

More than Just Crazy Talk: Moving toward Mental Health Parity

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Description of the workshop topic:

According to the 2003 President's New Freedom Commission on Mental Health, mental illness is the largest cause of disability in the United States. Mental disorders are more prevalent than all types of cancer combined, and affect roughly 20% of the population in any given year. Despite the high rates of prevalence and its documented impact on physical health, mental health continues to be viewed as both separate and inferior to physical health within the medical model and popular opinion. This distinction has created disparities for people with mental illness, as well as for mental health professionals. The separation within the medical model has created a confusing, fragmented and ineffective mental health care system, which only further contributes to stigmatizing the mentally ill. Moreover, the inaction of the public to demand parity has led to further disparities in access and health outcomes. As a result, many have suffered from the compounded consequences of untreated mental illness, among them: suicide, poverty, incarceration, and homelessness. Although recent legislative efforts have made strides toward mental health parity, much is still ignored. It is time for both the medical community and the public to pay attention to this grave injustice and recognize our communal responsibility in seeking parity. Creative and innovative methods of working toward parity will be discussed, including advancing integrated models of care in both inpatient and outpatient settings.

An explanation on how the workshop will be lead:

Background information will be delivered by the presenters in lecture format.

Presenters will engage the group in an interactive process of education, discussion, discovery, and challenge together. Education on current policies, legislation, and movements to increase parity within the medical community and in public policy will be articulated and discussed, with particular emphasis on how individuals and groups can get involved in promoting mental health parity.

A description of expertise/previous work in this area:

As a candidate for a Master of Education in Community Counseling seeking licensing as a Licensed Clinical Practicing Counselor, and as Chaplain to the Stritch School of Medicine, I (Michael) have been studying the interaction between mental health and physical health systems throughout my three years in this graduate program. I am fascinated by the interplay between body, mind, and spirit, and seek expertise in applying knowledge to serve my future patients. As a member of the American Counseling Association and the local chapter of Counselors for Social Justice, as well as in my role as Chaplain to Loyola's SSOM, I am intricately involved in many aspects of service and justice work and education, and seek to integrate these ideals into all aspects of my professional, public, and personal life.

As an MD/MA student, I (Kelly) have discovered that medicine isn't as simple as studying both disease and therapy, but appreciating the complex interplay of health and socioeconomic status, in addition to understanding the oft-confusing modern system of health care delivery.

Throughout various rotations, I have begun to appreciate the reciprocal effects of physical and mental health on each other, recognizing their inherent interconnections. As a bioethics student,

I analyze health systems and policy, focusing on just models of health care delivery. Furthermore, I am actively involved in many different areas of service and justice work, and also try to integrate these into all areas of my life.

An outline of the goals for the workshop and specific tools the participants will gain:

- Review the Cartesian mind-body dichotomy, and its influence on historical and current views of mental illness
- Understand of the history of mental health care and the development of the modern system of mental health delivery.
- Analyze effects of stigmatization of people with mental illness on resource-allocation for mental health services and on health outcomes
- Appreciate the disparities created by stigmatization of mental illness, especially with regards to the social determinants of health
- Develop strategies for mental health advocacy and parity through political, policy, and personal channels

A description on how this workshop will serve the overall goals of the summit:

While physical illness garners much attention and public support with 5K runs and brightly colored ribbons, those with mental illness are often overlooked, by both medicine and bioethics. Like other illnesses, mental health is shaped by genetic and environmental factors—and heavily influenced by many social determinants such as poverty and poor education. Furthermore, mental illness affects and is effected by physical illness. We feel that mental health and its corresponding disparities are poorly understood and underappreciated. By addressing the lack of awareness, we hope to encourage activism for mental health and develop realistic strategies to develop further legislation building on the Mental Health Parity Act, in addition to helping future clinicians gain insight into mental illness.



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