

Mental health of older adults in humanitarian settings in LMIC: a retrospective analysis from MSF-supported mental health services, 2019–2024



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Background

- By 2050, a fifth of the global population will be over 60, of which 80% will live in low-and middle-income countries
- Older adults are at increased risk of mental health conditions in humanitarian crises due to additional challenges including ¹:
 - Limited mobility
 - Loss of traditional support networks
 - Co-morbid physical conditions

While critical to guide mental health interventions, mental health symptoms and precipitating events in older adults remain poorly documented

Objectives

- Compare mental health symptoms and precipitating events:
- Between younger adults (20-49 years old) and older adults (50 years and older)
 - Between older adults by age, gender and displacement status

Methods

- Retrospective analysis of routine data collected at MSF-OCA supported mental health services
- From humanitarian settings cross 20 countries
- Collected between July 2019 and July 2024
- Stratification by age, gender and displacement status

Mental health symptoms

- Anxiety
- Mood
- Behavior
- Social functioning
- Age
- Physical complaints

Precipitating events

- Event that causes or triggers the onset of a mental health symptom
- Eg: events related to violence, migration or natural disaster

Findings

- A total of 177,228 clients were included, of which 21,926 (12%) were 50 years or older
- 48% of older clients accessed MSF-supported mental health services in South Asia, and 37% in sub-Saharan Africa
- 60% of older clients were female

Compared to younger adults, **older adults had:**

- Higher odds of reporting symptoms related to:
 - Ageing** (women: OR=4.01; 95% CI 3.32-4.83; men: OR=5.24; 95%CI 4.12-6.68)
 - Physical complaints** (women: OR=2.98; 95% CI 2.86-3.12; men: OR=2.42; 95% CI 2.30-2.55)
- Lower odds of reporting symptoms related to:
 - Mood** (women: OR=0.60; 95% CI 0.57-0.63; men: OR=0.74; 95%CI 0.69-0.79)
 - Anxiety** (women: OR=0.68; 95% CI 0.66-0.71; men: OR=0.67; 95%CI 0.64-0.70)



Picture from HelpAge International: Pakistan Floods emergency response, Sindh Province, 2023

Conclusions

- 12% of adult clients at MSF-supported mental health services are 50 years or older
- Critical differences in mental health symptoms and precipitating events were identified between younger and older adults by gender and displacement status
- Age- and gender-adapted mental health services should be designed in collaboration with older people, and could include:
 - Community-based mental health services
 - Integration of mental health services with chronic disease care
 - Increased staff experience of age-related mental health symptoms

Compared to older men, **older women had:**

- Higher odds of reporting symptoms related to:
 - Mood** (OR=1.80; 95% CI 1.67-1.95)
 - Anxiety** (OR=1.13; 95% CI 1.07-1.20), and
 - Reporting events related to sexual trauma and abuse** (OR=11.20; 95% CI 9.13-14.00)

Compared to older non-displaced adults, **older displaced adults had:**

- Higher odds of reporting symptoms related to:
 - Mood** (women: OR=1.90; 95% CI 1.74-2.07; men: OR=2.91; 95% CI 2.56-3.31) and
 - Anxiety** (women: OR=1.48; 95% CI 1.37-1.60; men: OR=1.54; 95% CI 1.39-1.70)

References

¹ Boetzelaer E van, Rathod L, Keating P, Pellecchia U, Sharma S, Nickerson J, et al. Health needs of older people and age-inclusive health care in humanitarian emergencies in low-income and middle-income countries: a systematic review. Lancet Healthy Longev. 2024 Dec 30

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