



ITTC

International Technology Transfer Center

A program of the International Consortium of Universities
for Drug Demand Reduction

Systems Change in Action

Reducing Stigma and Building Health
Equity Skagit County Learning
Collaborative



What I hope you will get from today's learning session?

Ideas for designing a system change initiative using the six conditions of system change framework.

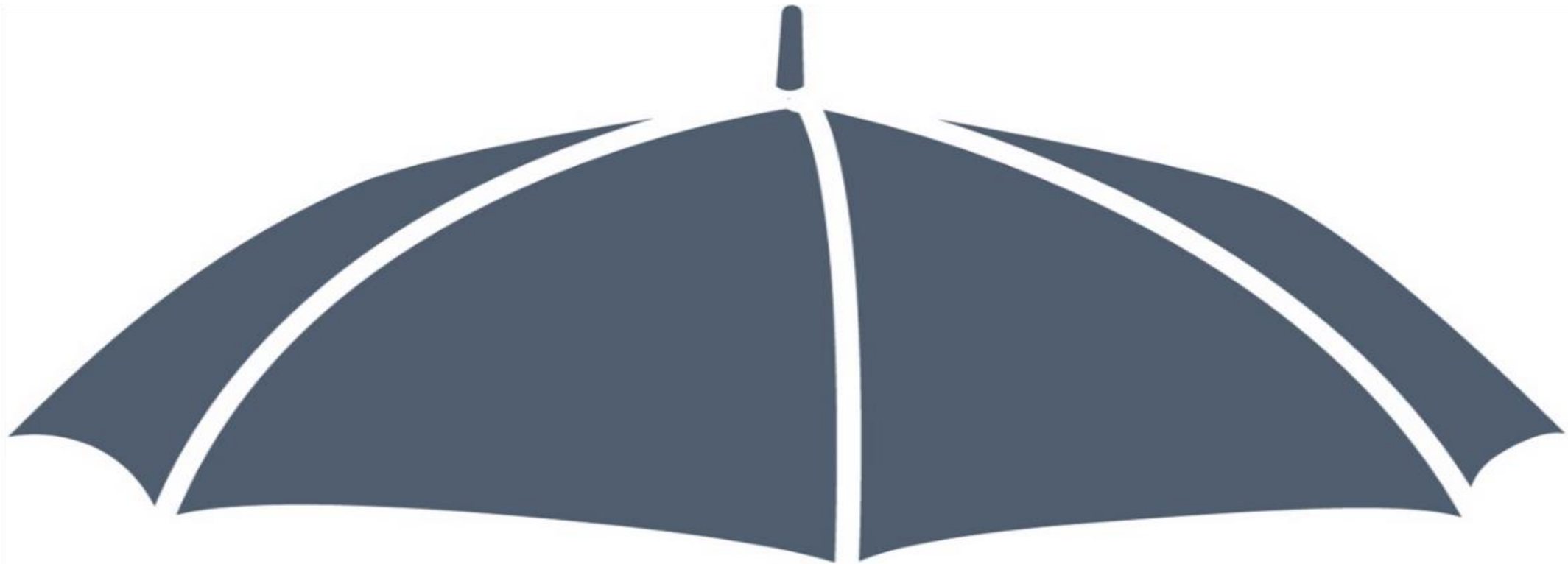
Use the "Action Learning Exercise" to identify what existing elements are reinforcing current conditions in one of your system change issues.



Stigma as an intractable problem

- Substance use disorders are among the most stigmatized mental health conditions.
- People with SUD are more likely to be held responsible for their illness and are more often considered to have a “bad character” or suffer from moral weakness.
- Stigma toward individuals with an Alcohol Use Disorder have increased in the last two decades.





ATTC



MHTTC



PTTC



Acknowledgements

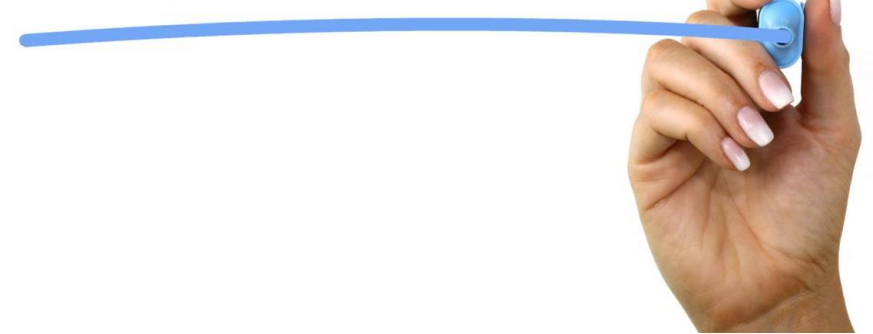
- Northwest TTC team (Kevin Haggerty, Michelle Frye-Spray, Christina Clayton, Denna Vandersloot, Jennifer Verbeck)
- Curriculum Development Team
 - Christopher Kelleher, System Change Consultant
 - Nigel Wrangham, Prevention Educator & Trainer
 - Louise Parker, Instructional Design Specialist
 - Kevin Haggerty, Northwest Prevention TTC Director
 - Christina Clayton, Northwest Mental TTC Co-Director



Learning Collaborative Goal

To enhance the knowledge and skills of a small group of leaders in Skagit County who work in prevention, mental health, and substance use disorder services in rethinking behavioral health through a system's change lens to reduce stigma and enhance collaboration across the continuum of care.

GOAL



Understand the issue and the System(s) in which it lives

- Examine the conditions holding the problem in place.
- Inquire how stakeholders and beneficiaries experience the system.

Create a Plan of Action

- Identify the aspirational outcome (s).
- Look for points of leverage.
- Apply strategies to address levels of system change.

Learning and Refining

- Reflective Learning
- Adjust as you learn more and continue the cycle.



Learning Collaborative Components

Phase I

- 1) **Selection and invitation** to key leaders in Skagit County to participate in the learning collaborative.
- 2) **Two-day kick off event** in July 2023 (28 leaders) – selection of individual and organizational change effort(s) to implement and brainstorm a list of possible system change initiatives.
- 3) **September Learning Session** (Report on individual and organizational change – select the system change initiatives)

Phase II

- 1) **Formation of Workgroups** to design and implement system change projects
- 2) On-going Quarterly **Learning Sessions**
- 3) **TTC coaching** and support for Workgroups

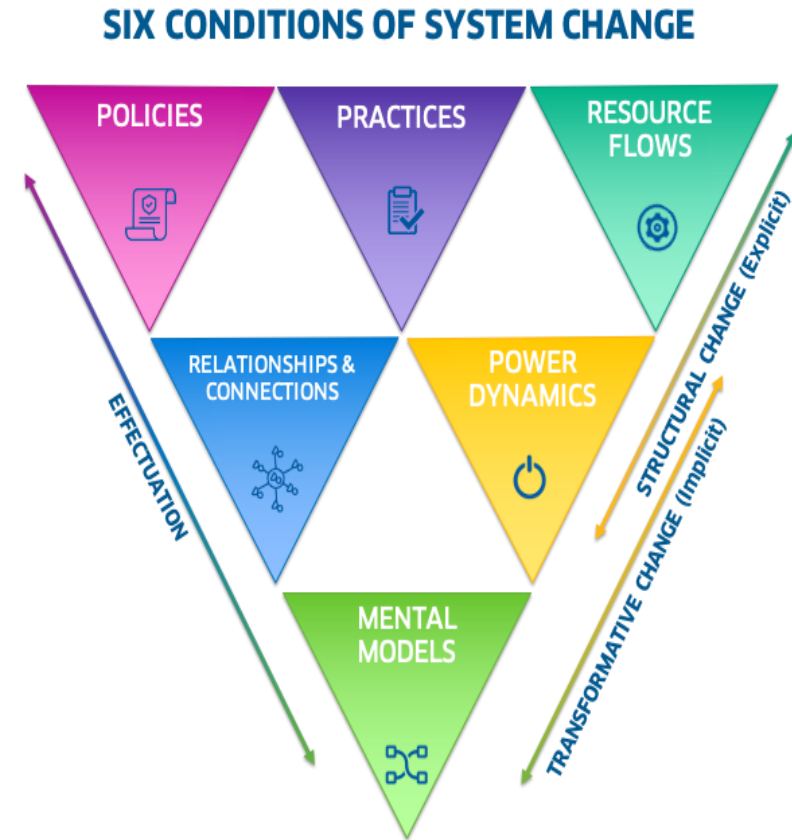


Highlights from the LC Kick-Off Event

Understanding the system stigma lives in, influencing mental models and relationships, panel of peers, evidence-based practices for reducing stigma, goal setting.



Explore how the current conditions are holding stigma in place.



Round Table Discussions

Think about people experiencing stigma, their friends and family, and professionals who are trying to help them

Power Dynamics

- What are power dynamics that affect stigma?
- How does stigma affect power dynamics?

Relationships

- How do people's relationships affect stigma
- How does stigma affect people's relationships?

Policies

- How do policies (local, state, national, business, etc.) affect stigma?
- How does stigma affect policies?



Round Table Discussions

Think about people experiencing stigma, their friends and family, and professionals who are trying to help them

Purple Team

- How do our practices (professional, legal, personal, etc.) affect stigma?
- How does stigma affect our practices?

Orange Team

- How does the allocation and distribution of resources/funding affect stigma?
- How does stigma affect the allocation distribution of resources/funding?



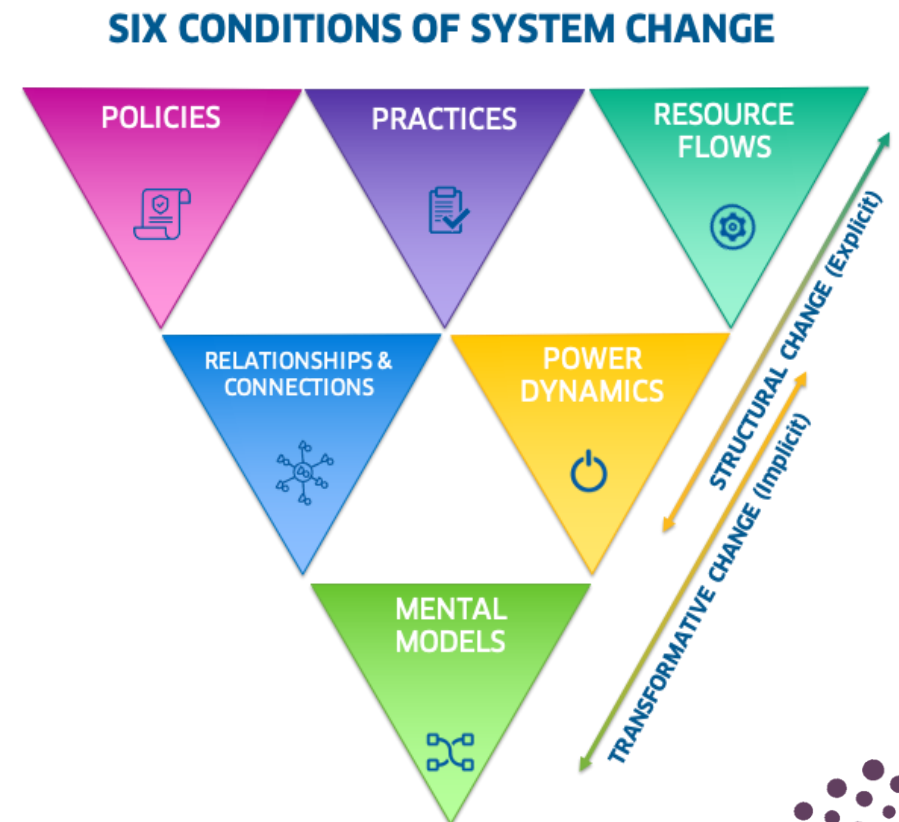
Shifting Mental Models and Practices

Reducing stigma will involve persuading people to change their mindsets and behavior.

Those changes can be difficult – and risky.

People may need to . . .

- Shed longstanding habits and beliefs (psychological risk)
- Change positions and stances they've taken (professional risk)
- Voice ideas that they know will be unpopular with some (relationship risk)



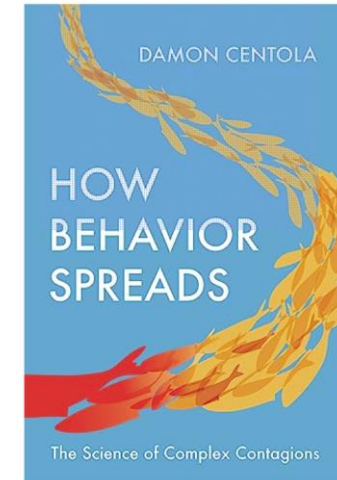
Shifting Mental Models and Practices

Much of what follows is taken from research conducted by Damon Centolla, at the University of Pennsylvania, and his colleagues in the Network Dynamics Group



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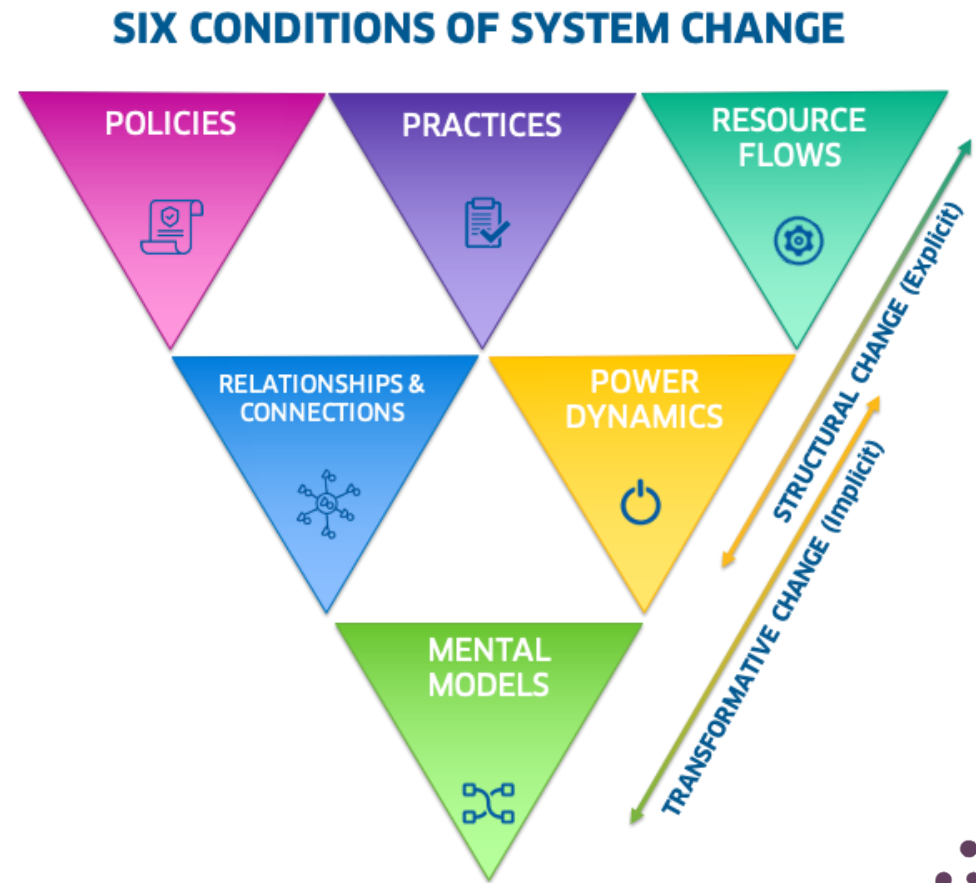


Shifting Mental Models & Practices

There's a common assumption that the best way to achieve a big change in mindsets is to create **viral messaging**

We've all seen how well viral messaging works for getting people to buy a product, listen to a song, etc.

A lot of effort goes into crafting “sticky messages” that will get repeated a lot and spread quickly

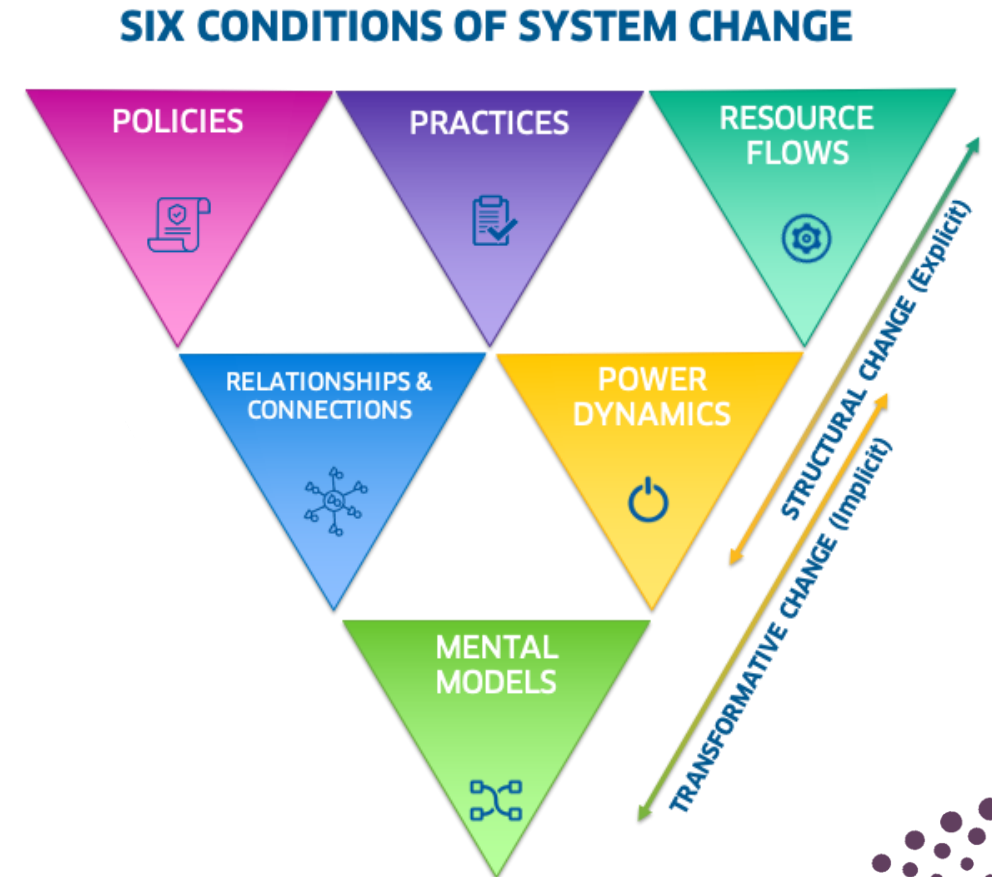


Shifting Mental Models and Practices

Because choosing to listen to a song or buy a new brand of soap involves very little risk, it's often enough just to build awareness

But *awareness* is not enough when it comes to changing long-held habits and mental models

For people to make they kind of change, they usually need to receive significant **social reinforcement**



Shifting Mental Models and Practices

Example #1 Contraception in South Korea

Several decades ago, there was an attempt to increase use of contraception in South Korea.

So, teams went to villages throughout the country and familiarized everyone with different modes of contraception.

The program was very successful.

Adoption of contraception increased significantly across the country.



Shifting Mental Models and Practices

Example #1 Contraception in South Korea

How did they do it?

We might expect that **individual preferences** would lead everyone to choose whichever mode suited them best.

Or that **cultural factors** would drive most everyone in the country to adopt the same method.

But that's not what happened.



Shifting Mental Models and Practices

Example #1 Contraception in South Korea

Over and over, throughout the country, entire villages adopted *a single mode*.

In one village, everyone might coalesce around the use of birth control pills. In another, everyone might coalesce around using condoms. And so on.

This was the power of **strong-tie networks** in action.



Shifting Mental Models and Practices

Example #1 Contraception in South Korea

Largely random factors would lead one mode to gain momentum in a community.

Once it did, people who were undecided would hear positive things from multiple neighbors.

That would give them confidence in the legitimacy of that particular mode. So, they'd adopt it too, and share their decision with other neighbors.

Soon everyone coalesced around a single choice. A snowball effect.



Shifting Mental Models and Practices

So, what do we know about effective methods for shifting mental models and practices?

What influenced people was not information about the cost of change. Or the ease of change. Or the effectiveness of change.

What influenced them was social support for the change – confirmation that the change was safe and legitimate and that people like them were making it.

Reinforcing messages . . . from multiple directions . . . from people you think are like you – that's what drives transformative change.



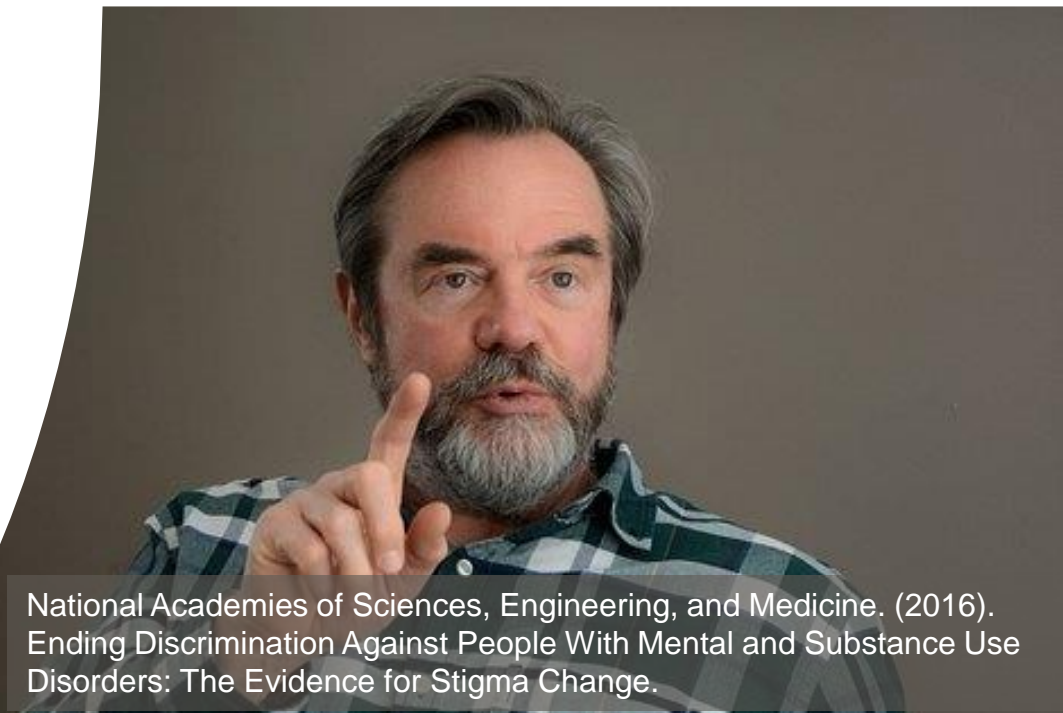
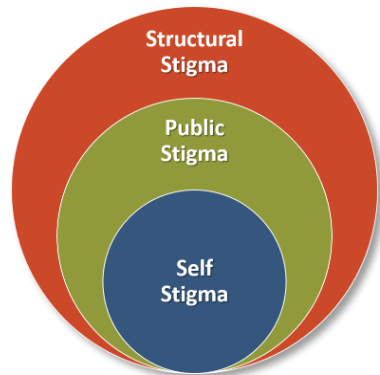
What Works

Self-Stigma

Education

Empowerment

Peer Support



National Academies of Sciences, Engineering, and Medicine. (2016). Ending Discrimination Against People With Mental and Substance Use Disorders: The Evidence for Stigma Change.

What Works

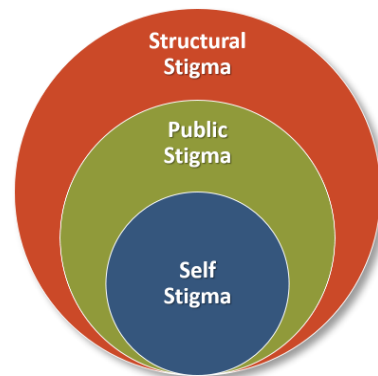
Structural Stigma

Professional Education

Advocacy

Legal

Policy



National Academies of Sciences, Engineering, and Medicine. (2016). Ending Discrimination Against People With Mental and Substance Use Disorders: The Evidence for Stigma Change.

What Works


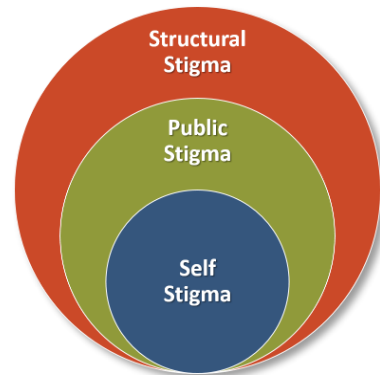
Public Stigma

Mass Media Messaging

Education

Community Programming

Contact Strategies



National Academies of Sciences, Engineering, and Medicine. (2016). Ending Discrimination Against People With Mental and Substance Use Disorders: The Evidence for Stigma Change.

Panel Presentation (Peers)

In what ways did stigma impact your willingness to reach out for support and help?

What are some behaviors or practices you found stigmatizing?

Describe a time you received care that you felt a strong sense of belonging and inclusion.

What are small things providers sometimes do that contribute to stigma, that if they changed would make a difference in increasing a sense of belonging.



Stewardship

Stewards are similar to leaders, but they take a wider view of their responsibilities

A steward is someone who forms working relationships with others to strengthen the systems that enable everyone to thrive

The most successful stewards . . .

- Made a concerted effort to think in terms of systems and to avoid isolated actions
- Focus on the well-being of the *whole community*
- Place an emphasis on constant learning and adaptation
- Find ways to leverage *existing* strengths and energy



Stewardship

Stewardship occurs in three nested levels . . .

- Changing your internal mindsets and practices
- Changing mindsets and practices within your group
- Changing mindsets and practices in the community

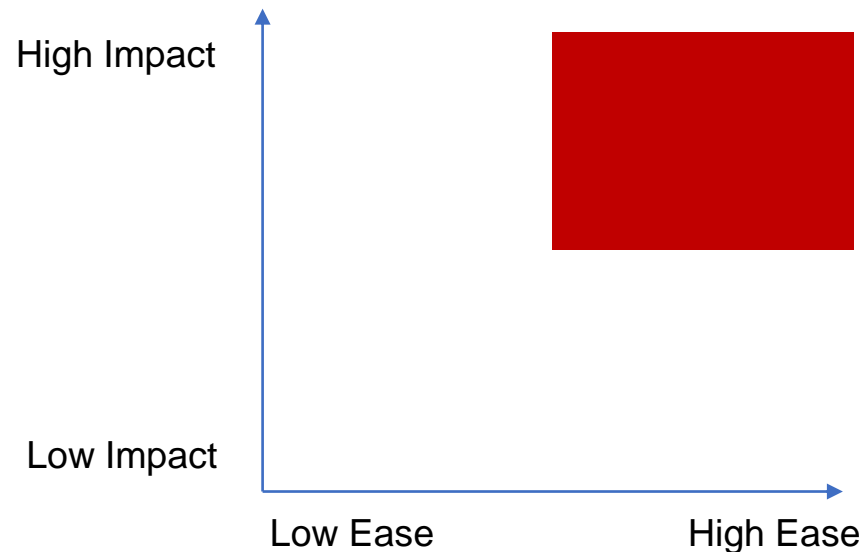
It's hard to succeed at community-level system change if you haven't changed mindsets and practices within your own organization or discipline

And it's hard to change other people's mindsets and practices if you haven't first changed your own



Creating Plans of Action

- Individual Level Change
- Organizational Change
- System Level Change (Brainstormed a list)



System Change Initiatives

- 1) Peer Support Workers as Stewards of the Community: Bring together peer support workers to increase networking, share resources, enhance skills, and learn strategies to reduce self-stigma and public stigma.
- 2) Community Education Panel/Advisory Board to provide education with members who have boots on the ground to advise doctors, patrol officers, outreach workers, MH providers, social workers.





What's next....

- Document the process for designing and executing a learning collaborative using this model.
- Develop a guide and slides to replicate this offering in other Regions by the TTCs.
- Offer this learning collaborative in another community in Region 10 in the next funding cycle.

Assessing System Conditions Exercise

- We will divide into the same three breakout groups we did last time.
- As a group identify an issue or problem one of your TTCs would like to address (or are already addressing) using this system change model. (For example...)
 - Integration of mental, substance use, and physical health.
 - Building awareness and support for prevention services.
 - Funding and integration of peer support services
- Use the Assessing Systems Condition handout discuss how the various system conditions are holding the problem in place.

