

Proceedings for Systems Think Tank on Mental Health and Chronic Disease Prevention: Moving Forward as a System

Hosted by the Ontario Chronic Disease Prevention Alliance

In partnership with its members: the Canadian Mental Health Association, Ontario Division and the Centre for Addiction and Mental Health

Event Summary

Compared to the major chronic disease risk factors (alcohol use, unhealthy eating, physical inactivity and tobacco use), mental health is not as well-understood as a risk factor for chronic disease. Recognizing this, the Ontario Chronic Disease Prevention Alliance (OCDPA) held a systems think tank to:

- ◆ Enhance the capacity of the chronic disease prevention system;
- ◆ Integrate mental health promotion into current and future work within the system;
- ◆ Identify opportunities for collaboration.

Following a presentation by the OCDPA, the Canadian Mental Health Association - Ontario Division and the Centre for Addiction and Mental Health, participants were invited in small groups to describe existing mental health promotion activities within their organization; to identify benefits and challenges to addressing mental health; to discuss opportunities for collaborative action; and to identify where they might take a lead or a support role. Results from small group discussions were compiled to create a list of potential actions for further discussion; these actions will depend on stakeholders as well as the OCDPA to take a lead/support role.

The systems think tank presentation described the value of collaborative action, to think and act like a system, and addressed the interaction between mental and physical health. The presentation also discussed how mental health promotion can be integrated into physical health promotion initiatives and described specific mental health promotion action.

Following the presentation, participants discussed benefits to addressing mental health promotion as part of chronic disease prevention. They saw mental health promotion as an opportunity to view current activities through a new lens, to align physical and mental health for better health outcomes and cost-savings to the health system.

Valuable suggestions for collective action were generated at the systems think tank. The 3 priority actions are:

- ◆ Document existing initiatives and evidence for mental health promotion so that people could build on existing programs;
- ◆ Create a common vision of a direction for the integration of mental health into chronic disease prevention;
- ◆ and influence the provincial mental health and addiction strategy currently under development to ensure it includes chronic disease prevention and to align it with chronic disease prevention strategies and initiatives.

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Note from Chair

“The results of the system think tank event will be used to support leadership opportunities from the field to integrate this work into their practice, priorities and agendas and identify opportunities to advance the issue as a system. We hope that you will share the information from this event with others in your organization, networks and broader field, and will use it to assist you in your planning and the development of new collaborations, priorities and activities.”

Connie Uetrecht
Co-Chair of the Ontario Chronic Disease Prevention Alliance

Poor Mental Health as a Risk Factor for Chronic Disease

A healthy state of well-being includes the whole person – body and mind. Many initiatives to promote physical well-being also promote mental health. To be effective, however, chronic disease prevention must recognize the interaction between physical and mental wellness and find ways to consciously address it.

In addition to the physiological relationship between physical and mental health, poor mental health reduces people's ability to engage in healthy behaviours. Depression is the most common mental health problem in Ontario and rates of depression are higher than average in people with chronic diseases. Part of reducing the impact of poor mental health on chronic disease is to encourage people to recognize mental health problems and to seek help earlier. The stigma of mental illness often causes people to resist accessing support; and the judgements, attitudes and behaviours of health care providers toward people with mental health problems can also be a barrier. Reducing the stigma of mental illness; improving people's understanding of mental health, mental health problems and how to get help; and improving depression screening and intervention are all important aspects of reducing the impact of poor mental health on the development of chronic diseases. Action on the social determinants of health such as social inclusion, violence, discrimination and poverty has also been shown to improve mental health.

“High co-morbidity among mental disorders and their interrelatedness with physical illnesses and social problems stress the need for integrated public health policies, targeting clusters of related problems, common determinants, early stages of multi-problem trajectories and populations at multiple risks.”

*WHO (2004).
Prevention of Mental Disorders:
Effective Interventions and
Policy Options.*

Chronic disease prevention can address the social determinants of health, integrate mental health literacy, address stigma, and work for the integration of depression screening into Chronic disease prevention. Chronic disease prevention organizations and practitioners would benefit from becoming more aware of the impact of what they are already doing on individual and population mental health, and more consciously address the interaction between the two.



Photo: Nancy Dubois outlining objectives of the day.

“The content of the presentations and work sessions throughout the day increased my understanding of how interconnected mental health promotion and physical health promotion must be when aiming for optimal health outcomes in a target population. If ‘physical health affects mental health and mental health affects physical health’ then it is absolutely essential that both topics are addressed simultaneously in order to have an effective comprehensive chronic disease prevention system in Ontario.”

Systems Think Tank Participant

Mental Health Promotion: Achieving Positive Mental Health For All

“There is a dynamic interrelationship between mental health and physical health, and an individual’s mental health status changes frequently. If we promote mental health, we will not only get lower rates of mental illness, but also lower rates of chronic disease.” ([Towards Flourishing For All: National Mental Health Promotion and Mental Illness Prevention - Best Advice on a Policy for Canadians, 2008](#))

Over the past decade, increasing attention has been paid to the concept of mental health promotion: “... the process of enhancing the capacity of individuals and communities to take control over their lives and improve their mental health” (Health Canada, 1997). Positive mental health and well-being are associated with better physical health outcomes, improved educational attainment, increased economical participation, and rich social relationships.

Mental health promotion is the positive conceptualization of mental health. It focuses on the strengths, assets, and capacities of individuals and communities rather than having a problem or deficit-based orientation, and builds on a foundation of individual and collective empowerment and resilience. Mental health promotion fosters well-being by enhancing access to mental health determinants (e.g. education, housing, economic participation), and strengthening protective factors while mitigating risk factors at the individual, interpersonal and societal level. Consistent with core health promotion principles, mental health promotion also promotes equity and social justice and is respectful of cultural diversity and personal dignity.

Mental health promotion strategies are relevant for all members of society, and encompass all people with varied levels of physical and mental health status, including people living with chronic and severe mental illness. Mental health promotion is an issue of shared responsibility, requiring active participation of many sectors beyond health – such as, education, criminal justice, urban planning, finance, housing, labour, social welfare.

An effective, wellness-based system creates the conditions for promoting positive mental health by:

- ◆ Addressing mental health determinants such as social inclusion, freedom from discrimination and violence, and access to economic resources;
- ◆ Implementing multiple strategies using targeted interventions with a strong evidence base;
- ◆ Recognizing the shared responsibility of promoting positive mental health by collaborating across sectors and all segments of society.

For more information, please see full [presentation](#) available at www.ocdpa.on.ca.

Picture from: [Through Children’s Eyes: A collection of drawings and stories](#) from the WHO Global School Contest on Mental Health (2001).



Advancing Mental Health Promotion and Chronic Disease Prevention through Collective Action

In a small group format, participants were asked to generate a list of ideas on what needs to happen to move forward. The small groups were then asked to prioritize their list; the top 3 priorities from their list were brought to the larger group for further discussion and prioritization.

The top 3 priorities for collective action were identified; please note that the actions are not listed in any particular order:

- ◆ Document existing initiatives and evidence for mental health promotion in order for related stakeholders to build on existing programs;
- ◆ Establish a common direction for integrating mental health promotion within chronic disease prevention;
- ◆ Influence the provincial mental health and addiction strategy currently under development to ensure inclusion of chronic disease prevention elements and alignment with chronic disease prevention strategies and initiatives.

Additional actions that can be taken, collectively as a system or by individual stakeholders, include:

- ◆ Enhance mental health literacy within organizations, raising awareness about mental health and mental illness amongst staff;
- ◆ Utilize OCDPA mental health messages (see page 11 for messages) in stakeholders' activities in order to reach a variety of audiences (e.g. government, health intermediaries, public) and to support the inclusion of a mental health component in existing risk factor and chronic disease messages (e.g. messages from the Alberta Healthy Living Network);
- ◆ Provide advice to governments on policy direction (see page 8 for examples);
- ◆ Reduce stigma, through education accompanied by contact with people with mental illness;
- ◆ Engage in knowledge exchange initiatives for mental health promotion and chronic disease prevention (including researching existing knowledge and holding a conference for front line staff to share "what works");
- ◆ Recognize and build on common capacities and resources in order to address common goals across the system. Capacity building with health intermediaries to establish a common foundation;
- ◆ Reach out to other sectors, including the business sector to advance the issue of mental health;
- ◆ Integrate mental health promotion into chronic disease prevention strategies aimed at priority populations.

A suggestion from small groups is that a basic principle to advance mental health and chronic disease prevention should be to engage clients and to support their involvement at whatever point and level fits for them.

Benefits to Addressing Mental Health Promotion

Participants recognized many benefits to integrating mental health promotion into chronic disease prevention activities. Bringing mental health promotion into existing initiatives provides an opportunity to reduce “separate” strategies; creating synergy, enhancing efficiency, and reduces gaps and duplication. Participants saw opportunities to view current activities through a new lens and to link mental health to other priorities. They acknowledged the benefits of aligning physical and mental health (holistic approach that addresses the determinants of health) across various settings (community, schools and workplace) as a comprehensive approach to chronic disease prevention that could produce a positive organization climate, enhance motivation and satisfaction, increase productivity and leads to cost savings and improved health outcomes. Furthermore, addressing mental health promotion helps reduce stigma and can shift people’s attitudes and support them to place a higher value on health and well-being.

“I am now actively engaged in introducing my colleagues to mental health messaging, where appropriate, and tying it into our programming and/or highlighting areas that already deal with mental health within our existing programming. This event enabled me to bring mental health to the forefront and actively see ways in which it could be incorporated into the work that we do.”

Systems Think Tank Participant

Challenges to Addressing Mental Health Promotion

Participants mentioned that organizations may have difficulty being more involved in mental health promotion due to: financial constraints (e.g. limited funding); capacity issues (e.g. awareness and mental health literacy of staff, limited staffing, and training of staff to deliver mental health messaging); and competing priorities.

Across the health promotion field, there exist siloed efforts to promote mental health. For instance, public health, one of the key players in chronic disease prevention, has no mandate to address mental health promotion within its chronic disease prevention activities. Coordination between organizations to create a systems approach to mental health promotion is difficult due to the current economic structure and lack of a common framework. Moreover, there are knowledge gaps in the relevance of mental health to chronic disease prevention; stigma exists within a variety of settings; and there is a lack of awareness in the government and relevant decision makers to take a lead on and to address the issue.

“I think Public Health has an important role to play in mental health promotion, but it is unfortunate that there is not a distinct role within public health for mental health promotion. Hopefully that day will come. I am eagerly waiting to read the guidance documents that the Ministry of Health Promotion will produce that will hopefully provide guidance on how to best incorporate mental health promotion with the new Ontario Public Health Standards.”

Systems Think Tank Participant

Examples of Opportunities for Action

During small group discussions, participants described examples of opportunities which organizations could act on to address mental health promotion and chronic disease prevention. These include (but are not limited to):

- ◆ **Consultation for a National Mental Health Strategy:** the Mental Health Commission of Canada is seeking input from the public and from stakeholders on the development of a national mental health strategy.
- ◆ **Ontario Public Health Standards:** The Ontario Public Health Standards reflect public health functions across program areas and clearly articulate public health's role in addressing the determinants of health. While mental health is not specifically identified as a chronic disease risk factor within the standards, mental health impacts other risk factors addressed in the standards and its promotion is essential to address within a variety of community settings.
- ◆ **Ontario Schools:** Mental health is one of a several important factors to address in schools, along with healthy eating and physical activity. Addressing mental health in after-school programs and in the Ontario Curriculum Review will enhance wellbeing for all children and youth and allow them to achieve their full potential.
- ◆ **The Day Nurseries Act:** The Ontario Ministry of Children and Youth Services (MCYS) regulates the Day Nurseries Act, an act to ensure that day nurseries are properly licensed, regularly inspected and conform to established rules and regulations, ensuring a healthy environment for children development. In 2009-2010, MCYS will seek input to update the Day Nurseries Act and its sections, providing opportunities for groups and organizations to address and integrate mental health promotion content.
- ◆ **As part of the Ontario Diabetes Strategy,** the Ministry of Health and Long-Term Care intends to work with all 14 LHINS to support initiatives that address diabetes management, treatment and prevention. Chronic disease prevention groups working with the LHINs are encouraged to assist with the development of regional Diabetes plans and to ensure that prevention and mental health promotion are integrated within the plans.



Photo (clockwise from centre): Andrea Stevens-Lavigne, Mary Cerré, Robert Moore, Marianne Kobus-Matthews, Jacquie Micallef, Connie Uetrecht discussing ideas for collection to address mental health and chronic disease prevention.



Photos:
(Top) Alicia Tyson (in white) leading one of the groups in a rock, paper, scissor game during fitness break.
(Right) Group participation during fitness break.

Examples of Current Mental Health Promotion Work

At the systems think tank, participants described examples of mental health promotion work that their organization are currently engaged in. Some examples are noted below.

Public Health

Several public health representatives noted opportunity to pursue and define mental health and mental health promotion activities as they relate to the chronic disease prevention standards of the Ontario Public Health Standards. The Ministry of Health Promotion is in the process of developing a resource to support work on mental health and its link to the Ontario Public Health Standards.

Children and Schools

Ophea (the Ontario Physical Health and Education Association), exists to support schools and communities through quality program supports, partnerships and advocacy to enable children and youth to lead healthy active lives. As part of their Curriculum and School-Based Health Resource Centre, which focuses on supporting the development and implementation of school based Health and Physical Education curriculum and programming in various risk factor areas, Ophea identified several areas where mental health promotion could be integrated within their resources, messages, activities. These include addressing mental health and its promotion within the anticipated curriculum supports for the renewed Health and Physical Education Curriculum, due in 2009; inviting speakers on mental health to address its Kids Health Conference 2009, and highlighting applicable articles on mental health and school settings through its ophea.net online network, a resource to over 32,000 members.

Government

The Public Health Agency of Canada – Ontario/Nunavut Region (PHAC-ON/NU) is exploring the place that mental health plays in several of their funding/project streams (e.g. Diabetes, HIV/AIDS, Child Development, Healthy Living, etc.). Over the next year, PHAC-ON/NU will continue to assess their role in supporting mental health and its promotion through their funding streams.

Evaluation Results for Systems Think Tank

Participants were asked to complete and submit an evaluation survey for the systems think tank. Overall, there was an increase in participants':

- ◆ Level of knowledge on mental health as a risk factor for chronic disease.
- ◆ Awareness and ability to access information and resources related to mental health and its promotion.
- ◆ Capacity to address mental health as a risk factor for chronic disease within their work.
- ◆ Capacity to integrate mental health promotion within their work.
- ◆ Likelihood to address or integrate mental health within their work.

Summary table showing the percentage of participants with a rating of 4/5 or 5/5 on survey questions in relation to knowledge, capacity and likelihood to take action before and after the systems think tank.

	Rating of 4/5		Rating of 5/5	
	Before	After	Before	After
Level of knowledge on mental health as a risk factor for chronic disease	37.0%	55.6%	18.5%	40.7%
Awareness and ability to access information and resources related to mental health and its promotion	29.6%	38.5%	11.1%	42.3%
Capacity to address mental health as a risk factor for chronic disease within their work	29.6%	63.0%	11.1%	18.5%
Capacity to integrate mental health promotion within their work	40.7%	66.7%	11.1%	22.2%
Likelihood to address or integrate mental health within their work	44.4%	59.3%	22.2%	25.9%



Photo: Systems Think Tank on Mental Health and Chronic Disease Prevention: Moving Forward as a System on February 6, 2009 at the Ontario Heritage Centre, Gallery Room.

Follow-Up Actions by OCDPA

At the March 10th OCDPA meeting, members decided on several follow-up actions, for the Alliance, based on a systematic, strategic approach:

- ◆ Work towards a common vision for mental health and chronic disease prevention, by developing of an OCDPA statement on the importance of mental health promotion in the prevention of chronic disease and identifying activities where OCDPA can advance mental health and chronic disease prevention.
- ◆ Advance mental health promotion policies and practices within Ontario by: providing support through OCDPA networks to incorporate mental health in members associated consultations and advisory processes; communicating the OCDPA Common Messages document and incorporating the Common Messages in OCDPA's and members' activities; and integrating research and evidence-based information to link mental health and chronic disease prevention through various OCDPA workgroups and activities.

To encourage greater focus on integrating mental health promotion within chronic disease prevention, the OCDPA has developed messages that provide focal points to address the issue. The messages take a “socio-environmental approach” to preventing chronic disease, and are framed around the central themes of “access and availability” to encourage mental health promotion and to promote collective action across Ontario. The key message and the action-based messages are:

Create the conditions necessary for good mental health

- ◆ Address the socioeconomic conditions which promote mental health: social inclusion, freedom from discrimination/violence and access to economic resources.
- ◆ Improve people's understanding of and ability to maintain good mental health, recognize mental health problems and get support.
- ◆ Increase availability and access to depression screening and early intervention.
- ◆ Reduce the stigma associated with mental illness.

It is the Ontario Chronic Disease Prevention Alliance's hope that a wide range of individuals, groups and organizations will adopt these messages in their work to promote healthy public policies. Our goal is that government at all levels will take appropriate action to improve living conditions that influence chronic disease in Ontario.

For more information on our [Common Message Project](#), please visit the OCDPA website, www.ocdpa.on.ca or email ocdpa@opha.on.ca.

“The Ontario Healthy Workplace Coalition (OHWC) has identified mental health as a serious issue that has a significant impact on all three of the workplace health elements and urgently needs to be addressed. Mental health is a focus that all workplace health stakeholders can relate to, and as the OHWC explores strategies to address mental health in the workplace, it will be helpful to position it in relation to chronic disease prevention.”

Systems Think Tank Participant

Follow-Up Actions by CAMH & CMHA-ON

- ◆ Co-chair OCDPA's Mental Health Workgroup with an inaugural mandate to determine effective approaches to advance mental health promotion as part of health promotion / chronic disease prevention within the OCDPA membership;
- ◆ Advise OCDPA members on effective practices to integrate mental health in their existing chronic disease messages and activities;
- ◆ Provide opportunities to expand mental health literacy and mental health promotion practices amongst OCDPA's membership and their local affiliates and networks;
- ◆ Disseminate OCDPA materials to local mental health service providers engaged in mental health promotion and encourage linkages with local chronic disease prevention initiatives;
- ◆ Inform public policy issues related to mental health as a risk factor for chronic disease through our national and provincial networks, partnerships and collaborative initiatives.

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"So often we work in vacuums within our own sector and this Think Tank was a great opportunity to bring a variety of perspectives together to talk about similar goals and mandates. It's great to share ideas and consider collaboration. I think we will all benefit from the new knowledge and relationships."

Systems Think Tank Participant

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