# Population Mental Health Promotion What is it? What can it become?

Natacha Joubert, PhD







## **MENU**

- A quick look at mental health issues affecting populations around the world
- A new paradigm and vision of 'population mental health'
- What is Population Mental Health Promotion (PMHP)?



## **MENU**

- PMHP practices and community projects
- PMHP indicators and surveys
- PMHP research and evaluation
- PMHP policy and strategy
- PMHP education and training









Most mental health problems result from unstable and inequitable civil, political, economic, social, cultural and environmental life conditions that create insecurity, powerlessness, fear and despair.















# STRESS/ DISTRESS AND MENTAL HEALTH PROBLEMS

Political and economical instability
Social inequity
Interracial and religious conflicts
War and terrorism
Massive urbanization
Poverty
Environmental destruction

Difficult life conditions

Stress/ Distress

Anxiety
Drug abuse
Depression
Violence
Suicide
Others

**Mental health problems** 



The major contributing factor to human distress and related mental health problems is **fear** and its multiple forms:

racism sexism

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social exclusion intolerance pathologization stigmatization, etc.



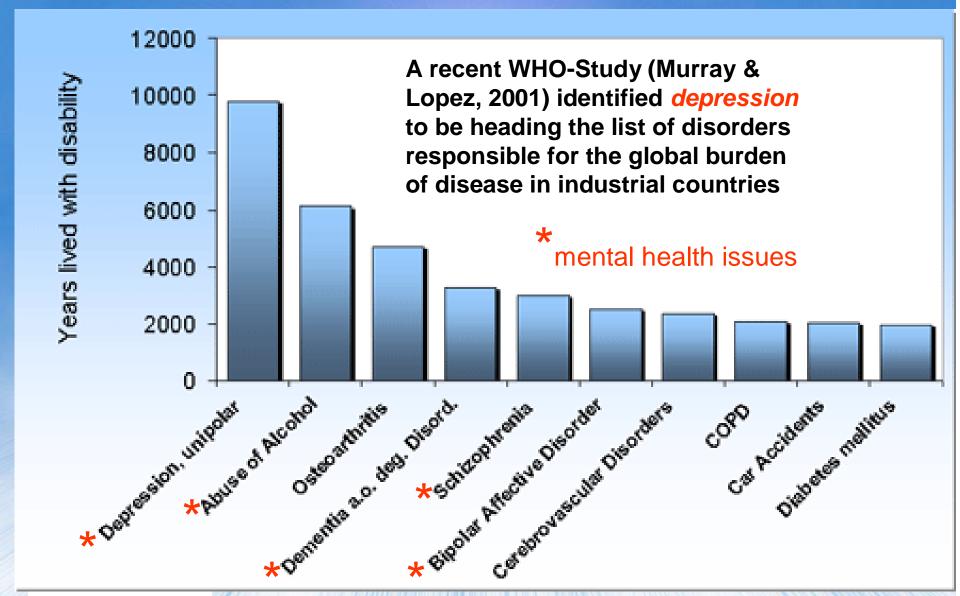
WHO estimates that hundreds of millions of people worldwide are affected by mental health problems.



Data from 2002 showed that 154 million of people globally suffer from depression.



# Depression is the major disease burden in *industrialized* countries (2001)



Current epidemiological data suggest a worldwide prevalence of child and adolescent mental health problems of approximately 20%.



More than 90 million adults and children suffer from an alcohol or drug-use problem.



Violence is among the leading causes of death worldwide for people aged 15-44 years.



Nearly one million people commit suicide every year.



Millions of people worldwide, take antidepressants, despite their limited effectiveness and high costs... and the number is growing.



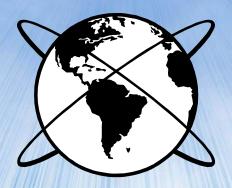


#### STRESS AND PHYSICAL ILLNESSES





Today, stress, distress, and related mental health problems represent one of the largest burdens on individuals, families, communities and societies worldwide.





On average, the cost of mental health related problems is estimated to be 4% of GNP.



# A new population-based measure of the economic burden of mental illness in Canada

Authors: K-L Lim, PhD; P Jacobs, PhD; A Ohinmaa, PhD; D Schopflocher,

PhD; CS Dewa, PhD

Abstract: This paper presents a comprehensive measure of the incremental economic burden of mental illness in Canada which incorporates the use of medical resources and productivity losses due to long-term and short-term disability, as well as reductions in health-related quality of life (HRQOL), for the diagnosed and undiagnosed population with mental illness. The analysis was based on the population-based Canadian Community Health Survey Cycle 2.1 (2003). For all persons, we measured all health services utilization, longterm and short-term work loss, and health-related quality of life and their dollar valuations, with the economic burden being the difference in dollar measures between the populations with and without mental health problems. In total, the economic burden was \$51 billion in 2003. Over one-half was due to reductions in HRQOL. The current accepted practice in economic assessments is to include changes in medical resource use, work loss, and reductions in HRQOL.



Solving all these problems one by one is a very complex and never-ending task.



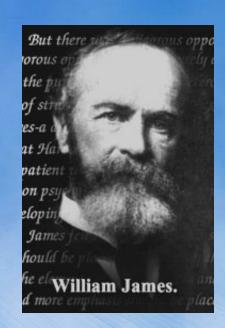
But there is another way...



As William James said so eloquently...

"The world we see that seems so insane is the result of a belief system that is not working.

To perceive the world differently, we must be willing to <u>change our belief</u> <u>system</u>, let the past slip away, expand our sense of now, and dissolve the fear in our minds."



1842-1910



In other words...

we can change the world by changing our beliefs about ourselves and the world.



Our reality or life experience is not just something that is happening or done to us. It is something we create, individually and collectively.



Our reality or life experience is made of thoughts and beliefs we project into the world. It is made of what we think or believe about us and the world.



What we believe becomes our experience.



If it's impossible not to believe what we see, it is equally impossible to see what we do not believe.



# Baleving is seang



Over the last millennia, **fear** has dominated our beliefs about "who we are" and conditioned our ways of being and relating to the world.



Fear creates...

separation
insecurity
depression
judgment
conflict
misery
despair...among other things!



Instead of seeing ourselves mainly as defective and alienated people and victims...











...we could see ourselves as primarily resourceful, insightful and responsible individuals.













Instead of being obsessed with our limitations, weaknesses, deficiencies, problems, diseases and lack of control...



...we could focus more on our healthiness, resourcefulness, strengths, assets, resilience, wisdom, creativity, courage, generosity and determination.





Instead of seeing the world mainly as an unpredictable and dangerous place that divides us...







## HERE'S THE DEAL





...we could see it more as a source of infinite possibilities to express and experience our resourcefulness and sameness.









## HERE'S THE DEAL

By doing so, we would make a world of difference!



By doing so, we would create a "paradigm shift" – from fear and incompleteness to trust and resourcefulness - that can change or transform our reality at an individual and societal level, and both locally and globally.



Thoughts/ Beliefs

**Actions** 

**FEAR** 

Judgment

Separation

Incompleteness

**Problems** 

Control

Cause-EFFECT

Short-term

**TRUST** 

Openness

Connectedness

Resourcefulness

**Opportunities** 

**Support** 

**CAUSE-effect** 

Continuity



Imagine the world...

if decisions and actions in all sectors of human life were based on trust and meant to support individuals, communities and populations' resourcefulness.





http://www.globalethics.org/ http://www.globalspirit.org/ http://www.kosmosjournal.org/



# This is the "vision" behind POPULATION MENTAL HEALTH PROMOTION (PMHP)



Within that vision...

POPULATION MENTAL HEALTH is seen as a collective wisdom and resource that is common to all nations and which contains people ways of being and doing that are conducive to mental health and well-being.



Within that vision...

PROMOTING THE MENTAL HEALTH OF POPULATIONS is recognizing and supporting individual and collective resourcefulness and capacity for mental health and well-being.



PMHP is a vision as well as a set of values/principles and actions – local, national and/or global - that focus on:

- fostering people's mental health development, resourcefulness and well-being; and
- creating supportive and resourcing environments.



The PMHP vision and approach can be schematized as follow:

PMHP = R+R

Individual Resourcefulness + Resourcing environments (Joubert & Raeburn, 1998)



The strength and efficiency of PMHP come from its emphasis on the best in every individual and community, even the most vulnerable, and its focus on their resources and ability to generate and enjoy mental health and well-being.



Wherever they are in the world, people are much more open and responsive to approaches that recognize and increase their healthiness and resourcefulness than to ones that victimize and reduce them to their deficiencies and disabilities.



Results of the Health Realization Project in the Modello and Homestead Gardens Housing Projects, USA,1997

| Risk Factors                      | Before  | After           |
|-----------------------------------|---------|-----------------|
| Households selling or using drugs | 65%     | 20%             |
| Overall crime rate                | Endemic | 70-80% decrease |
| Teen pregnancy                    | 50+%    | 10%             |
| School dropout rates              | 60%     | 10%             |
| Child abuse and neglect           | Endemic | 70%+ decrease   |
| Households on public assistance   | 85%     | 35%             |
| School absenteeism/truancy        | 65%     | Negligible      |
| Parent unemployment rate          | 85%     | 35%             |

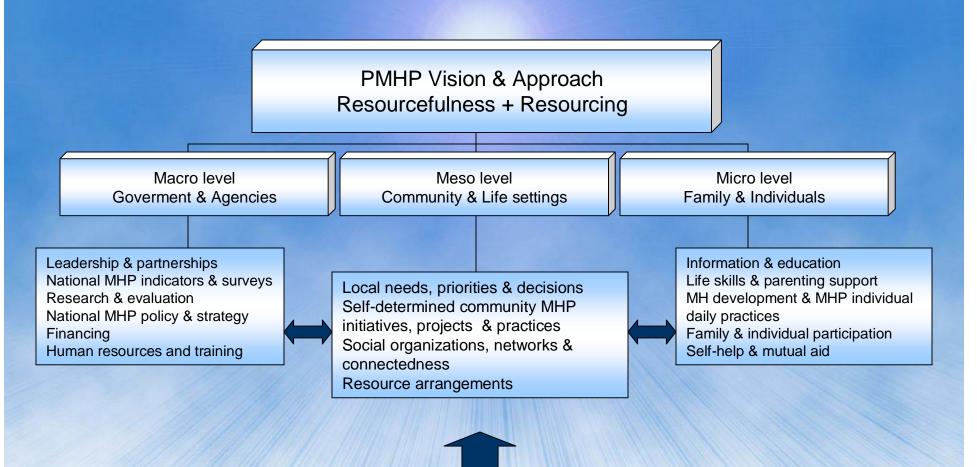


The PMHP's vision and principles (R + R) can be applied at the three levels of decisions and actions:

- macro or governments
- meso or community
- micro or individual & family



## What is PMHP?





## What is PMHP?

- Communities are the pivot between governments and agencies on one side, as well as families and individuals on the other side.
- Public policies get their 'raison d'être' from representing and voicing communities' concerns and realities.
- Communities are in the best position to reach out and support individuals and families in their day-to-day lives.



Communities are the place where...
everybody lives
people learn to relate to one another
social organizations are created
social transformations happen



An important part of the knowledge and practices that we greatly need worldwide to promote the mental health of populations are to be found in communities and life settings.

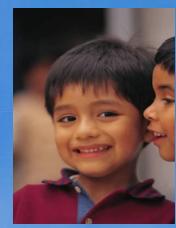


PMHP practices are the ways of **being** and **doing** in day-to-day life that are contributing to our individual and collective mental health and well-being.



The ways of being and doing in dayto-day life that are contributing to our individual and collective mental health and well-being...



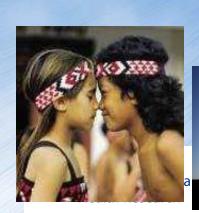


















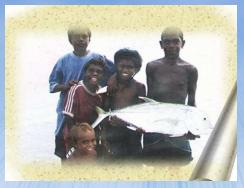
PMHP practices come from the best and immutable part of ourselves that not even the greatest fear and tragedies have ever been able to wear away completely.



PMHP practices are numerous, take various forms, and exist everywhere in the world.











#### The PEOPLE-System for PMHP community project

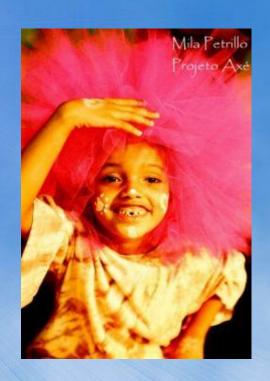
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R + R in action!



In Salvador de Bahia (Brazil), the Axe Project helps street kids by strengthening and fostering their desire for a better life and their capacity to be authors of their own evolution and transformation.









In São Carlos, a slum of Rio de Janeiro (Brazil), young people are recruited and trained to become community health workers, as well as mentors and tutors for other young people and the community as a whole.



In Teresina (Piaui, Brazil), a project called Girassol helps sexually abused children recover their strengths and discover their inner resources in dance workshops and performances directed by professional dancers and choreographers.







Marie Hull-Brown, Project Manager for Older People, Mental Health Foundation of New Zealand

In New Zealand, the *Meeting of the Minds* program provide older people with opportunities and activities to "stretch their minds" and enrich their social lives. The activities include the creation of Book Clubs and Seniornet Groups (computer use classes for older people, delivered by older people).



In North Shore, New Zealand, the Raeburn House is a leader in mental health promotion and community development.

Vision - Enhanced wellbeing, health and self determination for people in a changing environment.

**Mission** - Innovators for healthy communities promoting mental well-being and making a positive difference.



John Raeburn

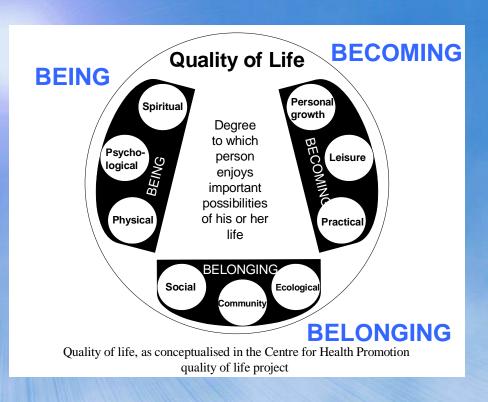




Life is Do-able program was created by the Mental Health Foundation and the University of Auckland, New Zealand, as an attempt to take a positive approach to preventing youth suicide.

The objective of the program is to help individuals achieve a positive feeling of well-being and empowerment.

The "Life is Do-able" program is derived from the Quality of Life model which includes goal-setting behaviour.







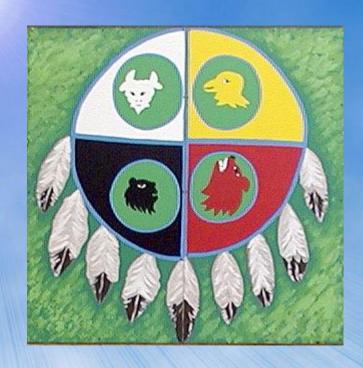
Glen Innes Ka Mau Te Wero Project - Using PMHP as the conceptual frame, and the PEOPLE System as an organizational guide, the project is about enhancing the wellbeing and quality of life of everyone in the community. Actions are self-determined and taken by the people themselves on their own priorities, needs and issues in a positive, strength-building approach, and under their own control and governance.



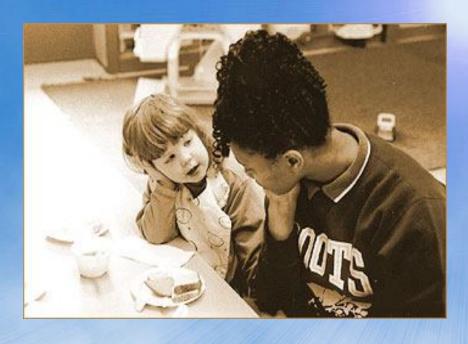
Tess Liew, Project Coordinator, and colleagues



In Manitoba, Canada, the Seniors' Medicine Wheel has allowed Aboriginal elders and children to come together and become mental health promotion agents for one another through a cycle of spiritual growth and emotional healing.







Reaching In, Reaching Out -This program, developed in Ontario, Canada, introduced developmentally adapted activities to enhance resiliency skills among children in childcare centres. It helps children learn to Reach IN to think more flexibly and accurately, and to Reach OUT to others and opportunities.



The Peaceful Project (Québec, Canada) is a school-based program developed in collaboration with schools, parents and the community who have decided to train and empower students as peacemakers instead of implementing traditional topdown violence prevention programs.







In Newfoundland (Canada), a project called Helping Skills established support and mutual help networks in parallel with existing health services and capitalized on local strengths and community solidarity to promote mental health and prevent distress following loss of jobs caused by the moratorium on cod fishing.





Resiliency Canada - Based in Calgary, Alberta, this independent and nonprofit organization strives to advance the well-being of children, youth and their families by generating knowledge about and the ability to assess the resiliency factors and developmental strengths that are essential to the well-being of individuals and the communities they live in.



Home-Start International - A home visiting program for families with children under five years of age that promotes the mental health of parents and their children.

"Parents supporting other parents: it's a simple idea that really works."







JOBS Program participants

JOBS Program (USA) – This program consists of job search training plus social support for recently unemployed adults. It builds job search skills and increases confidence, both in terms of self-esteem and self-efficacy in job seeking.



In spite of their variety, PMHP practices/projects share a <u>common humanity</u>.



PMHP practices are based on a fundamental trust in people and community's desire and capacity to transform their lives.



PMHP practices are activities or initiatives implemented by people for people in the community or different life settings.



Even when these initiatives take place in vulnerable/deprived communities, individuals are not seen as victims but as full participants in a society that they must build for themselves.



The main objective of these activities and initiatives is to support and reinforce individuals resourcefulness, mental health and life skills.



#### **PMHP** practices

- •Resourcefulness/Resiliency
- •Supportive/ resourcing environments

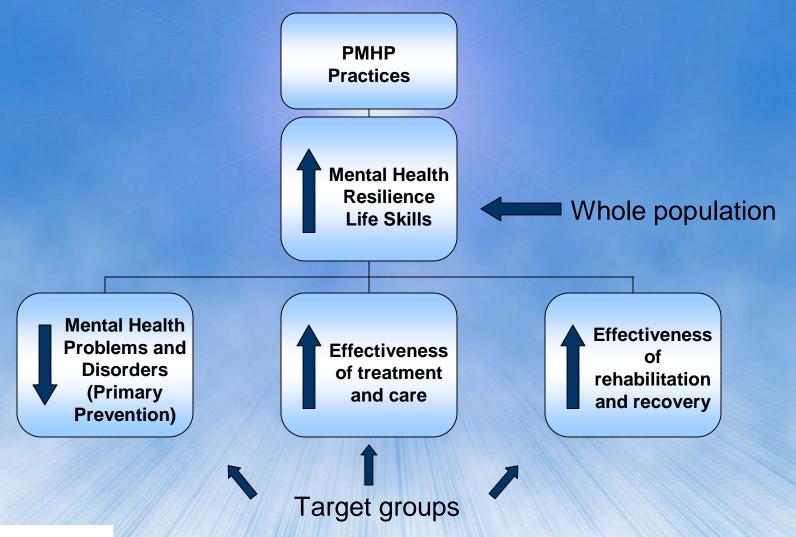
#### **Populations & Culture**

- Children
- Youth
- Adult
- Older adult
- Vulnerable/disadvantages individuals & groups
- Multicultural groups
- Aboriginal

#### **Environments/Life Settings**

- •Family/home
- Schools
- Neighborhoods
- •Slum & street
- Community organizations
- Workplace
- •Health & social care facilities
- Prisons
- Refugee camps







# Cost-effective interventions exist to promote mental health, even in poor populations (WHO, 2009)

Low cost, high impact evidence-based interventions to promote mental health include:

- Early childhood interventions (e.g. home visiting for pregnant women, pre-school psycho-social interventions, combined nutritional and psycho-social interventions in disadvantaged populations);
- Support to children (e.g. skills building programmes, child and youth development programmes);
- Socio-economic empowerment of women (e.g. improving access to education, microcredit schemes);
- Social support to old age populations (e.g. befriending initiatives, community and day centres for the aged);



- Programmes targeted at vulnerable groups, including minorities, indigenous people, migrants and people affected by conflicts and disasters (e.g. psycho-social interventions after disasters);
- Mental health promotion activities in schools (e.g. programmes supporting ecological changes in schools, child-friendly schools);
- Mental health interventions at work (e.g. stress prevention programmes);
- Housing policies (e.g. housing improvement)
- Violence prevention programmes (e.g. community policing initiatives); and
- Community development programmes (e.g. 'Communities That Care' initiatives, integrated rural development).



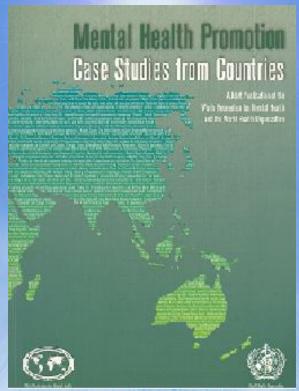
Resilience/life skills Mental well-being Quality of life 1 Community empowerment Employment/ productivity Social capital (Jané-Llopis, Barry, Hosman & Pael, 2005)

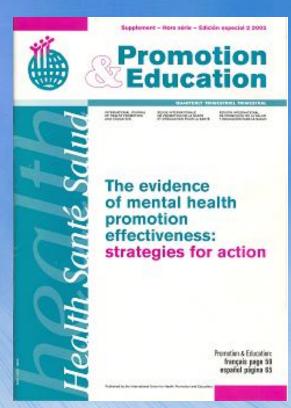


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Child Abuse |
School absenteeism |
Crime |
Violence and aggression |
Depression |
Substance abuse |
(Jané-Llopis, Barry, Hosman & Pael, 2005)
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To succeed in promoting mental health, it is imperative that any action or strategy be based on a paradigm and vision of trust in people resourcefulness and capacity for mental health and well-being.



To succeed in promoting mental health, it is imperative to **recognize** people and communities/life settings as essential resources and providers for mental health/wellbeing as well as partners in PMHP – not only as recipients of services and policies.



#### Government & Agencies



# PARTNERSHIP FOR PMHP (R+R in action!)

Positive MH Indicators
& PMHP Surveys
PMHP Research
& Evaluation

PMHP Education &Training

PMHP Projects & Practices

Experts/Facilitators







Community participation



PMHP indicators describe what nurtures individuals, communities and populations resourcefulness and keeps them mentally healthy.



#### Indicators of mental HEALTH/ individual resourcefulness

- Emotional well-being
- Enjoyment of life
- Coping strategies
- Resilience
- Spiritual well-being
- Social well-being/connection to others
- Cultural well-being

#### Indicators of supportive/resourcing environments

- Community empowerment
- Sense of community
- Social support/networks
- Social inclusion
- Multiculturalism
- Equity, social justice

#### • Index of people and community sameness or commonality

- Love, trust, gentleness, joy, generosity, patience, faithfulness, open-mindedness
- Being, Belonging, Becoming
- Inter-dependence



#### The VIA Classification of Character Strengths

- Wisdom and Knowledge cognitive strengths that entail the acquisition and use of knowledge
- Courage emotional strengths that involve the exercise of will to accomplish goals in the face of opposition, external or internal
- Humanity interpersonal strengths that involve tending and befriending others
- Justice civic strengths that underlie healthy community life
- Temperance strengths that protect against excess
- Transcendence strengths that forge connections to the larger universe and provide meaning



#### PMHP surveys...

- Provide accurate information on people and community mental HEALTH, resourcefulness and quality of life, and the various determinants of mental health/wellbeing (i.e. social, cultural, economic, environmental).
- Facilitate knowledge/information translation into tangible policy and action plan to ensure the proper resourcing and support of people and community mental health and well-being.



#### PMHP RESEARCH & EVALUATION

PMHP research, either quantitative (e.g. survey research) or qualitative (e.g. community action research), is conducted by PMHP professionals in partnership with people in their various life settings.





#### PMHP RESEARCH & EVALUATION

The PEOPLE-System for PMHP community project





#### PMHP RESEARCH & EVALUATION





#### PMHP POLICY & STRATEGY

PMHP policy is a plan of action or strategy to guide decisions and achieve tangible and positive population mental health outcomes (i.e. individual Resourcefulness + Resourcing environments).



#### PMHP POLICY & STRATEGY

- PMHP policies are meant to reinforce and support positive outcomes – not to avoid some negative effects.
- PMHP policies are people centered and involve community participation.
- PMHP policies can be monitored and evaluated by outcomes of PMHP surveys and effectiveness of PMHP community projects and practices.



## PMHP EDUCATION AND TRAINING



# PMHPROMOTERS INVADE THE WORLD!











The first step toward PMHP requires a shift in paradigm an a new vision of mental health beyond mental illness.



The second step toward PMHP is the recognition and support of individuals, communities and entire populations resourcefulness and capacity to transform difficult life conditions into opportunities.



We know how resourceful we can be individually and collectively. In so many ways, our day to day lives are a "tribute" to our resourcefulness.













The third step toward PMHP is the development of a new partnership between community and professionals as well as new tools and processes to translate the PMHP vision into reality.



Everything we need to change the world is to be found in the greatness of who we really are, beyond fear.



# THANK YOU!



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- Slide 6: Lahtinen, E., Joubert, N. & Raeburn, J. (2005)
   Strategies for Promoting the Mental Health of Populations. In Promoting Mental Health: Concepts, Emerging Evidence, Practice, Chapter 17. A report from the World Health Organization, Geneva: WHO.
  - http://www.who.int/mental\_health/evidence/MH\_Promotion\_Book.pdf
- Slide 9: World Health Organization (2008), The bare facts, <a href="http://www.who.int/mental\_health/en">http://www.who.int/mental\_health/en</a>
- Slide 10: (see slide 9)



- Slide 11: WHO Study "Global Burden of Disease", Murray & Lopez 2001,
  - http://www.eaad.net/enu/about-eaad.php
- Slide 12: Atlas Child and Adolescent Mental Health Resources, WHO 2005
  - http://www.who.int/mental\_health/resources/Child\_ado\_a tlas.pdf
- Slide 13: World Health Organization (2003) Investing in Mental Health Geneva: WHO
  - http://www.who.int/mental\_health/en/investing\_in\_mnh\_final.pdf



- Slide 14: World Health Organization (2002) World report on violence and health, Geneva: WHO <a href="http://www.who.int/violence\_injury\_prevention/violence/world\_report/en/">http://www.who.int/violence\_injury\_prevention/violence/world\_report/en/</a>
- Slide 15: (see slide 13)
- Slide 16: <a href="http://www.kaloramainformation.com/Psychotherapeutic-Drugs-1340128/">http://www.kaloramainformation.com/Psychotherapeutic-Drugs-1340128/</a>
- Slide 18: (see slide 13)



- Slide 19: International Labour Organization, 2000
   <a href="http://www.ilo.org/global/About\_the\_ILO/Media\_and\_pub\_lic\_information/Press\_releases/lang--en/WCMS\_007910/index.htm">http://www.ilo.org/global/About\_the\_ILO/Media\_and\_pub\_lic\_information/Press\_releases/lang--en/WCMS\_007910/index.htm</a>
- Slide 20: Lim, K.L., Jacobs, P., Ohinmaa, A., Shopflocher, D. & Dewa, C.S. (2008) A new populationbased measure of the economic burden of mental illness in Canasa, Chronic Diseases, 28, 92-98.

http://www.phac-aspc.gc.ca/publicat/cdic-mcc/28-3/pdf/cdic28-3-2eng.pdf



- Slide 47: Joubert, N. & Raeburn, J. (1998) Mental Health Promotion: People, Power and Passion, International Journal of Mental Health Promotion, Inaugural Issue, 15-22.
- Slide 50: Moore-Kubo, 2004, Final Evaluation Report of the Visitacion Valley Community Resiliency Project (VVCRP)

www.pottruckfoundation.org/Downloads/VVCRPReport.doc

Mills, R. (1997) Psychology of Mind-Health Realization: Summary of clinical prevention and community empowerment applications documented outcomes.

http://www.healthrealization.com/

Pransky, J. (1998) Modello: A story of hope for the inner city and beyond. Cabot, VT: NEHRI Publications.



- Slide 60:Raeburn, J. & Rootman, I. (1998) People-Centred Health Promotion, Chichester, Wiley.
   Raeburn 2005, see slide 6
- Slide 61: Axe Project
   <a href="http://www.comminit.com/en/node/115330">http://www.comminit.com/en/node/115330</a>
   <a href="http://www.projetoaxe.org.br/">http://www.projetoaxe.org.br/</a>
- Slide 62: M. Zanchetta, et al. (2008) Effectiveness of community health agents' actions in situations of social vulnerability, Oxford University Press: Health Education Research
- Slide 63: Girassol Project
   https://www.petrobras.com.br/ResponsabilidadeSocial/p ortugues/PetrobrasFomeZero/ProjetoGirasol.asp



- Slide 64: Meeting of the Minds
   http://www.mindnet.org.nz/article.php?issueno=12&articleno=120
- Slide 65: Raeburn House <a href="http://www.raeburnhouse.org.nz/page/raeburn\_5.php">http://www.raeburnhouse.org.nz/page/raeburn\_5.php</a>
- Slide 66: Life is Do-able <u>http://www.trustwaikato.co.nz/research-project.page?p=15</u>
- Slide 67: F. Handcock, J. Chilcott and Ka Mau Te Wero (2005), Glen Innes Ka Mau Te Wero Project, Glen Innes Visioning Project, Auckland, New Zealand: Ka Mau Te Wero.



- Slide 68: Canadian Mental Health Association-CMHA, Senior's Medicine Wheel
  - http://www.cmha.ca/mh\_toolkit/part\_one/seniors.htm
- Slide 69: Reaching In, Reaching Out <u>http://www.reachinginreachingout.com/index.htm</u>
- Slide 70: Cap Santé Outaouais Peaceful Projet
   http://www.capsante-outaouais.org/english/peaceful.html



- Slide 71: Canadian Mental Health Association-CMHA, Helping Skills
  - http://www.cmha.ca/mh\_toolkit/part\_one/helpskills.htm
- Slide 72: Resiliency Canada http://www.resiliencycanada.ca/
- Slide 73: Home-Start International http://www.homestartinternational.org/
- Slide 74: JOBS Program
   http://www.modelprograms.samhsa.gov/pdfs/model/jobs.pdf



- Slide 82-83: http://www.who.int/mediacentre/factsheets/fs220/en/index.html
- Slide 84-85: Jané-Llopis, E. (2006) From evidence to practice: mental health promotion effectiveness, Australian e-Journal for the Advancement of Mental Health, 5 (1)

www.auseinet.com/journal/vol5iss1/janellopiseditorial.pdf



Slide 86: Evidence-based mental health promotion resource

http://www.health.vic.gov.au/healthpromotion/downloads/ mental\_health\_resource.pdf

World Health Organization (2004) Mental Health Promotion: Case Studies from Countries. Geneva: World Health Organization.

http://www.who.int/mental\_health/evidence/en/case\_studies\_report.pdf



International Union for Health Promotion and Education (2005) The evidence of mental health promotion effectiveness: strategies for action. Promotion & Education, Supplement 2.

www.gencat.net/salut/imhpa/Du32/html/en/dir1663/Dd12 975/iuhpe\_special\_edition\_no2.pdf

 Slide 91: Canadian Institute for Health Information (2009), Improving the Health of Canadians: Exploring Positive Mental Health, Ottawa, Ont.: CIHI.

www.cihi.ca

 Slide 92: http://www.viastrengths.org/Home/tabid/36/Default.aspx



- Slide 92: C. Peterson and M. Seligman, Character Strengths and Virtues: A Handbook and Classification (New York, New York: American Psychological Association and Oxford University Press, 2004). <a href="http://www.viastrengths.org/Home/tabid/36/Default.aspx">http://www.viastrengths.org/Home/tabid/36/Default.aspx</a>
- Slide 95: See Participatory methods to evaluation by the World Bank
  - http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTPOVERTY/EXTISPMA/0,,contentMDK:20190347~menuPK:412148~pagePK:148956~piPK:216618~theSitePK:384329,00.html

