Foreword

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he first time I became acutely aware of the importance of mental health was in high school, when I lost a friend to suicide. It remains one of the most defining experiences of my youth, both in terms of the immediate shock and grief, as well as what I learned by observing the reactions of others. In our tight-knit immigrant community, the prevailing response was to actively avoid the issue. At the time, I assumed everyone stayed quiet to minimize the family's shame, but looking back, I now understand that we were woefully unequipped to respond. We lacked a fundamental understanding of mental health and how to talk about mental health challenges in productive ways, largely driven by cultural stigma. We also missed a critical opportunity to change the narrative and shine a light on the importance of proactive mental health promotion.

Unfortunately, my experience is not unique. According to the most recent data, in 2016, 142,000 Americans died from alcohol- and drug-induced fatalities and suicide, the highest number ever recorded. This is a tragic loss to our country, and equally alarming are the projections which estimate a 60 percent increase in these "deaths of despair" over the next ten years. Former U.S. Surgeon General Dr. Vivek Murthy has spoken out about the "lone-liness epidemic" and the need to elevate emotional well-being as a priority for the nation. He has pointed to the need for a shared approach, stating, "I think of these as collective problems that we have to solve with collective solutions." In that spirit, this issue of the Community Development Innovation Review is dedicated to the topic of mental health and community development, in recognition of the field's opportunity to play a role in these collective solutions.

At first glance, mental health may seem like an unlikely topic for a community development journal. However, as the articles in this issue of the *Review* reveal, there are profound connections between poverty, place, and poor mental health. Issues like financial insecurity, housing instability, community violence, and limited economic prospects are risk factors for poor mental health—they are also the very same issues that community development seeks to address. In addition, the articles explore emerging themes in the field and their connection to mental health, such as the prevalence trauma, community resilience in the face of climate change, healthcare payment reform, and the power of arts and culture to engage and activate a community. Perhaps most importantly, the articles make the case that we all have an incentive and opportunity to play a role in improving population-level mental health.

Like an artist's initial sketch, this issue of the *Review* draws the rough outline of what we hope will become a nuanced and detailed portrait of how the fields of community development and mental health can partner to advance the well-being of low- and moderate-income communities. Although the connections are still nascent, both in concept and practice, we hope this issue sparks a conversation and encourages further exploration across both fields.

¹ Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2016 on CDC WONDER Online Database, released December 2017.

² Trust for America's Health and Well Being Trust, "Pain in the Nation: The Drug, Alcohol and Suicide Crises and the Need for a National Resilience Strategy," November 2017.

³ Jena McGregor, "This former surgeon general says there's a 'loneliness epidemic' and work is partly to blame," The Washington Post, Oct. 4, 2017.