Healthy Minds, Healthy Bodies

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No Physical Health Without Mental Health

In the nearly 70 years since Dr. Brock Chisholm, the first director-general of the World Health Organization, stated the above concept, evidence has grown fleshing out the correlation between behavioral health and physical health. The major conclusion from the original Adverse Childhood Experiences study was the link between toxic stress in childhood and long-term ill health and risk for leading causes of death in adults, a finding that took some time to be accepted by the medical community. Many other studies have found that people with mental and behavioral health issues also have greater physical health problems and shorter lives.

*American Journal of Preventative Medicine,* Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: [http://1.usa.gov/1E11DEP](http://1.usa.gov/1E11DEP), [http://1.usa.gov/1DYDdf](http://1.usa.gov/1DYDdf)

Osborn, D.P.J., *Western Journal of Medicine,* The poor physical health of people with mental illness: [http://1.usa.gov/1NBqrmL](http://1.usa.gov/1NBqrmL).
Since penicillin became available as the first antibiotic, people have been looking for the magic pill, and the pharmaceutical industry has done its best, coming up with medications to treat health and mental health disorders, including high blood pressure, osteoporosis and depression.

One behavior change can treat the above listed conditions as well as many others. A New York Times article was titled, “You Name It, and Exercise Helps It.” Other writers and researchers call it a magic bullet or pill. It makes sense that exercise helps prevent and treat physical health conditions, but its effectiveness in preventing and treating mental health problems may be surprising. However, broad population studies show active people suffer less depression, and controlled studies of people with depression find those who exercised had rates of improvement generally equal to those who received antidepressants.

Resources:
Brody, J.E., New York Times, “You Name It, and Exercise Helps It”:
http://nyti.ms/1NhagOo.
Weir, K, American Psychological Association, Monitor in Psychology, The Exercise Effect:

Better Health for Tennesseans
My Health, My Choice, My Life
My Health, My Choice, My Life is a program to improve well-being and recovery of people with mental illness and substance abuse disorders though improved physical health behaviors and decreasing symptoms. The program services include chronic disease self-management training, diabetes self-management program, peer wellness coaching and wellness assessments. The program was funded through a five-year Substance Abuse and Mental Health Services Administration Center for Mental Health Services grant. Training was provided by the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), and services were provided through community mental health centers across the state.

Peer Wellness Coaching, TDMHSAS: http://1.usa.gov/1E3qCYp.

Healthier Tennessee
Tennessee is a great state, with great citizens, but it could do better in the health area. Many things contribute to the state's low rankings, including the failure of Insure Tennessee to get out of the starting post, but improvements in the health behaviors of Tennesseans can help. Healthier Tennessee is a program of the Governor’s Foundation for Health and Wellness and is funded by both public and private money. It has three goals for improving Tennesseans' health: Move More, Eat Smarter and Cut Out Tobacco. Simple to say, but difficult to do. The Healthier Tennessee website includes “Start Small” tools to help individuals and employers take first steps to meet these goals.

The Council on Children’s Mental Health (CCMH) continues its efforts to improve the system for serving children with behavioral health issues and to expand system of care values in Tennessee. CCMH has contracted with Cissy Mynatt, senior consultant with the Center for Nonprofit Management, to work with the community in strategic planning for future activities.

CCMH is a cooperative effort between TCCY and the TDMHSAS, with TCCY Executive Director Linda O’Neal and TDMHSAS Commissioner Doug Varney as co-chairs. In addition to regularly scheduled meetings throughout the year, the two agencies partnered in August to sponsor a successful event, “Aligning the Systems to Illuminate Our Stars,” a free two-day System of Care conference for professionals and families.

Melissa McGee, (at right) who has staffed CCMH since October 2014, periodically shares information about CCMH and issues of interest with an email list.

Contact Melissa McGee Melissa.McGee@tn.gov to be added to the CCMH mailing list.

### September Is Suicide Prevention Month

#### Zero Suicide

Any death by suicide is one too many. Zero Suicide, a program being implemented at behavioral health centers Centerstone and Frontier Health and endorsed by the Tennessee Suicide Prevention Network, aims to eliminate suicide, at least for people receiving health care. The program calls for a systemic response involving policy makers, researchers, family members and survivors. It is a national program with a comprehensive approach to suicide care. An early step in the process is to complete a Zero Suicide Organizational Self-Study, which is used to formulate a plan. Survey results have indicated a lack of training on suicide prevention. Screening and assessment for suicide risk for all people seeking services is a one of the elements of the plan.


#### Youth Suicide

Suicide was the second leading cause of death for Tennesseans ages 10 to 19 in 2013. The Tennessee youth suicide rate has been rising since 2011. This increase was somewhat mirrored by the responses to the 2013 Tennessee Youth Risk Behavior Survey, including reports by one of every 11 students (9 percent) of having attempted suicide, up from 6.2 percent in 2011.

Tennessee’s Jason Foundation, Inc. raises awareness and provides education to equip students, parents and teachers with resources to prevent suicide.

Tennessee Lives Count (TLC) Youth Suicide Prevention and Early Intervention Project, funded by the national Garrett Lee Smith Memorial Act through the TDMHSAS, addresses youth suicide. Two-hour or two-day trainings are provided depending on the intensity of the professional or community members’ interactions with youth.

Safety first is an important rule always, but can be especially important when dealing with things lethal by their very nature. The Tennessee Suicide Prevention Network has created tips for gun sellers and ranges to identify and respond to potentially at-risk gun purchasers. TSPN adapted its materials from those created in New Hampshire, where by 2013 nearly half the independent gun shops displayed or distributed the materials.

Guns are used in nearly two of every three suicide deaths or about 600 Tennessee deaths each year. Accidents result in 25 gun deaths and around 1,700 injuries requiring emergency treatment. Much research links having a gun in the home with likelihood for suicide death, including a study finding those who died by suicide were two times as likely to live in a home containing a gun.

The Harvard School of Public Health has created a program, Means Matter. Some methods used in suicide attempts are more lethal than others, so the focus is on efforts to keep these lethal means out of the hands of people at risk of suicide.


**Updates**

TCCY celebrates and sobs with its staff members **Steve Petty, Russette Sloan and Vicki Taylor** and other Tennesseans, whose college freshman are leaving home to enroll in school.

At the other end of the parenting cycle, Commission member **Ashley Dunkin** (at right) has given birth to Grace Anne Dunkin. TCCY congratulates the Dunkin family.
Mark Your Calendar

Sept. 2, Volunteer Advocacy Project (VAP) of the Vanderbilt Kennedy Center Training at a range of locations. Website: http://bit.ly/1Kd8cE1. Contact Samantha.Goldman@Vanderbilt.edu for more information.

Sept. 4, 11:30 a.m.-2 p.m. EDT, ETCCY presents Trauma and Re-Training the Brain: Tools for Recovery, Family Justice Center Auditorium, 400 Harriet Tubman, Knoxville. Contact (615) 532-1685 or lindsey.cody@tn.gov.

Sept. 4, 11 p.m.-4 p.m. CDT, Adverse Childhood Experiences in Tennessee, Jackson-Madison County Regional Health Department, 804 N. Pkwy. Jackson. Contact roder.jowers@tn.gov. Register at http://mchc-aces.eventbrite.com/.

Sept. 9, 10:30 a.m. CDT, Suicide Prevention Awareness Day event, Trevecca Community Church, 335 Murfreesboro Pike, Nashville.

Sept. 10, 5 p.m.-8:30 p.m. CST, Connect for Care Summit, Lentz Public Health Center, 2500 Charlotte Avenue Nashville. Contact Keri.Virgo@tn.gov. Register http://integratingbehavioralandphysicalcare.eventbrite.com/.


Sept. 14, 8:30 a.m.-4 p.m., Many Cultures, One Community: A Cultural Competency Training Summit, Bones Creek Christian Church, 305 Christian Church Road Johnson City. Register at http://manycultures1community.eventbrite.com/.

Sept. 14, 10 a.m.-11 a.m., Second Look Commission Meeting, contact Craig.Hargrow@tn.gov for information.


Sept. 18, MCCY and TriStar present “Adverse Childhood Experiences and Toxic Stress on Development Conference,” with Loraine Lucinski, Patti van Eys and Melissa McGee, 8:30 a.m.-3 p.m. CDT, HCA TriStar Skyline Madison Campus, 500 Hospital Dr., Madison. Contact Susan.Cope@tn.gov or register at http://bit.ly/1MY4cZZ.


In the News

The Atlantic, The Collateral Consequences of the Crimes of Children: http://theatlntc.t/1Ja7Q3t.

Research Information

Children with Emotional, Behavioral or Developmental Conditions


No person shall, on the grounds of race, color, national origin, sex, age, religion, disability or ability to pay, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity operated, funded or overseen by the Tennessee Commission on Children and Youth (TCCY). It is the intent of TCCY to bind all agencies, organizations or governmental units operating under its jurisdiction and control to fully comply with and abide by the spirit and intent of the Civil Rights Act of 1964.

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