



CHANGEMED MENTAL HEALTH REIMAGINED

REDEFINING MENTAL HEALTH CARE

This White Paper addresses the need to change the way in which we view and manage mental health. The paper will clarify the distinction between mental health deconditioning and mental illness, two conditions often used interchangeably with negative impact. It will also examine the negative impact of misconceptions and stigma on the awareness, acceptance, and management of patients with mental health issues. The paper will also explore a comprehensive approach to mental health management that includes appropriate therapy, medications/treatments, and an exploration and fulfillment of the internal/external factors that impact health.

CHANGEMED

Healthcare company that is focused on developing novel health programs built upon the CHANGEMed Comprehensive Health Integrative Philosophy. Its services align with all the contributing factors to holistic health.

DETOXYOURLIVES

Platform for the dissemination of information through multi-media sources. Revenue generated supports the mission of CHANGEMed

Executive Summary

Redefining Mental Health Care for the Next Generation

This white paper examines the critical distinction between mental health deconditioning and mental illness, addressing how misconceptions and stigma create barriers to effective prevention and treatment. The limitations of the Traditional Biomedical Model (TBM) have resulted in insufficient screening and preventive care, often leaving family members as the primary support system despite their lack of proper training. By clarifying these distinctions and proposing a more holistic approach through the 16 Roots of CHANGE framework, this paper aims to facilitate better awareness, acceptance, and treatment pathways for those experiencing mental health challenges.

Understanding the Distinction: Mental Health vs. Mental Illness

Mental health is a complex spectrum encompassing emotional, psychological, and social well-being. It reflects how individuals think, feel, and interact with others, and is deeply influenced by the brain's conditioning under stress. Mental illness refers specifically to diagnosable disorders affecting mood, thought processes, or behavior, such as depression, anxiety, bipolar disorder, and schizophrenia.

As Dr. Christopher Palmer notes, "Mental health and mental illness are similar to physical health and physical illness. It's not all or nothing." Like Olympic athletes with asthma (Noah Lyles and Jackie Joyner-Kersey) who excel through conditioning, individuals can manage mental illness effectively when properly supported and focused on improving mental conditioning.

Mental health deconditioning refers to the progressive deterioration of brain function under stress, affecting multiple domains:

- Cognitive function (concentration, judgment, rationality)
- Emotional regulation (resilience, reactivity)
- Behavioral control (impulse control, personality stability)
- Social engagement (relationships, interpersonal functioning)

This deconditioning often precedes diagnosable mental illness, especially in the large percentage of cases influenced by external factors rather than primarily genetic causes. It also determines the degree of suffering someone has with any disease.

Estimated Heritability of Mental Illnesses

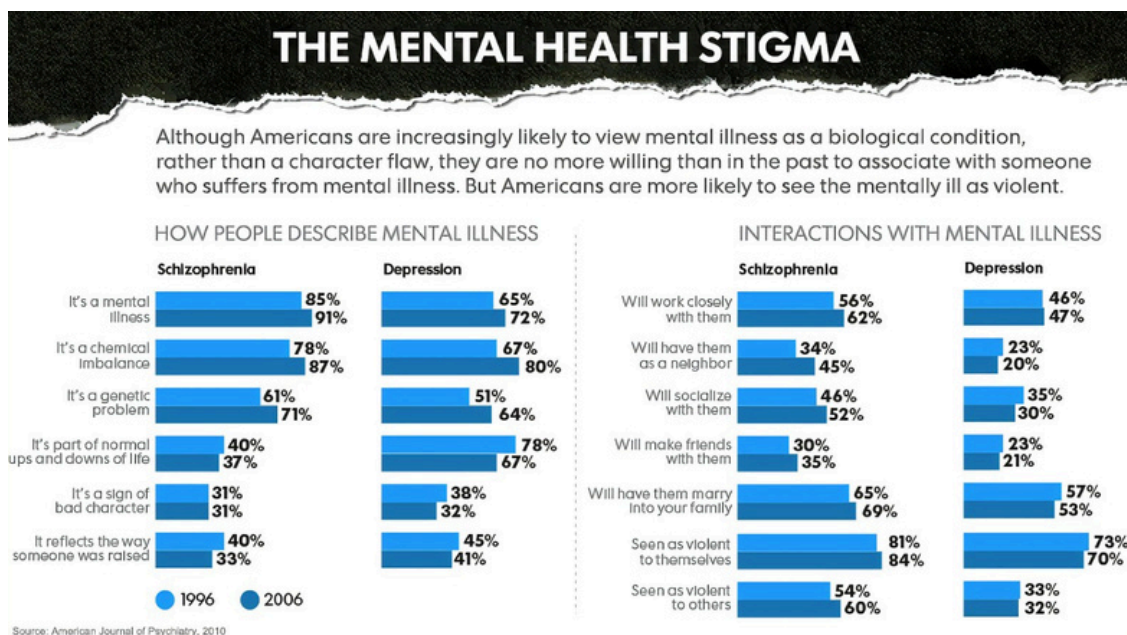
• Autism	90%
• Schizophrenia	80%
• Bipolar Disorder	80%
• Attention Deficit	77%
• Alcohol Dependence	55%
• Major Depression	42%
• Anxiety Disorders	30-45%

The table above showing the heritability of certain accepted mental health conditions gives a bleak outlook for relatives of people with the disorder. However, I would make a strong point to acknowledge two things: First, that the genetic heritability of the conditions does not distinguish between conditions that will always express versus those that obey an epigenetic expression mode, whereby the condition is only expressed if specific triggers lead to gene expression and disease. The other point to make is that these current values were derived from epidemiological correlations made based in a system and culture that arguably does not acknowledge, manage, and prevent the conditions by addressing overall mental health care appropriately.

The Impact of Stigma and Misconceptions

Stigma manifests in three primary forms:

1. Public stigma: Negative societal attitudes and discrimination against individuals with mental health conditions. A 2019 study found nearly 60% of individuals with mental health conditions avoided treatment due to fear of stigma.
2. Self-stigma: Individuals internalize negative beliefs, leading to shame and reduced self-esteem. This often causes people to hide symptoms and avoid seeking help.
3. Structural stigma: Systemic policies and institutional practices, such as insurance disparities and employment discrimination, limit opportunities and access to care.



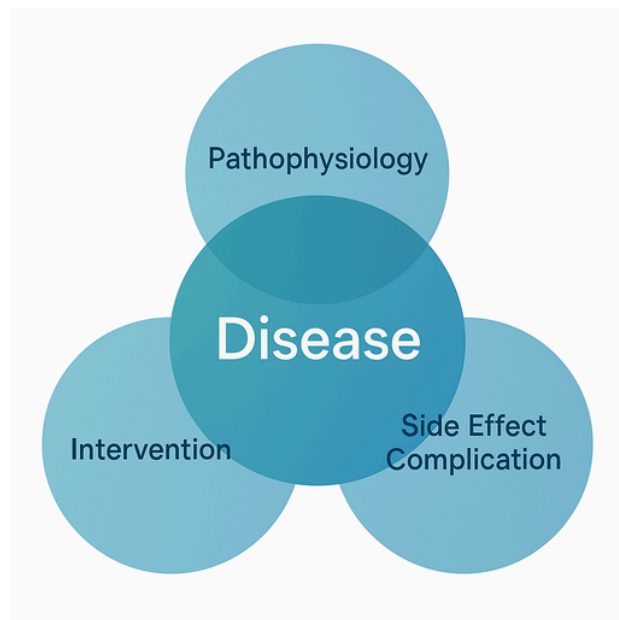
Common misconceptions fueling stigma include beliefs that mental illnesses aren't "real" medical conditions, are signs of weakness, always require lifelong medication, or cannot be prevented or improved. These misconceptions prevent many from seeking help and contribute to social isolation and poor health outcomes. There is also notably a major discrepancy between people's self-assessment of knowledge about mental illness and their perception of others' knowledge.

Limitations of the Biomedical Model

The traditional biomedical model views mental illness primarily as a biological disorder to be diagnosed and treated with medication or other medical interventions. While this model has advanced our understanding of neurochemical imbalances and genetic factors, it often:

- Fails to account for subjective experiences of mental distress
- Neglects cultural and social dimensions
- Creates artificial dichotomies between "normal" and "pathological"
- Overlooks prevention in favor of intervention after symptoms appear

This narrow focus leads to fragmented care, where physical symptoms are prioritized over psychological and social well-being. Many patients report feeling that their emotional and social struggles are dismissed during medical appointments, leading to dissatisfaction and disengagement from care.



The Biomedical Model of Disease

The Role of Healthcare Providers in Prevention

Despite the critical role physicians play in mental health prevention, many barriers exist:

- Limited appointment times (typically 7-15 minutes)
- Insufficient training in mental health assessment
- Focus on physical rather than psychological symptoms
- Separation between physical and mental healthcare systems

Current screening tools often detect mental health issues only after prolonged suffering, missing the chance to address early signs of deconditioning. Integrating frameworks like the 16 Roots of CHANGE into routine care could enable earlier identification and support.

Studies show that early intervention programs can reduce the severity of mental illness and improve long-term outcomes by 25-50%, yet these programs remain underutilized in most healthcare settings.



How Health Providers Unintentionally Deal with Nonphysical Metrics of Health

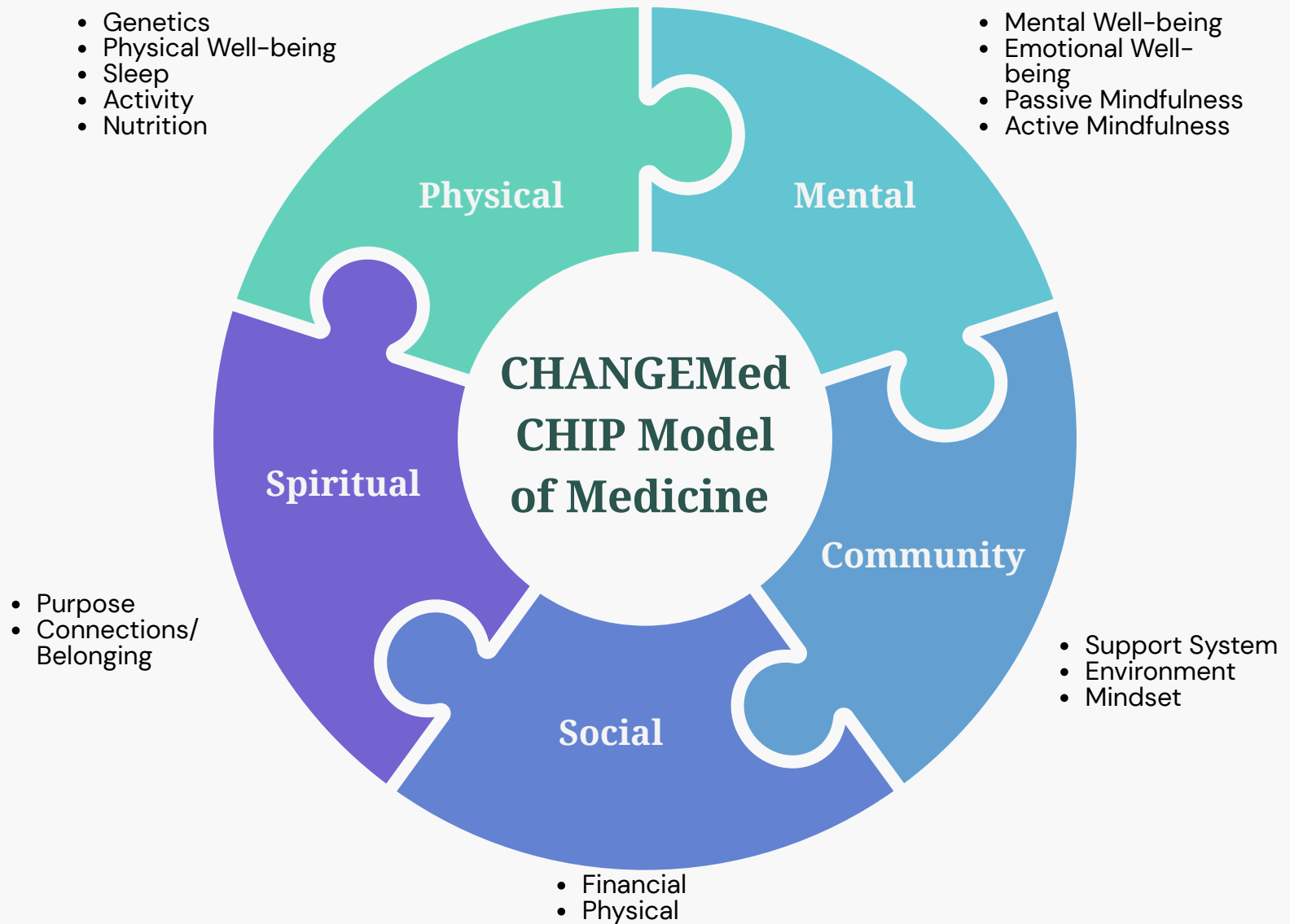


Family Role - Validation/Support, not Solution

Families often serve as the primary support system for individuals experiencing mental health challenges. Supportive family environments can enhance resilience and provide emotional validation. However, family members typically:

- Lack professional training in mental health
- Struggle with objectivity due to emotional involvement
- Face resistance or anger when addressing mental health concerns
- May inadvertently contribute to mental health challenges through family dynamics

Research indicates that while family involvement in treatment improves adherence and outcomes, families need education and support to fulfill this role effectively. They should be seen as partners in care, not sole providers of mental health support. Many family members feel it is their duty to have answers and to teach family but without training one does not know if what is being taught is helpful or hurtful to mental health. Furthermore, the message is often received differently than intended due to the emotional connection. Remember, not being part of the solution could mean you are a part of the problem, but being part of the solution does not mean you have to be the answer. This alone is why it is so important for health providers to consistently and meaningfully engage with patient's about their mental health.



CHANGEMed Comprehensive Health Integrative Philosophy

The 16 Roots of CHANGE framework offers a comprehensive approach to understanding and improving mental health conditioning across five key domains of health: Physical, mental, community, social, and spiritual health. By addressing these interconnected factors, individuals can strengthen their mental conditioning, reduce stress, and improve overall well-being. This holistic approach recognizes that at least 50% of most conditions are from non-genetic factors. Even of the genetic composition the majority of contribution is a result of epigenetics whereby certain extrinsic and intrinsic factors lead to gene expression and neurochemical imbalances as a result of exposure.

Rethinking Therapy

Traditional therapy often begins with an intake process focused on gathering extensive personal history, which can inadvertently trigger fight-or-flight responses and hinder rapport building. Research shows up to 50% of patients drop out after the first two sessions, often due to:

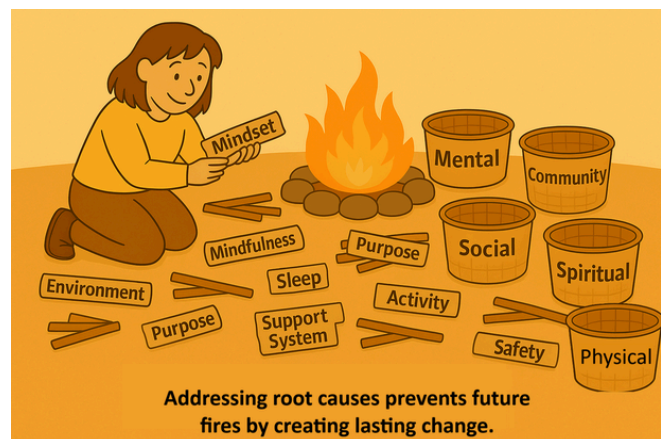
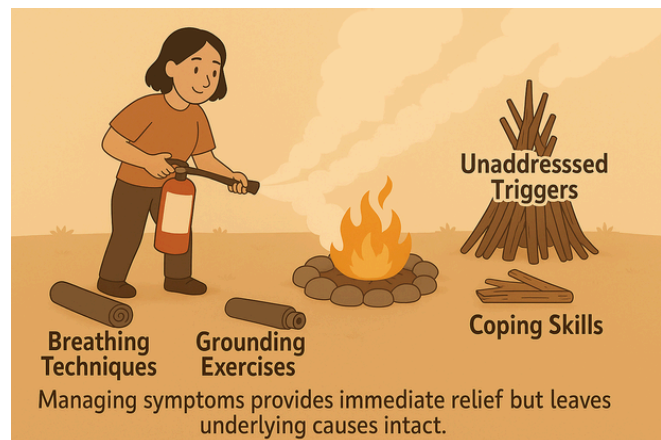
- Lack of connection with the therapist
- Discomfort with the process
- Traumatizing intake procedures
- Unclear expectations

A more effective approach prioritizes establishing awareness and acceptance first, discussing expectations, and the therapist's philosophy of care before delving into traumatic histories. This creates rapport and gives patients a clear understanding of what to expect.

Therapy approaches can be categorized using a "Fire Management" analogy:

- "Vent it" therapy: Allows emotional expression but has limited impact without addressing causes
- "Put it out" therapy: Teaches skills to manage acute symptoms but fails to address root causes
- "Determine the cause" therapy: Explores factors creating stress across different life domains (such as what CHANGEMed utilizes in 16 Roots of CHANGE)

The latter approach is most effective for lasting change but requires patient acceptance of their condition and therapeutic approach.



Medications as Part of Holistic Care

Medications play a critical role in managing sleep, mental, emotional, and physical well-being, but do not address all factors within the 16 Roots of CHANGE. Their effectiveness depends heavily on patient awareness and acceptance of their condition and treatment. A phenomenon contrasting with the placebo effect demonstrates that if someone does not believe a medication will work, it often will not without higher doses or longer treatment. This becomes particularly challenging during severe acute distress, when stronger medications or higher doses may already be necessary to achieve therapeutic effects.

Understanding medication's role in chronic conditions is essential:

- 10-20% of mental illnesses have strong genetic components requiring ongoing medication management
- 80-90% of cases influenced by external factors may improve or resolve with comprehensive care
- Weaning off medications should only occur after adequately addressing the 16 Roots of CHANGE
- Life events like job loss, housing insecurity, or family changes can rapidly deteriorate mental health if medication support has been completely removed

Moving Forward: A Holistic Paradigm

Recognizing mental health as a spectrum influenced by multiple factors calls for a shift from the biomedical model to a holistic paradigm such as the biopsychosocial model or even more comprehensive CHANGEMed CHIP model. This approach:

1. **Makes prevention possible:** By monitoring and supporting the 16 Roots, we can prevent deconditioning before it progresses to illness.
2. **Transforms treatment:** Effective care addresses all contributing factors rather than simply medicating symptoms. It can also directly improve the degree of suffering.
3. **Questions chronicity:** Many cases of mental illness may be reversible when external factors are adequately addressed, contrary to the prevailing view of mental illness as lifelong.
4. **Involves communities:** Since mental health is influenced by collective factors (i.e. mindset, environment, emotional/mental wellbeing), treatment must extend beyond the individual.

Conclusion

Rewriting the Mental Health Narrative

Mental health care must evolve beyond the limitations of the biomedical model to embrace a comprehensive, holistic approach. By distinguishing mental health deconditioning from mental illness, addressing stigma, improving prevention, supporting families appropriately, and integrating the 16 Roots of CHANGE framework into population-based programs, we can create more effective pathways to healing.

This paradigm shift represents a revolutionary approach to mental healthcare that promises better outcomes through earlier intervention, comprehensive treatment, and community engagement, transforming our understanding of mental health from a medical issue to a holistic human experience that can be actively maintained and improved.



Company Values - The SOUL of CHANGEMed

Symbiosis

CHANGEMed believes in working together with people over competition. We focus on making mutually beneficial partnerships between companies or individuals, where each party contributes unique strengths to achieve results that would be difficult or impossible alone. We seek to collaborate with those who share similar values, visions, or mindsets to strengthen our positions only in competition with less aligned or less effective approaches.

Organization

CHANGEMed believes we are better together. Between shared accountability and improving resource allocation the focus is to create teamwork and group-based programs to make the necessary changes to improve community and individual health.

Understanding

The development of knowledge and expertise in our approach is paramount to the company goals. Utilizing deep reasoning and critical thinking to address root cause issues and provide the necessary support to achieve fulfillment in the necessary areas is the focus to improve health and longevity.

Love

Compassion is the ultimate goal for caregiving. However, we realize that there are particular steps you have to take and skills you must have to be truly compassionate. The majority of people only hold themselves accountable to qualitative compassion which is more of their intent. Quantitative compassion means having the technical, communication, and coaching skills to be perceived as compassionate by our partners, employees, and clients.