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Commissioner

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THE PLEDGE FOR WELLNESS: PROMOTING GOOD HEALTH

DMHAS is a healthcare agency in the broadest sense—physical and emotional health. As a healthcare agency, we ***promote health*** by providing services that are ***recovery-oriented***, meaning that the services give the individual tools they need to manage their condition and to achieve the highest quality of life that they can, despite the severity of their disorder. For an adult receiving services for a psychiatric or substance use disorder or an individual involved in our prevention activities, there should be an enduring, positive health effect.

In looking to the future and how we can continue to help people improve the equality of their lives, my attention is drawn to a quiet tragedy—one that *screams for attention*. Psychiatric and substance use disorders have very serious physical health effects associated with them that compromise quality of life and may even lead to premature death. The life expectancy in the U.S. for men and women is 74.4 years and 79.8 years, respectively (2001 data). Data collected in eight states for 1997 through 2000 shockingly reveals that men with serious mental illness are likely to die at 53 and women at 59. Some of the prominent medical problems faced by people with psychiatric and substance use disorders include cardiovascular disease, heart attack, stroke, diabetes, cancer, obesity, and HIV/AIDS.

Physical healthcare and substance use/mental healthcare are generally viewed as separate and distinct fields with patients seeking physical healthcare from primary care physicians and mental health or substance use care from behavioral health providers. Although they are closely linked, with each impacting the other, the healthcare systems that serve these needs continue to be fragmented and isolated from one another, negatively impacting the quality of patient care. Persons with behavioral health disorders often don't have their medical needs met and/or generally receive poorer quality and less intense physical healthcare compared to those without mental illnesses or substance use problems. There are many possible explanations, including barriers to accessing services, patient-clinician communication difficulties, and stigma or bias against patients.

The federal Substance Abuse and Mental Health Administration (SAMHSA) is promoting the **Pledge for Wellness**, a coordinated, strategic plan to promote wellness for people with behavioral health disorders by taking action to prevent and reduce early mortality by 10 years over the next 10 year time. SAMHSA's vision is a future in which people with behavioral health disorders pursue optimal health, happiness, recovery, and a full and satisfying life in the community via access to a range of effective services, supports, and resources.

As DMHAS Commissioner, I am committed to address this very serious health issue. We have begun to take steps to identify healthcare needs of people within the DMHAS healthcare system and to look for ways to better integrate physical and behavioral healthcare. The issues are challenging and require strong collaboration between primary and behavioral healthcare providers. The result will be yet another dimension of recovery—better overall health and improved quality of life for the people we serve.

I support the vision and have **TAKEN THE PLEDGE FOR WELLNESS**. I urge you to do the same. To sign on go to: <http://www.bu.edu/cpr/resources/wellness-summit/pledge.html>.

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