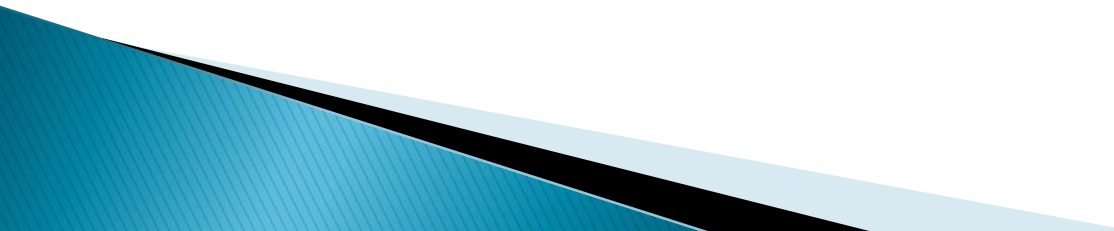


# Student Mental Health Concerns and How to Respond

Stephanie Will, LCPC  
Mental Health Services Program Manager

# Objectives

- ▶ Identify term “Mental Health Disorder” and dispel common myths about mental health
  - ▶ Review the Four R’s
  - ▶ Develop increased awareness of MC resources for students with mental health concerns
- 

# What is a Mental Health Disorder?

- ▶ National Alliance on Mental Illness (NAMI):
  - “A mental illness is a condition that impacts a person's thinking, feeling or mood and may affect his or her ability to relate to others and function on a daily basis. Each person will have different experiences, even people with the same diagnosis.” <https://www.nami.org/Learn-More/Mental-Health-Conditions>
- ▶ Key is decreased ability to function in work, school, and personal relationships
- ▶ Treatable

# What isn't a Mental Health Disorder

- ▶ Everyone feels a range of emotions at some point in their lives
  - Feeling depressed after a breakup
  - Getting anxious about an exam
  - Many people even have passing suicidal thoughts
- ▶ Some things are developmentally appropriate at certain ages
  - Teens are highly emotional because of puberty
  - A 5-year-old has a short attention-span

# Common Myths About Mental Health Disorders and Treatment

**Myth: Mental health problems don't affect me.**

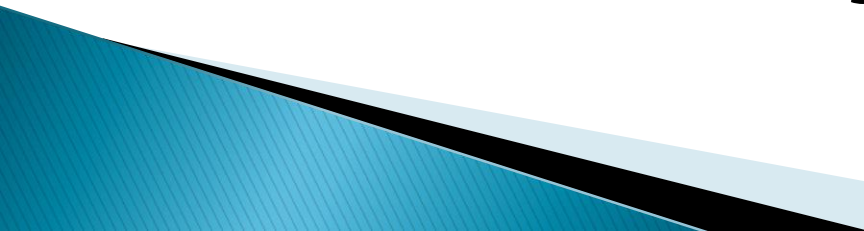
**Fact: Mental health problems are actually very common. In 2011, about:**

- One in five American adults experienced a mental health issue
- One in 10 young people experienced a period of major depression
- One in 20 Americans lived with a serious mental illness, such as schizophrenia, bipolar disorder, or major depression
- ▶ Suicide is the 10th leading cause of death in the United States. It accounts for the loss of more than 38,000 American lives each year, more than double the number of lives lost to homicide.
- ▶ Wisconsin Hope Lab study showed half of 4,000 community college students studied are experiencing mental health disorder and less than half are receiving treatment services

# Common Myths Continued

**Myth: People with mental health problems are violent and unpredictable.**

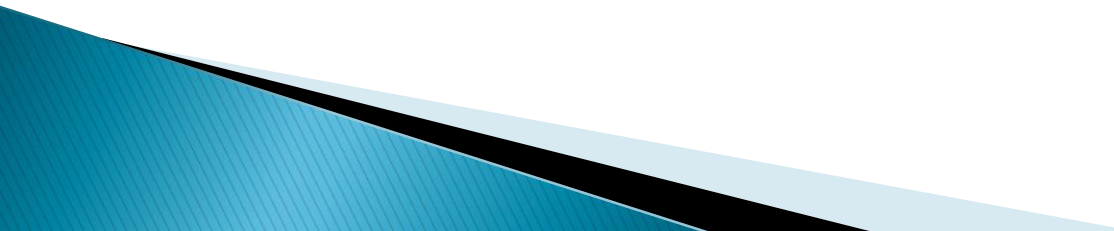
**Fact: The vast majority of people with mental health problems are no more likely to be violent than anyone else. Most people with mental illness are not violent and only 3%–5% of violent acts can be attributed to individuals living with a serious mental illness. In fact, people with severe mental illnesses are over 10 times more likely to be victims of violent crime than the general population.**



# Common Myths Continued

**Myth:** There is no hope for people with mental health problems. Once a friend or family member develops mental health problems, he or she will never recover.

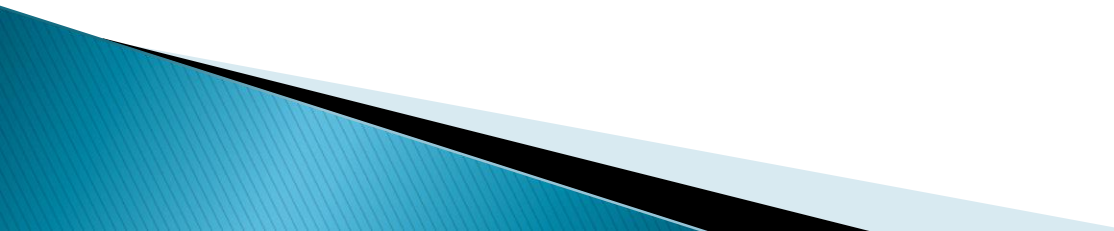
**Fact:** Studies show that people with mental health problems get better and many recover completely. Recovery refers to the process in which people are able to live, work, learn, and participate fully in their communities. There are more treatments, services, and community support systems than ever before, and they work.



# Common Myths Continued

**Myth:** I can't do anything for a person with a mental health problem.

**Fact:** Friends and loved ones can make a big difference. Only 38% of adults with diagnosable mental health problems and less than 20% of children and adolescents receive needed treatment. Friends and family can be important influences to help someone get the treatment and services they need by:

- Reaching out and letting them know you are available to help
  - Helping them access mental health services
  - Learning and sharing the facts about mental health, especially if you hear something that isn't true
  - Treating them with respect, just as you would anyone else
  - Refusing to define them by their diagnosis or using labels such as "crazy"
- 



# The Four R's

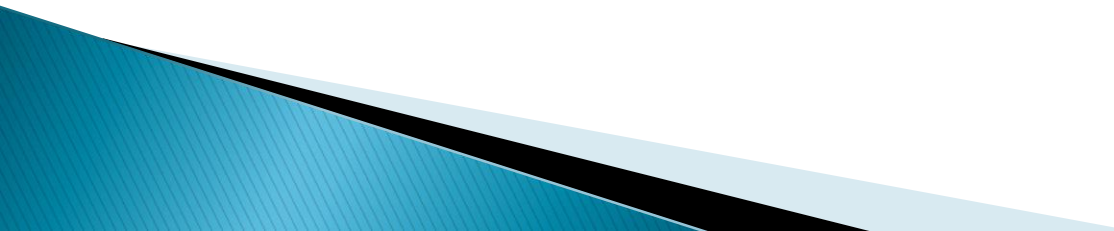
- ▶ Recognize
- ▶ Respond
- ▶ Refer
- ▶ Report

# RECOGNIZE

- ▶ Signs and Symptoms of Mental Disorders
  - Eating or sleeping too much or too little
  - Pulling away from people and usual activities
  - Having low or no energy
  - Feeling numb or like nothing matters
  - Having unexplained aches and pains
  - Feeling helpless or hopeless
  - Smoking, drinking, or using drugs more than usual
  - Feeling unusually confused, forgetful, on edge, angry, upset, worried, or scared

# RECOGNIZE

## ▶ More Signs and Symptoms

- Yelling or fighting with family and friends
  - Experiencing severe mood swings that cause problems in relationships
  - Having persistent thoughts and memories they can't get out of their head
  - Hearing voices or believing things that are not true
  - Thinking of harming self or others
  - Inability to perform daily tasks like taking care of children or getting to work or school
- 

# RECOGNIZE

- ▶ Keys to Identifying Someone Who May Need Help
  - Look for patterns and clusters of behaviors
  - Significant changes from typical behavior
  - Interference with ability to carry out daily activities

# RECOGNIZE

- ▶ What Can Effect Mental Health Disorders?
  - Stress
    - School, family, work, medical/health issues, money
  - Trauma
    - Domestic violence, sexual assault, military deployment, victim of a crime
  - Healthy practices
    - Good sleep, eating well, physical fitness, hobbies
  - Medications
    - Taking regularly, side effects
  - Therapy/Emotional Support
    - Therapist, family, friends, coworkers

# RESPOND

- ▶ When talking to the student, DO:
  - Remain calm and non-confrontational
  - Keep voice even and at an appropriate volume
  - Appear confident
  - Listen non-judgmentally
  - Stay positive and strengths-based
  - Empathize– this doesn't mean you condone their behaviors
  - Express concern
  - Give the student options when possible and involve them in the decision making process
  - Let the student know what you are doing before you do it, if it is safe

# RESPOND

## ▶ DON'T

- Leave the student alone if they are a threat to themselves
- Use sarcasm
- Try to talk them out of their feelings or delusions
- Threaten disciplinary or police action– although this may come to pass
- Blame, criticize or judge the students
- Minimize a difficult situation
- Restrict movement– to a point, don't let a suicidal student wander off alone
- Further agitate the student– avoid triggers such as touching
- Promise confidentiality
- Put yourself in danger– maintain a safe distance and don't turn your back if the student is threatening toward you or others

# REFER

- ▶ Engage support system
  - Friends, family, and others
- ▶ Encourage professional help
  - Therapist, psychiatrist, spiritual leader
- ▶ Hotlines
  - National Suicide Prevention Lifeline (800) 273-8255
  - Montgomery County Crisis Line (240) 777-4000
  - Imalive.org
  - Crisis Text Line: Text “Start” to 741741
- ▶ Campus Resources
  - Germantown Counseling Office (240) 567-7734
  - Rockville Counseling Office (240) 567-5063 or 4104
  - TP/SS Counseling Office (240) 567-1480
- ▶ **IF STUDENT IS IN LIFE-THREATENING CRISIS, CALL 911 and/or CAMPUS SECURITY**



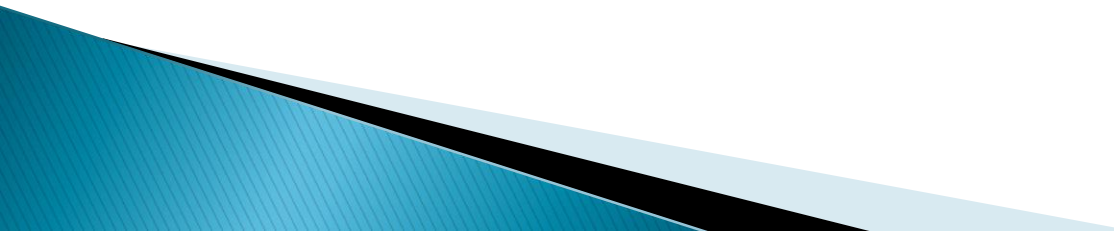
# REPORT

- ▶ If a student has demonstrated a reason to be concerned about their mental health, incident information should be submitted in a timely manner to the B.I.T. Chair and the Dean of Student Affairs via a B.I.T. Incident Report.
  - Incident Report icons can be found on any MC desktop or MyMC
- ▶ If that option is not available call or email the Dean of Student Affairs

# REPORT

- ▶ Once a referral is submitted:
  - B.I.T. Chair and/or Dean of Student Affairs determine whether to proceed as a B.I.T. case
  - A secured and confidential B.I.T. case is opened
  - Background investigation begins and the team is convened
    - Initial reporter and student may be contacted during this process
  - Threat assessment and intervention plan are made using appropriate assessment tools
  - Intervention plan is implemented
  - Follow-up

# Things to Remember

- ▶ You are not alone
  - ▶ Help is out there
  - ▶ Recovery is possible!
- 

# Resources

- ▶ Myth v. Fact taken from:  
<http://www.mentalhealth.gov/basics/myths-facts/>
- ▶ Eisenberg, D., Goldrick-Rab, S., Ketchen Lipson, S., & Broton, K. (2016, March). Too Distressed to Learn? Mental Health Among Community College Students. Retrieved July 21, 2016, from  
[http://www.acct.org/files/Publications/2016/WisconsinHOPE Lab – Too Distressed To Learn \(Final\).pdf](http://www.acct.org/files/Publications/2016/WisconsinHOPELab-TooDistressedToLearn(Final).pdf)
- ▶ For more information about specific disorders, warning signs, how to get help and support, and how to get involved with mental health awareness check out NAMI:
  - <https://www.nami.org/>
- ▶ Kognito At-Risk Training– how to have the conversation
  - <https://md.kognito.com/>

# Upcoming

- ▶ **Mental Health First Aid**
  - Wednesday, August 22, 2018
  - TP/SS Campus
- ▶ **National Recovery Month Speaker**
  - Thursday, September 13, 2018
  - RV Campus 11:00am–1:00pm
- ▶ **Mindful Mondays**
  - Every Monday beginning September 10, 2018
  - RV Campus SC 4591 1:30am–12:30pm