

VERSION 2.0 WORK IN PROGRESS: Behavioral Health Think Tank Summary May 30-31, 2018



The Public Health Accreditation Board is a 501(c)3 nonprofit organization dedicated to improving and protecting the health of the public by advancing and ultimately transforming the quality and performance of state, local, tribal, and territorial public health departments.



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In May 2018, PHAB convened a think tank of content experts, health department representatives, national partners, and new partners to explore best and promising practices related to promoting behavioral health at a population level; discuss health departments' role in promoting behavioral health at a population level; develop a common understanding about key terms related to behavioral health at a population level; discuss common practices of health departments related to the opioid public health issues, as an example of behavioral health at a population level; and make recommendations for Version 2.0 of the Standards and Measures to help advance health departments' role in promoting behavioral health at a population level.

PHAB had surveyed accredited health departments specifically about their work in opioid prevention as it relates to the 12 Domains and that information was shared with the participants (see power point presentation by Kathy Dunn for summary).

Jonathan Purtle, Assistant Professor in Health Management and Policy, Center for Community and Population Health, Dornsife School of Public Health/Drexel University, presented on "To What Extent Do Health Departments Address Mental Health and Why? Results From Four Studies" (see references to two of the studies below). From his work, the think tank participants discussed:

- More than half of LHDs perform ≥ 1 activities to address mental health.
- LHDs that provide clinical mental health services are more likely to also provide population-based mental illness prevention activities and engage in mental health policy advocacy.
- LHD officials are being called upon to address mental health issues by their communities; perceive mental health as a public health issue that they want to address; and are often unsure of what to do to address mental health issues and encounter barriers to collaborating with local behavioral health agencies.
- LHD provision of behavioral health services significantly impacts behavioral health workforce shortages.

PHAB also heard from its national partners (ASTHO, CDC, NACCHO, NIHB, and the National Council for Behavioral Health) and the health department participants about the work each of them is doing in this area.

In general, it was acknowledged that behavioral health is an area that PHAB should be explicit in addressing in Version 2.0 since most health departments have activities along a varied spectrum. It was also acknowledged that this work is developing, so as flexible as PHAB can be, the better. However, the complexities of the work will call for some level of specificity, most of which can be adequately managed within the 12 Domains. Specific examples in the documentation guidance across several Domains is essential. PHAB will need to develop/adopt some clear definitions for Version 2.0, which will be guided by members of this think tank.

Other key points that were made in the discussions:

- Behavioral health is broader than mental health.
- Mental health is broader than mental illness.
- Mental illness prevention has different strategies than substance abuse prevention.
- Behavioral health can be confused with health behavior, but the latter term is different.
- Prevention (promote positive mental health) and intervention (patient perspective) activities have different cultures and compete for resources.
- Addressing stigma is a key aspect to promoting behavioral health.
- It is critical to consider co-occurring conditions (e.g., examining smoking/substance use rates among individuals with mental illness).
- Many of the social determinants for health are also determinants for behavioral health problems. Equity is an issue for behavioral health, just as it is for health. Addressing silos for addressing behavioral health is a necessary part of any strategies.
- Social epidemiology is needed to better understand risk factors.

Behavioral Health Think Tank Members

Health Department and Subject Matter Experts

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 Meredith Parrado, Centers for Disease Control and Prevention

Purtle Articles Noted Above

Purtle, J, Klassen, A, Kolker, J, and Buehler, J (2016). *Prevalence and Correlates of Local Health Department Activities to Address Mental Health in the United States*. American Journal of Preventive Medicine 82(2016). 20-27. <https://www.ncbi.nlm.nih.gov/pubmed/26582210>

Purtle, J, Peters, R, Kolker, J, Klassen, A (2017). *Factors Perceived as Influencing Local Health Department Involvement in Population Mental Health*. *American Journal of Preventive Medicine*. 2017 Jan;52(1):64-73. <https://www.ncbi.nlm.nih.gov/pubmed/27816382>