JOHNS HOPKINS
BLOOMBERG SCHOOL
OF PUBLIC HEALTH

MENTAL HEALTH

The Campaign For Johns Hopkins
RISING TO THE CHALLENGE: A CALL TO ACTION

Rising to the Challenge: The Campaign for Johns Hopkins will raise unprecedented levels of support to attract, sustain, and empower the students and faculty of Johns Hopkins, who through their work improve the lives of millions around the world. Together with our philanthropic partners we will:

ADVANCE DISCOVERY AND CREATIVITY through support of our exceptional faculty. Their innovative work drives the development of new knowledge, new forms of expression, and new ways to save lives and improve health across our core disciplines in science and technology, the humanities and arts, and public health and medicine.

ENRICH THE STUDENT EXPERIENCE by investing in scholarships and fellowships, inspirational spaces for collaborative learning and social opportunities, and new programs that will enhance student-faculty interactions, ensure diversity on campus, link learning in the classroom to life after graduation, and strengthen connections between our students and our communities.

SOLVE GLOBAL PROBLEMS AS ONE UNIVERSITY by creating new cross-disciplinary solutions in crucial areas such as sustaining global water resources, revitalizing America’s cities, advancing the health of individuals and populations, and understanding how we learn and teach.

With your help, the Bloomberg School will play a key role in the success of the campaign.

Photo: JHSPH celebrates World Autism Day
DEPARTMENT AT A GLANCE

Public health is best known for its successes against so-called “diseases of poverty,” which are largely communicable and thrive in crowded, unsanitary conditions. But in every nation and income bracket, far too many people endure debilitating mental disorders and dependency on drugs and alcohol that destroy quality of life—and sometimes life itself.

As many as 1 in 4 adults in the U.S. suffer from a behavioral disorder in a given year, and 1 in 5 American children live with a debilitating mental illness. In fact, brain and behavior disorders represent 4 of the top 10 causes of disability in the developed world, and in developing countries, only respiratory infections and AIDS rank higher than depression as sources of disability. Further, problems of physical health can be exacerbated by poor mental health, thus attention to mental health and wellness is a critical aspect of physical health as well.

Johns Hopkins is the only school of public health in the world with a department of mental health, which hosts one of the largest groups of students and faculty devoted to global mental health. The JHSPH Department of Mental Health is poised to inspire both the academic and practice-oriented realms of public mental health.

Mental Health faculty engage in population-based research on the etiology, occurrence, prevention, and control of mental disorders and substance abuse. Their mission is to advance understanding of causes and consequences of these disorders in populations; to study the impact of alternative clinical, organizational, or fiscal arrangements; and to develop, test, and apply public health methods for preventing substance abuse and mental illness.

The Department of Mental Health was established in 1941 as the Division of Mental Hygiene. At Johns Hopkins, two faculty were major advocates for a public health approach to treating and preventing mental illness on a community basis: Adolph Meyer, founder of the Phipps Psychiatric Clinic, and William H. Welch, founding dean of both Medicine and Public Health. The Mental Hygiene program was directed by Meyer’s protégé Paul V. Lemkau (MPH ’41) from 1941 until 1978.

The Department’s research in psychiatric epidemiology set the international standard for the study of mental disorders in large populations and community settings. In the 1940s, Lemkau co-authored the historic legislation to establish the National Institute of Mental Health (NIMH) and established the first graduate program in community mental health. The program prepared psychiatrists and other specialists to transcend the limits of mental hospitals and to identify and treat early mental illness through programs in schools and colleges, workplaces, child guidance clinics, and other outpatient settings.

CURRENT RESEARCH IN THE DEPARTMENT

Building upon the rich history of psychiatric epidemiology, prevention and intervention, and substance dependence, newer research and teaching programs focus on drug dependence; cognitive health and aging; psychiatric and behavioral genetics and epigenetics; youth
violence; socioeconomic stratification and mental disorders; global mental health; and child sexual abuse. The Department has been home to several major NIH-funded field studies; two of which provide a wealth of past data and current field work opportunities for faculty and students in the department: the Epidemiologic Catchment Area (ECA) Study on mental health and the Prevention Intervention Research Center’s (PIRC) classroom-based, universal preventive intervention trials.

William W. Eaton, department chair from 2004 to 2013, is a nationally recognized leader in mental health epidemiology, specializing in schizophrenia. His research on autoimmune diseases as precursors of schizophrenia seeks to demonstrate the existence of an immunologic subtype of schizophrenia, show how to assess its presence, and design innovative new treatments. This complements the work of the current chair, Daniele Fallin, an internationally known genetic epidemiologist, whose research focuses on the genetic and environmental causes of autism, a developmental disability where recent research on causes and consequences has implicated immune function. Drs. Eaton and Fallin are now working together to explore the overlapping risk factors, symptoms, and course of autism and schizophrenia given their complementary expertise and the growing evidence of overlap for these disorders.

**Psychiatric Epidemiology, Biostatistics, and the Future of Mental Health Care**

Historically, the ECA Study has been a major focus of the Department. Begun in 1979, the ECA measured the prevalence and incidence of mental disorders in the U.S. general population. The study revealed that about one-third of Americans would suffer from at least one type of mental illness during their lifetimes, and that mental disorders went untreated in many cases due to the stigma of mental illness and lack of access to care.

One of the ECA study’s most striking findings was that major depressive disorder was predictive of the new occurrence of important physical conditions such as type 2 diabetes, heart attack, stroke, and breast cancer. Today, the Department of Mental Health is analyzing the data from four ECA sites and correlating it with the National Death Index to determine the influence of psychopathology on mortality. The outcome will constitute the largest population-based study of mental disorders and mortality ever conducted, with a total of 350,000 person-years of observation.

Over the last decade, Mental Health faculty have facilitated major advances in the complex and rapidly developing scientific arena of statistical methods for causal inference and for psychiatric and behavioral genetics. Innovative new studies use observational data to make causal inferences about mental and behavioral disorders through propensity score and probability weighting methods that emulate an experimental setting. This is necessary in situations where no clinical trial is practically or ethically feasible, as is true for risk factors for many mental and behavioral disorders.

Genetic epidemiologists in the Department are working to expand the understanding of the genetic basis of dementia, bipolar disorder, substance use disorders, autism and other mental and behavioral disorders. Mental Health genetics faculty are also contributing to the new fields of pharmacogenetics, which facilitates individualized prescription and treatment (“personalized medicine”), and epigenetics, which may be a biological mechanism for environmental risk.

Finally, Mental Health faculty are building on their strengths in analyzing population-level changes in mental health. The Department’s well-established body of research on the use of psychoactive medications, treatment-seeking for psychiatric disorders (including the effects of social stigma), and comorbidity of mental and physical disorders will serve as the basis for evaluating the Affordable Care Act’s effectiveness in improving overall health and mental health care for individuals with mental and behavioral disorders. Faculty will use simulation and forecasting techniques to predict the long-term population-level impact of policies on access to care, service utilization and treatment outcomes.

**Healthier Children, Families, Schools and Communities**

In 1983, past department chair Sheppard G. Kellam began Mental Health’s landmark study of 2,300 Baltimore public school first-graders that still continues among participants now in their 30s. The study has established the remarkably strong and enduring beneficial effects of the Good Behavior Game as a universal preventive intervention for reducing risk for school failure, drug use, tobacco smoking, early and risky sex, incarceration,
anti-social personality, and a range of other destructive behaviors and negative outcomes. This model has also proven effective in improving rates of entering and completing college. With funding from NIMH, National Institute of Child Health and Human Development, and National Institute on Drug Abuse (NIDA), the Good Behavior Game became a widely recognized model for all types of prevention science research and the cornerstone of the Department’s Center for Prevention and Early Intervention, which has worked to bridge the traditional gap in prevention research between public education and public health.

Over the next decade, the Department plans to disseminate the Good Behavior Game and other scientifically proven, classroom-based interventions to schools around the country. Mental Health faculty will apply their prevention research and intervention model to new contexts such as preventing bullying in schools and conducting mindfulness training to help adolescents cultivate the ability to regulate emotions effectively and enhance capacities for calm, sustained attention. Based on a promising pilot study, Mental Health faculty will systematically evaluate mindfulness training programs in urban school contexts designed to prevent mental and behavioral disorders in adolescents, especially those at high risk for school failure.

The Department continues to apply its rich, unique expertise to bring public health knowledge and methods to bear on the most complex mental health issues facing societies throughout the world, such as child sexual abuse and autism. In 2012, Mental Health established the Moore Center for the Prevention of Child Sexual Abuse, the first academic research center of its kind. The Moore Center promotes a public health approach to preventing child sexual abuse. In May 2013, policymakers, researchers, and advocates convened at the Bloomberg School for a national first-of-its-kind symposium on child sex trafficking in the U.S.

Autism is an important emerging public health problem that will demand increasing mental health expertise reinforced by the unique perspective of public health. The most recent CDC report estimates 1 in 88 eight-year olds in the U.S. has an autism spectrum disorder, with 1 in 42 boys of that age affected, given the 5:1 ratio of boys to girls with these disorders.

The newly established Wendy Klag Center for Autism and Developmental Disabilities promotes research into the origins, detection, measurement, and prevention of conditions that affect behavioral, socioemotional, and/or cognitive development and facilitates evaluation of services and policies that support optimal development of affected children. The Center, led by department chair Dani Fallin, is named in honor of Dean Michael Klag’s late wife Wendy, who was a passionate advocate for individuals with developmental disabilities. An endowment for the Wendy Klag Center would enable the School to expand its efforts to define and characterize the interrelationships among genetic, behavioral, and environmental factors that influence risk for autism and other developmental disabilities.
“We must move our nation’s response to child sexual abuse from a criminal justice orientation, focused on after-the-fact responses, to a more comprehensive approach that focuses significant resources on the prevention of child sexual abuse.”

—Elizabeth Letourneau, PhD, founding director, The Moore Center for the Prevention of Child Sexual Abuse

**RISING TO THE CHALLENGE**

**BETTER METHODS TO PREVENT AND TREAT SUBSTANCE ABUSE**

After it became a full department in 1961, Mental Hygiene was an early pace-setter in alcohol and drug abuse epidemiology. Faculty served as key consultants to develop the substance abuse research programs of NIMH and NIDA. In 1970, the Department established the first graduate training program for alcoholism counseling in the U.S. In the 1980s, the program was expanded in cooperation with the White House and State Department to train foreign leaders for national substance abuse programs. Faculty from Mental Hygiene and the Health Services Research and Development Center conducted foundational research on substance abuse epidemiology in the U.S., particularly the quality and availability of substance abuse treatment services and their impact on health care organization and financing.

Controlling the risks and minimizing the damage associated with drug and alcohol use remains an epic task for U.S. and international policymakers. This remains a major focus of the Department today, with about one-third of Mental Health faculty working on the epidemiology and prevention of substance abuse.

One promising new approach for developing effective prevention methods is to analyze neighborhoods’ and pop culture’s influence on use of alcohol and illegal drugs. Mental Health faculty have developed successful school- and family-based interventions to prevent the onset of drug use among at-risk teens and to rehabilitate those already using alcohol and other drugs. Using the innovative methods they developed and tested, Mental Health faculty are employing new technologies for understanding individual and ecological sources of craving for addictive drugs. Their findings will be used to craft evidence-based programs to prevent relapse that can improve the health and well-being of whole communities.

**GLOBAL PERSPECTIVE**

In 2012, the Department celebrated its 50th anniversary and published the reference and textbook, *Public Mental Health* (Oxford University Press). This milestone is part of a groundswell of awareness of the importance of public mental health, such as the 2007 *Lancet* article series that asserted there is “No Health without Mental Health” and the World Health Organization’s release in 2009 of its mental health Global Action Plan (mhGAP) to recognize the global burden of mental disorders and the need for a comprehensive, coordinated response from the world’s governments.

A Center for Global Mental Health would greatly enhance JHSPH’s leadership role in public mental health and its global implications. Faculty have been world leaders in designing and implementing cost-effective mental health interventions for low-resource settings, especially among vulnerable populations recently subjected to war, genocide, or natural disaster. In the developing world, an estimated 35 percent of women have been raped and depression is rampant. Equipping public and mental health professionals in these countries with the tools to more efficiently deliver mental health interventions would have an enormous impact, since proven methods of prevention and treatment already exist for the most common mental health conditions, and these methods are even more effective in low-resource settings. Support for a Center for Global Mental Health would enable the Department to pursue new opportunities to disseminate this research to governments and non-governmental organizations for global application.

**OPPORTUNITIES TO SUPPORT MENTAL HEALTH AT JOHNS HOPKINS**

To maintain its impact in the public’s mental health, the Department must pursue the stability and flexibility that can only come from private funding. A more diversified funding base is critical to our mission of training first-class social and behavioral scientists and
that the cost of the chair’s salary and benefits diverts significant departmental resources that could support other critical activities. Endowed professorships are also highly attractive incentives for recruiting faculty to anchor existing programs or nucleate new ones.

More reliable core support for both faculty and students is critical for maintaining the quality of the Mental Health educational programs, which in turn benefits the entire school. The Department of Mental Health is dedicated to providing high quality teaching and offering courses that ground all JHSPH students in the methods that are essential for effecting population-level changes to protect health.

To continue to attract the brightest students, Mental Health seeks to complete the existing scholarship endowments to fully fund four doctoral fellowships. NIH training grants supply less than half of JHU doctoral tuition, with no support for master’s students. Therefore, approximately 7 doctoral and 25 master’s students need tuition each year. Without sufficient numbers of scholarships, students who turn down lucrative offers of full tuition and stipends at other schools to attend Hopkins will graduate with a burden of debt that will take many years to pay off. Many students already have large education loans, since public health is often a secondary or tertiary professional degree.

Building an endowment will provide consistent income to address the Department’s greatest needs. The chairs of five out of the school’s ten departments, including Mental Health, do not hold endowed professorships, so

strengthen the public health and scientific missions of the wide spectrum of organizations who employ them, including academia, government, philanthropy and research institutes.

Mental illness was once hidden away in attics and asylums, until researchers at Johns Hopkins demonstrated the universally high prevalence of psychiatric disorders in populations. In response, the eminent psychiatrist Karl Menninger declared, “Gone forever is the notion that the mentally ill person is an exception.” The Department of Mental Health exists so that mental disorders will one day be gone forever. To continue its groundbreaking work to safeguard and improve the mental health of populations in the heart of Baltimore and around the world, the Johns Hopkins Bloomberg School of Public Health must find new private sources of support.

CAMPAIGN PRIORITIES FOR MENTAL HEALTH

$3.5 million Endowed department chair

$2.5 million Faculty recruitment, core funds, and fellowships for Wendy Klag Center for Autism and Developmental Disability

$2.5 million Core funds and fellowships to establish Center for Global Mental Health

$6 million 4 doctoral scholarships at $1.5 million per endowment
On the cover, clockwise from upper left: Mental Health faculty are studying MRIs of sleep-deprived older adults to find ways to improve treatment for sleep disorders; psychiatric epidemiologist Debra Furr-Holden established the Drug Investigations, Violence and Environmental Studies Laboratory in the Department of Mental Health; an autistic boy in Turkey is one of the faces of autism and of global mental health; Lian-Yu Chen, a PhD student and Sommer Scholar, is working to integrate mental health and substance abuse treatment programs.