Over 70 people representing consumers, families, providers and system partners attended a public meeting to discuss the consolidation between the Cuyahoga County Community Mental Health Board (CCCMHB) and the Alcohol and Drug Addiction Services Board of Cuyahoga County (ADASB). The meeting was hosted by the Cuyahoga County Board of County Commissioners (BOCC) and was held at the Cleveland Foodbank on Friday, October 26.

Dennis Madden, County Administrator, and Rick Werner, Deputy County Administrator for Health and Human Services chaired the discussion.

Madden shared that the BOCC requested that the two Boards consolidate to save on administrative expenses. The idea of consolidating the two Boards is not a new one, but the timing is right given Cuyahoga County’s current economic situation.

Dr. Russ Kaye, Executive Director of the ADASB, indicated that the Consolidation Executive Steering Committee has the trust and support of the BOCC.

William M. Denihan, CEO of the CCCMHB, said that the consolidation was unplanned but welcomed, and is a great opportunity that government is not always given: the chance to develop a new and greater organization.

Denihan and Kaye agree that service to consumers is the number-one priority in the consolidation. Cost savings in administration and location will be put back into services.

Meeting participants had a chance to voice their support and concerns about the consolidation. Alcohol and drug addiction service providers expressed concerns, including that prevention services may be lost. It was suggested that the Boards should not consolidate, just share space, or that the ADASB should consolidate with the justice system rather than with mental health.

Denihan and Kaye addressed each concern and stated that prevention is a priority. They also promised that every concern will be taken into consideration during the consolidation process.

Madden indicated that the plan for consolidation is due on December 6, and that there will be time for public comment before it is adopted by the BOCC.
“Prevention” of alcohol and drug addiction has been referred to several times throughout the consolidation process. But what does it mean, and can it apply to mental illness?

“To prevent” literally means “to keep something from happening.” The term “prevention” is reserved for those interventions that occur before the initial onset of a disorder.

An operational definition of prevention in the alcohol and drug addiction field is the promotion of constructive lifestyles and norms that discourage drug use. Prevention is achieved through the application of multiple strategies; it is an ongoing process.

Emerging evidence suggests that certain mental health problems can also be prevented, while in others onset may be delayed and severity of symptoms decreased. Prevention efforts are most successful when they use multi-faceted solutions that address not only individuals, but also their environments.

Sound mental health contributes to quality of life, enables people to care for themselves and others, and reduces the risk of substance abuse, failing in school, suicide, and other undesirable outcomes. Applying a primary prevention framework to mental health can support the care and treatment of those in need while also reducing the stigma associated with mental health problems.

The following three categories of alcohol and drug addiction and mental illness prevention have been identified:

1. Universal preventive interventions are targeted to the general public.
2. Selective preventive interventions are targeted to individuals or a subgroup of the population whose risk is significantly higher than average.
3. Indicated preventive interventions are targeted to high-risk individuals who are identified as having minimal but detectable signs or symptoms, but who do not meet diagnostic levels at the present time.

Basic prevention strategies for alcohol and drug addiction are:
- Raise awareness of the dangers of drug use and the benefits of constructive behavior.
- Promote good parenting skills and strengthen the family as the first defense against drug abuse.
- Build academic/vocational skills to allow individuals the potential of developing into contributing members of society.
- Provide mentoring and positive role modeling for youth. Build social skills to enable the development of strong self-image that leads to positive life decisions.
- Mobilize communities to establish environments enhancing positive personal development.
- Strengthen and support policies that promote healthy lifestyles and change community norms.

To reduce the burden of mental disorders, it is essential that greater attention be given to prevention and promotion in mental health at the level of policy formulation, legislation, decision-making, resource allocation and the overall health care system.

The public health concept of disease prevention has viewed prevention as primary, secondary or tertiary depending on whether the strategy prevents the disease itself, the severity of the disease, or the associated disability. This system works well for medical disorders with a known etiology.

Mental disorders, on the other hand, often occurs due to the interaction of environmental and genetic factors at specific periods of life. It becomes difficult even to agree on the exact time of onset of a mental disorder.

Preventive, or early intervention strategies are usually directed against risk factors, and need to be implemented before the onset of the disorder to be effective. However, once the disorder has developed, it may still be possible to reduce its severity, course, duration, and associated disability by taking preventive measures throughout the course of the disorder.

Reference: Prevention & Promotion in Mental Health, Department of Mental Health & Substance Dependence, World Health Organization

Consolidation Update is a joint publication developed and distributed by the communication staff of the Cuyahoga County Community Mental Health Board and the Alcohol and Drug Addiction Services Board of Cuyahoga County to keep the community informed on the consolidation process.

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