

Mental Health

State of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of everyday life, can work productively and fruitfully, and is able to make a contribution to his or her community.

- **World Health Organization**

Mental Illnesses

- Disrupts a person's thinking, feelings, mood, ability to relate to others and daily functioning
- Each person will have different experiences, even people with the same diagnosis.
- Recovery, including meaningful roles in social life, school and work, is possible, especially when treatment starts early, and the person plays a strong role in their own recovery process.
- Research suggests multiple overlapping causes. Genetics, environment and lifestyle play a role as do stress and traumatic life events. Biochemical processes and circuits and basic brain structure may play a role, too.

Mental Illnesses

- 1 in 5 adults and children(1 in 10 for serious)
- 50% of mental illnesses emerge by the age of 14 & 75% by age 24
- Anxiety is the most common. Others include depression, bipolar disorder, eating disorders, schizo-affective disorder, schizophrenia, borderline personality disorder and PTSD
- Suicide rate is increasing in Minnesota and across the country
- People with serious mental illnesses die earlier than their peers – 10 to 20 years earlier

Primary Prevention

- Protective factors
 - Livable wage
 - Food security
 - Stable housing
 - Healthy stress
 - Clean water and air
 - Effective parental bonding
- Health and wellness programs, Child and Teen check-ups
- Early childhood programs
- Social and emotional learning, Mindfulness training, mentoring
- Parent education and support

Secondary Prevention

- At Risk
 - Trauma exposed (violence, abuse, disasters, deaths)
 - Genetics
 - Environment
 - Racism, historical trauma
 - Parent with a mental illness, substance use disorder, incarcerated
 - Chronic stress (poverty, unstable housing, etc.)
 - Bullying

Secondary Prevention

- Address at-risk children, youth and adults
 - Screening programs
 - Early childhood mental health
 - Multi-generational mental health programs
 - Mother baby programs
 - Educating adults who work with youth
 - School support personnel, PBIS, trauma informed schools
 - Home visiting

Tertiary Prevention

- Preventing mental illnesses *from becoming a disabling condition*
 - Early identification – not waiting 72 weeks before seeking treatment
 - Early intensive treatment – not waiting until stage 4
 - Keeping trajectory moving forward - goal setting and aspirations
- Increase access and intensity and focus on recovery/resiliency
 - School-linked mental health programs
 - First episode programs
 - Education of youth and families
 - Full range of community mental health services: outpatient, crisis, in-home, residential
 - Evidence-based or informed treatment

Mental Health System

- Mental health system is not broken – it was never built
- Public attitudes are changing but please don't call it stigma
- All three levels of prevention have yet to be fully developed – hard to justify walks in the woods when there is ER boarding



Mental Health System

- Great discrimination under public and private insurance for coverage of mental health treatment, low reimbursement rates, workforce shortages
- Blaming families
 - HIPAA used as a shield so as not to involve families
 - Custody relinquishment, CHIPS
 - Limited visiting hours
- Integration of mental health and SUD treatment evolving
- Primary care, ED staff, and others don't view mental health/mental illnesses as something they should be involved in

Mental Health System

