

# **A.A.A. MENTAL HEALTH**

**AWARENESS, ADVOCACY, ASSISTANCE**

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**JOSH BROWN M.S., LMHC**

**ASSISTANT DIRECTOR**

**COLLEGE COUNSELING CENTER**

# OVERVIEW

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- Understand the foundational neuroscience of positive mental health
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- Identify signs that indicate people need support
- How to begin these conversations
- Offer coping skills and resources



# WHAT IS “MENTAL HEALTH?”

**Mental health** is our cognitive, emotional, psychological and social well-being

- Best possible version of ourselves
- Just like our physical health it needs to be attended to





# MENTAL HEALTH



**Positive emotion-** Byproduct of moving towards goals that are meaningful and important

- ✓ Work
- ✓ Education
- ✓ Relationships
- ✓ Health
- ✓ Extracurricular

# MENTAL HEALTH CONTINUUM



Positive Mental  
Health



Compromised  
Mental Health



Mental Illness



# DEPRESSION

- Work
- Education
- Relationships
- Health





# SOCIO-CULTURAL IMPLICATIONS

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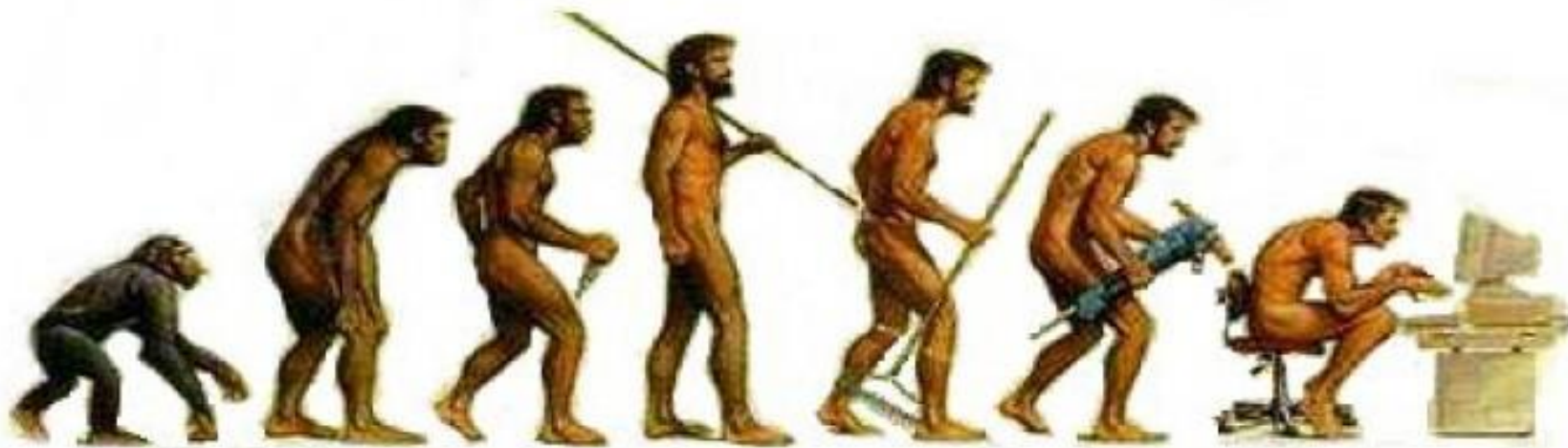
- **The greater the barriers to your goals = greater potential for challenges to your mental health and of developing a mental disorder**
- ✓ Bias & Discrimination (gender orientation, sexual orientation, race, religion, culture, physical ability, etc.)
- ✓ Food, financial, & housing insecurity
- ✓ Low/no access to healthcare
- ✓ Compromised education



# MENTAL ILLNESS- A DIAGNOSABLE DISORDER WHICH:

- Affects a person's thinking, feelings, behavior or mood
- Impacts an individual's day to day living:
  - ✓ Work
  - ✓ School
  - ✓ Relationships
  - ✓ Daily Functioning





**Wellness Builders**

## WELLNESS BUILDER

“LET FOOD BE THY MEDICINE, AND LET MEDICINE BE THY FOOD”  
- HIPPOCRATES



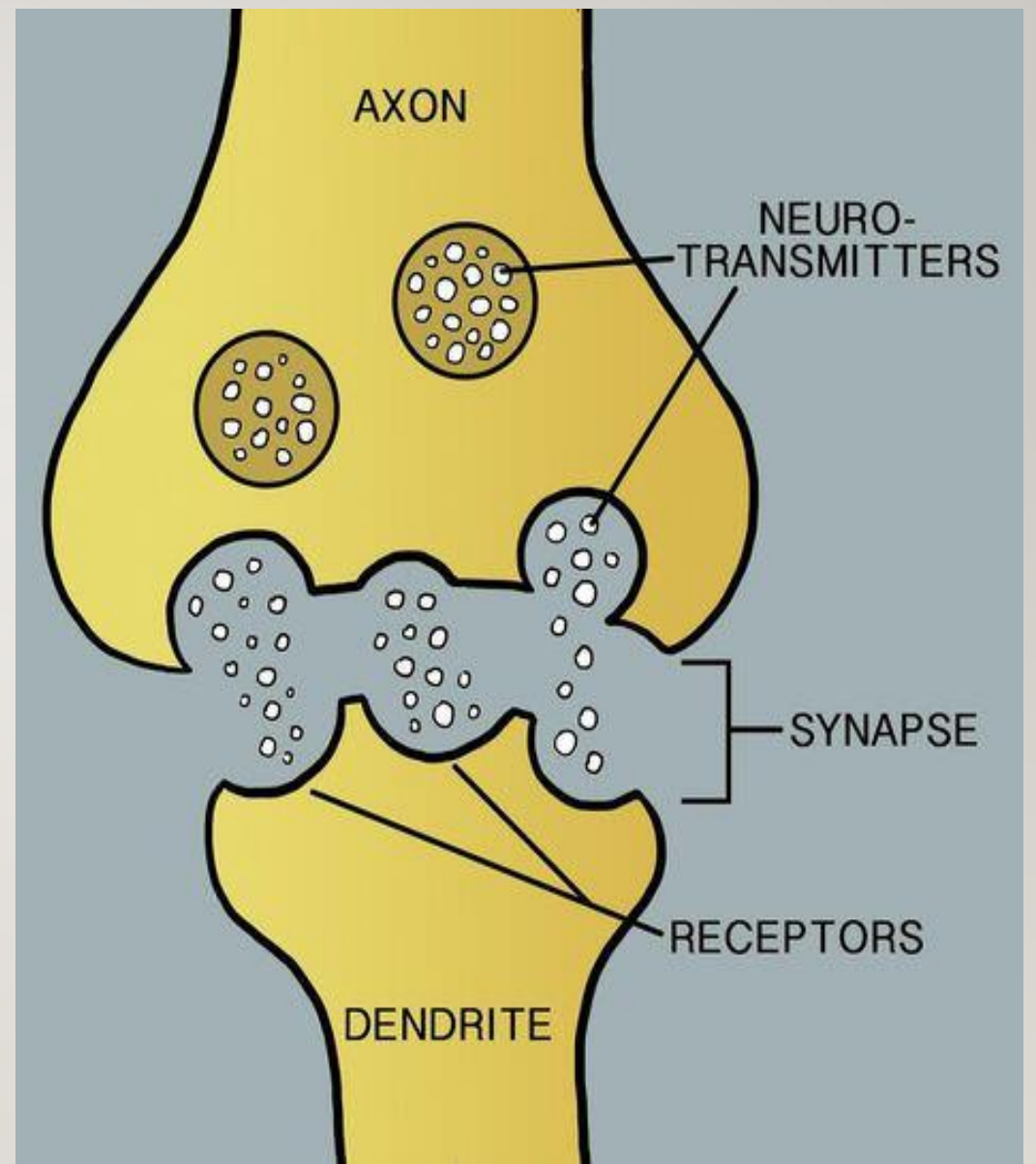
## Encourage Healthy Nutrition

- Neurotransmitters are associated with mood regulation, reward, motivation, sleep, movement, cognitive function, etc....
- 90% of neurotransmitters are produced in our stomach
- The nutrients essential to the synthesis and regulation of neurotransmitters are found in healthy diet
- Over **1000 toxic ingredients** banned in other developed nations allowed in US food supply. (Brazil, Canada, EU, and U.K.)



# WELLNESS BUILDER

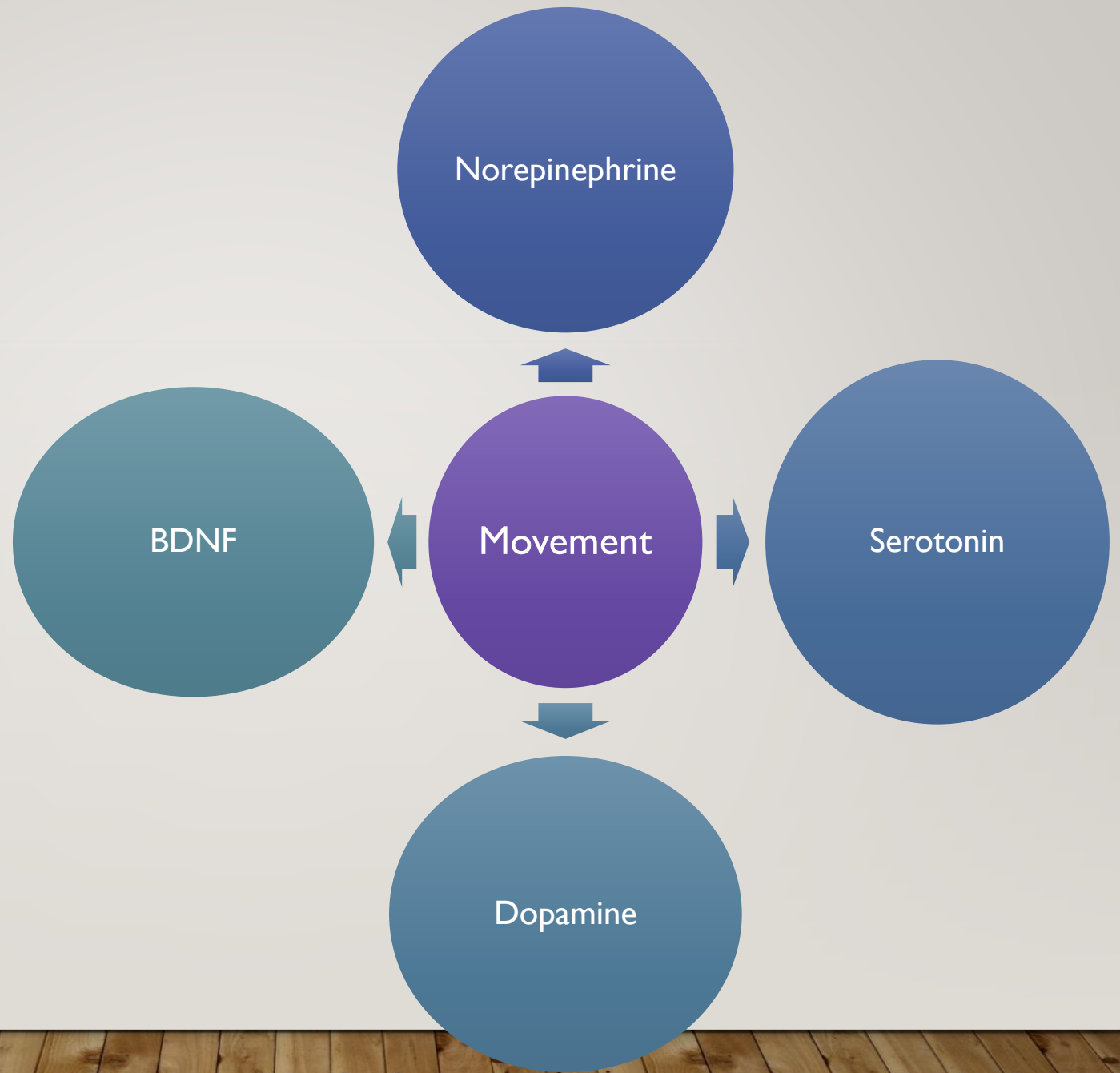
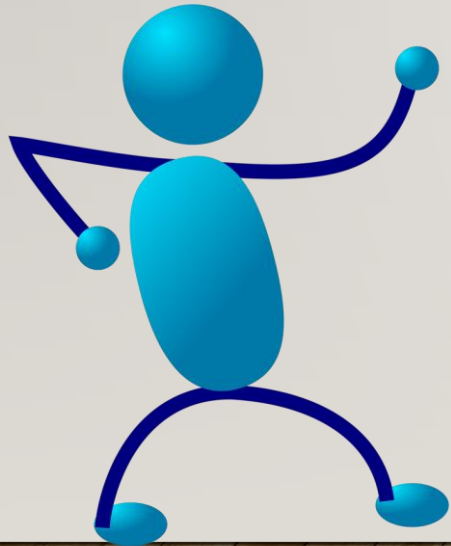
- **Encourage proper sleep hygiene**
- Waste proteins/toxins inhibit transmission of neurotransmitters
- Cerebral Spinal Fluid (CSF) “rinse cycle“





# WELLNESS BUILDER

- Encourage movement



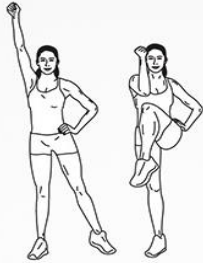
# EUREKA

DAREBEE WORKOUT © [darebee.com](https://darebee.com)

LEVEL I 3 sets LEVEL II 5 sets LEVEL III 7 sets REST up to 2 minutes



20 jumping jacks



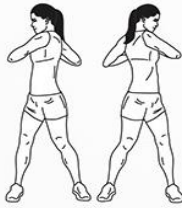
10 knee to elbows



20 jumping jacks



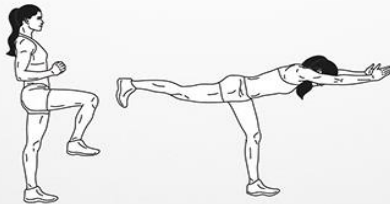
20 high knees



10 twists



20 high knees



10 single leg deadlifts

# DAREBEE.COM

- Free
- Small-space friendly
- No equipment
- 10-20 minutes
- Any ability

# WELLNESS BUILDER

- **Socialization**
- Undermines cognitive distortions present in many individuals
- Stimulates Oxytocin release
- Allows for happenstance- invites, activities, novel experiences





# WELLNESS BUILDER

## Cessation of Drugs/Alcohol

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Consequences of frequent cannabis use- > 3x/Month

- **Endocannabinoid System-** Multiple functions including emotional processing , a.k.a, “runner’s high“
- Chronic use reduces cannabinoid receptors therefore increase anxiety in people over time
- Endocannabinoid receptors removed in mice become increasingly anxious and lost will to live, some died.
- After four weeks of abstinence receptors regenerate to level of non-users.



*“The only way to have a friend is  
to be one”*

*-Ralph Waldo Emerson*



# ACTION PLAN FOR ASSISTANCE

- **B**- Be genuine with observations and concerns (“I” statements, specifics)
- **E**- Encourage sharing (what, when, severity)
- **A**- Assess for Safety
- **R**- Refer to appropriate resources/encourage coping skills





# B- BE GENUINE

- Verbalize how you're feeling about your observations
- Be specific with your concerns
- Use "I" statements to avoid blaming language
- Be empathic and validate
  - Be the person you wish had been there for you when you needed someone

# E- ENCOURAGE SHARING

- Express appreciation for their courage to share
- Acknowledge the difficulty in sharing
- Ask what the problem(s) are
- When did this/these begin
- How is it affecting your life? (Work, Education, Relationships, Health, Extracurriculars.)

# A- ASSESS FOR SAFETY

- Suicide is the 2<sup>nd</sup> leading cause of death for college students
- Seventh leading cause of death for males, 14<sup>th</sup> for females in general population
- 10.1 suicides per 100,000 residents in St. Lawrence County    NYC -9.3

(AFSP)/(SLC Community Health Improvement Plan 2019)



# A- ASSESS FOR SAFETY

- **Risk Factors**

- ✓ Gender- M/F ( Transgender individuals twice as likely to contemplate suicide)
- ✓ Race/Ethnicity<sub>(per 100,000)</sub> -(Native American 19.5%), (Caucasian 15.8%), (Asian/Pacific Islander 6.9%), (Hispanic 5.8%), (Black/African American 5.6%)
- ✓ Age
- ✓ Sexual orientation- (LGB three times more likely to contemplate suicide than heterosexual counterparts)

(AFSP-2017)

# A- ASSESS FOR SAFETY

- **Warning Signs-**
- Talking about death, being gone, or suicide, being hopeless
- Significant life changes or losses
- Self medicating with drugs/alcohol
- External stressors such as money or academic challenges

# A- ASSESS FOR SAFETY

- **How to ask someone about suicide**
  - ✓ If in doubt, don't wait; directly ask about suicide in a private setting.
  - ✓ “ I'm worried about you, are you having any thoughts of suicide?”
  - ✓ If danger is imminent contact 911



# R- REFER TO APPROPRIATE RESOURCES AND COPING SKILLS

- **Start with the familiar:**
  - ✓ Counselor, social worker, psychologist
  - ✓ SHS provider
  - ✓ Current PCP
- **If there are no existing:**
  - ✓ Counseling Center
  - ✓ Reachout of St. Lawrence County
  - ✓ SUNY Crisis Text Line: Got5U to 741-741
  - ✓ 988- Suicide Crisis Hotline
  - ✓ Canton Potsdam Hospital (Behavioral Health)
  - ✓ Relevant program office

**END DAY ONE**

# ANXIETY

“WE OFTEN SUFFER MORE FROM IMAGINATION THAN REALITY”

–SENECA

- Anxiety Disorder- Symptoms are overwhelming and constant
- The symptoms prevent us from doing everyday activities
- Persistent, excessive fear or worry in situations that are not threatening





# ANXIETY: SIGNS AND SYMPTOMS

## Physical

- Increased heart rate
- Increased respiration rate/difficulty breathing
- Dizziness, sweating
- Upset stomach
- Dilated pupils
- Tightness of muscles
- Shakiness

# ANXIETY: SIGNS AND SYMPTOMS

## Behavioral

- Avoidance of triggers of symptoms

## Psychological

- Catastrophic thinking
- Mind reading/Fortune telling
- Difficulty concentrating
- Irritability
- Fatigue, sleep disturbance

# ACTION PLAN FOR ASSISTANCE- ANXIETY

- **B-** Be genuine with observations and concerns ( “I” statements, specific, )

Note concerns about:

- ✓ Attendance and/or missed appointments
- ✓ Avoidance of face-to-face discussion and reliance on email/ social media contact
- ✓ Focus
- ✓ Shakiness
- ✓ Complaints about stomach/chest pain
- ✓ Decreased performance with obligations





# ACTION PLAN FOR ASSISTANCE- ANXIETY

**E-** Encourage sharing (what, when, severity)

Source of fears/worries, duration of struggle, how it has affected their five domains

**A-** Assess for Safety

Ask about thoughts of suicide

**R-** Refer to appropriate resources/encourage coping skills

- Deep Breathing exercises, cold water splashed on face, reduce unknowns if possible
- Sleeping, eating, **moving**, socializing, abstaining from drugs/alcohol (including caffeine)
- College Counseling Center, Student Health Services, **relevant program office**, or current provider

# SYMPTOMS OF A PANIC ATTACK

- ✓ Palpitations, pounding heart, or rapid heart rate
- ✓ Sweating
- ✓ Trembling and shaking
- ✓ Shortness of breath, sensations of choking or smothering
- ✓ Chest pain or discomfort
- ✓ Abdominal distress or nausea
- ✓ Dizziness, light-headedness, feeling faint, unsteady
- ✓ Feelings of being detached from oneself (unreality)
- ✓ Fear of losing control or “going crazy”
- ✓ Fear of dying
- ✓ Numbness or tingling
- ✓ Chills or hot flashes

# ACTION PLAN FOR ASSISTANCE- PANIC ATTACK

**B-** Be genuine with observations and concerns (“I” statements, specific, )

Let the person know you are concerned and want to help

**E-** Encourage sharing (what, when, severity)

**Inquire if they know what is happening:**

If they don't know it is a panic attack

- ✓ Check for a medical alert bracelet and follow the instructions
- ✓ Seek medical assistance

If the person believes it is a panic attack:

- ✓ Reassure the person that it is a panic attack
- ✓ Ask the person if you can help





# ACTION PLAN FOR ASSISTANCE- PANIC ATTACK

Remain calm

Speak clearly and slowly

Encourage them to sit down

Remind the person that while a panic attack is frightening, it is not life threatening

Reassure the person that you are going to help

Remind them the symptoms will pass

**R- Refer to appropriate resources/encourage coping skills**

Sleeping, eating, **moving**, socializing, abstaining from drugs and alcohol (including caffeine)

-College Counseling Center, Student Health Services, **relevant program office**, or current provider

\* No SI



# POST-TRAUMATIC STRESS DISORDER

- PTSD involves exposure to one or more event(s) that involved death or threatened death, actual or threatened serious injury, or actual/threatened sexual violation (self or relative/friend).



# POST- TRAUMATIC STRESS DISORDER

## I. Persistent Re-experiencing

- recurrent nightmares or flashbacks,
- recurrent images or memories of the event—these images or memories often occur without actively thinking about the event,
- intense distress of reminders of the trauma and/or
- physical reactions to triggers that symbolize or resemble the event.



# POST- TRAUMATIC STRESS DISORDER

## 2. Increased Arousal

- difficulty falling asleep or staying asleep,
- outbursts of anger/irritability,
- difficulty concentrating,
- increased vigilance that may be maladaptive exaggerated startle response

# POST- TRAUMATIC STRESS DISORDER

## 3.Avoidant/Numbness Responses

- efforts to avoid feelings or triggers associated with the trauma;
- avoidance of activities, places or people that remind the person of the trauma;
- markedly diminished interest in activities

# POST- TRAUMATIC STRESS DISORDER

## 4. Changes to Mood/Cognitions

- persistent negative beliefs about self, others, or the world
- inability to recall an important aspect of the trauma;
- distorted beliefs about the cause or consequences of the event
- feelings of detachment or estrangement from others;
- restricted range of feelings
- difficulty thinking about the long-term future



# ACTION PLAN FOR ASSISTANCE- PTSD

- **B-** Be genuine with observations and concerns ( “I” statements, specific, )

Hypervigilant behavior, avoidance, fearful, irritable, exhaustion

- **E-** Encourage sharing (what, when, severity)

Did a traumatic event occur? Are relationships suffering, are symptoms interfering with daily activities?

- **A-** Assess for Safety

Thoughts of suicide, homicide

- **R-** Refer to appropriate resources/encourage coping skills

- Refer to CCC/NPP

- Sleeping, eating, **moving**, socializing, abstaining from drugs/alcohol (including caffeine)



# DEPRESSION

**“THE ART OF LIVING IS MORE LIKE WRESTLING THAN DANCING”**

**–MARCUS AURELIUS**

- Major depressive disorder lasts for a minimum of two weeks and involves a period of clear-cut changes in:
  - Mood
  - Thought processes
  - Motivation



# TYPES OF MOOD DISORDERS

- Major depressive disorder
- Depression with seasonal pattern

## Depression: Signs and Symptoms

- Feelings of sadness, numbness, or hopelessness
- Angry outbursts, irritability or frustration, even over small matters
- Loss of interest or pleasure in most or all normal activities
- Sleep disturbances
- Tiredness and lack of energy
- Weight loss or gain
- Distorted thoughts about self, others, and the world (Cognitive Distortions)
- Trouble thinking or concentrating
- Frequent or recurrent thoughts of death, suicidal thoughts, suicide attempts or suicide



# RISK FACTORS FOR DEPRESSION

- Adverse life events
- Comorbid mental illness
- LGBTQ+- (2.5 times higher than hetero/gender conforming counterparts)
- BIPOC- Same frequency as Caucasians but persistent across lifespan
- Family genetics

# RISK FACTORS FOR DEPRESSION

- Medical conditions
- Side effects of medication, alcohol, other drugs
- Lack of sleep, nutrition, exercise
- Physical conditions

# ACTION PLAN FOR ASSISTANCE-DEPRESSION

- **B-** Be genuine with observations and concerns (“I” statements, specific,)

Withdrawal, sadness, pessimism, negative self-statements, fatigue

- **E-** Encourage sharing (what, when, severity)

What has occurred and when, barriers/problems they are facing, how is it affecting them, what is their hope like?

- **A-** Assess for Safety

Thoughts of suicide

- **R-** Refer to appropriate resources/encourage coping skills

- Sleeping, eating, moving (especially outside), socializing, abstaining from drugs/alcohol

-College Counseling Center, Student Health Services, **relevant program office**, or current provider



# DEPRESSION WITH SEASONAL PATTERN

- Shorter daylight hours and less sunlight exposure can trigger biochemical imbalance in the brain.
- Less sun exposure is linked with decreased serotonin production

Misconception Depression with SP occurs only in winter

## Interventions:

- ✓ Physical movement especially outside during daylight
- ✓ Improved nutrition (Vitamin D)
- ✓ Light therapy: Crane and Crumb Libraries- Free checkout for students





# RESOURCES

<https://www.potsdam.edu/studentlife/wellness/counseling-center/resources>

# Sleep Hygiene Tips

(Therapistaid.com)

- ✓ **Set a schedule.** Establish a regular sleep schedule every day of the week. Don't sleep in more than an hour, even on your days off.
- ✓ **Don't force yourself to sleep.** If you haven't fallen asleep after 20 minutes, get up and do something calming. Read a book, draw, or write in a journal. Avoid computer, TV, and phone screens, or anything else that's stimulating and could lead to becoming more awake.
- ✓ **Avoid caffeine, alcohol, and nicotine.** Consuming caffeine, alcohol, and nicotine can affect your ability to fall asleep and the quality of your sleep, even if they're used earlier in the day. Remember, caffeine can stay in your body for up to 12 hours, and even decaf coffee has some caffeine!
- ✓ **Avoid napping.** Napping during the day will make sleep more difficult at night. Naps that are over an hour long, or those that are later in the day, are especially harmful to sleep hygiene.
- ✓ **Use your bed only for sleep.** If your body learns to associate your bed with sleep, you'll start to feel tired as soon as you lie down. Using your phone, watching TV, or doing other waking activities in bed can have the opposite effect, causing you to become more alert.
- ✓ **Exercise and eat well.** A healthy diet and exercise can lead to better sleep. However, avoid strenuous exercise and big meals for 2 hours before going to bed.
- ✓ **Sleep in a comfortable environment.** It's important to sleep in an area that's adequately quiet, comfortable, and dark. Try using an eye mask, ear plugs, fans, or white noise if necessary.



# BELLY BREATHING

1. Sit or lie flat in a comfortable position.
2. Put one hand on your belly just below your ribs and the other hand on your chest.
3. Take a deep breath in through your nose, and let your belly push your hand out. Your chest should not move.
4. Breathe out through pursed lips as if you were whistling. Feel the hand on your belly go in and use it to push all the air out.
5. Do this breathing 3 to 10 times. Take your time with each breath.
6. Notice how you feel at the end of the exercise.

# COPING WITH A PANIC ATTACK

- Begin deep breathing exercises
- **Slowly look around and find...**
- 5 things you can see
- 4 things you can touch
- 3 things you can hear
- 2 things you can smell (or smells you like)
- 1 emotion you feel



# PLEASANT EVENTS

Meditating

Taking a warm bath

Reading a book

Watching TV

Playing a game

Call a friend

Sing

Listen to music

Draw or doodle

Stretch

Write a card to a friend

Color in a coloring book

Walk downtown and  
have a tea

Play frisbee with a friend

Volunteer at the humane  
society

Eat a favorite food

Sit outside and people  
watch

Exercise

Clean your room

Sing (even if you think you  
can't)

Watch the birds

Make a list of hopes /goals

Start a journal/diary

Play a game of pool

Go for a hike

Plan a dream vacation

Research places to live

Go to the library and  
browse



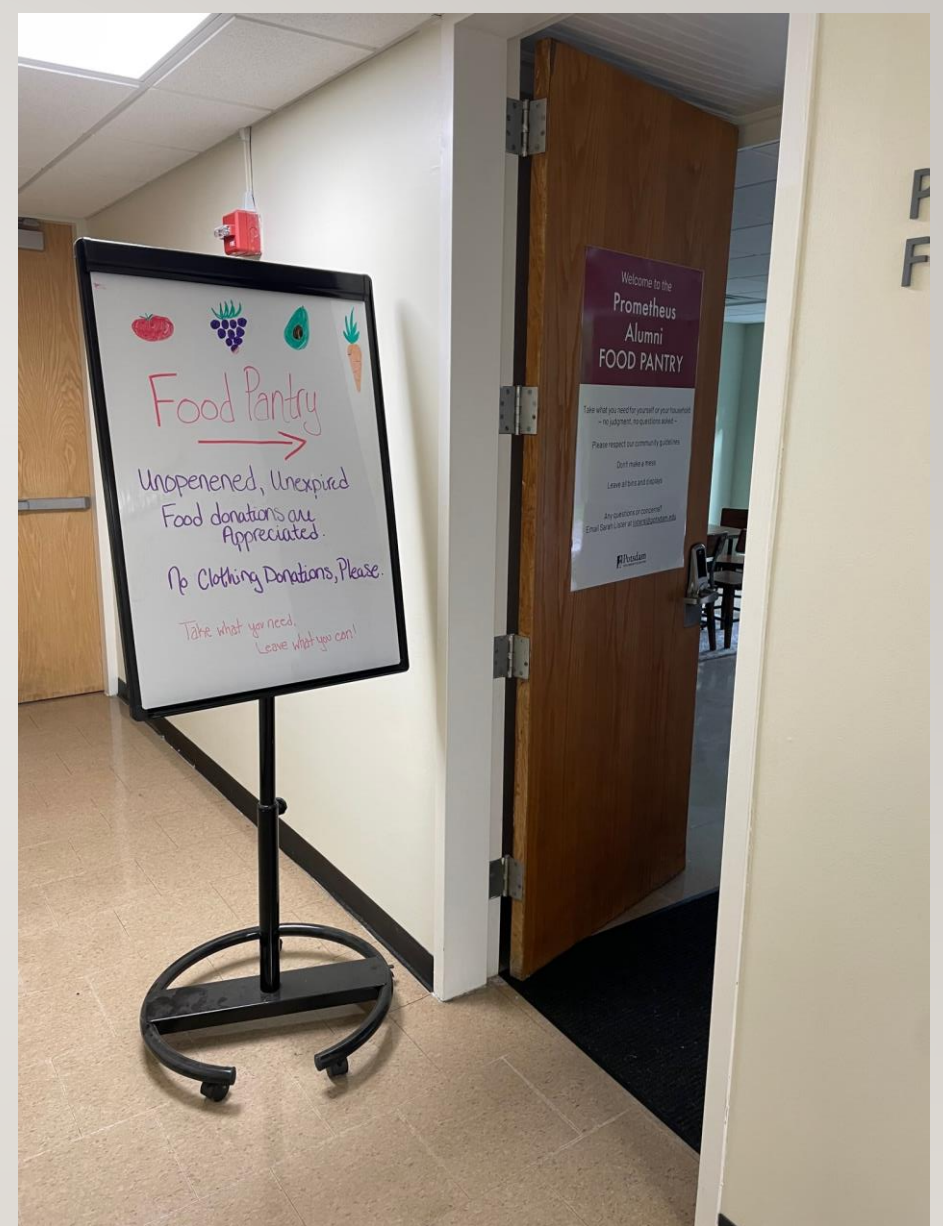
# FOOD INSECURITY

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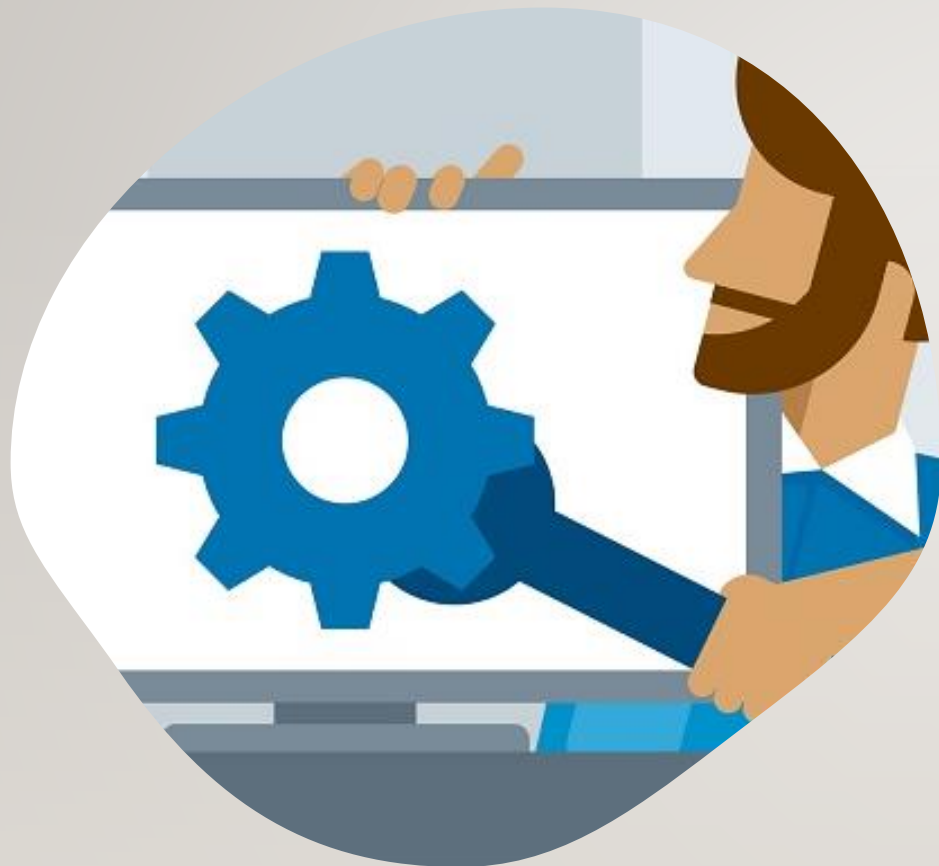
Food Pantry: I 19 Student Union Building

Feed America: Find your local food bank

<https://www.feedingamerica.org/find-your-local-foodbank>



# TROUBLESHOOTING



**PROBLEM-** LOW ENERGY/ DIMINISHED SENSE OF PURPOSE

**TRY:**

COMPLETING A TASK-1, 5, 15

SELF-CARE ACTIVITIES

CELEBRATING SMALL VICTORIES



# TROUBLESHOOTING



**PROBLEM-** LOW MOOD/IRRITABILITY

**TRY:**

PHYSICAL ACTIVITY

SUN EXPOSURE

IMPROVING SLEEP

MEDITATING



# TROUBLESHOOTING



**PROBLEM-** DECREASED  
CONCENTRATION/INDECISIVENESS

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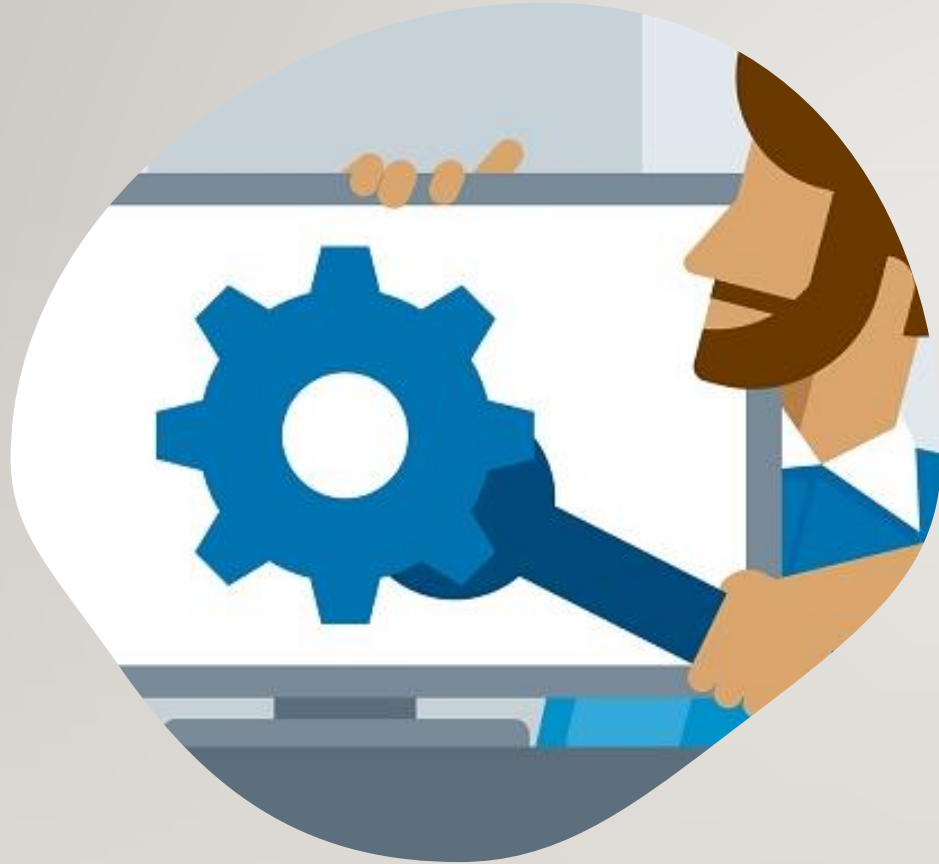
**TRY:**

GOING FOR A HIKE

JOGGING

DANCING

# TROUBLESHOOTING



**PROBLEM-** FEELING NUMB OR ISOLATED

**TRY:**

SPENDING TIME WITH FRIENDS

PETTING A DOG OR CAT

PHYSICAL CONTACT WITH LOVED ONE

GIVING COMPLIMENTS

# RESOURCES- NUMBERS

- Reachout- Crisis and Information Hotline- 315-265-2422
- Canton-Potsdam Hospital (Behavioral Health Dept. - Potsdam)- 315-265-3300
- Mental Health Counseling Services of Northern New York (Potsdam)- (315) 268-0264
- St. Lawrence County Mental Health Clinic (Canton)- 315-386-2167
- St. Lawrence County Chemical Dependency Services (Canton)- 315-386-2189
- United Helpers: Canton (Behavioral Health- Canton)- 315-386-0264
- Community Health Center of the North Country (Canton)- (315) 386-8191
- Ogdensburg Wellness Center- (315) 394-0101
- Potsdam Police- 315-265-2121

# RESOURCES

- **988**- National Suicide Prevention Lifeline (NSPL)
- **Crisis Text Line**: Text HOME to 741741
- **Trevor Project (LGBTQI2 support)**: 866-488-7386 or text START to 678678



# REFERENCES

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- American Foundation for Suicide Prevention: <https://afsp.org/>
- National Alliance on Mental Illness: <https://www.nami.org/home>
- National Institute of Mental Health: <https://www.nimh.nih.gov/>
- Center for Environmental Therapeutics: <https://cet.org/>

THANK YOU

- *"Make the most of yourself, for that is all there is of you."*

– Ralph Waldo Emerson