

MENTAL HEALTH AND ADDICTION

SHIP In-Person Workshop packet, HPIO **UPDATED 10/4/16**

Priority topic definition

Mental health and addiction, also referred to as “behavioral health,” includes:

- Emotional well-being
- Mental illness conditions, such as depression, anxiety, post-traumatic stress disorder, bipolar disorder, schizophrenia, etc.
- Mental, emotional and behavioral disorders in children (including attention deficit hyperactivity disorder, conduct disorder, depression, etc.)
- Substance use disorders (including use/abuse of alcohol, marijuana, opioids [prescription drug misuse, heroin, fentanyl, etc.], cocaine, methamphetamine, etc.)

Overall goal

Promote mental wellbeing and prevent alcohol and other drug dependence and abuse.

SHIP priority topic outcomes

	Desired outcome (source)	Directly related to PCMH quality measure	Healthy People 2020 Objective Identifier
Mental health	1. Reduce suicide rate (ODH Vital Statistics)		MHMD-1.0
	2. Reduce the proportion of persons who experience major depressive episodes (MDEs) (National Survey on Drug Use and Health) <ul style="list-style-type: none"> a. Past-year MDEs among ages 12-17 b. Past-year MDEs among ages 18+ 	x	MHMD-4.1 MHMD-4.2
Drug and alcohol dependence	3. Reduce unintentional drug overdose deaths (ODH Vital Statistics)		
	4. Reduce past-year illicit drug dependence or abuse among ages 12+ (National Survey on Drug Use and Health)	x	

Contributing outcomes to be addressed in the SHIP:

- Reduce opioid prescriptions dispensed, decreased average daily Morphine Equivalent Dose or other measure of opioid prescribing (Ohio Automated Rx Reporting System)
- Reduce tobacco use (specific metrics TBD)

See outcomes diagram on last page for more detail.

Evidence inventory

Framework

This evidence review draws upon two frameworks to categorize the types of approaches being considered:

- Interventions by developmental phase in [Preventing mental, emotional and behavioral disorders among young people](#), The National Academies (formerly known as the IOM), 2009 [see diagram on page 16]
- [Leading change 2.0: Advancing the behavioral health of the nation 2015-2018](#), SAMHSA

Sources

The strategies listed here have been systematically reviewed by the following national organizations and found to be effective in reaching desired outcomes within this SHIP priority area.

Systematic review or evidence registry	Recommendation level(s) included in this inventory
Hi-5 (Health Impact in 5 Years): CDC <i>(includes cost considerations)</i>	<ul style="list-style-type: none"> • Recommended
6/18 (Accelerating Evidence into Action): CDC <i>(includes cost considerations)</i>	<ul style="list-style-type: none"> • Recommended
The Guide to Community Preventive Services (Community Guide, CG): Systematic reviews from the U.S. Centers for Disease Control and Prevention (CDC)	<ul style="list-style-type: none"> • Recommended
What Works for Health (WWFH): Evidence registry from County Health Rankings and Roadmaps, a project of the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation	<ul style="list-style-type: none"> • Scientifically supported • Some evidence
U.S. Preventive Services Task Force Recommendations (USPSTF): Systematic reviews from the Agency for Healthcare Research and Quality	<ul style="list-style-type: none"> • Grade A (recommended; high certainty of benefit) • Grade B (recommended; moderate certainty of benefit)
National Registry of Evidence-Based Programs and Practices (NREPP): Evidence registry from SAMHSA	<ul style="list-style-type: none"> • Reviewed programs
Office of Juvenile Justice and Delinquency Prevention Model Programs Guide (OJJDP): Evidence registry	<ul style="list-style-type: none"> • Effective programs

Relevant state plans

- [Ohio Adolescent Health Strategic Plan](#)
- [FY 2016/2017 State Behavioral Health Assessment and Plan \(Substance Abuse Prevention and Treatment and Community Mental Health Services Block Grant\)](#)
- [Ohio 2015-2016 State Health Improvement Plan Addendum](#)
- [Ohio's Suicide Prevention Plan](#)

Additional information

- [Suicide Prevention Resource Center Best Practices Registry](#)
- [National Drug Control Strategy, 2015](#)
- [How state health departments can use the spectrum of prevention to address Neonatal Abstinence Syndrome \(ASTHO\)](#)
- [Washington State Institute for Public Policy](#) (see benefit-cost results for Public Health and Prevention, Children's Mental Health, Substance Abuse and Adult Mental Health)
- [Preventing mental, emotional and behavioral disorders among young people \(Institute of Medicine/National Academies\)](#)

Table 1. Health equity

Outcome area	Strategy/Intervention	Outcomes
Education	1. Early childhood education*	CG: "When provided to low-income or racial and ethnic minority communities, (center-based) ECE programs are likely to reduce educational achievement gaps, improve the health of these student populations, and promote health equity."
	2. Full-day kindergarten programs*	CG: "Full-day kindergarten programs improve the health prospects of low-income and racial and ethnic minority children, based on strong evidence that full-day programs substantially improve reading and mathematics achievement—determinants of long-term academic and health-related outcomes."
	3. High school completion programs*	CG: "Because academic achievement is linked with long-term health, and because high school completion programs are commonly implemented in racial and ethnic minority or low-income communities, these programs are likely to improve health equity."
	4. Out-of-school-time academic programs: Reading-focused, math-focused and general	CG: "Because academic achievement is linked with long-term health, and because out-of-school-time academic programs are commonly implemented in racial and ethnic minority or low-income communities, these programs are likely to improve health equity."
	5. School-based health centers*	CG: "If targeted to low-income communities, SBHCs are likely to reduce educational gaps and advance health equity."
Other	See other sections for additional strategies likely to reduce health disparities. *= programs and policies likely to reduce disparities, based on review by What Works for Health	

Table 2. Social determinants of health (including the social, economic and physical environment)

Approach	Strategy/Intervention	Outcomes
Strengthening families: <i>Home visiting and early childhood interventions</i>	1. Early childhood education* See also: <ul style="list-style-type: none"> CG: Center-based early childhood education WWFH: Preschool education programs and Universal pre-kindergarten 	Hi-5: <ul style="list-style-type: none"> Improved emotional development Increased self-regulation Improved cognitive development Decreased child maltreatment Healthy weight Decreased teen birth rates Improved academic achievement Decreased crime rates
	2. Full-day kindergarten*	CG: <ul style="list-style-type: none"> Improved social emotional health (ability to work and play with others) Improved academic outcomes
	3. Early childhood home visiting programs—to prevent child maltreatment* See also: WWFH: Early childhood home visiting programs	CG: <ul style="list-style-type: none"> Reduced child maltreatment
	Healthy Families America* (specific home visiting model)	WWFH: <ul style="list-style-type: none"> Improved parenting
	Nurse-Family Partnership* (specific home visiting model)	WWFH: <ul style="list-style-type: none"> Improved well-being Improved family functioning Reduced risky health behaviors Reduced child maltreatment
	Parents as Teachers* (specific home visiting and early childhood parent education/support program)	WWFH: <ul style="list-style-type: none"> Improved cognitive skills Increased school readiness Improved child development
	4. Early Head Start* (for ages 0 to 3)	WWFH: <ul style="list-style-type: none"> Improved cognitive skills Improved social emotional skills Improved family functioning
Strengthening families: <i>Parenting skills training and support</i>	5. Group-based parenting programs (such as Triple P Positive Parenting Program and Incredible Years*)	WWFH: <ul style="list-style-type: none"> Improved child behavior Improved mental health Improved parenting
	6. Families and Schools Together* (specific group-based family intervention)	WWFH: <ul style="list-style-type: none"> Improved youth behavior Improved mental health Improved social emotional skills
	7. Father involvement programs*	WWFH:

Bold= strategies are included in Hi-5 or 6/18 (both include cost considerations)

*= programs and policies likely to reduce disparities, based on review by What Works for Health

		<ul style="list-style-type: none"> Improved family functioning Improved parent-child interaction
Strengthening families: <i>Policy changes that support family wellbeing and parental mental health</i>	8. Earned income tax credits* (increase take-up of existing credits, extend state credit, etc.)	Hi-5: <ul style="list-style-type: none"> Improved maternal mental health Reduced poverty Increased income Improved maternal physical health Reduced Infant mortality Reduced low birth weight Health improvements for infants
Trauma, toxic stress and violence	9. School-based violence prevention programs Hi-5 examples: Life Skills Training, Good Behavior Game, and Promoting Alternative Thinking Strategies (PATHS) Additional program examples found effective by CG, WWFH, NREPP, OJJDP: PeaceBuilders and Seattle Social Development Project violence prevention programs; Olweus and KiVa bullying prevention programs; Fourth R, Safe Dates and Steps to Respect dating violence prevention programs	Hi-5 <ul style="list-style-type: none"> Reduced violent behavior Reduced delinquency Reduced alcohol and substance abuse Improved academic performance
	10. Trauma informed approaches to community building*	WWFH: <ul style="list-style-type: none"> Improved health outcomes Increased social connectedness
	11. Advocacy for victims of intimate partner violence	WWFH: <ul style="list-style-type: none"> Reduced intimate partner violence Improved quality of life
	12. Cure Violence model* (formerly known as CeaseFire)	WWFH <ul style="list-style-type: none"> Reduced homicide Reduced gun violence
	13. Treatment Foster Care Oregon	WWFH: <ul style="list-style-type: none"> Reduced recidivism Reduced violence Reduced delinquent behavior Reduced teen pregnancy Increased academic achievement
Additional employment and poverty strategies (less direct impact on health outcomes)	14. Child care subsidies*	WWFH: <ul style="list-style-type: none"> Increased employment Increased earnings
	15. Living wage laws*	WWFH: <ul style="list-style-type: none"> Increased earnings Reduced poverty
	16. Transitional jobs*	WWFH:

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		<ul style="list-style-type: none"> • Increased employment • Increased earnings
	17. Unemployment insurance*	WWFH: <ul style="list-style-type: none"> • Increased financial stability • Improved well-being
	18. New Hope Project*	WWFH: <ul style="list-style-type: none"> • Increased employment • Increased income • Increased earnings • Increased academic achievement
	19. Vocational training for adults*	WWFH: <ul style="list-style-type: none"> • Increased earnings • Increased employment
Housing access and stability (less direct impact on health outcomes)	20. Service-enriched housing*	WWFH: <ul style="list-style-type: none"> • Reduced homelessness • Increased housing stability • Reduced hospital utilization
	21. Community land trusts*	WWFH: <ul style="list-style-type: none"> • Increased housing stability
	22. Housing rehabilitation loan and grant programs*	WWFH: <ul style="list-style-type: none"> • Improved health outcomes • Improved mental health
	23. Housing First*	WWFH: <ul style="list-style-type: none"> • Reduced homelessness • Reduced hospital utilization
	24. Low income housing tax credits*	WWFH: <ul style="list-style-type: none"> • Increased access to affordable housing • Increased access to quality housing
	25. Inclusionary zoning*	WWFH: <ul style="list-style-type: none"> • Increased access to affordable housing • Increased access to quality housing
	26. Rapid re-housing programs*	WWFH: <ul style="list-style-type: none"> • Reduced homelessness • Improved access to social services
Transportation access (less direct impact on health outcomes)	27. Public transportation systems	WWFH: <ul style="list-style-type: none"> • Increased access to public transit • Increased use of public transit

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*= programs and policies likely to reduce disparities, based on review by What Works for Health

Table 3. Public health system, prevention and health behaviors

Outcome area	Strategy/Intervention	Outcomes
<p>Strengthening resiliency of children and adolescents:</p> <p><i>Classroom-based curriculum to prevent substance abuse, behavior problems and violence (K-12)</i></p>	<p>1. School-based violence prevention programs</p> <p>Hi-5 examples: Life Skills Training, Good Behavior Game, and Promoting Alternative Thinking Strategies (PATHS)</p> <p>Additional program examples found effective by CG, WWFH, NREPP, OJJDP: PeaceBuilders and Seattle Social Development Project violence prevention programs; Olweus and KiVa bullying prevention programs; Fourth R, Safe Dates and Steps to Respect dating violence prevention programs</p>	<p>Hi-5</p> <ul style="list-style-type: none"> • Reduced violent behavior • Reduced delinquency • Reduced alcohol and substance abuse • Improved academic performance
	<p>2. Universal school-based programs: Alcohol misuse and impaired driving</p> <p>Examples: Life Skills Training, Good Behavior Game, and Unplugged</p>	<p>WWFH</p> <ul style="list-style-type: none"> • Reduced excessive drinking • Reduced riding with alcohol-impaired drivers
	<p>3. School-based social and emotional instruction</p> <p>Examples: Second Step, Promoting Alternative Thinking Strategies (PATHS)</p>	<p>WWFH</p> <ul style="list-style-type: none"> • Increased academic achievement • Increased high school graduation • Increased social emotional skills • Increased school engagement • Increased self-confidence • Improved mental health • Improved youth behavior
<p>Strengthening resiliency of children and adolescents:</p> <p><i>Other school-based approaches to promote mental health and prevent substance abuse</i></p>	<p>4. School-wide Positive Behavioral Interventions and Supports (Tier 1)*</p>	<p>WWFH:</p> <ul style="list-style-type: none"> • Improved youth behavior
	<p>5. School-based health centers</p>	<p>CG:</p> <ul style="list-style-type: none"> • Decreased mental health problems • Decreased alcohol, tobacco and other drug use • Other health and academic outcomes
<p>Strengthening resiliency of children and adolescents:</p>	<p>6. Extracurricular activities for social engagement</p>	<p>WWFH</p> <ul style="list-style-type: none"> • Increased self-esteem • Improved youth behavior
	<p>7. Youth peer mentoring</p>	<p>WWFH</p>

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Social and behavioral skills training and support (community based)		<ul style="list-style-type: none"> Increased social connectedness for youth
	8. Mentoring programs focused on reducing delinquency*	WWFH <ul style="list-style-type: none"> Reduced delinquent behavior Reduced drug use
	9. Big Brothers Big Sisters* (specific mentoring program)	WWFH <ul style="list-style-type: none"> Reduced delinquent behavior Increased academic achievement
	10. Outdoor experiential education and wilderness therapy	WWFH <ul style="list-style-type: none"> Increased self-esteem Increased self-concept
	11. Youth empowerment programs* (include job skill development, mentoring, case management, communication skills, etc.)	WWFH <ul style="list-style-type: none"> Improved social skills Improved youth behavior Increased academic achievement
	12. Therapeutic foster care—to reduce violence, for chronically delinquent juveniles See also: WWFH: Treatment foster care	CG: <ul style="list-style-type: none"> Decreased behavior problems
	13. Multisystemic Therapy for juvenile offenders	WWFH <ul style="list-style-type: none"> Reduced recidivism Reduced incarceration Improved family functioning
	14. Kinship care for children removed from home due to maltreatment	WWFH <ul style="list-style-type: none"> Increased foster care placement stability Improved mental health Improved child behavior
15. Cure Violence model* (formerly known as CeaseFire)	WWFH <ul style="list-style-type: none"> Reduced homicide Reduced gun violence 	
Suicide prevention	16. Universal school-based suicide awareness & education programs Examples: Signs of Suicide Prevention (SOS) and Youth Aware of Mental Health Program (YAM)	WWFH <ul style="list-style-type: none"> Reduced suicide Increased knowledge of suicide Improved coping skills
	17. Child firearm access prevention laws	WWFH <ul style="list-style-type: none"> Decreased suicide deaths
	18. Firearm licensing laws	WWFH <ul style="list-style-type: none"> Reduced homicide Reduced suicide
	19. Strong firearm background checks	WWFH <ul style="list-style-type: none"> Reduced homicide Reduced suicide Reduced intimate partner violence
Tobacco prevention	20. Mass-reach communications campaigns [strategy within Hi-5 "tobacco control"]	Hi-5: <ul style="list-style-type: none"> Reduced tobacco use among adults and young people Increased cessation

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		<ul style="list-style-type: none"> • Increased quitline calls • Decreased tobacco initiation
	21. Increase unit price for tobacco products* (e.g. increase cigarette/OTP tax) [strategy within Hi-5 “tobacco control”]	Hi-5 <ul style="list-style-type: none"> • Reduced tobacco use among adults and young people • Reduced tobacco initiation • Increased cessation
	22. Comprehensive smoke-free policies [strategy within Hi-5 “tobacco control”] (including maintenance and enforcement of existing workplace policy)	Hi-5 <ul style="list-style-type: none"> • Decreased secondhand smoke exposure • Decreased tobacco use • Decreased tobacco consumption • Decreased cardiovascular events • Decreased asthma morbidity
	23. Tobacco marketing restrictions	WWFH <ul style="list-style-type: none"> • Reduced tobacco use
	24. Comprehensive tobacco control programs (Coordinated strategy that combines educational, clinical, regulatory, economic and social approaches)	CG <ul style="list-style-type: none"> • Reduced tobacco use • Reduced secondhand smoke exposure
	25. Restricting minors' access to tobacco products: Community mobilization to reduce youth access—With additional interventions	CG <ul style="list-style-type: none"> • Reduced youth tobacco use
	Tobacco access restrictions for minors	WWFH <ul style="list-style-type: none"> • Reduced youth smoking • Reduced illegal sales to youth
	26. Community education to reduce secondhand smoke exposure in the home	WWFH <ul style="list-style-type: none"> • Reduced secondhand smoke exposure
Tobacco cessation	<i>See Healthcare System and Access section</i>	
Excessive alcohol use prevention	27. Pricing strategies for alcohol products	Hi-5 <ul style="list-style-type: none"> • Reduced excessive alcohol use • Reduced injuries and violence • Reduce alcohol poisoning • Reduced risky sexual behaviors • Reduced fetal alcohol spectrum disorders • Reduced health problems related to excessive alcohol use, including hypertension, heart disease, liver disease, some cancers, dementia, depression, etc.
	28. Multiple strategies to reduce excessive alcohol use (17 strategies with “scientifically supported” or “some evidence” rating in WWFH, such as alcohol excise tax, alcohol outlet density restrictions, enhanced	WWFH <ul style="list-style-type: none"> • Reduced alcohol consumption • Reduced alcohol related harms • Reduced alcohol-related crashes • Reduced underage drinking

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	enforcement of laws prohibiting sales to minors, etc.)	
Physical activity	29. Safe Routes to School	Hi-5 <ul style="list-style-type: none"> • Increased active transportation • Increased fitness levels
	Walking school buses	WWFH <ul style="list-style-type: none"> • Increased active transportation
	30. School-based programs to increase physical activity	Hi-5 <ul style="list-style-type: none"> • Increased physical activity • Improved BMI • Reduced obesity
	Including:	
	Recess and active classroom policies/programs	
	Active recess	WWFH <ul style="list-style-type: none"> • Increased physical activity
	Policy adoption for minimum amounts of recess	ODH
	Physically active classrooms	WWFH <ul style="list-style-type: none"> • Increased physical activity
	Physical education policies/programs	
	Enhanced school-based physical education	CG <ul style="list-style-type: none"> • Increased physical activity
	Extracurricular activities for physical activity	WWFH <ul style="list-style-type: none"> • Increased physical activity
	Homework or extra credit for physical education class	WWFH <ul style="list-style-type: none"> • Increased physical activity
	31. Adoption of health education standards	ODH
	32. Behavioral interventions that aim to reduce recreational sedentary screen time among children	CG <ul style="list-style-type: none"> • Decreased screen time • Increased physical activity • Decreased caloric intake • Decreased BMI
	33. Multi-component workplace supports for active commuting	WWFH <ul style="list-style-type: none"> • Increased active transportation
	34. Financial rewards for employee healthy behavior	WWFH <ul style="list-style-type: none"> • Improved attainment of short-term health goals
35. Creation of or enhanced access to places for physical activity combined with informational outreach activities	CG <ul style="list-style-type: none"> • Increased physical activity 	
36. Point-of-decision prompts to encourage use of stairs	CG <ul style="list-style-type: none"> • Increased physical activity 	
37. Individually-adapted health behavior change programs	CG <ul style="list-style-type: none"> • Increased physical activity 	

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	38. Social support interventions in community settings	CG <ul style="list-style-type: none"> • Increased physical activity
	39. Activity programs for older adults	WWFH <ul style="list-style-type: none"> • Improved health outcomes • Improved mental health
	40. Community fitness programs	WWFH <ul style="list-style-type: none"> • Increased physical activity • Improved physical fitness
	41. Community-wide physical activity campaigns	CG <ul style="list-style-type: none"> • Increased physical activity
	42. Individual incentives for public transportation	WWFH <ul style="list-style-type: none"> • Increased use of public transit • Increased physical activity

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Table 4. Healthcare system and access

Outcome area	Strategy/Intervention	Outcomes
Access to care (general)	1. Maintain current Medicaid eligibility standards	<ul style="list-style-type: none"> Increased access to care
	2. Health insurance enrollment outreach and support*	WWFH <ul style="list-style-type: none"> Increased health insurance coverage
	3. Medical homes (also referred to as Patient-Centered Medical Homes)*	WWFH <ul style="list-style-type: none"> Improved quality of care Increased access to care
	4. Telemedicine*	WWFH <ul style="list-style-type: none"> Increased access to care
	5. Federally qualified health centers (FQHCs) *	WWFH <ul style="list-style-type: none"> Increased access to health care Improved health outcomes
	6. Community health workers*	WWFH <ul style="list-style-type: none"> Increased patient knowledge Increased access to care Increased healthy behaviors Increased preventive care
Access to care (provider workforce)	7. Higher education financial incentives for health professionals serving underserved areas*	WWFH <ul style="list-style-type: none"> Increased availability of health professionals in underserved areas
	8. Rural training in medical education*	WWFH <ul style="list-style-type: none"> Increased availability of physicians in underserved areas Increased access to care
	9. Establish a Minimum Data Set for behavioral health providers	
Quality of care (general)	10. Nurse practitioner scope of practice*	WWFH <ul style="list-style-type: none"> Improved quality of care Increased patient satisfaction
	11. Value-based purchasing	WWFH <ul style="list-style-type: none"> Improved quality of care
	12. Chronic disease management programs	WWFH <ul style="list-style-type: none"> Improved quality of life Improved health outcomes Improved mental health Reduced hospital utilization
	13. Chronic disease self-management programs	WWFH <ul style="list-style-type: none"> Improved health outcomes
	14. Electronic health information exchange	WWFH <ul style="list-style-type: none"> Improved quality of care
	15. Patient shared decision making	WWFH <ul style="list-style-type: none"> Improved patient knowledge Improved patient decision making
	16. Public reporting of health care quality performance*	WWFH <ul style="list-style-type: none"> Improved quality of care

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	17. Quality improvement practice coaches for primary care	WWFH <ul style="list-style-type: none"> Increased practice of evidence-based medicine Increased quality improvement activities
Culturally competent care (general)	18. Cultural competence training for health care professionals*	WWFH <ul style="list-style-type: none"> Increased cultural understanding and skills
	19. Culturally adapted health care*	WWFH <ul style="list-style-type: none"> Improved health outcomes Improved health-related knowledge Improved chronic disease management
Mental health and addiction screening and treatment (general)	20. Drug courts	WWFH: <ul style="list-style-type: none"> Reduced recidivism Reduced drug use
	21. Family treatment drug courts	WWFH <ul style="list-style-type: none"> Increased family reunification Increased substance use disorder treatment
	22. Mental health benefits legislation*	WWFH <ul style="list-style-type: none"> Increased access to mental health services Increased substance use disorder treatment
	23. Alcohol screening and brief intervention (SBIRT)	WWFH <ul style="list-style-type: none"> Reduced excessive drinking Reduced alcohol-related harms
	24. Telemental health services	WWFH <ul style="list-style-type: none"> Improved mental health
	25. Behavioral health primary care integration	WWFH <ul style="list-style-type: none"> Improved mental health Increased adherence to treatment Improved quality of life Increased patient engagement
	26. Trauma-focused care	ODH <ul style="list-style-type: none"> Improved treatment outcomes
	27. Dialectical Behavioral Therapy	ODH <ul style="list-style-type: none"> Reduced suicide attempts and self-injuring behaviors Reduced emergency room visits Reduced inpatient hospitalizations Reduced substance abuse (including opioid abuse)
	28. Additional adult mental health services and programs	See evidence reviews by Washington State Institute for Public Policy
	29. Additional children's mental health services and programs	See evidence reviews by Washington State Institute for Public Policy
30. Additional substance abuse services and programs	See evidence reviews by Washington State Institute for Public Policy	
Prevention of drug overdose and opioid use	31. Naloxone access*	WWFH: <ul style="list-style-type: none"> Increased knowledge of appropriate overdose response

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	32. Prescription drug monitoring programs (such as the Ohio Automated Rx Reporting System)	WWFH: <ul style="list-style-type: none"> Increased appropriate drug prescribing
Trauma and justice	33. Trauma-informed care 34. Services for criminal and juvenile justice-involved population See Leading Change 2.0: Advancing Behavioral Health of the Nation, 2015-2018	Various outcomes
Recovery support	35. Recovery supports See Leading Change 2.0: Advancing Behavioral Health of the Nation, 2015-2018	Various outcomes
Tobacco cessation	36. Access to and use of cessation services [strategy within 6/18 “tobacco control”] Includes: <ul style="list-style-type: none"> Expand access to individual, group and Quitline counseling Remove barriers to covered cessation treatments Promote increased utilization of covered treatment benefits 	6/18: <ul style="list-style-type: none"> Increased cessation Reduced tobacco use Decreased cardiovascular events
	37. Quitline (and related) interventions*	CG <ul style="list-style-type: none"> Increased cessation Reduced secondhand smoke exposure
	Mobile phone-based cessation interventions	CG <ul style="list-style-type: none"> Increased cessation Reduced secondhand smoke exposure
	Internet-based cessation interventions*	WWFH <ul style="list-style-type: none"> Increased quit rates
	38. Healthcare provider reminder systems for tobacco cessation	WWFH <ul style="list-style-type: none"> Increased quit rates
	39. Cessation counseling and medication in healthcare setting (including the 5 As)	USPSTF <ul style="list-style-type: none"> Increased quit rates
	40. Education or brief counseling to prevent initiation of tobacco use among school-aged children and adolescents in healthcare setting	USPSTF <ul style="list-style-type: none"> Prevention of smoking initiation in children and adolescents

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	41. Reducing out-of-pocket costs for evidence-based cessation treatments*	CG <ul style="list-style-type: none"> • Reduced tobacco use • Reduced secondhand smoke exposure
	42. Incentives and competitions to increase smoking cessation among workers—When combined with additional interventions	CG <ul style="list-style-type: none"> • Reduced tobacco use • Reduced secondhand smoke exposure
Physical activity and nutrition	43. Prescriptions for physical activity	WWFH <ul style="list-style-type: none"> • Increased physical activity • Improved physical fitness • Increased mobility
	44. Prescriptions for fruits and vegetables	ODH

Additional strategies

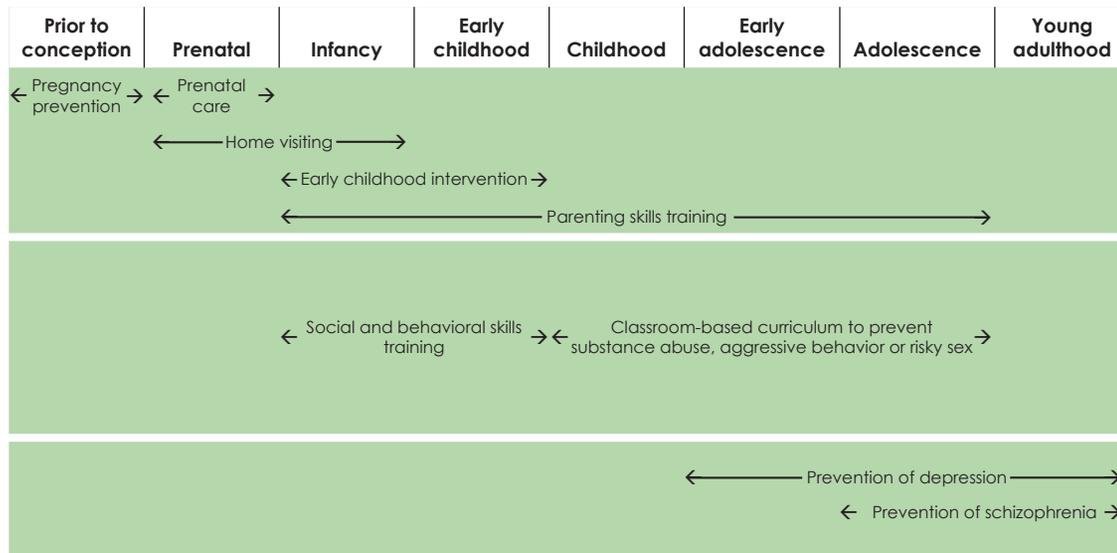
If there are any measurable outcomes or evidence-based strategies not listed in the evidence inventory that you would like to recommend for the SHIP, please bring evidence of effectiveness and available data sources for measuring outcomes to the workshop to share with the group and send relevant links to astevens@healthpolicyohio.org. We prefer to include evidence-based strategies in the SHIP. However, for areas where the evidence base is currently inadequate, we can consider evidence-informed or practice-based strategies.

Bold= strategies are included in Hi-5 or 6/18 (both include cost considerations)

*= programs and policies likely to reduce disparities, based on review by What Works for Health

Mental health and addiction SHIP evidence review: Life-course framework for prevention approaches

IOM (National Academies) prevention interventions by developmental phase framework



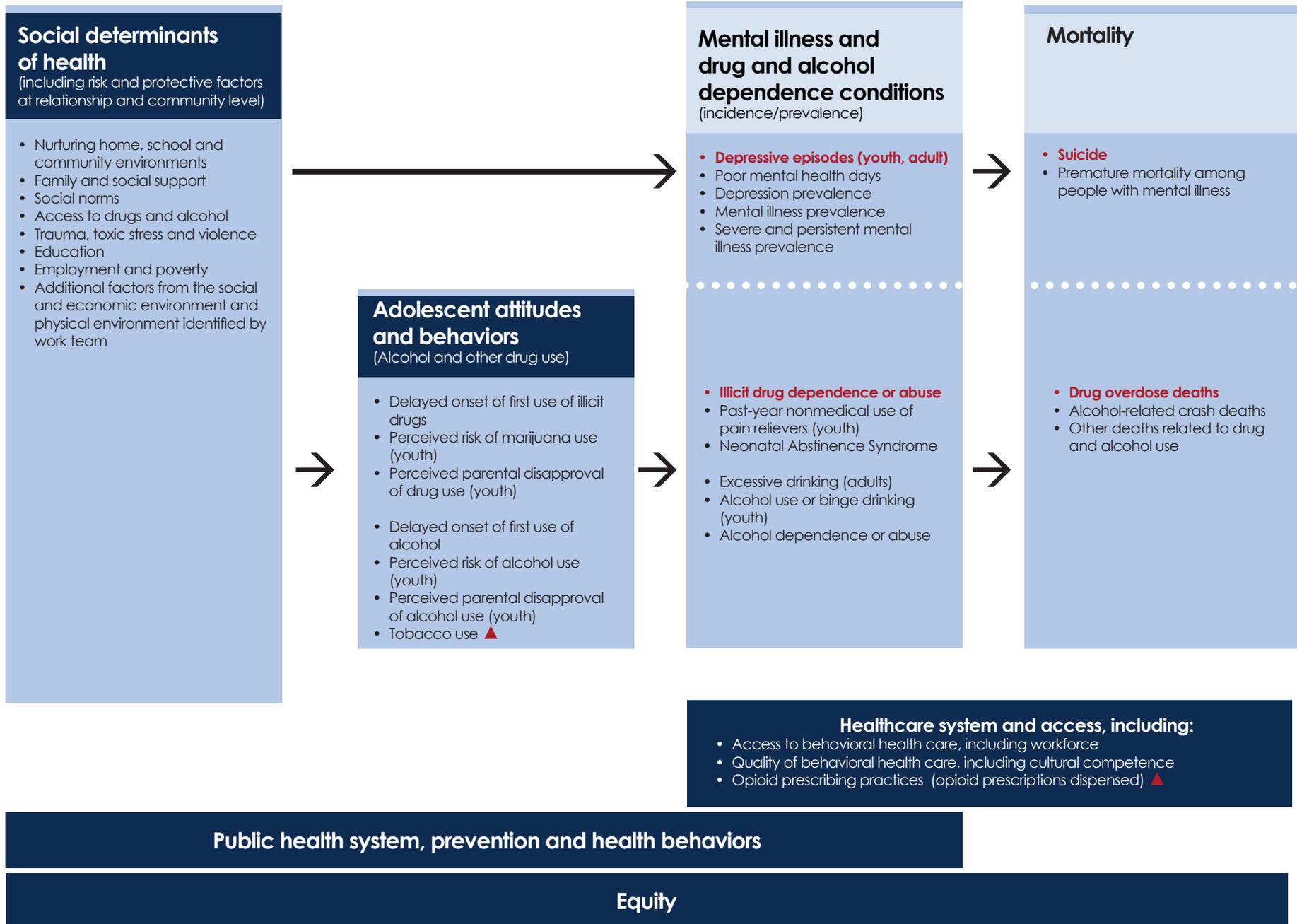
Source: Adapted from <http://www.nationalacademies.org/PDFs/032509PreventingMentalBehaviorDisorders.pdf>

HPIO evidence review categories

- 1. Strengthening families** through knowledge, skills and nurturing home and community environments
 - Home visiting and early childhood interventions
 - Parenting skills training and support
 - Policy changes that support family wellbeing and nurturing community environments
- 2. Strengthening youth resiliency** through knowledge, skills and nurturing school and community environments
 - Social and behavioral skills training for children (community-based)
 - Classroom-based curriculum to prevent substance abuse, behavior problems and violence
 - Other school-based approaches to promote mental health and prevent substance abuse
- 3. Prevention of specific selected conditions or outcomes**, such as:
 - Drug overdose deaths
 - Depression
 - Suicide

Relationships between outcomes: Mental health and addiction

Overall goal: Promote mental wellbeing and prevent alcohol and other drug dependence and abuse.



Red font = SHIP priority outcome
 ▲ = Must be addressed in cross-cutting factors