

The Community Behavioral Health Promotion and Prevention Commission: Review of Selected Workplace Initiatives

Examples of Mental Health Promotion, Prevention and Stigma Reduction Efforts in Workplaces in United States and Commonwealth Countries

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Presentation Outline



I. Background

- Response to Commissioner Mikula's Request
- Alignment with BH Promotion and Prevention Commission
- Adult/Family Analogue to Schools as Intervention Site for Kids

II. Educational, Attitude Formation & Stigma Reduction Initiatives

- Worldwide
- United States
- Commonwealth Countries
- Selected Outcomes Results

III. Behavioral Health Promotion and Prevention Commission Action

- Commission Charge
- Trust Fund

I. Background



Commissioner Mikula, Commission Chair's observations and inquiry

- Onset of BH Conditions in Kids – 50% by 14 and 75% by 24
- Adults, who are the family decisionmakers on wellness and healthcare matters for children and adolescents, spend their days in the workplace
- Limited knowledge, stigma and discriminatory attitudes undercut a family's ability to understand needs, disclose challenges, seek support from fellow workers and employers, and seek care from professionals
- The Business Community has an interest in addressing “presenteeism,” and “absenteeism,” and chronic stress affecting a family with unsolved needs
- Commission Charge calls on us to address these conditions
- Trust Fund Legislation will support action in FY2020
- Look at workplace practices in US and elsewhere with emerging or found evidence

Charge of the Commission



The Community Behavioral Health Promotion and Prevention Commission was established in August 2018 with Governor Baker's signing into law of chapter 208, section 1 of the Acts of 2018.

The commission is charged with working to promote positive mental, emotional and behavioral health and early intervention for persons with a mental illness, and to prevent substance use disorders among residents of the Commonwealth.

The commission is chaired by the Secretary of Health and Human Services and is comprised of a diverse panel of policymakers, public health professionals, legal experts, and clinicians appointed by the Governor.

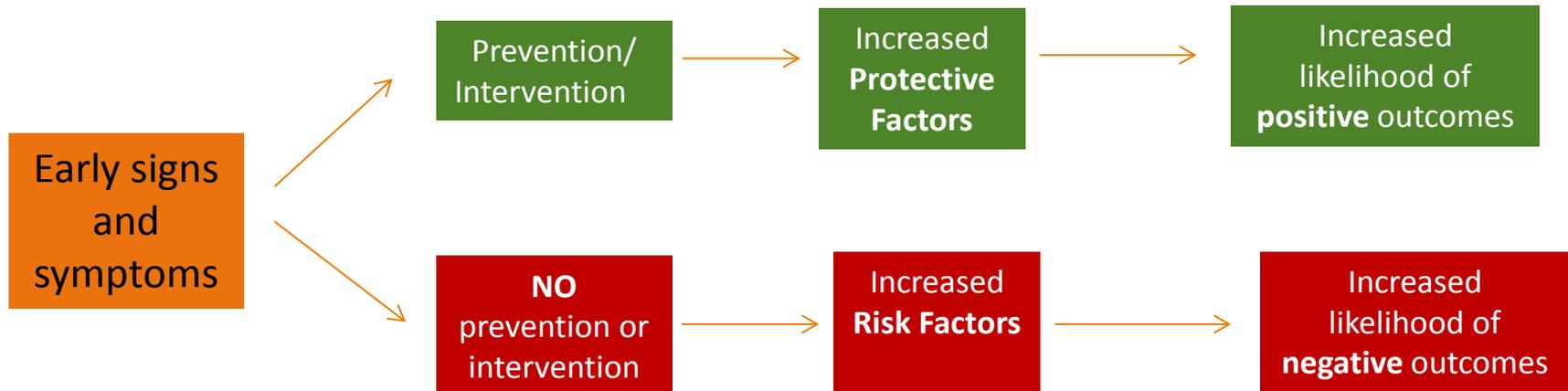
Prevention and Early Intervention are Essential



Mental Health Concerns Start Early:

- **50%** of all lifetime cases of diagnosable mental illness begin by age 14.
- **75%** of begin by age 24¹
- Parents often report concerns before **age 5**²
- Those who exhibit symptoms at a young age are more likely to engage in risky behavior, which further increases risk

There Are Two Paths We Can Take:



¹ Kessler, et al., 2005; ²National Research Council and Institute of Medicine, 2009



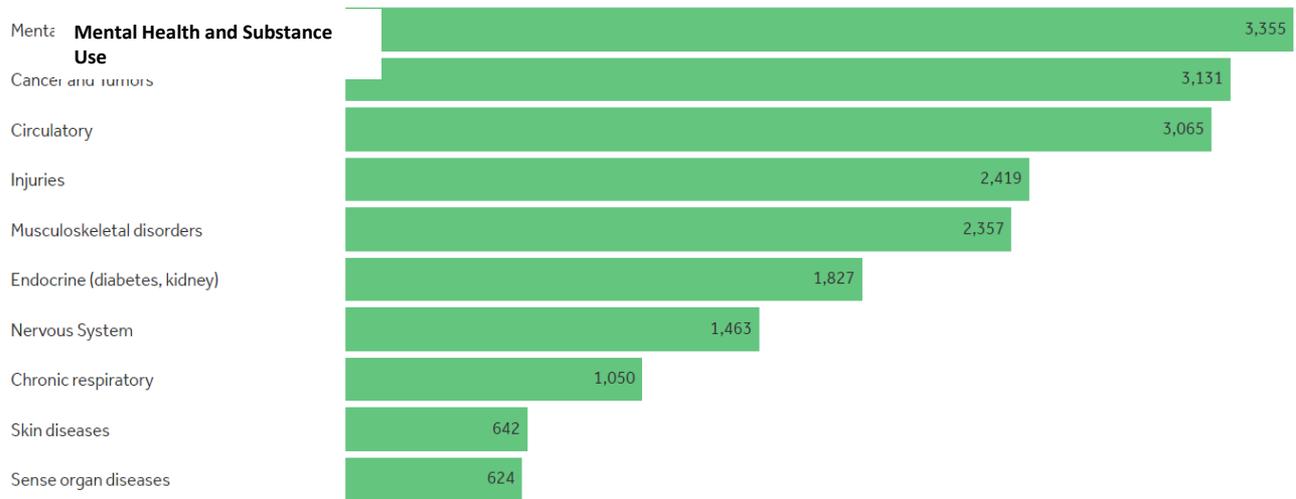
BH Disease Burden in US

Measuring Disease Burden

The assumption is that “time” is the most appropriate gauge of burden of disease. The disability-adjusted life year (**DALY**) is a measure of overall **disease burden**, expressed as the number of years lost due to ill-health, disability or early death. Mortality and morbidity are combined into a single, common metric.

Mental health and substance use disorders are the leading causes of disease burden in the U.S.

Age standardized disability adjusted life years (DALYs) rate per 100,000 population, both sexes, 2015



Source: [Kaiser Family Foundation analysis of data from Institute for Health Metrics and Evaluation. Global Burden of Disease Study 2015 \(GBD 2015\) Data Downloads](#) |



I. Educational, Attitude Formation and Stigma Reduction Initiatives

Selected Initiatives from English Speaking Countries to Tackle Mental Health and Well Being Knowledge , Stigma and Attitudes

- Social Determinants Theory Recognizes that Health and Well Being are Heavily Influenced by Knowledge, Attitudes and Beliefs
- World Health Organization (WHO) Initiative to Tackle the Challenges and Opportunities in the Workplace
- Selected United States' Initiatives
- Selected Commonwealth Countries' Initiatives
- Selected Outcomes Results

Social Determinants of Health and Behavioral Health



Social determinants are the conditions in which children, youth, and families are born, grow up, live, work, and access quality health care (Shern et al. 2011).

- Factors influencing health and wellbeing, including health-related knowledge, attitudes, beliefs, or behaviors; culture, acculturation, language, race, ethnicity, and levels of social inclusion or exclusion
- Socioeconomic factors of education, employment, income, food and housing security
- Community factors of geography, public health, safety, and benefits, as well as quality health services
- Poverty, housing insecurity, medical care disparities and social exclusion plague people with behavioral health conditions



World Health Organization Initiatives



- **Mental Health Policies & Programmes in the Workplace, 2015**
- https://www.who.int/mental_health/policy/services/13_policies%20programs%20in%20workplace_WEB_07.pdf?ua=1&ua=1
- The Programme package provides guidance for policy-makers and planners on:
 - developing policies and comprehensive strategies for improving the mental health of populations;
 - using existing resources to achieve the greatest possible benefits;
 - providing effective services to persons in need; and
 - helping people with mental disorders to reintegrate into all aspects of community life, thus improving their overall quality of life.
- WHO details the role of government in workplace MH promotion and prevention efforts, analyzes MH issues, outlines development of solutions, and steps to evaluating outcomes.
- WHO serves as a resource to help employers protect and improve the mental health of their workforce.

United States' Initiatives



- **Center for Workplace Mental Health (CWMH)** at the American Psychiatric Association (APA) Foundation
- <http://workplacementalhealth.org/>
- Darcy Gruttadaro, JD, Director
- The CWMH provides employers the tools, resources and information needed to promote and support the mental health of employees and their families.
- The CWMH will consult and collaborate with jurisdictions on adoption of their tools.
- **Mind the Workplace Survey** at Mental Health America (MHA)
- <https://www.mhanational.org/mind-workplace-2018>
- The 2018 Workplace Health Survey measured the attitudes and perceptions of over 17,000 employees across 19 industries in the US. Survey questions were designed to collect data on work environments, workplace stress, employee engagement, and employee benefits.
- MHA's research is part of an ongoing commitment to uncovering workplace disparities and addressing the psychological needs of the workforce.
- MHA provides guidance on evidence informed Workplace wellbeing and prevention program implementation.

Commonwealth Countries' Initiatives



UK: Time to Change – Workplace

- <https://www.time-to-change.org.uk/get-involved/get-your-workplace-involved/>
- Find activities, training, events and tools to help change attitudes towards mental health in your workplace.

UK: Mental Health at Work

- <https://www.mentalhealthatwork.org.uk/>
- Mental Health at Work is your gateway to documents, guides, tips, videos, courses, podcasts, templates and information from organisations across the UK, all aimed at helping you get to grips with workplace mental health.

AUSTRALIA: Mindful Employer

- <https://www.mindfulemployer.com.au/>
- Mindful Employer has workshops and online programs to suit whatever the business type, size or needs.
- Mindful Employer tailors programs to each company's specific needs.

CANADA: Workplace Strategies for Mental Health

- <https://www.workplacestrategiesformentalhealth.com/about-the-centre>
- The Great-West Life Centre for Mental Health in the Workplace (the Centre) was established in 2007 and has three main objectives:
- Increase knowledge and awareness of workplace psychological health and safety
- Improve the ability to respond to mental health issues at work
- Turn knowledge into action through practical strategies and tools for employers

SCOTLAND: See Me in Work

- <https://www.seemescotland.org/workplace/see-me-in-work/>
- See Me in work is a four step improvement plan for workplaces to make continuous improvements to their culture, practice and policies, to directly tackle stigma and discrimination.

Selected Outcomes Studies



- Rand Europe study of outcomes of some “Campaigns to Reduce Mental Illness Stigma In Europe:

<https://www.kcl.ac.uk/kcmhr/publications/assetfiles/2014/borschmann2014.pdf>

- National Academies Publication “ending Discrimination Against People with Mental Health and Substance Use Disorders” looking at three countries:

<https://www.ncbi.nlm.nih.gov/books/NBK384914/>

- “The effectiveness of interventions targeting the stigma of mental illness at the workplace: a systematic review”; Sabine E. Hanisch, Conal D. Twomey, Andrew C. H. Szeto, Ulrich W. Birner, Dennis Nowak & Carla Sabariego
BMC Psychiatry, volume 16, Article number: 1 (2016)

<https://bmcp psychiatry.biomedcentral.com/articles/10.1186/s12888-015-0706-4>

- “Workplace Antistigma Initiatives: A Scoping Study” ; Cindy Malachowski, Bonnie Kirsh.
Psychiatric Services (2013)

https://ps.psychiatryonline.org/doi/full/10.1176/appi.ps.201200409?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%3dpubmed

Facilitators of Commission Action



Community Behavioral Health Promotion & Prevention Commission Charge

- The commission is charged with working to promote positive mental, emotional and behavioral health and early intervention for persons with a mental illness, and to prevent substance use disorders among residents of the Commonwealth.

Community Behavioral Health Promotion & Prevention Trust Fund

- There shall be established and set up on the books of the commonwealth a Community Behavioral Health Promotion and Prevention Trust Fund. The purpose of the fund shall be to promote positive mental, emotional and behavioral health among children and young adults and to prevent substance use disorders among children and young adults.
- (b) The fund shall be administered by the secretary of health and human services who, in consultation with the community behavioral health promotion and prevention commission established in section 219 of chapter 6, shall issue grants from the fund to community organizations to establish or support evidence-based and evidence-informed programs for children and young adults. The community organizations may include, but not be limited to, public and private agencies, community coalitions and other entities that offer resources or support to children or young adults. A community organization or coalition may include more than one community.



Thank You for Your Efforts to Advance Behavioral Health Promotion, Prevention and Reform in the Commonwealth

MAMH Mission and Vision

MAMH is committed to advancing mental health and well being by promoting prevention, early intervention, effective treatment and research to address social, emotional and mental health challenges.

Forging understanding and combating disparities since 1913