

MENtal Health Can't Wait

THE COMMISSION

J Badger Consulting Inc, UPMC,
Allegheny Health Network,
Highmark, My Black Rose and the
Suicide Prevention Alliance have
come together to address the men's
mental health crisis at the regional
level. This collaboration is the first
of its kind, bringing together
professionals, providers, and area
insurers to address stigma and
service provision to devise and
implement innovative initiatives to
reduce the male suicide rate.

APPROACH

Best-in-class experts in healthcare, key community stakeholders for mental health, researchers, and individuals with lived experience are collaborating to move the needle' in response to the crisis of men's mental health. Started by a small catalyst task force, this coordinated effort aligna with the 2020 Pennsylvania Statewide Suicide Prevention Plan and Behavioral Health Commission, October Recommendations to the Pennsylvania General Assembly

MORE INFO

Webpage:

jbadgerconsulting.org/western-pamental-health-strategy-commission/

Email

josie@jbadgerconsultinginc.org

THE FACTS

- > 48,183 Americans died by suicide in 2021
- > 1,885 Pennsylvanians died by suicide in 2021
- PA is ranked 4th in the nation for suicide rates with higher rates in rural counties. Males account for 79% of all suicide deaths.
- For every suicide death, there are 25 other attempts.
- Men in rural areas are 10% more likely to die by suicide rates than those in suburban and urban areas.
- > The CDC states that 59% of communities lack enough access to mental health care to serve residents.

OBJECTIVES

2023-2024 Objectives:

- 1. Operationalize the MENtal Health Commission's structure and implementation plan
 - a. Establish baseline data to benchmark progress
 - b. Build capacity by identifying innovative practices and partners
 - c. Formalize an operating structure for the Commission to work from
 - d. Develop a strategic plan
- 2. Create a comprehensive campaign to reach men, where they are, to address stigma around men's mental health
- 3. Create a county and regional implementation plans:
 - a. County power mapping and SWOT development with stakeholders
 - b. Community member townhall and resource fair to share current supports; identify gaps and community leaders or touch points for men
 - c. Provide culturally responsive mental health first aid and suicide prevention training to community leaders and touch points (faith communities, bartenders, breweries, physical trainers, alcohol distributors, gun stores)

Long-term Objectives:

- 1. Expand capacity of existing services and supports
 - a. Promote effective clinical practices for assessing and treating those at risk
 - b. Expand clinical practices for treating those at risk
- 2. Implementation of campaign and county/regional implementation plans
- 3. Increase training at all levels (from community to clinicians)
 - a. Increase/refine suicide prevention awareness efforts
 - b. Implement culturally appropriate community strategies
 - c. Promote trauma-informed approaches