

CDC's Behavioral Health Priorities and Future Directions

Preventing substance use, overdose, and suicide, and promoting mental health

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NASEM Meeting: *Blueprint for a National Prevention Infrastructure for Behavioral Health Disorders*

The Context: Mental Health as a Public Health Issue

Key Indicators of Adolescent Mental Health in the U.S. are Worsening

The Percentage of High School Students Who:*	2011 Total	2013 Total	2015 Total	2017 Total	2019 Total	2021 Total	Trend
Experienced persistent feelings of sadness or hopelessness	28	30	30	31	37	42	
Experienced poor mental health	–	–	–	–	–	29	–
Seriously considered attempting suicide	16	17	18	17	19	22	
Made a suicide plan	13	14	15	14	16	18	
Attempted suicide	8	8	9	7	9	10	
Were injured in a suicide attempt that had to be treated by a doctor or nurse	2	3	3	2	3	3	

LEGEND

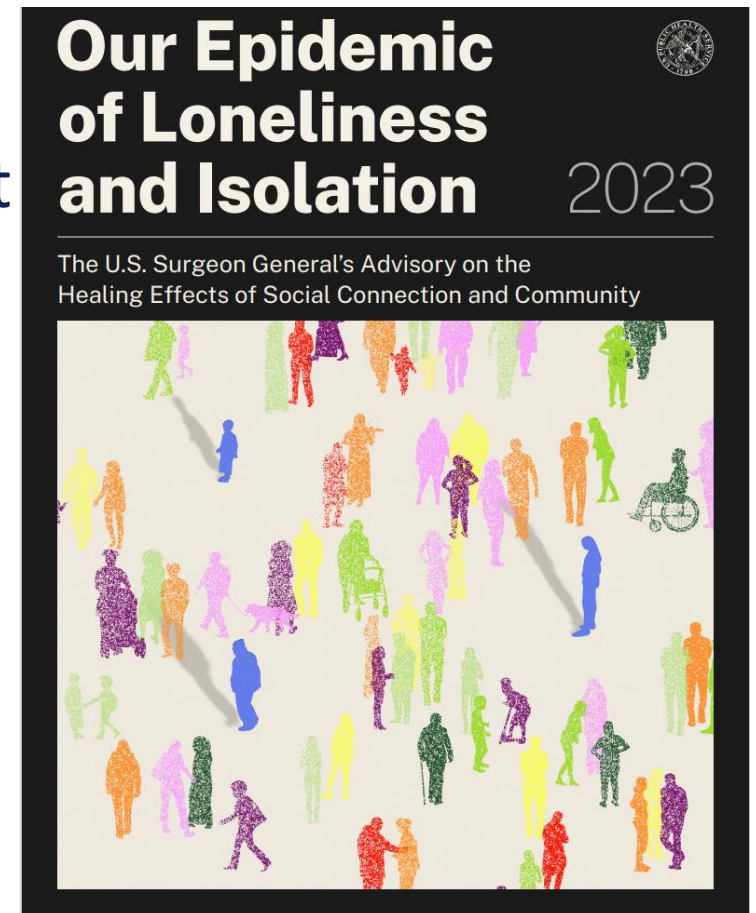
	In wrong direction
	No change
	In right direction

*Source: National Youth Risk Behavior Surveys, 2011-2021

Mental Health is a US Government Priority

THE 
WHITE
HOUSE

FACT SHEET: President Biden to Announce Strategy to Address Our National Mental Health Crisis, As Part of Unity Agenda in his 2022 State of the Union



A Framework for Public Health

- Describes public health's role in mental health promotion and suicide prevention
- Helps public health practitioners communicate their role with multi-sector partners
- Role of public health is to prevent illness and injury, improve the conditions where we live, learn, work, and play
- Mental and physical health are both essential to the overall health of every person



Public Health's Role in Mental Health Promotion and Suicide Prevention

About the Framework

This framework describes public health's role in mental health promotion and suicide prevention. It is centered in fairness and justice and serves as a guide for public health programmatic and policy strategies. This framework is to help public health practitioners in communicating their role in mental health promotion and suicide prevention with multi-sector partners.

The Role of Public Health

While healthcare providers typically treat people who are ill, people working in public health aim to **prevent illness and injury in the first place**. Public health specializes in **improving the conditions where we live, learn, work, and play**. What surrounds us shapes us and our health.

Public health's role in mental health promotion and suicide prevention is rooted in understanding that **mental and physical health are both essential to the overall health of every person**. Mental health promotion is one aspect of suicide prevention, however both areas share a common set of risk and protective factors. Addressing these shared factors through a public health approach can improve both outcomes and prevent other outcomes, including chronic diseases, substance use, violence, and adverse childhood experiences. Therefore, public health has an important role in helping to improve the lives of all people in communities.



The Collective Vision

**Working Together to Create
Bright Tomorrows and Thriving Communities**

Cross-sector partners work closely together to build
communities where all people can thrive.



CDC Priorities for Overdose and Suicide Prevention and Mental Health Promotion

Current State of the U.S. Drug Overdose Crisis

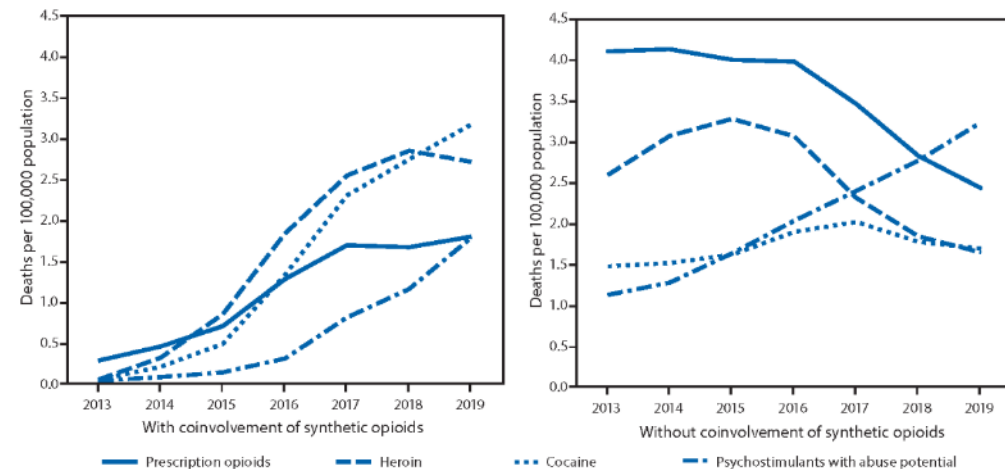
109,680

Estimated Overdose Deaths in 2022

A growing proportion of ALL drug overdose deaths in the U.S. involve synthetic opioids from 2013-2019

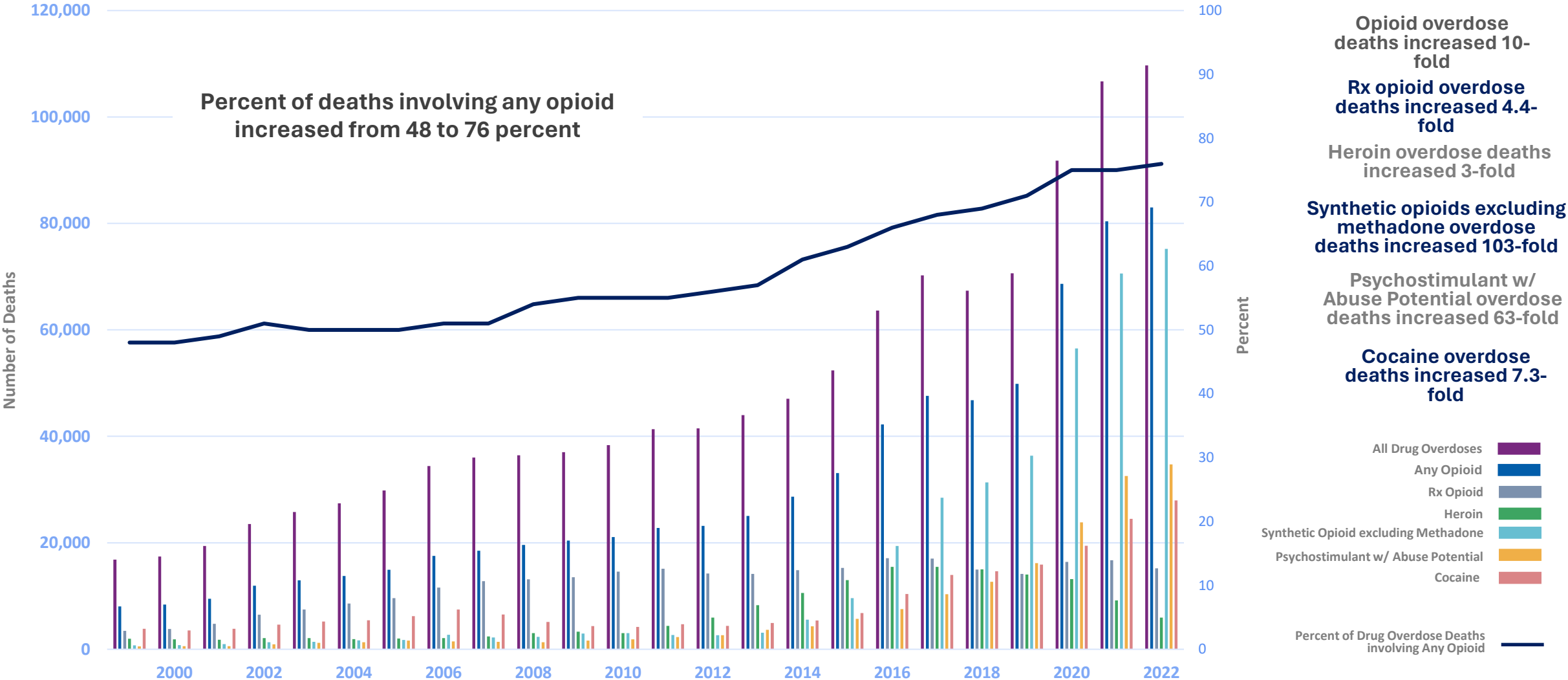
DRIVERS

- Continued increase in burden caused by illicitly manufactured fentanyl
- Increasing co-involvement of substances in overdose deaths – including xylazine
- Resurgent methamphetamine deaths



Source: Mattson, Tanz, Quinn, Kariisa, Patel, and Davis (2021). MMWR. 70(6), 202

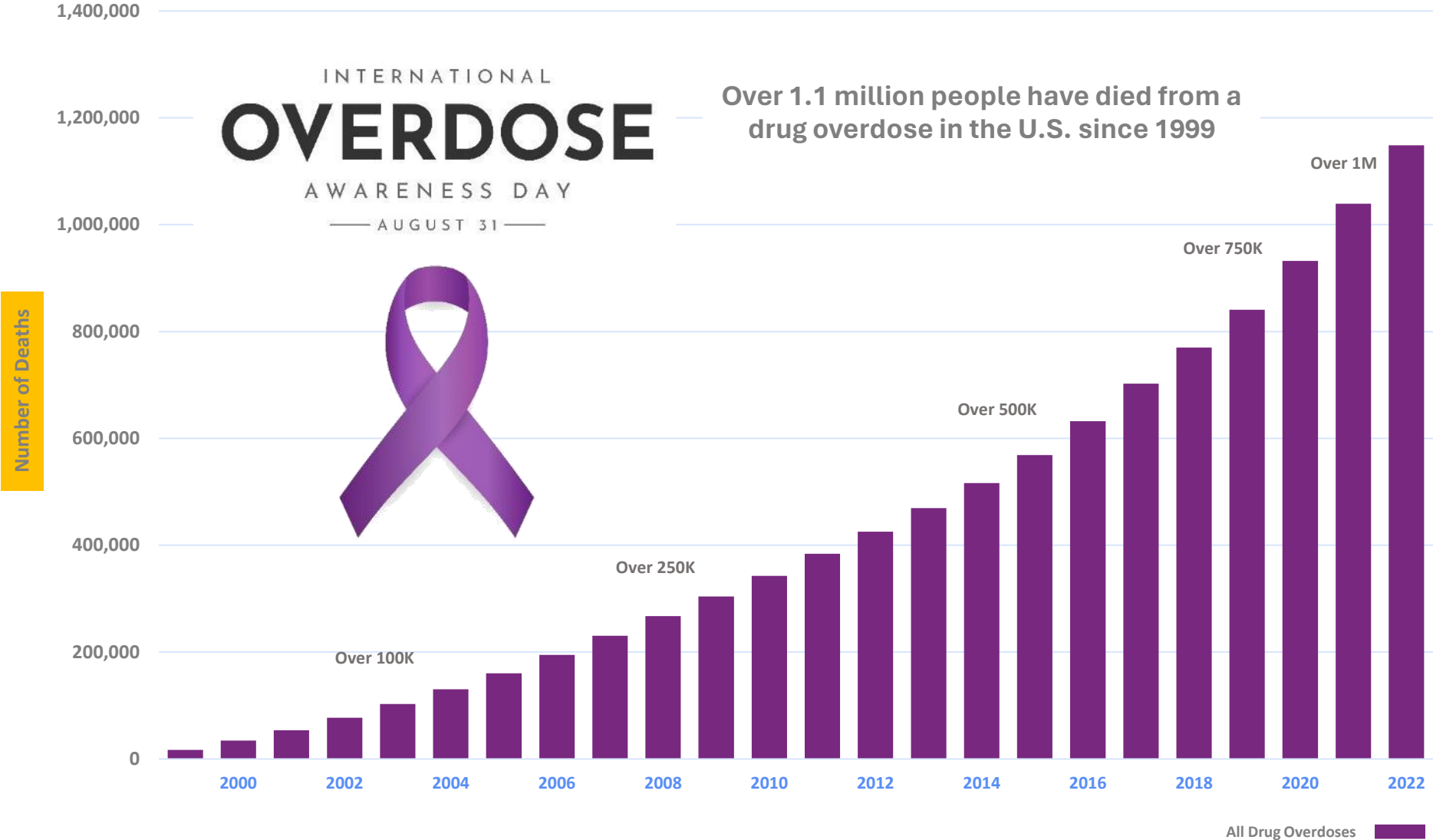
Historical Trends in U.S. Drug Overdose Deaths 1999-2022*



SOURCE: National Vital Statistics System Mortality File

* 2022 data are provisional

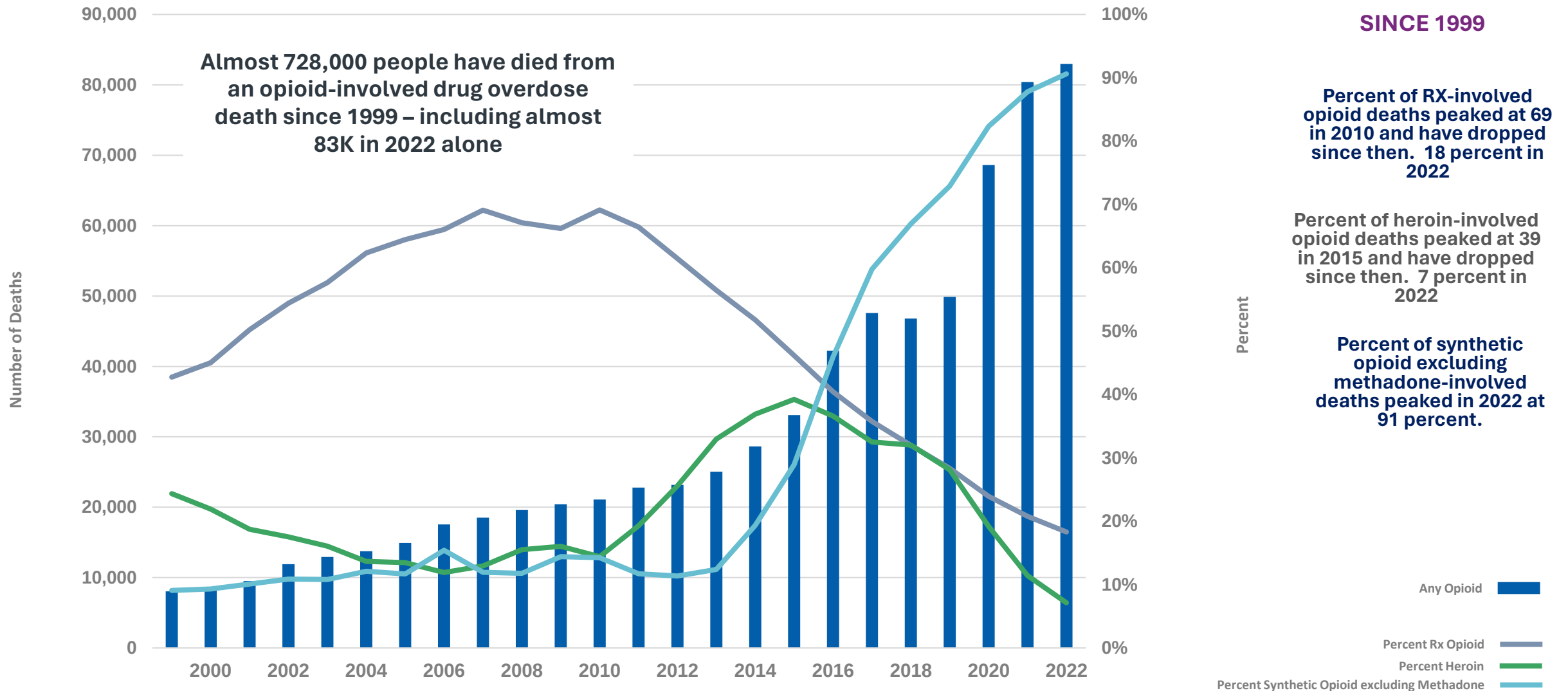
Cumulative Number of U.S. Drug Overdose Deaths 1999-2022*



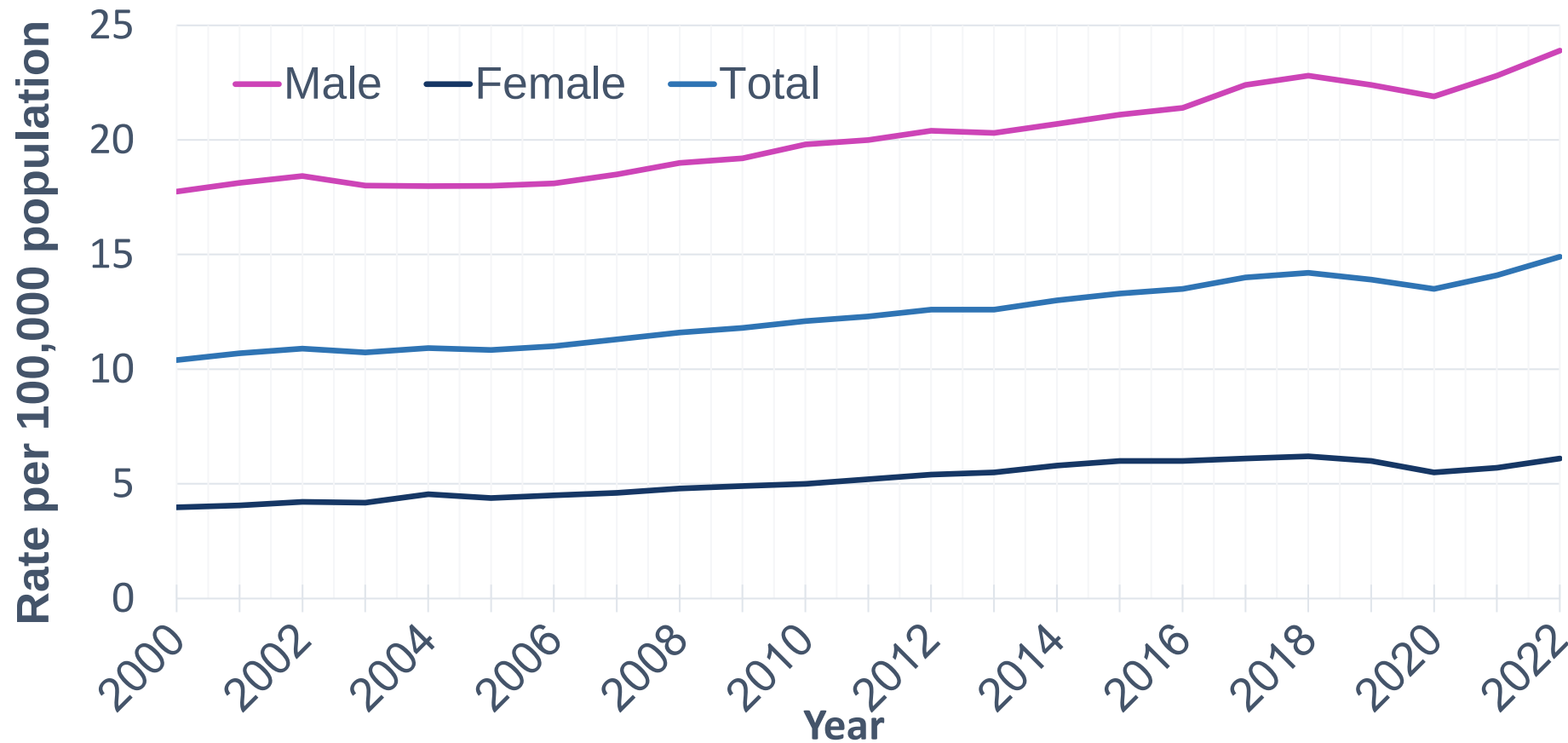
Average Annual Increase
Wave 1 – Rise in Prescription Opioid Overdose Deaths 1999-2009 2,016 Deaths
Wave 2 – Rise in Heroin Overdose Deaths 2010-2012 1,499 Deaths
Wave 3 – Rise in Synthetic Opioid Overdose Deaths 2013-2019 (Pre-Pandemic) 4,161 Deaths 2020-2022 (During Pandemic) 13,017 Deaths

SOURCE: National Vital Statistics System Mortality File * 2022 data are provisional

Historical Trends in U.S. Opioid-Involved Drug Overdose Deaths 1999-2022*



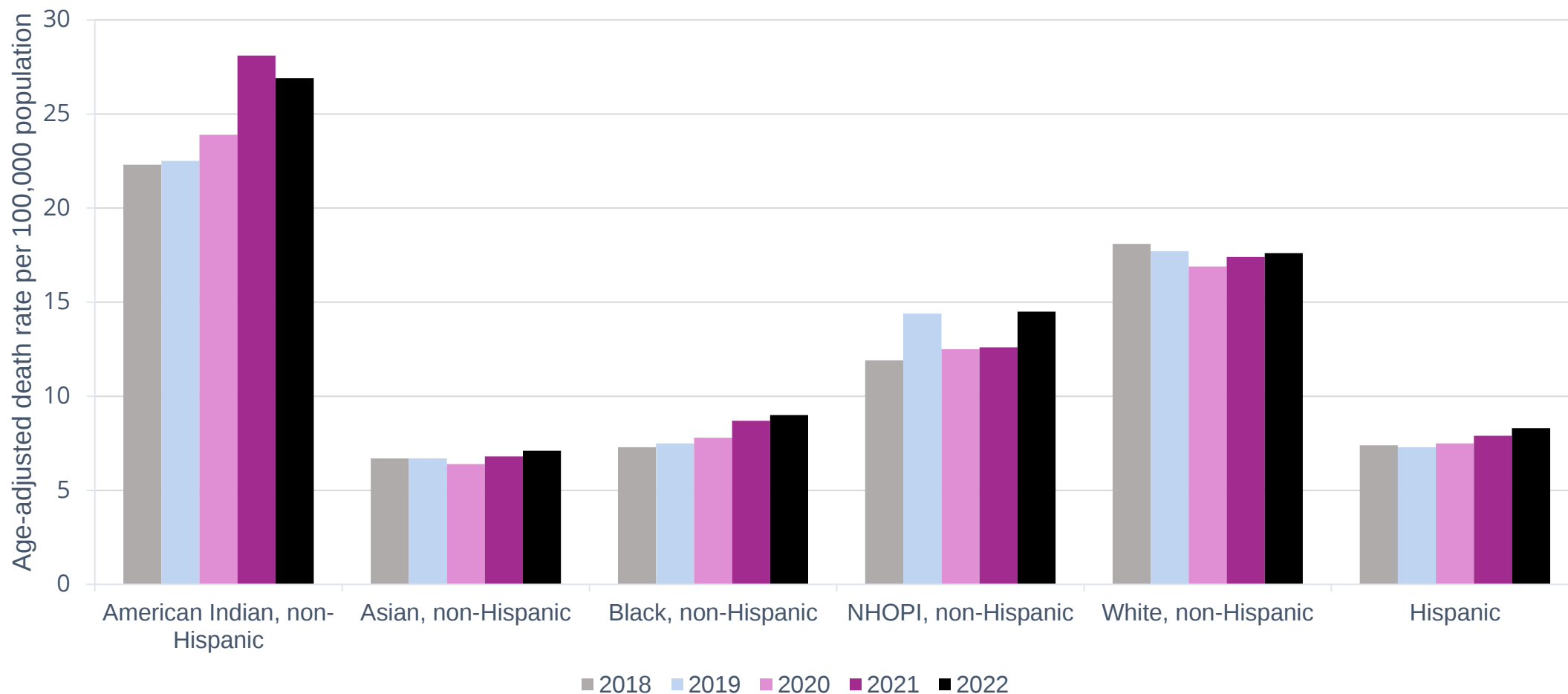
Age-adjusted Suicide Death Rates by Sex – United States, 2000-2022*



Source: Vital Statistics data for 2022 are provisional and based on 2021 population estimates.

* 2022 data are provisional

Age-adjusted death rates due to suicide by race and Hispanic origin: United States, 2018-2022*



Note: Data for 2022 are provisional. 2022 rates based on 2021 population estimates. Misclassification of race and Hispanic origin on death certificates may result in the underestimation of death rates, especially for non-Hispanic American Indian or Alaska Native decedents.

* 2022 data are provisional

CDC Approach to Prevent Overdoses and Substance Use-Related Harms

GUIDING PRINCIPLES



Promote Health Equity



Address Underlying Factors



Partner Broadly



Take Evidence-Based Action



Advance Science



Drive Innovation

STRATEGIC PRIORITIES



Monitor, Analyze, and Communicate Trends



Build State, Tribal, Local, and Territorial Capacity



Support Providers, Health Systems, Payors, and Employers



Partner with Public Safety and Community Organizations



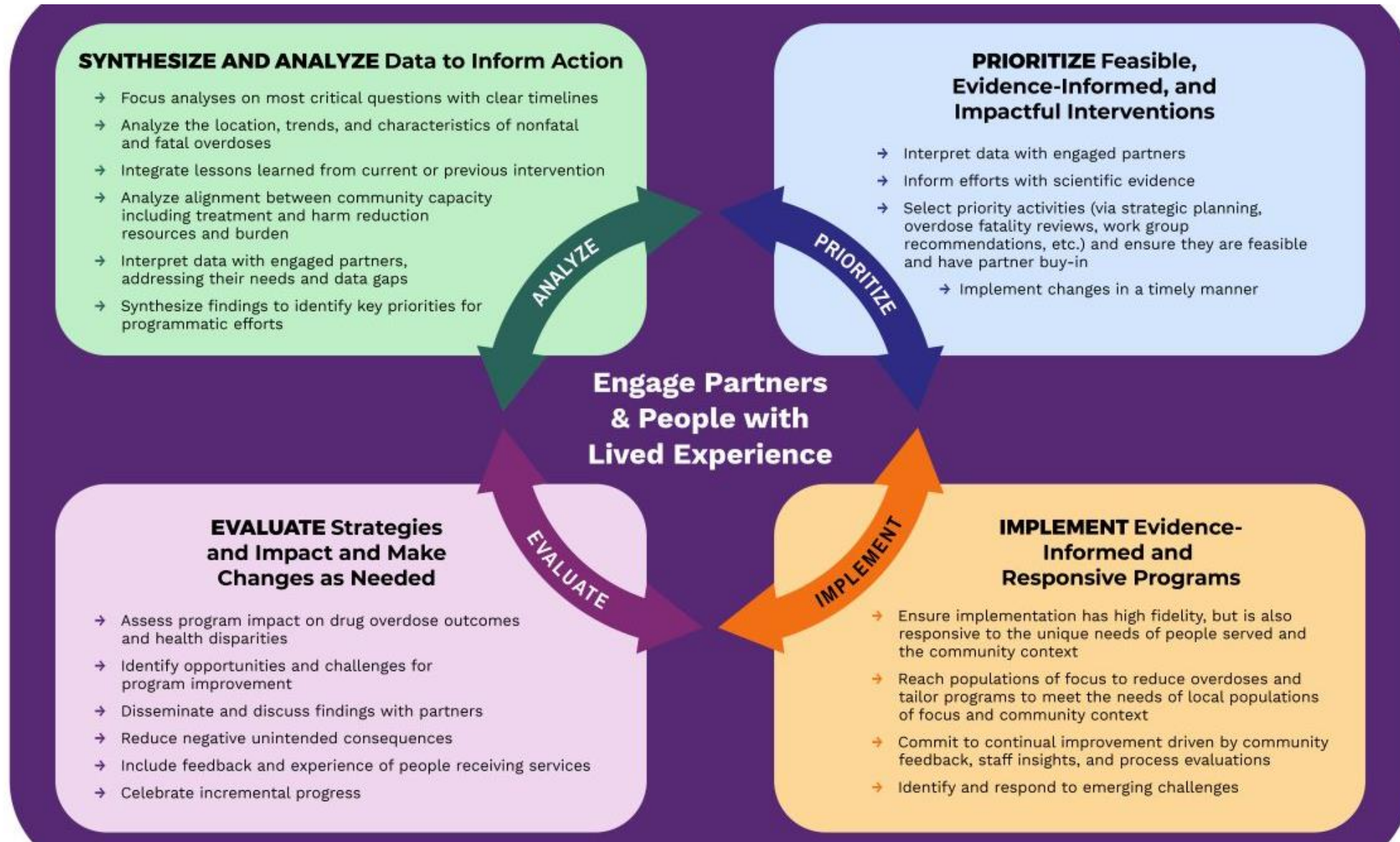
Raise Public Awareness and Reduce Stigma



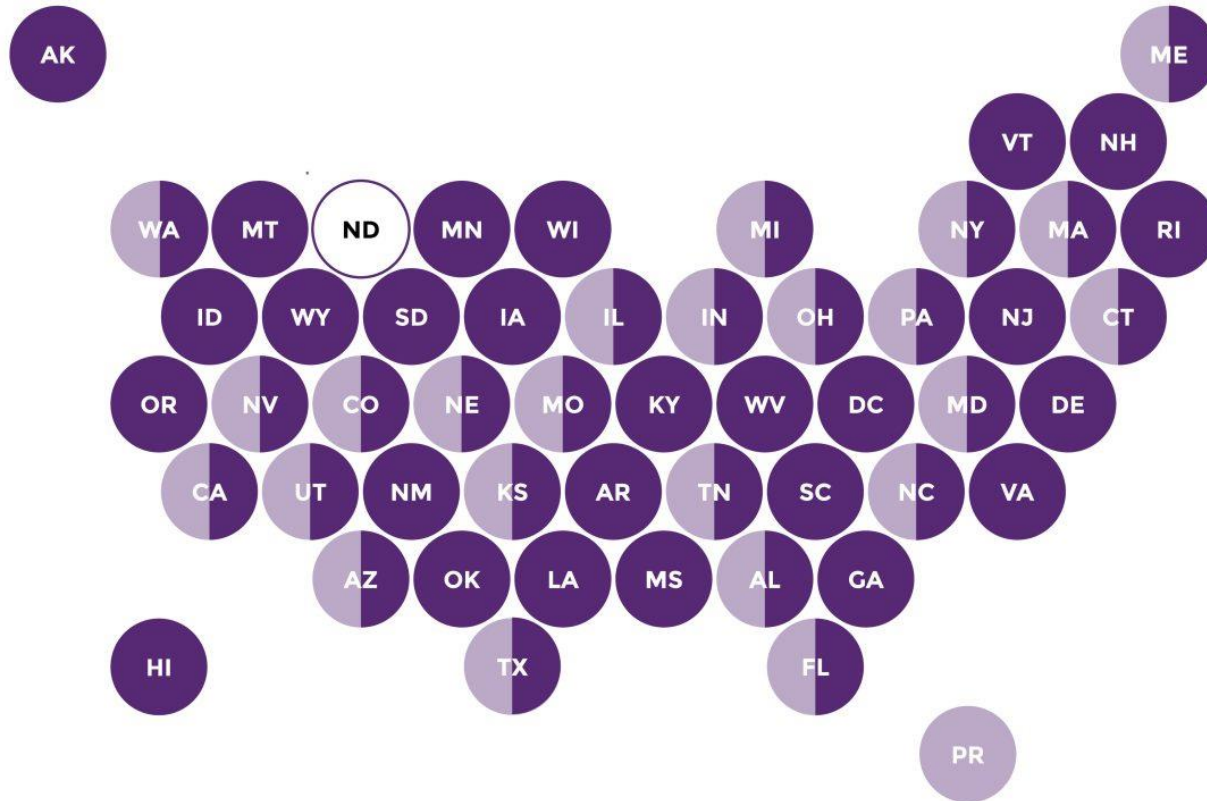
U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



Overdose Data to Action: NEW Framework and Programs



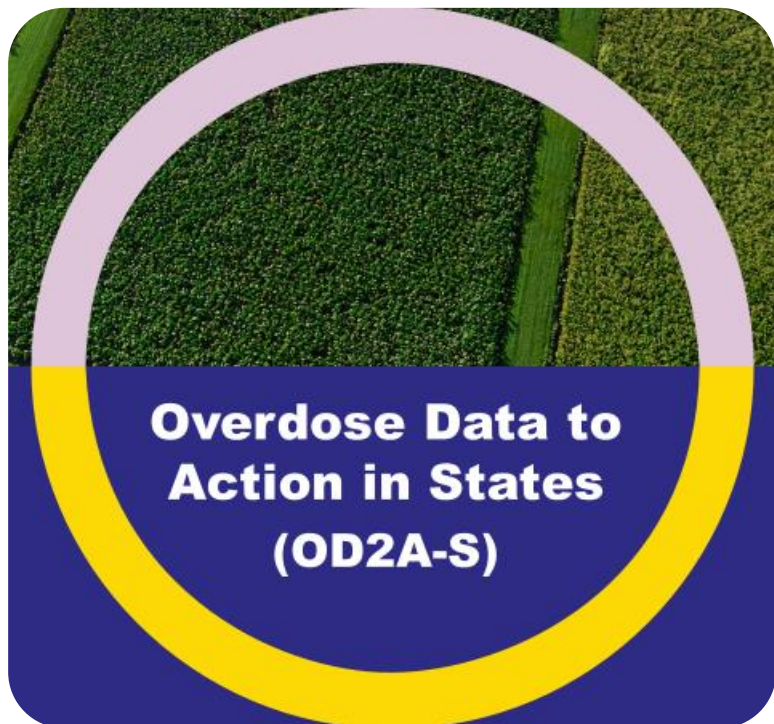
Overdose Data to Action (OD2A)



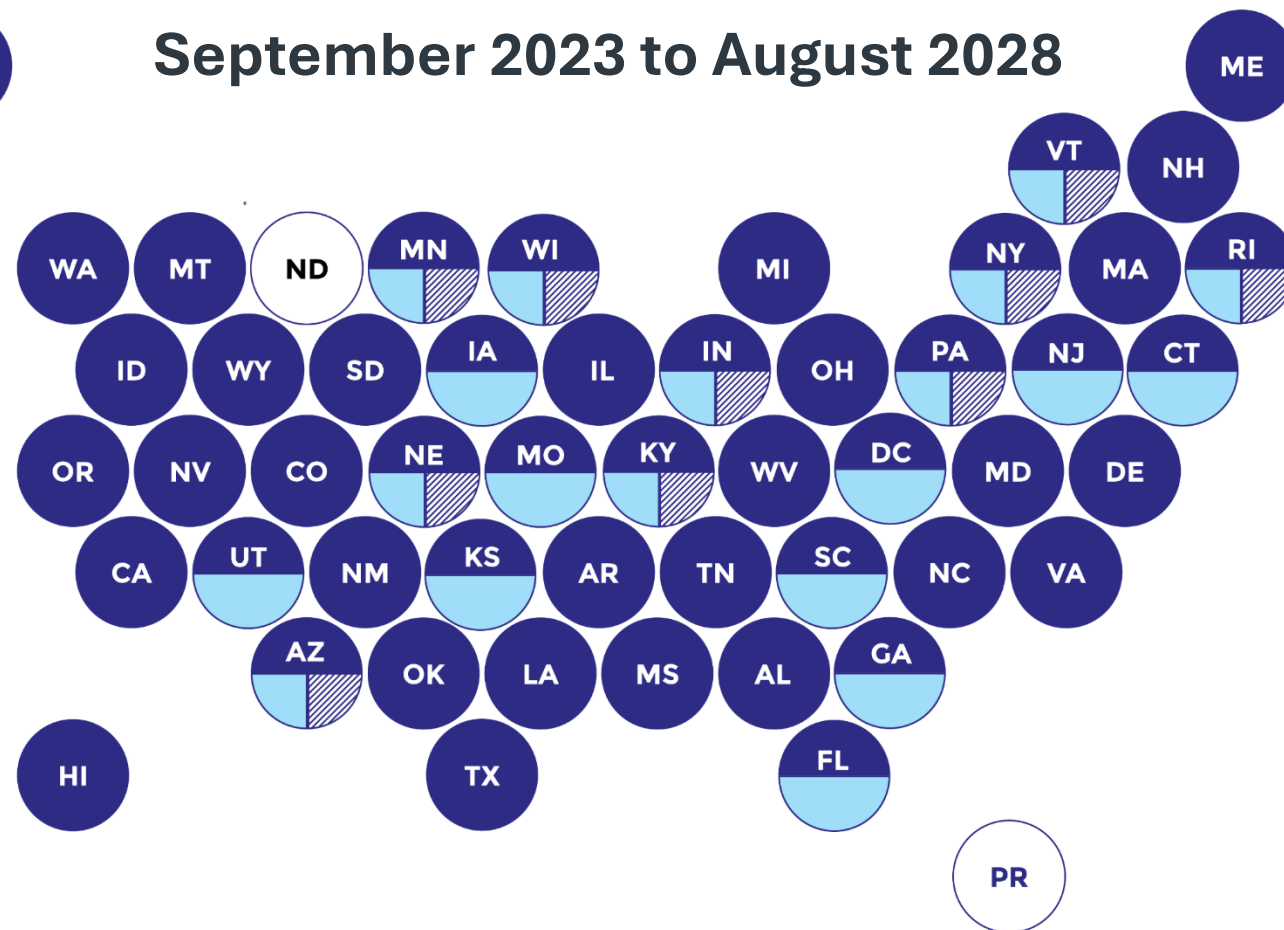
LEVEL OF JURISDICTION FUNDING

- OD2A in States
- OD2A: LOCAL
- Did Not Receive OD2A Funding

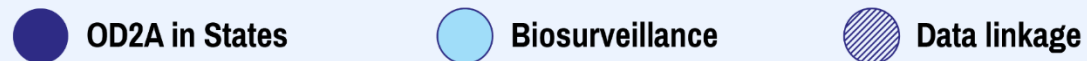
- Two Distinct Programs
 - Overdose to Action in States (OD2A-S)
 - Overdose to Action LOCAL (OD2A:LOCAL)

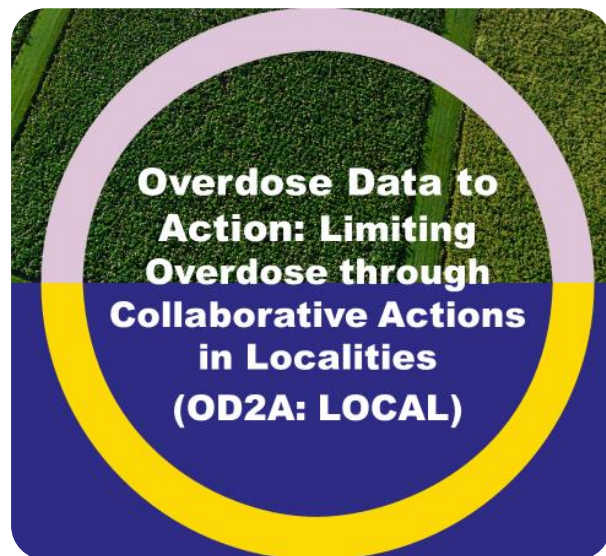


September 2023 to August 2028



LEVEL OF JURISDICTION FUNDING





September 2023 to August 2028



Foundational Activities

- Use data to inform action
- Establish partnerships
- Focus on health equity



Settings

- Community
- Public safety
- Health systems



Strategies

- Linkage to care and retention in care
- Harm reduction
- Stigma reduction
- Clinician and health systems best practices
- Health IT enhancements
- Overdose surveillance infrastructure
- Drug product and paraphernalia testing
- Surveillance of linkage to care and retention in care



Central Goals

- Decreased fatal AND nonfatal drug overdoses, overall:
 - Primarily involving opioids and/or stimulants
 - Among disproportionately affected and underserved populations
- Decreased illicit opioid and stimulant use, including polysubstance use, OUD, and SUD
- Improved health equity among groups disproportionately affected by the overdose epidemic and those previously underserved, identifying and closing gaps in access to care and services
- Integrate harm reduction strategies and principles with a focus on meeting people where they are with empathy and in a non-judgmental manner
- Build overdose surveillance infrastructure
- Expanded tracking and mitigation of emerging drug threats
- Collection and use of data on linkage to and retention in care among people at high risk of overdose to improve care

How Can Schools Support Students?



Delivering Quality,
Inclusive **Health**
Education



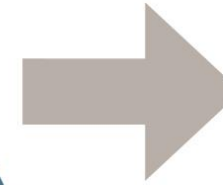
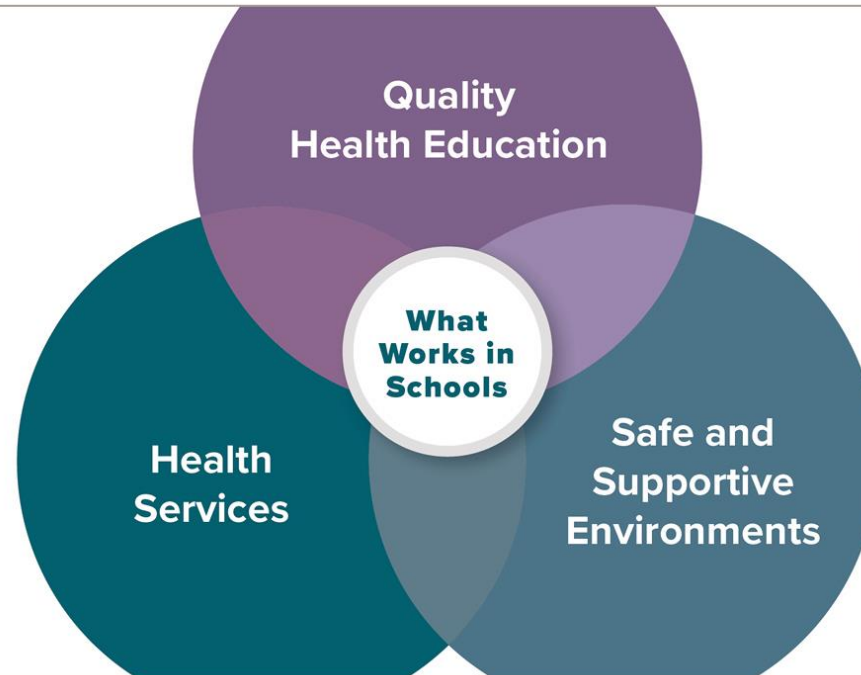
Increasing Access to
Appropriate **Health**
Services



Promoting **Safe and**
Supportive
Environments

School-Based Prevention Strategies Are Effective

CDC funding helps schools implement **3 key strategies**



Improves

Mental Health

Lowers

Sexual Risk
Substance Use
Suicidality
Violence

What Works in Schools improves adolescent health and well-being

In schools implementing this approach within CDC-funded districts, students were **less likely** to:



HAVE EVER
HAD SEX



HAVE 4+
SEXUAL
PARTNERS



BE CURRENTLY
SEXUALLY
ACTIVE



MISS SCHOOL
BECAUSE
OF SAFETY
CONCERNS

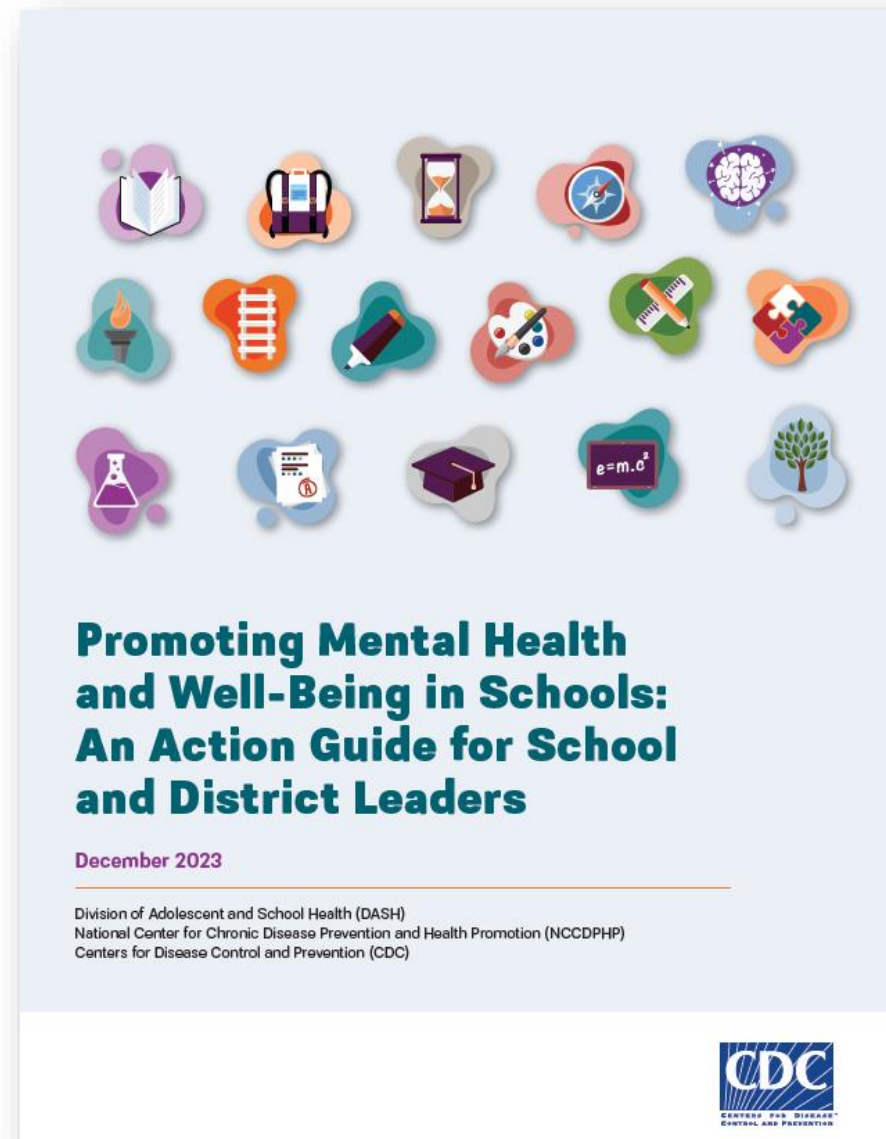


BE FORCED TO
HAVE SEX



USE
MARIJUANA

NEW: Mental Health Action Guide for School and District Leaders



<https://www.cdc.gov/healthyyouth/mental-health-action-guide/index.html>



QR Code to Guide

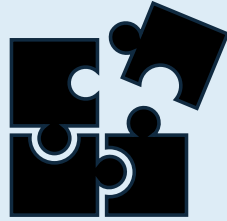
Strategies for Promoting Mental Health and Well-Being in Schools



**Increase
Students'
Mental Health
Literacy**



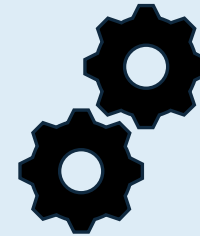
**Promote
Mindfulness**



**Promote
Social,
Emotional, and
Behavioral
Learning**



**Enhance
Connectednes
s Among
Students, Staff,
and Families**

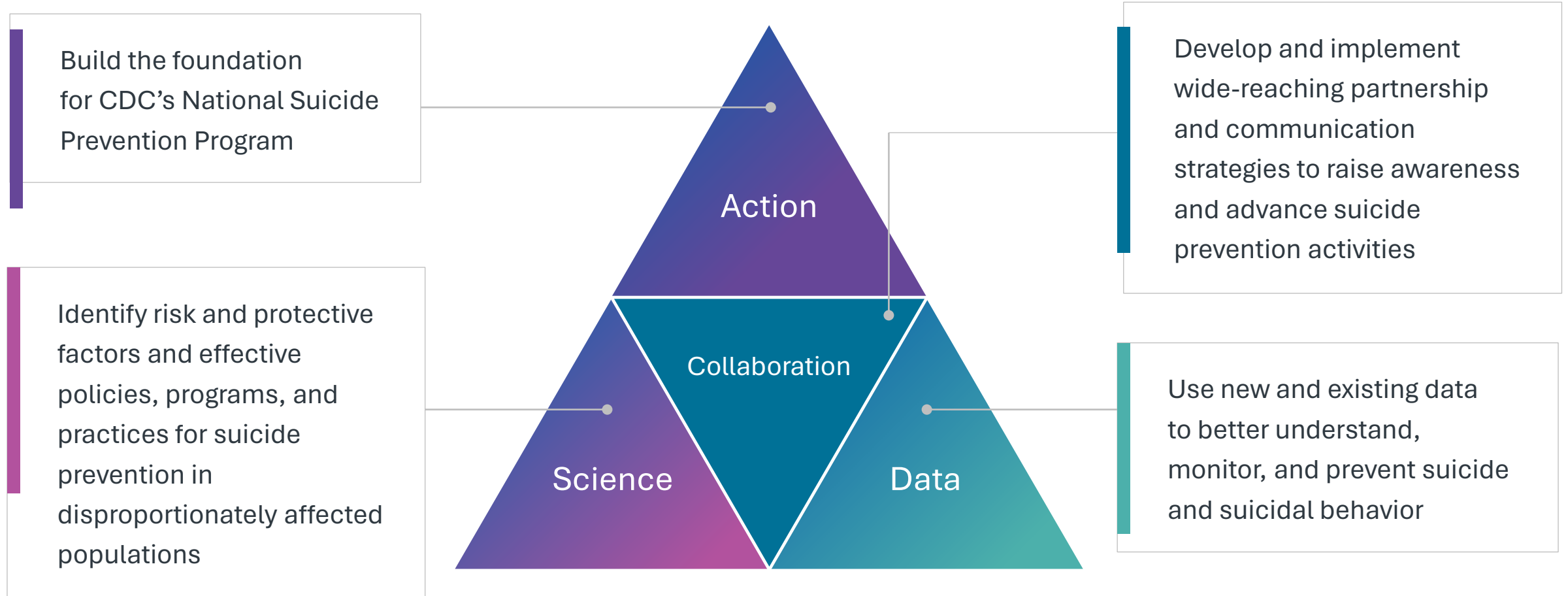


**Provide
Psychosocial
Skills Training
and Cognitive
Behavioral
Interventions**



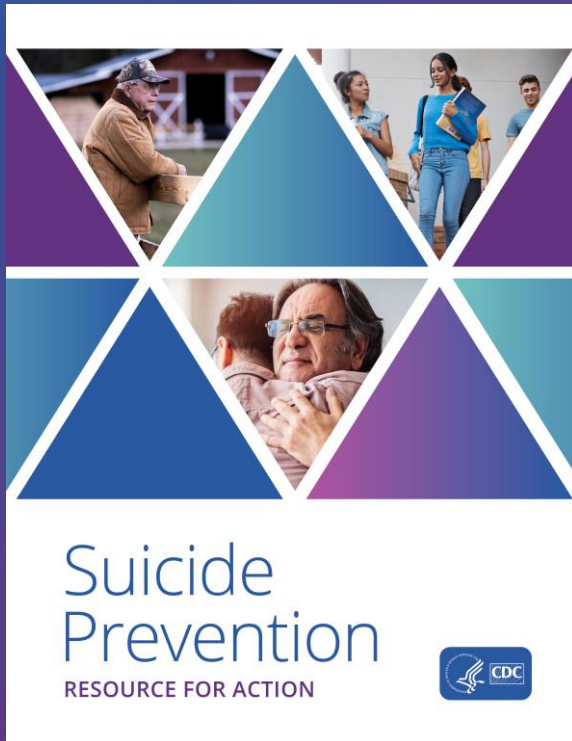
**Support Staff
Well-Being**

CDC's Suicide Prevention Priorities



Suicide is Preventable:

Summary of Strategies & Approaches



1 Strengthen Economic Supports

- Improve household financial security
- Stabilize housing



2 Create Protective Environments

- Reduce access to lethal means among persons at risk of suicide
- Create healthy organizational policies and culture
- Reduce substance use through community-based policies and practices



3 Improve Access and Delivery of Suicide Care *

- Cover mental health conditions in health insurance policies
- Increase provider availability in underserved areas
- Provide rapid and remote access to help
- Create safer suicide care through systems change



4 Promote Healthy Connections

- Promote healthy peer norms
- Engage community members in shared activities



5 Teach Coping and Problem-Solving Skills *

- Support social-emotional learning programs
- Teach parenting skills to improve family relationships
- Support resilience through education programs



6 Identify and Support People at Risk *

- Train gatekeepers
- Respond to crises
- Plan for safety and follow-up after an attempt
- Provide therapeutic approaches



7 Lessen Harms and Prevent Future Risk *

- Intervene after a suicide (postvention)
- Report and message about suicide safely

*Connectedness-related activities

Purpose of the Comprehensive Suicide Prevention Program

To implement and evaluate a comprehensive public health approach to suicide prevention to reduce suicide morbidity and mortality, with specific attention to one or more *disproportionately affected populations*

Disproportionately Affected Populations (DAP):

- Represent a significant proportion of the suicide burden (large number or rate of suicide)
- Have suicide rates greater than general population in a specific jurisdiction (state, city/county, tribe)

Examples: veterans, tribal populations, rural communities, LGBTQ+, youth and other



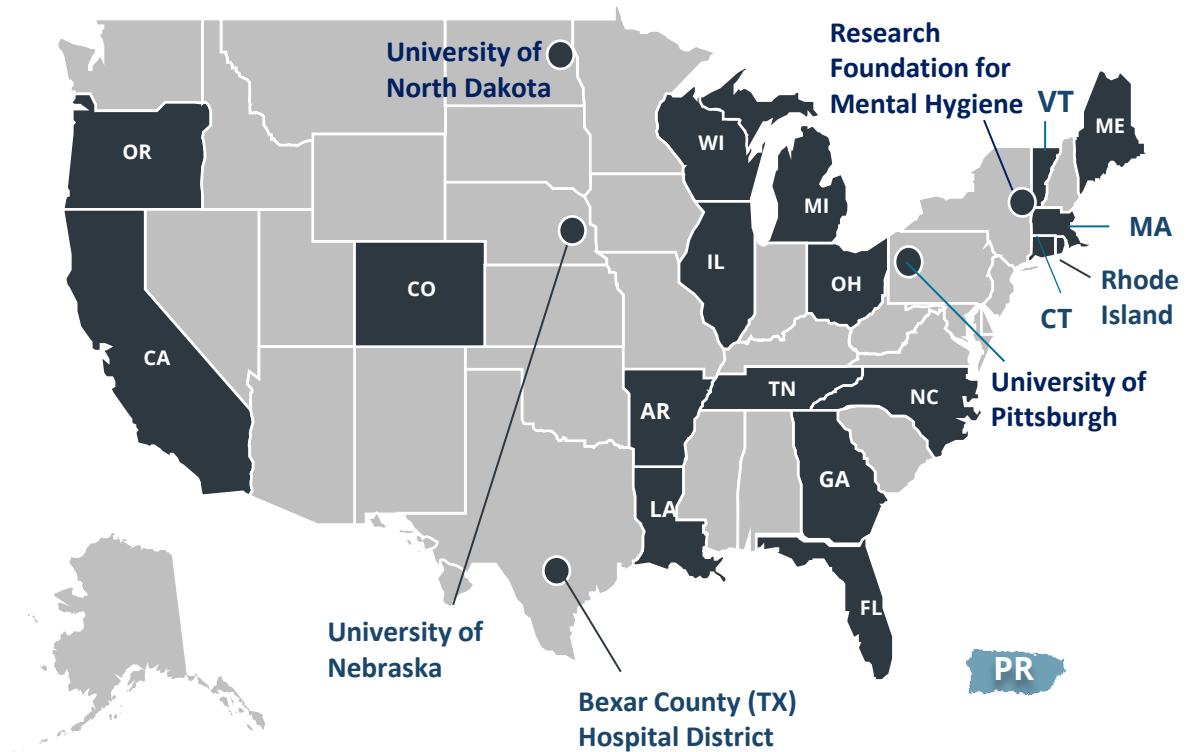
A key outcome is a **10% reduction in suicide morbidity and mortality** in the DAP in the jurisdiction(s).

CDC's Comprehensive Suicide Prevention program

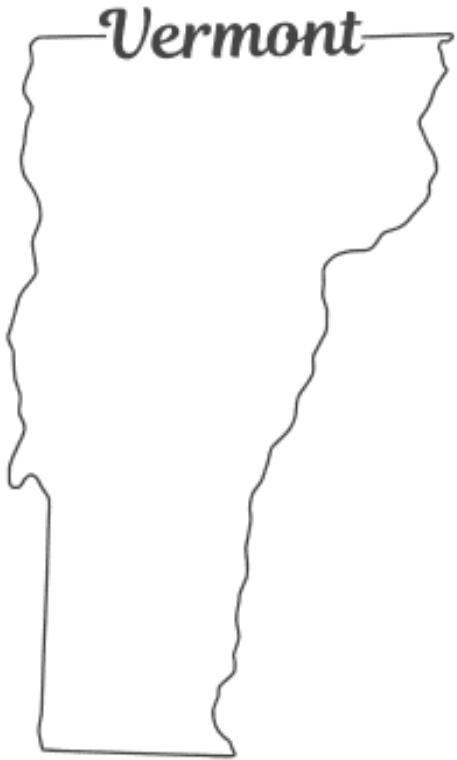
A comprehensive public health approach to suicide prevention entails:

- Strong leadership that convenes multi-sectoral partnerships
- Data to identify disproportionately affect populations and characterize risk and protective factors
- Leveraging existing suicide prevention programs
- Selecting multiple & complementary prevention strategies with the best available evidence
- Effective communication
- Rigorous evaluation

Comprehensive Suicide Prevention Funding Recipients



Success Story - Suicide Prevention in Vermont



Emergency Department Suicide Prevention Quality Improvement Initiative

- Each year in Vermont there are about
 - 1,000 visits to emergency departments for intentional self-harm and
 - 4,000 visits for suicidal ideation and self-directed violence
- Comprehensive Suicide Program funding used to improve screening, assessment, safety planning to reduce access to lethal means, and follow-up care for individuals at-risk for suicide.
- In year one, 100% of the hospitals completed a Zero Suicide Organizational Self Study, 86% participated in a Joint Commission Mock Survey focused on improving suicide care, 93% demonstrated improvement in their quality improvement goals, and over 300 hospital staff members completed Counseling on Access to Lethal Means training.

QUESTIONS

The findings and conclusions in this presentation are those of the presenter and do not necessarily represent the official position of the Centers for Disease Control and Prevention



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Resources

For Everyone

[How Right Now — Finding What Helps](#)

[Coping with a Disaster or Traumatic Event](#)

[General Public: Care for Yourself](#)

[Young Adults: Care for Yourself](#)

[HHS ASPR TRACIE COVID-19 Behavioral Health Resources](#)

[Food and Food System Resources During COVID-19 Pandemic](#)

For Families and Children

[Helping Children Cope during the Pandemic](#)

[Helping Children Cope with Emergencies](#)

[Coping After a Disaster](#)

[Teen Depression](#)

[Parents: Care for Yourself](#)

[Family Caregivers: Care for Yourself](#)

[Students: Care for Yourself](#)

[Food Assistance Programs](#)

For People at Higher Risk for Serious Illness

[Serious Illness Care Program COVID-19 Response Toolkit](#)

[Older Adults: Care for Yourself](#)

For Healthcare Workers and First Responders

[Healthcare Personnel and First Responders: How to Cope with Stress and Build Resilience During the COVID-19 Pandemic](#)

[Emergency Responders: Tips for Taking Care of Yourself](#)

[Disaster Technical Assistance Center](#)

[First Responders: Care for Yourself](#)

[Clinicians: Care for Yourself](#)

For Other Workers

[Employees: How to Cope with Job Stress and Build Resilience During the COVID-19 Pandemic](#)

[Working Adults: Care for Yourself](#)

[Critical Workers: Care for Yourself](#)

[Teachers: Encourage Your Students to Care for Themselves](#)

Public health data systems are critical to collecting mental health information

- Behavioral Risk Factor Surveillance System (BRFSS)
- National Health and Nutrition Examination Survey (NHANES)
- National Health Interview Survey (NHIS)
- National Ambulatory Medical Care Survey (NAMCS)
- National Hospital Care Survey (NHCS)
- National Post-acute and Long-term Care Study (NPALS)
- National Survey of Children's Health (NSCH)
- National Survey of the Diagnosis and Treatment of ADHD and Tourette Syndrome (NS-DATA)
- National Violent Death Reporting System (NVDRS)
- Pregnancy Risk Assessment Monitoring System (PRAMS)
- School Health Policies and Programs Study (SHPPS)
- WISQARS™
- Youth Risk Behavior Surveillance System (YRBSS)
- Household Pulse Survey – Anxiety and Depression

* List not exhaustive. For more information: <https://www.cdc.gov/mentalhealth/index.htm>