Guiding Principles for Collaboration between Mental Health and Public Health

Statement of Purpose:
The evolving understanding of the inter-relationship between public health and mental health is fundamental to promoting overall health and well-being. In 1999, the landmark Surgeon General's Report on Mental Health highlighted mental health as essential to achieving prosperity and reducing disability. In the efforts to promote the public's health, mental health promotion and the prevention of mental illness must be included as part of the overall health of the community. Subsequent reports, by the President's New Freedom Commission on Mental Health and the Institute of Medicine (Crossing the Quality Chasm), have highlighted the need for accessible high quality health services. As noted by the New Freedom Commission on Mental Health, "as future opportunities emerge to transform health care in America, mental health care must be considered part of the reform necessary to achieve optimal health benefits for the American public." All of these factors speak to the need for stronger collaboration between public health and mental health authorities, providers and interest groups.

Principles:

I. Education and Collaboration
Health promotion, through mental health and public health system collaboration, must be acknowledged and integrated into program planning and practice in the areas of chronic disease, environmental health, and maternal and child health. Mental health and public health policy makers and practitioners must promote increased awareness and collaboration at all levels, among federal, national, state and local public health and mental health partners.

II. Comprehensive Planning
There is a need for collaborative and comprehensive plans at the local, state and national levels that address the health and mental health needs of individuals, families and communities. Strategic activities must respond to issues identified in community needs assessments, and work towards Healthy People 2010 and New Freedom Commission priorities.

III. Partnership
Mental health and public health communities must create and foster partnerships to promote health and prevent adverse conditions. Partnerships must occur in all activities and situations, such as education, screening, and emergency/disaster response, and for all target populations, including prison and jail populations.
IV. Communication
Communication between the mental health and public health professions and among community groups, policy-makers, and the public is fundamental. Communication is essential for effective collaboration, planning and partnership. Forums can encourage dialogue and improve communication among mental health and public health service providers. Sharing information about funding streams, service providers and best practices can facilitate increased collaboration and support.

V. Workforce Development
As the nation’s population becomes increasingly diverse, the composition of the health professional workforce must follow suit, drawing mental health and public health professionals from all races and ethnicities and all types of backgrounds. Mental health and public health have a mutual need for a highly trained and diverse workforce, and professionals must have opportunities for training and workforce development in each other’s fields. Joint conferences, cross-trainings and dialogue opportunities will enhance knowledge and practice of both mental health and public health professionals.

VI. Data Collection
In the attempt to improve epidemiological data for mental health at the local, state and national level, investments must be made in infrastructure development. Public health’s knowledge of and capacity for epidemiology must be used to assist the assessment and enhancement of the surveillance and epidemiological capacity of mental health systems. Epidemiology can be used to profile mental health systems, similar to the way epidemiology is used to explain infectious disease.

VII. Access
Early efforts at planning, partnership, workforce development, and communication will help make increased access and integrated services a reality. Integration of mental health and public health services will improve access to mental health services, and both the public health and mental health communities must advocate for more comprehensive insurance coverage for mental health services. Individuals must no longer settle for simply a medical home, but the mental health and public health communities should strive to provide access to a comprehensive “health home”.


NACCHO is the national organization representing local public health agencies (including city, county, metro, district, and tribal agencies). NACCHO works to support efforts that protect and improve the health of all people and all communities by promoting national policy, developing resources and programs, and supporting effective local public health practice and systems.

NMHA is the country’s oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With more than 340 affiliates nationwide, NMHA works to improve the mental health of all Americans, especially the 54 million people with mental disorders, through advocacy, education, research and service.

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