Introduction

Persons with mental illnesses, who are also overweight or obese, represent an "epidemic within an epidemic" (NASMHPD, 2008). Obesity is a public health crisis in the general population, where approximately 65% of U.S. adults are either overweight or obese with projections of a 75% U.S. adult overweight and obesity rate by 2015 (NASMHPD, 2008). According to the Surgeon General's 2001 report (U.S. DHHS, 2001), approximately 300,000 U.S. deaths a year are associated with obesity and being overweight. On average, persons with mental illnesses die 25 years earlier than the general population and suffer disproportionate medical comorbidities that negatively impact individuals' functioning. This excess mortality and morbidity is primarily due to modifiable risk behaviors including poor nutrition, lack of exercise, and smoking. Also, Coloradans with severe psychological distress are significantly more likely than those without distress to smoke, binge drink, and be physically inactive and obese.

This pilot study may add substantially to the knowledge base and is a necessary first step toward creating resources that will potentially increase behavioral health providers' knowledge and lead to services that improve the health outcomes for those they serve. The qualitative data collected in this pilot study will also provide the foundation for future competitive grant proposals.

Project Aims & Methods

The aim of this collaborative pilot study is to investigate the weight control needs of persons with mental illnesses. This study will be possible through the existing partnership between the UCD Behavioral Health & Wellness Program (BHWP) and Behavioral HealthCare, Inc. (BHI), a community behavioral health organization that oversees the services of three Front Range community mental health centers: Arapahoe/Douglas Mental Health Network, Aurora Mental Health Center, and Community Reach Center. The partnership will complete a community-based needs assessment, focusing on patients' and behavioral health providers' knowledge and attitudes about weight control issues for adults with mental illnesses, as well as perceived barriers and facilitators to weight control services. Over the grant period, the community-academic partnership will conduct an extensive literature review and separate focus groups with providers and patients at the three mental health centers (six total focus groups total) to assess the need for weight control interventions.

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References


Piloted tobacco cessation strategies with the Colorado QuitLine at National Jewish Medical and Research Center and at four statewide Community Mental Health Centers (CMHCs).

Wellness Initiative Studies

BHWP has a successful track record of conducting community-based studies. Building upon studies of tobacco use and prevention in Colorado’s public mental health system, the current study will employ similar needs assessment and evaluation methodology to the study of weight control issues in Colorado’s public mental health system.

Tobacco Use Prevalence for Persons Served by the Public Mental Health System (Morris, Waxmonsky, May, Giese, 2006)

Completed a study in 2006 that utilized the Colorado Client Assessment Record (CCAR) to examine predictors of tobacco use among 111,984 persons with mental illnesses.

Smoking Cessation for Persons with Mental Illnesses: A Mental Health Provider Toolkit (Morris, Waxmonsky, Giese, Graves, & Turnbull, 2007)

Developed and disseminated a mental health provider toolkit for tobacco control that incorporates existing evidence-based guidelines, expert consensus, extensive literature review, and focus group feedback from both Colorado mental health consumers and providers.

Eliminating Tobacco Related Health Disparities for Persons with Mental Illnesses: Implementation of a Mental Health Provider Toolkit (Morris, Waxmonsky, Graves, & Giese, 2007)

Piloted tobacco cessation strategies with the Colorado QuitLine at National Jewish Medical and Research Center and at four statewide Community Mental Health Centers (CMHCs).