National Association of State Mental Health Program Directors
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In partnership with the International Initiative for Mental Health Leadership

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Mental illness and [intellectual and developmental disabilities] are among our most critical health problems.

They occur more frequently, affect more people, require more prolonged treatment, cause more suffering by the families of the afflicted, waste more of our human resources and constitute more financial drain ... than any other single condition.

President John F. Kennedy
Special Message to Congress
February 5, 1963
2017 Recommendations:
1. The vital continuum
2. Terminology
3. Criminal and juvenile justice diversion
4. Emergency treatment practices
5. Psychiatric beds
6. Data-driven solutions
7. Linkages
8. Technology
9. Workforce
10. Partnerships
• Availability of early screening, identification and timely response after the onset of mental illness symptoms in youth and adults
• Access to effective medication and other evidence-based therapies for individuals with psychiatric conditions
• Compliance with legal requirements for health care networks to make the full continuum of psychiatric care accessible to patients
• Access without delay to the most appropriate 24/7 psychiatric emergency, crisis stabilization, inpatient or recovery bed
• Diversion from arrest, detention or incarceration when individuals with mental illness intersect with the justice system and can be appropriately redirected
• Homeless people with serious mental illness permanently housed
• Suicides prevented
Recent Efforts

- Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC)
- NASMHPD partnership with the International Initiative for Mental Health Leadership (IIMHL)
- SAMHSA’s Strategic Plan FY2019-FY2013
1. Big data as a driver for improved mental health services and individual outcomes
2. Access to effective medication and promising therapies
3. Supported decision-making and personal autonomy
4. Culture and spirituality integrated into mental health care
5. Mental health community care and prioritization of continuity
6. Emerging models to identify targeted inpatient bed needs
7. Improved correctional conditions and alternatives to incarceration
8. Disaster response and opportunity for sustained improvement
9. Mental health as public health

Lessons from the International Community to Improve Mental Health Outcomes
1. Big Data as a Driver for Improved Mental Health Outcomes

**US Examples**
• Campden Coalition

**Lessons from the International Community**
• Taiwan National Health Insurance Research Database
• Norwegian Patient Registrar
• Danish Patient Registry
Big Data and Feedback Loops

Under a government initiative—the National Health Informatics Project, Taiwanese researchers now may apply to analyze 50 or more health and welfare related databases, which are collected, organized and managed by Health and Welfare Data Science Center (HWDSC) of Ministry of Health and Welfare (MOHW).

![Diagram showing important phases in the Danish Clinical Registries](image.png)
2. Access to Effective Medication and Promising Therapies

**US Examples**
- SMI-Advisor
- Early studies on Open Dialogue

**Lessons from the International Community**
- Medication access differences
  - Clozapine access
  - Long acting medications
  - Medications to treat SUD
- Therapies (non-medication) access differences
  - CBTp - CBT for Psychosis
  - Open Dialogue
3. Supported Decision-Making and Personal Autonomy

**US Examples**
- American Bar Association and Center for Public Representation efforts on supported decision making
- SAMHSA Efforts to expand psychiatric advance directives

**Lessons from the International Community**
- United Nations examination of human rights in health care delivery
- EUNOMIA study examining coercion in psychiatric care across 11 countries
- National Institute for Health Care Excellence Guidelines for supported decision-making
- Article 12 of the UN convention on the Rights of Persons with Disabilities
Supported Decision-Making and Personal Autonomy

- Article 12 of the UN Convention on the Rights of Persons with Disabilities
- Examined around the world as a point for maximizing the opportunities for persons with disabilities to make personal choices
4. Culture and spirituality integrated into mental health care

**US Examples**

- Resources on cultural and linguistic core competencies
- SAMHSA grants with priorities to efforts with tribes

**Lessons from the International Community**

- Royal Australian and New Zealand College of Psychiatrists identification of improving mental health of Māori people as a strategic priority
- Movement for Global Mental Health focus on indigenous psychologies
- South African approaches with traditional healers and religious advisors
- Culturally sensitive mental health care with ultra-orthodox in Israel
Culture and spirituality into mental health care

- Learning from native populations
- Moving beyond “cultural competence” to national CLAS standards (Culturally and Linguistically Appropriate Services in health care)
5. Mental health community care and prioritization of continuity

US Examples
• County based examination of services aligned with states

Lessons from the International Community
• Caracas Declaration of the 1990s
• World Health Organization Instrument for Mental Health Systems
• 2013 Pan American Health Organization report examining mental health care across Latin American and Caribbean countries
• Australian review of service delivery for adults
• Ireland study of mental health needs of older adults
• Trieste as an exemplar of systematized community services with formulas for service to population ratios
Trieste as an exemplar of positive practices for Community Mental Health

Some components:

• Community Mental Health Centers involved in all phases of treatment

• Clear design for services based on population ratios across the continuum

• Workforce development

• Community integration, individualized treatment, etc.
6. Emerging models to identify targeted inpatient bed needs

**US Examples**
- State level commissions
- Legislative efforts within states

**Lessons from the International Community**
- Identification of bed count approaches
  - Population Health
  - Observed Outcomes
- Tipping Point debates
- Strengthened linkages to help mitigate disruption in care and facilitate community tenure
7. Improved correctional conditions and alternatives to incarceration

**US Examples**
- Study of silos of care between correctional and community systems
- Efforts to improve mental health and substance use services within corrections

**Lessons from the International Community**
- National Health Service “Principle of Equivalence” with some success and some lessons learned for further improvement
- Architectural design of corrections (e.g., Germany, Denmark) as a means of improving conditions of confinement and access to services
- Specialty courts focused on community trust (Israel)
Mental Health Engagement Across Systems

Rapid review of evidence of the impact on health outcomes of NHS commissioned health services for people in secure and detained settings to inform future health interventions and prioritisation in England

From Kubiak et al. Center for Behavioral Health and Justice 2019; Baseline Jail Diversion Data, Michigan

...neglecting the health and wellbeing of people in prisons has negative implications on the wider society...
Changing conditions of confinement through design, programs, and linkages

Vera Institute Re-imagining Prison Report 2018
8. Disaster response and opportunity for sustained improvement

**US Examples**
- SAMHSA technical assistance with disaster relief
- Expanded knowledge about trauma informed systems

**Lessons from the International Community**
- citiesRISE to transform mental health practices and policies (e.g., Kenya, Bogota)
- Enhanced leveraging through recognition of socio-cultural beliefs and impact of trauma to improve service acceptance (Haiti, Rwanda)
- WHO guide: Building back better: sustainable mental health care after emergencies
Learning from disasters and sustaining improvement

Case Examples from:

- Afghanistan
- Burundi
- Indonesia (Aceh)
- Iraq
- Jordan
- Kosovo
- Somalia
- Sri Lanka
- Timor-Leste
- West Bank and Gaza Strip

“Mental health reform was supported through planning for long-term sustainability from the outset.”

“The mental health system was considered and strengthened as a whole.”

2013 Report
9. Mental health as public health

US Examples
• Suicide prevention initiatives
• School efforts to identify mental health needs early

Lessons from the International Community
• Scotland’s Good Mental Health for All
• UK Thrive into Work
• Mental Wellbeing Impact Assessment Coalition toolkit (England)
Recommendation to Improve Mental Health Outcomes

• Look not only locally, but also internationally for approaches that will lead to better results

“By intentionally taking stock of work that has been done in other countries over recent years as a reference point for efforts in the United States, practitioners, policy makers and families have the potential to further augment and align improved services with a worldwide vantage point. Now is the time to do so.” (Beyond the borders, 2019)
Comments? Questions? Feedback?

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