A.A.A. MENTAL HEALTH
AWARENESS, ADVOCACY, ASSISTANCE

JOSH BROWN M.S., LMHC
ASSISTANT DIRECTOR
COLLEGE COUNSELING CENTER
OVERVIEW

• Understand the foundational neuroscience of positive mental health

• 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

- 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

National Alliance on Mental Illness
Wellness Builders
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
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
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
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 2nd leading cause of death for college students
• Seventh leading cause of death for males, 14th 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 (per 100,000) - (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”

- SENECAC

• 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

1. 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
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

National Alliance on Mental Illness
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

✓ **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
<table>
<thead>
<tr>
<th>PLEASANT EVENTS</th>
<th>PLEASANT EVENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meditating</td>
<td>Color in a coloring book</td>
</tr>
<tr>
<td>Taking a warm bath</td>
<td>Walk downtown and have a tea</td>
</tr>
<tr>
<td>Reading a book</td>
<td>Play frisbee with a friend</td>
</tr>
<tr>
<td>Watching TV</td>
<td>Volunteer at the humane society</td>
</tr>
<tr>
<td>Playing a game</td>
<td>Eat a favorite food</td>
</tr>
<tr>
<td>Call a friend</td>
<td>Sit outside and people watch</td>
</tr>
<tr>
<td>Sing</td>
<td>Exercise</td>
</tr>
<tr>
<td>Listen to music</td>
<td>Clean your room</td>
</tr>
<tr>
<td>Draw or doodle</td>
<td></td>
</tr>
<tr>
<td>Stretch</td>
<td></td>
</tr>
<tr>
<td>Write a card to a friend</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Sing (even if you think you can't)</td>
<td></td>
</tr>
<tr>
<td>Watch the birds</td>
<td></td>
</tr>
<tr>
<td>Make a list of hopes /goals</td>
<td></td>
</tr>
<tr>
<td>Start a journal/diary</td>
<td></td>
</tr>
<tr>
<td>Play a game of pool</td>
<td></td>
</tr>
<tr>
<td>Go for a hike</td>
<td></td>
</tr>
<tr>
<td>Plan a dream vacation</td>
<td></td>
</tr>
<tr>
<td>Research places to live</td>
<td></td>
</tr>
<tr>
<td>Go to the library and browse</td>
<td></td>
</tr>
</tbody>
</table>
FOOD INSECURITY

Food Pantry: 119 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

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

- Korb, Alex, Phd (2015). *The Upward Spiral: Using neuroscience to reverse the course of depression*. Oakland California: New Harbinger, California
- National Institute of Drug Abuse: [https://www.drugabuse.gov](https://www.drugabuse.gov)
- American Foundation for Suicide Prevention: [https://afsp.org/](https://afsp.org/)
- National Alliance on Mental Illness: [https://www.nami.org/home](https://www.nami.org/home)
- National Institute of Mental Health: [https://www.nimh.nih.gov/](https://www.nimh.nih.gov/)
- Center for Environmental Therapeutics: [https://cet.org/](https://cet.org/)
• "Make the most of yourself, for that is all there is of you."

– Ralph Waldo Emerson