

Workgroup 1

Stigma Reduction and Suicide Prevention

Date: April 10, 2006

Time: 2:00 – 4:00

Convener: Jim Siemianowski

Major Topics/Discussion Points:

- Reviewed the strategic activities identified from the first 2 meetings:
 1. Mental Health Anti-stigma Task Force. Convene a multidisciplinary Statewide Mental Health Anti-Stigma Task Force, sanctioned by the Governor, to develop an annual plan and to provide oversight on the delivery and evaluation of statewide anti-stigma activities. Potential anti-stigma activities include media campaigns, speakers' bureau, poster contest/art exhibits in schools, public relations campaigns, etc.
 2. Mental health training. Identification of curriculum to teach professions in the schools (teachers, social workers, school nurses, principles) and parents about the signs and symptoms of mental illness in children and adolescents. Expand the curriculum to include trainings at teacher conferences, PTA meetings and to health care professionals.
 3. Mental health screening. Expansion of mental health screening in schools, as well as the exploring the feasibility of introducing a statewide screening tool to be used at specific developmental milestones.
 4. Statewide Suicide Prevention Plan. Plan, implement, and evaluate across the state of Connecticut.
 5. Anti-stigma material distribution at all major statewide conferences in the form of written materials, toolkits, or workshops.
 6. Media Watches. Organize volunteer citizens to be watchdogs to identify stigmatizing activities (media presentations, etc.) and to raise the issue via news stories, etc.
 7. Increase Anti-stigma funding. Seek funds from foundations, private contributions, and legislative support for earmarked public dollars
 8. Community Presentations. Develop and conduct a range of community presentations to build awareness about mental health issues.

Barriers/Problems Identified:

- Although Connecticut does have parity legislation, it does not apply to all insurance plans
- Most funding comes from the local tax base and therefore schools are not bound to adopt anti-stigma/suicide prevention curriculum if there is no funding attached.
- The No Child Left Behind policy emphasizes academics thereby limiting funding for school psychologists and counselors.

- Schools need to develop a better post suicide response in the schools

Ideas/Recommendations:

- Universal screening for mental health problems in the schools should take place more than once and at key developmental milestones. Universal screening would reduce the stigma associated.
- Public policy must be a key part of this effort; must identify legislation that would help to reduce stigma and discrimination (e.g. discrimination in housing and employment) - need to gain access to legislators to present policy recommendations.
- Need to place more emphasis on the fact that physical health requires mental health on a holistic continuum as a strategy to reduce stigma.
- Screening, intervention needs to be extended to a variety of settings including primary care, day care, and senior settings to extend across the lifespan.
- Workforce anti-stigma and suicide prevention training should extend beyond the schools to cover primary care settings, postpartum care, day care, senior settings, VNA, nurses aides, long term facilities, high risk families, faith-based organizations, criminal justice system, and the business community

Transformation Activities in Connecticut Discussed in the Meeting:

- The State Department of Education Primary Mental Health Project (Primary Project) provides early intervention for children K through 3rd grade who have been identified as experiencing difficulties (shy, withdrawn) involving guided play to promote adjustment. Funding covers about 20 schools per year.
- The State Department of Education suicide prevention training.
- The State Department of Education training the trainers to provide standardized crisis response protocol available to all schools throughout Connecticut.

To Do/Tasks:

- Further refine strategy recommendations
- Prioritize recommendations
- Consider the role that business plays (e.g. EAP) for targeting anti-stigma and suicide prevention efforts.

Next Meetings:

April 27, 2006, 2:00-4:00