Supporting Mental Well-Being and Decreased Substance Use and Abuse

A resource document for *Healthier Places to Live, Work and Play … A Population Health Promotion Strategy for Saskatchewan*

Healthy People. A Healthy Province.

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Acknowledgements

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Working Group

What is Health?

Prior to the 1970s, the health system focused much of its attention on treating individuals when they became ill - the medical or treatment approach. In the 1970s and 80s we began to understand that what we eat, how active we are, and whether we use tobacco and alcohol also affect our physical and mental health. Similarly, we know that living a balanced lifestyle, having a positive outlook on life and handling stress in an effective way affect our health. This lifestyle approach focuses on helping individuals reduce their health risks by changing their behaviour.

Now we recognize that the picture is much bigger. A **population health promotion approach** takes into account that the health of the community is influenced by many factors beyond health care and individual behaviour. Our understanding of what determines health is continuing to grow. Today we understand that being part of a community and having the support of friends and family, a good job and a healthy environment have a significant effect on our health. People are much more likely to be healthy if they live in communities where it is "easy" to make healthy choices. We know that programs and initiatives aimed at helping people make healthy choices succeed best when they include dialogue and discussion, and when they address not only individual behaviour, but also the environmental conditions influencing it. In many cases, it is the environment, not the individual, that is most in need of change.

What is Population Health Promotion?

Population Health Promotion looks at what determines health and takes action on those determinants to reduce risk factors and ultimately increase health in a whole community. It is a socio-environmental approach confronting root causes of illness. It means creating environments for people where primary prevention can be achieved through a population or community-based approach. (Saskatchewan Health, 1999)

Population health promotion takes into account the broader determinants of health including income and social status, education, social support networks, healthy child development, physical environments, working conditions, personal health practices and coping skills, health services, gender and culture. Population health promotion is about removing the barriers that make it harder for some people to be healthy than it is for others.

What is Mental Well-Being?

Mental health contributes to a person's overall **mental well-being**. Mental health has been defined as "a state of well-being whereby individuals recognize their abilities, are able to cope with normal stresses of life, work productively and fruitfully, and make a contribution to their community." Mental health is about enhancing competencies of individuals and communities and enabling them to achieve their self-determined goals. (World Health Organization, 1999)

For all individuals, mental, physical and social health are closely interwoven, vital strands of life. As we continue to understand this interdependent relationship, it becomes ever more apparent that mental health is crucial to the overall well-being of individuals, societies and countries.

What is Mental Health Promotion?

Mental health promotion is the process of enhancing the capacity of individuals and communities to take control over their lives and improve their mental health. (Centre for Addictions and Mental Health, 2004) It uses strategies that foster supportive environments and individual resilience, while showing respect for equity, social justice, interconnections and personal dignity.

Both population health promotion and mental health promotion have evolved from the same framework, utilize similar principles and practices and share many overlapping concepts. They both encourage people and communities to work collaboratively on the issues that arise; focus on the broad population as a whole; address the determinants of health; and promote using multiple strategies such as strengthening community action, creating supportive environments, building healthy public policy, developing personal skills and reorienting health services so that people can make the healthy choice the easier choice. Since the two terms, population health promotion, and, mental health promotion, have so many similarities, for the purpose of this document, the term population health promotion will be used.

Who Needs to be Involved in this Work?

Because the determinants of health are so broad, population health promotion requires the involvement of a wide range of sectors, agencies, organizations and individuals, including those from outside the health sector. The principles of population health promotion provide a unique framework to guide an organization's or practitioner's practice. Whether you work at the community level or as a health practitioner with individual clients, these principles can be used to assist in providing a holistic approach.

It is also important to recognize that clinical practitioners use a number of population health promotion principles in their practice. These health promoting practices include empowering clients to address barriers such as housing, employment and transportation; ensuring clients are supported with skills and knowledge to act upon issues that support their health and well-being; working collectively with other disciplines and family members; encouraging social supports to promote a holistic approach; and using best practice evidence to guide practice.

Health promoting practice is not the same, however, as population health promotion. Population health promotion focuses on the broad population versus the individual. It promotes activities to address the root causes of issues. This upstream work is often referred to as primary prevention, which is directed towards preventing the initial occurrence of a disease/disorder among the broad population. The purpose of primary prevention is to limit the number of people who develop a disease by controlling causes and risk factors for the disease. The challenge then is how to transfer these health promoting practices to work more upstream with the broader population. It is recognized that there are many pressures within the service delivery system to meet the needs of individuals and families in the area of treatment and counselling. The challenges to doing population health promotion are at three levels:

- from an individual practitioner's perspective, it may be related to having the knowledge, skills, commitment and resources;

- from an organizational perspective, it may be related to having the commitment, resources, structures and culture; and

- from an environmental perspective, it may be related to public opinion, political will, resources and supportive organizations.

It is imperative that all three levels work collectively to build capacity for population health promotion.

How to Identify the Issues

To gain a better understanding about the needs to be addressed, we need to ask the question "why". This allows us to better understand the complexity of the issue. The following story speaks to the complex set of factors or conditions that determine the level of health of the population.

Why is Dave in rehabilitation?
Because he has a drug abuse problem.

Why does he have a drug abuse problem?
Because he has a lot of stress in his life and this is a way to escape from all the pressures.

Why does he have a lot of stress in his life?
Because he lost his job over a year ago and has not been able to find another one.

Why has he not been able to find a new job?
Because he worked in the mining industry for his whole career and most mines have been closed.

Why can't he use his skills in another field?
Because his skill set is very specific to mining and he only has his grade 10 education.
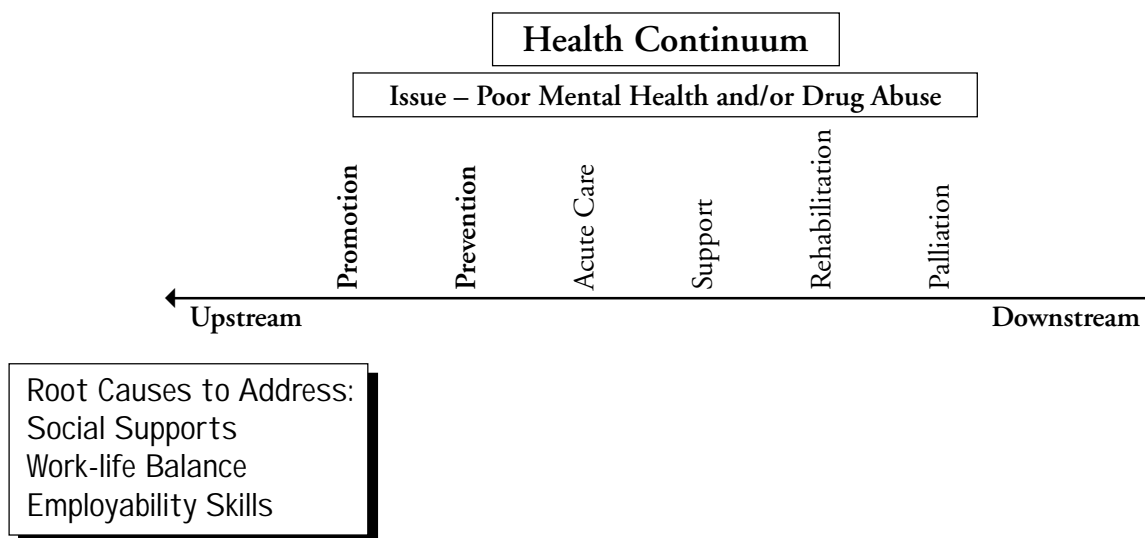*Most jobs now require grade 12 and experience.*

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Why does he only have his grade 10 education?
Because he had to quit high school to help his dad on the farm and his mother was ill.

But why…?

As this story suggests, health and illness depend on a variety of factors or "determinants" that surround individuals, families and communities. Getting to the root cause of a person's illness and other health problems requires us to take action on the broader determinants of health. It also requires that we continue to provide high-quality health services so that people can heal. (Minister of Public Works and Government Services Canada, 1999)

The following diagram demonstrates how the issue of poor mental health and/or drug abuse can be addressed using the whole health continuum. Persons dealing with poor mental health or drug abuse may be treated through an acute care setting, supported through counselling or be involved in a rehabilitation program. We also need to explore how we can address poor mental health and drug abuse using promotion and prevention strategies. To do this, we need to identify the root causes and an effective way is to ask the question "why"? Using the question "why", we may find the root causes to be lack of education or skills, work-life balance issues or having limited social supports. We then need to begin to work to address these root causes by increasing employability skills, developing organizational policies that support work-life balance, enhancing social support systems and promoting supportive environments for learning. As a result, by addressing these broader issues, we will have an impact on the health of the population.

Health Continuum

Issue – Poor Mental Health and/or Drug Abuse

Promotion | Prevention | Acute Care | Support | Rehabilitation | Palliation

Upstream ← ——————————————————————— Downstream

Root Causes to Address:
Social Supports
Work-life Balance
Employability Skills

Population Health Promotion Guiding Principles (Saskatchewan Health, 2004)

Population Health Promotion action is guided by principles, which put values into practice. They include:

- *Remove barriers*
  Population health promotion is about removing the barriers that make it harder for some people to be healthy than it is for others. Creating environments where healthier choices are possible for all individuals will help ensure a better quality of life for Saskatchewan residents.

- *Ensure meaningful participation*
  To ensure meaningful participation, people need to be supported with tools, skills and resources. This can be accomplished by building knowledge and skills among individuals, organizations and communities to act on issues that are important to their health and well-being. It also means creating opportunities for community members and organizations to participate.

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- *Develop partnerships*
  The determinants of health are so broad, population health promotion requires the involvement of a wide range of sectors, agencies, organizations and individuals, in addition to those in the health sector. The collaboration of multiple sectors is essential to the success of a provincial strategy because issues affecting health are large and complex and cannot be effectively addressed by a single sector.

- *Use multiple strategies*
  The factors that determine health are many and diverse; to address them we need a broad range of strategies, which work at all levels of society. The most effective health promotion efforts use several strategies in many different places at numerous times. To create real change, communities need to use strategies that go beyond health education.

- *Focus upstream to address root causes*
  Working upstream means looking beyond the immediate issue or problem to what contributes to or causes the problem. The emphasis is to work to address root causes of ill health by changing the conditions and environments in which people live, work and play.

- *Base decisions on evidence*
  Evidence to make decisions may come from research, evaluation of policies, programs and projects, or knowledge gained through practice and experience. Using both qualitative and quantitative evidence helps to ensure that practice and policies take effective action and are more likely to yield sound results.

Using Population Health Promotion Strategies

In the past, traditional approaches to health promotion have concentrated on helping individuals reduce their health risks by focusing on individual behaviour change. Most strategies for promoting change of individual behaviour have been health education, media campaigns to increase awareness, brochures, posters and one to one counselling. These initiatives are an important part of the continuum of population health promotion work.

The determinants of health provide a broader picture and point to the need to explore other strategies. For effective population health promotion, we must utilize a number of population health promotion strategies in a comprehensive and integrated way. Work along the whole health continuum is important, but to make long term, sustainable change we need to continue to work at the upstream level with a focus on building healthy public policy, strengthening community action and creating supportive environments.

Strengthening Community Action

This strategy involves enhancing the capacity or ability of individuals and communities to participate in and take action on issues that affect health. Community members collectively have resources and skills that can be mobilized to deal with problems as they arise. Population health promotion strengthens community action by helping community groups develop the skills they need, learn how to access resources, build an effective infrastructure, develop strong social networks and evaluate and learn from their efforts.

Examples:

- A partnership including organizations and community members who are interested in addressing child care issues within their community.

- A group of employees working together to promote a healthy workplace.

- The community working together to develop leadership skills to address issues identified by the school body.

Creating Supportive Environments

People are likely to be healthy if they live in surroundings where it is "easy" to make healthier choices. Supportive environments help to reduce inequities and remove barriers to healthy choices.

> **Examples:**
> - Ensuring parenting support networks are available within communities.
> - Community organizations working together to provide a variety of opportunities for youth in the community.
> - Workplaces that support work-life balance by providing employees with the opportunity to work from home or to work flexible hours.

Building Healthy Public Policy

This strategy encourages all policy makers to consider the potential health impact of their policies. This includes all types of organizations, from workplaces and schools to all levels of government. Healthy public policy is any policy that creates and encourages an environment that supports health. Policies can be formal or informal, depending on the specific policy or setting.

> **Examples:**
> - Municipal policies that support affordable and accessible transportation for low-income people.
> - Organizations that review new or existing policies through a population health promotion lens to ensure the potential health impact of the population is considered.
> - Workplace policies that support employment equity.

Developing Personal Skills

Many health promotion programs and initiatives utilize this strategy to provide health education to individuals and groups. It includes awareness programs through the media as well as skills training and supportive services. Skill building is used to strengthen individuals' abilities in coping, resilience, stress management, self-esteem, effective communication with others, ability to accomplish tasks, and the capacity to help others.

> **Examples:**
> - Opportunity for all employees to participate in a communications workshop.
> - Parents and grandparents learning effective parenting techniques.
> - Students learning skills that enable them to make health-enhancing decisions.

Reorienting Health Services

Health services must go beyond traditional formal medical and clinical service provision. Services must become more balanced and comprehensive by addressing the broad social, political, environmental and economic determinants of health and being sensitive to cultural and other diverse needs.

> **Examples:**
>
> • Organizations supporting a variety of staff to do population health promotion work. Support may include accessing training opportunities.
>
> • Grant programs supporting community groups to do population health promotion work.
>
> • Organizations who identify key staff to lead population health promotion work.

Balance Work Along the Health Continuum

All work along the health continuum is important. The dilemma becomes how to balance the more immediate, compelling needs of the treatment and care system, with the less well-understood or adequately documented benefits of a long-term population health promotion approach. Health care and population health approaches are both essential. It is important to position health care and population health promotion as complementary, not competing priorities. They are both important components of a continuum of health services.

Health Promotion Continuum

Along the continuum there are a number of actions we can take to improve health. In the following diagram, upstream approaches focus on the whole population or population groups.
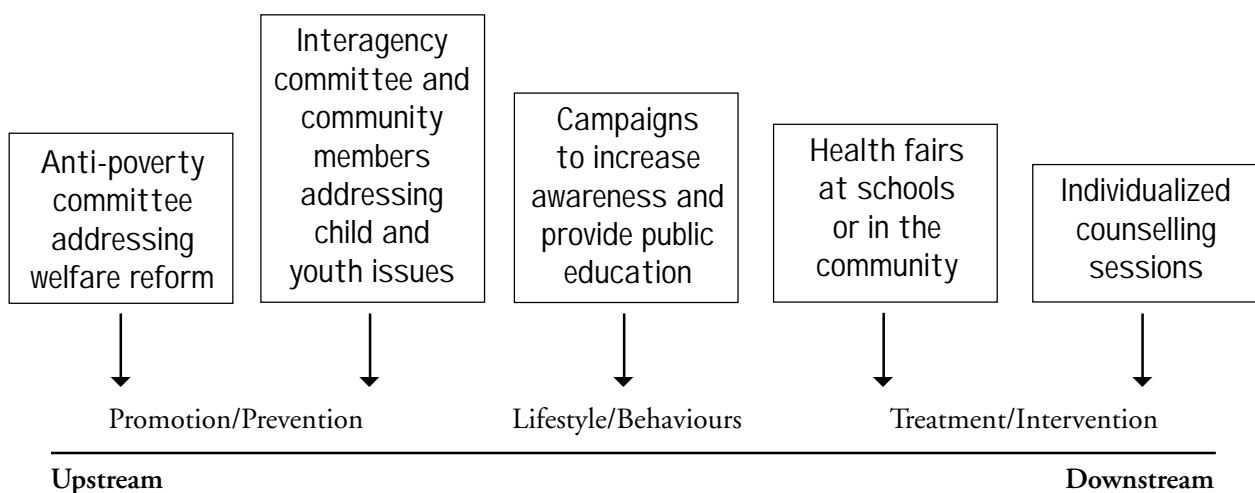
Initiatives and activities address root causes rather than symptoms and seek to change "conditions" or "environments" to support healthy choices. **Example:** Health practitioner participating on an anti-poverty committee addressing welfare reform.

Lifestyle approaches focus on helping individuals and groups change behaviour.
Example: Health education programs or media campaigns to change norms.

Treatment or intervention focuses on helping individuals manage a disease or condition.
Example: Program specifically designed as part of the treatment or intervention.

Anti-poverty committee addressing welfare reform	Interagency committee and community members addressing child and youth issues	Campaigns to increase awareness and provide public education	Health fairs at schools or in the community	Individualized counselling sessions

Promotion/Prevention	Lifestyle/Behaviours	Treatment/Intervention

Upstream   **Downstream**

It is important to remember that population health promotion can take many forms. When addressing mental well-being and decreased substance use/abuse, there are many interacting factors, and, as a result, effective promotion is not limited to a single strategy. Communities are made up of a diverse range of people, so efforts to promote health need to consider a variety of strategies and approaches that are relevant.

Why Address Mental Well-Being and Decreased Substance Use/Abuse?

Mental well-being has been recognized as a major component of health and quality of life. Positive mental well-being is an important resource for individuals, families and communities. It enhances people's capacity to contribute meaningfully to their family, friends, community and society as a whole. Positive mental well-being is achieved by strengthening resiliency (the ability to bounce back from adversity), increasing coping and problem solving skills, enhancing one's ability to manage stress, increasing social connectedness (having someone to talk to, someone to trust, someone to rely on) and ensuring citizenship where each individual is treated equitably. (Saskatchewan Health, 2004)

Alcohol and other drug abuse has also become prevalent as the root cause of many of the serious problems facing Canadians and is conservatively estimated to cost millions of dollars each year. The problem strains our health care, social service, education and legal systems, and takes an immeasurable emotional and financial toll on families. (Saskatchewan Health, 2004)

Substance abuse prevention programs have been successful in reducing substance abuse. However, making progress is not always easy. Many of the problems are intertwined with societal values, norms, attitudes, and beliefs that run counter to reducing problems and strengthening families and communities. Factors within our environment, such as unemployment and racism, also contribute. (Saskatchewan Health, 2004)

Linkage between Mental Well-Being and Decreased Substance Use/Abuse

Positive mental well-being is often an underlying theme promoted through a number of initiatives and programs. Often as a result of these initiatives and programs, there will also be an impact on decreasing substance use/abuse.

Some examples:

- Visits with a new mother and baby focus not only on the physical well- being of the baby, but also on how the mother and other family members are adjusting mentally and emotionally.

- Volunteers provide a variety of evening and weekend programs in which community members can participate.

- Employees form a walking club and walk during lunch and coffee breaks.

- Mentor programs such as an "Adopt a Grandparent Program" link elementary school children and seniors' groups.

- Schools provide extra-curricular activities for students and family members.

Upstream Initiatives/Programs Addressing Mental Well-Being and Decreased Substance Use/Abuse

The following table provides examples that illustrate the difference between traditional and broader population health promotion approaches. Population health promotion approaches complement traditional approaches as they work to support healthier people.

Traditional (Individual) Approach	Population Health Promotion Strategies	Examples of Population Health Promotion Approach
Inform users of municipal recreation facilities to drink in moderation.	Promote healthy public policy that focuses on creating a healthy and safe environment.	**Municipal Alcohol Policy Guide: A practical resource for successfully managing drinking in recreational settings** The Centre for Addictions and Mental Health has released a resource, "Municipal Alcohol Policy Guide: A practical resource for successfully managing drinking in recreational settings". The Guide reflects more than 20 years of experience working with community partners and research in Municipal Alcohol Policy (MAP) development initiated by the Addiction Research Foundation, now part of the Centre for Addictions and Mental Health (CAMH). With over half of Ontario municipalities having adopted MAPs, CAMH recognized the readiness for and interest in municipalities developing their own policies with the assistance of an effective, self-directed guide. According to John Milton, Executive Director of the Ontario Recreation Facilities Association, "The Municipal Alcohol Policy Guide is a tool that no municipality or related organization should be without when carrying out their responsibility of effectively managing events where alcohol is served". Centre for Addictions and Mental Health. Community Health Promotion. www.camh.net/printable/communityhealthpromo_index_pr.html
Mass media campaign on drug and alcohol abuse prevention.	Multiple strategies to address violence and aggression at a community level. Strategies include community partnerships, policy development, media awareness campaigns, and building capacity among professionals, students and parents to address community violence.	**Communities that Care (CTC) Program** has been implemented successfully in several hundred communities in the USA and is being adopted in The Netherlands, England, Scotland, Wales and Australia. The program is a field-tested strategy for activating communities to implement community violence and aggression prevention systems. The CTC strategy helps communities use local data on risk and protective factors to identify risks and develop actions. These include strategies that address the community (mobilization, media, policy change), the school (change school management structures or teaching practices), the family (parent training strategies) and the individual (social competence strategies). To date the CTC system has been evaluated in the USA, involving 40 communities. These evaluations have indicated improvements in youth outcomes including decreasing school problems by 30%, decreasing weapons charges by 65%, decreasing burglary by 45%, decreasing drug offences by 29% and assault charges by 27%. World Health Organization. 2004. Prevention of Mental Disorders. www.who.int/mental_health/evidence/en prevention_of_mental_disorders_sr.pdf

Traditional (Individual) Approach	Population Health Promotion Strategies	Examples of Population Health Promotion Approach
Educate youth not to drink.	Policy development to address advertising, taxation, age restrictions and access to alcohol.	Effective regulatory interventions for addictive substances implemented at the international, national, regional and local levels include taxation, restrictions on availability and total bans on all forms of direct and indirect advertising. A 10% increase in the price of alcohol can reduce the long-term consumption by about 7% in high-income countries and about 10% in low-income countries. In addition, increases in alcohol taxes reduce the incidence and prevalence of alcohol-related liver disease, traffic accidents and other intentional and unintentional injuries, such as family violence and negative mental health impacts due to alcohol consumption. Laws that increase the minimum legal drinking age reduce alcohol sales and problems among young drinkers. Reductions in the hours and days of sale and numbers of alcohol outlets, and restrictions on access to alcohol are associated with reductions in both alcohol use and alcohol-related problems._ World Health Organization. 2004. Prevention of Mental Disorders. www.who.int/mental_health/evidence/en/prevention_of_mental_disorders_sr.pdf
Problem identification after negative behaviours occur.	Build capacity in children to problem solve.	School based skill-building programs that are geared for middle and high school students often serve as both mental health and substance abuse prevention programs, particularly when problem solving is geared towards addressing these issues._ Examples:_ **I Can Problem Solve Program** for elementary or middle school improves cognitive problem solving abilities and reduces impulsivity._ **Improving Social Awareness Social Problem Solving Program** can lead to improvements in coping with stressors related to middle school transition._ **Promoting Alternative Thinking Strategies Program** shows improvement in emotional knowledge and problem solving skills and reduction of internalizing and externalizing problems._ World Health Organization. 2004. Prevention of Mental Disorders. www.who.int/mental_health/evidence/en/prevention_of_mental_disorders_sr.pdf

Traditional (Individual) Approach	Population Health Promotion Strategies	Examples of Population Health Promotion Approach
Individual organization addressing community issues	Strengthen community action to address issues identified by community.	**Nipawin Integrated Services Committee** This committee represents a number of government and non-government organizations with an interest in providing an integrated approach to delivering human services to children, youth and families. The committee has a number of shared values that promote working in collaboration and partnership through shared leadership/ownership, planning, decision making, resource allocation and evaluation to address the needs of children, youth and families who are at risk. The focus is on community-based change. Some accomplishments have included a student support centre, youth group, pre-school program, nutrition program, food security initiative and community resource centre. Contact: Julie Bedel at jbedel@cumberlandcollege.sk.ca or Julie Cleavely at jcleave.kthr@shin.sk.ca
Alcohol and drug pamphlets provided to students.	School boards develop healthy public policies in cooperation with students, parents, teachers and the community.	**Student Alcohol and Drug Use Policy and School Curriculum Resources** This initiative encourages school boards to involve students, parents, teachers and the community directly in their policy development process. Drug education support materials promote the opportunity to learn and practice decision-making, communication and refusal skills. Virtual Party web site (www.virtual-party.org) provides opportunities for youth to interact, explore and dialogue on issues related to alcohol and drugs. The resource "Student Alcohol and Drug Use Policy: A Guide for School Boards" describes the components for a successful policy. Health Canada. 2001. Preventing Substance Use Problems Among Youth People: A Compendium of Best Practices. www.hc-sc.gc.ca/hecs-sesc/cds/pdf/substanceyoungpeople.pdf
Mass media campaign on drug abuse prevention.	Multiple strategies to address substance abuse prevention. Strategies include partnerships, media campaigns, skill development for youth and parents, community involvement, and policy changes to address access to tobacco, alcohol and other drugs.	**The Community Partnership Program's** main purpose was to decrease substance abuse by improving conditions in the community environment. Most partnerships utilized basic community change models that involved: 1) development of a steering or executive committee; 2) mobilization and training of community volunteers; 3) needs assessments and gap analyses of existing prevention services (using volunteers to provide buy-in); 4) development of comprehensive prevention plans; 5) implementation of prevention activities;

Traditional (Individual) Approach	Population Health Promotion Strategies	Examples of Population Health Promotion Approach
		6) evaluation; and 7) feedback and revision of plans and activities. Examples of prevention activities were community, school, and cultural events; alternative recreational programs for youth; parent or family training programs; employment and workplace programs; neighborhood clean-ups of drug houses; and mobilizing citizens to change laws/ policies to reduce access to drugs. Substance Abuse and Mental Health Services Administration. 2000. Prevention Works Through Community Partnership. http://www.health.org/govstudy/ms666/findings.aspx#Comm
Individual organizations addressing children and youth issues in isolation.	Strengthen community action and build capacity to address the health and development of children and adolescents.	**Communities in Action for Children and Youth** is a working group of agencies and interested citizens committed to supporting the healthy development of all children and adolescents. CIACY embodies the principles and goals of the Search Institute's "Healthy Communities, Healthy Youth" initiative. Search Institute. http://www.search-institute.org/communities/ CIACY endeavors to heighten the capacity of Calgary's citizens and organizations to make positive differences as an "Asset Builder" by (1) raising the community consciousness about the urgency and feasibility of mobilizing individuals, communities, policy makers and resources to take positive action on behalf of all children and youth; (2) providing assistance so that communities develop and implement coordinated, long-term efforts to promote the healthy development of all children and youth; (3) motivating children/ youth serving organizations and institutions to develop and implement asset-building strategies; (4) motivating and equipping families to build developmental assets; (5) modeling the assets concepts in the respective workplaces and communities of the Communities in Action for Children and Youth members; (6) actively engaging children and youth in building assets in their own lives and the lives of their peers, and in contributing to community initiatives; and (7) celebrating successes by acknowledging individuals, groups and organizations that practice asset-building. Search Institute www.hc-sc.gc.ca/hecs-sesc/cds/pdf/substanceyoungpeople.pdf

Traditional (Individual) Approach	Population Health Promotion Strategies	Examples of Population Health Promotion Approach
Tell youth they should not drink alcohol.	Coalition to address policies to reduce access to alcohol and promote messaging that underage drinking is unacceptable.	**Communities Mobilizing for Change on Alcohol** (CMCA) is a community-organizing program designed to reduce adolescent (13 to 20 year-olds) access to alcohol by changing community policies and practices. Initiated in 1991, CMCA has proven that effectively limiting the access to alcohol of people under the legal drinking age not only directly reduces teen drinking, but also communicates a clear message to the community that underage drinking is inappropriate and unacceptable. CMCA employs a range of social organizing techniques to address legal, institutional, social, and health issues in order to reduce youth alcohol use by eliminating illegal alcohol sales to youth by retailers and obstructing the provision of alcohol to youth by adults. Substance Abuse and Mental Health Services Administration. http://modelprograms.samhsa.gov/worddocs/FactSheets/Cmca.doc
Anti-violence campaign.	Multiple strategies to address strengthening community action, creating supportive environments and building healthy public policy through a community development approach.	**Creating New Choices** addresses all forms of violence, including domestic violence. The model seeks to create a socially just environment for all members of the school community. In striving for this outcome, the project's aim is to engage in a long-term community development approach with two or three schools at any one time. It encourages the development of strategic partnerships, self-expression, self-realization and self-determination. Accordingly, the project method places control of the project with the school community and relies on a continuing commitment of all parties over a period of time. The project undertakes a critical approach to examining school structures and practices that promote oppression, and works to promote change. Strategies for change have included development of appropriate curricula, creation of specific policies, providing professional development opportunities for staff, development of student education and support mechanisms, parent education including public forums, and promoting creative initiatives such as festivals. Victoria Good Practice Programs in VIC. www.austdvclearinghouse.unsw.edu.au/states.htm
Individual organizations influencing the development of health policies.	Strengthening community action to build and influence healthy public policy.	**Cornerstones of Mental Health** is a project whose aim is to influence mental health policies in municipal planning and decision-making. Involved in the project were several organizations with the widest possible cross-sector cooperation and the active participation of citizens. The two objectives included: • to ensure the inclusion of mental health issues in political decision-making and in public debate, and to influence the concepts and attitudes related to mental health through publicity; and

Traditional (Individual) Approach	Population Health Promotion Strategies	Examples of Population Health Promotion Approach
		• to strengthen and support the mental health and well-being of citizens and communities, and find practical ways of supporting mental health and preventing disorders. This was implemented by a Consensus Meeting on Mental Health where national recommendations were based on the following cornerstones: strengthening of community spirit and involvement; good physical, mental and social environment; sufficient basic security; and good mental health services. Mental Health Promotion, Case Studies from Countries www.who.int/mental_health/evidence/en/case_studies_report.pdf
Encourage youth to be active in their community.	Strengthen community action among youth to create supportive environments.	**Saskatchewan Learning** supports a comprehensive school health approach that is designed to influence positively the knowledge, attitudes and behaviours of students. A comprehensive school health program includes a wide range of school and community personnel collaborating to enhance the well-being of students. Goals are achieved through formal and informal instruction; support services; a healthy school environment; and social support of peers, families, school and community. This is accomplished by involving students, teachers, parents and community to support and facilitate coordinated planning. Saskatchewan Learning Health Education, A Curriculum Guide for the Middle Level, (Grades 6-9) July 1998 http://www.sasked.gov.sk.ca/docs/health/health6-9/intro.html#philo The aim of the **Youth Empowerment Strategy (YES)** is to engage and empower youth to take active and positive leadership roles in their schools and communities. This is accomplished through leadership training and youth and adults working together to address issues in their communities and schools. Contact: Ryan Melin, Saskatoon Health Region rmelin@lshd@shin.sk.ca or Maxine Wiebe, Saskatoon Health Region, mwiebe@cphd.ca
Problem identified when certain behaviours are exhibited.	Proactive approach to building supportive environments.	**Project Connect - Making the Transition** "Connections and Resource for Youth", a youth wellness center, developed and implemented Project Connect, focusing on grade 8 girls and the transition from elementary school to high school. The goals of the project are to engage the participants, to develop a support and social network that is community-based and to motivate young women to work collectively to promote positive change within their school and community. The project was in partnership with three elementary community schools. A youth engagement and youth leadership development model was utilized. Connections and Resources for Youth. Contact: CRU@sasktel.net or (306) 978-0391

Traditional (Individual) Approach	Population Health Promotion Strategies	Examples of Population Health Promotion Approach
Provide remedial reading programs to students.	Strengthen community action to create a supportive environment.	**Family Literacy Programs** support a number of benefits for adults, children, the family, schools and communities. Evidence identified that for adults, there was in increase in literacy skills, level of education, job skills and employment opportunities. Adults also experienced personal growth including increased self-esteem, advocacy and willingness to take risks, and became more comfortable in a school setting. Participants in family literacy skills were more likely to stay in the program than participants in adult-only programs. The children showed an increased interest in literacy activities, had expanded concepts of print, showed greater language development, performed better than expected when they entered school and increased their fine and gross motor development and social skills. Benefits to the family included development of family learning strategies, opportunities to discuss and practice parenting skills and enhanced family relationships. Potential benefits for schools and the community included children who are better prepared for school and community businesses with a greater pool of qualified workers. Family literacy programs also tend to lessen the effects of poverty and may even help reduce crime and violence. Smart Library on Adult Education. http://adulteducation.smartlibrary.info/NewInterface/segment.cfm?segment=2676
One time anti-bullying program for all grade 7 students.	Create a supportive environment within schools that support positive peer relations.	The **Olweus Bullying Prevention Program** is a multilevel, multi-component school-based program designed to prevent or reduce bullying in elementary, middle, and junior high schools (students 6 to 15 years old). The program attempts to restructure the existing school environment to reduce opportunities and rewards for bullying. School staff are largely responsible for introducing and implementing the program. Their efforts are directed toward improving peer relations and making the school a safe and positive place for students to learn and develop. **Proven Results** • A 30% to 70% reduction in student reports of being bullied and bullying others; results are largely parallel with peer ratings and teacher ratings • Significant reductions in student reports of antisocial behavior (e.g., vandalism, fighting, theft, and truancy) • Significant improvements in classroom order and discipline • More positive attitude toward schoolwork and school Substance Abuse and Mental Health Services Administration. http://modelprograms.samhsa.gov/worddocs/FactSheets/Olweus%20Bully.doc

Traditional (Individual) Approach	Population Health Promotion Strategies	Examples of Population Health Promotion Approach
Encourage staff to be physically active at work by setting up an exercise room.	Creating a supportive environment with the employees of the organization.	**MDS Nordion** is a nuclear medicine company that focuses on the health and well-being of people around the world. This philosophy also translates into promoting a healthy work environment for its employees. MDS Nordion's corporate culture is based on openness, trust, respect and integrity. Their comprehensive wellness program goes far beyond physical activity and lifestyle choices, taking a holistic approach that touches on all aspects of well-being: a sense of control over work, health, access to support and lifestyle choices and behaviours. The program offers an array of training programs geared towards the individual, the team, and leadership development. **Results:** • The absenteeism rate declined from an average of 5.5 days per person in 1993 to less than 4 days in 2000. • Employee turnover rate is now half the industry average. MDS Nordion http://www.mds.nordion.com/master_dex.asp?page_id=26

Evaluation of Population Health Promotion Initiatives

Evaluation is an essential component to population health promotion work. It helps to answer many questions: What difference has the initiative made in people's lives or to the environment? What elements are working? What is not working? In the long term, have there been any changes in health status of the population? Evaluation includes observing, documenting and measuring. It compares the actual results of the program with what was expected to happen.

Planning for evaluation is an essential part of the program planning process. There are three different levels of evaluation that can be used to assess the effectiveness of a program.

Process evaluation asks questions about the processes used to achieve the results. The questions may include: To what extent were members of the target group involved in the planning? Are participants satisfied with the program? What contributions have the partners made to the project? **Impact** evaluation measures the short-term effects of a program and is concerned with whether the objectives were met. Impact evaluation measures changes in behaviour, environments, health knowledge, lifestyle or risk factors. **Outcome** evaluation assesses whether the population health promotion program has been effective in the long term. For instance, has there been a change in health status of the population?

To answer these questions, often both qualitative and quantitative evaluation methods are used. Qualitative methods focus on describing people's experience and feelings about the program. Some qualitative evaluation tools include focus groups and interviews. Quantitative evaluation methods concentrate on systematically measuring changes and effects using numbers and statistics (e.g. the percentage of people who have stopped smoking). Surveys are the most commonly used quantitative evaluation tool.

A comprehensive population health promotion evaluation uses a combination of both methods. Qualitative evaluation is useful in understanding why particular effects occurred as a result of the population health promotion program (e.g. why people started to exercise more). Quantitative methods help to identify the extent or level of change to be measured and allow comparisons between particular groups.

There are a number of ways to evaluate population health promotion programs. A program logic model is a useful approach that addresses evaluation and ensures appropriate strategies are linked logically to anticipated outcomes. A program logic model is like a road map, it defines boundaries, highlights important features and identifies progress along the way.

The following diagram provides a sample program logic model using population health promotion strategies to address mental well-being and decreased substance use and abuse. When developing a program logic model, it is imperative to include all stakeholders who will be involved in addressing an issue.

Goal:
- To improve the conditions that support positive mental well-being for Saskatchewan residents by promoting resilience; connectedness; and, citizenship.
- To reduce alcohol and drug use or abuse in the population, and especially in children and youth.

Focus of Population
Population of the Health Region

Population Health Promotion Values
Respect, Community Participation, Sharing of Resources, Social Justice, Caring for the Environment

Program Component - Building Capacity

Program Outcomes	Activities	Indicators	Assumptions
By the end of the 5th year, practitioners and organizations will have increased capacity to do population health promotion work. By the end of the 3rd year, a number of champions from a variety of organizations will be using population health promotion strategies to address issues. By the end of the 1st year, population health promotion learning needs of practitioners and organizations will have been identified.	- Administer Health Promotion Capacity Checklists - Interpret results, prepare report and share findings - Practitioners' job descriptions and performance evaluation reflect population health promotion knowledge and skills - Leadership training - Learning opportunities for practitioners - Access to resources - Mentor/ protégé program - Network formed - Administer Health Promotion Capacity Checklists	- Report complete and findings shared with stakeholders - # of practitioners identifying population health promotion activities as 20% of their work time - # of organizations identifying population health promotion champions - # of practitioners feeling supported to do population health promotion work - needs of practitioners identified - # of organizations and practitioners involved in the network	Organizations prioritize building capacity within practitioners and the community to address issues by using population health promotion strategies.

Program Component - Peer Support

Program Outcomes	Activities	Indicators	Assumptions
By the 5th year, the peer support network is embedded in the school culture, supporting students in leadership roles addressing the needs of the student body. By the end of the third year, students will be leading the peer support network program. By the end of the 1st year, a peer support program will be implemented in one rural school.	- Ongoing student forums - Policies to support a healthy school environment - Community involvement in school (i.e. staff meetings, leaders, experts) - Leadership training - Mentoring program - Literature search and explore best practice programs - Develop and implement a peer support network plan including needs assessment and consultation	- Students know where to go for advice when dealing with difficult situations - Students identify that the school is a safe and healthy environment - # of implemented healthy school policies - # of leaders and mentors in program - Students, parents, teachers and community identify being engaged and involved in the peer support	The school and community support peer support networks.

Supporting Mental Well-Being and Decreased Substance Use and Abuse

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