

Lake County Mental Health Coalition Anti-Stigma-Campaign Sub-Committee

DRAFT Proposal to the Mental Health Coalition for Anti-Stigma Initiatives

In response to the Anti-Stigma Sub-Committee's request, this outline was developed as a first draft of a proposal to potentially move forward to the LCMHC. The outline was developed based on the Anti-Stigma Sub-Committee discussions and augmented with research as applicable. This document is intended to be reviewed and discussed by the Sub-Committee in order to determine what the Sub-Committee would like to move forward to the LCMHC. The Sub-Committee may choose all, some, modifications to or none of the ideas presented below.

The Challenge Being Addressed

Nearly one in five US adults live with a mental illness.¹ It is estimated that 49.5 % of adolescents have a mental health issue at some time in their adolescent years.² Yet, 56% of adults with mental health needs did not receive treatment.³ The effect of not receiving treatment enormously impacts the individual, families, and communities as a whole.

There are many reasons that an individual does not access mental health treatment including the effects of the stigma of mental health conditions. *Mental health stigma is when a person is viewed in a negative way just because they have a mental health condition. This leads to prejudice and discrimination* against individuals and families with a mental health condition resulting sometimes in individuals and families not seeking treatment for fear of being stigmatized.

Overarching Goal

Reduce the stigma about mental health and increase actions to seek help for those with mental health conditions.

Recommended Overarching Approach to Addressing the Challenge

The literature on reducing stigma is accomplished through different approaches. Examples of approaches include education (which can be large scale mass media public Awareness campaigns), contact interventions (which aim to overcome biases often by sharing lived experience), protest and advocacy (usually carried out at the grass-roots level (such as letter writing) and legislative and policy change (to protect and normalize stigmatized groups).⁴

The Anti-Stigma Campaign Sub-Committee recommends a multi-prong approaches spanning multi-years to reducing stigma and increase seeking help behavioral for mental health conditions. The approach would include engaging organizations throughout Lake County to implement different types of initiatives to reach the maximum number of individuals. Organizations would include employers, faith-based organizations, social services, organizations that are frequented by the general public such as grocery stores, gas stations, and local entertainment attractions such as Great America.

¹ National Institute of Mental Health - <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>

² National Institute of Mental Health - <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>

³ Mental Health America - <http://www.mentalhealthamerica.net/issues/state-mental-health-america>

⁴ Committee on the Science of Changing Behavioral Health Social Norms The National Academies of Science, Engineering and Medicine (2016) Ending Discrimination Against People with Mental and Substance Use Disorders.

Further, the approach would leveraging existing networks, resources, and volunteers with connected audiences. However, there would be a central hub that is planning and coordinating activates associated with the different initiatives. *(Who would this be? County, an advocacy organization, other, see funding section at the end of document)*

The following section describes the specific proposed Anti-Stigma Initiatives could be implemented that are working in tandem with each other and as applicable sharing resources (e.g.. website). The initiatives are:

Initiative 1: Community Wide Anti-Stigma Public Awareness Campaign

Initiative 2: Locally leverage standardized national mental health campaigns throughout the year

Initiative 3: Accelerate the use of Mental Health First Aid Trainings

Initiative 4: Accelerate the use of Peer and Family Anti-Stigma Programs

Initiative 5: Establish and Maintain a Website with Resources

These initiatives would be phased in.

Need to decide what that would look like

Examples

- Begin all Initiatives in 2019
- Start with Initiative 1 and 5 add others in the second year
- Start with Initiatives 3, 4 and 5 and consider adding Initiatives 1 and 3 in the second year
- Alternative implementation phases

Proposed Anti-Stigma Initiatives

Initiative 1: Community Wide Anti-Stigma Public Awareness Campaign
Aim
Positively change perceptions about mental health, increase health literacy about mental health and increase help-seeking behaviors
Approach
Implement a Lake County Anti-Stigma Public Awareness Campaign (Campaign) focused on XXX. Contract with a professional communications/marketing firm to develop and implement the Campaign. Develop and issue a Request for Proposal (RFP) to be awarded by XXX.
The Lake County Campaign will be developed using evidenced-based approaches (and incorporating already established anti-stigma campaign approaches/resources when applicable). The professional communications/marketing firm will develop materials/resource that can be used by organizations throughout Lake County. Materials and resources to be acquired and/or developed would include: <ul style="list-style-type: none">• Identify and access Public Service Announcements for use on television and radio, resources could include but are not be limited to<ul style="list-style-type: none">○ SAMHSA prepared PSAs○ Bring Change to Mind PSAs○ Seize the Awkward PSAs○ Teen Mental Health First Aid PSAs• Design print materials such as posters and brochures

- Create sample information materials/blogs that can be used by anyone for posting on their social media networks
- Design a website that has informational materials on behavioral health topics including how to access help including treatment and support resources

Materials should contain a call to action and provide a number to call and website to access other materials.

Materials should address social and ethnic considerations that are prevalent in Lake County (e.g. brochures and posters in predominate languages).

Establish a dedicated resource (which could be in the RFP) to:

- Facilitate/coordinate/conduct outreach to community organizations to become engaged and utilize Campaign materials wherever and however they can to reach the maximum amount of people
- Engage with media to utilize the Campaign resources

The following Subject topics were discussed at the last Sub-Committee meeting

- Understanding mental illness/depression/severe mental illness;
- Suicide Prevention;
- Nobody's Perfect;
- Assists with access to help;
- Messaging anti-stigma or increasing education;
- Educate that mental health is a condition to be managed (no different than diabetes);
- Encouraging conversations about mental health;
- Words to avoid (awkward);
- Shared stories;
- 1 in 4 affected by mental illness;
- Open talking about mental health;
- Deep stigmas;
- Overlay of cultural beliefs;
- Not just impacts person - impacts family and community;
- Educational component such as Make it okay campaign;

Target Audience

TBD

The Sub-committee has discussed the following without coming to conclusion

- General public
- Senior population with depression (Medicaid/Medicare rates increased each year in the past seven years);
- Persons struggling with MI;
- General public;
- General vs. specific target populations;
- Multiple target populations;
- Multiple age groups;
- Racial/ethnic populations;
- Low income people who don't always access mainstream media;
- Target social ecological model of levels of influence.

Measurement Outcomes

TBD

Consider adding measurement outcome for the RFP to determine if perceptions change positively and if health literacy increases. However, this will take considerable effort and need to weight the cost and benefit of paying for obtaining the outcome information.

Alternatively, the measurement could be the # of times a campaign is aired, # of posters and brochures are disseminated, # of events participated in.

Background Research**Economic Impact of Anti-Stigma Campaign⁵**

This study aimed to describe the economic impact of the Time to Change (TTC) anti-stigma social marketing campaign in England, including the potential effects on the wider economy. Based on average national social marketing campaign costs, the economic benefits outweighed costs even if the campaign resulted in only 1% more people with depression accessing services and gaining employment if they experienced a health improvement. The findings suggest that the TTC anti-stigma social marketing campaign is a potentially cost-effective and low-cost intervention for reducing the impact of stigma on people with mental health problems.

Social Marketing Campaign Impact⁶

The Time to Change anti-stigma programme in England focused on mass media channels, social media and social contact. The focus of this study evaluated the effectiveness of the social marketing campaign effectiveness. The study showed changes in participants' level of mental health knowledge, attitudes and behaviors. The study concludes that social marketing campaigns are an effective way to reduce stigma.

California's Use of Social Marketing Materials⁷

Preliminary evaluations of the act show that social marketing materials designed for the program reached a large number of Californians. Beyond the reach of the materials, findings show that stigma against mental illness has decreased in California, with more people reporting a willingness to socialize with, live next door to, and work with people experiencing mental illness. People also reported that they are providing greater social support to those with mental illness.

Literature Review on State of the Art Approaches to Reduce Discrimination and Stigma⁸

The study aimed to provide a narrative synthesis of the systematic reviews of the literature on the nature of mental health-related stigma. The study found there is evidence for a small to moderate positive impact of both media campaigns and interventions for target groups in terms of stigma-related knowledge, attitudes, and intended behavior in terms of desire for contact. However, the

⁵ Evans-Lacko, S., Henderson, C., Thornicroft, G., and McCrone, P. The British Journal of Psychiatry (2013) Economic Evaluation of the anti-Stigma Social Marketing Campaign in England 2009-2011.

⁶ Sampogna, G., Bakolis, I., Evans-Lacko, S., Robinson, E., Thornicroft, G., and Henderson, C. European Psychiatry (2016) Impact of social marketing campaigns on reducing mental health stigma: Results from the 2009-2014 Time to Change programme.

⁷ Committee on the Science of Changing Behavioral Health Social Norms The National Academies of Science, Engineering and Medicine (2016) Ending Discrimination Against People with Mental and Substance Use Disorders.

⁸ Gronholm, P. C., Henderson, C., Deb, T., and Thornicroft, G. Soc Psychiatry Psychiatr Epidemiol (2017) Interventions to reduce discrimination and stigma: the state of the art.

limited evidence from longer follow-up times suggests that it is not clear whether short-term contact interventions have a lasting impact.

The Evidence for Stigma Change⁹

The book, *Ending Discrimination Against People with Mental and Substance Use Disorders*, outlines an understanding of what stigma of mental and substance abuse disorders are; the science behind changing attitudes, approaches for reducing stigma, research strategies and outlines conclusions and recommendations. A summary of the conclusions and recommendations based in part of what can be learned from other campaigns is that marketing campaigns require far-reaching coordinated and sustained efforts to have an impact.

Cost Considerations

Research on cost considerations for an Anti-Stigma Public Awareness Campaign varied greatly depending on the scope of what was required of a company to perform.

One RFP reference from a foundation for a county was a \$300,000 contract per year to develop a strategy and materials for a paid media spots, social media, and collateral material.¹⁰

A document located online reflects that in 2014, the Board of Supervisors of Riverside in California approved approximately \$1 M per year (with approval to annual approve additional funding for 3 years) for a firm to promote mental health awareness media campaign which was to include a website, social media advertisements, radio announcements, billboard ads, cable television commercials, including real life digital stories of some of the individuals who receive services.¹¹

Another reference cited costs for counties in Europe which ranged from \$1M to multiple of millions over several years.¹²

Initiative 2: Locally leverage standardized national mental health campaigns throughout the year

Approach

Contract with a professional communications/marketing firm (*or identify an alternative resource*) to organize and implement the following existing national mental health campaigns in Lake County (*Sub-Committee to decide on some, all, or other campaigns*):

- National Recovery Month – September - <https://www.recoverymonth.gov/>
- Suicide Awareness Month – September <https://suicidepreventionlifeline.org/promote-national-suicide-prevention-month/> and <https://www.sprc.org/>

⁹ Committee on the Science of Changing Behavioral Health Social Norms The National Academies of Science, Engineering and Medicine (2016) *Ending Discrimination Against People with Mental and Substance Use Disorders*.

¹⁰ Horizon Foundation, Mental Health Marketing Campaign RFP, Released August 6, 2018

¹¹ Submittal to the Board of Supervisors County of Riverside, State of California, (May 5, 2015) Approve a One (1) Year Professional Services Agreement with AdEase, Inc for Mental Health Anti Stigma and Discrimination Reduction activities.

¹² Committee on the Science of Changing Behavioral Health Social Norms The National Academies of Science, Engineering and Medicine (2016) *Ending Discrimination Against People with Mental and Substance Use Disorders*.

- Children’s Mental Health Awareness Day – May
<https://www.samhsa.gov/children/awareness-day>
- National Wellness Week – September <https://www.samhsa.gov/wellness-initiative>
- National Prevention Week – May <https://www.samhsa.gov/prevention-week>
- Community Conversations - <https://www.samhsa.gov/community-conversations>
- Mental Illness Awareness Week – October <https://www.nami.org/Get-Involved/Awareness-Events/Mental-Illness-Awareness-Week>

(Short-term) take advantage of the opportunity to tag onto the National Recovery in September, that is dedicated to increasing awareness of behavioral health conditions;

- Lake County Communications team will partner with the Lake County Health Department (LCHD) Communications team to develop a plan using existing resources to develop stories, video, reach out to traditional media, website, e-newsletters, LCTV, and social media;
- Lake County Communications team launched a well-received, short-term, mini-campaign a few months ago on mental health resources. Partners added links on their websites. A similar campaign could be planned that could reach thousands of people;

Coordinate with existing programs;

- The Lake County Health Department SAMSHA grant requires running an anti-stigma campaign a recommendation is to leverage Lake County networks to amplifying previous planned and prepared messages;

Target Audience

General public

Outcomes

Measurement Outcomes

Background Research

Cost Considerations

Initiative 3: Accelerate the use of Mental Health First Aid Trainings

Approach

Mental Health First Aid is an 8-hour course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis. The evidence behind the program demonstrates that it does *build mental health literacy, helping the public identify, understand, and respond appropriately to signs of mental illness.*

The content of the course includes learning risk factors and warning signs for mental health and addiction concerns, strategies for how to help someone in both crisis and non-crisis situations, and where to turn for help.

Accelerating the use of Mental Health First Aid in Lake County would include outreach to diverse groups to develop trainers and facilitate trainings within their communities. Following are examples of the types of groups and organizations that will be outreached:

- Faith-Based Organizations
- Employers – HR Departments
- Social and ethnic advocacy organizations
- Healthcare systems
- Educational systems
- Justice System
- Veteran organizations
- Senior adult organizations
- ??? What other types of organizations

Outreach approach – to be discussed with Sub-Committee

- The accelerated use of Mental Health First Aid would be organized and facilitated by a full-time position. The position would be responsible to develop a plan for outreach to the community as well as coordinate all associated activities with the Mental Health First Aid training including content for a website.
- The outreach approach should resemble a grass-roots approach like the Lake County Opioid Initiative (LCOI) model to drive one on one conversations to foster action of participating in the Mental Health First Aid initiative for Lake County.

Further, a website would be developed to publish available training for the general public to take. The website would contain a link to act. See below Website initiative

The accelerated use of Mental Health First Aid would also need an on-going community lead partnership that sets vision and goals; and actively supports activities of the partnership. (This could be a newly formed partnership or be connected with already existing efforts.)

Target Audience

General public and individuals connected with the aforementioned organizations.

Outcomes

Increase mental health literacy and increase seeking help behaviors

Measurement Outcomes

- 10,000 persons in Lake County trained in Mental Health First Aid
- Have XXX Trainers from a diverse representation of community organizations (social service agencies, faith-based organizations, corporations...)
- Website
- Assigned ownership of the initiative

Background Research

Evaluation of Mental Health First Aid¹³

The Georgetown University Center for Child and Human Development and its National Technical Assistance Center for Children's Mental Health in collaboration with the National Council for

¹³ Anthony, B., Banh, M., Goldman, S., Yoon, I. Evaluation of Mental Health First Aid Summary of Psychometric Study. Georgetown Center for Child and Human Development, 2015.

Behavioral Health conducted a nation-wide research project, creating tools to evaluate the immediate and long-term impact on attitudes and behavior of individuals trained in MHFA. Four different tools were used: pre-training questionnaire, post-training questionnaire, and two follow-up questionnaires, (3 and 6 months). Preliminary results suggest a significant increase in knowledge, increased participant self-efficacy and confidence in performing MHFA actions, and 17% - 58% reported using MHFA when encountering individuals with mental health problems. (Study still in process)

Effectiveness of MHFA Training in Sweden, an RCT with a 6-month and 2-year follow-up¹⁴

This study, a randomized controlled trial, investigates if MHFA training in a Swedish context provides a sustained improvement in knowledge about mental disorders, a better ability to be helpful in contacts with people who are ill and if it changes attitudes in a positive direction. Participants were mainly public sector employees from a county in the west of Sweden. The study included an experiment group (n = 199) and a control group (n = 207) placed on a waiting list during a 6-month follow-up. At a two-year follow-up, findings demonstrated that the intervention group improved in knowledge and confidence in providing help for someone in need, with improvements maintained to a great extent.

Mental Health First Aid is an effective public health intervention for improving knowledge, attitudes, and behaviour: A meta-analysis¹⁵

The paper aimed to synthesize published evaluations of the MHFA programme in a meta-analysis to estimate its effects and potential as a public mental health awareness-increasing strategy. The results demonstrate that MHFA increases participants' knowledge regarding mental health, decreases their negative attitudes, and increases supportive behaviours toward individuals with mental health problems.

Additional research resources on the efficacy of MHFA can be reviewed at <file:///C:/Users/suzan/OneDrive/Documents/Documents/A%20-%20Rabideau%20Consulting/1%20Lake%20County/Phase%202/Subcommittee/Subcommittee%20resources/stigma/Effectiveness%20Research/MHFA-Research-Summary-UPDATED.pdf>

Cost Considerations

Costs would include having a resource that can develop a plan for outreach to the community as well as coordinate all associated activities with the Mental Health First Aid training. Costs also include training trainers to conduct the Mental Health First Aid Training. There are other costs for Mental Health First Aid Training that may not be covered by the organization facilitating the training. Costs could include training materials (approximately \$20 per book), meeting site facilities and refreshments.

Initiative 4: Accelerate the use of Peer and Family Anti-Stigma Programs

Approach

Anti-stigma peer and family programs have been used to reduce stigma. These programs in which people who have disclosed their conditions offer their experience and expertise to individuals and

¹⁴ Svensson B, Hansson L. Effectiveness of Mental Health First Aid Training in Sweden. A randomized controlled trial with a six-month and two-year follow-up. *PLOS ONE*, 2014; 9; 1-8.

¹⁵ Hadlaczky G, Hokby S, Mkrtchian A, Carli V, Wasserman D. Mental Health First Aid is an effective public health intervention for improving knowledge, attitudes, and behaviour: A meta-analysis. *International Review of Psychiatry*, 2014; 4; 467-475.

families, programs that range from informal peer-led programs to peer specialized services in health services systems.

Increase the use of these programs in Lake County such as the NAMI In Our Own Voice presentation. The intention of the In Our Own Voice presentations are to change attitudes, assumptions, and stereotypes about people with mental health conditions. These 40-, 60- or 90-minute presentations provide a personal perspective of mental illness, as presenters with lived experience talk openly about what it's like to live with a mental health condition.

Trained presenters humanize the misunderstood, highly stigmatized topic of mental illness by showing that it's possible—and common—to live well with a mental health condition. This presentation also provides:

- A chance to ask presenters questions, allowing for a deeper understanding of mental health conditions and dispelling of stereotypes and misconceptions.
- The understanding that every person with a mental health condition can hope for a brighter future.
- Information on how to learn more about mental health and get involved with the mental health community.

Target Audience

TBD

Outcomes

Increase health literacy about living with a mental illness, reduce stigma, increase hope and increase help-seeking behaviors

Measurement Outcomes

Provide XX # of presentations per year

Background Research

Cost Considerations

Initiative 5: Establish and Maintain a Website with Resources

Approach

Establish a website that contains information to supports the aforementioned initiatives aimed at reducing mental health stigma.

Target Audience

Website for use by all people and organizations within in Lake County

Outcomes

Measurement Outcomes

Background Research

The Erie County Anti-Stigma Coalition has developed a website with resources including information on NAMI IN or Own Voice trainings, Mental Health First Aid and other community resources.

<https://letstalkstigma.org/>

The Township of Sparta in New Jersey has added a page within the township's website addressing anti-stigma issues and has resources such as Mental Health First Aid.

<http://www.spartanj.org/cn/webpage.cfm?TID=30&TPID=16248>

Cost Considerations

- Website design
- Website content development
- Website maintenance
- Web hosting costs

Funding Strategies

Funding for these initiatives would be based on a private/public partnership. Members of the LCMHC, Anti-Stigma Sub-Committee, and other interested parties could seek private donations that are matched through public resources. Organizations that could be outreached include but is not limited to:

- National and local foundations
- National and local advocacy organizations
- Healthcare organizations and systems
- Managed Care Organizations operating in Lake County
- Pharmaceutical companies
- ?????