

A step-by-step guide for adults helping youth with their mental health





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The Canadian Mental Health Association encourages adult allies to use this resource to assist youth who have questions or concerns about their mental health.

You are a parent, caregiver, teacher, education worker, counselor, or coach. Whatever your role, you are an adult ally of a young person in your life. And you may be concerned about them.

Youth across Canada are no strangers to mental health struggles. As we increasingly encourage them to open up and are providing many opportunities to do so, it is critical that we, the adults in their lives, have what we need to support them.

The RBC Foundation provided funding for the development of an online resource to give adult allies of youth – teachers, parents, guardians, caregivers, counselors and staff – the tools to help make it safe for youth to disclose mental health challenges and seek support. The Canadian

Mental Health Association (CMHA), in collaboration with The Robb Nash Project and in consultation with CMHA's National Youth Advisory Council, has developed this guide for adults supporting youth.

The purpose of the **By Their Side Guide** is to better prepare adult allies for conversations with youth about mental health and well-being. It is also designed to equip adult allies to respond to youth who may be experiencing mental health or substance use challenges. It provides tools to support disclosure and to connect youth to the help they need. By exploring this guide, adults will gain knowledge and skills to help youth understand mental health issues, and mental illness, and to develop suicide resilience. The guide was created for





all adult allies, including teachers, other adults in classrooms, parents, caregivers and friends. Classroom resources are available throughout the guide and in Resources for Teachers (page 28).

If a young person in your life is presently struggling with anxiety, suicidal thoughts, or any other mental health issue, please encourage them to reach out to Kids Help Phone by texting CONNECT to 686868 or by calling 1-800-668-6868. Kids Help Phone is there even if they're not in crisis. They can call or text for information on local services or if they just need someone to talk to.

Inspiration for this guide came from The Robb Nash Project, an immersive concert experience that engages young people through the power of music and storytelling, all while addressing topics related to mental illness such as depression, anxiety, self-harm, addiction, bullying and suicidal ideation. These shows balance this serious subject matter in a truly unique way that is not only thought provoking and inspirational but entertaining and, at times, humorous. Participating schools are provided comprehensive support before, during and after the presentation to ensure a safe and enjoyable experience for everyone. These shows have been hosted in performing arts theatres and arenas from coast to coast with participating schools and communities.

Students who have attended Robb Nash concerts respond in different ways, including feeling motivated to treat others better, having a deeper self-awareness of personal challenges, and being inspired to pursue careers where they can help and support others. Other youth have come to realize that it is okay to discuss their challenges and that it is important to communicate those challenges to friends, family, teachers and counselors. Still others have experienced emotional breakthroughs that encouraged them to seek help.

While the pandemic made it impossible to continue hosting in-person shows and events, like the Robb Nash Project concerts, the forced isolation through lockdowns and school closures only intensified pressure and anxiety for youth. This spurred Robb Nash and his team to create new music and video content. Using the stories of youth they met on the road, they developed *A Living Curriculum: Stories of Life through Darkness* to present youth with the message of wellness and hope. It is available for use in schools now. For more information, visit www.robbnash.com.

Events like Robb Nash concerts can be powerful experiences for youth, making it crucial for adults to be prepared to support them. This guide was created to help adults do just that. We hope it will help you to help the young people in your life.







Supporting youth





Adolescence is a time of great change, psychologically, socially and physically, as individuals transition from childhood to adulthood.

It can be difficult to know the best way to support youth when they are facing challenges. This is in part because young people are still in the process of learning how to manage challenges, and how experiences in their lives can influence their thoughts, feelings and behaviours. It is important to recognize and keep in mind that a critical stage of human development happens during the transition from childhood to adulthood and it is a time when a young person is presented with many new challenges. This is also a time when mental health issues or problems can make their first appearance. As youth are still moving through this transitional time of learning, they may be aware that something is not right, and they are struggling, but may be unsure how to move forward in a healthy way.

Here are some common thoughts/ feelings youth may have during this challenging time:

"This is just the way life is."

They may try to ignore the issue, hoping it will go away in time.

They may rely on the belief that they can "get over it" on their own.

They may view mental health as something that only affects other people – "not me."







What is mental health?

Mental health is more than the absence of mental illness.

When we are supporting youth with their mental health, it is important to understand the difference between "mental health" and "mental illness," as these terms sometimes get confused with one another.

A **mental illness** is a health problem that affects the way we think about ourselves, relate to others and interact with the world around us. Mental illnesses affect our thoughts, feelings and behaviours.

Like physical health, **mental health** is a fundamental component of our overall health. It can change from day to day, and we must look after our mental health just like we do our physical health. Our mental health can influence how we see ourselves, our ability to carry out daily activities, our ability to achieve our potential and how we relate to others around us. According to the World Health Organization, mental health "is a state of well-being in which the individual realizes their own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community."

It is essential to be there for our youth when they are struggling with their mental health, just like we are there for them when they are physically sick or hurt.

Child Psychologist, Dr. Ian Manion tells us, "We have socialized our children to tell us right away when they experience physical symptoms like an earache, and we act on these early signs right away, knowing that the problem will get worse if it is not treated. For symptoms of mental illness we have socialized our children to 'suck it up' unless it's really bad. Our watchful waiting can contribute to untreated issues becoming more severe and more difficult to treat". (RBC Children's Mental Health Project, 2012).

Protecting youth mental health

There are factors that can help protect youth from developing a mental illness. These are called "protective factors."

Protective Factors:

- ▶ Self-esteem, confidence
- Ability to solve problems and manage stress or adversity
- Communication skills
- Physical health, fitness, sleep, nutritious foods, shelter
- Equality of access to basic services
- Social justice, tolerance, integration
- Social and gender equality
- Physical security and safety

There are also factors that increase the risk to youth of developing a mental illness. These are called "risk factors".

Risk Factors:

- Low self-esteem
- Cognitive and emotional immaturity
- Difficulties in communicating
- Medical illness/substance use
- Poor nutrition
- Loneliness, bereavement
- Neglect, family conflict
- Exposure to violence/abuse
- Low income and poverty
- ▶ Difficulties or failure at school
- Stress, unemployment
- Poor access to basic services
- Injustice or discrimination
- Social and gender inequalities
- Exposure to war or disaster





How do injustice and inequality affect youth mental health?

Economic and social factors can affect an individual's health, such as education, living conditions, family, peers, social groups, employment, income and experiences of discrimination and trauma (Mittmann & Schrank, 2020). Inequalities in these areas can cause inequalities in all aspects of personal health. The impacts of racism can lead to trauma and chronic stress (Government of Canada, 2020). In Canada, Indigenous, racialized, refugee, immigrant, and marginalized groups are at the highest risk for negative health effects that result from social, economic and environmental factors. As a result, youth who live in circumstances that negatively impact their well-being, such as poverty and unsafe housing, are exposed to various health risks and barriers (Waldron, 2009).

Challenge discrimination and celebrate differences

It is critical that youth feel understood, safe and protected. A positive view of their racial, ethnic and sexual identities can help adolescents confront racism, homophobia, transphobia and other forms of discrimination. Don't be silent about these forms of discrimination because silence can perpetuate them. Be willing to have uncomfortable conversations that can lead to learning.

It is important to acknowledge the value of a person's unique perspectives and experiences by finding ways to connect with them on a personal and authentic level.

Here are some steps:

- Use open-ended questions to get at a youth's unique perspectives.
- Share details about your own culture, background, and upbringing to inspire them to do the same.
- Be willing to examine your own biases and lack of awareness.
- Use current news and cultural events to spark meaningful conversations about race, culture and sexuality.
- ➤ To create a safe space, encourage youth in your life to express their full racial, sexual and cultural identities at home and at school.





Use small group activities to encourage interaction amongst all students to enhance belonging and cooperation and therefore reduce unhealthy competition and isolation.

Understanding unequal

health risks

for 2SLGBTQ+ youth

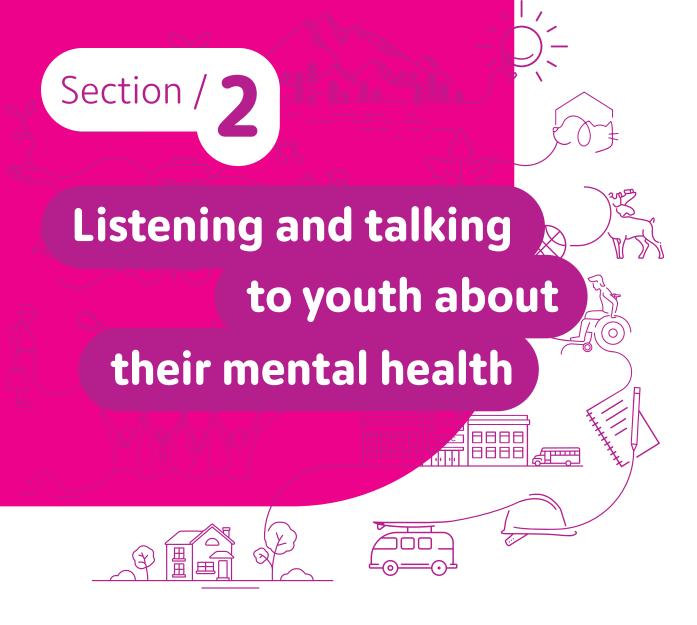
Research shows that 2SLGBTQ+ youth experience significantly higher levels of bullying and violence in school, which puts them at a higher risk for depression, problematic substance use, suicide and poor academic performance (Johns et al., 2019). It is therefore important for you, as an adult, to address derogatory, bullying, homophobic and transphobic language and behaviour when you hear or see it. In order to be emotionally, socially and physically safe, parents, teachers, schools and communities must work together to help 2SLGBTQ+ students thrive.

Visit this resource to learn more about bullying prevention.



Hints for teachers:

- ► Seek opportunities to incorporate the contributions of 2SLGBTQ+ people into your curriculum, discussions, lessons and library collections.
- Support gay-straight alliance groups.
- Volunteer as a "safe contact" for 2SLGBTQ+ students and families.
- ► Host a 2SLGBTQ+ information night to create awareness and reduce negative stereotypes.
- ► Promote 'Pink Day'.
- Support local pride events (Visit <u>fiertecanadapride.org.</u>)



There are often warning signs when a youth is struggling with their mental health. Be aware of these signs. Here is a list of behaviours that are invitations for an adult to respond. This is not a comprehensive list.

Some warning signs:

- Change in behaviour (i.e. irregular mood or aggression)
- Feeling worthless
- Frequent talk or thoughts about death
- Giving away possessions
- Absenteeism, failing/missing school, or classes
- Very anxious around other people
- Irritable and easily frustrated
- Has trouble concentrating and making decisions

- ▶ Withdraws from family and friends
- ▶ Spends considerable time alone
- Change in eating habits or preoccupation with weight
- Feels tired all the time and has no energy
- ▶ Decreased or increased need for sleep
- Complains of physical symptoms (headaches, nausea)
- Beginning or increasing problematic substance use



Behaviours to watch for:

Seek professional advice if you observe any signs of unsafe or concerning behaviour. For example:

- ▶ Self-harm
- ► Their future plans hint at suicide.
- ► They express odd beliefs that don't seem to have a basis in reality.
- They appear at times to be talking to someone but there is no one there.



Educators may also have legal and professional requirements to inform a youth's parents or guardians of these concerns and/or to seek the intervention of a healthcare provider. Be aware of your school's guidelines and policies on suicide prevention, intervention and postvention.



Building healthy communications with youth means being aware of the signals that you need to get them professional health care. As an adult ally, you are not a therapist or a mental health professional. And you are not expected to be. Sometimes it will take more than the support that you can offer.

If suicide is on their mind:

If you're concerned that a young person is thinking about suicide, talk with them. Ask them directly "are you thinking about suicide?" Talking about suicide won't give them the idea. If they are seriously considering suicide, they may be relieved to talk about it.

If there is **immediate** risk, take **immediate** action.

Call 911, or your local Mobile Crisis Service

Call Kids Help Phone: 1-800-668-6868

Text CONNECT to 686868

Available 24/7

www.kidshelpphone.ca

2SLGBTQ+ Crisis Line: 1(800) OUT-IS-OKAY (688-4765)

Canada Suicide Prevention Service:

Call: 1 (833) 456-4566

or visit www.crisisservicescanada.ca

If suicide is on their mind, but the risk isn't immediate, please see the next section "Preventing suicide and creating a safety plan".





Self-harm

Self-harm may be the first thing that a parent or teacher notices. It is important to be aware of the risk that self-harm has on suicidal behaviour.

Self-harm has been defined as "a preoccupation with deliberately hurting oneself without conscious suicidal intent, often resulting in damage to body tissue" (Muelehkamp, 2005, p.324). Although self-harm does not necessarily lead to suicidal behaviours, it can escalate and change.

Why do people self-harm?

Youth are more likely to be at risk for self-harming behaviours if certain factors are present, such as:

- Loss of a parent
- ► Childhood illness or surgery
- Childhood sexual or physical abuse
- Problematic substance use in the family
- Negative body image
- Lack of impulse control
- Childhood trauma
- Neglect
- Lack of strong family attachments

Youth harm themselves for a number of reasons, including:

- ➤ To feel better: Self-harm can release pent-up feelings such as anger and anxiety, or youth who feel numb use self-harm to feel "something."
- ▶ To communicate their emotional pain: Those who self-harm for the above reasons will display their wounds in an obvious way to reach out for help.
- ► To punish themselves: Youth who self-harm may lack self-esteem and think they are at fault for the way they feel.
- ▶ To feel a sense of control: Youth who self-harm may feel powerless and lack self-esteem. Self-harm may be used to regain control. This is particularly common for those who have suffered abuse. There is often a pronounced feeling of powerlessness, self-loathing and an absence of self-esteem.

What to say if someone is self-harming

- ► Educate yourself about self-harm
- Ask how they are feeling
- ▶ Do not be judgmental
- ► Be supportive without reinforcing their behaviour
- ► Acknowledge their pain
- Do not promise confidentiality
- Do not avoid the subject
- ▶ Do not focus on the behaviour itself
- Encourage them to seek professional help

For more information about youth and self-harm, see <u>this brochure</u> and <u>this toolkit.</u>



Reaching out to youth: initiating a conversation

If you're concerned about the mental health or substance use of a young person in your life, try to initiate a conversation with them. Here is a step-by-step approach to reaching out.

Remember the importance of respecting privacy and using discretion when finding a time to talk with them. You will also want to pace the discussion; don't ask too much too quickly.

Stereotypical and stigmatizing beliefs about mental health and substance use challenges create barriers that prevent many young people from seeking help.



It is important to avoid making a young person feel singled out, for example, asking them to stay after class when other students are around.

Keep in mind: you aren't a therapist.

As a parent, caregiver or teacher, keep in mind that you are not expected to be the youth's therapist or a mental health professional. These strategies can help you navigate conversations when you are concerned or when a youth reaches out.

13 tips for supporting youth

- 1 Get this important message across: It is important to reach out for help to someone they trust when they're feeling stressed or overwhelmed.
- 2 Be clear that mental health issues are common, and everyone deserves support. Show them that you are open to talking about mental health and substance use.
- **3** Be aware of stigma. Be cautious of stigmatizing language: "freak", "psycho", "drunk." Instead, role model non-stigmatizing language: "he has a mental illness", "she has a substance use disorder".
- 4 Provide positive feedback and acknowledge their strengths; i.e. "You have so much courage and strength," "That is not your fault," "Thank you for sharing," "You are resilient."
- 5 Demonstrate concern; i.e. "How are you?", "Tell me what I can do to help," "I haven't seen you lately, I am worried about you," "Do you want to talk to someone for more support?"
- 6 Ask questions about how they feel and think rather than make assumptions. Encourage youth to speak about their feelings.
- 7 Acknowledge and validate their feelings. Well-meaning adults often try to help by diminishing the situation or downplaying its impact. However, youth can perceive this as belittling or correcting their feelings.
- 8 Paraphrase to show you understand; i.e. "I hear you are telling me that you feel anxious because you did not complete your assignment on time."
- 9 Model kindness and empathy; i.e. "I understand," "me too," "I can understand why that would have been difficult."
- **10** While you should not interrupt by inserting your own experiences, do acknowledge your own struggles, weaknesses and biases.
- 11 Use open body language to show genuine interest and care.
- **12** Identify opportunities for youth to practice self-care, and social and coping skills; i.e. nature walks, meditation, art, listening to music.
- **13** Ensure they understand that negative attitudes and behaviours towards people who have a mental illness cannot be tolerated.





Managing your own emotions, biases and values during the interaction

Managing your feelings and emotions can be difficult as you might feel angry, sad or worried. Or even judgmental.

- Be aware of how you are feeling and use techniques to calm yourself

 such as breathing, taking a moment to rest and having an internal dialogue.
- ➤ You could also acknowledge your emotions when talking to youth by using phrases such as "when I see you are sad, it makes me sad because I care about you but that doesn't mean I want you to hide your emotions from me. It means I want to be there for you through this."
- You may also be feeling judgmental. Recognize any judgment or bias you might be bringing and the potential to influence the youth's response.

Active non-judgmental listening

- Interacting with youth requires patience, willingness to listen, and for you to acknowledge their feelings.
- ▶ While situations and experiences may seem small to you, they can have a negative impact in a youth's life.
- When you talk with a youth, remain open and calm, and maintain a comfortable amount of eye contact.
- Using reassuring and supportive gestures and words such as "tell me more" or "I hear you saying" are examples of active listening.
- Active listening also includes reflecting and rephrasing words or overall meaning that you have heard and clarifying if you understand what is being said.
- Focus on listening rather than jumping to problem solving or drawing parallels with your own experiences.
- Listening also means observing the youth's nonverbal response to the conversation.

Asking open-ended questions

- When approaching youth about concerns you have recognized, it is important to remain open-minded and ask questions that are fair and don't blame the youth. These should be phrased in supportive ways that show the youth that you understand their situation.
- ► The young person in your life may not be ready to open up about what's going on the first time you ask. They may need a little time to build up the courage or work through other factors such as safety and/or cultural barriers. It's okay to pause the subject and look for another opportunity to talk again.







Showing care and giving reassurance

- Reassuring youth helps them know that strong emotions and tough situations will not last forever, although it might feel that way in the moment.
- You can also comfort them by saying you do not think less of them and that your relationship will not change; that you want to support them in what they need without taking over full control or making decisions for them.
- ▶ You can provide reassurance by using warm body language and engaging in relationship traditions activities done together, hugs, etc., taking into account what is appropriate in your relationship.

Helping youth explore and define emotions

- ➤ You can help a youth better understand their own emotions by reflecting back the feelings underlying the words they use or noticing behaviours that indicate different feelings such as fidgeting, withdrawal, tears, and raised voice.
- You can also take a curious approach to exploring emotions. For example, "I wonder if ___ might be a good word to describe how you are feeling," "sometimes when I feel ___ I___ (behaviour)."

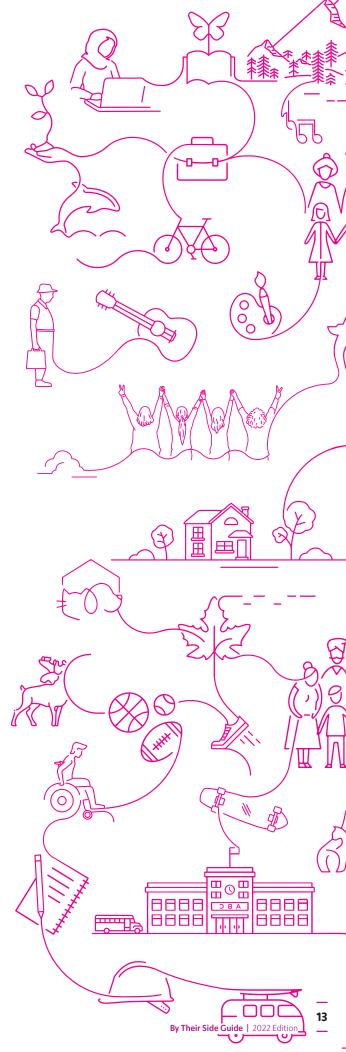
Validating their emotions

- ▶ You can further support a youth by validating their emotions.
- Help them understand that it is normal to experience the feeling(s) they have. Acknowledge that you may not know exactly how they feel, but that you may have experienced similar feelings before.

Supporting them to identify steps to healthy living

- Identify coping and communication skills that the youth has already demonstrated.
- ▶ This involves recognizing when a youth is overwhelmed by current emotions and may not have the skills to deal with them; suggesting possible new skills to practice or try together; encouraging healthy living routines and general practices (sleep, hygiene, healthy diet, exercise, social engagement); or taking an open and partner/team approach to trying new things and planning next steps.

Adapted from this resource.







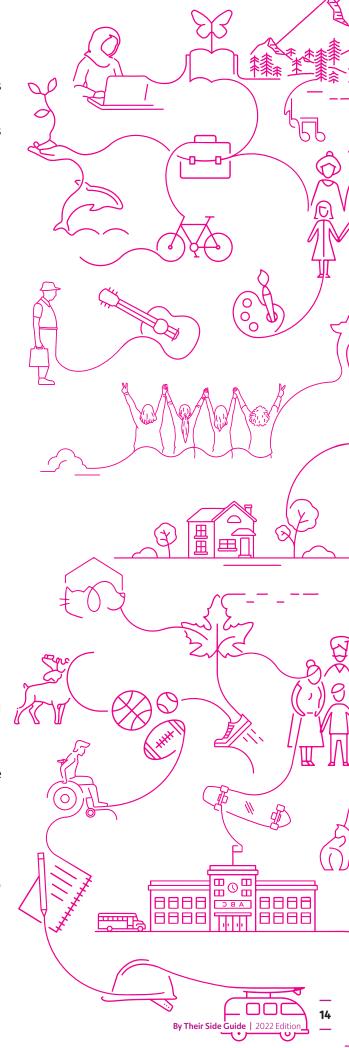
8 tips for starting the conversation

- 1 Ask how things have been going for them lately. What's been good? Is there anything that has been troubling them?
- 2 Use everyday language to talk about the changes you've seen not as "symptoms" or "mental health problems". For example: "I've noticed that you haven't really been going out much lately."
- 3 The goal is to figure out what has led to the changes you've noticed.
- 4 Talk while doing an activity this will make it easier to talk about personal troubles.
- 5 Ask them what they would like to do or think they need. This is great opportunity to help them learn how to solve problems an important life skill.
- 6 Make problem solving a collaborative effort.
- 7 Remind them you care and you're there if they want to talk.
- 8 Help connect them with resources. <u>Kids Help Phone</u> is there even if they're not in crisis. They can call or text for information on local services or if they just need someone to talk to. Some other resources include <u>CMHA</u>, <u>Jack.org</u> and <u>Kelty Mental Health</u>.

When they come to you

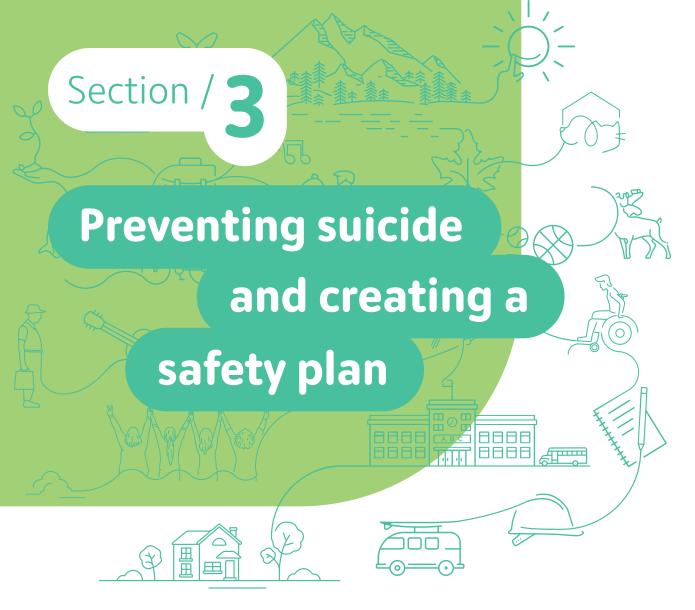
Research tells us that when they have problems, young people will often turn first to their friends and family, or another adult such as a trusted teacher. Here are some additional suggestions for responding when a young person turns to you for help:

- Don't panic (breathe deeply).
- Stay calm. Your calm and caring presence goes a long way toward supporting the young person to realize that there are ways out of their pain.
- Listen. Show that you are taking their concerns seriously. Dismissing their concerns, judgmental statements or giving superficial advice will likely shut down any further conversation.
- Empathize with them. Let them know you understand what they are feeling. "It sounds like you're feeling (the emotion) about/because (situation or event)."
- ▶ Be curious ("Tell me more"). Don't assume you know what the young person is going through.
- Ask how you can best help and support them. The young person might just want some advice on what they should do, or they may want you to be very involved in helping them.
- Acknowledge their ability to recognize their feelings and their courage in coming to you (I'm really proud of you...").









The topic of suicide can be complex, disturbing and puzzling. Some may be extremely troubled by the other person's pain and anguish. Some may think that people are being selfish and only thinking of themselves. And still others don't want to know what is going on at all, believing matters like suicide are better left unspoken. As a society, most of us just don't get it.

The overwhelming majority of people who die by suicide do not want to die, nor do they kill themselves on a whim. Suicide is rarely an act of impulsivity. Rather, it has been mulled over for a long time. People considering suicide are in extreme psychological pain and they want that pain to end. The pain they have been experiencing over a period of time narrows their perspectives and ability to see any other way out. This process is gradual — people rarely come to a point of suicidal crisis over one awful experience. What can "seem" impulsive to an observer, however, is the decision to carry out the act of suicide at a particular moment in time. A suicide may appear

like a rash act coming out of nowhere. On the contrary, often the decision to die by suicide happens when a negative circumstance becomes the tipping point. Our humanity and empathy can go a long way to helping someone at risk. By providing a compassionate ear, a sounding board, or a simple, caring presence, we can help avert a death by suicide.

Talking calmly about suicide and self-harming, without showing fear or judgment, can make a youth feel some relief. When talking about suicide, keep in mind that direct questions can help prevent it.





If the risk of suicide is immediate, always contact emergency services

CALL 911, or your local Mobile Crisis Service

Kids Help Phone: 1-800-668-6868 Text CONNECT to 686868 Available 24/7

2SLGBTQ+ Crisis Line 1(800) OUT-IS-OKAY (688-4765)

Canada Suicide Prevention Service
Call 1-833-456-4566 toll free
(In QC: 1-866-277-3553), 24/7 or visit
www.crisisservicescanada.ca

When the risk is NOT immediate, the development of a safety plan can help protect the youth from future suicidal crisis.



Safety plans

A safety plan is a document that supports and guides youth when they are experiencing thoughts of suicide to assist in preventing a state of intense suicidal crisis. A safety plan does not need to be written with/by a professional and can be drafted with the help of anyone in a trusting relationship with the person at risk.* A safety plan is written when a person is not experiencing intense suicidal thoughts. It may be written after a suicidal crisis, but not during, as during this time an individual can become overwhelmed with suicidal thoughts and confusion and may not be thinking clearly. A safety plan is written when a person has hope for life — or can consider the possibility of life — allowing

them to identify their reasons for living and the actions they can take to prevent their thoughts from becoming intense and overwhelming.

When talking about suicide, remember that one of the best ways to prevent it is to ask the young person directly if they have a suicide plan and if they have the means to carry it out.

*Hint for teachers, education workers and other professionals working with youth:

Contact your supervisors and follow protocols as defined by your workplaces.

Why do safety plans work?

Safety plans have been proven to work for a variety of reasons. A safety plan focuses on a person's strengths, and identifies and emphasizes their unique abilities so they can draw on them when suicidal thoughts become intense. The goal is to draw on previous recovery and healing processes. For people who experience recurring suicidal thoughts or crises, knowing they have weathered the storm before and have navigated their way out can be a strength.





How to co-develop a safety plan

Co-developing a safety plan involves a collaborative, in-depth conversation between the person experiencing thoughts of suicide and their trusted caregiver/parent or friend.

- Find a time to go over each step together thoroughly and thoughtfully (Berk & Clarke, 2019).
- ▶ Items for a safety plan can come from other conversations or from positive things that happen. Suggest bringing these into the plan! For example, if the youth mentions their dog, that is a potential reason to live.

Step 1

List warning signs that indicate a suicidal crisis might be developing.

Guiding question for the youth thinking about suicide:

What (situations, thoughts, feelings, body sensations, or behaviours) do you experience that indicate you are on your way to thinking about suicide, or that let you know you are mentally unwell generally? Think about some of the more subtle cues.

Examples:

Situation: Argument with a loved one.

Thoughts: "I am so fed up with this and I can't handle it anymore."

Body sensations: Urge to drink alcohol.

Behaviours: Withdrawal from social interaction, irregular eating

schedule.

When to implement?

At any time before a suicidal crisis.

How to implement?

- Awareness of warning signs can alert the youth to the fact that they may be at high risk of thinking about suicide when these situations/ thoughts/body sensations arise (referred to as warning signs).
- ▶ Being aware of personal warning signs can help the youth identify when they may need more support, even before they've asked for it.

The safety plan outlined in this section has been adapted from the Centre for toolkit. For over 40 years, the Centre for Suicide Prevention, a branch of the Canadian Mental Health Association, has been equipping people with the skills and knowledge to respond to people considering suicide. www.suicideinfo.ca.





Step 2

List the coping strategies that can be used to divert thoughts including suicidal thoughts.

Guiding question for the youth thinking about suicide:

What (distracting activity, relaxation or soothing technique, physical activity) helps take your mind away from thought patterns that feel scary or uncomfortable, or thoughts of suicide?

Examples:

Distracting activity: Watch a funny movie

Relaxation technique: 5 Senses Grounding Activity

(see page 24)

When to implement?

At any time before a suicidal crisis, or when suicidal thoughts emerge but are not intense. This may also apply to other crisis scenarios.

How to implement?

- ▶ The youth with thoughts of suicide can use these coping strategies to help distract them from their thoughts and move them to a more positive mental space.
- Friends/adult allies can suggest to the youth that they them if needed. Examples:

Step 3

List the places and people that can be used as a distraction from thoughts of suicide.

Guiding questions for the youth thinking about suicide:

Where can you go to feel grounded, where your mind can be led away from thoughts of suicide? Who helps take your mind away from these thoughts?

Examples:

Places: Go to a movie, sit in a park People: Text friend (name, phone) Physical activity: Go for a bike ride

The youth with thoughts of suicide can go to these places or contact these people to help distract them from their thoughts of suicide and move them to a more positive mental space.



Step 4

List all the people that can be contacted in a crisis, along with their contact information. If there is no such person in their life, there are professional mental health providers who can help. *Refer to step 5.

Guiding question for the youth thinking about suicide

Who among your friends, family, adult allies, and service providers can you call when you need help (when your thoughts become overwhelming or you're thinking about suicide)?

Examples:

Mom: work phone, cell phone

Adult Ally: work phone, cell phone

When to implement?

At any time before a suicidal crisis, or when suicidal thoughts emerge and are becoming intense.

How to implement?

- ➤ The youth with thoughts of suicide can call these people at any time to distract them from their thoughts or to let them know when their thoughts are becoming more intense, signaling that they need support.
- ▶ Friends and adult allies can respond to the young person by supporting them through this difficult time: listening to them, going to visit them, making sure to check in often, asking what specifically they can do to help.

Step 5

List mental health providers along with hours they are reachable, and 24/7 emergency contact numbers that can be accessed in a crisis.

Guiding questions for youth thinking about suicide

Who are the professionals you've worked with who can be helpful to you in a crisis? What other professionals or organizations could you call?

Examples:

our Therapist: _	
our Hospital:	

Kids Help Phone: Call 1(800) 668-6868 Text CONNECT to 686868

www.kidshelpphone.ca

2SLGBTQ+ Crisis Line: 1(800) OUT-IS-OKAY (688-4765)

Canada Suicide Prevention Service:

Call: 1 (833) 456-4566

When to implement?

When suicidal thoughts have become very intense, and the person experiencing the thoughts believes they cannot cope on their own

How to implement?

The person with thoughts of suicide should immediately call or visit the above crisis contacts.









Step 6

List the steps to take to remove access to means of suicide from the environment.

Guiding questions for youth thinking about suicide

What could be used to die by suicide in your environment? How have you thought about dying by suicide before, and how can you make that method more difficult to access?

Examples:

Pills: Give to pharmacist or friend for disposal Guns / Rope / Knife / etc.: Remove from home

When to implement?

Before a suicidal crisis and preferably immediately after safety plan is developed.

How to implement?

- ► The youth with thoughts of suicide can remove these items from their environment and give them to friends or adult allies.
- ► The person working with them on their safety plan should confirm that all means have been removed from the home. Adult allies can offer to keep or throw away these items.
- Keeping a youth safe from a method of suicide can differ for each person and method.
- ► Firearms should always be removed from the home, regardless of whether or not they have been noted as a means of suicide.





List important reasons to live, or how/why that person is still alive.

Guiding questions for youth thinking about suicide

When do you feel most at ease during the day? Who do you love? What do you enjoy doing? What did you used to enjoy doing? What is important to you, or used to be important to you? What has kept you alive up until now?

Note: These reasons can become apparent through conversation with the person, and through the process of a suicide intervention. You may need to identify these for the person, based on what they've told you.

Example:

My dog is important enough to me that I want to stay alive to take care of him.

How to implement a safety plan

- Once complete, you and the person who has had thoughts of suicide should keep copies of the safety plan in an accessible place.
- The safety plan needs to be handy so that the person can always find it when they are experiencing intense thoughts of suicide.
- Some people choose to always keep their plan with them, i.e. on their phone or in their wallet.
- Each step in the safety plan plays a role in supporting the person with thoughts of suicide, as well as yourself, and other friends and caregivers.
- Keep in mind that the safety plan is not written in stone: it can be revised as often as is needed.
- The plan can be reviewed at any time, and especially if the person experiencing thoughts of suicide has found any portion of it ineffective in helping them cope with their thoughts.
 - For example, if a contact person is found difficult to contact, or if a coping strategy is no longer effective or accessible.

Once the safety plan is created, have a conversation with the youth about sharing concerns and the plan with other adult allies such as parents, guardians, and school counselor. Follow up with the youth, supportive adults, and adult allies.







What is self-care?

Caregivers need to care for themselves, too. So, if you're interacting with youth who need help with their mental health, your mental health matters too! Self-care is a term used to describe any act that gives a person something they need. In other words, it is taking care of yourself. This includes the basics such as: eating, drinking and sleeping, but also other needs such as "me" time, social time, hobby time, down time and doing things you love. Self-care is critical to keeping a healthy mindset and staying your best, truest self. When you take care of yourself, you are better able to set goals and stick to them. Below, review some other benefits of self-care that we all too often may forget about or not even consider.

- ▶ You can feel more present with your friends, family and students.
- ▶ You have energy to get through the day and have more creative juices flowing.
- ➤ You can actually develop a higher level of self-esteem because when you take care of yourself, you send a message to your body saying, "I matter." And you do.





Do you find yourself:

- Going 3 hours without a bathroom break?
- Going 5 hours without drinking water?
- Working through lunch?
- Staying up late to work and multi-task?
- Asking yourself "When was the last time I exercised?"
- Working without taking a break for fresh air or sunlight?

The most obvious signs of these deficits are:

- Extreme and constant fatigue
- Difficulty focusing and concentrating
- Feeling more emotional, irritable, or reactive than what is your normal for you
- ▶ Turning to alcohol or other substances to cope.
- Things that didn't seem like a big deal suddenly are.

For many of us, after a while we forget what it feels like to have adequate self-care — or maybe never even knew how it felt.

Adult allies need self-care, now more than ever

Teachers, parents, guardians and other adult allies work hard and deserve to cultivate happiness in their lives and for their families. It is critical to advocate for your own self-care in order to parent and teach effectively and to keep passion alive. Passion is the lifeblood of teaching and parenting. Self-care is the only way to keep it – and you – from burning out.

Why do youth need their adult allies to engage in self-care? Self-care helps you tap into your wise inner voice. It can help quiet the mind and lift the spirit, which means you are operating from a more grounded, giving place. Isn't that ironic? When you hold yourself back, you're actually able to give more — and where it matters most! Self-care gives us more patience for the youth who need the most love, and a more creative mind.

Many individuals have become accustomed to ignoring their own self-care for long stretches of time.

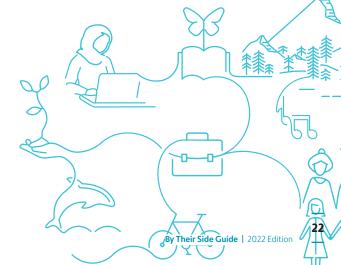
Why do adult allies deprive themselves of self-care?

Because you care.

Let's be real, we have many obligations that take up our time and people that depend on us at home and at work. That means there is literally no end to how much we could give of ourselves. It can feel like there is no time for self-care because we care about so many other people's needs. The irony, though, is if we don't consciously draw on our own boundaries, no one will.

Because you were never taught.

Self-care is not a prominent part of our culture, and many times not something we were taught growing up. Too often it is only once people are diagnosed with anxiety, depression, or another mental illness that they can receive the education and encouragement they need to take care of themselves.

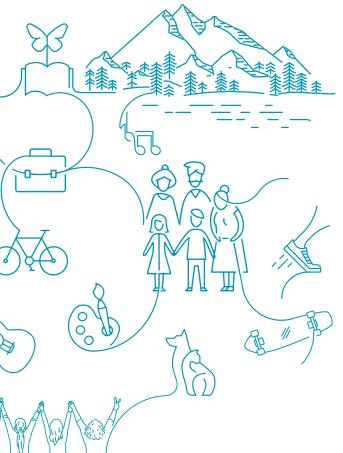






How can adult allies build healthy habits to care for themselves?

- Prioritize your wellness and schedule it like you would an important meeting!
- Build healthy habits to care for yourself.
- Share your wellness activities with others such as family, friends and students (eating healthy snacks and drinking water).
- Practice mindfulness and incorporate it or movement breaks into your daily routine.
- Practice checking-in with your body, mind, and emotions to bring awareness to the present moment. When you become more aware of what you need it can help you make wise decisions.
- Introduce checking-in with body, mind, and emotions with youth so they can develop self-awareness.



Strategies for

reducing stress

Stress is a part of our lives, from minor challenges to major crises. This is as true for adults as it is for youth. We can't always control our circumstances, but we can control how we respond to them. It is important to have effective stress relievers to calm the mind and body when stress becomes overwhelming and begins to affect well-being. Figuring out what works best for you and being open to trying out alternatives is important. Stress reducing tools can help. When we are focused on the present, we won't ruminate about something that happened in the past or worry about something in the future.

Daily habits and practices

Here are some examples of activities to help address stress.

- ► Take a walk
- Hug a loved one
- Create art
- Play or listen to music
- Keep a gratitude journal
- Engage in positive self-talk
- Express gratitude
- Prioritize exercise
- Re-visit or take up a hobby
- ► Eat healthy foods and snacks

The Box Breathing Technique

- ▶ Start by breathing in over a count of 3. "1...2...3..."
- Hold the breath in for a full count of 3.
- ▶ Begin exhaling your breath out over a count of 3. "1...2...3..."
- Exhale the breath out for a full count of 3.
- Repeat this cycle for as long as needed to help reduce your current stress.





Strategies for reducing stress

continued

Just Stop and Listen

Pick out five different sounds around you. What do you hear when you stop and listen?

The Five Senses Grounding Technique

Begin by asking youth to look around the room silently. As they are silently scanning the room, ask them to use their 5 senses to:

- ▶ Label 5 things they can see
- Label 4 things they can hear
- ▶ Label 3 things that they can touch
- Label 2 things they can smell
- Label 1 thing they can taste

This focuses attention on something other than the source or feelings of stress in the body.

Progressive Muscle Relaxation

This activity involves tightening and relaxing each muscle group, starting with your forehead and moving through your body towards your toes.

3-Minute Breathing Space

Learn how to empower yourself to calmly pause, relax, and decide what to do next. Here's an <u>audio clip</u> to guide you.









Practicing mindfulness

Mindfulness is paying attention in a particular way, on purpose, in the present moment, and non-judgmentally. - Jon Kabat-Zinn

Show appreciation and gratitude

Think of something you are grateful for. It can be big or small. You might write it down in a journal or write it on a piece of paper to put in a gratitude jar. Think about why you appreciate it, and don't be afraid to tell someone what you appreciate about them.

Mindfulness Meditation

Meditation is about training yourself to be aware. You're not trying to turn off your thoughts or feelings. You're learning to observe them without judgment. And eventually, you may start to better understand them as well.

The Breathr App

Breathr is a free app that can help in the practice of mindfulness.

"The practice of mindfulness has recently received significant attention in the media for its usefulness in promoting social and emotional well-being and contributing to the ability to manage difficult or stressful situations. Mindfulness is all about encouraging awareness of oneself in the present moment, without judgment. Examples of mindfulness practices include body scans, guided breathing meditations, and other simple exercises, which can help us to refocus on the present and calm our minds." – Breathr

Mindfulness Throughout Your Day



Be mindful while you're eating. Pay attention to what you're eating and all of the senses involved while eating a meal.



Stay present while you're waiting. When waiting for the bus, an appointment, or a friend, focus your attention on the present moment.



Notice your surroundings while walking. Try walking without distractions like your music or your phone. Try to notice something new on a familiar route.

Feel your feet on the ground. Focus your attention on the soles of your feet. Feel them against the ground and notice everything you can about them.



Pay attention while you're washing your hands. Focus on the temperature of the water, the feeling of the water and soap on your hands and the movements your hands make.



Notice something different when looking at familiar objects. Try using all of your senses to explore a familiar object in a different way.



For more information on mindfulness, visit foundrybc.ca.

This infographic was adapted from content originally written by BC Children's Hospital for the <u>foundrybc.ca</u> website.





Self-care assessment

for adult allies

Avoiding burnout is one reason self-care is important. You cannot care for others if you do not take care of yourself. Another reason self-care is important is to enable you to be effective as a teacher or parent or friend to the youth in your life. If you are tired, either emotionally or physically, you cannot do your job well. Finally, and possibly most important, self-care helps you model good balance and healthy boundaries.

Our culture glorifies being busy. Often, adult allies are so busy trying to keep up with the constant pressures, they don't pay attention until they are burned out. For their own happiness and the success of youth, it is important to start paying attention and taking charge.

Here is a step-by-step self-inquiry for taking care of yourself that you might even want to share with youth in your life.

1

What saps the enjoyment out of your day?

Examples include:

Negative colleagues, commitments you are not passionate about, obligations to "be a good parent, friend, coworker," draining meetings, being pulled in a million directions, unexpected interruptions, keeping up with personal and professional initiatives, the same thing every day, neglecting basic needs (sleep, food, exercise, rest, stress reduction techniques, etc.).

What are ways you could increase your energy? (Hobbies, nature walks, friends, family, adventure, exercise, meditation, stress reducing activities, gardening, painting, listening to music, etc.)

This week's goals:

•			
•			

Next month's goals:





2

What gives you pleasure and makes you happy during the week?

These are the things that sustain your passion, energy and happiness.

Examples include:

People you spend time with, healthy foods, proper sleep, volunteering, community work, activities you are doing just for you (hobbies, clubs, social events, exercise), passions you're pursuing (long-term skills and lifestyle goals), simple pleasures (reading a good book, meditating, art, spiritual pursuits), personal priorities you're honouring, interacting with people who build you up.

What are ways you could decrease activities that are depleting your energy? (Reducing commitments, saying no, being aware of conversations to walk away from, letting go of something you have been holding onto, etc.)

This week's	s goals:			
.				
.				
>				
Next mont				
				
				
•				

3

Now make your own list

What have you done this week that was pleasant, enjoyable or rejuvenating?

What have you done this week that was unpleasant, stressful or draining?

Were you spending more time sapping your energy or replenishing it?

You deserve to be happy no matter what, and you're a better person if you are happy. As your stress increases so does your need for self-care. Consider incorporating some of these practices into your self-care routine while decreasing those that sap your energy and raise stress:

- Create some boundaries
- You have the right to say no.

- You have the right to change your mind.
- You have a right to make a choice that's best for you.





Resources for teachers

Creating a safe classroom

Research suggests that providing youth with opportunities to engage in meaningful academic and social activities promotes resilience, whether at school or in another group setting. Creating social learning activities that reflect youth's strengths, interests, and gifts can increase their motivation to actively participate and interact with others. Welcoming, positive, and accepting environments allow youth from diverse experiences and backgrounds to feel safe, understood, and affirmed (JCSH, 2016). One way to create a safe environment is to create ground rules, or "norms."

Establishing ground rules or "norms"

It is important to take a collaborative approach when setting your classroom or group ground rules or norms. Bring the group together to set these norms so that everyone feels included and safe. It is important that the youth are involved in this process to keep them accountable. You may want to display these ground rules.

Examples of respectful group norms may include:

- ▶ What is said in the group remains confidential and private.
- Listen with the intention of understanding the other person.
- ▶ Be honest and trustworthy.
- ► Show respect and support.
- Practice being non-judgmental.

Classroom activities for celebrating difference "This is me" Poetry or Collage

By writing "This is Me" poetry or creating a "This is Me" collage, youth can make connections, identify similarities and/or differences, and open up to discussion.

- 1 As the adult leader, consider sharing a personal written "This is Me" poem or presenting a "This is Me" collage made of personal and meaningful pictures. Youth will be more comfortable sharing if you share about yourself.
- 2 You can ask the youth to hand in their poem, share it with the class, or share in small groups.

Here are some prompts for creating a "This is me" poem or collage:

- Ways that people might see you
- Name important relationships
- ► Identify personal strengths
- Describe where you live

Other options to include:

- Friends / pets
- Hobbies / interests
- ► Family traditions / customs
- Favourite books / shows / video games
- Awards and special memories





Interactive Group Activity – Words of Kindness

Put on some music to lift the mood (let the group decide). Each person receives a piece of paper taped on their back. Participants move around the room, writing one nice/positive thing about each classmate on their piece of paper. Participants are encouraged to hold onto this piece of paper as a reminder of all the good things others see in them.

Personal Activity – Words of Kindness

Everyone needs an envelope and a piece of paper for each member of the class or group. Ask everyone to write one positive message to each person, and then place the messages into that person's envelope, which will then be filled with warm fuzzies.

Resources to consult

jack.org

www.jack.org/jack/media/images/PDF/WSW-teacher-final-print.pdf?ext=.pdf

Teen Mental Health

https://mhlcurriculum.org/school-mental-health-literacy/mental-health-high-school-curriculum-guide/about-the-guide

School Mental Health

www.smh-assist.ca

Kelty Mental Health

www.keltymentalhealth.ca/mental-health-resources-use-classroom

https://keltymentalhealth.ca/sites/default/files/resources/Adolescent%20Toolkit%20Provincial.pdf www.keltymentalhealth.ca/sites/default/files/documents/toolkit for families - changing unhealthy thoughts.pdf

Kids Help Phone

https://kidshelpphone.ca/resources-around-me

2SLGBTQ+ Focused

LGBTQ Crisis Line: 1-800-OUT IS OKAY (688-4765)

Skipping Stone: www.skippingstone.ca

Indigenous Focused

We Matter: wemattercampaign.org

Teaching Tolerance

Here are two resources about teaching diversity to provide guidance and resources to prepare yourself for a discussion with your class about race and racism:

https://www.learningforjustice.org/classroom-resources

www.learningforjustice.org/sites/default/files/general/Difficult Conversations Self Assessment.pdf







These terms have been included as a *reference only*. They are here for you to use as a tool if they come up in conversation.

The terms in this glossary have been adapted from the following resources:

- ► mentalhealthliteracy.org
- www.cmha.ca
- www.camh.ca
- www.suicideinfo.ca
- ► <u>www.kidshelpphone.ca</u>

2SLGBTQ+

An acronym that stands for Two-Spirit, Lesbian, Gay, Bisexual, Transgender, Queer or Questioning and additional sexual orientations and gender identities.

Adult ally

Someone who stands up for or reaches out to youth. An adult ally can also be someone who joins with others to support their strategy for change.

Anxiety

The body's natural response to stress. A feeling of worry or uneasiness. Anxiety can be a helpful feeling when it motivates us or warns us of danger. An anxiety disorder, on the other hand, causes unexpected or unhelpful anxiety that seriously impacts our lives, including how we think, feel and act. There are different types of anxiety disorders.

Assertiveness

The ability to stand up for yourself or others in a positive and calm way.

Behaviour

The way a person acts.

Bipolar Disorder

A mental illness that affects mood. People may experience episodes of depression and episodes of mania. Mania is an unusually high mood for the person. They may feel like their thoughts are racing and may feel hyperactive, unrealistically confident, happy or very powerful. People usually experience periods of wellness between episodes of depression or mania.





Brain

The master control of you and your body. Your mind is what your brain does. The brain is made up many different parts that are all connected with each other.

Cognition

The mental processes associated with thinking, learning, planning, memory etc.

Cognitive Behavioral Therapy (CBT)

A type of counselling that teaches you how your thoughts, feelings, and behaviors work together. It also teaches important skills like solving problems, managing stress, realistic thinking, and relaxation.

Compulsions

Repetitive behaviours used to suppress (push out of thought) obsessive thoughts or to follow strong urges. Some types of compulsions include counting, checking, tapping, etc. While mild and occasional compulsions are common, severe and persistent compulsions can be part of Obsessive-Compulsive Disorder.

Depressant

Any substance (medication or drug) that slows down a person's thinking and/or physical functioning. Examples include some pain killers and alcohol.

Depression

A term used to describe a state of low mood or a mental illness. This can be confusing because people may often feel depressed but will not have the mental illness called depression. People with depression could be experiencing either Major Depressive Disorder or Dysthymic Disorder. The most common type of depression as a mental illness is a Major Depressive Disorder (MDD). A person with MDD feels very low/sad/depressed or irritable and also experiences lack of interest, less pleasure, hopelessness, fatigue, sleep problems, loss of appetite, suicidal thoughts. MDD has a negative impact on a person's life, home, family, school/work, friends, etc. Depression can also be part of Bipolar Disorder (see above).

Distress

Great mental and/or physical suffering, pain, and/or anxiety.

Eating disorders

For some, poor body image is a sign of a serious problem. An eating disorder is a way to cope with difficult problems or regain a sense of control. There are three main types of eating disorders: anorexia nervosa, bulimia nervosa, and binge-eating disorder.

Feelings

An emotional state or reaction (anger, happiness, satisfaction).

Generalized Anxiety Disorder (GAD)

A mental illness that is characterized by excessive anxiety and worry about numerous possible events (not any single, specific event) that leads to problems with daily functioning. People with GAD may worry all the time and experience many physical symptoms because of the worry (headaches, stomach aches, sore muscles, etc.) GAD can be treated effectively with psychological therapies or medications.

Grief

Normal emotional suffering experienced by a person from the loss of a loved one (e.g. when a family member dies). It is different from a depressive disorder. Grief is not a mental disorder.





Hallucination

A disturbance of how your brain perceives the world. A person with hallucinations experiences senses that aren't real (i.e. sound, sight, smell, taste, or touch).

Health

A state of physical, mental, social, and spiritual well-being and not just the absence of disease or infirmity. It includes mental health.

Health care professionals

The trained professionals who help with the care of people who are sick or who help people and communities stay well. Examples include doctors, nurses, psychiatrists, psychologists, occupational therapists, social workers, etc.

Hormones

Chemicals formed in one part of the body and carried to another part or organ where they have an impact on how that part functions. They are important in growth, development, mood, and metabolism (food up-take and breakdown). For example, serotonin is a hormone in the brain that affects mood; growth hormones come from the pituitary gland to many parts of the body and affects growth; testosterone affects sexual functioning, etc.

Mental health

A state of well-being that involves our emotions, our thoughts and feelings, our ability to solve problems and overcome difficulties, our social connections, and our understanding of the world around us.

Mental health crisis

A mental health emergency that is or can be life threatening. It can be characterized by the intent to do harm to oneself or someone else.

Mental health issue

A broad term used to describe mental distress, mental suffering or mental illness.

Mental Health Nurse

A registered nurse who specializes in the maintenance of mental health and the treatment of mental illnesses. This type of nurse usually works directly with people in a clinical setting, such as in a hospital or community clinic. Mental health nurses have many skills used in the diagnosis and treatment of people with mental illnesses.

Mental health promotion

Activities that strengthen the mental health and psychological well-being of people or try to reduce risk for the development of various mental health or social problems.

Mental illnesses

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. There are many types of mental illnesses that affect people in different ways, causing different symptoms and challenges, but with the right supports, a person can get on a path to recovery and wellness.

Mindfulness

A way of being and a skill developed by deciding to slow down and take time to pay attention and be curious about things that we're experiencing and things that we see around us. Most people new to mindfulness first work on three of its main parts: attention, curiosity and acceptance.





Mood

The ongoing inner emotional feeling experienced by a person.

Mood disorders

A group of mental disorders related to problems in how the brain controls emotions. Those with a mood disorder experience an abnormal mood change.

Neurodevelopment

How the brain grows and changes over time.

Neurotransmitters

Chemicals used to communicate messages that are being sent from one brain cell to another in the spaces between those cells. When the production, release, or uptake of any of these chemicals is impaired, the brain may show problems in how it is working. Some examples of neurotransmitters are: dopamine, serotonin, noradrenalin, etc.

Obsessions

Repetitive, persistent, unwanted thoughts that the person cannot stop and which cause significant distress and impair the person's ability to function. Mild and occasional obsessive thoughts are normal, but when they become severe and persistent they can be part of Obsessive-Compulsive Disorder.

Panic

A sudden sensation of fear and overwhelming feelings of anxiety.

Panic attack

A sudden experience of intense fear or psychological and physical discomfort that develops for no apparent reason and that includes physical symptoms such as dizziness, trembling, sweating, difficulty breathing or increased heart rate. If panic attacks are persistent and severe, the person can develop a Panic Disorder.

Post-traumatic Stress Disorder (PTSD)

This mental illness can happen to people who experience a scary, painful, or horrific event in which they felt scared or helpless and during which they were in danger of death or severe injury. People who develop PTSD may have flashback memories, or nightmares of the event and may avoid things that remind them of the event. For example, being involved in, or witnessing a car accident.

Problematic Substance Use

An unhealthy pattern of drug, alcohol or other chemical use that may lead to relationship, education, work, and mental and/or physical health problems.

Psychiatrist

A doctor who specializes in the practice of psychiatry (the treatment and prevention of mental illnesses). Psychiatrists are medical doctors who receive additional training in psychiatric medicine.

Psychologist

A Ph.D. level specialist in psychology licensed to practice professional psychology (e.g. clinical psychology), or qualified to teach psychology as a discipline (academic psychology), or whose scientific specialty is a subfield of psychology (research psychology).





Psychosis

A mental state in which a person has lost the ability to recognize reality. Symptoms can vary from person to person but may include changes in thinking patterns, delusions, hallucinations, changes in mood, or difficulty completing everyday tasks (like bathing or shopping). Mental disorders such as Schizophrenia can include psychosis as a symptom. Psychosis can be effectively treated with medications and other treatments.

Psychotherapist

A person who is professionally trained and/or skilled in the practice of a particular type of psychotherapy.

Psychotherapy

A treatment with a professional using psychological methods. It involves collaboration and conversation between a professional like a psychologist, psychiatrist, psychotherapist or counsellor and the person. Using strategies supported by research, you work together to address problems or concerns. The goal is to help you feel well and give you the skills to manage current and future problems in a healthy and helpful way.

Recovery

Gaining a sense of control and returning to meaningful activities and relationships. Everyone has their own recovery goals.

Relapse

Becoming sick again after being in remission or recovery.

Remission

A decrease in symptoms and return to a person's usual state of health after an active phase of illness.

Resilience

Ability to cope and bounce back from adversity.

Risk Factor

Anything that increases a person's chances of getting an illness (can be aspects of a person's health, genetics, lifestyle, or environment). Risk factors increase a person's chances of becoming ill – they do not cause the illness.

Schizophrenia

A mental disorder that can usually be diagnosed between the ages of 15 and 25. People who have Schizophrenia experience delusions and hallucinations (psychotic symptoms) and many other problems that can make day-to-day living difficult. Schizophrenia can be treated with medications and additional interventions that can improve the lives of people with the disorder.

Separation Anxiety Disorder

An Anxiety Disorder that can be diagnosed in children which makes it very hard for them to be away from their parent. People with Separation Anxiety Disorder can be helped with psychological treatments.

Serotonin

A neurotransmitter that helps in regulating many different brain functions, including mood, anxiety and thinking.





Social phobia (also known as Social Anxiety Disorder)

An anxiety disorder regarding the fear of having to be in social situations. A person with Social Anxiety Disorder may avoid situations that make them feel anxious. Examples include the fear of public speaking, the fear of going to a party because other people are "judging" them, and performing in front of other people. People with Social Anxiety Disorder can be treated effectively with psychotherapy or medication.

Social determinants of health

Economic and social factors that affect an individual's health, such as education, living conditions, family, peers, social groups, employment, income, and experiences of discrimination and trauma (Mittmann & Schrank, 2020). The World Health Organization (2008) defines social determinants of health as "the conditions in which people are born, grow, live, work, and age."

Social Worker

A professional who is trained to deal with social, emotional, and environmental problems that may be associated with an illness or disability. Services provided by social workers may include case management and/or counselling (connecting patients with programs that meet their needs).

Stigma

As related to mental illness, stigma refers to negative attitudes (prejudice) and negative behaviour (discrimination) toward people with a mental illness. It includes having fixed ideas and judgments (e.g. that they are not normal; that they cause their own problems; or they can simply get over their problems if they wanted to) and fearing and avoiding what we don't understand.

Stress

A reaction to a situation; a body's response to a real or perceived threat. Good stress can motivate us to focus on a task or solve a problem. Unhelpful stress may make people feel overwhelmed or feel like they can't fix the problem.

Stimulants

A group of medications that improve various aspects of brain function such as alertness, concentration, etc. They are often used to treat ADHD. *Note: stimulants can also be misused and used problematically; follow the instructions of a professional when taking any form of medication.

Suicidal crisis

A suicide attempt or an incident in which a person who is seriously distraught considers or plans to imminently attempt to take his or her own life.

Trauma

Any painful or damaging injury or event that harms a person's physical or mental health.

Treatment

Medical, psychological, or social management and care of a patient.

Withdrawal

A brain response to sudden stopping of use of medication or drug. Symptoms of withdrawal can include nausea, chills, cramps, diarrhea, hallucinations, etc. Withdrawal often occurs in addiction/substance dependence but most people who experience it are not addicted. Another definition is the self-directed avoidance of social contact.







Canadian Mental Health Association

https://cmha.ca/find-info/mental-health

Centre for Addiction and Mental Health

http://www.camh.ca/-/media/files/guides-and-publications/stigma.pdf

Centre for Suicide Prevention

www.suicideinfo.ca/wp-content/uploads/2014/10/Teachers teen suicide.pdf www.suicideinfo.ca/wp-content/uploads/2018/09/iE24-Caring-Conversation web.pdf www.suicideinfo.ca/wp-content/uploads/2019/09/SafetyPlan Toolkit 0919 web.pdf

Foundry

www.foundrybc.ca/supporting-others/supporting-family-member
www.foundrybc.ca/supporting-others/supporting-family-member/young-people-making-sense-mental-health
https://foundrybc.ca/wp-content/uploads/2018/08/mindfulness infographic v1.pdf
www.foundrybc.ca/supporting-others/supporting-family-member/talking-mental-health

jack.org

www.jack.org/jack/media/images/PDF/WSW-teacher-final-print.pdf?ext=.pdf

Kelty Mental Health Resource Centre

www.keltymentalhealth.ca/mental-health-resources-use-classroom

Kids Help Phone

https://kidshelpphone.ca/resources-around-me

Natural Supports

https://naturalsupportssimulation.com/resources

School Mental Health

www.smh-assist.ca/emhc

teenmentalhealth.org

 $\frac{https://mhlcurriculum.org/school-mental-health-literacy/mental-health-high-school-curriculum-guide/\\ about-the-guide$







Blakemore, S. J. (2019). Adolescence and mental health. The Lancet, 393(10185), 2030-2031.

Glenn CR, Kleiman EM, Kellerman J, et al. Annual research review: a meta-analytic review of worldwide suicide rates in adolescents. J Child Psychol Psychiatry. 2020;61(3):294–308

Hawton K, Saunders KE, O'Connor RC. Self-harm and suicide in adolescents. Lancet. 2012;379(9834):2373-2382

Johns, M. M., Lowry, R., Andrzejewski, J., Barrios, L., C., Demissie, Z., McManus, T., Rasberry, C. N., Robin, L., Underwood, J. M. (2019). Transgender identity and experiences of violence victimization, substance use, suicide risk, and sexual risk behaviors among high school students—19 states and large urban school districts, 2017pdf icon. MMWR, 68(3), 67-71.

Mittmann, G., & Schrank, B. (2020). Determinants of health and well-being in adolescents. Wiener klinische Wochenschrift, 1-7.

Orri, M., Scardera, S., Perret, L. C., Bolanis, D., Temcheff, C., Séguin, J. R., ... & Geoffroy, M. C. (2020). Mental Health Problems and Risk of Suicidal Ideation and Attempts in Adolescents. Pediatrics.

Public Health Agency of Canda (2020). Social determinants and inequalities in health for Black Canadians. Government of Canada.

Waldron, I. (2009). The impact of inequality on health in Canada: A multi-dimensional framework. Diversity in Health Care, 7, 261-270.

Wiens, K., Bhattarai, A., Pedram, P., Dores, A., Williams, J., Bulloch, A., & Patten, S. (2020). A growing need for youth mental health services in Can-ada: examining trends in youth mental health from 2011 to 2018. Epidemiology and Psychiatric Sciences, 29.

World Health Organization. Closing the gap in a generation: health equity through action on the social determinants of health. Final report of the Commission on Social Determinants of Healt, 2008.



Acknowledgements

The Canadian Mental Health Association would like to thank the RBC Foundation for their generous support of this guide.



We would also like to acknowledge the following key contributors:













Founded in 1918, the Canadian Mental Health Association (CMHA) is the most established, most extensive community mental health organization in Canada. Through a presence in more than 330 communities across every province and one territory, CMHA provides advocacy and resources that help to prevent mental health problems and illnesses, support recovery and resilience, and enable all Canadians to flourish and thrive. Visit the CMHA website at cmha.ca.

If you have questions about mental health resources in your area, please contact your local CMHA.

