
We discussed the process of choosing the Behavioral Health Focus Issues keeping in mind they could be individual or group behavior focused or have an impact on policy, systems and environmental changes.

We looked to Healthy NJ 2020 to see if there was any groundwork done in behavioral health in the previous round, and found there was only a focus on tobacco use in public health preparedness not and suicide, unintentional poisoning could have included substances.

The large gorilla in the room right now is the pandemic, and we reflected on the impact it has and will have on substance use and mental health. Look at how behaviors will impact risk factors. How behavior impacts risk. Lot of work on people who are dependent on substances or use tobacco are at a greater risk right now. How does the stress in the regions of the state impact substance use and vice-versa.

DATA GATHERING

Diane asked about what sort of baseline data are needed. One of the challenges we will face is specific data points that we can look at right now and what is the end time goal to measure? There may be multiple data points and we have to track over the 10 years.

Angelo suggested looking at Superstorm Sandy since it had a to 5-year impact on Behavioral Health and other issues. The impact of this Pandemic may be seen longer during HNJ2030.

Diane mentioned that data reporting has halted right now with a lot of stay at home orders. Reiterated looking back to Superstorm Sandy

We talked about rates appearing to be going up if capacity increases. We only now treat 10% of the people who need it.

TOPIC AREAS

We have to pick one or two topic areas as this is one piece of the larger health living. We want to look at the risk factors the pandemic will have and see what impact other disasters had in NJ on substance use and mental health, such as 9-11 and Superstorm Sandy. What were the risk factors that increase with disasters?

The following were discussed:

• Capacity & access

These are all consuming and use that to look at several issues under that umbrella. Look at specific data in regard to that and real time data, allow for adult and adolescent services. Cover a lot of the
different areas. NJ unique because we have major events that impact access and capacity. Look at post-Sandy environment as a baseline. They have research on substance use disorders and MH on Sandy. Also included can be school safety & Mental Health Capacity.

- Medication Assisted Treatment

  Nation suggested looking at the promotion of MAT by Medicaid policy and promoting MAT services. We should be able to be specific information on those needing MAT. Get a baseline currently and see what the percentage are using Medically Assisted Treatment. Could be clear way to see the impact on success and capacity. DOH promoting MAT use, Medicaid policy for covering MAT services, promoting MAT services.

- Stigma

- Promotion of Mental Health and Substance Use Services

- Infrastructure to handle the coming Mental Health crisis coming with COVID-19

- Adverse Childhood Experiences

- Isolation of older New Jerseyans during the pandemic.

- Behavioral Health Access and workforce development.

- Tobacco Cessation
  
  Baseline data may be NJ Quitline utilization

- Mental Health, Depression, Suicide

  Look at older adult suicide risk factors, taking a look at impact of the pandemic on suicidality and increased stresses and risk factors on adolescents as well as adults. Look at Helplines use rates. Also measuring decreasing stigma for people to seek help.

To efficiently use our time, our group will come up with 3 areas and see which pan out and which fall off. We will build a defense to see what topic is important so we will have a solid background that will stand up to other topics.

FUTURE MEETING SCHEDULE

We decided to meet every 2 weeks at first. We can share information and articles via email since half of us are blocked by google docs. The timeframe is fluid now because of the pandemic.

The group will meet every two weeks to begin. Our next meeting will be 5/26/2020 at 10:30am. We will research on our own to see what kind of data we can find, baseline data and see what data will be able to be tracked.

Take a look on our own at 1-2 areas to bring back to our members. We will share with the group and if there is overlap, that is potentially a good thing because it means that area is strong.