

# *Population mental health and public health practitioners: what are the needs?*

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# Disclosure of Commercial Support

## Presenter Disclosure

**Presenter:** Pascale, Mantoura; Chris, Mackie; Jessica, Patterson; Tamar, Meyer; Heather, Manson.

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# National Collaborating Centre for Healthy Public Policy (NCCCHPP)

## Our mandate

- Support public health actors in their efforts to promote healthy public policies.

## Our areas of expertise

- The effects of public policies on health
- Generating and using knowledge about policies
- Intersectoral actors and mechanisms
- Strategies to influence policy making



# The National Collaborating Centres for Public Health



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# Outline of the Presentation

- Introduction
- All health is mental health
- Population mental health: Key elements
- Public health practitioners' needs for population mental health
- Perspectives from panellists
- Q&A: what is your experience as a PH practitioner?
- End of session & Evaluation



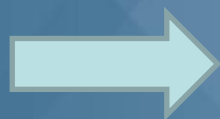
# Mental Health and Public Health...



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# Mental Health: A Public Health Question

- Heavy burden of mental health problems.
- Mental health is a resource for life and health.
- Mental health and physical health are thoroughly intertwined and inseparable: Holistic conception of health.



Population mental health



# Population Mental Health

## Key dimensions

- Mental Health and illness are on two separate continuums.
- PMH involves promoting mental health for everyone, including those who are at risk or are mentally ill.
- Promoting mental health involves action on determinants of health at all levels and across the lifespan.
- Public health practitioners at many levels are concerned by these interventions.





# NCCCPH Population Mental Health Project

- An environmental scan
- Two briefing notes
- Webinars
- Needs assessment
- Workshops
- “Survey”

To explore public health’s practitioners’ needs vis-à-vis population mental health.



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## Defining a Population Mental Health Framework for Public Health

July 2014

With the release of Canada’s mental health strategy, “Changing Directions, Changing Lives,” the Canadian Mental Health Commission marked “a significant milestone in the journey to bring mental health ‘out of the shadows’ and to recognize, in both words and deeds, the truth of the saying that there can be no health without mental health” (Mental Health Commission of Canada, 2012, p. 5). This strategy document points toward a renewed perspective in order to keep people from becoming mentally ill and to improve the mental health status of the whole population.

This renewed perspective towards a holistic intervention agenda for the improvement of mental health is gaining momentum and finding its way onto the public health agenda. The momentum is based on the recognition that mental health is fundamental to health. It acknowledges the disproportionately greater burden of mental health problems and disorders among those who are socially and economically disadvantaged. Finally, it recognizes the importance of improving mental health status across the whole population, including those with a mental disorder.

Such a perspective concerns public health practitioners at every level. As all public health interventions have the potential to target the well-being of individuals and communities, it is evident

that all public health actors, whether they work in clinical prevention and treatment, promotion, protection, or surveillance are working on mental health topics with various clients and communities.

Hence, what would the role of public health be in advancing population mental health? How could we define a population mental health framework for public health? This briefing note responds to these questions and proposes a framework for population mental health (Figure 1).

Section one of this note discusses the concepts of public mental health and population health in order to set the stage for a population mental health framework. Section two discusses the mental health outcomes which can be monitored through the framework. In order to do so, we use two models that frame the links that exist between mental health and mental disorders. In section three, we summarize what we know about the determinants of mental health, the risk factors and protective factors, and the cues regarding that characterizes mental health outcomes and social inequalities. In section four, we propose different interventions and policies that can be used to link the determinants of mental health with mental health outcomes. Finally, in section 5, we discuss some of the roles that public health actors, at varying levels of practice, may play within such a framework.

## Briefing Note

For up-to-date knowledge relating to healthy public policy



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## Framework for healthy public policies favouring Mental Health

March 2014

Good mental health, in its broad definition, is more than the absence of disease, and consists of a state of “flourishing,” which is a combination of feeling good and functioning effectively most of the time (The Government Office for Science, 2008; Huppert, 2009; Keyes, 2007; Huppert & So, 2013). It is considered a resource for life for individuals as well as when it is considered at the population level. Defined in this manner, good mental health is the basis of the many skills that are needed for individuals and countries to develop and flourish.

Higher levels of mental health, independently of mental disorders, are associated with positive outcomes in education, physical health, productivity, motivation, recovery rates, employment and earnings, health behaviours and quality of life. In addition the best outcomes are found in those who are “flourishing” in life, (i.e., those who have good mental health, compared to those who have average or poor mental health). The latter individuals, in turn, have the least favourable outcomes. This is true as well for those who have a mental disorder (Keyes, 2002; 2007).

Mental health just like physical health is, socially-produced and is strongly associated with a number of social determinants. Hence, to improve mental health and reduce mental health inequalities, interventions and policies ought to come from those sectors which can exert influence on social determinants; these determinants are most often found outside of the realm of health services.

Public policies that are favourable for mental health (or healthy public policies favouring mental health) can be considered as a core element of intervention to improve mental health within a population mental health framework for public health (Mantoura, 2014).

Currently, there is a growing interest in how a focus on well-being could influence the future direction of public policy in general (Bak, 2010; Diener, Lucas, Schimmack, & Helliwell, 2009;

Barry, 2009), and this interest can be observed in many domains such as the economy, education, employment, culture, transport, the built environment, etc.

Public policies in these sectors may have a positive or negative effect on mental health. It is therefore necessary to analyze the potential negative effects of policies on mental health and to optimize the positive effects of policies via healthy public policies favouring mental health.

This briefing note will propose a framework for healthy public policies favouring mental health (HPP-FMH). In the first section, we define what is meant by this expression. In the second section, we present the determinants of mental health. The influence that HPP-FMH exert on those determinants is the basis upon which they are expected to have impacts on mental health. In the third section, we propose a conceptual framework to illustrate the policy areas that influence mental health. Finally we present a brief overview of evidence for promising HPP-FMH.

## What is meant by Healthy Public Policies Favouring Mental Health (HPP-FMH)?

Public policy refers to “a strategic action led by a public authority in order to limit or increase the presence of certain phenomena within the population” (National Collaborating Centre for Healthy Public Policy, 2012).

Healthy public policy, as proposed by Milo (2001, p. 622) “improves the conditions under which people live: secure, safe, adequate and sustainable livelihoods, lifestyles, and environments, including, housing, education, nutrition, information exchange, child care, transportation, and necessary community and personal social and health services”.

## Scan of Mental Health Strategies across Canada

Relation to the Population Mental Health Project Page: click here  
help us keep this information accurate and up to date send us your comments and corrections at [cecilie.marotte@ncccp.ca](mailto:cecilie.marotte@ncccp.ca)

PROVINCIAL AND TERRITORIAL STRATEGIES IN MENTAL HEALTH						
Provincial/Territorial/Federal	Title	Organization	Year	Sub-populations	Summary Objectives (SOE)	Evaluation Plan (Yes/NA)
Federal	16 The Allies in Italian are translations of strategies that are not available in English.					
Alta.	<a href="#">Creating Connections: Alberta's Addiction and Mental Health Strategy</a>	Government of Alberta	2011	Whole population approach	SOE	Yes
Alta.	<a href="#">Creating Connections: Alberta's Addiction and Mental Health Action Plan 2011-2015</a>	Government of Alberta	2011	Whole population approach	SOE	Yes
Alta.	<a href="#">Positive Futures - Optimizing Mental Health for Alberta's Children &amp; Youth - A Framework for Action (2004-2016)</a>	Government of Alberta	2006	Children, youth, and their families	SOE	Yes
Alta.	<a href="#">Children's Mental Health Plan for Alberta: Three Year Action Plan (2006-2011)</a>	Government of Alberta	2006	Children & Youth Vulnerable populations	SOE	NA
Alta.	<a href="#">Alberta Aboriginal Mental Health Framework</a>	Government of Alberta	2006	Aboriginal Peoples	SOE	NA
B.C.	<a href="#">Healthy Minds, Healthy People: A Ten-Year Plan to Address Mental Health and Substance Use in British Columbia</a>	British Columbia Government	2010	Whole population Substance users	SOE	Yes
B.C.	<a href="#">A Path Forward: BC First Nations and Aboriginal People's Mental Wellness and Substance Use Ten Year Plan</a>	First Nations Health Authority	2010	Aboriginal Peoples	SOE	NA
Man.	<a href="#">Risky to the Challenge: A strategic plan for the mental health and well-being of Manitobans</a>	Government of Manitoba	2011	Whole population approach	SOE	Yes

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# Method

- Collaborative production by NCCPH
- Available from June to October 15 2014 on NCCHPP website
- 453 public health practitioners participated in the survey
  - 335 English respondents
  - 118 French respondents



Training  
•Topics  
•Targets

Communities  
of Practice

Mandates  
Roles/Responsibilities  
Institutional Support

Guidance  
Frameworks  
(Links-  
concepts-  
Differences)

Collaborations

MH literacy

Key  
messages

Support  
PHC/CB  
practices

Best Practice  
Resources  
•Topics  
•Targets

Flexible  
Language

Measurement  
/Indicators



# Perspectives from panellists...





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# Survey Results for TOPHC Participants...



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# Do you consider that your public health practice has links with the mental health of the population?

Response	Chart	Percentage	Count
<b>Yes</b>		80.0%	20
<b>No</b>		20.0%	5
<b>Total Responses</b>			<b>25</b>

## Knowledge of links with SDH

Knowledge of links with physical health and inequalities

Promotion & Prevention  
School, ECD

National standard for psych. health and safety in workplace

Addiction, substance misuse

PHC- clinical services

**Workplace wellness**

Healthy community design and links with MH (healthy lifestyle , social connectivity)

Mental Health promotion programming




Reproductive and child health (PPMD and child mental health)



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# What would be your primary need to enhance your practice in PMH?

Response	Chart	Percentage	Count
<b>Individual</b>		24.0%	6
<b>Organizational</b>		64.0%	16
<b>Policy-level</b>		64.0%	16
<b>Total Responses</b>			<b>25</b>

Better understanding of PH role in MH-Promotion

**Build the case for workplace policies favourable to MH**

Establish collaborations frontline (Community partners)

**Support holistic understanding of health**

**Build the case, Organizational MH literacy , support from decision makers (management) to include interventions for mental health**

Training in PHC (counselling for mental health, and intervention resources)

**Framing meaningful messages**



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**HPP FMH**

**MH in OPHS**

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# What's next

THANK YOU...

....and don't forget the evaluations please!

**“(...) you folks are best positioned to be champions for this work. You don't have to necessarily pay for it; you don't necessarily have to do it all yourselves; you just need to be the champions out there saying this is about the health and well being of the entire population. Being in public health we have a vested interest in that. So therefore, we need to mobilize the troops around this one (...).”**

