

Mental Health and Wellness in the Workplace

Dealing With Mental Health
Issues in the Workplace

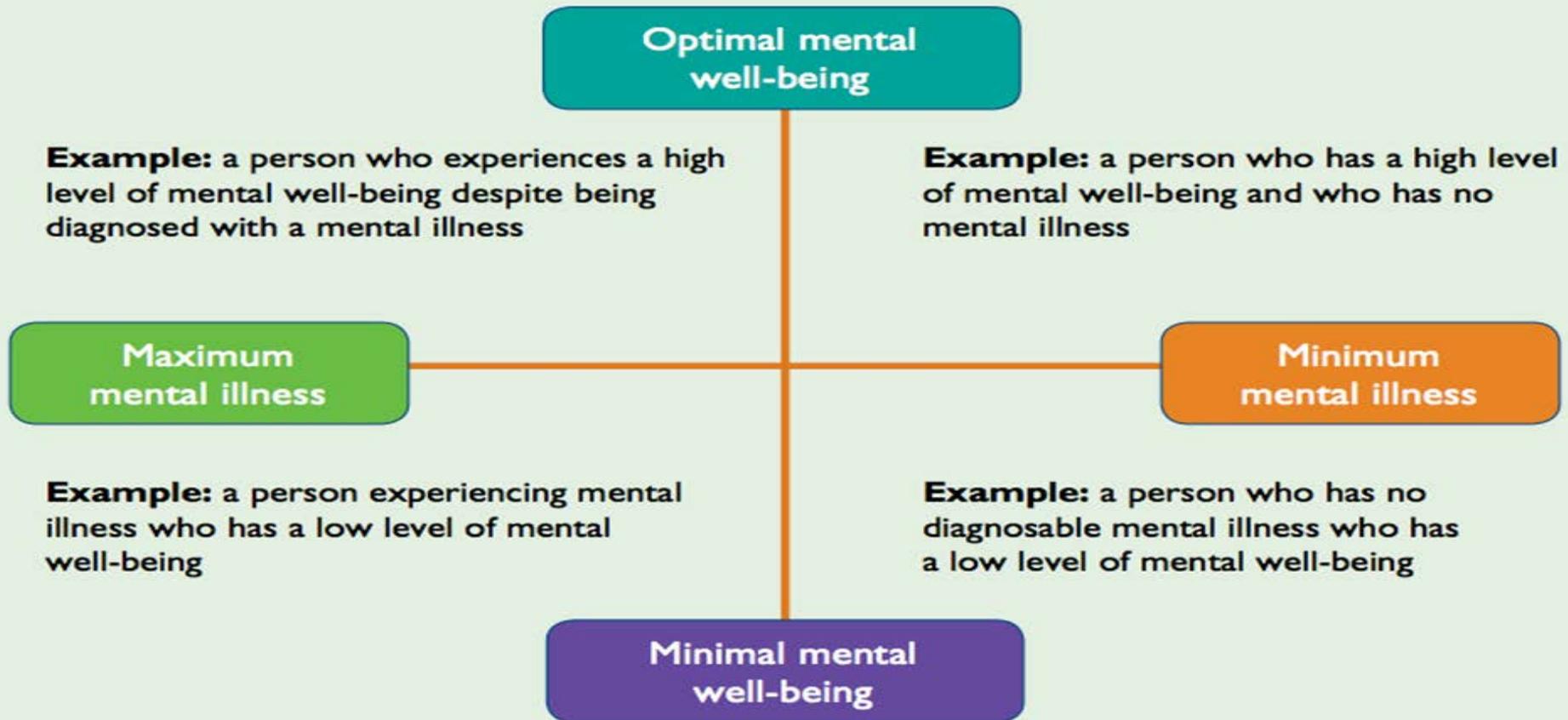


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Mental Health Continuum



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Scenario #1

Terry, who has been a colleague at your school for over 10 years, approaches you and asks you for a few minutes to talk privately. Terry indicates he just doesn't feel like himself these days, and even the most trivial things are upsetting him.

- What are important considerations as you support your colleague?



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Mental Health First Aid

Mental Health First Aid is the help provided to a person developing a mental health problem or in a mental health crisis. The first aid given is given until appropriate professional treatment is received or until the crisis is resolved.

Mental Health Commission of Canada



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Mental Health First Aid

The aims of Mental Health First Aid are:

- Preserve life where a person may be a danger to themselves or others.
- Provide help to prevent the mental health problem from becoming more serious.
- Promote the recovery of good mental health.
- Provide comfort to a person experiencing a mental health problem.



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Mental Health First Aid

Five Basic Actions/Steps:

1. Assess the risk of suicide and /or harm.
2. Listen non-judgmentally.
3. Give re-assurance and information.
4. Encourage the person to get appropriate professional help.
5. Encourage other supports.

Mental Health Commission of Canada



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Non-judgmental Listening

A person is being non-judgmental if they can:

- Accept the person as they are.
- Make no moral judgement about their situation.
- Demonstrate empathy - the ability to put oneself in the other person's place to demonstrate to the person that they are truly being heard and understood.



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Responding with Empathy

- Recognize emotional signals
- Respond to the feelings expressed (overtly; covertly).
- Name and confirm the emotion
 - “Sounds like you are feeling...”
 - “It must be very frightening to believe that...”
 - “I understand you are feeling very angry...”
 - “I can imagine this might feel like...”

[Brené Brown on Empathy vs Sympathy](#)



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CONNECTING WITH THE PERSON

- Create a space where the person feels safe and can express their feelings.
- Make the person feel as comfortable as possible.
- Be mindful of personal space; stay in person's visual field
- Be honest, caring, professional in your approach.
- Discuss privacy and confidentiality
- Minimize distractions, be fully present



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CONNECTING WITH THE PERSON

- Emphasize you want to help/support them
- Develop a sense of working together – “help me to understand...”
- Encourage them to express their feelings with words
- Focus on person’s strengths/positive (not problems)
- Ask what they think will help, what’s helped before
- Ask them how you can help
- Don’t try to label/diagnose
- Don’t ask to explain their behaviour (may not know)
- Empower the person



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COMMUNICATION STRATEGIES

- Be aware of your nonverbal behaviour (smile)
- Be calm, quiet; lower/soften your voice
- Speak slowly, keep it short, simple
- Open-ended questions
- Give person time to respond
- Be honest; never lie
- Listen more; talk less
- Minimal prompts such a “Mmm”, “Ah” or “I see” may be all that is necessary to keep conversation going.



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ACTIVE LISTENING

- Listen to the whole message (not just the words)
- Reserve judgement (allow person to “tell their story”)
- Demonstrate you’re listening (smiling, nodding, verbal comments)
- Provide feedback (reflect, clarify, summarize)
- Pay attention to nonverbal – eye contact, body language



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BARRIERS TO COMMUNICATION

- Talking too much
- Interrupting the person
- Changing subject
- Talking over a person (as if they are not there)
- Asking leading or biased questions
- Asking “why” questions (can become defensive)
- Using professional jargon
- Showing approval or disapproval
- Becoming defensive in response to criticism
- Avoid speaking in a patronizing tone of voice
- Try not to become over-involved or overprotective



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BARRIERS TO COMMUNICATION

- Minimizing person's feelings ("everyone feels that way sometime")
- False reassurance ("everything will work out")
- Trying to cheer the person up ("things will get better")
- Telling them to "Snap out of it" or "Get over it" or "Get your act together"
- Don't be hostile, sarcastic, blame or nag them
- Showing approval or disapproval
- Becoming defensive in response to criticism



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Exploring the Situation

- Resist making any judgments or conclusions about what is going on.
- Invite your colleague to talk about what they are experiencing. When done, repeat what you heard and ask if that is correct.
- Resist giving advice about what to do. Instead, continue to listen and ask what you can do to help.
 - you avoid giving the wrong advice or unwanted advice, both of which could have unintended consequences.
 - you are able to help your co-worker focus on what it is they need. When any of us are consumed by negative or fearful thoughts, we can lose sight of what we need to move beyond them.



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Encouraging Action

- Help co-worker focus on one small step forward at a time. Trying to “fix” everything at once can be overwhelming.
- If co-worker is overwhelmed, encourage them to write down all of the tasks that need doing – you may be able to help prioritize.
- Help co-worker to focus on solutions rather than problems.
- Help co-worker preserve workplace relationships and their reputation at work. This can include helping to avoid unnecessary conflict.
- Encourage co-worker to take work breaks to go for a walk or out for fresh air. These changes in focus and physical movement can ultimately help to increase concentration at work.



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Seeking Additional Support

- Encourage co-worker to see their family physician as a starting point.
- Suggest they contact their local unit office for additional support.
- Direct them to your Employee Assistance Program (EAP), or other community resources.
- Check benefits plan to see if there are services that may be helpful such as psychological services, massage therapy, etc.
- Help them look up resources in the community, online, and at the workplace.
- Refer them to FeelingBetterNow® online mental health program.



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Scenario #2

Several teachers have approached you to discuss another teacher. They are concerned that this teacher is not dressing appropriately and is not maintaining proper hygiene. They feel that this teacher does not maintain the appropriate level of dress and hygiene for a professional teacher.

➤ What is your response?



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Psychological Signs of Distress

"Psychological distress is to mental health what a fever is to infectious diseases: a measurable symptom, a clear sign of a health problem but one that cannot, on its own, shed light on the cause or severity of the problem to which it is related."

- Distress is manifested in different ways. In order to identify it, you need to be familiar with the four main types of signs.
- A change in behavior and/or character at work might be a sign that a colleague's mental health needs attention.



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Psychological Signs of Distress

Identify two or three possible signs or symptoms that you exhibit when under psychological stress.

- PHYSIOLOGICAL/PHYSICAL SIGNS
- THOUGHTS/COGNITIVE SIGNS
- FEELINGS/EMOTIONAL SIGNS
- BEHAVIOURS



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AWARENESS POSSIBLE SIGNS/SYMPTOMS OF PSYCHOLOGICAL DISTRESS

PHYSIOLOGICAL/PHYSICAL SIGNS

- Insomnia
- Chronic fatigue
- Weight gain or loss
- Muscular tension/headaches
- Upset stomach
- Grinding/clenching teeth
- Shortness of breath/heart palpitations
- Frequent colds, flu and infections



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AWARENESS POSSIBLE SIGNS/SYMPTOMS OF PSYCHOLOGICAL DISTRESS

THOUGHTS/COGNITIVE SIGNS

- Disorganized/confused thinking
- Impaired judgment
- Decreased attention and/or concentration
- Difficulty making decisions, remembering things
- Difficulty expressing themselves
- Expression of strange or grandiose ideas
- Perception of threats
- Delusions, hallucinations
- Suicidal ideation



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AWARENESS POSSIBLE SIGNS/SYMPTOMS OF PSYCHOLOGICAL DISTRESS

FEELINGS/EMOTIONS SIGNS

- Worry, anxiety
- Anger, agitation
- Sadness, irritability
- Feeling of powerlessness, helplessness
- Overwhelmed, out of control
- Feeling of incompetence/ self conscious
- Apathy, guilt
- Extreme highs and lows
- Suspiciousness



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AWARENESS POSSIBLE SIGNS/SYMPTOMS OF PSYCHOLOGICAL DISTRESS

BEHAVIOURS

- Growing inability to cope with daily challenges and activities.
- Easily distracted, inability to concentrate or complete a task.
- Increased anxiety, agitation, frustration.
- Excessive fatigue, lack of energy.
- Excessive busyness.
- Dramatic changes in eating or sleeping habits.
- Lack of personal hygiene.



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AWARENESS POSSIBLE SIGNS/SYMPTOMS OF PSYCHOLOGICAL DISTRESS

BEHAVIOURS

- Isolation; social withdrawal
- Excessive risk taking; impaired judgement
- Increased use of drugs or alcohol
- Denial of obvious challenges
- Numerous unexplained physical ailments
- Rapid, pressured speech
- Self-harming behaviours



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AWARENESS POSSIBLE SIGNS/SYMPTOMS OF PSYCHOLOGICAL DISTRESS

Some of us are more prone to the effects of distress. This includes:

- People committed to a mission or vision
- High performers
- Perfectionists
- People who can't say no easily
- "Type A" personalities

Workplace Mental Health Leadership, Morneau Shepell



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Scenario #3

Several teachers have approached you to discuss another teacher. They have suggested to you that the teacher might be drinking in the parking lot during the lunch hour. They claim that they can smell the alcohol on their breath.

- How do you respond?



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Who is the best person to have the conversation?

Think about:

- Privacy and confidentiality: Who else knows? Who needs to know? Who doesn't need to know?
- Your relationship with the member- is there trust?
- Is another colleague or staff rep with a better relationship with the member?
- Who might the member respond well to? Who might they not respond well to?



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Having a Crucial Conversation

Before the conversation:

- The process is important as the outcome
- Suspend judgement – recognize your assumptions – you do not have the total picture.
- Plan the conversation – consider: who, when, where, what will be said?
- Rehearse in private what you intend to say.



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Having a Crucial Conversation

5 Step Process:

- 1) *"I've noticed"/"It's been brought to my attention"...* (followed by factual, neutral, non judgmental observation)
- 2) *"Tell me more" Listen ...*
- 3) *"I'm worried"....* (followed by something that you're worried will happen if we don't address what's being noticed)
- 4) Listen Talk back and forth *"Is there anything going on?"...*
- 5) Find possible options together (i.e.. getting agreement to deal with the employer, or to talk to a doctor or share resources)



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Having a Crucial Conversation

- Know that the person might or might not agree to talk with you.
- It might take more than one attempt or conversation.
- After the conversation follow up on any solutions that you discuss.
- No matter how the conversation goes, check in with the member at a later time.



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What if they don't want help?

- Find out if there is any specific reason they say they don't want help.
- You may be able to help them overcome their concerns with information or contacts.
- If they still don't want help after you've explored their reasons, let them know that if they change their mind they can always reach out to you.
- Respect their right to decide whether they want help or not, unless you believe they're at risk of harming themselves or others.
- What do you do with this information?



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Scenario #4

John has recently returned to work after being off with a note from his doctor. You have always known John as kind, encouraging and good natured with students. Lately you have heard him raising his voice and tossing books onto the floor. At the end of one day you note John has his head down on his desk. You ask how he is, and he responds "I just can't take it any longer. I am going to get in my car and drive it into a wall."

How might your response differ?



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When a member is at risk of harming themselves

- If the member discloses they have thought about harming themselves or suicide, seek their agreement to accept help.
- Listen to them fully, without interruptions, to clearly understand how they are feeling and what they are thinking.
- Ask “will you agree to talk to your physician?” and if they do, call immediately.
- If the solution seems more imminent or the member is not communicating and/or agreeing to get help, call the police or 911.



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Crisis First Aid for Suicidal Behavior

1. Engage the person in a serious conversation.
2. Ask about suicide.
3. Explore risk.
4. Engage the person in a plan for safety.

Mental Health First Aid

Mental Health Commission of Canada



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What if they are self-harming or considering suicide?

- In most cases suicide can be prevented.
- Take suicidal thoughts and behaviors seriously.
- Openly talking about suicidal thoughts and feelings can save their life.
- Helping a suicidal person is challenging, so it's important to remember two key actions:
 - If you think someone may be suicidal, ask them directly. Don't be nervous about saying something like, "Are you thinking about killing yourself?"
 - If they say, "Yes", ensure someone stays with them until they go to an Emergency room, see a psychologist, family physician or psychiatrist.



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What about Confidentiality ?

- The relationship between the person experiencing mental health problems and the first aider needs to be built on trust and respect... BUT
- Confidentiality does not apply when a person is at risk of harming themselves or someone else, even if the person does not want help at that time.



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