

MENTAL HEALTH WEEKLY

Essential information for decision-makers

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Mental health is gaining momentum as a high profile topic among students, says the founder of a national organization helping students organize around mental health awareness and helping them connect with on- and off-campus mental health resources. Students, and even some parents, are demanding more attention to student mental health concerns from college and university administrators. Five colleges and universities have been honored for taking a university-wide public health approach to student health and wellness.

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Field makes the case for comprehensive mental health reform during Hill visit

It would seem only fitting that a week (October 5–11) designated as National Mental Illness Awareness Week would include behavioral health advocates, consumers and providers descending on Capitol Hill to talk with federal and local lawmakers about comprehensive mental health and addiction reform, along with movement on multiple bills pending before Congress.

Bottom Line...

Following the success of Hill Day, the field expects to learn about more co-sponsorships of key mental health and addiction legislation.

The National Council for Behavioral Health hosted its 11th Annual Hill Day in Washington, D.C., October 5–6, with nearly 600 attendees.

Paul Gionfriddo, president and CEO of Mental Health America, in an interview with *MHW* a week before, said he, along with leaders of the National Council, the National Alliance on Mental Illness (NAMI), the American Psychiatric Association and The Kennedy Forum, will meet with members of Congress. “We’re talking to them about the need for mental health legislation, mental health reform and the comprehensiveness of it,” Gionfriddo said.

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National advocate sees progress in mental health awareness at colleges

The founder of a national organization that helps students organize around mental health awareness on college campuses believes mental health has traditionally lagged about a decade behind substance misuse as an emerging campus issue. But Alison Malmon of Active Minds Inc. says mental health is gaining momentum as a high-profile topic, driven in large part by a generation of students that takes a more open attitude about emotional health.

“This generation grew up with Prozac advertised on television,”

Bottom Line...

Students and even parents are driving change on college campuses, moving to ensure that campus mental health issues receive their due attention in overall health promotion.

Malmon told *MHW*. “They grew up without a level of stigma that existed in their parents’ and grandparents’ generation.”

Students, in some cases joined by parents, are demanding more attention to student mental health concerns from college and university administrators across the country. At the University of Pennsylvania, for example, a number of suicides on campus led to the formation of a student and parent group that last month met with university administration and received a mixed response to half a dozen proposals for changes in how mental health issues are addressed at the school.

“On campuses, students are often the ones who drive change,” said Malmon. “Offices outside of the counseling center are now recognizing”

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Added Gionfriddo, "People have waited a long time for there to be some action. This is the time to act."

Heightened awareness

"The good news is there is a lot of awareness on Capitol Hill regarding the need to improve access to and quality of mental health services," Chuck Ingoglia, senior vice president of public policy and practice improvement at the National Council, told *MHW*.

Ingoglia added, "The trickier part is that there is not a lot of money floating around Capitol Hill. Overall, our members are encouraged by the level of support received by policymakers."

Key legislation on the field's radar includes Rep. Tim Murphy's (R-Pa.) Helping Families in Mental Health Crisis Act and Sen. Chris Murphy's (D-Conn.) Mental Health Reform Act of 2015.

Additionally, the National Council asked for congressional support of:

- The Mental Health First Aid Act.
- The Comprehensive Addiction and Recovery Act.
- Comprehensive mental health and addiction reform.
- FY 2016 mental health and substance use appropriations.

- The Mental Health Access Improvement Act of 2015.

Ingoglia said the National Council is encouraged about the number of new co-sponsors on many of these bills. "Those figures will continue to trickle in," he said.

"There remains a lot of interest in passing a mental health bill," said Ingoglia. "It's hard to predict whether one will pass before the end of the year. We remain hopeful."

'People have waited a long time for there to be some action. This is the time to act.'

Paul Gionfriddo

Andrew Sperling, director of federal legislative advocacy for NAMI, was also encouraged about the turnout on Hill Day. Collectively, attendees visited with more than 350 members of Congress and their staff, Sperling told *MHW*.

Additionally, there's hope of additional co-sponsors for such legislation as the Mental Health First Aid Act (S. 711/H.R. 1877) — which au-

thorizes \$20 million for training the public to recognize the symptoms of common mental illnesses and substance use disorders — and the Comprehensive Addiction and Recovery Act (S. 524/H.R. 953), he said. "We'll see the fruit of that labor over the next couple of days," Sperling said.

Sperling added, "We're hopeful and optimistic that the House Energy and Commerce Committee will mark up a [mental health reform] bill before the end of the year." A potential wrinkle in this process is the absence of a new speaker of the House, he said.

On October 8, House Majority Leader Kevin McCarthy pulled out of the race to be House speaker. A lead speaker in the House is needed before a bill can even be presented to the full House, said Sperling.

Positive attention

Debra Wentz, Ph.D., CEO of the New Jersey Association of Mental Health and Addiction Agencies, Inc. (NJAMHAA), said the association's membership is encouraged that the mental health and addiction legislation is receiving a lot of positive attention. "We visited with all but two of our 15 members of Congress," she told *MHW*.

Regardless of which reform bill passes Congress, Wentz said the

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NJAMHAA has a number of provisions they would like to see make up a comprehensive behavioral health bill, including federal parity enforcement, removal of the Institutions for Mental Disease (IMD) exclusion, addressing the shortage in the behavioral health workforce and expansion of the Excellence in Mental Health Act.

The NJAMHAA would like to see a provision stating that providers may bill Medicaid for behavioral health and physical health services on the same day, noted Wentz. The provision is currently in the House and Senate reform bills.

There's also been a long-awaited need for behavioral health information technology incentives, said Wentz. "Addiction and mental health providers have never received the meaningful use dollars that hospitals, nurses and practitioners receive," she said.

The HITECH (Health Information Technology for Economic and Clinical Health) meaningful use incentive payments are currently not available for community mental health centers, psychologists, and outpatient and residential substance use treatment providers.

The removal of the IMD exclusion is also high on the NJAMHAA's agenda. The outdated federal law prohibits federal Medicaid matching payments for IMDs — institutions of more than 16 beds provided for diagnosis, treatment and care of individuals with mental diseases. There has been some discussion of removal of the IMDs, said Wentz. "There are huge barriers to that," she said. "It will not be budget-neutral unless you cut really important services."

Other legislation important to the NJAMHAA includes the 21st Century Cures Act (H.R. 6), the Mental Health in Schools Act (H.R. 1211) and the Comprehensive Justice and Mental Health Act of 2015 (S. 993/H.R. 1854).

Strengthening federal oversight of parity enforcement is very impor-

Continues on next page

Gun control discussions heat up in aftermath of Oregon tragedy

When a gunman opened fire on students at Umpqua Community College in Oregon on October 1, killing nine of them, including himself, the reaction predictably was focused on mental illness but even more so on the need for gun control.

The executive director of a New York-based advocacy organization says that this time there appears to be a more "balanced approach," when talking about both issues. "Each tragedy turns the blame on people with mental illness," Harvey Rosenthal, executive director of the New York Association of Psychiatric Rehabilitation Services, told *MHW*. "I'm gratified that there is so much focus on gun control."

People with mental illness are scapegoated, in part by the National Rifle Association and gun control opponents, said Rosenthal. "The issue is deferred to mental illness. They're much more interested in looking at mental health-related issues," he said.

President Obama talked about gun control in his remarks following the Oregon shooting. "We see mass shootings every few months," Obama said during a press conference. "It cannot be this easy for someone who wants to inflict harm on other people to get his or her hands on a gun.... Congress explicitly blocks us from even collecting data on how we could potentially reduce gun deaths. How can that be?"

Rep. Nita Lowey (D-N.Y.) in June experienced another failed attempt to include an amendment that would have reversed a nearly 20-year-old ban on funding for the Centers for Disease Control and Prevention to conduct research on gun violence.

"Gun violence is one of the leading causes of death of Americans, and yet Congress indefensibly prohibits our public health researchers from studying this public health crisis," Matt Dennis, communications director for the House Appropriations Committee — Democrats, told *MHW*. "How many more tragedies will it take before Congress catches up with the American public and realizes commonsense gun safety measures — like allowing research on gun violence causes and prevention strategies — are critical to keeping the American people safe?"

The Huffington Post on October 6 carried an interview with Rep. Jay Dickey (R-Ark.), who authored the 1996 amendment restricting funding for gun violence research and said he wishes Congress would change it. "I wish we had started the proper research and kept it going all this time," Dickey said. "I have regrets."

Rosenthal pointed out eerie similarities between the shooter in Oregon and Adam Lanza, the shooter in the Newtown tragedy. Both had Asperger's syndrome and were raised by mothers who shared an interest in guns, he said. *The New York Times* reported that Laurel Harper, mother of the gunman, Christopher Harper-Mercer, said she and her son struggled with Asperger's syndrome, an autism spectrum disorder. She also noted that she and her son shared an interest in guns and that several firearms were kept in the home.

"There has to be a distinction between a mental health and a greatly wounded person with the desire to kill," said Rosenthal. "When someone says 'you have to be crazy to do that,' it doesn't mean that the person has a mental illness. That's not the definition of mental illness. It's a series of formal, prescribed conditions. People are looking for a quick fix. The answers are complex."

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tant, said Wentz. “It’s going to take all of us — community groups, the insurance departments that provide oversight — to make that happen,” she said.

New Jersey is one of eight states that will receive a two-year planning grant for Certified Community Behavioral Health Clinics (CCBHCs), Wentz noted. The clinics will pro-

vide a range of evidence-based outpatient and crisis care while meeting defined quality standards. “This [grant program] really needs to be expanded,” said Wentz.

An expansion of CCBHCs would also address the workforce shortage, she said. The NJAMHAA is also building a strong case to support peer support and peer-run services — another way of expanding the

workforce, Wentz said.

Overall, legislative support for New Jersey priorities was well-received on the Hill, she said. “I feel very positive about Hill Day,” said Wentz. “In New Jersey we maintained strong relationships with our delegation and with other congressional members. We’ve always tracked federal legislation. We’ve been doing this for 20 years.” •

Improved care, quality outcomes aim of CMS award grantees

Launching a national network of learning collaboratives, supporting primary care practices and improving quality of care while spending health care dollars more wisely are among the activities planned by at least two of the 39 organizations selected by the Centers for Medicare & Medicaid Services (CMS) as part of a new grant initiative to transform clinical practices.

The CMS on September 29 announced awards of \$685 million to 39 national and regional collaborative health care transformation networks and organizations to support 140,000 clinician practices nationally over the next four years. The Transforming Clinical Practice Initiative is one of the largest federal investments designed to support clinician practices through nationwide, collaborative and peer-based learning networks that facilitate practice transformation, said officials.

The initiative is geared toward helping clinicians achieve large-scale health transformation and to develop comprehensive quality improvement strategies, federal officials said. The initiative, they said, aligns with the criteria for innovative models set forth in the Affordable Care Act:

- Promoting broad payment and practice reform in primary care and specialty care.
- Promoting care coordination between providers of services and suppliers.
- Establishing community-based

Bottom Line...

Leaders of two grantee organizations discuss plans to help clinicians incorporate evidence-based programs into practice operations and implement integrated care programs.

health teams to support chronic care management.

- Promoting improved quality and reduced cost by developing a collaborative of institutions that support practice transformation.

in the Collaborative Care Model, Saul Levin, M.D., MPA, CEO and medical director of the APA, told *MHW*. The proposed network of 3,500 psychiatric consultants will be able to support approximately 150,000 primary care providers for more than one million individuals with common mental health and substance use problems in primary care clinics around the United States, he said.

Levin added, “For several years, the APA has identified collaborative care as an important practice skill for psychiatrists and a necessary

‘For several years, the APA has identified collaborative care as an important practice skill for psychiatrists and a necessary measure to increase patient access.’

Saul Levin, M.D., MPA

APA activities

The American Psychiatric Association (APA), an award recipient, will receive up to \$2.9 million over four years to train a network of practicing psychiatrists throughout the United States in the clinical and leadership skills needed to support primary care practices that are implementing integrated behavioral health programs, said APA officials.

Overall, 3,500 psychiatrists throughout the country will be trained

measure to increase patient access.”

“The ultimate goal of the Collaborative Care Model is to improve access to care and satisfaction of care, improve clinical outcomes, reduce costs and promote high-quality care,” Renée Binder, M.D., APA president, told *MHW*. It’s also a mechanism for early intervention and prevention of mental health services and to improve access to services, she said.

“Many mental health conditions,

including depression and anxiety, can be effectively treated in the primary care setting utilizing the Collaborative Care Model and midlevel practitioners with oversight and consultation with psychiatrists,” Binder added.

According to APA officials, the organization will be working in partnership with the Advancing Integrated Mental Health Solutions (AIMS) Center at the University of Washington, to conduct the trainings. The learning objectives include developing team communication skills that differentiate between the different cultures of behavioral health and primary care, learning how to use a disease management registry to support population-based caseload consultation and treatment adjustment, and leading a team to integrate mental health into a primary care setting.

National Council

National Council for Behavioral Health officials say the organization will receive \$7.7 million in the first year of its four-year grant to provide technical assistance to clinicians

serving individuals with serious mental illnesses in New York, with the ultimate goal of improving quality of care, increasing patients’ access to information and spending health care dollars more wisely.

As a Practice Transformation Network, the National Council intends to support 4,000 clinicians to utilize technology-enabled care coordination and a broad continuum of evidence-based clinical interventions in order to reduce hospitalization rates for New Yorkers with serious mental illness, according to the National Council.

“In the health care environment, there is a lot of focus on reducing unnecessary admissions to hospitals generally,” Chuck Ingoglia, senior vice president of public policy and practice improvement for the National Council, told *MHW*. The National Council’s goals are in alignment with that goal of trying to do better when transitioning people with psychiatric disorders from the hospital into the community, Ingoglia said.

Consumers with psychiatric disorders will receive evidence-based

outpatient care and care management interventions, he said. The National Council has four partners involved in this initiative, including Montefiore Medical Center in the Bronx, North Shore Long Island Jewish Medical Center, the New York Office of Mental Health and Netsmart. “We will work cooperatively with all partners to bring technical support [assistance] to New York state,” said Ingoglia.

The National Council’s formal learning collaborative will be offered to primary care hospital or specialty behavioral health facilities. Training with Montefiore and North Shore LIJ training will be related to care transition, engagement and evidence-based practices, Ingoglia said.

“We envision over four years of the grant enrollment will total four-thousand clinicians who would work in community-based behavioral health and primary care settings,” said Ingoglia. “We hope the learning program will prove valuable to behavioral specialty and primary care clinics and be able to show improved outcomes for consumers with serious mental illness.” •

MHA urges lawmakers to update patient consent process

During a week laden with calls from advocates, providers and consumers on Capitol Hill for mental health reform and comprehensive legislation, Mental Health Association (MHA) and Netsmart officials are urging lawmakers to update and streamline the patient consent process to reflect new models of health care.

MHA and Netsmart officials on October 6 announced support for legislation that would update 42 CFR Part 2 — federal regulations governing the confidentiality of drug and alcohol abuse treatment and prevention records.

These regulations were enacted

in 1987 by the U.S. Department of Health and Human Services and authorized by the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation Act of 1970 and the Drug Abuse Prevention, Treatment, and Rehabilitation Act of 1972.

Current complex patient consent requirements make it difficult or impossible for patients and providers in new integrated care settings like Health Information Exchanges, Accountable Care Organizations and Medicaid Health Homes, said officials. The regulations, they said, are a barrier in these care settings to share patient data related to substance use disorders and co-occurring physical and behavioral health conditions.

“The federal regulation, dating back 45 years, has prevented the sharing of substance abuse diagnoses at the same time information is being shared about other health issues,” Paul Gionfriddo, president and CEO of MHA, told *MHW*. “Fast-forward to a reformed mental health system and the integration of behavioral health overall — an impediment has been created that doesn’t permit the widespread sharing of information on the behavioral health side.”

Gionfriddo added, “You have to treat the whole person. Right now we’re only treating half the person [with half the data]. This is the biggest remaining obstacle.” It’s important to move treatment and services information into regular health set-

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tings, Gionfriddo said. “It’s time to repeal it [42 CFR],” he said. Gionfriddo said he has spoken to lawmakers about these concerns.

Patient privacy protection

“Misinformation is rampant about these proposed changes,” Kevin Scalia, executive vice president of corporate development for Netsmart, said in a press release. “Patient privacy will still be protected, while consent procedures will be streamlined, enabling people to experience the full benefits of coordinated, integrated care.”

Scalia added, “Patients will still be required to provide consent for their records to be shared with providers, and they could still opt out at any time.”

The Mental Health Access Improvement Act of 2015 (S. 1830/H.R. 2759), sponsored by Sens. Lamar Al-

exander (R-Tenn.) and Patty Murray (D-Wash.) includes a request for a Government Accountability Office report on 42 CFR Part 2 as well as requirements impacting access to mental health and substance use disorder treatment related to integration with primary care, administrative and regulatory issues, quality measurement and accountability, and data sharing.

Rep. Tim Murphy’s (R-Pa.) bill, Helping Families in Mental Health Crisis Act of 2015 (H.R. 2646) and The Mental Health Reform Act of 2015 (S. 1945) introduced by Sens. Chris Murphy (D-Conn.) and Bill Cassidy (R-Ala.), include provisions related to the 42 CFR Part 2 consent reform.

Letter to lawmakers

Jim Bialick, president of the Patient Safety Movement Foundation,

noted in a letter to lawmakers that outdated 42 CFR Part 2 regulations are a concern for patient safety. The August 19 letter to Rep. Fred Upton (R-Mich.) and Frank Pallone (D-N.J.), chairman and ranking member, respectively, of the Energy and Commerce Committee, expressed the need for 42 CFR Part 2 changes in the context of a “technology-enabled healthcare system that treats all patients equally, particularly those with substance abuse or mental health problems.”

“By simplifying Part 2 patient/consumer consents in Health Information Exchanges, Medicare Accountable Care Organizations and Medicaid Health Homes, the sharing of addiction medical records could make an enormous contribution to the integration of addiction treatment, primary care and medical specialty services,” Bialick wrote. •

Advocacy publication targets N.Y. schools, youth about MH

Citing a growing concern about the number of youth with mental health issues coupled with limited resources in schools, the Mental Health Association in New York State (MHANYS) is publishing a quarterly newsletter to not only educate students, teachers and parents about mental health issues and point them to available resources and services, but also to highlight the need for greater understanding of these issues among youth.

The inaugural issue of *Healthy Young Minds* covers such topics as research updates, mental health facts for teens, and various ways parents and educators can work together to reduce student stress.

“Right now, students from kindergarten to high school have never heard such words as depression, anxiety or suicide prevention,” MHANYS CEO Glenn Liebman told *MHW*. “They never hear about it. The statistics are very impactful. We need to be able to do more.”

Liebman added, “We recognize

that anxiety and mental health issues are prevalent among youth. The association has also seen enough of prevention and early intervention strategies to realize its significance in helping youth with mental health issues. We felt it was really a sign for us to get involved in working with schools and young people.”

Healthy Young Minds, a free newsletter, will publish quarterly and be distributed to as many schools throughout the state as possible, said Liebman. It is also available as an e-newsletter.

Liebman pointed to research by Indiana University noting that up to 30 percent of students experience anxiety that can have significant negative impact on their ability to perform at an optimal level. “The newsletter will be useful,” he said. MHANYS has 30 affiliations in 52 counties across the state. When consumers raise questions about youth and mental health-related issues, MHANYS can point to any one of its

affiliations for source information, he said.

The newsletter includes information about local and national resources, such as the New York State Association of School Psychologists, the National Suicide Prevention Lifeline and Youth Mental Health First Aid.

“There has to be a strong message out there to the community,” he noted. Liebman said he is encouraged about Assembly and Senate bills that would ensure that school health curricula include mental as well as physical health.

One bill was introduced by Sen. Rich Funke and Assemblymember Aileen Gunther. A second bill has been introduced by Education Committee Chairs Sen. Carl Marcellino and Assemblymember Catherine Nolan. “We are excited because for the first time we have the same bill in the Senate and Assembly,” said Liebman. •

For more information about *Healthy Young Minds*, visit www.mhanys.org.

COLLEGES from page 1

ing the importance of mental health on students' well-being."

Organization history

Malmon was a college freshman when her 22-year-old brother Brian committed suicide; he had taken a leave from his studies at the time of his death. She would form a group on her own campus to encourage dialogue on mental health issues, then after graduating founded the nonprofit Active Minds.

The organization creates a structure for students to organize chapters on campus, also emphasizing connecting students to all available on- and off-campus resources for mental health. Also, "We train stu-

dent component of health."

Active Minds this year honored five colleges and universities that it says have taken a universitywide public health approach to student health and wellness, with its annual Healthy Campus Award. "At each of these diverse institutions, student health is written into their strategic plan, valued by their president, and prioritized in staffing, structure, policy and programming," Active Minds states on its website. This year's honored institutions are:

- **Cornell University**, which features widespread implementation of "Notice and Respond Training" and provides easy access to counseling at multiple locations on campus.

- **Western Washington University**, where students have 24-hour access to health providers and where freshmen receive comprehensive training for achieving personal wellness and maintaining healthy relationships.

Active Minds said of these schools, "They are thoughtfully using data and evaluation to shape and strengthen their efforts and they are enthusiastically dedicated to ongoing improvement, investment and sustainably supporting student health for the long-term."

One campus's journey

Mental health service needs have been a high-profile issue at the University of Pennsylvania since the death of a scholar-athlete by suicide in 2014. Also, a 2013 suicide has led to a lawsuit filed by the young woman's family, accusing the school of not providing sufficient support to the student. A group of Penn students and parents recently established the Hamlett-Reed Mental Health Initiative, named after two other suicide victims.

That group last month wrote a letter to the university president, stating that seven Penn students had died by suicide in the past two years and not enough was being done on campus to promote mental wellness, *The Philadelphia Inquirer* reported. A university task force had previously used the term "Penn Face" to describe Penn students who mask their mental health struggles, but the student and parent group said that panel had not proposed meaningful solutions.

The group's letter led to a meeting last month with university administrators, at which several proposals from the group were discussed. *The Daily Pennsylvanian* reported that administrators agreed to explore some of the proposals, such as assigning students to a wellness counselor as well as an academic adviser. They also agreed to

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'On campuses, students are often the ones who drive change. Offices outside of the counseling center are now recognizing the importance of mental health on students' well-being.'

Alison Malmon

dents to do on-campus advocacy," Malmon said, for actions such as listing mental health hotline contact information on student ID cards and including mental health-related education and programming during student orientation.

Active Minds does not present these ideas as a one-size-fits-all list for all campuses to adopt, Malmon said. "We give [students] the flexibility to do what makes the most sense," she said.

Progress on campus

"There is so much more attention to mental health issues than there was 15 years ago when I first got involved," said Malmon. "There is more work to be done, but we're definitely seeing more of a focus on the fact that mental health is a core

- **University of Minnesota**, which developed a Provost's Committee on Student Mental Health after concluding that mental health was the most-pressing public health issue affecting its student body.

- **University of North Carolina at Greensboro**, where programs include a learning community to promote wellness among first-year students and an institute for health promotion for student-athletes.

- **University of Texas**, which secured \$2.5 million to establish an after-hours crisis intervention hotline and bystander intervention training. It also created a "BeVocal" initiative to promote recognition of potentially harmful situations.

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review the university's leave-of-absence protocols, in response to a request that students who take a leave for mental health reasons not be penalized in any respect.

Other proposals were rejected by university administration, including a request that students be regularly e-mailed with a newsletter on mental health issues. Also, administrators denied a proposal that students be allowed to maintain anonymity when scheduling an initial counseling visit. The university concluded that allowing this would interfere with the goal of establishing a strong therapeutic relationship between the student and the counselor. •

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STATE NEWS

Florida settlement means more options for people with MI

Florida's Department of Children and Families (DCF) settled a lawsuit between Disability Rights Florida, in part by providing more options for people with mental illness, like having them live in communities as opposed to state hospitals, CBS Miami reported September 28. The advocacy group sued the department on the grounds that Florida was violating the Americans with Disabilities Act by not providing enough community placements for people who were ready to be discharged from mental hospitals overseen by the DCF. "We noted that there were individuals in there who were declared ready for discharge, yet they weren't being discharged because there was nowhere for them to go," Molly Paris, a Disability Rights Florida staff attorney, said. "The law-

Coming up...

The 62nd annual meeting of the **American Academy of Child and Adolescent Psychiatry** will be held **October 26–31** in **San Antonio, Texas**. Visit www.aacap.org for more information.

The **Association of Community Living Agencies in Mental Health** is hosting its 36th annual conference **November 3–6** in **Bolton Landing, N.Y.** For more information, visit <http://aclnys.org/education-and-events/aclaimh-conference>.

The **National Association of County Behavioral Health and Developmental Disability Directors** will hold its 56th annual National Dialogues on Behavioral Health Conference, "Preventing the Criminalization of Persons with Mental Illness: Solutions and a Call to Action," **November 8–11** in **New Orleans**. For more information, visit <http://nationaldialoguesbh.org>.

Children and Adults with Attention-Deficit/Hyperactivity Disorder will be hosting its 27th annual International Conference on ADHD **November 12–14** in **New Orleans**. Visit www.chadd.org/Training-Events/Annual-International-Conference-on-ADHD.aspx for more information.

The 26th annual conference of the **National Federation of Families for Children's Mental Health** will be held **November 20–22** in **Washington, D.C.** For more information, visit www.ffcmh.org/conference.

suit was an effort to get the state to provide more resources in the community." Paris said that in 2013, advocates noticed a pattern that people would be discharged from the state hospitals to the community, and often were placed in assisted-living facilities, which Paris described as "like a mini-institution.... That's not really normalization.

That's not like living in the community." The settlement came as Gov. Rick Scott calls for more coordination and better streamlining of the state's mental health services. Last week, Scott said he'll propose more than \$19 million for mental health and substance abuse treatment in his recommended budget for the fiscal year that will start July 1, 2016.

In case you haven't heard...

U.S. Reps. Carlos Curbelo (R-Fla.) and Grace Napolitano (D-Calif.) have teamed up to introduce a proposal that would create a special postage stamp — the proceeds of which would go toward raising awareness of mental health issues, *Sunshine State News* reported September 30. Curbelo and Napolitano on September 29 introduced the "Mental Health Awareness Semipostal Stamp Act," creating the special stamp with revenues going to the National Institute of Mental Health's Brain Research through Advancing Innovative Neurotechnologies (BRAIN) Initiative. Curbelo and Napolitano said their proposal would not cost taxpayers. "The BRAIN Initiative has the potential for revolutionary breakthroughs in the fields of neuroscience and psychology," Curbelo said. "With this new data, doctors, researchers and families would be better able to diagnose and assist those suffering." Added Napolitano: "The Mental Health Awareness Semipostal Stamp will not only raise revenue to fund research of mental illness, but also raise critical awareness of an issue that affects one in four Americans." The BRAIN Initiative is a public-private partnership working on understanding how the brain works in efforts to better tackle disorders, including depression, Alzheimer's disease, Parkinson's disease, schizophrenia and other disorders.