



American Mental Health Counselors Association White Paper Series

Mental Illness Prevention

Introduction

The Affordable Care Act (ACA) includes four primary levers of change: coverage for previously uninsured persons, which helps to decrease disparities in access to care, parity for mental health with other health care, funding provisions for preventative programs and services that can have a positive impact on mental health, and the integration of public health prevention and promotion programs into what have traditionally been programs to address physical health.

A shift toward the efficient and effective implementation of a coordinated and comprehensive approach to mental health will involve many challenges, including a reallocation of resources, a retooling of the workforce, and a broader reconceptualization of mental health promotion that includes healthy functioning across multiple domains and settings.

Clinical mental health counselors play a key role in promoting the mental and physical health of their clients. In addition to behavioral health interventions provided by CMHCs, population-based public health interventions can also create major improvements in mental health and reduce the burden of mental illness.

The public health system, by clearly defining population disparities, setting goals for improvement, focusing on community-based research, and educating the community about effects of social determinants of mental health

Mental illness can be influenced by multiple determinants, including genetics and biology, but also by numerous social and environmental factors. For example, social determinants of health—including income, stressful circumstances such as trauma, early childhood experiences, occupation, education level, sanitation, stigma, and lack of access to health resources—can influence mental health and mental illness.

can also facilitate such well-being. One framework for understanding how to promote mental health and prevent illness that can be utilized by CMHCs and by public health entities focuses on primary, secondary, and tertiary prevention efforts as it relates to mental health and illness.

Primary Prevention

Primary prevention identifies modifiable risk and protection factors, with strategies to minimize the former and enhance the latter. *Universal* prevention strategies are aimed at general population groups without regard to risk. *Selective* prevention programs target individuals that have elevated risks. Finally, *indicated* prevention activities serve individuals with early indicators of a problem but they they do not meet all of the criteria for a disorder. Primary prevention practices take place across diverse settings; funding to support these activities often comes from a wide range of sources.

An example of a primary prevention intervention that now receives support via program funding under the Affordable Care Act is home visitation for pre- and post-natal parents. Indeed, the expansion of home-

based care for primary, secondary, and tertiary care is changing the practice of many CMHCs, particularly those working with children and adolescents. Pre- and post-natal care visits may include psychological support and parenting skills training in addition to managing the health of mother and infant. Clinical mental health counselors may be part of such home-based interventions that seek to promote mental health wellbeing.

Secondary Prevention

Secondary prevention interventions aim to reduce the progression of a mental health disorder, through screening, early identification, and brief treatment. In many settings such as outpatient mental health clinics, CMHCs are deeply involved in such efforts. As more primary care providers are encouraged or mandated to screen for behavioral health problems such as depression, anxiety, trauma, and substance abuse, greater numbers of individuals can be provided with timely care by a range of mental health professionals. The ACA's extension of health coverage to previously uninsured individuals—as well as its strong emphasis on screening and early intervention—enhances opportunities for secondary prevention practices for CMHCs.

Tertiary prevention

Tertiary prevention focuses on improving functioning, minimizing the impact of an illness, and helping to prevent or delay further complications for people with mental health disorders and illnesses. CMHCs also make a significant contribution to such interventions through their work in outpatient, inpatient, and home-based care to clients across the lifespan. Broader access to care, and the emphasis on care coordination and integrated health homes under the ACA, will create additional opportunities and challenges for improving mental health and linkages to services and supports.

The ACA includes key levers of change to improve overall mental health, including coverage for certain funding provisions for promotive/preventive programs and services that can have a positive impact on mental health, and the integration of public health prevention and promotion programs into what have traditionally been programs to address physical health.

Actions for CMHCs

- Promoting a data-driven, strategic prevention framework that includes multiple community sectors, including education, business, justice, housing, and health care to support prevention efforts and promote social and emotional health.
- Encouraging an integrated model of care that incorporates mental health, substance abuse, and physical health care services into coordinated care systems.
- Partnering with state officials and other stakeholders to design and implement primary, secondary, and tertiary mental health-focused awareness campaigns.
- Working to define and implement universal and evidence-based screening for mental health and substance use conditions within medical health homes, safety net programs, and school-based clinics.
- Collaborating with public and private sector stakeholders to utilize evidence-based prevention interventions with a focus on children and youth.

- Communicating with primary care professional organizations, state medical boards, and medical schools to promote universal adoption of standardized screening and assessment for mental health and substance use conditions.
- Preventing and reducing the consequences of the following: underage drinking and adult problem drinking and prescription drug use; suicide and attempted suicides among populations at high risk, particularly for service members, veterans and their families; preventing and ameliorating the effects of bullying for LGBTQ youth.
- Working in partnership with key stakeholders to eliminate tobacco use among youth and prevent and reduce tobacco use among persons with behavioral health disorders.
- Recognizing that the efficient and effective implementation of a coordinated and comprehensive approach to mental health will involve many challenges, including a reallocation of resources, a retooling of the workforce, and a broader conceptualization of mental health promotion that includes healthy functioning (cognitive, social, and physical) across multiple domains and settings (home, school, work).

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