuse patterns among residents, past support efforts for individuals with alcohol abuse problems, and perceived need for future services.

Data Collection and Analysis: Data was compiled in Microsoft Excel and analyzed using Excel and SPSS software.

Results

Alcohol use patterns:

- 67.6% of respondents reported at least one resident displaying patterns of alcohol use in the last year that they considered unhealthy.
- 24.4% of respondents had, in the past year, felt some level of discomfort providing alcohol to residents.
- 14.1% of respondents reported feeling that the availability of alcohol is associated with falls or accidents in their institution.

Intervention and resources:

- Two-thirds of the respondents who indicated that they are not currently provided with training to identify residents with alcohol problems reported that they would find training to be beneficial.
- Two-thirds of respondents who reported having had requests from residents or family members for alcohol assistance also reported that alcohol counseling sessions would be attended if held at their institution.
- 88.6% of respondents reported that their facility would be willing to provide transportation to off-site alcohol counseling sessions in the future, regardless of whether they had provided transportation in the past.

Discussion



- Over two-thirds of respondents reported witnessing what they considered to be unhealthy alcohol use patterns in the past year. Of those respondents, most reported being concerned about 1-3 residents, indicating that while the number of concerning residents per institution may be low, that there is an ongoing issue of alcohol misuse in need of support.
- Although policies varied, many facilities made efforts to responsibly monitor alcohol consumption and access. Despite these efforts some staff members expressed concern about consistently monitoring alcohol use in their facility.
- Most facilities indicated a willingness to provide transportation for members wanting to attend off-site meetings. In addition, many respondents believe that there would be attendance to on-site alcohol counseling sessions were they to be available. These statistics are encouraging, as they signify the possibility for both institutional compliance to facilitate treatment and residential willingness to attend treatment.
- The results demonstrated a potentially important role for training; respondents not currently provided with training indicated a desire for it, and those provided with training were more aware of alcohol misuse resources.

Lessons Learned

- We had difficulty identifying resources available specifically for elders with substance abuse problems, and further investigation of this gap would be beneficial.
- This study identified a need for facilities to develop programs to identify and support elders with alcohol misuse problems.
- We found all facilities surveyed to be strongly interested in how they can improve the health and safety of their residents.

References

- (1) O'Connell, Henry et al. "Alcohol use disorders in elderly people – redefining an age old problem in old age." *British Medical Journal*. 327(2003): 664-667.
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- (3) Klein, Waldo C. & Jess, Carol. "One Last Pleasure? Alcohol Use Among Elderly People in Nursing Homes." *Health & Social Work*. v27 n3(2002): 193-203.
- (4) Satre, Derek D, et al. "Five-year alcohol and drug treatment outcomes of older adults versus middle-aged and younger adults in a managed care program." *Addiction*. 99(2004): 1286-1297.
- (5) McGrath, A. et al "Substance misuse in the older population." *Postgraduate Medical Journal*. 81(2005): 228-231.

Alcohol Survey Institution Distribution

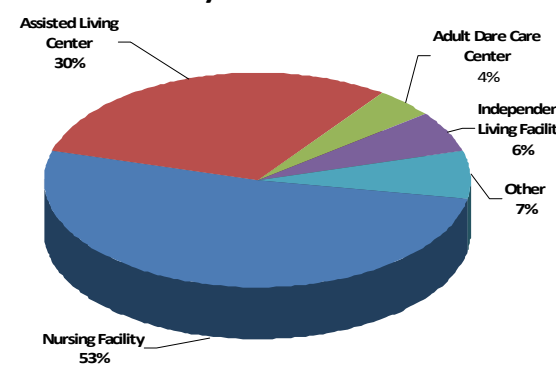


Figure 1: Distribution of survey by institution type

Alcohol Survey Demographics

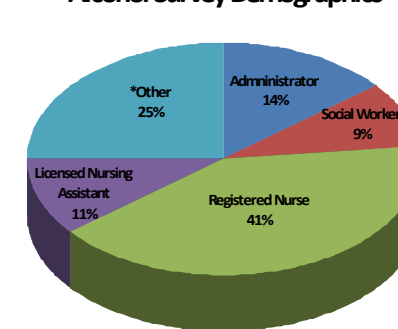


Figure 2: * Other=Caregiver, Rehabilitation manager, Staff coordinator, etc.

Number of Residents in a Typical Year Displaying Patterns of Alcohol Use that Respondents Considered Unhealthy

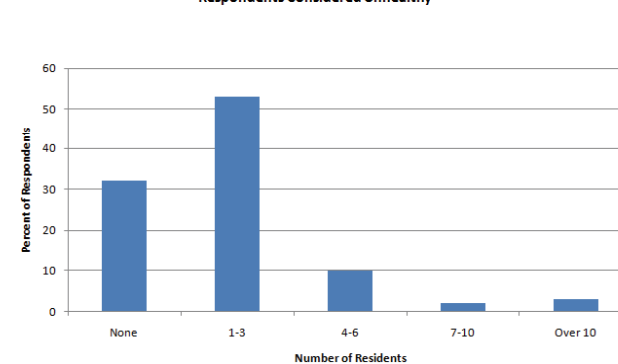


Figure 3: Alcohol consumption pattern of residents that respondents considered unhealthy

Training and Staff Awareness of Alcohol Abuse Resources

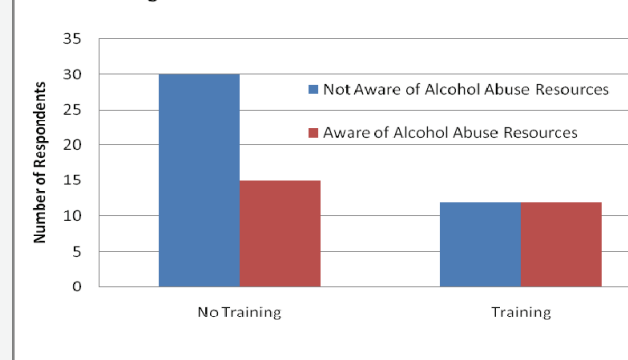


Figure 4: Staff trained to identify alcohol abuse were more aware of alcohol abuse resources available to residents.