

From Calm to Crisis

What can you do to intervene?

2024 Chesapeake AIHA / ASSP Educational Seminar
March 12, 2024



Agenda

- Introductions
- Trends and definitions: What's wrong and how can we help?

1. Everyone has mental health
2. Include hope and resilience
3. Recovery is possible

- Practical tools: What can I do if I am concerned about someone?
- Mental Health First Aid



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- Background in education, facilitation, and youth-focused risk management



Trends in Mental Health Across the U.S.

The Prevalence of Mental Illness is Increasing.

It isn't just symptoms of anxiety and depression that have skyrocketed. In this year's survey, **more than 12 million adults reported serious thoughts of suicide.**

Untreated Substance Use Disorders. In the absence of care, many people turned to substances, like alcohol, as a coping mechanism if they could not or would not access treatment. Almost **11%** of adults reported abusing alcohol, while **6.82%** reported abusing illicit drugs. Of this combined number, less than **7%** are seeking treatment for their substance use disorder.

The State Of Mental Health In America (2023), Mental Health America

A note about the 2023 data: As with previous reports, there is a lag between data collection and published findings. The information presented in the 2023 survey was collected in 2020 and is the first iteration of the report with data cumulated during the COVID-19 pandemic. As a result of limitations on data collection efforts imposed by the pandemic, as well as changes and updates to the DSM-IV, the authors of the survey analysis stress that *figures from the 2023 survey cannot accurately be compared to data from previous years.*



Trends in Mental Health Across the U.S.

Key Takeaways from the 2023 Study

- 21% of adults are experiencing at least one mental illness. That's roughly 50 million people. (Highest in Utah at 29.68%)
- 55% of adults with a mental illness have not received any treatment.
- 5.44% of adults experience severe mental illness.
- Over 12.1 million adults (4.8%) have reported serious thoughts of suicide. This figure more than doubles when surveying adults who identify as two or more races.

The State Of Mental Health In America (2023), Mental Health America

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Trends in the Workplace

Nearly one-fifth of U.S. workers (19%) rate their mental health as fair or poor.

These workers report about four times more unplanned absences due to poor mental health than do their counterparts who report good, very good or excellent mental health. Projected over a 12-month period, they're estimated to have **nearly 12 days of unplanned absences** annually compared with 2.5 days for all other workers.

Nearly half of young workers aged 18-29 (47%) report that their job has negatively affected their mental health.

- Not far off from our 40-49 (41%) and 50-64 (31%)

Majority (57%) are unable to confirm the existence of easily accessible mental health support services in their workplace.

The Economic Cost of Poor Employee Mental Health (2023) Gallup



Trends in the Workplace – The GOOD!

The critical nature of holistic wellbeing -- compared with physical wellness alone -- is proven to result in substantially reduced unplanned absenteeism, accidents on the job that result in workers' compensation claims and turnover.

The Economic Cost of Poor Employee Mental Health (2023) Gallup

APA's 2022 Work and Well-being Survey reveal that seven in 10 workers (**71%**) believe their employer is more concerned about the mental health of employees now than in the past.

This new focus is highly valued by employees. In fact, 81% of individuals said they will be looking for workplaces that support mental health when they seek future job opportunities.

Work and Well-being Survey (2022), American Psychological Association





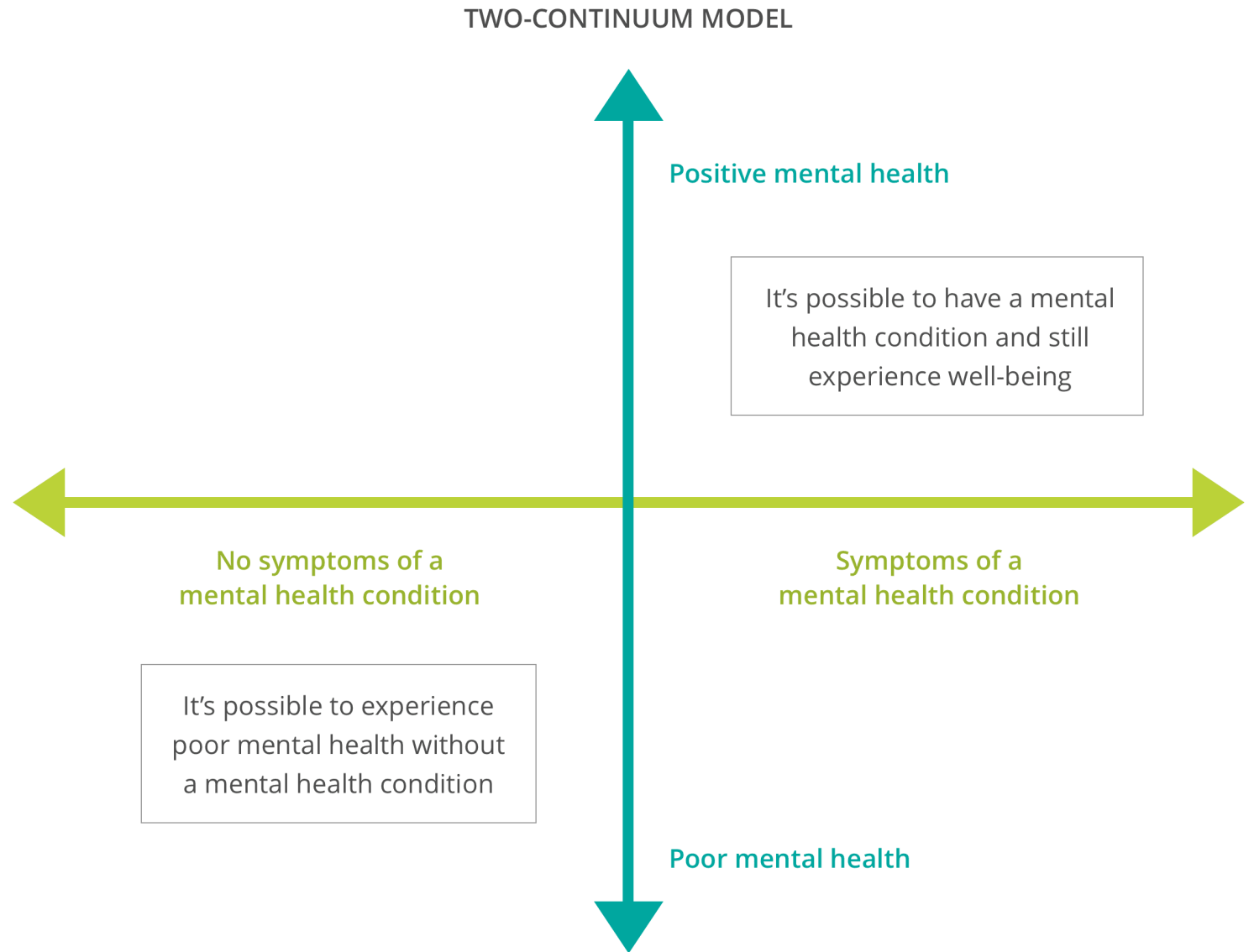
A happier, less stressed, and less
anxious workforce is a more
productive workforce—
employee retention and satisfaction
increase dramatically.



Dr. Daniel Selling, CEO
Williamsburg Therapy Group
Forbes, *Mental Health In The
Workplace: Predicted Trends For 2023*



What is Mental Health Anyways?



Hope and Resilience

The ability of an individual, a group, an organization, or even an entire population rebound from psychological and/or behavioral disturbance associated with critical incidents, terrorism and even mass disasters.

Individuals do indeed experience distress and perhaps temporary dysfunction.

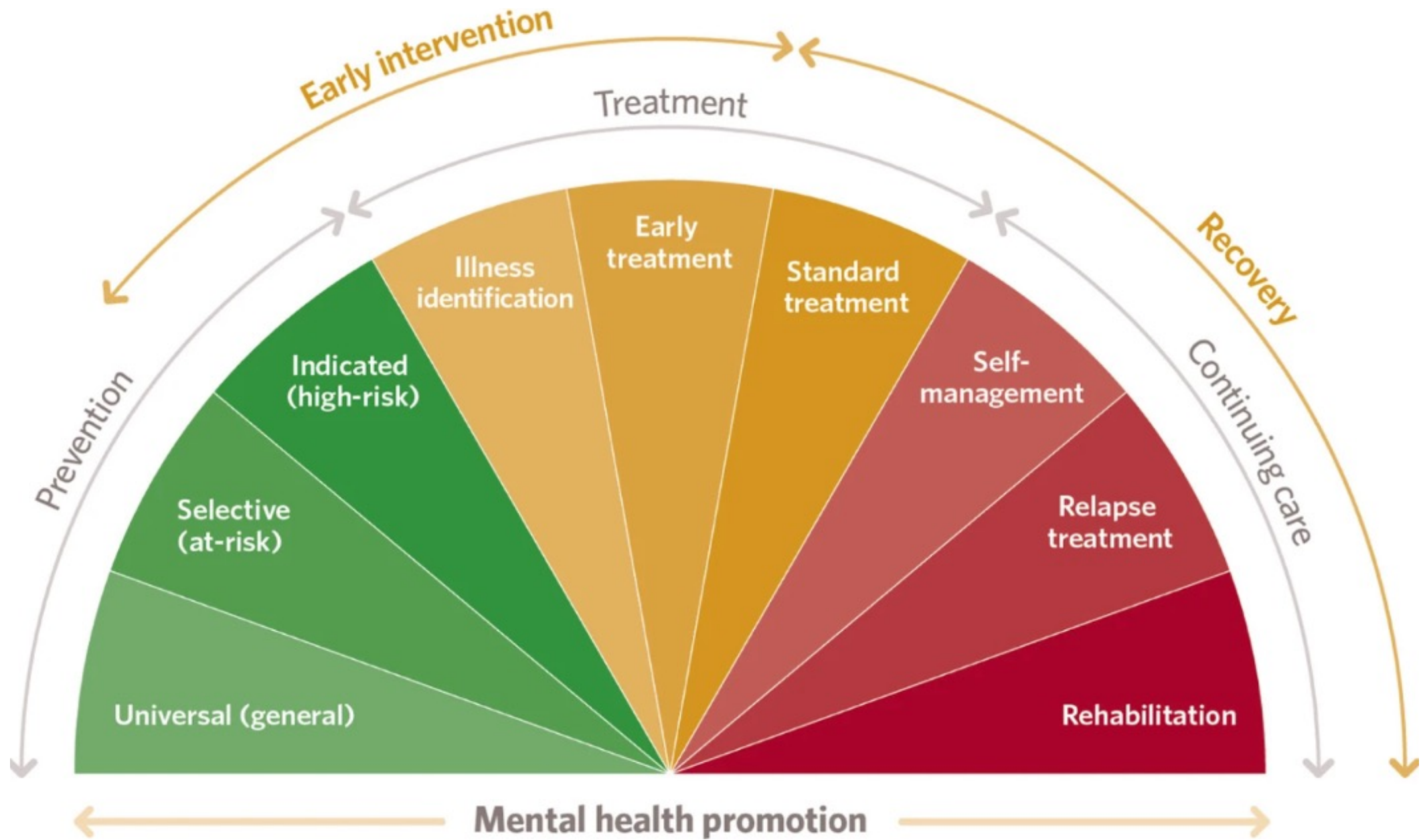
Sometimes resilience just naturally occurs, other times it occurs with the support of a friend, colleague, family member, or crisis interventionist.

With the appropriate support, recovery is possible.



What to do if you are concerned about a colleague, friend, or family member?





Action Steps



Recognize



Approach



Ask



Reassure



Refer



Recognize: Common Signs & Symptoms

Each illness has its own symptoms, but common signs of mental distress include the following:

- Excessive worrying or fear
- Prolonged sadness or feeling low
- Extreme mood changes, including uncontrollable “highs” or feelings of euphoria
- Prolonged or strong feelings of irritability or anger
- Avoiding friends, family, or social activities
- Difficulties understanding or relating to other people
- Changes in sleeping habits or feeling tired/low energy
- Changes in eating habits such as increased hunger or lack of appetite
- Difficulty perceiving reality (delusions or hallucinations)
- Inability to perceive changes in one's own feelings, behavior, or personality (“lack of insight” or anosognosia)
- Excessive use of substances like alcohol or drugs
- Multiple physical ailments without obvious causes (such as headaches, stomach aches, vague and ongoing “aches and pains”)
- Thinking and/or talking about suicide
- Inability to carry out daily activities or handle daily problems



Substance Use: Signs & Symptoms

Problems at school/work — frequently missing work, a sudden disinterest in activities, or a drop in performance

Physical health issues — lack of energy and motivation, weight loss or gain, or red eyes

Changes in behavior — efforts to bar family from private spaces or being secretive about going out; drastic changes in behavior and in relationships with family and friends

Money issues — sudden requests for money; missing money or items

Feeling the need to use daily or even several times a day

Needing more of the drug to get the same effect

Not meeting obligations and work responsibilities, or cutting back on social or recreational activities

Continuing to use the drug, even though it's causing physical or psychological harm



Approach Considerations



Do I have a private place?

Do I have enough time?

Am I the right person? If not, who is?

Am I in the proper frame of mind?

Do I have my resources?



How to Approach



Use “I statements”
(e.g. I’ve noticed...)



Ask open-ended
questions



Avoid judgement



Avoid advice



Mindful Listening

- Put aside distractions
- Be honest with yourself (Are you able to focus?)
- Ask open-ended questions
- Paraphrase back what you heard to clarify
- Take a mindful breath before responding
- Notice when your mind wanders
- Listen to your body sensations, thoughts, and feelings
- Listen without judgement
- See the other persons point of view
- Set your intention at the beginning of the conversation to listen mindfully



Jacob's Story – Part 1

Jacob, an employee who has worked diligently on the farm for five years, recently lost his brother due to an overdose. He took 5 days of bereavement leave to be with his family.

Since his return to work, he has appeared increasingly distracted and withdrawn. He no longer engages in casual conversations with his colleagues during breaks and seems hesitant to participate in communal activities. When approached, Jacob confides in a coworker about feeling overwhelmed and questioning his ability to handle the demands of his job.

Discussion question: What are you noticing about Jacob's mood and behavior? How would you use the skills we are discussing to find out what is going on with Jacob?



Who can help?



Primary Care Physicians

Psychiatrists

Psychologists

Nurse Practitioners and PA's

Social Workers

Counselors

Therapists

Crisis Support Specialists (988, 211)

Substance Use Professionals

Certified Peer Specialists

What about community supports?



Jacob's Story – Part 2

As weeks pass, Jacob's demeanor continues to change. He becomes quieter, withdrawing completely from his usual interactions with colleagues. While he still completes his tasks, there's a noticeable decrease in his usual efficiency and enthusiasm.

Occasionally, he seems more irritable, and his once warm smile now appears less frequently. These shifts prompt concern among his coworkers, who notice the changes but are unsure of what to do.

Discussion question: As Jacob's supervisor, how would you use the skills we are discussing to help? What supports are in place at your company or in your community that may be of use in this situation?



How to Respond in a Crisis

What is considered a crisis?

- Always: medical emergencies, natural disasters, overdoses, suicidal ideation
- Sometimes: panic attacks, severe psychotic states, aggressive behavior

What do we do?

- Call 911, 988, or mobile crisis if there is an immediate concern for the safety of the individual or others.
- De-escalate if safe to do so.

Safety is paramount. 

Suicide Prevention

Myth busting, warning signs, and how to intervene.



Fact or Fiction...

Asking a person about suicide will encourage the person to attempt suicide.

A person who attempts suicide will always be suicidal.

Improvement following a suicidal crisis means that the risk is over.

Suicide happens without warning.

MYTH!

Talking about suicide provides an opportunity for communication and intervention.

MYTH!

Most people who are at risk feel suicidal only for a brief period in their lives.

MYTH!

Most people who die by suicide do so within 3 months after the onset of a period of improvement.

MYTH!

In most cases there are signs & symptoms. With proper community education, suicide can be prevented.



Signs and Symptoms

Mood

People who are considering suicide often display one or more of the following moods:

- Depression
- Anxiety
- Loss of interest
- Irritability
- Humiliation/shame
- Increasing agitation or anger
- Unexplained relief or sudden improvement

Talk - If a person talks about:

- Killing themselves
- Feeling hopeless
- Having no reason to live
- Being a burden to others
- Feeling trapped
- Unbearable pain



Signs and Symptoms

Behavior

Behaviors that may signal risk, especially if related to a painful event, loss or change:

- Looking for a way to end their lives, such as searching online for methods
- Withdrawing from activities
- Isolating from family and friends
- Sleeping too much or too little
- Increased use of alcohol or drugs
- Visiting or calling people to say goodbye
- Giving away prized possessions
- Aggression
- Fatigue



What can you do?

- Make the conversation personal.
- Let them know that you care about them and want to help.
- Ask the hard questions:
 - Are you having thoughts of suicide?**
 - Are you thinking about killing yourself?**
- Connect to professional care immediately.





There is hope

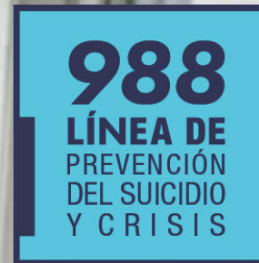


Talk with us.

If you or someone you know needs support now, call or text **988** or chat **988lifeline.org**



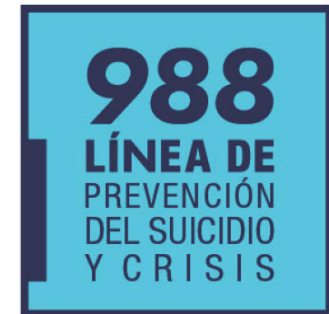
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Si tú o alguien que conoces necesita apoyo, llama al **988** (servicio en español) o envía un texto al **988** o chat vía **988lifeline.org** (en inglés).



PEP22-08-03-010



Next Steps

Building a toolkit to use at work, at home, and in your community.





Mental Health
FIRST AID
MARYLAND

from NATIONAL COUNCIL FOR
MENTAL WELLBEING

MHFA USA Founding Partner



Other Trainings

Suicide Prevention:

- Question. Persuade. Refer. (QPR)
- Applied Suicide Intervention Skills Training (ASIST)
- Narcan/Naloxone training - overdose prevention

Mental Health:

- NAMI – basics, family, homefront, provider
- Black Mental Health Alliance
- Mental Health First Aid

Youth/Young Adult Focused:

- JED Foundation
- Trevor Project (LGBTQ+)
- Active Minds
- Youth MHFA
- Teen MHFA



Contact Info



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