

How Might the Programs Funded by the Mental Health Services Act (MHSA) Prevent a Mental Health Crisis of the Kind that Occurred in Arizona?

With six people dead and 14 people wounded, including Representative Gabrielle Giffords who was seriously injured as a result of the January 8 shooting in Arizona, experts, officials, and acquaintances say Jared Loughner clearly had mental health issues that should have been addressed. Many people wish that it were possible to identify everyone who has a mental health issue and a propensity for violence and get them into treatment. Why does this sometimes not happen?

- People with mental health issues, and their friends, families, and associates, might not identify that there is a problem or minimize the behavior.
- Far more likely, we might not identify that the problem is a sign of mental illness. If we do think it is mental illness we are often scared, horrified, embarrassed, or feel powerless. We might not know what would help, worry that nothing would help, and not know how to get help or convince our friends or loved ones to get help.
- Mental disorders are neither necessary nor sufficient causes of violence. Most studies show that people with mental illness are either no more likely than the general public to engage in violence or only very slightly more likely, statistically, probably because of the strong co-occurrence with substance abuse.¹
- Individuals with mental illness are far more likely to be victims of violence than perpetrators of violence.
- Nonetheless, sometimes people with mental illness commit violence, as in the Arizona and Virginia Tech shootings, and people naturally are horrified and wonder if these terrifying tragedies could have been prevented. Identifying problems and helping people early, before they get to a point of crisis, can only help.

The MHSA helps with this problem in at least four ways:

1. Early identification of mental health problems and issues is essential.

- *Identify mental health issues as early as possible.* Half of all lifetime mental health disorders start by age 14 and three-fourths start by age 24. For this reason, MHSA requires that 51 percent of funds spent on Prevention and Early Intervention (PEI) programs be directed to children and youth to age 25, and their families. (MHSA also requires that PEI fund programs for people of

¹ Stuart, Heather, Violence and Mental Illness: An Overview, *World Psychiatry*, 2(2), 121-124, 2003

all ages, in recognition of the fact that prevention can have great benefits across the lifespan.)

- *MHSA funds programs that support and teach people to identify early indication of mental health problems.* This includes all of us, since we can identify our own mental health issues and those of family members. It also includes teachers, child care workers, doctors, nurses, bus drivers, clergy and other faith leaders, coaches, leaders of community organizations, foster parents, and law enforcement and justice personnel.²
- *Programs in accessible locations where mental health problems first show up.* Ninety-one percent of California counties have at least one PEI program in a school, 84 percent in a medical setting, 81 percent in community organizations, 69 percent in people's homes, 63 percent in the community (parks, theaters, laundromats, grocery stores), and 59 percent in places of worship. Many programs are designed to help people in these settings identify and respond to early signs of a mental illness.
- *For Example.* Several counties have funded PEI programs that teach childcare workers to identify children with behavior problems that might indicate early signs of a mental health disorder and to help them more effectively. The programs also include mental health consultants who assist the teachers and provide treatment for the children and their families. Intervening this early can not only change the trajectory of a developing mental illness by supporting parents and children and strengthening their relationships, it can also actually affect the brain development of these children, since the brain continues to develop after birth.
- *Another Example.* MHSA funds programs in high schools that screen for mental health problems, and help support students, parents, and families. Other programs identify and support elementary school children at high risk for mental health and substance-use problems, and their families.

2. Recognizing that mental health involves all of us and people with mental health issues deserve connection, respect, and help.

- *Impact of mental health and mental illness on all of us.* People with mental illness are much more likely to get treatment when it is more widely understood and accepted that:
 - Fifty percent of all people in their lifetimes will deal with a mental health or substance-use problem³

² The following web site provides very useful information about recognizing signs of a possible mental illness. <http://nmha.org/go/information/get-info/me-and-the-family/recognizing-warning-signs-and-how-to-cope>

³ Kessler, RC., et al., Prevalence, severity, and comorbidity of twelve-month DSM-IV disorders in the National Comorbidity Survey Replication (NCS-R), *Archives of General Psychiatry*, 62, 617-627, 2005.

- People with mental health issues have many strengths and make great contributions
- More American soldiers died from suicide than from combat from 2001 to 2009⁴
- *Fear, loathing, and discrimination.* Negative attitudes toward mental illness and discrimination against people with mental illness contribute to the difficulty in getting early, useful treatment.
- *Connecting.* Combating the isolation of people with mental illness, and their families, is a crucial part of reducing the prevalence of problems that led to the Arizona and Virginia Tech violence. Recognizing early signs won't help if people don't talk about mental health problems and seek help.
- *County MHSA Programs to Promote Inclusion and Connection.* Seventy-five percent of counties have MHSA PEI programs that help people accept and take action to support people with mental illness, including themselves.
- *PEI Statewide Program to combat stigma and discrimination.* PEI also funds a statewide program to promote acceptance, connection, and inclusion of people with a mental illness, which makes it more likely that they will seek and participate in treatment.

3. Knowing how to help and get help.

- *Missed opportunities.* News reports indicate Pima Community College effectively kicked Loughner off campus last September after a series of disruptions and told him that to come back to school he would need a "mental health clearance" from a professional.
- *Knowledge is power.* People cannot connect and help someone with possible mental health problems unless they know how. MHSA programs teach ways to respond to people with possible mental health issues and how to get help.
- *Example:* Several counties have programs to teach youth, families, teachers, law enforcement, and others to identify early signs of serious mental illness, respond compassionately and skillfully, and help connect the person and his/her family to treatment and resources that can support all of them.
- *A statewide Student Mental Health Initiative,* funded with MHSA PEI funds, will teach students, faculty, staff, and administrators to recognize and respond to students experiencing mental and emotional distress, provide hope, identify and minimize stress, teach coping strategies, increase support and acceptance, and reduce fear and discrimination associated with mental illness. Many of these services will be provided by peers, further encouraging students to accept help.

⁴ Hayden, T. 1,000 U.S. soldier suicides. The Huffington Post, 2010. Totals are based on U.S. Pentagon figures. Available at http://www.huffingtonpost.com/tom-hayden/1000-us-soldier-suicides_b_475917.html.

4. Treatment: available, accessible, affordable, effective, appropriate.

- Although friends, acquaintances, and teachers expressed concern, particularly over the past year, about Jared Loughner's behavior, it has been reported that he did not seek treatment.
- People are not motivated to identify mental health problems and reach out to get services for themselves or for people close to them unless they believe real, effective, accessible help is available.
- Recovery rates for mental illness, when treated effectively, equal or surpass recovery rates for other chronic illnesses.⁵
- All PEI programs include ways to connect people in need to treatment: the best way to do this is by not just giving a name and phone number, which the person might or might not call, but through a supportive person-to-person approach.⁶
- Research on MHSA-funded Full Service Partnerships (FSP), an intensive approach for people with serious mental illness, shows that the probability of being arrested, homeless, or using emergency rooms for mental health crises all decrease significantly compared to "usual care," while rates of employment and education significantly increase. It can be assumed that the advantages over "no care" are even more dramatic. Counties report that homelessness has decreased for FSP participants by 60-100 percent and for youth ages 14 to 26 by 85-100 percent.
- While it's still too early to assess outcomes for MHSA-funded PEI programs, general research in the field indicates that prevention can be very effective. According to a 2009 Institute of Medicine report that focused on young people, effective prevention strategies and programs can prevent certain mental health disorders, limit risk factors, and address mental, emotional, and behavioral disorders cost-effectively.

It's the combination of MHSA Core Principles that makes the difference

- California is unique in making such an intensive investment in prevention and early intervention in support of mental health, combined with innovative treatment and efforts to decrease fear and discrimination and increase acceptance and support, including programs designed by and for people from diverse backgrounds.
- As the incident in Arizona demonstrates, all of these ways in which the MHSA helps are necessary to minimize the likelihood of such a tragedy, and the

⁵ Rickert A & Ro M, Mental health parity state of the states April 2003 update, WK Kellogg Foundation. Available at http://www.communityvoices.org/Uploads/mentalhealth_Final_00108_00034.pdf.

⁶ California Mental Health Services Act (MHSA) Prevention and Early Intervention Guidelines Fiscal Years 2007-08 and 2008-09.

much more common tragedies of lives lost or limited unnecessarily by untreated mental illness.