



# Behavioral and Physical Health



# Why is this initiative important?

Behavioral health encompasses the emotions and behaviors that affect overall physical and mental well-being. Promoting well-being, preventing or intervening in mental illness and substance abuse, and increasing access to care provide residents the opportunity to live to their fullest health potential.

Physical activity, eating healthy and social connection promote health and wellness. Preventative health measures are foundational toward protecting individuals from potential serious health problems in the future.



# What are we doing in this initiative?

The Weld Trust will fund prevention and direct intervention services as well as active living programs to promote an individual's physical and behavioral health.

Additionally, The Weld Trust will support programs focused on establishing healthy relationships and promoting social connectedness.

Finally, The Weld Trust will fund programs for prevention and treatment of substance and opioid use disorders.



# What are the priorities in this initiative?

### **Direct Intervention**

Increase the access to behavioral health treatment, crisis services, and referral networks for Weld County residents.

### **Prevention Services**

Increase support groups, education and programs to support an individual's mental and physical wellbeing.

## **Social Emotional Learning and Supports**

Increase the number of quality programs that promote social connectedness across an individual's lifespan. Additionally, make available social emotional learning in schools that do not currently provide a quality curriculum.

## **Substance Use and Opioid Use Prevention and Treatment**

Increase access to substance abuse treatment programs and education.

### **Active Living**

Increase the participation of children and adults in daily physical activity.

## **Healthy Behaviors/Healthy Relationships**

Educate, equip and empower teens and parents with the skills needed to develop healthy relationships inside and outside their families.



# What are our goals for this initiative?

- Weld County residents will experience a 5% increase in feelings of wellness and good or better health.
- Increase by 10% the number of individuals seeking help for mental health needs resulting in fewer residents with untreated behavioral health problems.
- Decrease in overdose deaths to 10 per 100,000 in Weld County.
- Decrease of 5% in years of potential life lost due to suicide.
- Fewer Weld County residents with untreated behavioral health/substance abuse problems.

#### **Behavioral & Physical Health Logic Model**

Mission Statement: To promote excellence in health and education in Weld County.

To help ensure that Weld County is the healthiest and most educated county in the State of Colorado, The Weld Trust will work with nonprofit agencies, schools, and government entities throughout Weld County to fund behavioral and physical health resources for children, youth, and families in need. The Weld Trust will fund the development of programs for youth in Weld County that focus on mental wellness and will fund crisis intervention resources and services.

#### 1. Fund prevention interventions and services • Activities and support for adults (e.g., mental health professionals, teachers) o Mental Health First Aid o Compassion fatigue • Family-based mental health and substance use prevention programs • Activities/Programs that promote social connectedness School interventions o Social emotional learning for children in Weld County schools 2. Physical Activity • Support the removal of barriers to participate in programs that promote physical activity. (e.g. fees, transportation, convenience, cultural inclusivity) Our approach to addressing 3. Fund direct intervention and services the strategic issues • Co-responders will be: • Telehealth • Innovative accredited therapy methods • Support groups, Group therapy, Man therapy • Peer support educators or specialists • Integrated multi-agency services • Programs that treat substance use disorders and opioid use disorders • Fund the development of mental health specialists and peer support personnel 4. Clinical Care • Fund programs that provide appropriately tailored health materials. (e.g., emphasis on health literacy, cultural appropriateness, inclusivity) • Fund programs that expand service delivery to adequate healthcare

#### **Partner Organizations**

- 1. Educational Entities (School Districts, Charter Schools, BOCES, UNC, Aims Community College)
- 2. Healthcare Facilities (Banner Health, UC Health, Sunrise, Nurse-Family Partnership
- 3. Nonprofit Partners (North Range Behavioral Health, Nonprofits, Local community centers)
- 4. Government Agencies (Weld County Human Services, Weld County Health Department)

#### **Behavioral & Physical Health Logic Model**

#### **Activities TWT will undertake**

#### 1. Data gathering/reporting

#### Primary sources

- Grant outcomes
- Focus groups

#### Secondary sources

- Community Health Improvement Plans
- Weld County Health Department

#### Assessments

- CensusCDPHE

#### 2. Research and surveying

- Identify existing programs
- Identify barriers to access

#### 3. Convening of stakeholders:

- K-12: districts, schools
- Higher Education partners
- Government agencies and stakeholder groups
- Non-profits; service providers
- Community centers
- Other funders

#### 4. Fund opportunities

#### **Outputs**

#### **Prevention Services**

As measured by grant partners:

- # of safety net population served
- # of programs funded that promote access to mental health resources, substance abuse danger education, promotion of social connectedness and harm reduction.
- # of social emotional learning curriculum implemented
- # of students receiving social emotional learning education

#### Physical Activity

- # of participants funded in programs that promote physical activity.
- # of educational materials (pamphlets, website visits) about physical activity distributed by grantees.

#### **Direct Intervention**

As measured by grant partners:

- # of programs funded that provide access to mental health, substance abuse or loneliness interventions.
- o # of participants
- # of mental health interventions for mental health professionals and teachers funded
- o # of participants
- # of crisis support provided in primary language
- # of individuals in crisis connected to immediate support
- # of support groups funded and formed
- o # of participants in programs
- # of treatment programs funded (e.g., medication assisted treatment)
- # of programs/therapists funded
- o Disbursement by population served

#### Health Literacy

- # of programs funded that provide appropriately tailored health materials (e.g., emphasis on health literacy, cultural appropriateness, inclusivity)
- # of residents access funded healthcare programs
- # of programs funded to educate, equip, and empower teens and parents with the skills needed to develop healthy relationships with themselves and others

#### Immediate Outcomes 0-4 years

#### **Prevention Services**

As measured by grant partners:

- 5% increase in programs that promote social connectedness across lifespan o Measured by Thriving Weld
- 5% increase in children with at least one trusted adult
- Provide access to social emotional learning in schools that do not currently provide a curriculum
- Increased #/% participation in programs that provide education and resources to deter substance abuse.

#### **Physical Activity**

- Increase in # of participants in funded physical activity programs
- #/% program participants report increased activity levels
- #/% of program participants report increased knowledge of available resources for healthy physical activity and how to access them.

#### **Direct Intervention**

As measured by grant partners:

- 5% increased access to behavioral health/ substance abuse interventions and services
- 5% increase in programs funded that promote social connectedness
- 2% increase co-responders, peer educators/ mentors, and support groups in Weld County
- Decreased waitlist for individuals seeking help

#### Health Literacy

 % participants report increases in self-efficacy and knowledge of healthy relationships

## Intermediate Outcomes 4-8 years

#### **Prevention Services**

As measured by grant partners:

- 5% increase in sense of belonging and connectedness
- 10% increase in reporting of a positive mentor
- 10% increase of individuals with mental health illness who get treatment
- 10% increase in self-awareness coping skills, self-management skills, and emotional regulation

#### Direct Intervention

As measured by grant partners:

- 10% increase in accessible treatment and referral networks for residents
- 5% decrease in substance use disorder/opioid use disorder

#### **Health Literacy**

 Increase in # of patients utilizing funded healthcare programs for continuing or follow-up care

## Long-term Outcomes/Impact 8+ years

## Weld County residents will experience:

As measured by the Community Health Assessment Survey:

- 5% increase in feelings of wellness and good or better health
- 10% increase in help seeking; decreased stigma with mental health help-seeking;
- Fewer Weld County residents with untreated behavioral health/substance abuse problems
- Decrease in overdose/ poisoning deaths in Weld County to 10 per 100,000
- 5% decrease in Years of Potential Life Lost

#### ASSUMPTIONS and ECOSYSTEM

Mental illness is defined as health conditions characterized by alterations in thinking, mood, or behavior associated with distress or impaired functioning. Mental health conditions are strongly related to risk behaviors and chronic diseases (WCDPHE, 2019).

Mental health conditions are more prevalent in residents who earned less than \$25,000 per year (45.5%) compared to residents who earned more.

Countywide, nearly 3 in 10 people (28%) indicated they currently had depression, anxiety, or another mental health condition. Current mental health conditions were more prevalent with those who earned less than \$25,000 per year (45.5%) compared to those who earned more. Of those who reported they currently had a mental health condition, 55% reported seeking out mental health treatment or counseling services and 46% reporting currently taking medicine for their mental health condition (WCDPHE, 2019).

Of those who reported they needed mental health services but did not seek out care reported they did not have the time (62%), they could not afford it (56%), it was not covered by insurance (51%) or that they did not know where to seek treatment (51%). Over 1 in 3 (32%) residents that needed mental health services but did not seek out treatment reported that they were worried about friends or family having a negative opinion of them (WCDPHE, 2019).

- Nearly 1 in 10 (8.9%) youth were diagnosed with anxiety disorders in 2019 and 2020, representing over 7,000 youth in Weld County (WCDPHE, 2021).
- 1 in 5 (20%) youth reported engaging in self-harm behaviors and over 1 in 3 (37%) reported feeling sad or hopeless almost every day for 2 weeks over the past 12 months
- Minority populations and low-income populations are the least likely to have access to mental health treatments.
- Adolescence is a crucial time to promote mental well-being, as it is a time when areas of the brain are forming connections that will influence functioning long into adulthood. Research suggests that at least half of mental disorders in adulthood have their onset during the critical years of adolescence.
- Negative mental health outcomes influence other health outcomes, with impacts on academic success, social and health behavior, and socio-economic outcomes, meaning the promotion of positive mental health during this time can have lifelong benefits for individuals and communities.
- There is strong evidence that social support, defined as emotional warmth and care that a group provides to the needs, desires, and plans of the individual, is linked to lower levels of depression, anxiety, and loneliness.

According to the National Alliance on Mental Illness, 60 million Americans live with mental health conditions, yet only half receive treatment. In Weld County, 27.8% of residents said they needed mental health care or counseling services in the 12 months prior to being surveyed. This represents a 50% increase in the number of residents who said they needed counseling from 2016 (19%) (WCDPHE, 2019). This was highest among the younger adult age group (18-34 years, 46%).

#### Social emotional learning:

- Social emotional learning (SEL) is an integral part of education and human development. SEL is the process through which all young people and adults acquire and apply the knowledge, skills, and attitudes to develop healthy identities, manage emotions and achieve personal and collective goals, feel, and show empathy for others, establish and maintain supportive relationships, and make responsible and caring decisions.
- SEL has a powerful combination of evidence and support. Findings from multiple fields, sources, analyses of hundreds of studies show SEL leads to beneficial outcomes related to social and emotional skills; attitudes about self, school, and civic engagement; social behaviors; conduct problems; emotional distress; and academic performance.
- A study out of Columbia University shows that for every dollar invested in SEL programming, you save \$11 that would have been spent on costly interventions, remediation, dropout prevention, recovery, etc.
- Not only do 56% of educators believe resources to support SEL in the classroom will be most critical post-pandemic, but 82% agree that a well-crafted, fully integrated SEL approach makes an impact on outcomes.
- Eighty percent of educators from across 15 countries believe positive emotions are critical for academic success, and emotional well-being is crucial for developing foundational literacies and communication skills.

The National Association of School Psychologists recommends a psychologist to student ratio of 1:500, in Colorado, the ratio is 1:1,200 to 1:1,500.

#### Substance use disorder; Evidence based hub for prevention

- 49% of Weld County adults use alcohol; 31% of adults in Weld County report binge drinking, compared to 19% in Colorado
- Weld County has a higher opioid prescription rate (724 per 1,000) than Colorado (671 per 1,000). High school student prescription pain misuse is higher in Weld County (13%) than in Colorado (12%)

  The rate of suicide in Weld County male residents was 4x higher compared to female residents. Suicide is one of the leading causes of death among young people. Suicide rates have increased in almost every state over the last 2 decades. Interventions to address behaviors that increase the risk of suicide, like drug and alcohol misuse, may help reduce the suicide rate nationwide. Family-based mental health and substance use prevention programs may help reduce teen suicide attempts.
- The age-adjusted suicide rate in Weld County continues an upward trend and is one of the top contributors to premature death in the county (WCDPHE, 2021).
- The rate of suicide in Weld County male residents was 4x higher compared to female residents (WCDPHE, 2021).

#### ASSUMPTIONS and ECOSYSTEM (continued)

#### Medication Assisted Treatment (MAT)

- MAT is an FDA-approved medication to treat opioid addiction (a dependence on prescription pain killers such as Vicodin, Oxycontin, Percocet and other drugs such as Heroin and Fentanyl). MAT helps to stop the withdrawal symptoms and cravings and makes it easier for you to get your life back.
- Medication-assisted treatment (MAT) is the use of medications, in combination with counseling and behavioral therapies, to provide a "whole-patient" approach to the treatment of substance use disorders.
   Medications used in MAT are approved by the Food and Drug Administration (FDA) and MAT programs are clinically driven and tailored to meet each patient's needs.
- Research shows that a combination of medication and therapy can successfully treat these disorders, and for some people struggling with addiction, MAT can help sustain recovery. MAT is also used to prevent or reduce opioid overdose.
- In 2018, an estimated 2 million people had an opioid use disorder which includes prescription pain medication containing opiates and heroin. MAT has proved to be clinically effective and to significantly reduce the need for inpatient detoxification services for these individuals. MAT provides a more comprehensive, individually tailored program of medication and behavioral therapy that address the needs of most patients.
- o The ultimate goal of MAT is full recovery, including the ability to live a self-directed life. This treatment approach has been shown to: Improve patient survival; Increase retention in treatment; Decrease illicit opiate use and other criminal activity among people with substance use disorder; Increase patients' ability to gain and maintain employment; Improve birth outcomes among women who have substance use disorders and are pregnant.

One Healthy People 2030 goal is to increase the proportion of adolescents with depression who get treatment- The earlier young people get treatment for depression, the more effective it can be. Early treatment can also help prevent more severe, long-term problems as children and adolescents get older. But many adolescents with depression don't get treatment. Treatment plans that connect primary care providers, patients, and mental health specialists can help adolescents get the care they need. The U.S. Preventive Services Task Force recommends screening for major depressive disorder (MDD) in adolescents aged 12 to 18 years. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up. Depression is a leading cause of disability in the United States.

Children and adolescents with MDD typically have functional impairments in their performance at school or work, as well as in their interactions with their families and peers. Depression can also negatively affect the developmental trajectories of affected youth.

Major depressive disorder in children and adolescents is strongly associated with recurrent depression in adulthood; other mental disorders; and increased risk for suicidal ideation, suicide attempts, and suicide completion.

- \*\*\*\* Most of the Co-Responder Services are funded from the Marijuana Tax Cash Fund (39-28.8-501 C.R.S). There are four ways Co-Responder Services are funded.
- 1. SB 17-207 (Strengthening Colorado's Statewide Crisis Response to Behavioral Health Crises) authorized the development and implementation of eight new Co-Responder Programs throughout Colorado. OBH currently has contracts with eight local government agencies through June 30, 2022 with an allocated amount of \$2.9 Million per year.
- 2. Offender Behavioral Health Services funding also supports a number of programs. OBH contracts directly with community mental health centers. For more information about Offender Behavioral Health Services funding, please go to the OBHS page.
- 3. \$400,000 per year has been allocated from the Mental Health Block Grant to help support two programs.
- 4. SB 19-008 (Concerning Treatment of Individuals with Substance Use Disorders Who Come Into Contact With the Criminal Justice System) authorized the development and implementation of five new Co-Responder Programs throughout Colorado. OBH currently has contracts with five local government agencies through June 30, 2024 with an allocation of \$1.4 million per year.
- In Weld County: Greeley Evans Mobile (GEM) at Evans and Greeley Police Departments in partnership with North Range Behavioral Health
- Community Action Collaborative, a partnership between North Range Behavioral Health, Greeley Fire Department (community paramedic), Greeley and Evans Police Departments and Northern Colorado Health Alliance.