

**RETHINK
CHIP – HEALTHY LIFESTYLES
MENTAL HEALTH SHARESHOP
SEPTEMBER 29, 2011**

Welcome by Cheryl Laabs, PHN Winnebago County Health Dept, Rethink, CHIP-HL
This is the second session for this group. A signup sheet was passed around.
Introductions were made around the table.

Presentation by Teresa Paulus, PHN Winnebago County Health Dept:

- Attended an “NFL Community Huddle” presentation in Green Bay
- Supported by the NFL and the Satcher Health Leadership Institute to be a forum to discuss mental health issues and focus on stigma
- promoting 3 areas: educate, motivate, mobilize, a game plan for reducing stigma
- head injuries leading to dementia important to the NFL
- also addressed suicide and depression
- stories were shared by NFL players, panel discussion
- Teresa gleaned good resources.

Recap of last Sharesop – Kristin Biese, CHIP-HL Chairperson

- Stigma was identified as a major concern
- Talked about having local celebrities speak.
- Need to perceive mental illness as part of health care
- Social marketing
- Identifying/combining acronyms from schools and the health community
- Employer impact
- A Google Doc was sent out to create a directory of participants
- “No Wrong Door” was investigated.
- Look for a link from Sue Panek regarding Life Report, a conference to be held on October 7 at the Oshkosh Convention Center.

BREAKOUT SESSIONS: SPLIT INTO THREE GROUPS TO ASSESS:

- Stigma
- Employers
- Access

Most were interested in either Stigma or Access, Employers will be addressed in the future. Groups were asked to identify 3 action steps.

FOR THE STIGMA GROUP:

- All impressed with the NFL motivating communities to address Stigma.
 1. Cautioned that dementia due to brain injury has less stigma than other conditions – could use the NFL approach as a “side door”
 2. NFL also addressed depression

- There is a need to define Mental Illness due to large spectrum of conditions and the language used to describe it. Needs to be known as a real biological illness, not just behavior problems.
- Discussed where the stigma comes from
 1. Individuals want to “do it themselves”
 2. Shame
 3. Need to know it’s ok to have others suggest
- Discussed how to “break down the shame”
 1. Not a moral issue, but a medical issue
 2. TV advertising by pharmaceutical companies for depression gives the correct message. (the cloud can get smaller, but doesn’t go away altogether)
 3. Look for positives from Mental Illness (many great people have suffered from mental illnesses) Book: An Unquiet Mind, addresses bi-polar.
 4. Find local celebrities to speak out (discussed possible candidates)
 5. Partner with pharmaceuticals, hospitals, and businesses
- What are the avenues to breaking down stigma?
 1. Social marketing
 2. Local advertising
 3. Local speakers
 4. Other
 - Do a “short story” each month for newspapers/church bulletins
 - Create a fun video. (Bye, Bye American Pie, Flash mobs, YouTube)
- Who is our audience?
 1. Need to use a multi-pronged approach to reach different groups
 - Facebook
 - Newspapers
 - Schools
 - School buses
 - UWO
 - OACF
- **3 Action Steps Identified**
 - 1. CREATE A MESSAGE**
 - Address shame, fear and hope
 - Normalizing and managing life
 - Oprah “What I Know for Sure”
 - Passed around a sign up sheet for Stigma Group participants
 - 2. ID AUDIENCES & FIND OUT WHAT WORKS FOR THAT GROUP**
 - Focus on Oshkosh only? No, need to address northern end too.
 - Address everyone but use multi-pronged approach.
 - 3. HOW TO GET OUR MESSAGE TO OUR TARGETS (What Agency?)**
 - Links to e-mail, You-tube, videos
 - Affiliate with the NFL
 - Brainstormed celebrities’ names

FOR THE ACCESS GROUP:

- Discussed Data Link System used by No Wrong Door in Tarrant Co., Texas.
- Discussed need for training front-line staff (211 trains own staff, NAMI does own training).
- Discussed barriers to access, waiting lists, costs, insurance, shortage of psychiatrists.
- Discussed need of providers to know what services are available in community (local, county, regional).
- **3 Action steps identified**
 - 1. TRI-ANNUAL UPDATES TO PUBLIC/PRIVATE SECTORS**
 - 2. ANNUAL CONFERENCE**
 - **County or UWO to Sponsor**
 - 3. CALL FOR MENTAL HEALTH PROFESSIONALS**
 - **Younger children / middle schools / high schools**

WRAP UP

Still need to address:

- No Wrong Door
- 211

Positives:

- Success for treatment of mental illness is higher than for other illnesses
- NAMI is involved in advocacy of parity for mental health professionals

NEXT STEPS

- Recap @ next meeting in the beginning
- Break into groups
- Reconvene at the end of the meeting
- Our goal is to make a difference
- Encourage participants to put their information on Google Docs. Cheryl will send this out again. When compiled, will print out and distribute.
- Will meet again in a month. Look for a Meeting Wizard.

Respectfully submitted,
Linda Baeten,
Winnebago County Health Dept