


Having the Conversation...

Creating an open dialogue about mental health with your clients



A webinar on
December 8th 2016
10:00am - 11:00am

At the end of the session, you will have learned:

- how to identify signs and symptoms of common mental health issues
- how mental health can effect your clients
- how to start the conversation about mental health
- about Mental Health Works
- resources available to help support you and your client



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Canadian Mental Health Association Niagara.*



**Canadian Mental
Health Association**
Niagara
Mental health for all

What is Mental Health?

Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community. (WHO 2015)

Mental health means being able to strike a balance in all aspects of one's life: social, physical, spiritual, economical and mental. Mental health is as important as physical health.

What is a Mental Health Problem?

Mental health problem refers to the more common struggles that effect everyone from time-to-time. When going through difficult times such as relationship ending, death, conflict, stresses at home school or work, feeling stressed and having the blues is normal. Usually short term reactions to stressors, loss, painful events or illness

(Mental Illness Foundation 2003)

What is Mental Illness?

Mental illness is a medical term used to describe health problems that affect the way we think about ourselves, relate to others, and interact with the world around us. They affect our thoughts, feelings, and behaviours. Mental illnesses can disrupt a person's life or create challenges, but with the right supports, a person can get back on a path to recovery and wellness.

(CMHA 2015)



Statistics

- 1 of every 5 (20%) of Canadians will personally experience a mental illness (MI) in their lifetime. In Niagara that would mean 86,000 people, roughly the population of Niagara Falls
- People with MI are twice as likely to have substance use problem
- MI is a leading cause of disability in Canada
- In Canada adults with Depression - 8%; Anxiety-5%; Bipolar & Schizophrenia -1%
- Percentage of Canadians with a mental illness who never receive help: 47% Why?

(CMHA/CAMH 2015)

Impact of Mental Health Conditions at Work

- **19% of absenteeism costs**
- **40% of turnover costs**
- **55% of Employee Assistance Program (EAP) costs**
- **30% of short-term and long-term disability costs**
- **10% of drug plan costs**

This translates to **\$51 billion** a year in lost productivity costs due to absenteeism/presenteeism.

500 000 Canadians each week are unable to work due to poor mental health. This includes approx. 355,000 cases due to mental and/or behavioural disorders, approx. 175,000 full-time workers absent from work due to MI



Stigma as a Barrier

- Just 50% of Canadians would tell friends/coworkers that they have a family member with mental illness. Compared to 72% cancer, 68% diabetes.
- 46% of Canadians think people use the term mental illness to excuse bad behaviour
- 42% of Canadians are unsure whether they would socialize with a friend who has a mental health condition
- 64% of Ontario workers would be concerned about how work would be affected if a colleague had a mental illness
- 39% of Ontario workers indicate that they would not tell their managers if they were experiencing a mental health problem

Canadian Medical Assoc. 8th Annual National Report Card on Health Care & Mental Health
Commission of Canada. Niagara magazine July/Aug 2010

Causes of Mental Health Conditions

Biological

- Genetic makeup
- Brain structure and neurotransmitters
- Injury/Accident
- Sickness
- Medication
- Lack of nutrition

Social

- Cultural expectations
- Stigma and prejudice
- Homelessness
- Abuse
- Bullying
- Media influence
- Relationships

Psychological

- Responses to stress
- Patterns of negative thinking
- Personality types
- Coping skills
- Temperament
- Trauma and Loss



Continuum of Mental Health Conditions

Impaired Function

Trauma

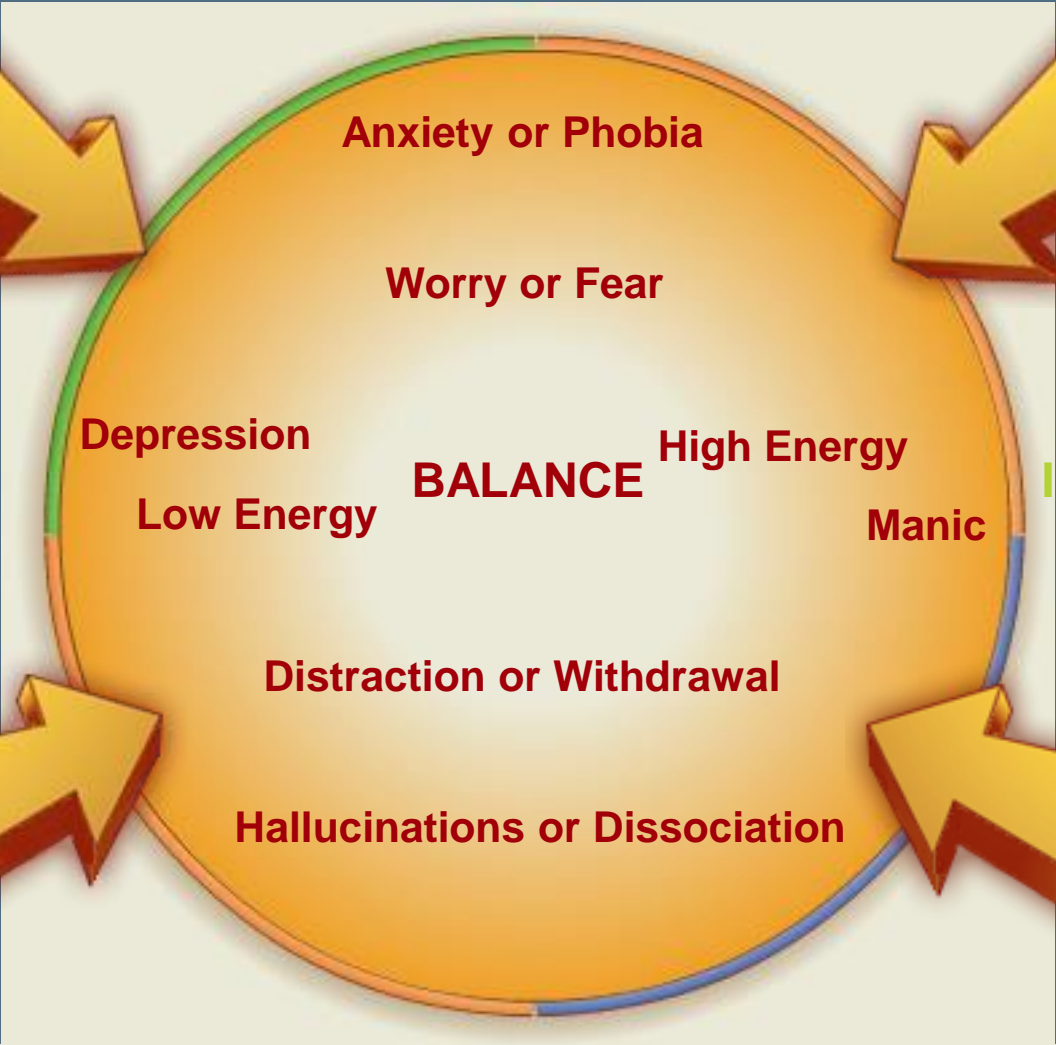
Personal Stress

Impaired Function

Impaired Function

Genetics

Workplace Stress



Impaired Function

Anxiety – Types & Symptoms

Most common of mental illnesses

Generalized; Panic Attack; Social Phobia; Post Traumatic Stress; Obsessive Compulsive

- Strong fear, sense of impending doom or danger around everyday situations
- Excessive, uncontrollable worry
- Rapid negative thoughts
- Easily distracted; irritable
- Difficulty sleeping, vivid dreams
- Heart racing; fidgety, restlessness
- Muscle aches and pains

Depression - Types & Symptoms

Major Depression; Post Partum; Dysthymia; Seasonal Affective (SAD)

- Feelings of doom/gloom; worthlessness; over whelming guilt
- Loss of pleasure in activities
- Feeling exhausted; lack of energy
- Decrease/increase of sleep and/or appetite
- Problems concentrating or focusing
- Feelings/behaviours are slowed down or sped up
- Suicidal thoughts



Bipolar -Types & Symptoms

Bipolar I Bipolar II - extreme to moderate feelings of high and low

- Elevated mood; extreme high; feeling on top of the world; invincible
- Grandiose plans & beliefs
- Rapid thinking/speech
- Reduced need for sleep
- Lack of inhibitions
- Increased energy/activity/irritability
- Possible psychosis



Psychosis Types & Symptoms

Most common is Schizophrenia; Schizoaffective; organic (brain injury/sickness) drug induced; severe depression/anxiety/bipolar

- Delusion = false beliefs grandeur, persecution, being controlled by an outside source i.e. plots against them, think they had special powers/gifts; being monitored; thoughts are controlled by imaginary force; cannot tell what is real or not
- Hallucinations: loss of reality i.e. hearing voices, seeing, feeling, tasting or smelling things that are not real
- Disorganized Thinking: thoughts are jumping from one subject to another, no logical connection, jumbled, disjointed.
- Cognitive impairment; lack of insight; blunted emotions

How to support a person displaying psychotic symptoms

- Delusions are fixed, difficult to change and can lead to unpredictable behaviour; Avoid arguing, let them know you understand how they feel
- Body language should not be intimidating while considering safety for yourself and others
- Connect with the emotion not the delusion, show compassion
“It must be frightening to believe that the Secret Service is after you”
- Stay calm and reduce stressors i.e. minimize the number of people or noise if possible
- Speak clear & slowly. Repeat step by step instructions if necessary, allow individual to respond

What to say when addressing a mental health problem i.e. depression



1. I notice...

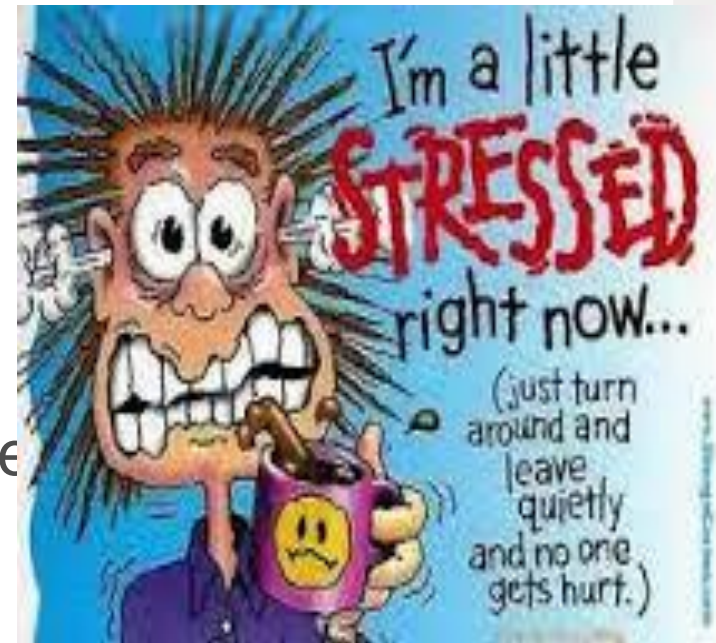
2. I'm Concerned...

3. Is there anything I can do to help?



Support Person Displaying Anxiety

- Pay attention to verbal/nonverbal cues
- Gently approach, introduce yourself, offer assistance
- Let person tell their story
- Actively listen without judgment
- Calm voice; express empathy
- Validate/understand their response
- Give reassurance/resources



How to support someone displaying Strong Symptoms

1. Express Empathy: validate their thoughts/feelings; show respect, check understanding of what is being said by restating or summarizing what was said
2. Listen non-judgmentally: Includes verbal and non-verbal listening skills. Speak calm, clear, and in short sentences.
3. Do not dismiss, minimize, or argue with a person about their delusions & hallucinations— however it is important not to pretend they are real for you; avoid being critical or confrontational
4. Give Reassurance
5. Reinforce Rules & Boundaries: calm, quiet voice; be assertive



What to say?

Strategies to De-escalate:

1. Introduce: give your name and title and may ask for their name.
May I call you_____
2. Identify your purpose of approach - I notice--is there anything I can do to help?
3. Listen and validate their feelings or show you understand

3 Ways to Validate:

- A) Agree with some part of the truth or ask for more information
- B) Acknowledge their feelings
- C) If you can't agree with anything, repeat what they have said



What to say cont'd

4. Set a plan to assist, team approach is always helpful

Set Clear Limits: Be concise, keep it simple, give them time to process; may need to repeat request

Bottom line: you working together to accomplish individual's goal. May offer him choices

Remember to debrief with staff afterwards

DOs

DO Ask Questions: If you know someone has been struggling with their mental health, don't be afraid to ask how they are. Bring it up naturally in a conversation. They might want to talk about it, they might not. It is important that they know you aren't avoiding the issue and they can talk to you when they are ready



DOs

DO Think About Body Language:

Try to be relaxed – maintain eye contact, don't keep checking your watch and look as comfortable as possible.



DOs

DO try to be open-minded and non-judgmental:
Avoid clichés and jokes. Phrases like ‘Cheer up’, ‘Pull yourself together’ and ‘Have you lost your mind?’ definitely won’t help the conversation!



DOs

DO Ask how you can help:
People will want support at different times in different ways, so ask how you can help



DON'Ts

DON'T just talk about mental illness:

Having a mental health problem is just one aspect of the person's life, so keep talking about the things you always talked about. Just spending time with them together lets them know you care



DON'Ts

DON'T avoid the issue:
If someone comes to you to talk, don't brush it off. Acknowledge the courage it takes to talk about this topic and let them know that you're there for them



DON'Ts

DON'T force it:

Some people might prefer a text or email rather than talking on the phone or face to face. This means they can get back to you when they feel ready. What's important is that they know you'll be there when they're ready to get in touch.



DON'Ts

DON'T harass or smother them:

Once you have brought up the topic and expressed your concern, don't feel that you have to continually talk about it or "keep an eye" on the person.





Is your workplace mentally healthy?

We make mental health work.

Full day, half day, one hour and online capacity to build sessions that are **person centred, evidence based, and solutions focused.**

Build mental health awareness, learn new skills for how to respond to challenging situations, and work collaboratively toward a more **psychologically healthy and safe workplace.**

Contact CMHA Niagara for more information: **905-641-5222**



Canadian Mental
Health Association
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Mental health for all



Mental Health Works

We provide capacity building workshops that are person centred, evidence based, and solutions focused. We will help you build mental health *awareness* in your workplace. We will teach you skills for how to *respond* to challenging situations. We will *collaborate* with you toward a more psychologically healthy and safe workplace.

Yes, improving workplace mental health is good business. But it's more than that. It's the right thing to do.

Core: FULL DAY

These workshops provide an in depth understanding of mental health in a full day (6 hours) of interactive learning

In Focus: HALF DAY

These workshops focus on specific issues relating to workplace mental health in an accessible half day (3 hour) format

Essentials: ONE HOUR

These workshops introduce participants to the essentials of workplace mental health through short (1 hour), targeted presentations

MHW is for all businesses (for profit and non-profit) and is adapted to fit your needs (supervisors, all employees)



Need more information?

Canadian Mental Health Association of Ontario
<https://ontario.cmha.ca/>

Choose one of 32 CMHA offices across Ontario
<http://www.cmha.ca/get-involved/find-your-cmha/>

CAMH-Centre for Addiction and Mental Health
<http://www.camh.ca>

Province wide support lines:
<http://www.connexontario.ca/Home/Services>

Schizophrenia Association of Ontario
<http://www.schizophrenia.on.ca/>

