



From the IIMHL and IIDL Update List

Welcome to this bi-monthly edition of Update 15 September 2018

IIMHL organises systems for leaders to share innovations, network and problem solve across countries and agencies. The overall aim is to promote mental health and well-being for everyone. This includes developing leaders who can create the best possible conditions for mental health in all sectors across the life-span. Equally, it includes developing leaders who can deliver the best possible outcomes for people who use mental health and addictions services and their families.

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 Feature - USA

Housing and Employment Outcomes for Mental Health Self-Direction Participants Bevin Croft, Psychiatric Services, May 2018

New research from the Human Services Research Institute (HSRI) suggests that mental health self-direction can help support people to live and work in their communities. To explore the effects of self-direction on important functional outcomes like employment and housing, HSRI researchers and colleagues looked at approximately four years’ worth of data from the nation’s largest and longest-standing self-direction effort, FloridaSDC. They found that compared with nonparticipants, self-directing participants were more likely to improve, or maintain at high levels, engagement in paid work and independent housing.

“Self-direction is emerging as a promising model of mental health service delivery, and it aligns with the field’s growing focus on using individualized, person-centered care to effect recovery,” says Bevin Croft, Research Associate at HSRI and the study’s Principal Investigator. This research adds to a growing body of evidence that shows self-direction can help people achieve better outcomes.

The study is part of a Demonstration and Evaluation of Self-Direction in Mental Health study that explores mental health self-direction in six states, funded by the Robert Wood Johnson Foundation and the New York State Health Foundation with support from the Substance Abuse and Mental Health Services Administration.

<https://www.nyaprs.org/e-news-bulletins/2018/5/17/study-mh-self-direction-shows-promising-results-for-housing-and-employment-outcomes>

Other IIMHL Articles of Interest - USA

Effects of Trauma on First Responders

the Dialogue: A Quarterly Technical Assistance Journal on Disaster Behavioral Health
Produced by the SAMHSA Disaster Technical Assistance Center, SAMHSA, June 2018

This issue presents several articles reflecting the experiences of first responders. We are leading this issue off with an interview with a police officer about his battle with posttraumatic stress disorder (PTSD) as a result of a traumatic event. In subsequent articles, a paramedic, firefighter, and emergency room physician discuss their field experiences and how they and their colleagues cope with job-related trauma and successfully recover from disasters.

One common thread in these articles is the desire on the part of first responders to help their communities. By focusing on resilience building and taking care of their behavioral health, first responders may avoid secondary or vicarious trauma and be better able to do just that. https://www.samhsa.gov/sites/default/files/dtac/dialogue-vol14-is1_final_051718.pdf

Early Childhood Is Critical to Health Equity

Robert Wood Johnson Foundation & University of California
Braveman P et al. 2018

Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health, such as poverty, discrimination, and their consequences, including powerlessness; lack of access to good jobs with fair pay; quality education and housing; safe environments; and health care. For the purposes of measurement, health equity means reducing and ultimately eliminating disparities in health and its determinants that adversely affect excluded or marginalized groups. According to this definition, health inequities are produced by inequities in the resources and opportunities available to different groups of people based on their racial/ethnic group; socioeconomic, disability, or LGBTQ status; gender; and other characteristics closely tied to a history of being marginalized or excluded.

This report focuses on the first five years of life. Other periods of life also shape lifelong health. They are, however, beyond the scope of this report
<https://docs.cmhnetwork.org/files/a1c5275b58dae598c8cd58bfceb46385.pdf>

College to Career: Supporting Mental Health

The Jed Foundation, 2018

This report was undertaken to better understand the challenges to emotional wellbeing faced by young adults during the college-to-career transition.

We address the following questions:

1. What emotional challenges do college seniors face as they prepare to leave college?
2. What can colleges do to address these challenges?
3. What emotional challenges exist for recent college graduates entering the workforce?
4. How can employers support the emotional wellbeing of young adult hires?

<https://www.umassmed.edu/globalassets/transitionsrtc/about-us/news-and-events/college-to-career-supporting-mental-health-jed-umass-whitepaper-final-v2.pdf>

Wellness Recovery Action Plan

Advocates for Human Potential, 2018

This 2018 edition of *Wellness Recovery Action Plan (WRAP)* is the first substantial update to the WRAP “Red Book” in 20 years. Though revised, it offers the same simple wellness process that anybody can use to address a variety of physical, mental health, and life issues to help you achieve your wellness your way. To read this plan in full:

<https://www.wrapandrecoverybooks.com/store/wrap-2018.html>

VA National Suicide Data Report 2005–2015

Office of Mental Health and Suicide Prevention, June 2018

In 2015, an average of 20.6 active duty service members, non-activated Guard/Reserve members, and other veterans died per day from suicide, according to a June 8 [report](#) released by the U.S. Department of Veteran Affairs (VA) Office of Mental Health and Suicide Prevention.

Veterans accounted for 14.3 percent of all suicides among adults 18 and over in 2015, but only represented 8.3 percent of the U.S. population. In contrast, the average adult civilian suicide rate was 97 per day, up from 68 per day in 2005. The drastic difference in the veteran and civilian rates is attributed to an increase in suicide in the general U.S. population.

https://www.mentalhealth.va.gov/docs/data-sheets/OMHSP_National_Suicide_Data_Report_2005-2015_06-14-18_508-compliant.pdf

Responding to Addiction and Overdose: Public Policy Do's and Don'ts

Addiction Policy Forum, 2017

Responding to Addiction: Public Policy Do's and Don'ts provides a menu of options for policymakers to implement a comprehensive response to addiction. It identifies policies that work (Do's) and policies that can be harmful (Don'ts), including public policies in the following areas:

- Prevention
- Early Intervention
- Public Education and Awareness
- Treatment Services
- Recovery Support Services
- Protecting Children Impacted by Addiction
- Public Health and Overdose Reversal
- Criminal Justice

<https://cdn2.hubspot.net/hubfs/4132958/Responding%20to%20Addiction%20and%20Overdose%20Policy%20Do's%20and%20Don'ts-1.pdf?t=1536623344321>

Treatment Improvement Protocol (TIP) 63 - Medications for Opioid Use Disorder

SAMHSA, 2017

The goal of treatment for opioid addiction or opioid use disorder (OUD) is remission of the disorder leading to lasting recovery. Recovery is a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. This recently updated Treatment Improvement Protocol (TIP) reviews the use of the three Food and Drug Administration (FDA)- approved medications used to treat OUD—methadone, naltrexone, and buprenorphine—and the other strategies and services needed to support recovery for people with OUD.

<https://store.samhsa.gov/shin/content//SMA18-5063FULLDOC/SMA18-5063FULLDOC.pdf>

“Don't Lose Your Marbles” - A Video (Australia & the US)

Gary Parker, US & Douglas Holmes, Australia

This is a game that consumer agencies can play to promote fun, friendship and working together. Originally the Team Marbles Challenge came from an event held in 2010 in the local Surry Hills community in Sydney to raise awareness and break down stigma around mental illness with a fun community event and information sharing.

The Inner City Working Group 4 Mental Health Recovery Network (MHRN) hosted a World Record attempt for the largest numbers of people playing with yo-yo's at the same time. The event was titled “Yo Yo Au Go Go”. This community event aimed to highlight the “ups and downs” of life that we all experience and to raise awareness about the importance of good mental health. The day was a great success, and while no records were broken, 300 people attended and had lots of fun learning (or re-learning) yo yo skills.

In keeping with this theme, in 2012 another event was held called “Don't Lose Your Marbles”, which involved marble activities, including a guessing competition and a marble run. A range

of local agencies were represented and brought information along plus volunteers who made marble cakes for the afternoon tea. The day was supported by members of The Inner City SUPER Group (Service Users, Participating, Educating and Researching)”.

And so to the 2018 (Sydney) and 2019 (Kansas) challenges which are planned.
<https://drive.google.com/file/d/18gCBTQDDKBP7Ad41ZmeU3y83uG1gNgai/view>

IIDL Features - USA

Personal Autonomy Principle

Disability Rights California

As countries increasingly move towards self directed supports and the application of the principles of the UN convention on the Rights of People with Disabilities, this little article provides six principles to advance the autonomy of disabled persons. These include, right to self-direction and self-determination; right to give informed consent for treatment; right to refuse treatment.

<https://www.disabilityrightsca.org/system/files?file=file-attachments/102401.pdf>

Digest on Dual Diagnosis: Intellectual disability and mental illness

Community Health Connections, 2010

This 130-page report provides an overview on interventions and treatment of these two issues. While it is not new it still provides useful information.

However, people who support the individual on a day to day basis have just as crucial a role to play. Some of the key functions they fulfil are:

- Listening sensitively to all types of communication, verbal and non verbal teaching skills that enhance the person's quality of life
- Observing changes in physical health, mood, behaviors, etc.
- Providing habilitative environments
- Ensuring that proper care is accessed with respect to medical needs
- Monitoring treatments such as medications and behavioural programmes
- Helping people to develop and maintain social supports
- Participating in planning Contributing accurate and thorough information to the treatment team

<https://www.geisinger.org/-/media/OneGeisinger/pdfs/ghs/patient-care/for-professionals/professional-resources/related-information/digest-on-dual-diagnosis.pdf?la=en>

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Leaders in any sector that can affect the conditions for Mental Health and Addictions and leaders in Disability services can join IIMHL or IIDL free by using this link:

<http://www1.iimhl.com/Join.asp>

Please note: We try to find articles, new policies, research that has been released or opinion pieces we think are interesting to reflect on. Sometimes those who receive these may feel is not accurate either for its use of data or not aligned with their views. IIMHL does not endorse any article it sends out as we try to rapidly share information.

