

WABASH COLLEGE

Wabash Democracy & Public Discourse Initiative

Report: Public Forum on Mental Health in Montgomery County

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On April 10, 2017, Wabash Democracy and Public Discourse (WDPD) partnered with the Montgomery County Health Department to host a public forum discussion on the state and effects of mental health in Montgomery County. This program was part of the Health Department's Community Health Improvement Plan (CHIP). At this event, Democracy Fellows facilitated conversations on mental health services available in the community as well as gaps in coverage.

Before the event, WDPD Democracy Fellows conducted focus group interviews with providers and school officials to understand current services provided and to get a sense of where services may be lacking. This information was shared with participants at the event through an issue guide, and participants were also encouraged to share their own insights on mental health services in Montgomery County.

The event was broken up into two parts: 1) a breakout session assessing gaps in coverage and current services available, and 2) a deliberation on how to best address the mental health needs of the community. There were three separate discussion tables, with one facilitator and one note taker from WDPD at each table. The following sections explain what was said during the discussion and some of common themes that emerged across the three tables.

This report is a thematic summary across the three tables. It therefore reflects the opinions of the community members at the event, as well as their discussion during the event. It is not meant to be a comprehensive summation of public opinion on mental health in Montgomery County.

Breakout Session

The breakout session was 10-minute segment designed to give participants an opportunity to discuss the current state of mental health services in Montgomery County. The issue guide (written by WDPD) given to participants outlined some of the services that are offered in the county already, and included insights from local providers and school officials on areas for improvement in regards to mental health. This section of the discussion provided an opportunity for participants to bring their own experiences with mental health services and allowed them to express any services/gaps in coverage that were not mentioned in the issue guide.

During this session, one of the themes that emerged at every table was the issue of the lack of accessibility to mental health services in Montgomery County. Participants noted the complexity of this issue, including issues of affordability, lack of coverage, and budgeting. Some participants also noted that some groups did not receive adequate care compared to other groups, such as the incarcerated and the elderly. Other participants also mentioned that some of the providers in the county only accept Medicaid, and that many private insurers do not cover the cost of mental health care.

Addressing Mental Health Needs

During this part of the event, participants spent the next 45 minutes deliberating three value-based approaches to addressing the mental health needs of Montgomery County. These approaches were in the issue guide developed by Wabash Democracy and Public Discourse, and included: (1) promoting shared responsibility, (2) promoting responsiveness to urgent cases, and (3) educating the public. Each approach was discussed for 15 minutes, and participants assessed the values, benefits, and tradeoffs of each approach.

Approach 1 – Shared Responsibility

This approach suggested that a wide variety of individuals should address mental health issues in Montgomery County by working together. The idea behind this approach is that much of the burden to respond to mental health issues in the community is placed on providers of care; our community's providers are very busy and few in number. Additionally, there is a high turnover rate for mental health care professionals in Montgomery County. The value of shared responsibility suggested actions such as creating training programs for service occupations and creating peer support groups in schools and workplaces. While this approach would lift the burden off of providers within the community, some concerns of this option included lack of time and resources to train individuals and groups to address mental health concerns.

Some of the common themes that surfaced in the discussion of this approach were the value of suicide prevention training in the workplace, the necessity of support systems, and the importance of providing help to mental health practitioners where it is possible.

Across the three tables, all emphasized the importance of suicide prevention training, and some acknowledged that having this training has already been beneficial in local schools. Participants added that increasing this training would allow people to be able to help those in need before its too late, and that this could help alleviate Montgomery County's overworked mental health professionals. Participants also noted that creating support systems could be beneficial in addressing mental health concerns, as support provides opportunities for those going through issues to address their issues when they cannot see a professional. While some participants thought this option would help trained professionals, there were also concerns about confidentiality and a generational gap in coverage. Some other ideas that were mentioned in the discussions include: increasing the number of guidance counselors in schools, training workers in nursing homes to deal with mental health issues, school curriculum that addresses mental health concerns, and trained professionals using technology to communicate with patients when they cannot physically be there.

Approach 2 – Responsiveness to Urgent Cases

This approach suggested that the priority should be given to mental health concerns that are most urgent in Montgomery County. This approach centered around the idea that, since resources are scarce and providers are fairly limited, emphasis should be placed on the most urgent needs. If this approach were utilized, the Health Department and its partners would prioritize care for the most at risk members of the community and focus on stopping major issues such as suicide. The value of prioritizing urgent care would emphasize support programs, emergency hotlines, and suicide prevention training for members of the community who may have to deal with major mental health crises.

After deliberating this approach, participants noted that while this option is effective in the short-term and could address the most pressing cases, it does not fix mental health issues in the long term and could leave minor cases untreated. Many participants acknowledged that this solution only works if there is a system in place that provides support for less urgent cases, because if the less urgent cases never get addresses, there is potential for them to develop into urgent cases. Participants also noted that unless the stigma surrounding mental health is decreased, the less urgent cases will not improve and could develop into major cases.

While reactions were mixed (with reservations) about this approach, participants did identify a few possible actions that would help the community. They included educating the public about the 24 hour suicide hotline and having mental health screenings for young people in order to treat the problem early. Other comments that were made in this section stressed the importance of taking into account cultural issues in regards to mental

health, following up on urgent cases, keeping people aware of resources, and being sensitive to LGBT community members.

Approach 3 – Educating the Public

This approach suggested that the community, as well as the Health Department, should prioritize educating the public as to what mental health entails and to decrease the stigma surrounding mental health issues. The central theme of this approach is that early identification and prevention is the best form of treatment, and that increasing awareness would improve the overall state of mental health in the future. If this approach were utilized, the Health Department, local partners, and providers would exert more effort and resources into educating community members on what mental health issues entail and would educate the community on what resources were available to combat mental health issues. This approach could help reduce the stigma associated with mental health and create a more aware population.

In deliberating this approach, some expressed support for designing education to address the generational gap in knowledge about what mental health issues are, the long-term benefits of this approach, and the importance of awareness among community members for this option to be successful. Other participants acknowledged that educating older generations could be more difficult for a variety of reasons, and that to be successful, partnerships would have to be made with individuals who have direct contact with the elderly. A few participants suggested that while this approach doesn't directly address mental health issues in the short term, chances are the state of mental health in the community would improve, as more people would be aware as to what mental health is and what resources are available. Some other comments made regarding this approach include concerns about resources available to educate the public, establishing public private partnerships, and the importance of schools educating students through health classes.

Conclusion

When asked to reflect on the best overall approach for improving mental health in Montgomery County, participants seemed to value a hybrid of the three approaches. Generally, each table expressed that none of the approaches alone would solve the mental health issues of the community. For example, in the final round of discussions, some participants noted that educating the public would be moot without providing resources to those who need it, and that training community members to deal with mental health issues cannot substitute the trained professionals who work as providers of mental healthcare.

Some of the actions emphasized by participants as pressing needs include increasing awareness of mental health issues and services, establishing support groups in schools

and in workplaces, and decreasing the stigma surrounding mental health. Most participants at the event thought that utilizing aspects of all three approaches—particularly actions that had significant benefits, as identified in the conversation—would be the most beneficial way of dealing with mental health issues in Montgomery County.

Appendix: Post-Survey from Event

As part of the event, participants were asked to complete a voluntary post-survey with numeric ratings. Nine participants chose to complete the survey. The results are included below.

Post-Survey (n=9)

1=Strongly Disagree; 2=Disagree; 3=Neutral; 4=Agree; 5=Strongly Agree

Question	Mean
Today I learned something new about mental health in Montgomery County.	4.22
Today I heard different viewpoints about mental health in Montgomery County.	4.33
My viewpoint was heard at today's event.	4.44
The discussions at my tables were productive.	4.44
Everyone that is affected by the issues discussed today was present in our conversations.	3.22
A variety of groups and actors are necessary to improve our future.	3.22
This conversation encouraged discussion on feasible improvements to mental health.	4.11
I plan to stay/become involved with improving mental health in Montgomery County.	4.22
The facilitator at my table was helpful for the conversation today.	4.44

Acknowledgements

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A copy of this report is available at <https://blog.wabash.edu/wabashdpd/2017/05/07/mentalhealthmontco/>

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