

Chapter 13:
SAMHSA's Wellness
Initiative

SAMHSA'S WELLNESS INITIATIVE

Eight Dimensions of Wellness

EMOTIONAL

Coping effectively with life and creating satisfying relationships.

ENVIRONMENTAL

Good health by occupying pleasant, stimulating environments that support well-being.

INTELLECTUAL

Recognizing creative abilities and finding ways to expand knowledge and skills.

PHYSICAL

Recognizing the need for physical activity, diet, sleep, and nutrition.

WELLNESS

OCCUPATIONAL

Personal satisfaction and enrichment derived from one's work.

FINANCIAL

Satisfaction with current and future financial situations.

SOCIAL

Developing a sense of connection, belonging, and a well-developed support system.

SPIRITUAL

Expanding our sense of purpose and meaning in life.



Communication among mental health consumers, professionals, and primary care providers about health information is essential to overall wellness.

Through its Wellness Initiative, SAMHSA pledges to promote wellness for people with mental and substance use disorders by motivating individuals, organizations, and communities to take action and work toward improved quality of life, cardiovascular health, and decreased early mortality rates.

To learn more and sign the Pledge for Wellness, visit <http://www.samhsa.gov/wellness>.

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Series of
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Measurement of Health Status for People with Serious Mental Illnesses

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I. Foreword

Recent evidence reveals that the incidence of serious morbidity (illness) and mortality (death) in the population with serious mental illnesses has increased. *In fact, people with serious mental illnesses are now dying 25 years earlier than the general population.*

This increased morbidity and mortality is largely due to treatable medical conditions caused by modifiable risk factors such as smoking, obesity, substance abuse, psychotropic medication side effects, and inadequate access to medical care.

An earlier report, *Morbidity and Mortality in People with Serious Mental Illness*, reviewed the causes of excess morbidity and mortality in this population and made recommendations to improve their care. That report asserted that State Mental Health Authority (SMHA) stakeholders needed to embrace two guiding principles:

- *Overall health is essential to mental health.*
- *Recovery includes wellness.*

To these principles we now offer this Vision:

Integrated Healthcare in the Mental Health System for People with Serious Mental Illnesses

To accomplish this Vision will be a journey, with many initiatives and partners, to improve how the general healthcare and mental health systems collaborate to integrate care. *This report, as a first step, focuses on creating systematic capacity to measure baseline data and the future impact of our initiatives through a standard set of health indicators that are gathered regularly and used to inform the clinical care of each person we serve, as well as aggregated to provide us with population health data. Also included in this measurement capacity is the adoption of proven population surveillance tools currently in use within the field of public health and the application of these tools to mental health surveillance (e.g., including standard health status questions within SMHA consumer-oriented surveys).*

This 16th technical report is a collaborative effort developed jointly by the National Association of State Mental Health Program Directors (NASMHPD) Medical Directors Council, the National Association of State Mental Health Program Directors Research Institute, Inc. (NRI, Inc.) and the Center for Mental Health Services (CMHS)/Substance Abuse and Mental Health Services Administration (SAMHSA). It is based on a relevant literature review, work-group meetings of the Medical Directors Council, and a two-day meeting of medical directors, consumers, NRI researchers, SAMHSA representatives, academic researchers, and other technical experts. This report aligns with earlier reports including *Morbidity and Mortality in People with Serious Mental Illness*, *Integrating Primary Care with Behavioral Health*, *Polypharmacy*, *Smoking Policies and Practices* and our recent report on *Obesity*.

We must prioritize and bring urgency to our work in order to fight this epidemic of premature death and its contributing causes.

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