

Knowledge Translation in Public Health Medicine Webinar Series

Discussing Public Health Roles in Population Mental Health and Wellness Promotion

Teleconference:
1-866-827-6872
Code: 1952702#

March 22, 2019
from 2 p.m. – 3 p.m. ET.

We will start at 2 p.m.



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To ask questions during the presentation

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Presenters:

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Scientific Advisor
NCCHPP

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Health and Addictions, Public
Health Sudbury & Districts

Penny Sutcliffe, Medical Officer of
Health/CEO, Public Health
Sudbury & Districts



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Recording Disclaimer

- This session is being recorded for future educational use
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Scientific Planning Committee/Organizing Planning Committee Disclosure

- None of the members of the planning committees have received financial support or in-kind support from a commercial sponsor.
- None of the members of the planning committees have potential conflicts of interests to declare.



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Mitigation of Potential Bias

- These slides have been reviewed by the Chair of the Scientific Planning Committee.



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Webinar Series Audience

- This webinar series is intended for physicians and residents who:
 - have primary specialty training in public health
 - have completed a professional graduate education in public health related area
 - perform select services within the context of the public health system
 - are involved in public health administration, policy, or advocacy
 - want to expand their knowledge or skills in leadership and management with a public health focus



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Background

- Minimum **Competencies for MOHs** in Canada
- PHAC funded project entitled **Developing Capacity for MOHs in Canada**
- PHPC to **promote** this competency set and support its **implementation**
- Opportunity to offer **CPD for MOHs** and other physicians working in public health



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A Set of Minimum Competencies for Medical Officers of Health in Canada

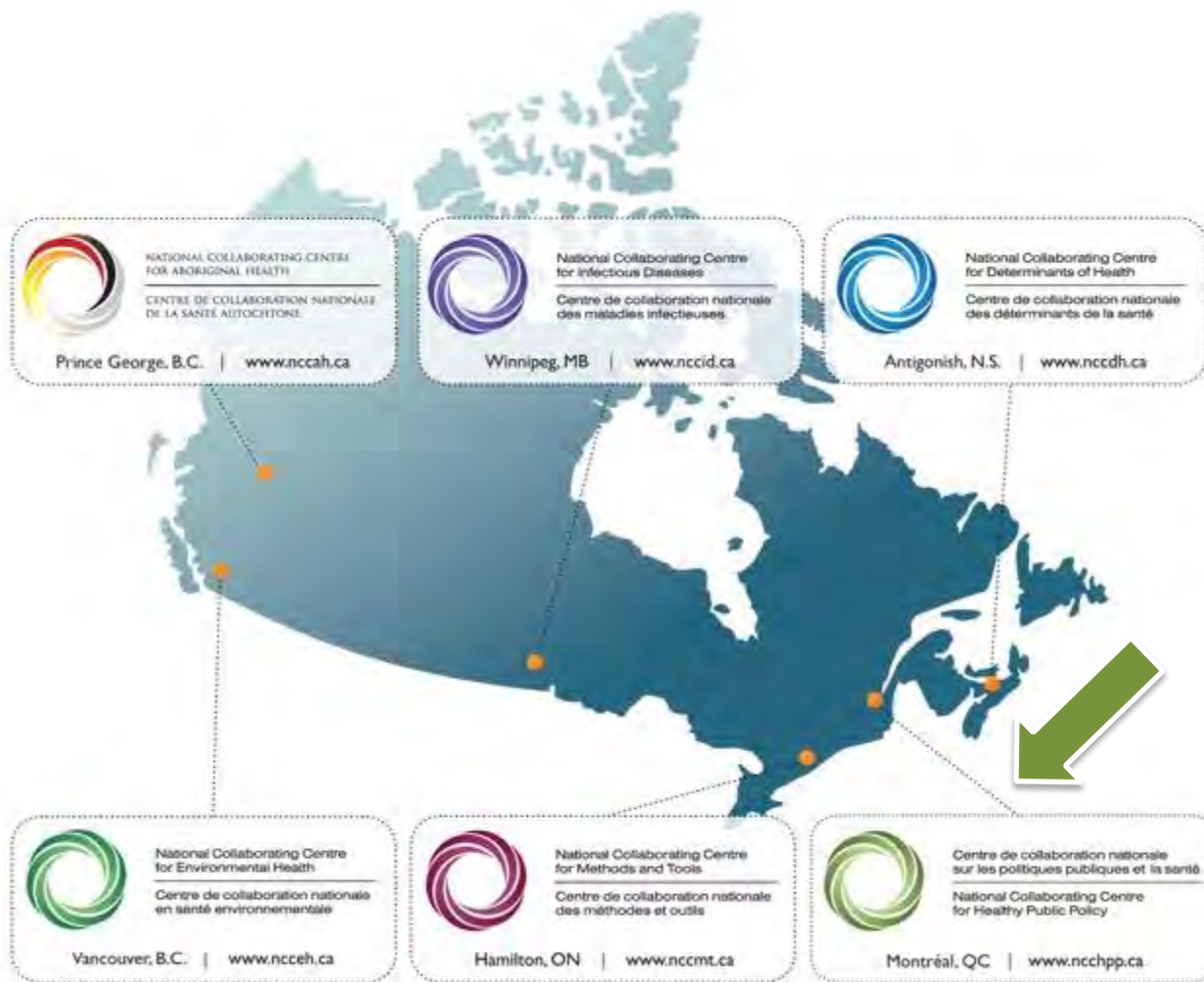
Final Report - March 2009

MOH Competencies Working Group



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Webinar Learning Objectives

Upon completion of this webinar, participants will be able to:

1. Recognize the context and processes that led to the clarification of public health roles for population mental health and mental wellness promotion.
2. Identify the various roles public health may play in promoting population mental health and mental wellness.
3. Understand the process of integration of a population mental health perspective in a public health practice setting.



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What you answered:

Province or country of origin	%
Ontario	55 %
British Columbia	12 %
New Brunswick	10 %
Alberta	8 %
Manitoba	5 %
Saskatchewan	3 %
Nova Scotia	3 %
Québec	1 %
Outside of Canada	1 %
Prince Edward Island	1 %

Level of knowledge	%
Intermediate	61 %
Low	24 %
Advanced	10 %
No answer	5 %



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What you answered:

Type of job	%	
Educator/Teacher	1 %	Access Coordinator
Physician	1 %	Acting Assistant Manager
Epidemiologist	2 %	Advisor, Healthy Settings
Public Health Inspector/Environmental Health Officer	2 %	AMOH
Knowledge Broker/Knowledge Translation Specialist	2 %	Bioethics, on medical leave
Medical Officer of Health	2 %	Clinical specialist
Community/Frontline Worker/Service Provider	4 %	Community Health Promoter
Researcher	4 %	Community Health Specialist
Student	7 %	Consultant/Specialist in Public Health
Policy Analyst/Advisor	8 %	Departmental Project Advisor
Program Manager/Coordinator	13 %	Dietitian
Nurse	19 %	Director
Other	36 %	Educator/Researcher
		Employment Counsellor
Health Educator		Public Health Dietitian
Health Promoter		Public Health Nurse
Health Promotion		Public Health Promoter
Health Promotion Facilitator		Regional Lead
Health Promotion Planner		Research Analyst
Health Promotion Specialist		Research and Policy Analyst
Healthy Living Facilitator		Rural Mental Health Project Project Assistant
High Risk Specialist		School Health Promoter
Manager		Self-employed consultant
Medical specialist in mental health		Senior Leader - Population Health
Mental Health Promotion		Social Worker
Mental Health Promotion Facilitator		Wellness Consultant
Mental Health Promotion Specialist		Youth Development Peace Corps Volunteer



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What you answered:

- General MHP, link with whole society approach, life course, SDH
- MHP with various communities and contexts (Child and youth, perinatal, schools,**, Workplace, Communities + built environment, older people)
- **Developing a MHP strategy (Ontario Guideline)
- Frontline MHP interventions
- Life skills-Resilience
- Stigma
- Suicide prevention and substance use
- Vulnerable populations and link with MH (homeless, precariously housed, immigrant, refugee, newcomers, military, LGBTQ, marginalised, older populations)
- Indigenous mental wellness



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1) Context and Processes

Why have we come to clarify roles for PH and how have we approached it?



Shift in Paradigm

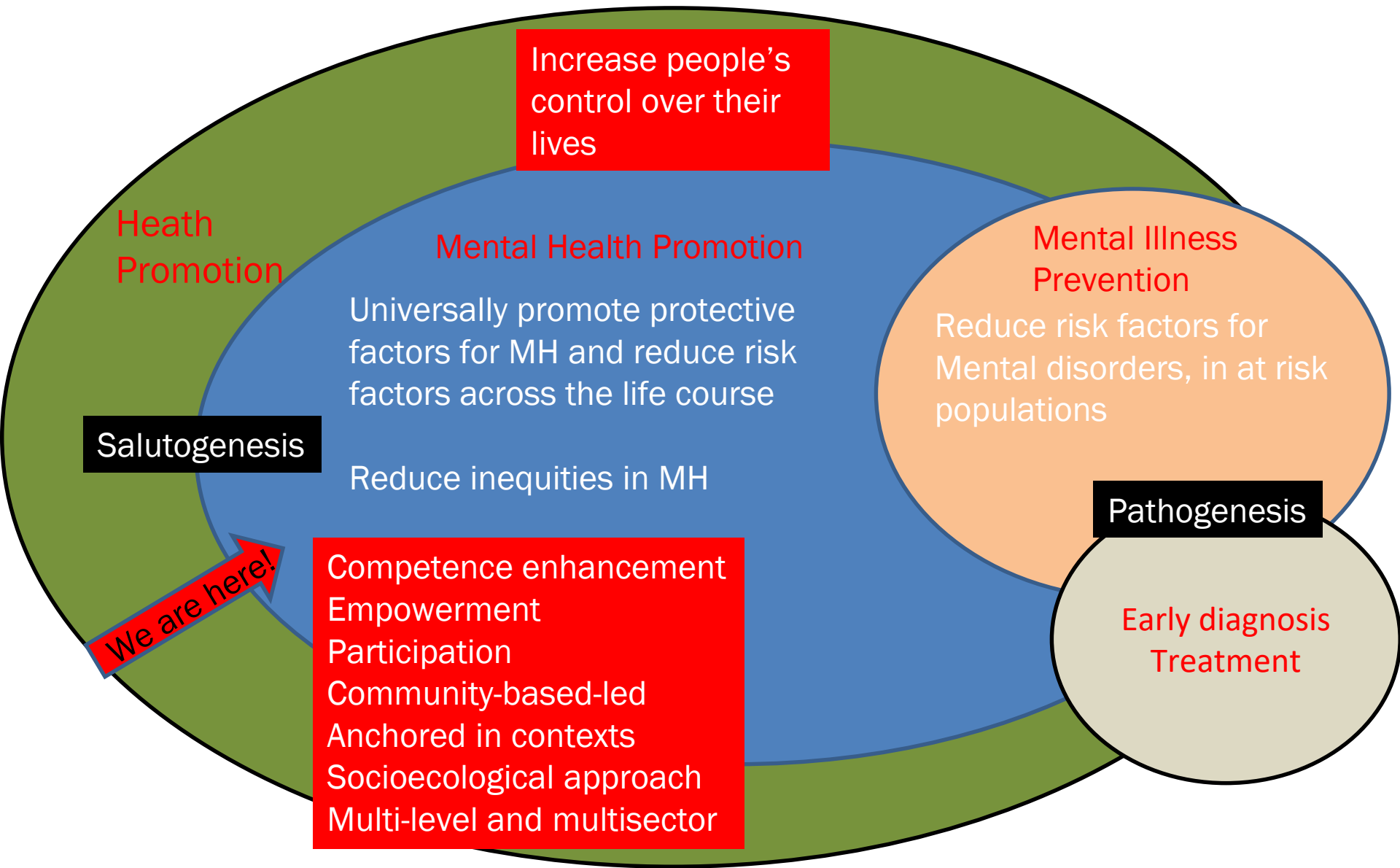


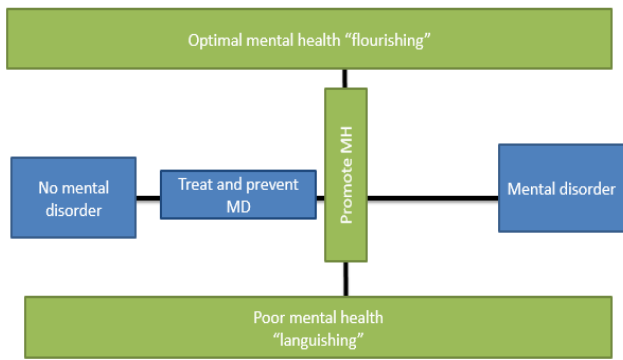
“Translation of New Public Health thinking into the mental health arena”
John Ashton Foreward in Brown, Alyson, Learmonth and Mackereth, 2015, p.9



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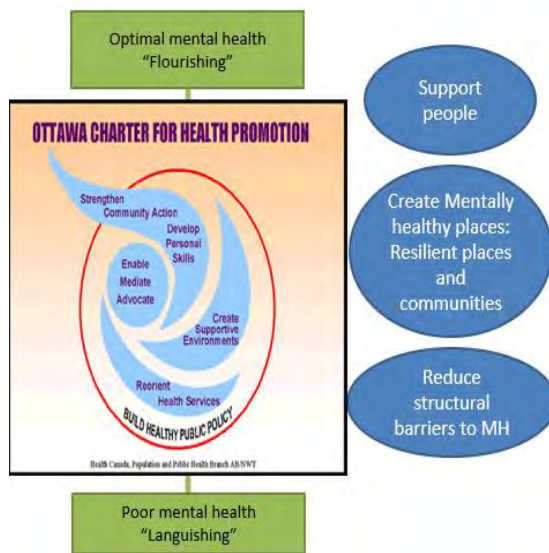


“Mental Health is more than the absence of Illness”

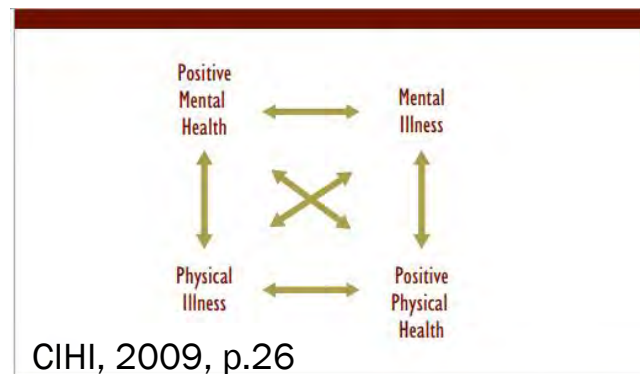


<https://infobase.phac-aspc.gc.ca/datalab/doc/pmh-smp-framework-eng.pdf>

Socio ecological, participatory and capacity building approach



Social determinants of mental health and equity across the life course.



CIHI, 2009, p.26

Source
 Reproduced from B. Raphael et al. "Links Between Mental and Physical Health and Illness," in *Promoting Mental Health: Concepts, Emerging Evidence, Practice*, eds. H. Herrman, S. Saxena and R. Moodie (Geneva, Switzerland: World Health Organization, 2005), p. 132-147.

There is « No Health without Mental Health »
 Holistic consideration of Health

Lancet Global Mental Health Commission, 2018

WHO Shanghai Declaration, 2016

Helsinki Statement, 2013



International Policy/Strategy Documents

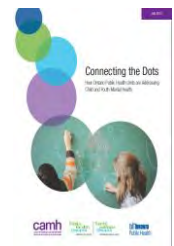
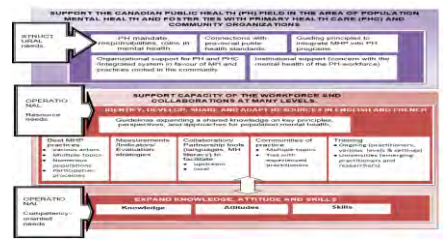


Mental health for Canadians: Striking a balance
Health and Welfare Canada, 1988

Canadian Policy/Strategy Documents

Public Health Actions in PMHP

A lot of work in PH...not necessarily with a MHP label...Various needs, including clarification of roles



1) Context and **Processes**

Why have we come to clarify roles for
PH **and how have we approached it?**





NCCs convene national gathering, explore public health roles for mental health and wellness

Categories:

Working in partnership to focus on positive mental health and wellness

- Partnership with four organisations (PHAC, MHCC, CAMH, CMHA)
- Two-eyed seeing perspective : **Roles of PH for Population Mental Health and Mental Wellness Promotion (PMHWP)**

“Indigenous knowledge about health and healing has resonance beyond Indigenous communities: “It’s just a good way to live”.

Shirley Tagalik, Educational Consultant, Inukpaujaq Consulting

- Build on the expertise of 70 participants, PH, MH, Indigenous organizations, FN, Inuit and Metis, All experts in PMHWP



<http://nccph.ca/projects/mentalhealth/#forum>



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2- Discussion on the Roles of PH in PMHWP



What we did:

Qualitative content analysis



Relevant competency-type frameworks.

Health promotion, public health, Indigenous public health, mental health promotion and public mental health



....Mix slowly and let simmer.....



Upcoming, 2019



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Roles of Public Health for PMHWP... Known... but...

Integrate in public health
programming and enable change

Assess, Plan, Implement, Evaluate

Partner
bridge and
enable change

Listen, Communicate
Connect, co-produce
knowledge and
enable change

Co- Lead Advocate
and enable change



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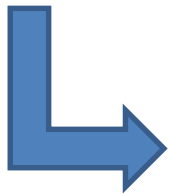
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Co- Lead, Advocate, enable change

“Intentional positive disrupters” for shifts in paradigm from mental illness to mental health and wellness

“Institutional and Moral courage” for shifts in structural paradigms



- Shared language and vision
- Upstream action and reduction of inequities
- Ethical space
- Act as ally
- Strategic direction : **Hope, belonging, meaning and purpose**



Key Determinants of Mental Health and Wellness

Health Canada and Assembly of First Nations (2015)	Hope, belonging, meaning, and purpose
Keleher et Armstrong (2005)	Social inclusion, freedom from discrimination and violence, access to economic resources.
Friedli (2009, 2013)	Status or social position (respect, dignity), psychosocial skills (self-esteem, positive identity), relatedness or connectedness, and control (influence over the things that affect our lives).
Coggins, T., Cooke, A., Friedli et al. (2009)	Resilience and community assets, participation, control.
Cohen, Davis, Estes, Mikkelsen & Savannah (2017)	Belonging and connectedness, control of destiny, dignity, hope and aspiration, safety and trust are identified.



Co- Lead, Advocate, Enable change

“Intentional positive disrupters” for shifts in paradigm from mental illness to mental health and wellness

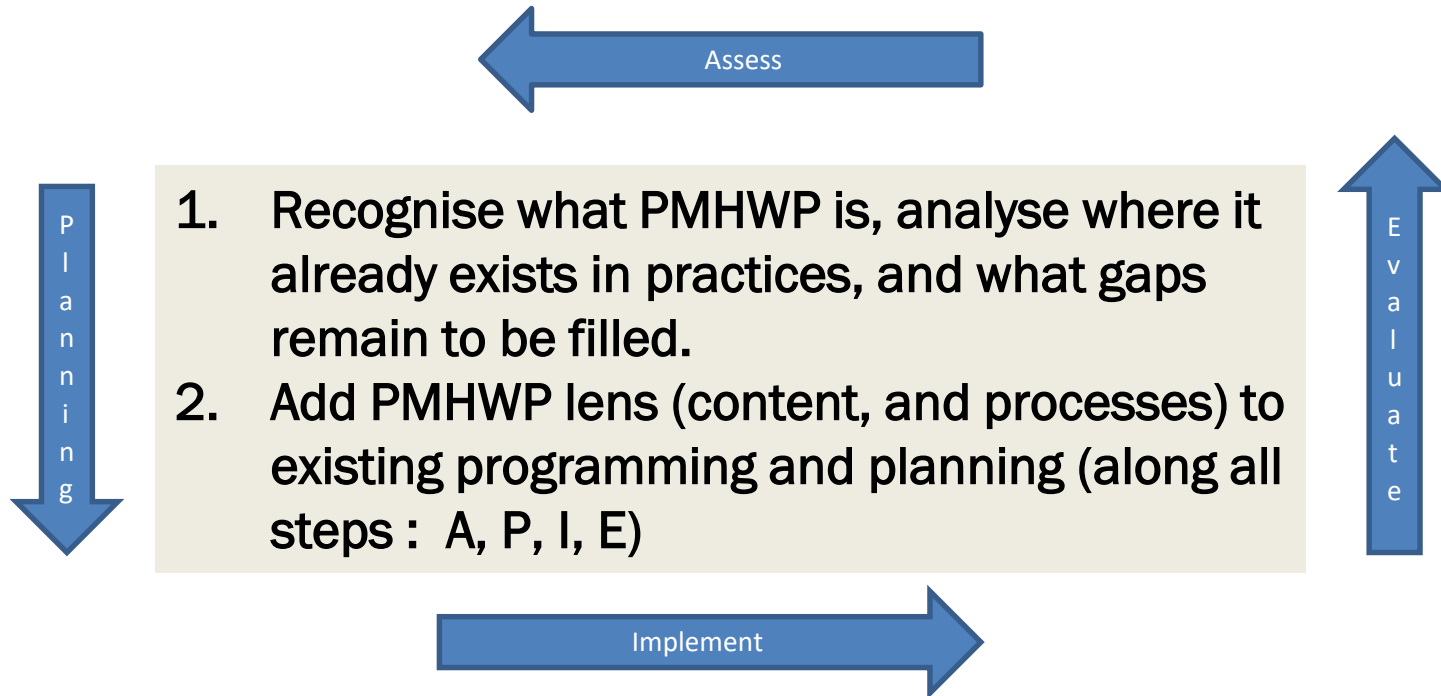
“Institutional and Moral courage” for shifts in structural paradigms

Forging supportive:

- Structures
- Processes
- Workforce



Integrate and Embed in Public Health Programming and Enable Change



HOPE, BELONGING, MEANING, PURPOSE

Life course

Social determinants of health

Natural environment, Land and climate change, History and Legacy, Ongoing Colonialism, Structural Racism, political, social, economic and cultural context

Social Position (education, employment, income, Indigenous identity,...)

Settings of daily life

****Social interactions** (type of attachment, quality of relations (peers, friends, colleagues, etc.), community cohesion, social capital ...)

Individual factors (control, resilience, spirituality, self-efficacy ... life style)

Population Health Outcomes

Physical health

Mental health

Indicators of:

Mental health
Mental Wellness
Mental disorders
Community wellbeing

Distributed by:

Indigenous Identity
Socioeconomic status
Gender
Urban/Rural
Ethnicity

Act on structural barriers

Shared Language & vision

Mental Health and Wellness in all Policies, society, ROI, MHIA

Reduce inequalities MHEIA/Indigenous EIA

Reconciliation

Climate change policies

Culture-based Community Development, capacity building, Empowerment, participation and community connections opportunities

Support People across the life course

Develop culture-based skills (Parenting skills, SEL, Resilience, life skills, stress management skills, MHL (including reducing stigma), ...)

Life styles (exercise, nutrition, sleep)

Create mentally healthy, mental health and wellness promoting, culturally safe and trauma informed places

Collective Impact Break siloes Norms and values (reducing stigma)

Mantoura, in press

Sources: Mantoura 2014, Mantoura et al., 2017; Barry, 2007; Pan American Health Organization, 2018

Learning practices:
implementation processes monitored and shared in iterative and continuous ways



Indigenous leaders, Elders,
Governance structures , and
communities

Civil society, communities
and informal sector

- Establish partnerships, bridge, break siloes, act as ally
- Listen, learn, build on partner expertise
- Communicate a positive vision of mental health, reduce stigma, exchange information on factors and practices associated with MHP and MH in culturally adequate ways
- Link and co produce knowledge

Public Health Actors
CofP

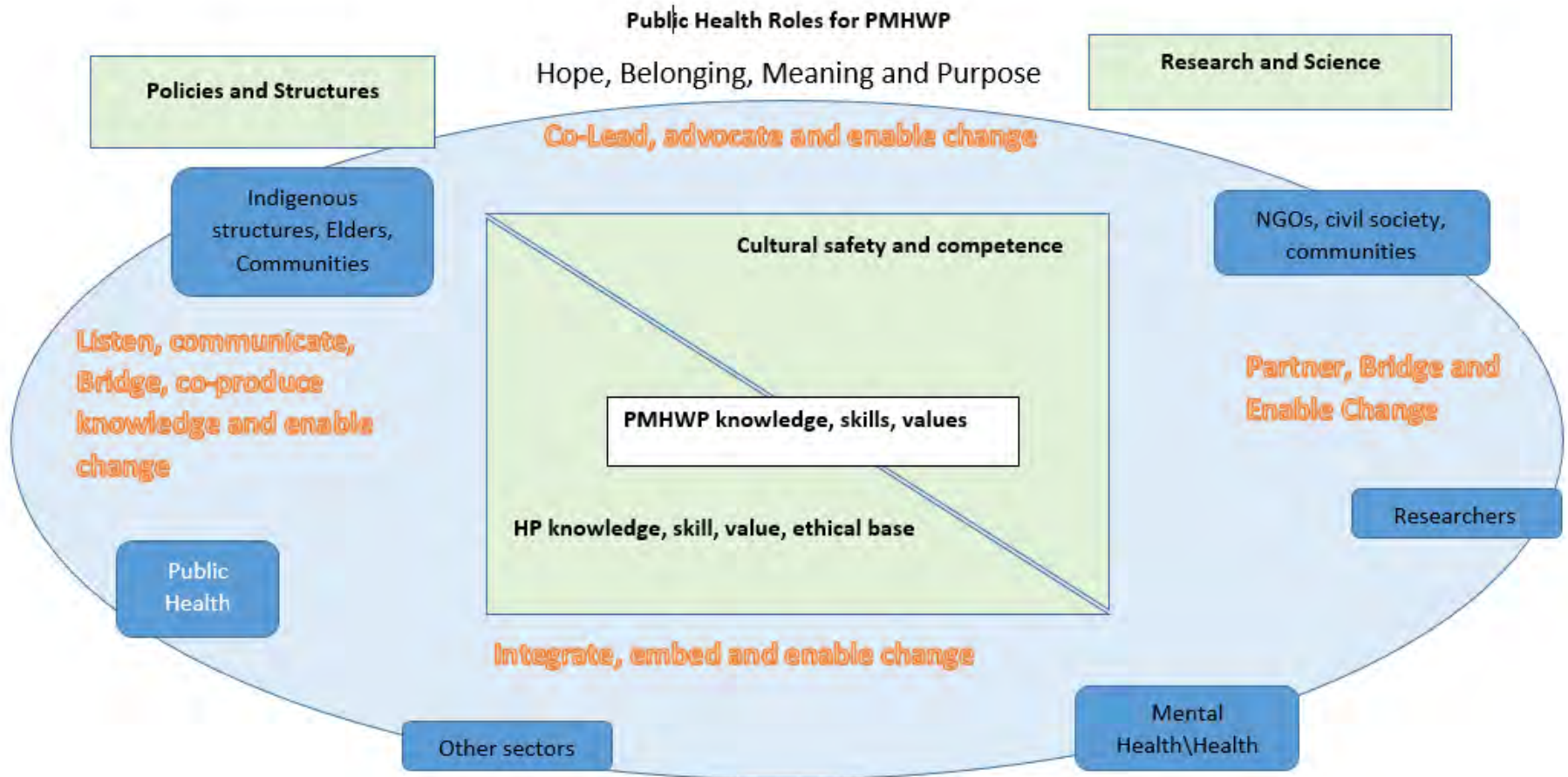
Researchers
Coproduction

Mental Health Services Sector

Other Sector



Take Away Messages



Mantoura, in press



Thank you!
One (or two) questions?

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Useful Resources:

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Useful Resources :

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http://www.pimatisiwin.com/online/?page_id=893
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3- Integration of a population mental health perspective in a public health practice setting

Presenters:

Shana Calixte, Manager Mental Health, Public Health Sudbury & Districts

Penny Sutcliffe, MOH/CEO, Public Health Sudbury & Districts



Public *Mental* Health

Shana Calixte, Manager, Mental Health and Addictions

Penny Sutcliffe, Medical Officer of Health/CEO

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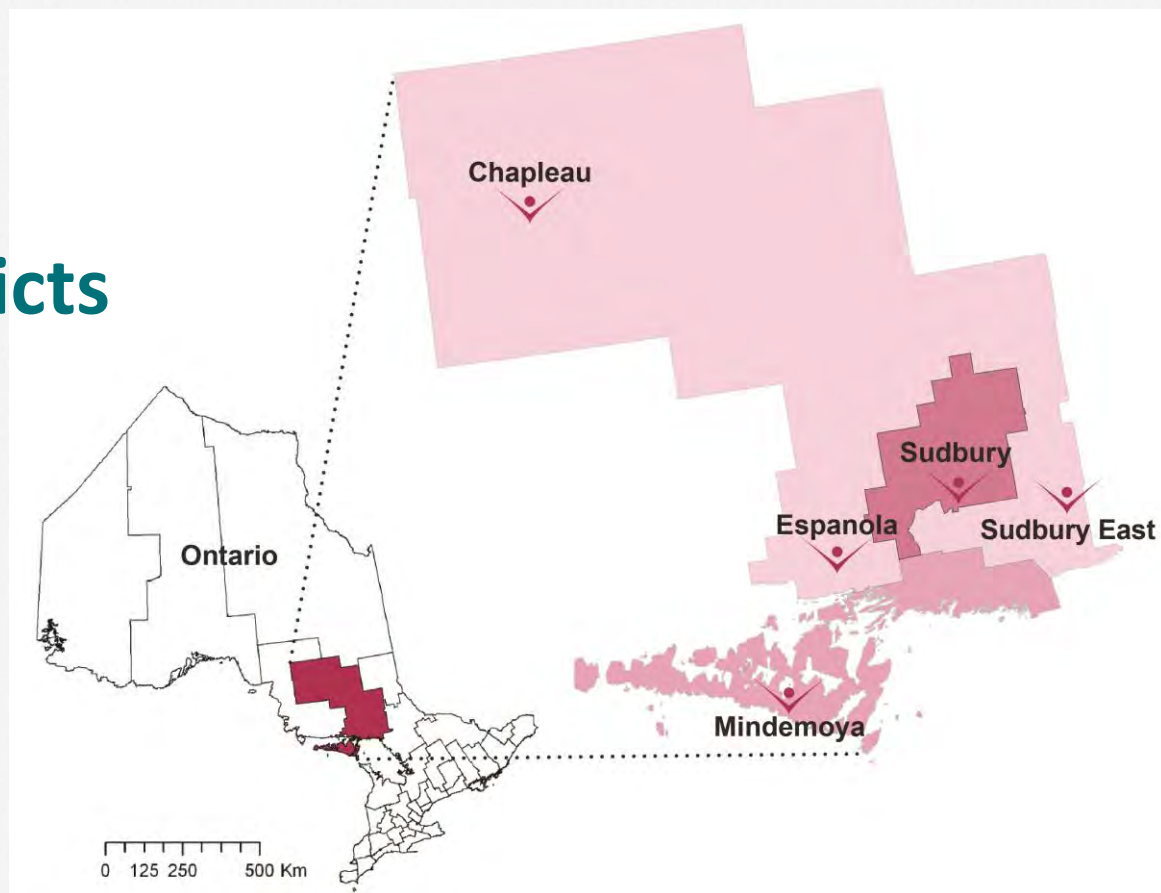
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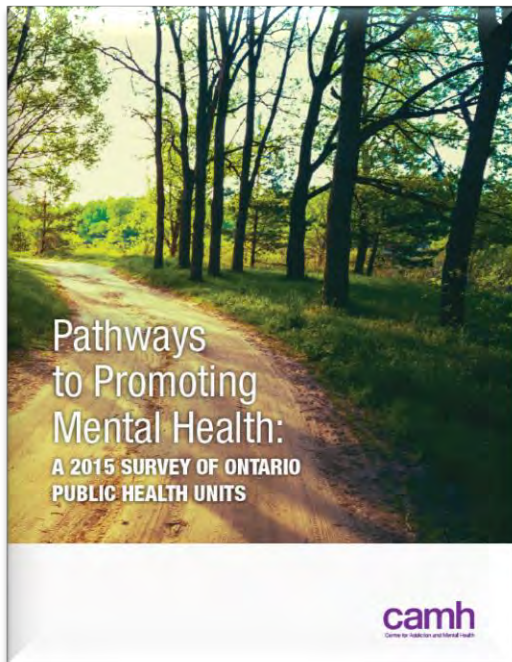
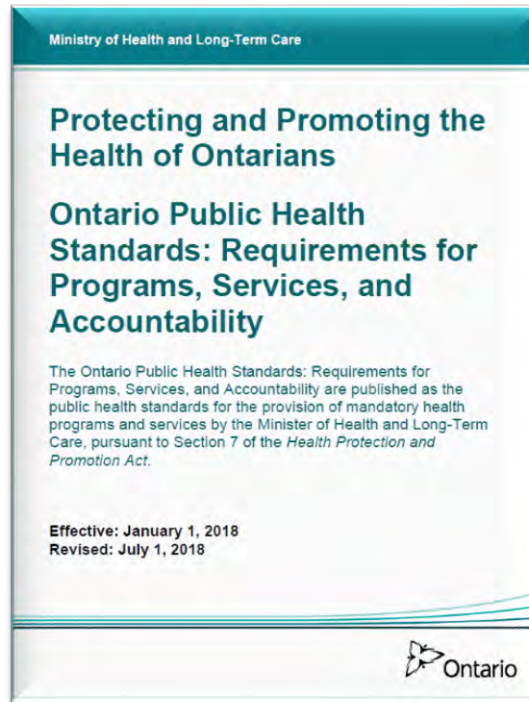
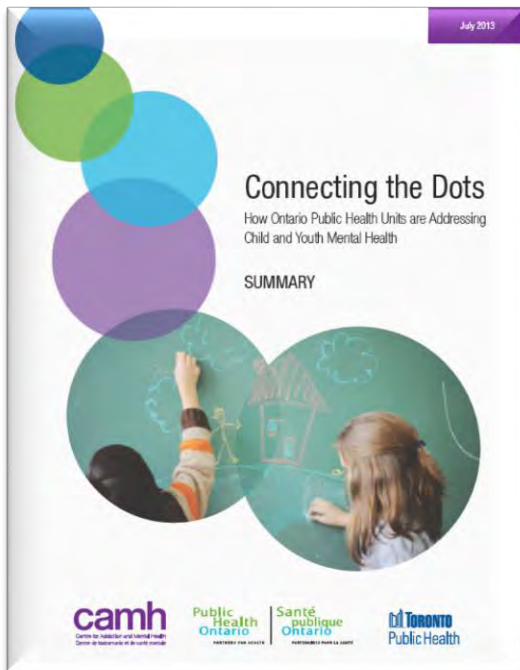
Public Health
Santé publique
SUDBURY & DISTRICTS

Public Health Sudbury & Districts

- Population 196,448
- 19 municipalities
- 46,550 km²
- Autonomous board of health
- 273 employees



Source: 2016 Census, Statistics Canada



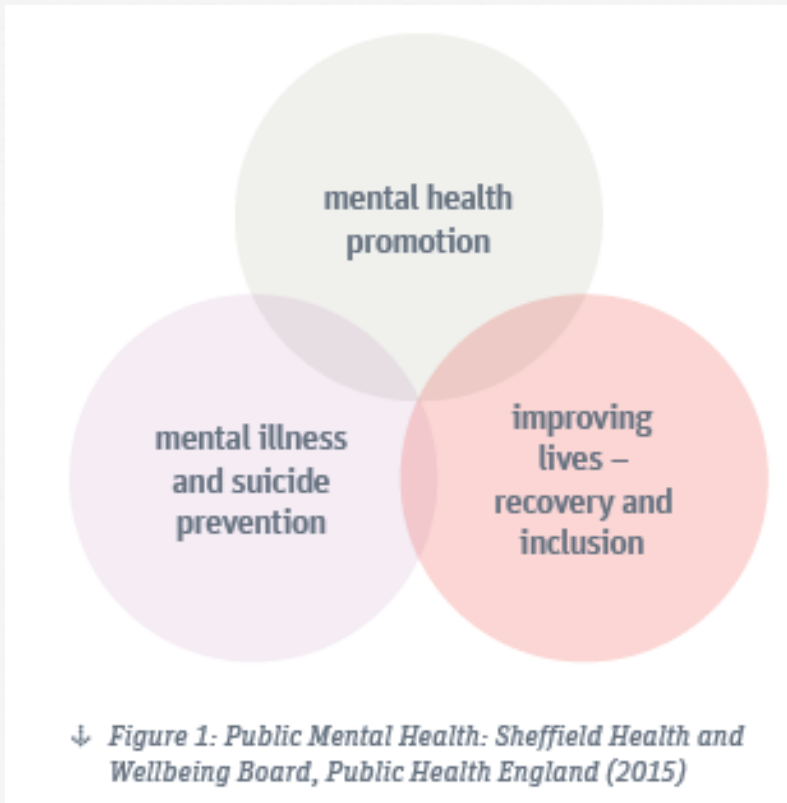
No Health Without Mental Health

Public Health Sudbury & Districts commitment to concepts and investments to improve mental health opportunities for all.

- Action-oriented roadmap of public health interventions
- Grounded in the [*Mental Health Promotion Guideline*](#) of the [*Ontario Public Health Standards*](#)

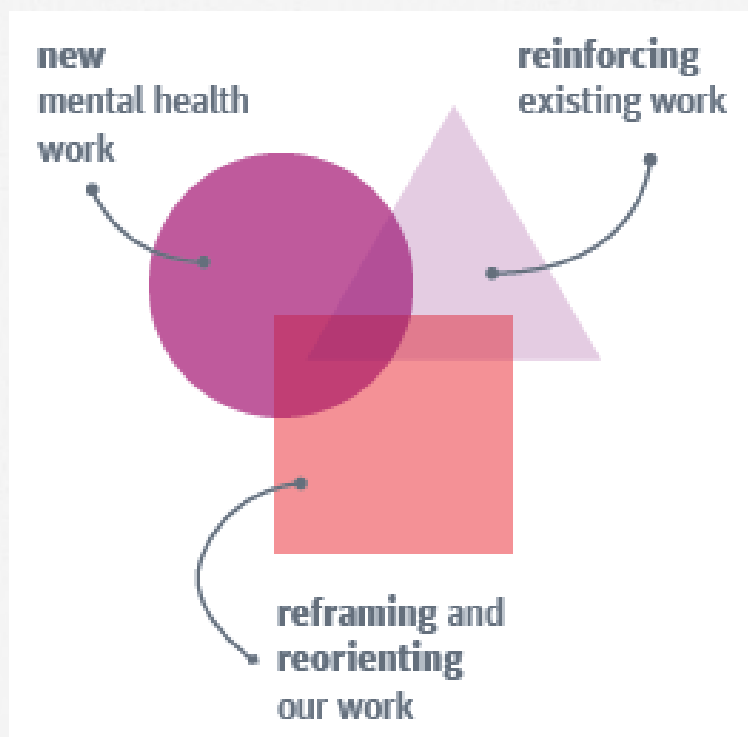


Why Public *Mental* Health?



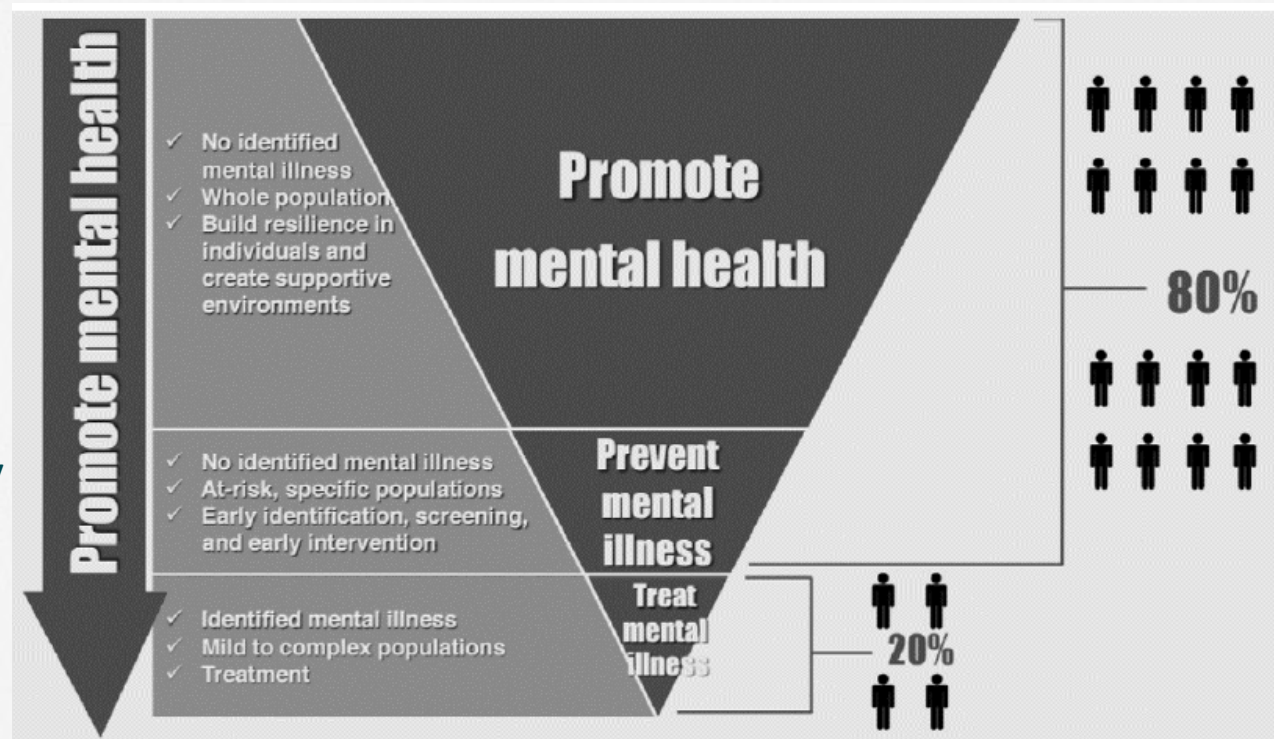
1. Public health includes *mental* health (explicit)
2. Public *mental* health is broad (promotion, prevention, and early intervention)
3. Cuts across all public health staff (nursing, inspection, nutrition, promotion, population health assessment, etc.)

Opportunities for Public Mental Health Work



What are our roles?

1. Promote mental health
2. Prevent mental illness
3. Early identification and referral (rarely direct delivery of early intervention)



What is the Framework based on?

Apply the Foundational Standards

1. Population health assessment
2. Health equity
3. Effective public health practice

Required Approaches for Program Standards

1. Embed*
2. Across the life course
3. Whole-population & community-based
4. Multi-sectoral collaboration

*health promotion, social determinants, risk/protective factors, reduce stigma/increase literacy, trauma awareness, strengths focus, priority populations

Our Commitments

Commitments



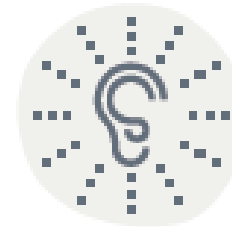
**Mental Health
for All**



**Social
Determinants of
Mental Health**



**Anti-stigma and
Discrimination**

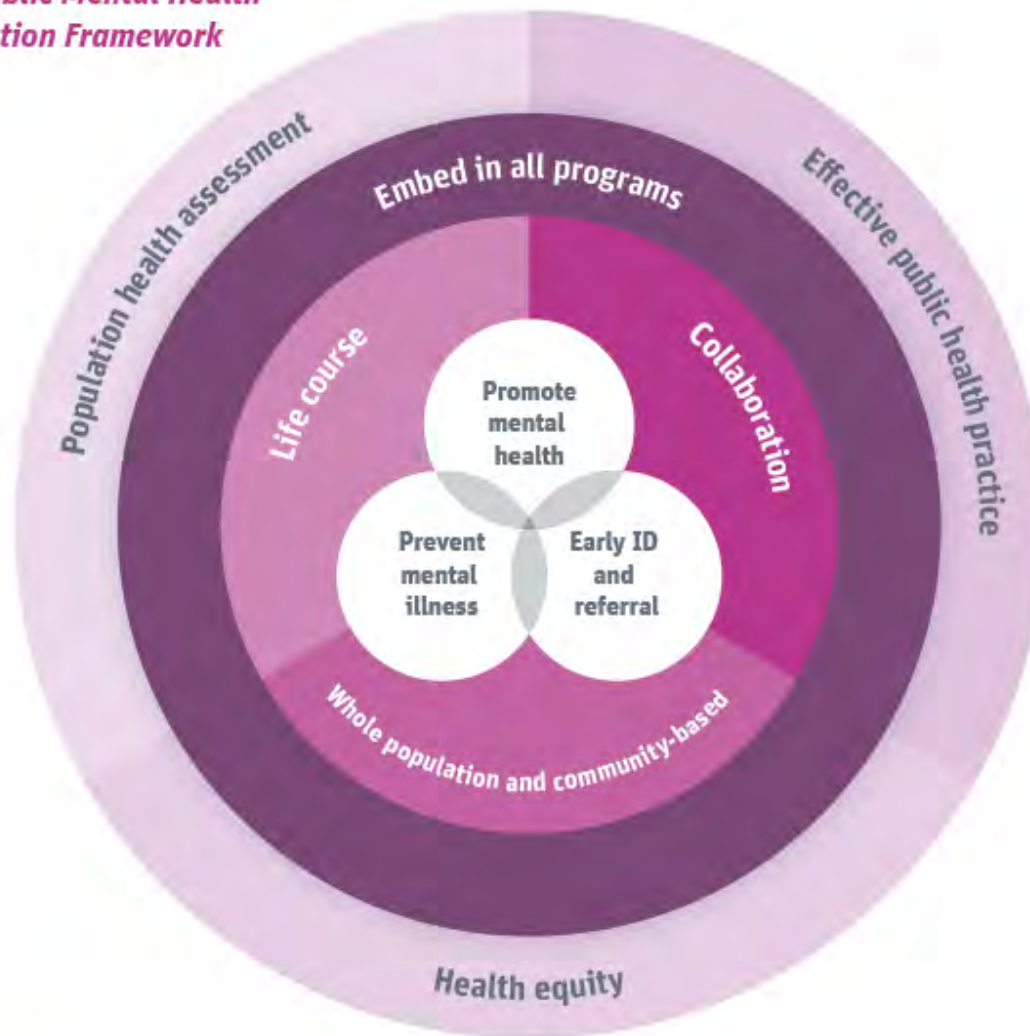


**Voices of People
with Lived
Experience**



**Hope, Belonging,
and Purpose**

**Public Mental Health
Action Framework**



Commitments



**Mental Health
for All**



**Social
Determinants of
Mental Health**



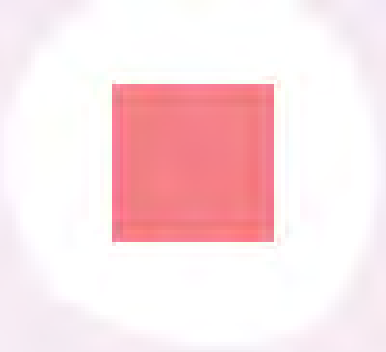
**Anti-stigma and
Discrimination**



**Voices of People
with Lived
Experience**



**Hope, Belonging,
and Purpose**



So what does this
mean?

Summary of Interventions

Opportunities for public mental health work:

- ▲ Reinforcing existing work
- Reframing and reorienting our work
- New mental health work



Foundational Standards

Effective public health practice

1 2 3 4 5

- ▶ Leadership articulation and commitment (including governance) ■●
- ▶ Mental health literacy of public health practitioners ●
- ▶ Workforce competency development ●
- ▶ Support our own and personal mental well-being ▲■
- ▶ Planning – Mental health in all programs approach ■●

Population health assessment

6 7 8

- ▶ Community well-being indicators ●
- ▶ Positive mental health indicators ●
- ▶ Purposeful reporting on the social determinants of mental health ●

Health equity

9 10 11

- ▶ Persons with lived experience as priority population ■
- ▶ Indigenous Peoples' wellness ●
- ▶ Racial equity and anti-discrimination are foundational approaches in our work ■

Program Standards

Embed in programs

12 13

- ▶ Embed mental health promotion strategies and approaches across programs and services ▲■●
- ▶ Identify and implement public mental health initiatives that will address public health relevant levers for the social determinants of mental health ■

Life course

14 15

- ▶ Prioritize, disseminate, and role-model best practice or best buy investments in early years, families, school interventions in collaboration with relevant partners ▲■
- ▶ Determine and grow competencies required for early identification and referral, as relevant ●

Whole-population & community-based

16 17

- ▶ Whole-system strategies ●
- ▶ Consider interventions for school community and carer community (families) ▲■

Collaboration

18

- ▶ Commit to engaging with people with lived experience ■●

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Foundational Standards

‣ Effective public health practice

Mental health literacy of public health practitioners

We will support various mechanisms to increase public health workforce use of a lens of practice that focuses on the four components of mental health literacy, including understanding how to obtain and maintain positive mental health, understanding mental health problems and forms of treatment, decreasing stigma related to mental health problems, and enhancing help-seeking efficacy.

Outcomes

Increased awareness by public health practitioners about mental health literacy.

Indicators

Engagement in mental health literacy knowledge exchange and other activities with public health practitioners.

Opportunities

- New mental health work

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Foundational Standards

» Population health assessment

Purposeful reporting on the social determinants of mental health

We will utilize surveillance data and analysis of mental health and the social determinants, which will be shared publicly and communicated with relevant audiences.

Outcomes

Surfacing the links between social determinants and mental health in our reporting will contribute to public health program planning, delivery, and management that levels up opportunities for mental health.

Indicators

Reports on mental health and the social determinants of mental health are released publicly and shared with relevant audiences.

Opportunities

- New mental health work

Identify and implement public mental health initiatives that will address public health relevant levers for the social determinants of mental health

We will focus on raising awareness of the social determinants of mental health with various stakeholders, including policy makers.

Outcomes

The social determinants of mental health, including social inclusion and access to economic resources will be considered by policy makers in policy decisions.

Indicators

Public health initiatives implemented to raise awareness of social determinants of mental health among community leaders and decision makers.

Community literacy of the social determinants of mental health will be increased, for instance, by supporting individuals to be securely housed.

Opportunities

■ Reframing and reorienting our work

Consider interventions for school community and carer community (families)

We will look at interventions that focus on whole school communities and carers to foster a more resilient and thriving community.

Outcomes

A more resilient and thriving school community, and more support for families and friends who provide care for those living with mental health challenges or problems.

Indicators

Broad-based interventions around mental health promotion, prevention, and early intervention or referrals have been implemented within the school community and also provided for carers.

Opportunities

- ▲ Reinforcing existing work
- Reframing and reorienting our work

Next Steps

Leadership

- Governance
- Central leadership
- Diffuse ownership – knowledge brokering
- Own the mandate - create public expectations and live up to them
- Workplan
- Resources



An illustration of a park scene. In the background, there are stylized trees with light blue foliage. A man with red hair and a beard, wearing a dark jacket and red pants, sits on a dark brown wooden bench reading a book. To the left, a man in a red hat and orange patterned shirt walks. In the foreground, a woman in a pink jacket and purple pants walks. To the right, a man in a white shirt and red pants rides a blue bicycle with a basket. In the bottom foreground, a man in a purple shirt and blue pants walks holding a coffee cup. The scene is set against a light orange and yellow background.

Public Mental Health

As we push our public health system forward, and truly embed public mental health throughout our scope of practice, we require explicit, ambitious and even radically different approaches to our work.

For a copy
of the
Public Mental Health
Action Framework
visit us @

<https://www.phsd.ca/health-topics-programs/mental-health>



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Thank you
One (or two) questions?

Discussion/Conclusion



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This was the last webinar of the series! Thank you for joining!

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