A letter from our CEO:

IMPROVING THE MENTAL HEALTH & WELL BEING OF THE UNITED STATES

Well Being Trust has come a long way in just three short years. From our birth as a bold vision of hope, with a $100M endowment from the Providence health system — we’ve become a trusted leader in the broad-based movement to transform the mental health and well-being of the United States.

In this 2020 letter, I highlight a few outcomes detailed in this annual report, present our strategic directions for the next three years, and paint a picture of the mental health and well-being “movement infrastructure” we are investing in to save lives.

A LOOK BACK:

1. National Leadership:
Well Being Trust has helped convene and align the fragmented mental health and addiction field in the US: building cross-sector partnerships and alliances; informing legislation in key states; and shaping the next generation of bipartisan federal policy recommendations. We are at the heart of building the “infrastructure” for the nationwide mental health and well-being movement. We ensure that ‘lived experience’, social justice, and equity are central to all conversations of significance in the field.
2. Social Engagement:
We generated over 800 million social impressions that have built awareness, opened dialogues, connected peers, taught skills, and engaged the American people in ‘normalizing the conversation’ (reducing stigma) about mental health and well-being. In the process, we are catalyzing personal, family, organizational and community actions rooted in the evidence base that are driving change for prevention, healing and recovery. We implemented over 125,000 “intercepts” — reflecting individuals that “needed help now” that were directly linked by WBT to clinical care, resources and supports. This has reduced suffering and saved lives.

3. California Investment Portfolio:
The most significant single “lift” of our first three years was the implementation of the $30 million CA mental health initiative, which is now delivering outcomes for 40 million Californians, while producing learning and models for scale and spread around the nation.
4. Clinical Transformation:
We partnered with the Institute for Healthcare Improvement and 8 leading health systems to lead the Emergency Department and Upstream learning collaborative, that is transforming care delivery and addressing upstream social factors. With Providence, we co-created and invested in the Mental Health and Substance Use “Clinical Performance Group” that is changing how Providence delivers integrated whole-person care, and is beginning to roll out solution-sets and playbooks for the nation.

A LOOK FORWARD:
Everything we do is in service of our goal of saving 100,000 lives in the next decade by preventing “deaths of despair” from alcohol and drug misuse and suicide, and increasing healthy life years. For the next three years, with the guidance of our board and National Advisory Council, Well Being Trust is advancing four core strategies to achieve this goal:

1. **Align the nation around a framework for excellence in mental health and well-being.** We are partnering with healthcare providers, payors, purchasers, philanthropy, policymakers and the public (especially youth and community collaborations) to codify and amplify a framework leading to next-gen standards of excellence across the continuum care, from clinic to community.

2. **Facilitate and curate products and tools to accelerate progress towards excellence in mental health and well-being.** We are developing solution sets and products rooted in the evidence base and promising innovations to shape best in class clinical, community, policy and communications strategies.
3. Advance mental health and addiction policy in select states and help lead federal policy to increase affordable access to integrated comprehensive mental health services. Our Guide to Congress: *Healing the Nation*, is shaping the nationwide dialogue for the next generation of federal policy, even as we partner with states and communities to drive effective policy at each level of our democracy.

4. Lead and shape the mental health and well-being movement in the country. Even as we are investing to increase affordable access to integrated mental health/addiction care and coverage, we are focused on creating the community conditions for intergenerational well-being in the first place. This includes changing the way leaders and institutions in locales around the nation use their power and resources across sectors to advance well-being; as well as changing organizational practices, public policies, and uses of investment capital.
The social movement in the US to improve mental health and well-being is growing fast, and Well Being Trust is at the heart of shaping strategy, convening leaders, aligning partners and making investments. We see these seven elements of “movement infrastructure” as key to assuring a strong foundation for sustained impact:

- **New Narratives** — that lift-up diverse voices and align messaging
- **New Metrics and Data Systems** — for tracking outcomes and assuring accountability
- **New Standards for Excellence in integrated whole person care** — that concurrently address physical and behavioral health while embracing social needs
- **Policy Advocacy** — that listens, engages, prioritizes, and mobilizes across the nation to assure affordable access to integrated care for all in America
- **Economic Engines** — that bring more resources into the field and focus these investments on what works
- **Leadership, Alliances and Networks** — that align leaders, resources and constituencies for impact at scale that can result in population level outcomes above

While this is Well Being Trust’s organizational focus — we recognize that personally, every day, each of us are given openings to turn to one another — our families, friends, and those we encounter in times of need.

We can choose to listen to and serve each other with open-hearted respect and dignity. We can choose to find our truest, most courageous voice. And we can choose to honor the aspirations and struggles of others by being reliable allies on a shared journey.

Today, as every day, we are given opportunities in our communities to assure the vital conditions for intergenerational well-being—and to fight ‘othering’ and exclusion in every form. In our homes, in our schools and workplaces, in faith settings, and neighborhood gathering places, we can work together to ensure every person can experience economic opportunity and connected pathways to realize their fullest potential for flourishing.

Join us is shared action! Mental health and addiction touches every single one of us. And every one of us has a unique role to play in creating well-being for all.

In spirited partnership,

Tyler Norris, MDiv
CEO, Well Being Trust
2019 SNAPSHOT OF RESULTS

Clinical Transformation

Policy & Advocacy

Community Transformation

Social Engagement

Learning & Innovation

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CLINICAL TRANSFORMATION

Well Being Trust is led by clinical, community, and policy experts who’ve dedicated their lives and vocations to improving the well-being of individuals, families and communities. We know the challenges that patients, practitioners, and health systems face when it comes to addressing mental health and addiction. Just as important, we know the evidence-based solutions and opportunities that can save lives. We call for the U.S. health sector and its many stakeholders across the nation to come together in transforming the way integrated behavioral health care is provided, and to ensure everyone has access to high quality care, as well to the social and community resources that directly shape individual- and population-level health outcomes.

EMERGENCY DEPARTMENT & UPSTREAM (ED&Up) INITIATIVE WITH THE INSTITUTE FOR HEALTHCARE IMPROVEMENT (IHI)

Well Being Trust, in partnership with IHI, convened eight leading health systems (Allina Health, Hoag, Kaiser Permanente, Maine Health, Memorial Hermann, Northwell Health, Orlando Health, and Providence) as well as community partners, in an 18-month Learning Community set within emergency departments. Participants developed and tested a change package that includes fully integrating mental health in emergency departments (EDs) and addressing upstream factors in the community.
This innovative initiative demonstrated that by improving multiple facets of the patient journey through the ED and back into the community, hospitals and community partners can improve patient outcomes, experience of care, and staff safety, while decreasing avoidable, repeat ED visits and associated costs.

Participants tested improvements in four key areas: building community partnerships to enhance coordination and communication; standardizing processes in the ED; engaging and activating patients and family members; and creating a trauma-informed culture among ED staff. A few highlights:

1. **Show active support for caregivers.**
   
   Even when teams understand the need to improve care, they can feel overwhelmed by the number of system-level changes required, an often quickly changing landscape of community resources, and an inability to secure the necessary resources. To help at the outset, it is important for leaders to show their support by making mental health a core part of their population health strategy, freeing up staff time for improvement efforts, and continually highlighting successes.

2. **Change the culture.** Historically, those in the ED have viewed mental health care as another part of the system’s job — and those with mental health issues are often considered dangerous due to stigma, making caregiver-patient relationships difficult to forge. To change historical practices and prejudices, teams are implementing trauma-informed and empathetic care principles by focusing on appreciating the impact of trauma on mental illness and addiction, educating others about biases and stigma, and even modifying the physical environment of the ED to make it more calming and less chaotic.
3. Work with community partners to harness community resources. Multiple teams found it critical to create solid coordination between the ED and community-based mental health organizations. To best collaborate, ED and system leaders should purposefully build connections between those working on hospital-community partnerships and connect directly with community-based organizations to improve relationships. For example, teams have created reciprocal partnerships with community-based organizations to refer and connect individuals to needed services; made follow-up calls to patients post-discharge from the ED; and even directed resources to care coordinator positions to provide connections between the ED and community.

Sustained change and improvements take time. After implementing and testing, teams have begun to see fewer ED revisits, reduced length of stay, and a reduction in the number of patient-to-staff assaults and use of restraints. With the right amount of time and resources, change and improvements can occur.
Clinical Performance Group (CPG) — One of our first actions after our founding was to work with the Providence health system to co-create and fund the Mental Health/Substance Use Disorder Clinical Performance Group — a system-wide learning collaborative dedicated to improving care and delivery, and saving lives.

This CPG is unearthing solutions that cut across care environments, focusing on five critical areas:

1. Integrating mental health into primary care.
2. Transforming substance use treatment and services.
3. Finding better ways to care for people with mental health issues in the emergency department, and address upstream non-medical factors.
4. Spreading high quality solutions for tele-behavioral health.
5. Implementing the Zero Suicide Initiative system-wide.

These efforts are building momentum and leading to new models of care. Recently, we published a compendium of early learning, “Stories of Change: How We’re Transforming Clinical Practices to Better Treat Mental Health and Substance Use,” highlighting:

- **Promoting Student Well Being to Save Lives:** Providence and Well Being Trust are working with young people and schools to change the conversation about teen mental health, and taking actions to improve it.

- **Clinics Training Clinics on How to Expand Mental Health Care:** Oregon’s Providence Medical Group is helping a Northern California system integrate mental health into primary care.
A Standard of Care for Depression: Addressing one of America’s most common mental illnesses can be challenging for primary care providers. This is one example of practitioners working to change that.

Caring for Children’s Mental Health Needs In — And Out — of the Emergency Department: A collaboration in Oregon presents an effective model for dealing with a troubling national trend.

Caring for the Caregivers — and Their Families: Well Being Trust is helping Providence make sure its staff members are well taken care of so they can provide high-quality, passionate care for patients.

Seeking Better Results for Mental Health Patients: Emergency departments aren’t set up for patients with mental health concerns. Providence Regional Medical Center Everett is redesigning its standard of care.

Aiming for Zero: Chief Medical Officer Dr. Arpan Waghray discusses how Well Being Trust is supporting Providence in its goal to reduce deaths by suicide.

In the Emergency Department, from Someone Who’s ‘Been There’: Hoag Memorial Hospital, has brought dedicated support for mental health patients inside the emergency department—providing bedside counselors for patients in crisis.
• Making Good on the Promise of Computerized Therapy: Seattle health care network Swedish is using technology to dismantle barriers to mental health treatment in the primary care office.

• Bridging Treatment in Alaska: Providence Alaska Medical Center, in Anchorage, is piloting several initiatives that increase access to successful substance use disorder treatment.

• Measuring the Value of Integrated Care: With the help of Milliman, we’ve created a tool that can help health care institutions make the business case for using proven mental health interventions in primary care settings. We envision a world in which no one struggles alone, and integrated care is universally accessible. The Providence Clinical Performance Group is helping to move the nation closer to this vision. As our learning grows, we already see it leading to best-in-class solutions for delivering the highest quality care; improving outcomes for patients and quality of work and life for caregivers; serving as a “blueprint” for other systems and care settings to begin their own transformation journeys; and delivering a healthy return on investment.

Thought leadership on how to transform clinical settings to improve mental health and well-being:


• The Health Care Blog: “Health Care Must Open More Doors to Mental Health Patients” by Benjamin F. Miller and Arpan Waghray (https://thehealthcareblog.com/blog/2019/03/14/healthcare-must-open-more-doors-to-mental-health-patients/)


POLICY AND ADVOCACY

Undergirding most of what’s needed to transform mental health in this country are antiquated policies that treat the mind as separate from the body. Scientific evidence and countless stories from our communities hold up the fact that people do better when treated as a whole, and policy and payment should reinforce this truth whenever possible.

Much of 2019 for Well Being Trust was focused on the development of state and federal mental health and addiction policy strategy and building partnerships for shared action. This culminated in the creation of a federal policy agenda and a guide for Congress, Healing the Nation: Advancing Mental Health and Addiction Policy, released in January 2020. Healing the Nation includes our formative Framework for Excellence, and engages scores of organizations committed to working on mental health and addiction policy. We had deep engagement in several states with key leaders, working on such issues as enforcing mental health parity, and delivery and financing reforms; as well as on the national scene, leading strategic discussions on the future of mental health policy.

Overall, Well Being Trust’s policy strategy and agenda focuses on improving mental health and well-being — both today and tomorrow. As an organization, this requires us to leverage each arm of our portfolio (social, clinical, community, and data and measurement) to address areas specific to mental health and substance misuse and the underlying conditions that can lead to mental health crises and substance use disorders. We believe that, as a national foundation focused on advancing the mental, social, spiritual health of the nation, we have an opportunity to make a positive impact through policy.
Well Being Trust, with grantee Lown Institute, published a new research report on how California spends money on health, finding the growth in spending on social services has slowed dramatically since 2007, while spending on health care skyrocketed. The report also offered several recommendations to help enhance the investments in upstream conditions that we know affect health, mental health, and well-being.

The report, *California’s health care paradox: Too much health care spending may lead to poor community health*, shows that from 2007 to 2018, state budget spending on health care (including Medi-Cal, health care for state employees and retirees, and health care for the incarcerated) grew by 146 percent, while spending on community conditions increased by just 39 percent, on average. Compared with $1.22 in 2007, California now spends just $0.68 on social services, public health, and environmental protection for each $1.00 spent on health care. To rebalance spending toward community conditions, the report provides a series of recommendations:

- California should redouble its investments in social factors, known today as the vital conditions for intergenerational well-being (and once called the social determinants of health). Currently, initiatives like the California Accountable Communities for Health Initiative (CACHI) and the Whole Person Care (WPC) pilot program help improve community health through coordination of health care and social services. However, these programs exist only in a handful of communities and have limited state support. The state should take a larger role in encouraging relevant stakeholders to invest together in larger-scale projects that improve community conditions and health.

- An essential part of reducing health care waste will be tackling overpriced services and products. State policymakers should create a state-run pharmacy benefit manager (PBM) to offer negotiated prices to all Californians.

- Hospital charges are also often highly inflated, especially when large hospital systems control market share and can dictate prices. State policymakers should enforce anti-trust laws for monopolistic hospital systems.

- State policymakers should consider converting the state’s hospital payments to a fixed total revenue system (called “global budgeting”). For example, in Maryland, this approach produced $400 million in Medicare savings over five years. In California, global budgeting could translate to $2.7 billion over 5 years.

- A large amount of waste in health care comes in the form of tests and procedures that offer more harm than benefit, known as “low-value care.” Reducing low-value services could save California at least $1.5 billion a year.
Well Being Trust was honored to stand with our partner the Bipartisan Policy Center to release a new report, *Integrating Clinical and Mental Health: Challenges and Opportunities*. The report highlights many of the barriers for integrating mental health and also identifies federal and state policy options that can advance evidence-based solutions for mental health. Mental health knows no political divides. This report marks an important next step in the journey to ensure that the goal that there be “no wrong door for care” is supported through sound public policies that can benefit everyone. The report identifies three main areas for federal policy solutions that are based on a series of public and private discussions with leading experts in the field. The report identifies three main areas for federal policy solutions that are based on a series of public and private discussions with leading experts in the field.

1. **Insurance coverage and payment barriers.** Policy solutions for private insurance include strengthening mental health parity compliance and reporting on the impact of insurance market regulations on patients. Medicaid policy options should include fully integrating mental health services into the program, repealing the Institutions for Mental Diseases exclusion, and requiring mental health parity. Options for Medicare include removing the limits on inpatient psychiatric facility admissions when appropriate, improving access to reimbursement for mental health providers, including telehealth services, and promoting the integration of mental health care into primary care.

2. **Workforce barriers.** Policy solutions options include promoting and subsidizing workforce training programs, providing financial incentives to clinicians to specialize in mental health in high-need areas, improving graduate medical education for mental health, financing evidence-based training, developing evidence-based telehealth, and adopting consensus guidelines for appropriate standards of care.

3. **Administrative barriers.** Policy solutions include reporting on the impact of programs serving patients with mental illness, directing federal funding to stand-alone mental health facilities, and providing financial incentives for mental health providers to use electronic health records.
With partner and grantee Trust for America’s Health, we continued the *Pain in the Nation* series by releasing three briefs/data updates:

- The first analysis of mortality data related to drugs, alcohol, and suicide found more than 150,000 Americans—the most ever—died from alcohol and drug-induced fatalities and suicide in 2017. The updated brief included 10 solutions-focused recommendations, paired with real-world examples, for preventing diseases of despair.

- The second release, *Alcohol and Drug Misuse and Suicide and the Millennial Generation — a Devastating Impact*, found young adult deaths due to alcohol and drug misuse and suicide have increased precipitously among 18- to 34-year-olds during the last two decades, including a 400 percent increase in drug-related deaths, fueled in large part by the opioid crisis. The report focused on five solutions to stem the tide of deaths of despair among young adults: 1) prioritize childhood risk and protective factors and emphasize prevention in the developmental years to put today’s children on a pathway that will allow them to become thriving adults; 2) ensure access to mental health and substance misuse treatment services; 3) address health inequities; 4) recognize the multigenerational impact of alcohol and drug misuse and suicide; and 5) improve substance use disorders treatment within the criminal justice system.

- The third release, *Addressing a Crisis: Cross-Sector Strategies to Prevent Adolescent Substance Use and Suicide*, found that, while progress has been made in reducing some risky behaviors, adolescent suicide and substance misuse rates remain high and in some cases are climbing. The report called for the expansion of cross-sector strategies to save lives and highlighted dozens of evidence-based programs in place in communities across the country that help reduce risk and build protective factors in teens’ lives — by strengthening families, providing counseling and mentorship, teaching social and emotional skills, fostering connectedness, particularly in schools, and working across sectors.
Well Being Trust CEO Tyler Norris is a member of two bodies of the National Academy of Sciences, Engineering, and Medicine:

- **The Forum for Children’s Well-Being** aims to inform a forward-looking agenda for building a stronger research and practice base around the development and implementation of programs, practices, and policies to promote all children’s cognitive, affective, and behavioral health, including those with disabilities.

- **The Forum on Mental Health and Substance Use Disorders** provides a structured environment and neutral venue to discuss data, policies, practices, and systems that affect the diagnosis and provision of care for mental health and substance use disorders.

**Policy Scan Findings: Moving Policy Upstream to Advance Adolescent Flourishing.** This partnership with *AcademyHealth* and Adolescents and Children Together for Health (ACT for Health) aims to align policy recommendations with the evidence for the effectiveness of strategies to enhance adolescent psychological, social, and emotional health and well-being.

This report reviews the evidence for specific interventions and strategies, maps strategies to relevant policy recommendations and assesses their alignment with recent evidence, and identifies a final list of policy recommendations prioritized by a National Expert Panel. Policy recommendations are organized by ecological level, including global/cultural, national, community, school, family, interpersonal, individual.
Throughout 2019, WBT spokespeople, grantees, and partners published thought leadership pieces on how to change public policy to improve mental health and well-being. These include:

- **The Hill**: “Improving access to mental health services is key to reversing US life expectancy decline,” by Andy Slavitt and Benjamin F. Miller (https://thehill.com/blogs/congress-blog/health-care/447667-improving-access-to-mental-health-services-is-key-reversing-us?rnd=1560147855)
- **STAT News**: “Deaths of despair can be prevented with a comprehensive strategy,” by John Auerbach and Benjamin F. Miller (https://www.statnews.com/2019/03/05/deaths-despair-prevention-comprehensive-strategy/)
- **Health Affairs**: “There Is No ‘Silver Bullet’ For Mental Health: The Problem Of The IMD Exclusion,” by Emma Sandoe and Benjamin F. Miller (https://www.healthaffairs.org/do/10.1377/hblog20190401.155500/full/).
- **San Francisco Examiner**: “Health care needs to be ‘disrupted,’ but not in the way startups think,” by Shannon Brownlee, Benjamin F. Miller, and Vikas Saini (https://www.sfexaminer.com/opinion/health-care-needs-to-be-disrupted-but-not-in-the-way-startups-think/)
COMMUNITY TRANSFORMATION

There are bright spots throughout the country where communities are coming together to measurably improve the health and well-being of individuals, families and neighborhoods. Well Being Trust is committed to shining a spotlight on these promising locales: amplifying, spreading adoption and adaptation of best practices, and as possible, scaling the innovations for population-level improvement in outcomes.

Rooted in the experience and deep relationships of our senior team in building healthy resilient communities — since our inception, Well Being Trust leaders have traveled across the country, hearing from community members and national leaders about what it takes to measurably and sustainably enhance health outcomes. This learning is informing a trans-partisan “living agenda for well-being in the nation” comprised of organizational practices, public policies, and wise uses of private investment capital. The agenda is rooted in American pragmatism, the results and credibility of diverse communities across the country, and highlights patterns of comprehensive “dose-sufficient” actions that can lead to ensuring the vital conditions for intergenerational well-being for all.

The Well Being In the Nation (WIN) Network kicked off in November 2019 at the Kaiser Permanente Center for Total Health. This is the successor to the 30-month Well Being Legacy initiative, and July 2018 convening in Oakland, Calif. WIN is a growing network of national and local leaders from across the country who are confronting challenges together — WIN partners are expanding the vital conditions that all people need to thrive — without exception. As the founding investor and a member of the network, Well Being Trust believes that together, we can secure intergenerational well-being for all.
The WIN Ecosystem includes:

- **Measurement, Evaluation, and Learning:** A cooperative that helps measure, understand, and improve intergenerational well-being over time, ensuring that data is equitably available to communities to generate the vital conditions for well-being. See www.winmeasures.org

- **Pacesetters:** Pacesetter initiatives, organizations, and communities that can demonstrate what intergenerational well-being looks like and can help others scale what works.

- **Capacity Building System:** A system that can support communities on this journey, regardless of where they start, and helps them adopt/adapt what works for their community.

- **Dialogues, Storytelling, and Narrative Change:** A set of initiatives to build intergenerational dialogues and storytelling to help connect the nation and shift understanding about who we are, how we got here, and how we might create well-being and equity.

- **Well Being Alliance:** A tight network of leading organizations that are committed to demonstrating WIN principles, adopting shared measures, and advancing a social movement for investment and policy changes that can achieve population-level outcomes.

- **Living Agendas:** Policy and investment agendas at the community, state, and national level that advance intergenerational well-being and equity.

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**Legacies for Living Together**

Legacies either affirm dignity and inclusion or inflict trauma and exclusion. Each of us can create legacies of inclusion that we would be proud to pass along.

**Vital Conditions** are all things we need to reach our full potential. They persist over generations and their presence or absence affects who is thriving, struggling, or suffering.

**Stewards** are people and organizations who share responsibility for working together across differences to expand the vital conditions that all people and places need to thrive.
Concurrent with the convening of the broad WIN Network, WBT also convened the inaugural meeting of The Well Being Alliance, with 25 “compact signers” and more than 60 partners in attendance.

The **Well Being Alliance** is committed to accelerating systemic change toward improved intergenerational well-being outcomes for all in America. Alliance members are co-creating a common framework for action; adopting shared standards and metrics; ensuring a focus on equity; and advancing organizational practice changes, public policies and investment strategies; in service of a broad-based social movement to achieve population-level well-being outcomes in the nation.

Well Being Alliance is a cooperative of the newly formed Well Being In the Nation (WIN) Network, which engages leadership from across the country to confront challenges and enrich health and well-being in a way that is inclusive of everyone. The WIN Network began with a recognition that the legacies of the past have shaped the present, and the decisions made today will shape the legacies inherited by generations in the future.

Well Being Alliance members work across sectors, issues, geographies and political perspectives to advance practical solutions for housing, transportation, food systems, education, environmental stewardship, public health and more. They apply the levers of civic engagement, impact investing, public policy, shared metrics and standards-setting to increase resources and scale solutions to address pervasive social problems that undercut U.S. well-being and lead to deaths of despair.
Each member is pledging mission-specific organizational practice changes, investments and policies to achieve population-level outcomes, and have entered into “compacts,” with bold commitments to undertake specific actions in their sectors and with their constituencies, such as:

- Committing to advancing well-being
- Co-creating a common framework for action
- Ensuring a focus on equity
- Adopting shared standards and metrics
- Communicating connections between well-being and your + our work
- Taking advantage of opportunities to support other alliance members’ goals
- Advancing organizational practice changes, public policies and investment strategies
- Committing to compact action and periodically reporting on outputs and outcomes of those actions

MEMBERS INCLUDE....

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The **Well Being Trust Toolbox**, developed with Oregon Health and Science University (OHSU), equips community leaders and decision makers with solutions and resources for improving mental health and well-being outcomes in their organizations and communities.

The Toolbox, for health sector leaders (providers, payers, purchasers) as well as policymakers, philanthropy and community leaders, features evidence-informed resources to help everyone improve the mental health and well-being of people and places.

WBT and OHSU assembled the evidence and tools that providers, payers and policymakers need to understand what works when making system changes to integrate mental health and medical care as well as connecting patients and families to resources outside the hospital walls. For instance, Well Being Trust convened peer-learning networks to develop blueprints guiding real-world implementation, and shared lessons learned from health care institutions that successfully collaborated with community organizations and launched integration efforts, overcoming significant barriers to do so.

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**To lift up communities that are improving intergenerational well-being for all, WBT spokespeople, grantees, and partners published several thought leaderships articles to increase awareness of these efforts:**


SOCIAL ENGAGEMENT

Primary to Well Being Trust’s social engagement work is the #BeWell Social Media Campaign, which spurs cultural change by harnessing the power of dialogue and language to reframe discussions of mental health and well-being. Partnering with media influencers, #BeWell engages the public and advocates through various social media platforms, hashtags, posts, and content with aims to lift the stigma of mental health and its treatment. This movement includes multiple initiatives, education materials, and platforms that educate and engage the public on the cultural and physical costs of mental health stigma by highlighting the problems and crowdsourcing solutions on how to increase access to holistic mental health treatment and destigmatize mental health.

To transform the national conversations around mental health and well-being, Well Being Trust worked to change attitudes online and on social media, intentionally among teens, tweens and their caregivers. We partnered with iHeartMedia, BuzzFeed, Rolling Stone, Variety, OZY, Thrive Global and others to launch the #BeWell, #BeHeard, #BeThere tween/teen campaign to activate youth to support each other’s well-being.

This campaign also gives parents and families tools to start conversations and find common ground. Since the campaign’s launch, we have helped spark more than 800 million impressions, activating youth to stand up for mental health and well-being—and 125,000 intercepts where we’ve directed people in need to vital mental health services. And, to date, we’ve worked with more than 500 influencers, including 200 in 2019 alone.

SOCIAL IMPACT

- 800,000,000 impressions
- 125,000 people in need directed to vital mental health services
- 500+ influencers overall
- 200 influencers in 2019

#BeWell, #BeHeard, #BeThere • www.wellbeingtrust.org
Work2BeWell

Work2BeWell is a youth-led, grassroots movement and coalition to prioritize mental health and emotional well-being curriculum in public schools in Oregon. By youth and for youth, this movement aims to provide approaches to conversations and open dialogue around mental health and youth suicide. Through student advisory councils, Work2BeWell advocates for school districts to promote a culture of well-being by bringing together students, teachers, administrators, and district leaders to shape mental health curriculum.

With a strong conviction that schools and society at large should prioritize students' mental and emotional well-being, the Be Well advisory board are building momentum among students and educators to create change. The advisory board helped shape a “Be Well” radio campaign to initiate dialogue around mental well-being and made worldwide news when its members successfully advocated for an Oregon law that will now allow students to take “mental health days” just as they would a typical “sick” day.

These young advocates also created a podcast, Talk2BeWell, that addresses issues teens care about such as healthy relationships and gun violence prevention.
And earlier this year, they hosted a conversation among Oregon school administrators, student councils and M. Justin Coffey, MD, pioneering member of the Zero Suicide Initiative, about how suicide impacts everyone in the community.

The advisory board’s efforts are opening up the conversation about adolescent mental health and emotional well-being.

WBT partnered with Providence, the Oregon Association of Student Councils, #ICanHelp, YouthLine, and iHeart Media to initially create and continually support the #Work2BeWell Campaign and Youth Board.

**A Necessary Conversation on Youth Suicide**

Recently, WBT, George Fox University, Oregon Association of Student Councils, Providence, and YouthLine hosted a necessary conversation on youth suicide.

The event featured a discussion of health, hope, and opportunity with mental health specialist M. Justin Coffey, MD. You can access the presentations from the event, local training seminars, and additional resources for school administrators, students, and other community members here.

In 2015, Dr. Coffey published “Perfect Depression Care Spread: The Traction of Zero Suicides” in the *Journal of Clinical Outcomes Management*. In the article, he chronicled the diffusion of the Henry Ford Health System Perfect Depression Care initiative that was founded and led by his father Dr. Ed Coffey. He went on to describe how he led the spread of the Zero Suicide approach into both general hospital and primary care settings.

Dr. Coffey aimed to achieve breakthrough improvement in quality and safety by completely redesigning the delivery of depression care using the 6 aims and 10 new rules set forth in the Institute of Medicine’s (IOM) report *Crossing the Quality Chasm*.

He and the Henry Ford Health System team developed a clinical protocol, enhanced their training and carefully measured their progress.
OZY Content Partnership

Through a content partnership with OZY, we created the Mental States of the Nation, a story series highlighting solutions-based examples of projects and campaigns doing on-the-ground work to improve the mental health of their communities. Pulling from a recent report released by the Kennedy-Satcher Center for Mental Health Equity, an interactive map assigned “grades” for how well each state is enforcing mental health parity, and WBT worked with Ozy to launch several articles:

- “The Elementary Game that Offers Lifelong Lessons” (https://www.ozy.com/good-sht/the-elementary-school-game-that-offers-lifelong-lessons/96409/)
- “Tackling Mental Health through a Connected Network” (https://www.ozy.com/acumen/tackling-mental-health-through-a-connected-network/89914/)

#BeKind21 campaign with Born this Way Foundation and Lady Gaga

In September, WBT teamed up with Lady Gaga and her Born This Way Foundation for #BeKind21 to spread 21 days of kindness. Whether it was picking up a piece of trash or a friend’s lunch tab, we asked people to share their act of kindness by using #BeKind21 and tagging us on social. We focused on reminding people that kindness is contagious!
Hearst Content Partnership

Through a content partnership with Hearst, we helped create a year-long blog series focused on educating the public on the community-based social determinants of health that influence mental health and well-being, placing intentional emphasis on the formation of programs and coalitions that focus on “place,” i.e. the issues or needs that impact health and can be directly tied to zip code, neighborhood, and cultural groups. The articles:

• “The best way to promote community health is to ‘meet them where they live’” (https://blog.sfgate.com/storystudio/2019/09/18/the-best-way-to-promote-community-health-is-to-meet-them-where-they-live/)


• “Chronic stress, anxiety, asthma... your home could be the cause.” (https://blog.sfgate.com/storystudio/2019/04/10/chronic-stress-anxiety-asthma-your-home-could-be-the-cause/)

• “Health is wealth: why community conditions are so vital to health” (https://blog.sfgate.com/storystudio/2019/02/27/health-is-wealth-why-community-conditions-are-so-vital-to-health/)

BuzzFeed

In May, we worked with BuzzFeed to create a post on improving one’s mental health. Through a Q/A, Robin Henderson, PsyD, Providence Oregon’s chief executive for behavioral health and Providence St. Joseph Health’s clinical liaison to the Well Being Trust, discussed mental health, therapy, how to best take care of our holistic selves, and used her professional experience to help break things down.

We also helped guide BuzzFeed in creating a Mental Health Quiz, to help people learn common facts about mental health and encourage them to discover more about how they can help improve mental health in their community.
In February, Well Being Trust was the presenting sponsor at the TMG pre-Oscar luxury suite where we interviewed dozens of celebrities from Oscar winners (the sound team for Bohemian Rhapsody) to up & coming Disney stars like Joshua Rush. Each talent participated in reading a line for our PSA and was interviewed about how they stay mentally, physically, and spiritually healthy.

United for Global Mental Health

Well Being Trust is the United States lead for United for Global Mental Health — connecting with leaders from scores of countries around the world in providing advocacy, campaigns and financial support to institutions, businesses, communities and individual changemakers seeking greater action on mental health. The #TimeToInvest and the Speak Your Mind campaigns call on national leaders to take urgent action and secure meaningful change by harnessing the collective power of advocates. Through pledges and community organizing, this grassroots movement is rooted in civic engagement and organizes to hold health professionals, local and national leaders, and governments accountable to reduce mental health care disparities worldwide.
LEARNING AND INNOVATION

Central to our success as an organization is the ability to assess impact, share our learnings, and scale up and out the most promising practices and policies to further mental health and well-being in the nation. Central to this is the formalizing of Well Being Trust’s strategies, and corresponding metrics for assessing our impact.

Three years into our mission, Well Being Trust has made great strides in discerning strategies that can best unpack complex on-the-ground learnings through our investments, as well as to align with other organizations seeking to better assess and drive action for well-being in the nation. This past year we have further solidified our role as a leader in mental health and well-being, and most important, strengthened our stance on issues and actions that can measurably advance mental health and well-being outcomes:

• **Evaluate our investments:** This past year, Well Being Trust was able to formalize evaluative relationships that will help inform our organization on the impact of key investments. Further strengthening our ability to learn from our own investments, Well Being Trust will be able to apply these evaluative strategies to future opportunities, partnerships, and investments.

• **Assess outcomes:** For our work in California, Well Being Trust has contracted with Oregon Health and Science University to help assess the impact of several of our investments, in part to drive systems changes in our seed investor: Providence.
• **Set and share measures across sectors:** A central problem to scaling many efforts is the lack of common language and measurement. In partnership with many others, Well Being Trust has been at the forefront of establishing and advancing measures that support vital conditions necessary for achieving intergenerational well-being. The beginning of this process was through our community work and the Well Being Legacy initiative — now, Well Being Trust is building off this work to ensure that all sectors are becoming more aligned with a common set of core measures and free-to-the-end-user data systems that can support well-being.

• **Develop a data infrastructure:** We worked with www.CommunityCommons.org to create infrastructure of sharing community level stories and data around well-being.

• **Create measures for the nation:** We worked with the National Committee on Vital and Health Statistics around metrics to measure well-being across communities and the nation. With the co-investment of Well Being Trust, this was published online as www.winmeasures.org.

• **Accelerate shared learnings and advance the implementation of promising strategies:** Building off a common set of core measures, Well Being Trust is advancing what works and highlighting what doesn’t work for mental health and well-being. Sharing data through stories, community profiles, policy briefs, and external written communication, Well Being Trust aims to add to the local and national dialogue on well-being, allowing for promising practices to be adopted and in some cases scaled.

Overall, Well Being Trust is working to partner in harnessing data to identify areas of opportunity, inform solutions, and measure results that can ensure investments and initiatives are ever-increasing their impact at scale. As a national organization, this is a challenging proposition, one that requires strategic partners, but one that we believe is essential in accomplishing our mission.
GRANT-MAKING AS INVESTMENT

Since January 2017, Well Being Trust has invested over $55 million in more than 100 initiatives and forged extensive cross-sector partnerships to improve mental health and well-being across the country. In California alone, Well Being Trust committed $30 million dollars—across 65 initiatives—to improve mental health and well-being in the state’s communities.

WITH EACH OF OUR INVESTMENTS, WE SEEK TO:

1) Address structural elements that explicitly limit the advancement of mental health and well-being at a systemic level, including financing, policy, and cross-sector collaboration.

2) Lay a foundation for better assessing work specific to mental health by creating tangible data platforms, program models, and research.

3) Align strategic partners at multiple levels to maximize opportunities for change.
WHILE MANY OF OUR GRANTS WILL RUN THROUGH 2022, HERE ARE SOME HIGHLIGHTS FROM 2019’S ROUND OF INVESTMENTS:

Community Partners, California Accountable Communities for Health Initiative (CACHI): There is a growing desire to “modernize” health care systems to improve community health and well-being — not just provide better health care services. This has sparked a movement for innovative models like the Accountable Communities for Health (ACH), which fosters a cross-sectoral alliance of health care, public health, and other Community Based Organizations to improve health and health equity for all residents in a geographic area. The California Accountable Communities for Health Initiative brings these innovative approaches to the state with a focus on spread and scale for a range of California communities.

Since 2016, with support from health care philanthropic leaders (Blue Shield Foundation, The California Endowment, Kaiser Permanente, California Wellness Foundation, Sierra Health Foundation), CACHI has supported 15 communities in California to implement an ACH model that creates sustainable, community-driven outcomes.

Counties and communities across California such as Humboldt, Napa, San Diego, Long Beach, Imperial and Fresno have built systems to engage key partners and drive coordinated action around community-specific issues like trauma, cardiovascular disease, and substance use disorder. With support from Well Being Trust, CACHI will hold webinars and workshops to promote mental health among the 15 ACHs, with a focus on trauma and trauma-informed approaches, substance use disorder, and children’s mental health; promote strategies that integrate mental health and well-being into ACHs currently targeting cardiovascular disease, asthma, and diabetes; and develop issue briefs and other materials that share findings about how the ACH model can help advance mental health and well-being.
Mission Hospital, Project Koinonia:
Providence Mission Hospital (in Mission Viejo, California) provides intensive outpatient mental health therapy, peer training and other vital services to vulnerable youth (ages 18 to 26) with mental health needs in southern California. Mission Hospital is targeting at-risk youth at Saddleback College, a local community college with an annual student enrollment of 42,000. Many of these youth face significant daily challenges, including food and housing insecurity, lack of family support, extreme stress, and mental health issues such as clinical depression and substance abuse. To help students overcome these obstacles, the project runs an intensive outpatient program for students at Mission Hospital—including 10 weeks of group/individual therapy and psychiatry services, as well as transportation vouchers to commute to the hospital, and food vouchers for students in need.

There is a growing epidemic of mental health needs among “transitional age youth” ages 18-26, with higher rates of mental health disorders among these youth compared to adults. College students in particular are experiencing some of the highest levels of stress compared with any time before, with many college counseling centers across the country reporting significant increases in anxiety and depression disorders among their students. Project “Koinonia” (Greek for “fellowship”) will improve the daily lives of students in South Orange County with serious mental health challenges through an intensive outpatient program, effective coping skills and by fostering a sense of community and reducing social isolation among students.
St. Joseph Health Queen of the Valley, Improving Access to Care: As part of a “whole person care model,” this program works with primary care providers across three counties in rural Northern California (Sonoma, Napa and Humboldt) to provide integrated mental health services to more than 20,000 patients, who are often low-income or elderly with limited access to mental health services. The project co-locates mental health services in a primary care setting where patients can be assessed early and receive mental health treatment and support. Improving Access to Care aims to consider the connection between the physical and emotional needs of patients and thereby reducing visits to the emergency room and ensuring more consistent care.

Additionally, the program conducts Social Determinants of Health (SDoH) screening and case management for patients with basic needs such as food access, financial problems, medication access, and housing. Social workers will help these patients beyond the clinical setting by linking patients to available resources such as food programs, access to affordable medications, and housing support.

CredibleMind: We partnered with CredibleMind to make expert-curated and consumer-rated mental, emotional, and spiritual health resources available to all, online, and normalize the conversation around emotional and mental health, advance access to quality resources, address the full spectrum of population-based mental health, and help people flourish.

Through this partnership, which includes a grant through the Healthy Communities Foundation, Well Being Trust will sponsor and endorse CredibleMind’s flagship consumer website, CredibleMind.com, and the organizations will share content and resources to more rapidly grow awareness, expand access to helpful materials, and normalize the conversation around mental, emotional and spiritual health and well-being.

For example, CredibleMind has built a Mental Health and Well Being Search and Help Widget, so anyone seeking help on the WBT site can easily search and access—by topic and type of material—curated mental health resources on CredibleMind. CredibleMind’s comprehensive mental health topics and resources are all included within the Widget that allows
people to access CredibleMind’s resources in the areas of mental health, life events, spirituality, positive psychology, emotional health, social well-being, and related physical health conditions—spanning topics like anxiety, depression, relationships, stress and meditation.

**#BeWell Curriculum Campaign with #ICANHELP:** This youth campaign supports a growing youth movement that empowers middle and high school students to use social and gaming platforms to increase awareness about mental health, decrease stigma and use social media for good. The campaign focuses on positive social media messaging generated by students with an emphasis on how youth can support themselves and each other in the difficult moments throughout the school year. While social media is the primary form of communication for most youth, they still need tools to address negative social messaging, bullying and hate speech in order to promote positive social behavior and emotional well-being.

#ICANHELP will conduct a year of “train the trainer” events across Southern California and develop an online curriculum that students can use to spread messages through their own networks and through the national Student Council networks. These trainers are also #BeWell Ambassadors and become allies and advocates on the ground in their schools and communities. #ICANHELP has trained over 400,000 students to date across 15 states.
NATIONAL ADVISORY COUNCIL

The Well Being Trust National Advisory Council represents a diversity of experiences, expertise, fields, politics, geographies, and stages of life. Each member brings their lived experience and possesses a keen interest in advancing the well-being of all. The members in 2019 were:

- **Maureen Bisognano, CHAIR**, Well Being Trust National Advisory Council, President Emerita, Institute for Healthcare Improvement
- **Laurel Blatchford, Senior Fellow**, Blue Meridian Partners
- **John Boyd, PsyD, CEO**, Mental Health Services, Sutter Health
- **M. Justin Coffey, MD, Chair**, Geisinger Department of Psychiatry, Addiction Medicine and Behavioral Health
- **Kelly Davis, Director of Peer Advocacy**, Supports and Services, Mental Health America
- **David J. Erickson, PhD, SVP and Head of Outreach & Education**, Federal Reserve Bank of New York
- **Albino Garcia, Jr., Executive Director**, La Plazita Institute
- **Mary Giliberti, JD**, Mental Health America
- **Daniel H. Gillison Jr, CEO**, National Alliance on Mental Illness (NAMI)
- **Sandra R. Hernández, MD, President and CEO**, California Health Care Foundation
- **Patrick Kennedy, Founder**, Kennedy Forum
- **Angela Kimball, National Director**, Advocacy and Public Policy, NAMI
- **Margaret Laws, CEO**, HopeLab
- **Terri Ludwig, President of Philanthropy**, Ballmer Group
- **Dayna Bowen Matthew, JD**, University of Virginia School of Law and Medical School, Dept of Public Health Sciences
- **Rhonda M. Medows, MD, President, Population Health Management**, Providence and CEO, Ayin Health Solutions
- **Vivek Murthy, MD, Senior Fellow**, Well Being Trust, 19th U.S. Surgeon General
- **Melinda Pollack, Senior Vice President National Initiatives**, Enterprise Community Partners, Inc.
- **Lisa Richter, Managing Partner**, Avivar Capital
- **Linda Rosenberg, Faculty and Director of External Relations**, Columbia University Department of Psychiatry
- **Paul Summergrad, MD, Chairman**, Psychiatry, Tufts University School of Medicine
- **Arpan Waghray, MD, Chief Medical Officer** Well Being Trust. **Swedish System Director**, Behavioral Medicine. **System Med. Dir. Telepsychiatry**, Providence Health Services
- **Carlos Watson, CEO, CoFounder**, OZY
WELL BEING TRUST — STAFF

Tyler Norris, M.Div,  
Chief Executive

Grainger Marburg, Ed.M.,  
Chief Operating Officer

Benjamin F. Miller, PsyD,  
Chief Strategy Officer

Robin Henderson, PsyD,  
Clinical Liaison

Lisa Herron,  
2020 Executive Fellow

Liz Karsa,  
Senior Executive Assistant

Albert Lang,  
Director of Communications

Janaya L. Nichols, MSc,  
Senior Program Manager

Mary Renouf, MBA,  
Senior Marketing and Communications Advisor

Erica Teece-Hodges,  
Senior Executive Assistant and Office Manager

Arpan Waghray, M.D.,  
Chief Medical Officer