



From the IIMHL and IIDL Update List

Welcome to this bi-monthly edition of Update 15 July 2017.

IIMHL and IIDL aim to improve client outcomes through leadership development in the mental health, addiction and disability sectors.

Update allows the rapid transfer of new knowledge through sharing information about upcoming Leadership Exchanges, as well as key national documents, training and webinars.

Please feel free to share this e-bulletin with others and we would be delighted if you would join us on Facebook.

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IIMHL / IIDL Leadership Exchange 2018

Please join us for the next Leadership Exchange in Stockholm Sweden, May 28 – June 1, 2018. Details to come in the near future!

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IIMHL Feature - USA

3 great Podcasts on Suicide Prevention from the American Association of Suicidology Conference 2017

The Mental Illness Research, Education and Clinical Centers (MIRECC) were established by Congress with the goal of researching the causes and treatments of mental disorders and using education to put new knowledge into routine clinical practice in the VA. Specialized mental health centers of excellence (MH CoE) are an essential component of VA's response to meeting the mental health needs of Veterans.

Joe Huggins noted: *"While we were at AAS this year in Phoenix we caught up with Julie Goldstein Grumet, Tony Pisani and Brian Ahmedani. We sat down with each of them separately and asked them to give us a rundown on what Zero Suicide is and why they are excited about it"*.

First up is An Introduction to the Zero Suicide Initiative with Julie Goldstein Grumet, Ph.D. -

http://traffic.libsyn.com/denvermirecc/podcast_zero_suicide_julie_goldstein.mp3

A new take on Zero Suicide and Risk Formulation with Tony Pisani, Ph.D.

http://traffic.libsyn.com/denvermirecc/podcast_zero_suicide_anthony_pisani.mp3

Suicide Prevention in Health Systems with Brian Ahmedani, Ph.D. L.M.S.W.

http://traffic.libsyn.com/denvermirecc/podcast_zero_suicide_brian_ahmandani.mp3

You can also visit their podcast page at:

https://www.mirecc.va.gov/visn19/education/media/podcasts/5_31_2017.asp

Joe Huggins MSW, MSCIS

Program Analyst/National MIRECC Web Designer

Rocky Mountain MIRECC for Suicide Prevention

<https://www.mirecc.va.gov/visn19/index.asp>

Other IIMHL Articles of Interest: USA

Preventing Suicide Among Men in the Middle Years: Recommendations for Suicide Prevention Programs

The Suicide Prevention Resource Center two new resources on suicide prevention among men in the middle years (ages 35–64).

Report - [Preventing Suicide among Men in the Middle Years: Recommendations for Suicide Prevention Programs](#)

The suicide rate of men ages 35 to 64 is more than double the national average, and it is increasing. The video and report were produced to help suicide prevention programs and others working with middle-aged men address this problem. The report *Preventing Suicide among Men in the Middle Years: Recommendations for Suicide Prevention Programs* includes:

- A review of the research on suicide among men ages 35–64
- Recommendations that provide guidance for state and community suicide prevention programs on addressing suicide in this population
- An annotated list of programs and resources

Video - The video is one of the latest additions to the SPARK Talks series—**Short, Provocative, Action-oriented, Realistic, and Knowledgeable** videos of leaders in suicide prevention. It features psychiatrist Jeffrey Sung shedding light on suicide prevention in middle-aged men.

[Men in the Middle Years](#)

Medication Assisted Treatment Pocket Guide

SAMHSA 2016

SAMHSA's pocket guide offers guidelines for medication assisted treatment (MAT) for patients with opioid use disorder and discusses the various types of approved medications, screening and assessment tools, and best practices for patient care. Medication-assisted treatment (MAT) is an effective response to opioid use disorder. It is the use of medications, in combination with behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders. Individuals receiving MAT often demonstrate dramatic improvement in addiction-related behaviors and psychosocial functioning.

<http://store.samhsa.gov/shin/content//SMA16-4892PG/SMA16-4892PG.pdf>

Mom's Mental Health Matters

[National Institutes of Health](#)

[National Institute of Child Health & Human Development](#)

August 2016

It's not just postpartum, and it's not just depression. Historically, much of the research on women's mental health related to pregnancy has been on depression that occurs after the birth of a baby. But, we know now—it's not just the postpartum period, and it's not just depression. Women experience depression and anxiety, as well as other mental health conditions, during pregnancy and after the baby is born. These conditions can have significant effects on the health of the mother and her child. This initiative is designed to educate consumers and health care providers about who is at risk for depression and anxiety during and after pregnancy, the signs of these problems, and how to get help.

https://www.nichd.nih.gov/ncmh/PMHM/Pages/index.aspx?utm_source=EB&utm_medium=SAMHSA&utm_campaign=MMHM

Early Childhood Development: Implications for Policy, Systems and Practice

Judge Baker Children's Center, Harvard

Robert P. Franks, PhD, Matthew Pecoraro, MSW, Jayne Singer, PhD, Sarah Swenson, MA & Julie Boatright Wilson, PhD, 2017

Within the first five years of a child's life 80-90% of brain structures are formed and the foundation for lifelong learning is established.

The physical, cognitive, emotional, and social foundations established during these years are essential to health and wellbeing across the lifespan. Children's social and emotional development is foundational for learning and school readiness, as well as for healthy relationships throughout life. Early childhood emotional/mental health is "the developing capacity of the child from birth to 5 years of age to form close and secure adult and peer relationships; experience, manage, and express a full range of emotions; and explore the environment and learn – all in the context of family, community, and culture.

http://jbcc.harvard.edu/sites/default/files/jbcc_early_childhood_policy_brief_2017.pdf

Using Peers to Support Physical and Mental Health Integration for Adults with Serious Mental Illness

Kitty Purington, NASMHSPD, 2016

Trained peer support specialists are well positioned to bridge the gap between physical and behavioral health services for people with SMI as part of whole-person, recovery-oriented system of care. For state policymakers interested in better integrating care for individuals with SMI, this brief provides an overview of the use of peer supports in state mental health systems, and offers examples of the emerging use of these non-clinical staff as part of an integrated care approach. The brief also includes some key questions for state policymakers to consider as they explore the use of peer services to promote integrated care for Medicaid enrollees with SMI in their state.

This brief was based on interviews with state mental health and Medicaid policymakers in three states that fund peer support services designed to promote integrated physical and behavioral health for individuals with SMI.

<http://www.nashp.org/wp-content/uploads/2016/01/Peer-Supports.pdf>

Suicide Prevention Video from Philadelphia

Please note: This video shows people who were at times suicidal, but all chose life with support.

'There Are Other Options': LGBTQ+ Community Battles Staggering Suicide Rates

Forty percent of transgender adults reported having tried to kill themselves, according to the 2015 U.S. Transgender Survey.

<http://www.nbcphiladelphia.com/news/local/Suicide-in-the-LGBTQ-Community-421334184.html>

Preventing and Mitigating the Effects of ACEs by Building Community Capacity and Resilience: APPI Cross-Site Evaluation Findings

Mathematica Policy Research, July 14, 2016

This is an executive summary of the very lengthy final report. Of interest is that this research is funded by a group of private, public and community agencies in Washington State working together to reduce children's response to trauma - and the substantial social, emotional and physical tolls that may result.

This report summarizes the final findings of an evaluation of five community-based initiatives in Washington State that were intended to prevent child maltreatment and exposure to toxic stress, mitigate their effects, and improve a wide array of child and youth development outcomes.

Success was shown across a wide range of variables for children and the community. <http://www.appi-wa.org/wp-content/uploads/2016/07/APPI-Final-Evaluation-Report-Executive-Summary.pdf>

Underage Binge Drinking Varies Within and Across States

SAMHSA: Center for Behavioral Health Statistics and Quality

Rachel N. Lipari, Ph.D., Struther L. Van Horn, M.A., Arthur Hughes, M.S. and, Matthew Williams, Ph.D, June 22nd 2017

This issue of *The CBHSQ Report* presents estimates of past month binge drinking among people aged 12 to 20 (i.e., underage) based on combined 2010–2012 and 2012–2014 National Survey on Drug Use and Health (NSDUH) data. NSDUH national, state, and substate estimates of underage alcohol use can help address policymaker and prevention specialists' needs for more localized information on underage drinking. NSDUH is an annual survey of the U.S. civilian, noninstitutionalized population aged 12 years or older. One of NSDUH's strengths is the stability of its survey design, which allows for multiple years of data to be combined to examine the state and substate (e.g., local) estimates of underage binge drinking and changes across time https://www.samhsa.gov/data/sites/default/files/report_3185/ShortReport-3185.html

IIDL Feature - USA

A Trauma-Informed Toolkit for Providers in the Field of Intellectual Disabilities Centre for Disability Services, 2017

Research has shown that people with intellectual/developmental disabilities (IDD) are at significantly more risk of ACEs and other forms of abuse and neglect than is the general population. This toolkit, attached here for free downloading, addresses a number of areas designed to support people with IDD who may have experienced trauma. The toolkit begins with a preface by Dan Tomasulo, who has been instrumental and groundbreaking in developing clinical approaches in IDD/Trauma work. This is followed by a preface by Ed Bartz, policy entrepreneur for the initiative that led to the development of the toolkit, who speaks with wisdom from the perspective of an individual with a disability.

Chapter 1 offers information and a guide for direct support professionals and others, with many exercises designed to enhance wellness and resiliency. Research has shown that attention to staff wellness is critical, and can positively impact the quality of care, reduce use of restrictive interventions, and reduce turnover.

Chapter 2 provides background information as to the problem of ACEs and the evidence that the problem is magnified in the field of IDD.

Chapter 3 provides guidance for trauma informed behavioral planning. functional behavioral analysis for people with a trauma history requires special

understanding. Critical elements needed in planning for people with a trauma history are delineated. A sample “trauma-informed” support plan is included to provide guidance in this area, as well as a template for a therapeutic support plan that the reader is free to use.

Chapter 4 is offers direction for thinking about personal and agency solutions for administrators, quality assurance staff, and interested others. The Restorative Integral Support model proposed by Heather Larkin and John Records (citations in document) provides a foundational approach with theoretical underpinnings.

<http://www.acesconnection.com/fileSendAction/fcType/0/fcOid/468137553002812476/filePointer/468137553002812517/fodoid/468137553002812512/IDD%20TOOLKIT%20%20CFDS%20HEARTS%20NETWORK%205-28%20FinalR2.pdf>

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