

A Phenotype for Resilience Against Accelerated Aging in People with Serious Mental Illness

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September 14, 2023



MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

The purpose of the MHTTC Network is technology transfer - disseminating and implementing evidence-based practices for mental disorders into the field.

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the MHTTC Network includes 10 Regional Centers, a National American Indian and Alaska Native Center, a National Hispanic and Latino Center, and a Network Coordinating Office.

Our collaborative network supports resource development and dissemination, training and technical assistance, and workforce development for the mental health field. We work with systems, organizations, and treatment practitioners involved in the delivery of mental health services to strengthen their capacity to deliver effective evidence-based practices to individuals. Our services cover the full continuum spanning mental illness prevention, treatment, and recovery support.

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

MHTTC Network

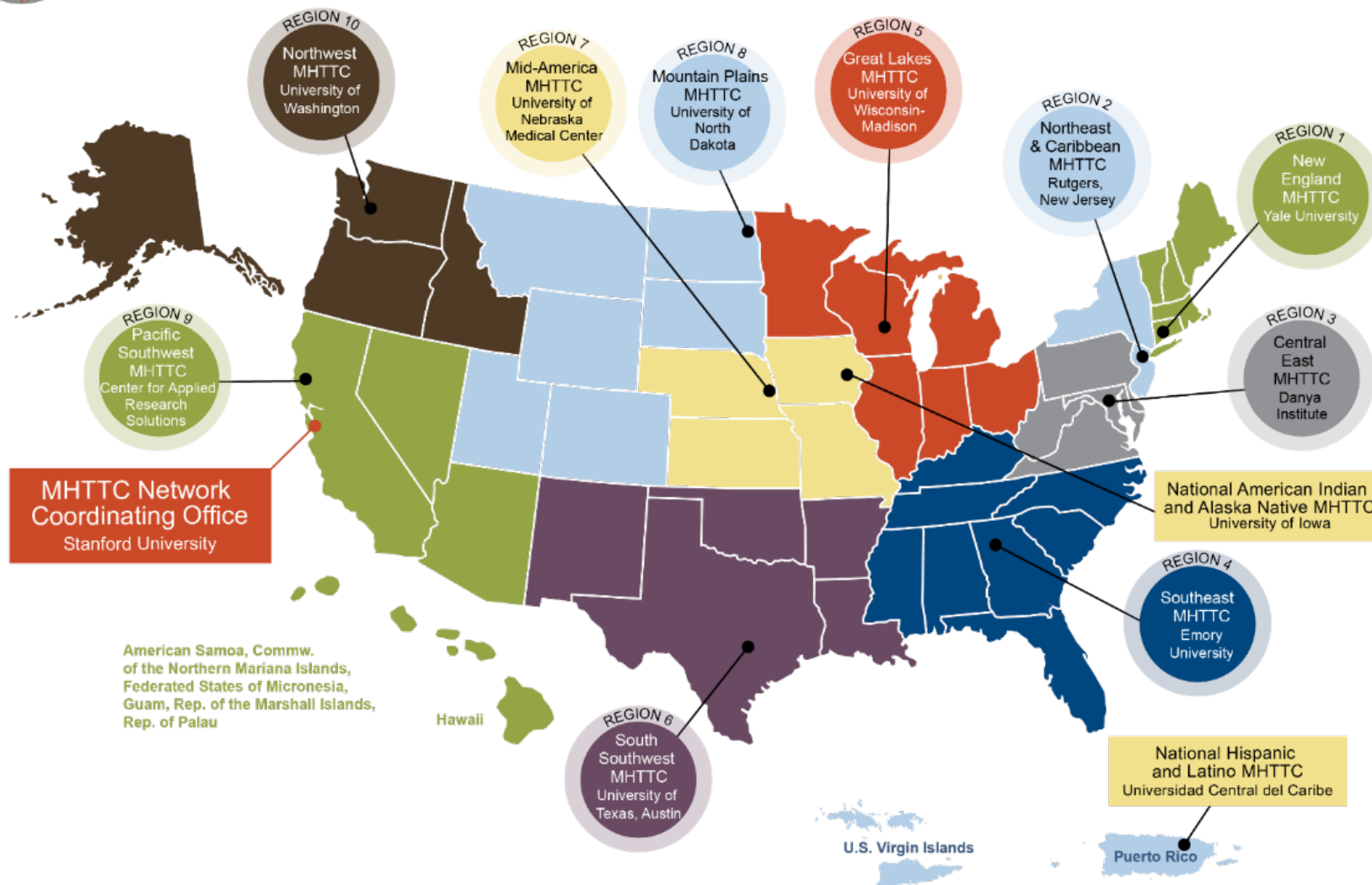


MHTTC

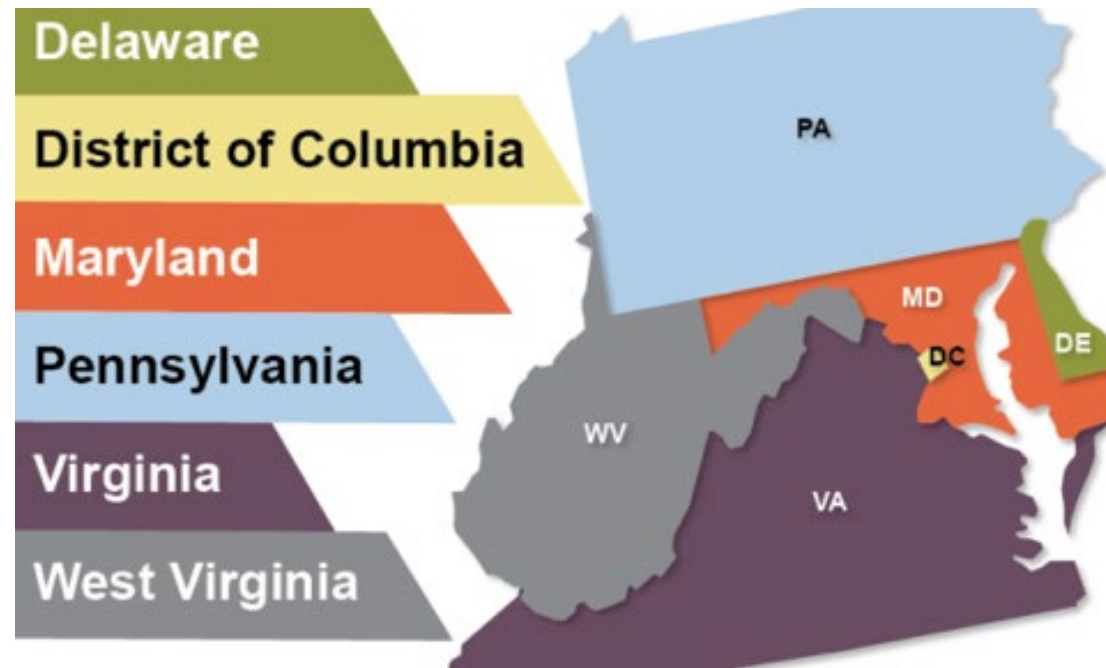
Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

MHTTC Network



Central East Region 3



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network

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Acknowledgment

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At the time of this publication, Miriam E. Delphin-Rittmon, Ph.D., served as Assistant Secretary for Mental Health and Substance Use in the U.S. Department of Health and Human Services and the Administrator of the Substance Abuse and Mental Health Services Administration.

The opinions expressed herein are the views of the authors and do not reflect the official position of the Department of Health and Human Services (DHHS), SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this document is intended or should be inferred.

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Presented 2023

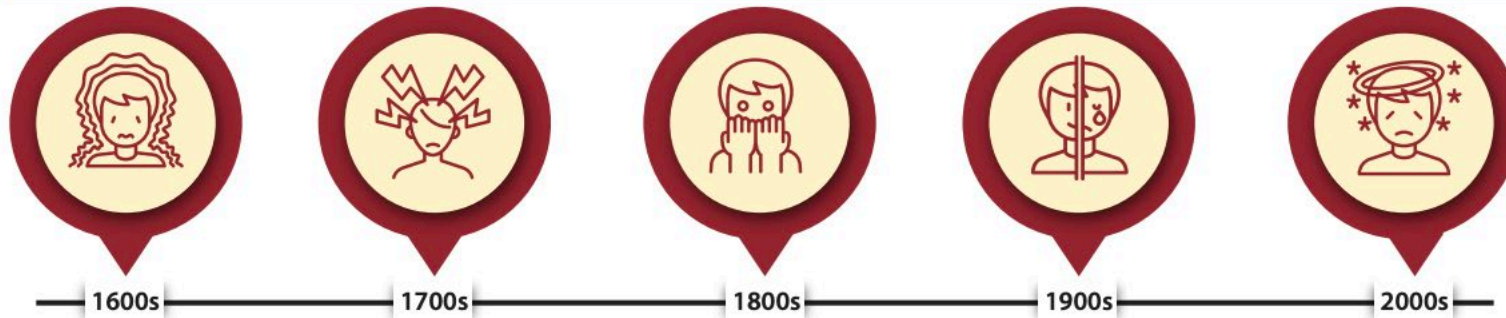
“I am also a person with a lived experience and parent of adult children with mental health challenges, and I believe early mortality in people with serious mental illness is the greatest unrecognized health disparity....

One of my realities was purchasing funeral plots for my children, knowing my daughter’s would most likely be used before my own.”

Accelerated aging and biological aging are two distinct concepts that refer to different aspects of the aging process



A Timeline of the Causes of Early Mortality in People with a Diagnosis of a Serious Mental Illness





health

Life, But Better

Fitness

Food

Sleep

Mindfulness

Relationships

People with multiple mental disorders may age several years faster, study finds

By [Kristen Rogers](#), CNN

Published 3:52 PM EST, Wed February 17, 2021



COLLABORATIVE DESIGN
FOR RECOVERY AND HEALTH

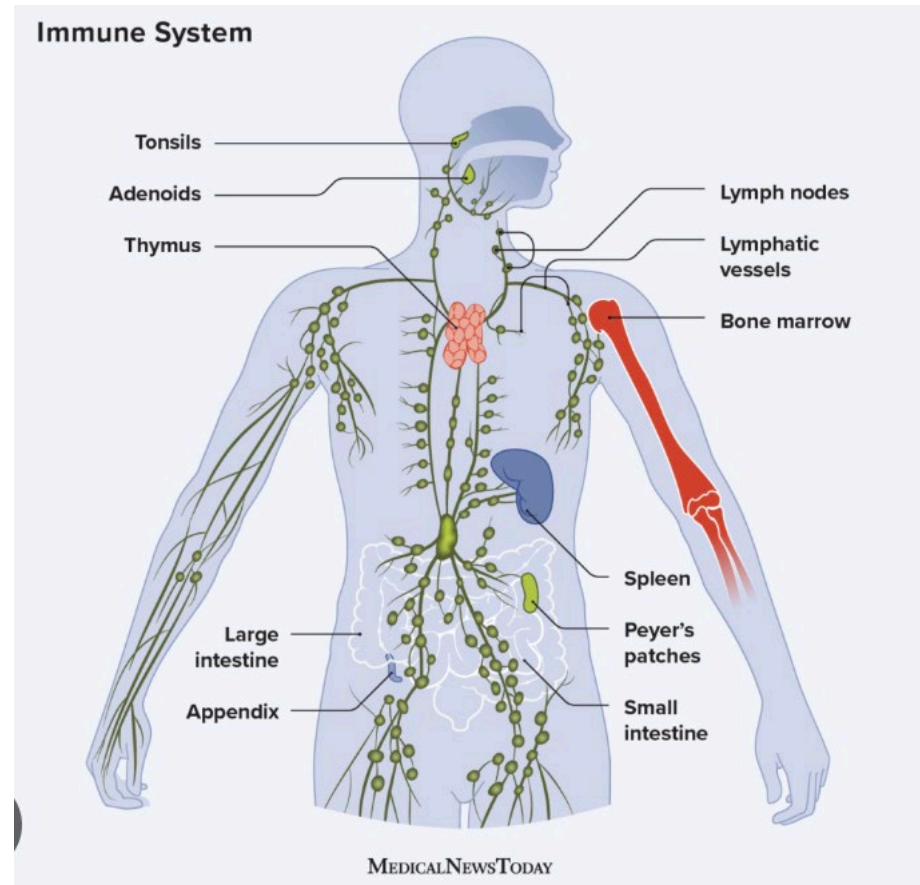
JAMA Psychiatry | [Original Investigation](#)

Association of History of Psychopathology With Accelerated Aging at Midlife

Jasmin Wertz, PhD; Avshalom Caspi, PhD; Antony Ambler, MSc; Jonathan Broadbent, PhD; Robert J. Hancox, MD; HonaLee Harrington, BA; Sean Hogan, MSW; Renate M. Houts, PhD; Joan H. Leung, PhD; Richie Poulton, PhD; Suzanne C. Purdy, PhD; Sandhya Ramrakha, PhD; Line Jee Hartmann Rasmussen, PhD; Leah S. Richmond-Rakerd, PhD; Peter R. Thorne, PhD; Graham A. Wilson, MBChB; Terrie E. Moffitt, PhD



COLLABORATIVE DESIGN
FOR RECOVERY AND HEALTH



Shields GS, Spahr CM, Slavich GM. Psychosocial Interventions and Immune System Function: A Systematic Review and Meta-analysis of Randomized Clinical Trials. JAMA Psychiatry. 2020 Oct 1;77(10):1031-1043. doi: 10.1001/jamapsychiatry.2020.0431. PMID: 32492090; PMCID: PMC7272116.



Consensus Statement | Psychiatry

Lived Experience–Led Research Agenda to Address Early Death in People With a Diagnosis of a Serious Mental Illness

A Consensus Statement

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Abstract

IMPORTANCE People with serious mental illness (SMI), defined as a diagnosis of schizophrenia spectrum disorder, bipolar disorder, or disabling major depressive disorder) die approximately 10 to 25 years earlier than the general population.

OBJECTIVE To develop the first-ever lived experience–led research agenda to address early mortality in people with SMI.

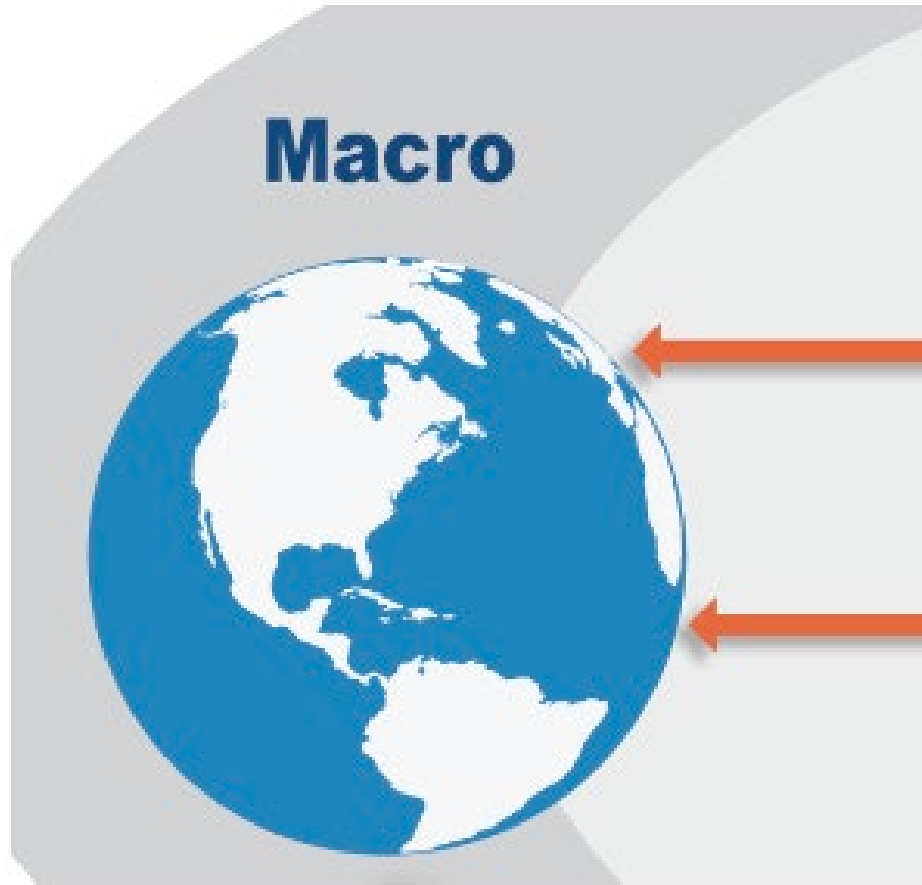
EVIDENCE REVIEW A virtual 2-day roundtable comprising 40 individuals convened on May 24 and May 26, 2022, and used a virtual Delphi method to arrive at expert group consensus. Participants responded to 6 rounds of virtual Delphi discussion via email that prioritized research topics and agreement on recommendations. The roundtable was composed of individuals with lived experience of mental health and/or substance misuse, peer support specialists, recovery coaches, parents and caregivers of people with SMI, researchers and clinician-scientists with and without lived experience, policy makers, and patient-led organizations. Twenty-two of 28 (78.6%) of the authors who provided data represented people with lived experiences. Roundtable members were selected by reviewing the peer-reviewed and gray literature on early mortality and SMI, direct email, and snowball sampling.

<http://livedexp.org/>

Every Person is a Complex Dynamic System



Every Person is a Complex Dynamic System (cont.d)



Protective Factors

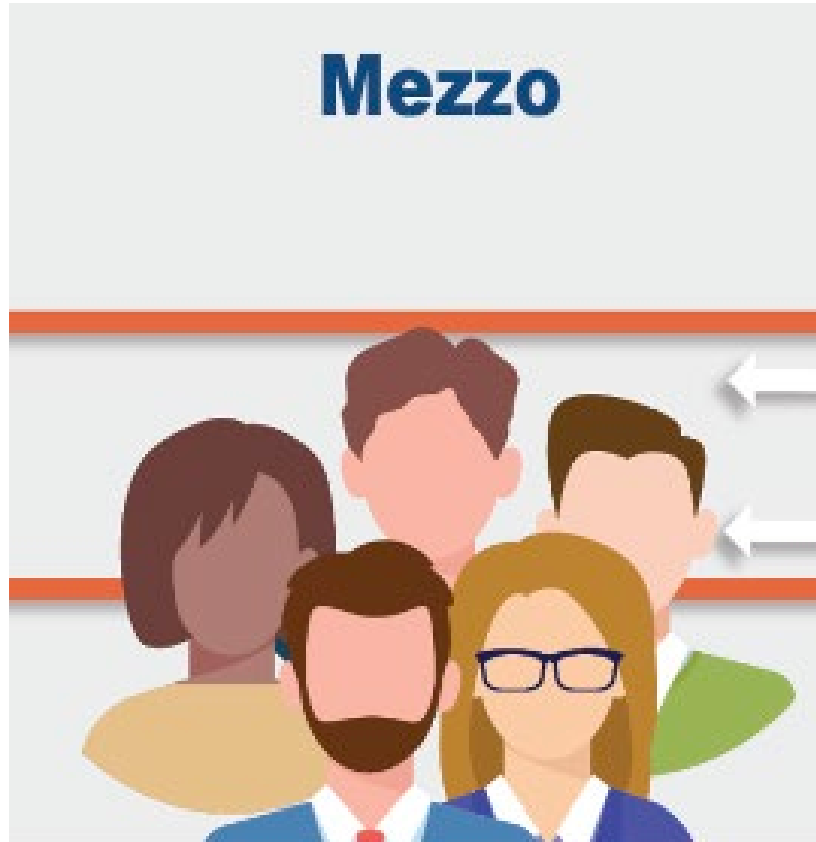
- Universal design in development of interventions designed to increase the lifespan of people with SMI
- Lived experience powered research network
- Community-based research
- Integration of implementation science in intervention development or adaptation
- Inclusion in precision medicine
- Advancements in psychiatric drug discovery

Risk Factors

- Prevailing homogenous definition of SMI
- Societal stigma
- Discrimination Prejudice
- Dissemination of scientific advances through journals
- Current interventions not aligned with the needs of people with SMI

Early Mortality Roundtable. (2022). Strategic Plan Lived Experience-Led Research Agenda to Address Early Death in People With a Diagnosis of a Serious Mental Illness. Available at: <https://livedexp.org>

Every Person is a Complex Dynamic System (cont.d)



Protective Factors

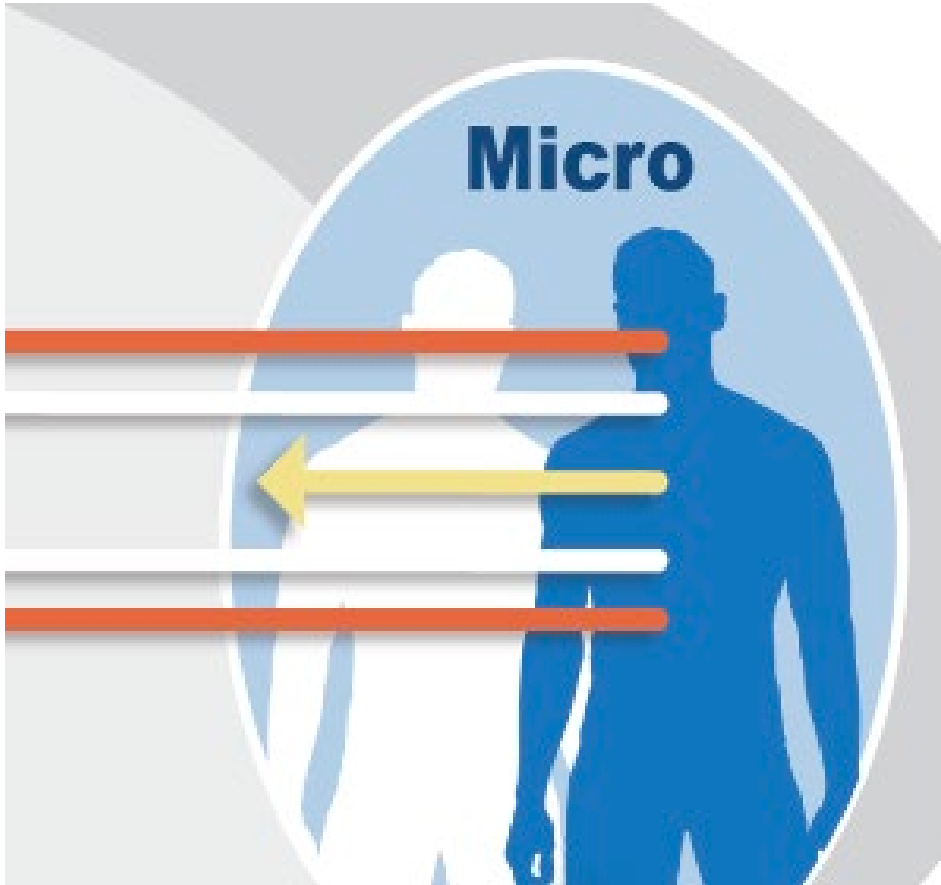
- Health homes that include self- management and peer support
- Family, extended families, and informal support involved in care
- Decision aids to support choice and autonomy
- Evidence-based family interventions
- Evidence-based trauma interventions

Risk Factors

- Inaccurate medical diagnosis or underdiagnosis
- Undertreatment of health conditions
- Limited interventions designed to increase the lifespan of people with SMI, include family and informal support or address trauma
- Implementation challenges of existing interventions that include building relationships
- Limited availability of integrated treatment

Early Mortality Roundtable. (2022). Strategic Plan Lived Experience-Led Research Agenda to Address Early Death in People With a Diagnosis of a Serious Mental Illness. Available at: <https://livedexp.org>

Every Person is a Complex Dynamic System (cont.d)



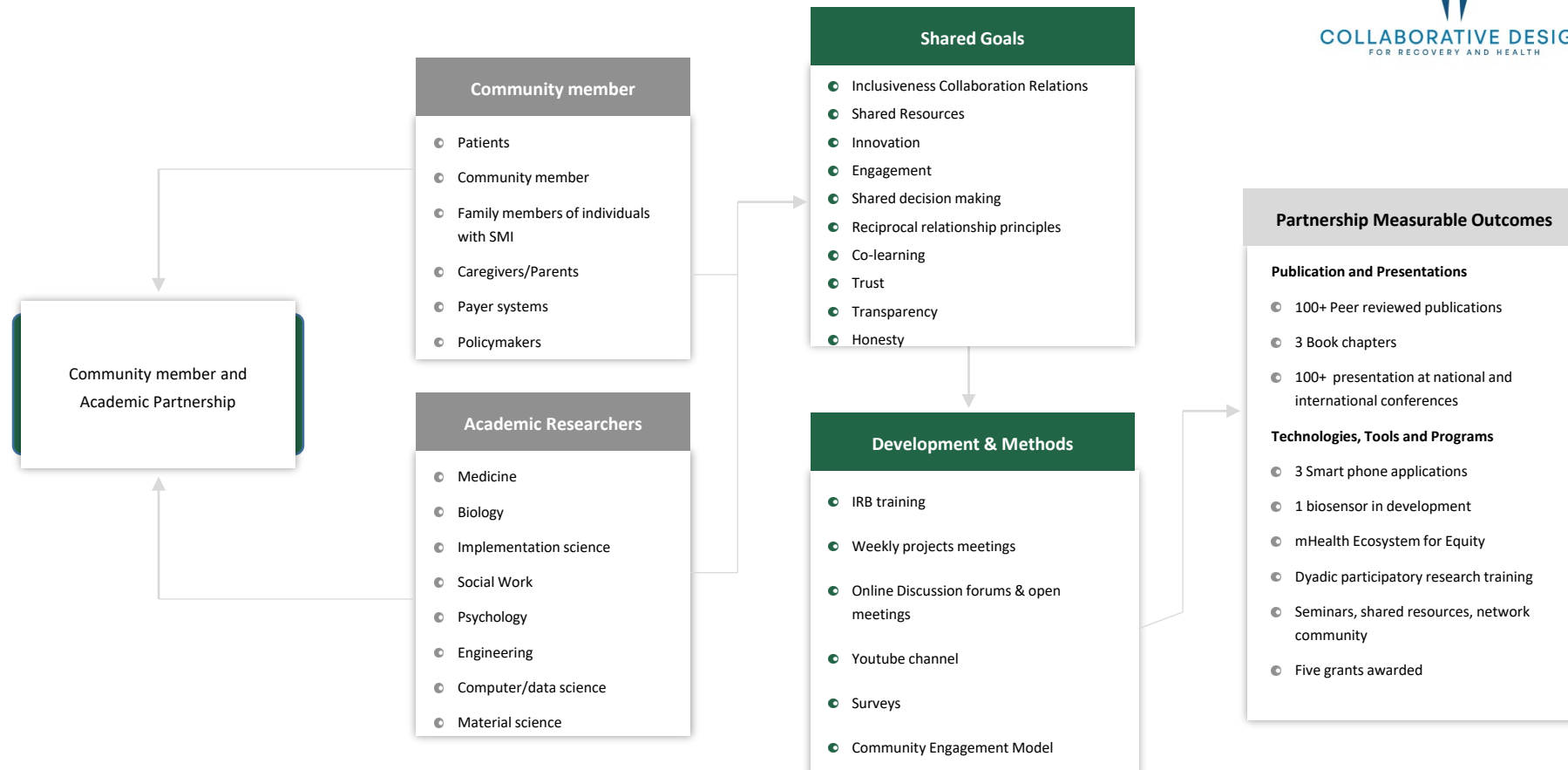
Protective Factors

- Family and informal supports Purpose Sense of belonging Trauma-informed care

Risk Factors

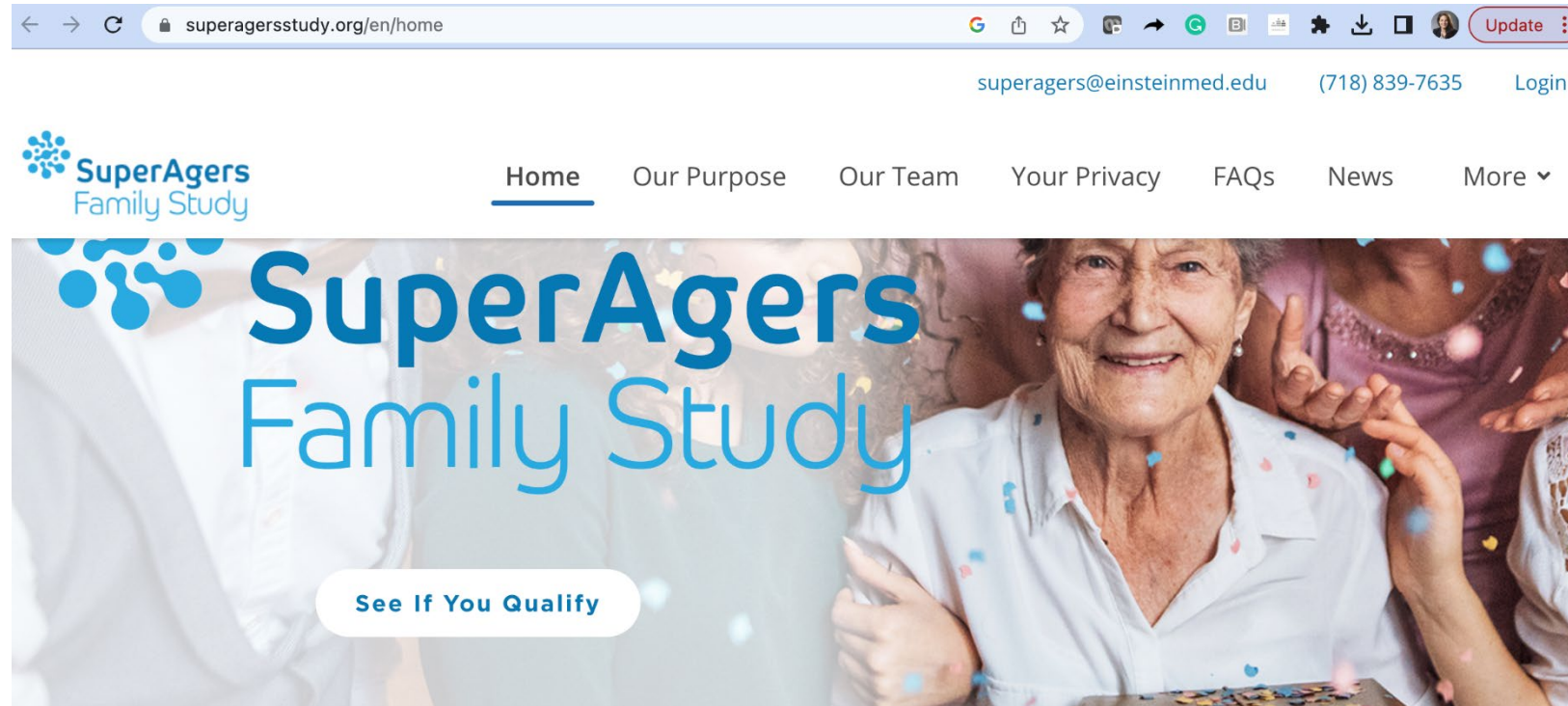
- Low system literacy and health literacy
 - Chronic health conditions
 - Poor health behaviors
 - Self-stigma
- Complex mental health, physical health, and social health treatment needs
- Experience of forms of trauma
 - Engaging in substance use
 - Medication side effects that impact health
 - Co-occurring mental health and substance use disorders (COD)

Early Mortality Roundtable. (2022). Strategic Plan Lived Experience-Led Research Agenda to Address Early Death in People With a Diagnosis of a Serious Mental Illness. Available at: <https://livedexp.org>



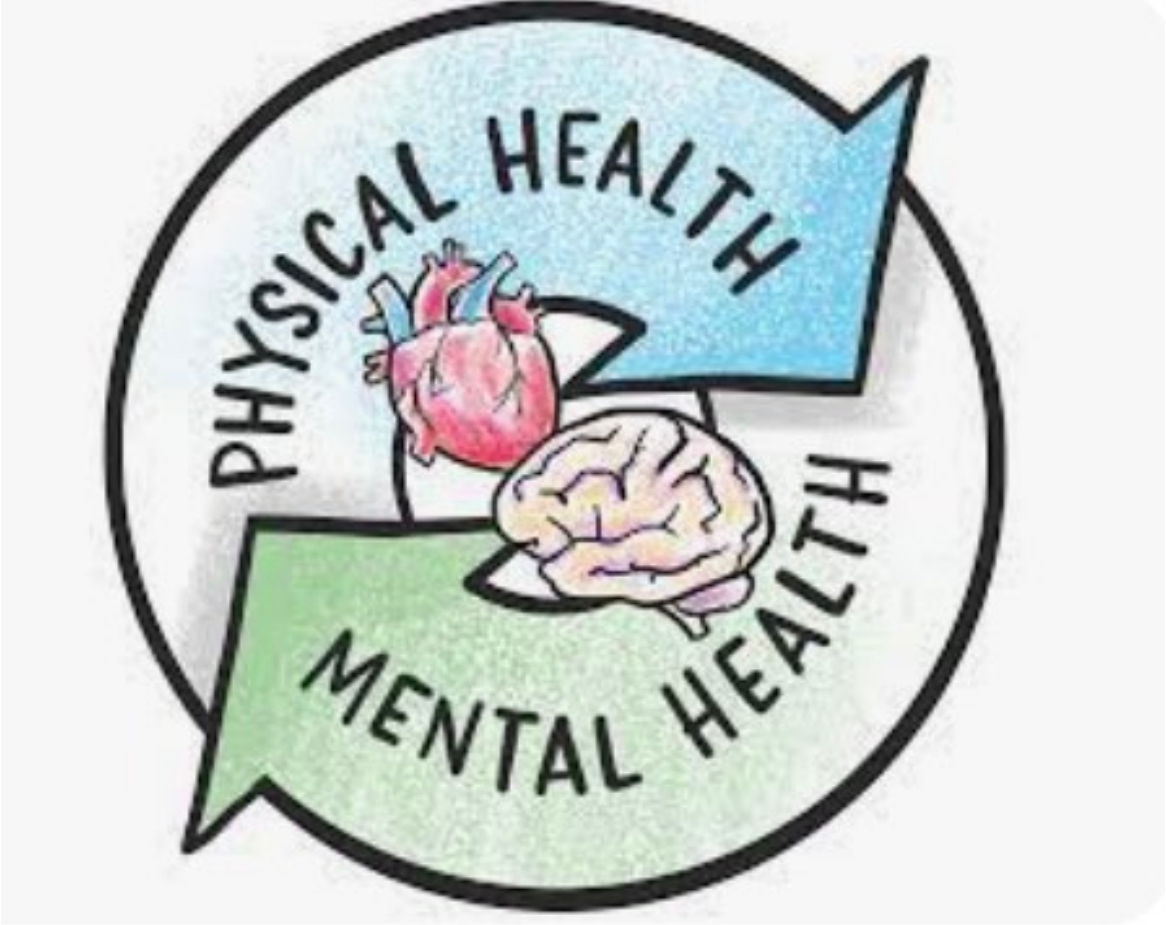
Fortuna, KL et al. (2021). Peer and non-peer academic scientists and peer support specialist community of practice. *IEEE Global Humanitarian Technology Conference*.

Learn from Longevity Researchers



The screenshot shows a web browser window with the URL superagersstudy.org/en/home. The browser's address bar includes navigation icons and an 'Update' button. Below the address bar, the contact information 'superagers@einsteinmed.edu', '(718) 839-7635', and a 'Login' link are visible. The website's navigation menu includes 'Home' (underlined), 'Our Purpose', 'Our Team', 'Your Privacy', 'FAQs', 'News', and 'More'. The main content area features the 'SuperAgers Family Study' logo and a large photograph of an elderly woman smiling, surrounded by confetti. A white button with the text 'See If You Qualify' is positioned over the bottom left of the photograph.

Co-Creating Integrated Care



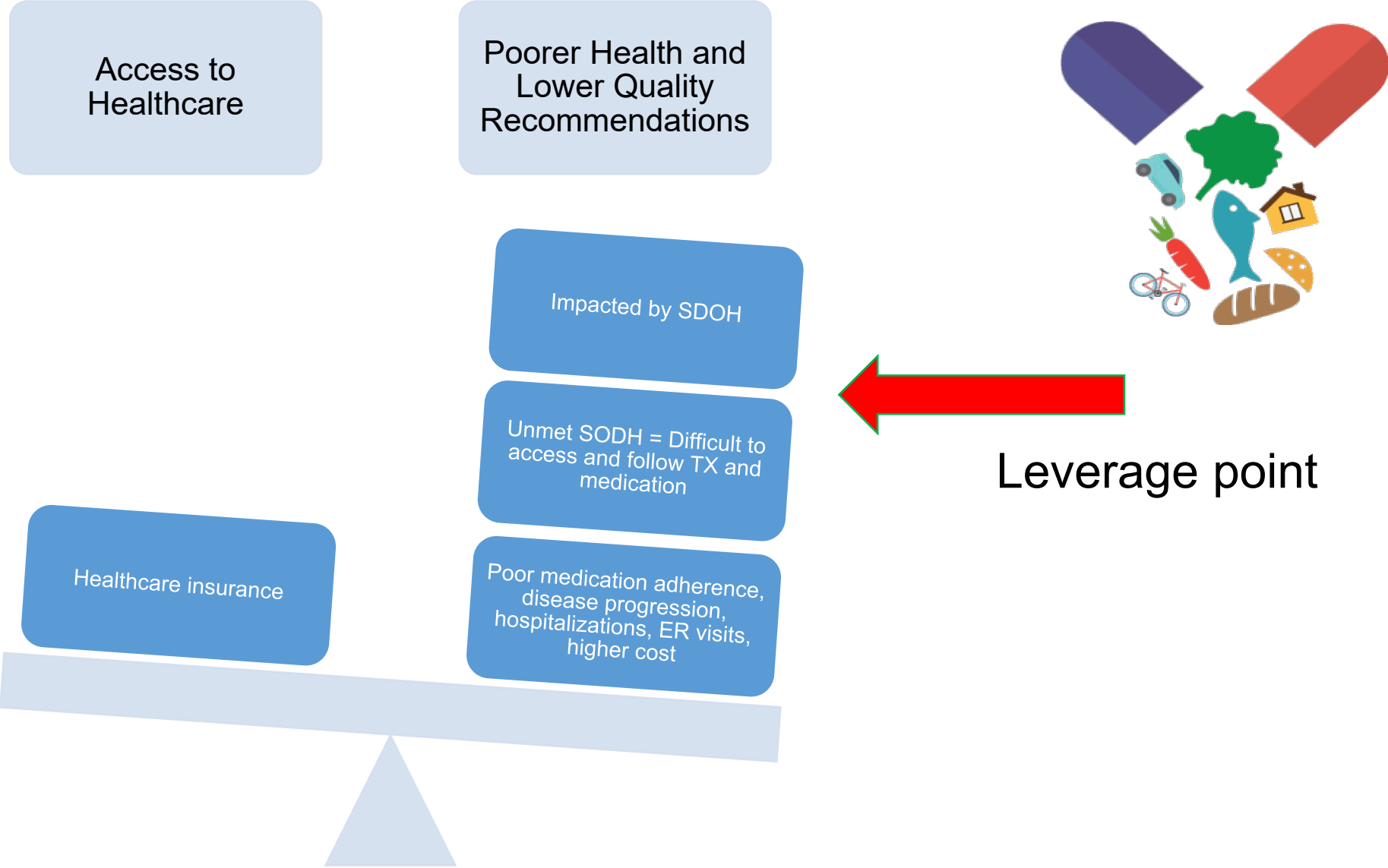


Co-Creating HarmonyCare--Dual Special Needs Plan

- Served racially/ethnically diverse older adults
- Limited access to transportation, food insecurity, and loneliness
- Poor star ratings outcomes—medication adherence and hospitalizations

- **Medication Adherence:** The percentage of members adherent to their medication regimens increased by 15%, resulting in higher scores in this category (Health Outcomes)
- **Avoidable Hospitalizations:** HarmonyCare saw a 20% reduction in avoidable hospitalizations, contributing to improved overall Star Ratings (Health Outcomes)
- **Overall Member Satisfaction:** Members reported higher satisfaction due to improved access to resources, reduced isolation, and enhanced healthcare services (Service User Experience)

High rates of chronic illness, behavioral health conditions and long-term care needs.

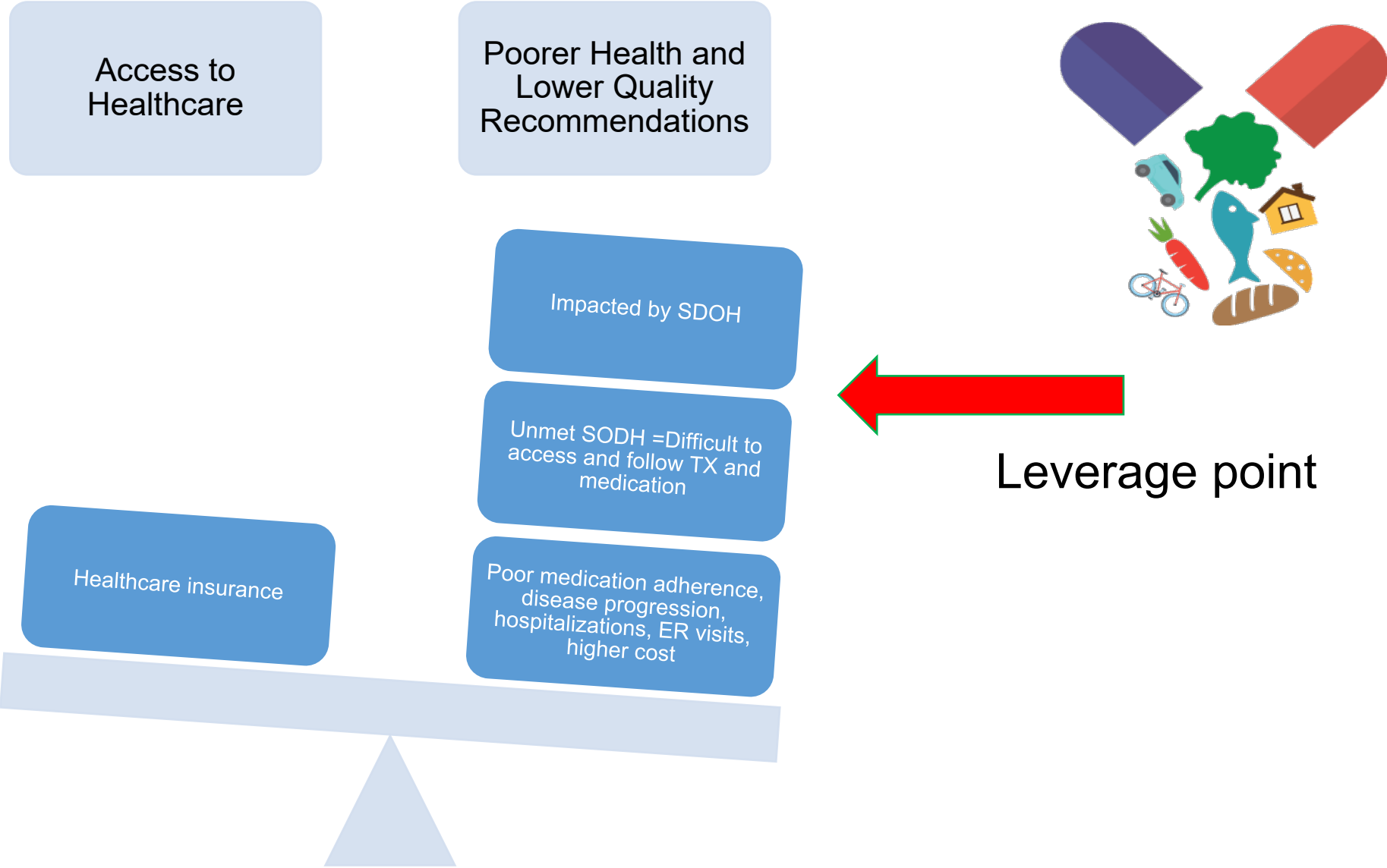


We Created this System---It can be Modified!

1. Evaluate to determine a baseline for your system
2. Create Shared Measurable Aims
3. Identify evidence-based practices for enhancement
4. Implement, Evaluate, Report Results, Reset if needed



Evaluate to determine a baseline for your system; Remember the Leverage Point



Evaluate to determine a baseline for your system



Evaluate SDOH of enrollees

1.The Social Determinants of Health Questionnaire (SDOH-Q): This is a comprehensive questionnaire designed to assess various social determinants of health, including income, education, employment, housing, food security, and more. It can be adapted for specific research or clinical purposes.

2.The Adverse Childhood Experiences (ACEs) Questionnaire: ACEs is a tool used to assess exposure to adverse childhood experiences, such as abuse, neglect, and household dysfunction. These experiences can have a significant impact on health outcomes later in life.

3.The Food Insecurity Assessment Tool: This tool assesses an individual or household's food security status, which is a critical SDOH indicator. It includes questions about food access, affordability, and dietary quality.



4.The Adherence to Recommended Health Behaviors Instrument: This instrument assesses an individual's adherence to recommended health behaviors, including diet, exercise, and smoking cessation, which can be influenced by various SDOH factors.

Evaluate to determine a baseline for your system (cont.d)

Review for Areas to Enhance

Am J of Geriatric Psychiatry 31:8 (2023) 559–567

Available online at www.sciencedirect.com
ScienceDirect
journal homepage: www.ajgp-online.org



Regular Research Article

Estimates of Gaps in Supportive Housing Among Racially and Ethnically Diverse Older Adults with Serious Mental Illness in New York City Boroughs: Manhattan, Bronx, and Brooklyn

Karen L. Fortuna, P.h.D., L.I.C.S.W., Rebecca Heller, L.C.S.W., Hannah Crowe-Cumella, M.S.W., Andrew Bohm, P.h.D., M.S.

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ABSTRACT

Objective: This study aimed to estimate gaps in supportive housing services for racially and ethnically diverse older adults with SMI residing in supportive housing. *Methods:* This study had a total of 753 respondents split into two diagnostic groups, the Delusional and Psychotic Disorders Group, and the Mood (Affective) Disorder Group. Demographic and primary ICD diagnosis data (F2x and F3x) were extracted from medical records. Three elements were measured: supportive housing service needs, fall prevention, and activities in daily living and instrumental activities in daily living. Descriptive statistics (i.e., frequencies and percentages) were used in assessing the demographic characteristics of the sample. *Results:* Respondents had reasonable fall prevention measures in place, did not have challenges carrying out activities in daily living or instrumental activities of daily living and did not need homecare services (n = 515, 68.4%). Respondents needed support managing chronic medical conditions (n = 323, ~43%). Approximately 57% of the total respondents in this study (n = 426) reported the need for hearing, vision, and dental services. Respondents showed high levels of food insecurity (n = 380, 50.5%). *Conclusions:* This is the most extensive study of racially and ethnically diverse older adults with SMI residing in supportive housing. Three areas of unmet need were found: accessing hearing, vision, and dental services, managing

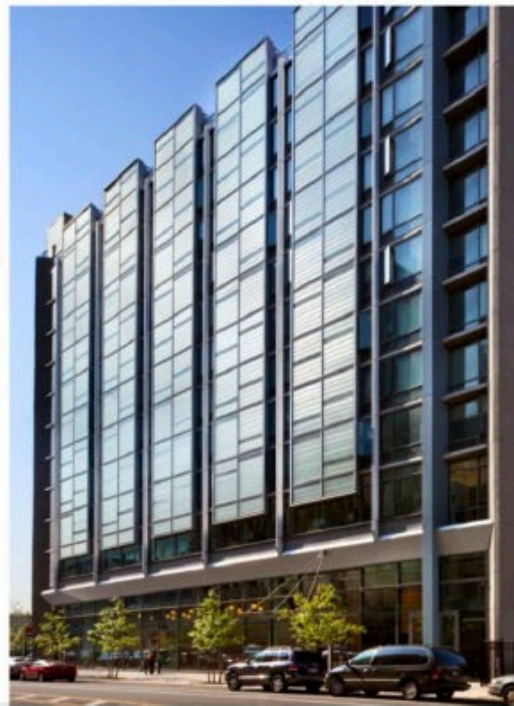
Editorial accompaniment, please see page 568.



Systems Thinking

- Who are the main actors (individuals and institutions) in your system?
- What are the most important interconnections and relationships between the actors in your system that you are aware of?

Create Shared Measurable Aims: Community Solutions (cont.d.)



Accountability Without Authority

Continuum of Care - Agency overseeing and administering compliance for HUD homelessness dollars

HUD T.A. Providers - The industry of firms competing for the nearly \$100 million in technical assistance contracts HUD awards each year

VAMC Homeless Program Manager - Person overseeing ending veteran homelessness for the medical center as well as VA funded programs.

HUD-VASH Program Manager - Person overseeing the HUD-VASH Program for the Medical Center

Hospitals + Street Medicine Teams - People providing regular healthcare to individuals experiencing homelessness

Permanent Supportive Housing Providers - Organizations that operate portfolios of permanent supportive housing units

City and County Leaders - People who can wield the influence of a local government executive's office to generate convening power + political will

VA Case Managers - VA staff working directly w/ vets experiencing homelessness

SSVF/GPD Program Operators - Organizations overseeing the operation and use of VA SSFV and/or GPD resources for veterans experiencing or at risk of experiencing homelessness

Faith Groups - People who run aid or support programs that may or may not be connected to government dollars or formal system efforts

Public Housing Authority - Agency overseeing local VASH + Section 8 Programs

Local HMIS or Data Administrator - Agency with data administrator access and the ability to aggregate client- and system-level reports

Substance Abuse + Behavioral Health Coordinating Entities - Agencies coordinating state + federal Medicaid, SAMHSA and other dollars

Homeless Service Providers - People representing local organizations serving people experiencing homelessness.

Street Outreach Programs - Organizations leading outreach and engagement of people experiencing street homelessness

Re-Entry Programs - People working to ensure housing stability for those exiting prison who have experienced or face a risk of homelessness

Emergency Shelters - Temporary shelter accommodation organizations for people experiencing homelessness outside of transitional programs

Community Foundations - Local funders with flexible capital to support non-profit service delivery, pilot innovation and local advocacy

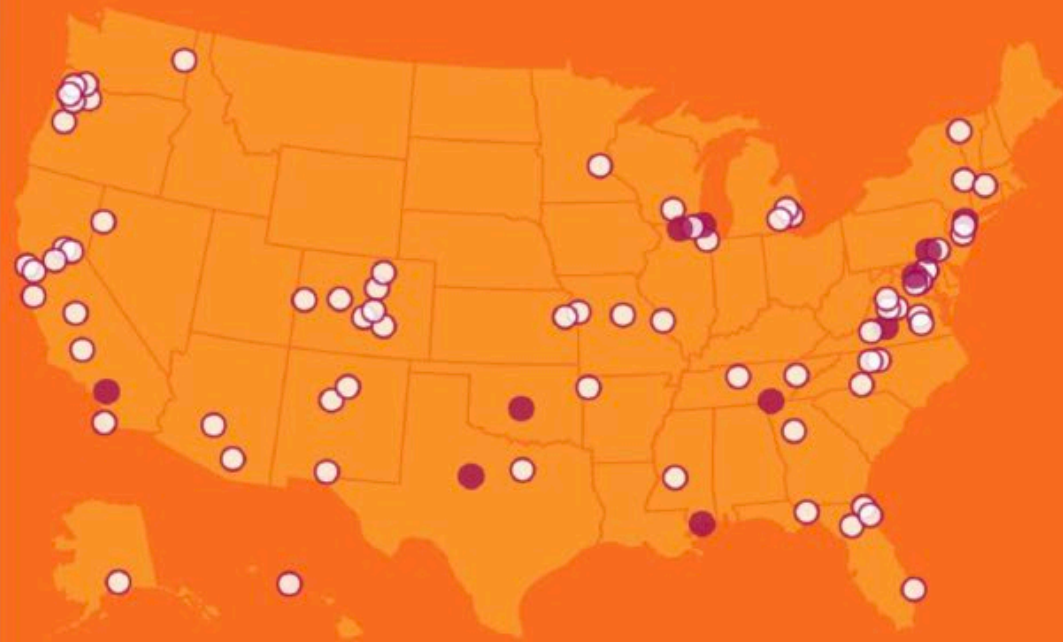
Legal Aid Groups - Organizations providing legal services to people experiencing homelessness

Veteran Service Organizations - Organizations set up for and by veterans to provide resources, services, supportive networks and an ongoing connection to the veteran community

Create Shared Measurable Aims: Community Solutions (cont.d)

REAL RESULTS.

A data-driven movement is redefining what is possible in ending homelessness.



84 communities are participating in Built for Zero

[SHOW THE LIST >](#)

13 communities have ended veteran or chronic homelessness

126,964 individuals housed by Built for Zero communities since 2015

46 communities have achieved a measurable reduction






80 communities have achieved quality real-time data

Identify evidence-based practices

Journey Mapping



Site Legend

	Basic Needs
	Education
	Health Care
	Mental Health Care and Counseling
	Organizational / Community /

Identify evidence-based practices for areas of improvement



Common Social Policies to Address SDOH

- **Earned Income Tax Credit (EITC):** EITC is a tax credit for low to moderate-income individuals and families. Research has shown that it can reduce poverty and improve health outcomes for recipients.
- **Temporary Assistance for Needy Families (TANF):** TANF provides cash assistance to low-income families with children and often includes work-related requirements. Evaluations have examined its impact on reducing poverty and improving economic stability.
- **Housing First:** Housing First is an approach that provides stable housing to homeless individuals with mental illness or substance use disorders before addressing other needs. Studies have demonstrated its effectiveness in reducing homelessness and improving mental health.
- **Supportive Housing:** Supportive housing combines affordable housing with services like mental health and substance abuse treatment. It has been shown to reduce homelessness and improve health outcomes.

Common Social Policies and Interventions to Address SDOH

- **Supplemental Nutrition Assistance Program (SNAP):** SNAP provides food assistance to low-income individuals and families.
- **Peer Support Workers :** Trained **PS** workers can bridge the gap between underserved communities and healthcare services. They have been effective in promoting health education, preventive care, and chronic disease management.
- **Community Health Worker (CHW) Programs:** Trained community health workers can bridge the gap between underserved communities and healthcare services. They have been effective in promoting health education, preventive care, and chronic disease management.
- **Public Transportation Initiatives:** Expanding access to affordable and reliable public transportation can improve individuals' ability to access healthcare services, jobs, and education, especially in low-income communities.
- **Mental Health and Substance Abuse Services:** Integrating mental health and substance abuse services with primary care can improve access to treatment and outcomes for individuals with co-occurring disorders.

Implement, Evaluate, Report Results, Reset if needed

Evaluation Resources

Tip Sheet: Effective Evaluation Reporting¹

Engage Stakeholders



- ⚡ Prioritize stakeholder evaluation needs
- ⚡ Decide how best to communicate with stakeholders
- ⚡ Involve stakeholders throughout evaluation process

Revisit Evaluation Purpose



- ⚡ Draft clear purpose
- ⚡ Revisit purpose if there have been changes to:
 - Stakeholders
 - Intended users
 - Program context
 - Evaluation priorities
 - Information needs

Define Target Audience



- ⚡ Identify the target audience
- ⚡ Identify their media/communication channels
- ⚡ Ensure information is clear & culturally appropriate
- ⚡ Consider how your audience may interpret the findings



Report Evaluation Findings



- ⚡ Choose reporting format
- ⚡ Pick best delivery mode (e.g. printed, verbal, electronic)
- ⚡ Use active voice & avoid technical language
- ⚡ Include graphics & illustrations
- ⚡ Highlight important findings & next steps
- ⚡ Comply with reporting requirements of funders

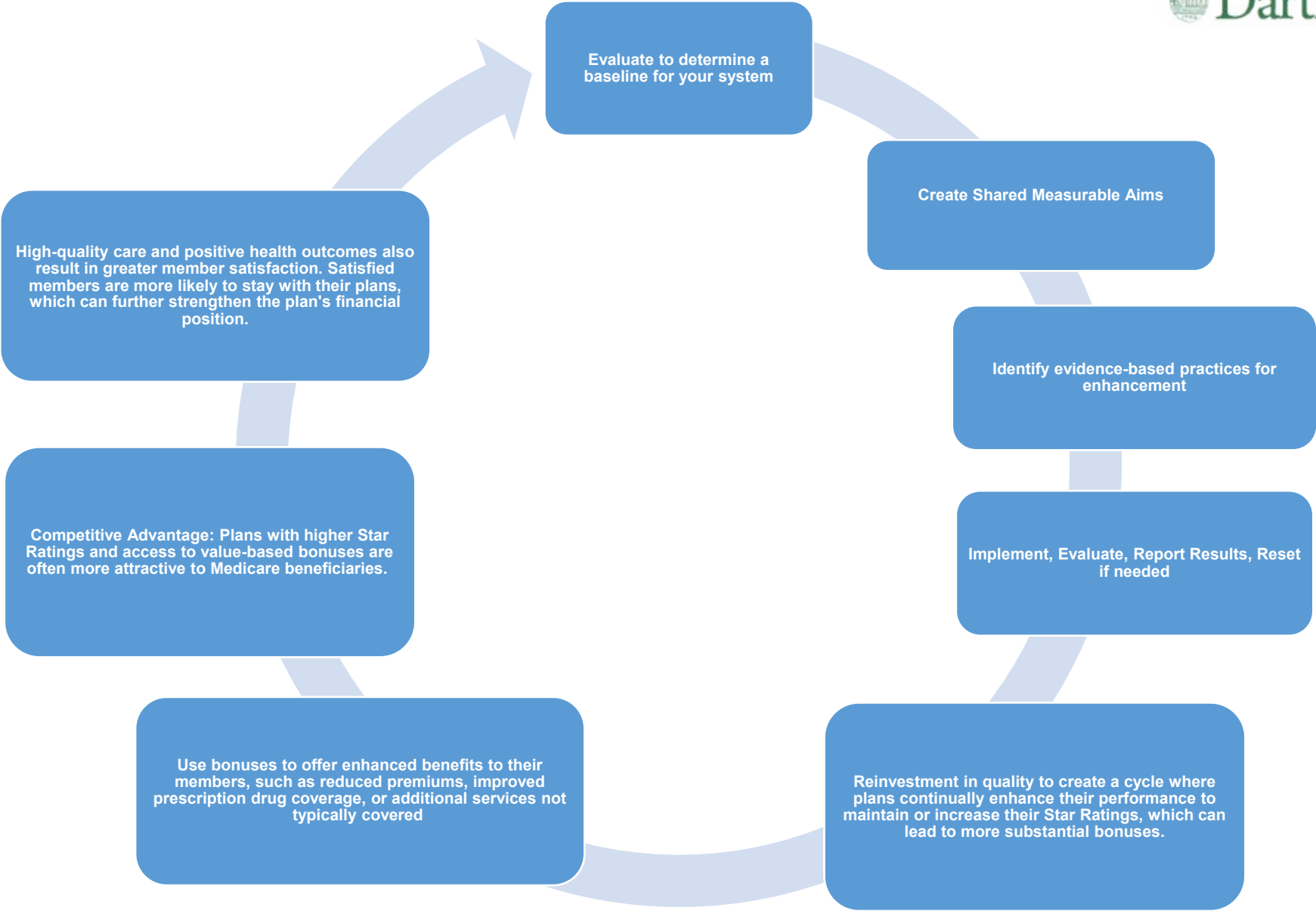
Disseminate Your Findings



- ⚡ Create a dissemination plan
- ⚡ Assign someone to oversee plan implementation
- ⚡ Take the current social & political situation into account
- ⚡ Be aware of timing & frequency of dissemination products
- ⚡ Stay involved through events & social media

¹ The full Evaluation Reporting Guide can be found here: http://www.cdc.gov/dhdsp/docs/Evaluation_Reporting_Guide.pdf

Creating a Cycle for Sustainability



Questions



Appreciation



Contact Us



a program managed by



[Central East MHTTC website](#)

[Oscar Morgan](#), Project Director

[Danya Institute website](#)

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240-645-1145

Let's connect:

