



**MENTAL HEALTH
AWARENESS TRAINING**



Optimal mental wellbeing

Example: a person who experiences a high level of mental wellbeing despite being diagnosed with a mental illness

Example: a person who has a high level of mental wellbeing and has no mental illness diagnosis

**Maximum
mental
illness**

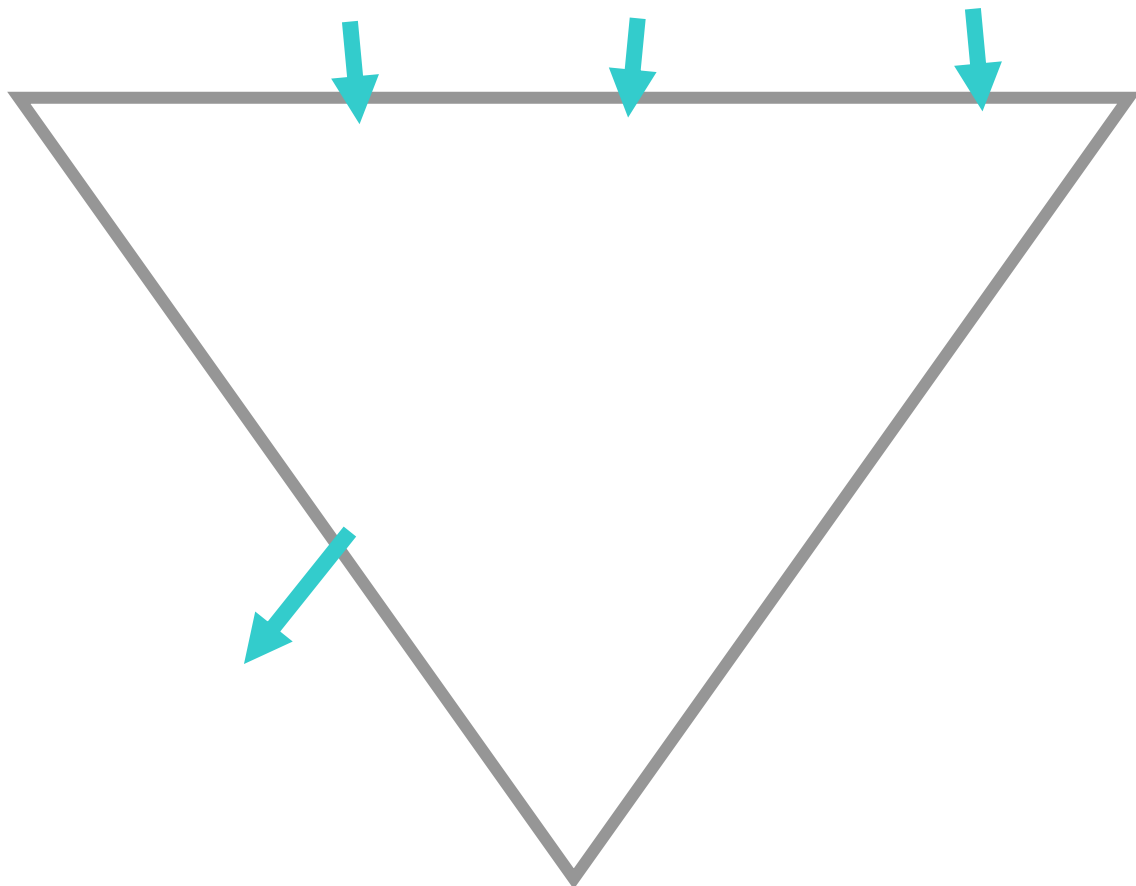
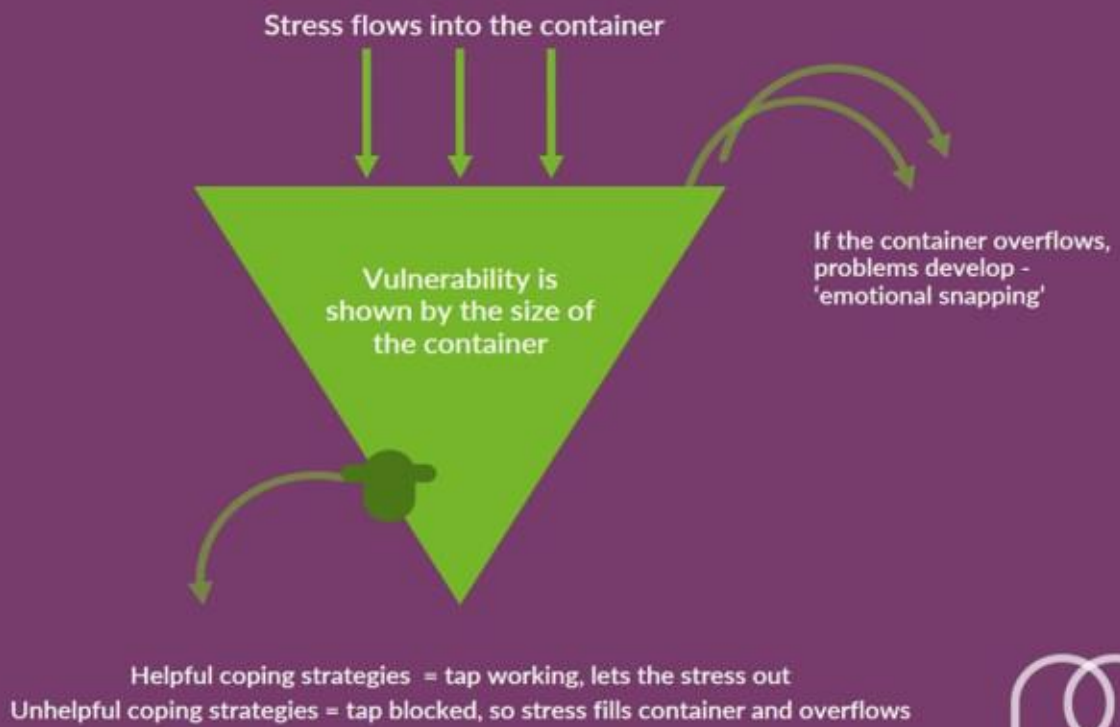
**Minimum
mental
illness**

Example: a person experiencing mental illness who has a low level of mental wellbeing

Example: a person who has no diagnosable mental illness who has a low level of mental wellbeing

Minimal mental wellbeing

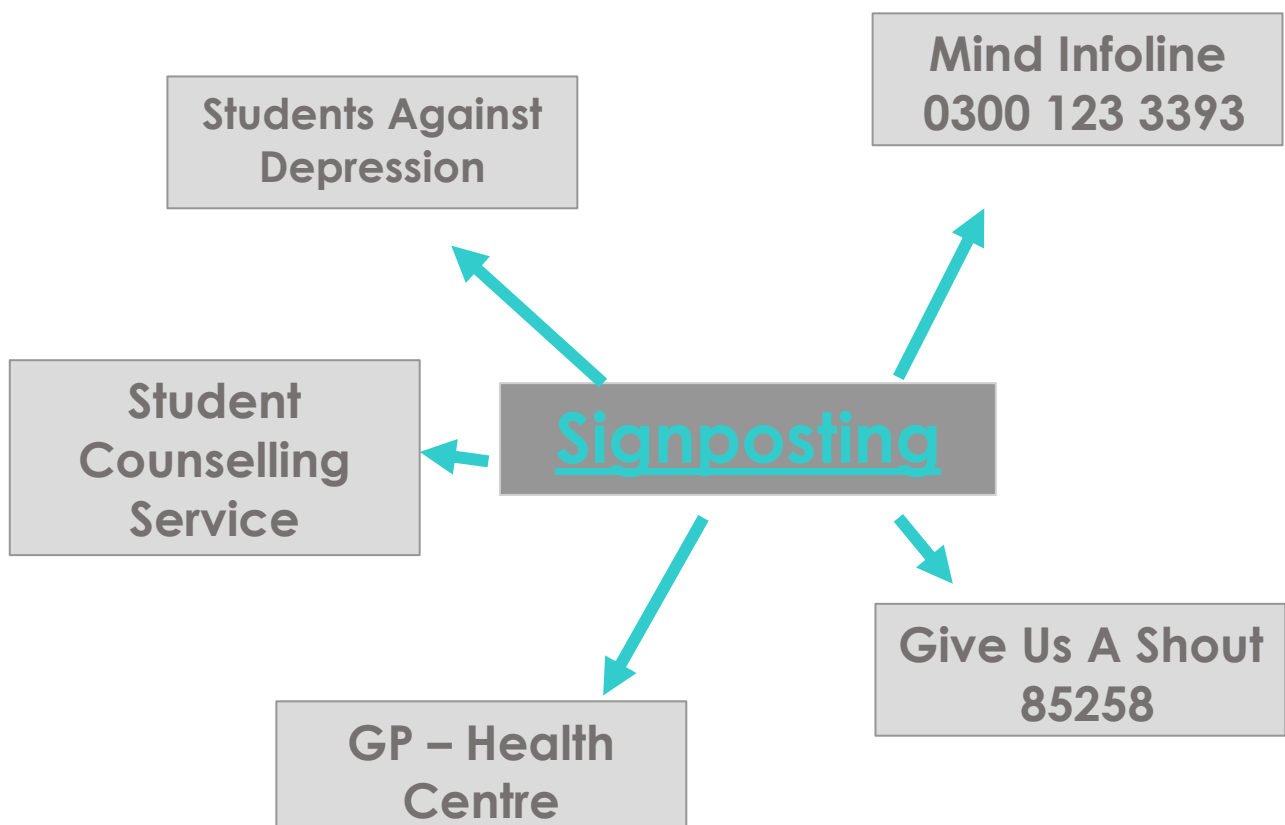
What's in your Stress Container?



DEPRESSION

Symptoms

Low mood	Concentration Difficulties	Anxiety
Apathy	Hopelessness	Irritability
Loss of pleasure from activities	Exhaustion	Weight Changes
Sleep disturbance	Memory Difficulties	Physical Aches/Pains
Social Withdrawal	Appetite Disturbance	Guilt/Worthlessness



ANXIETY

Symptoms

Internal

- Feeling like you have lost control
- On edge and alert to everything around you
- Feeling detached from your environment
- Feeling worried

External

- Increased heart rate
- Difficulty breathing
- Wanting to use toilet more often
- Sweating
- Restlessness
- Palpitations
- Hot flushes
- Talkative
- Withdrawn

What can you do?

- Validate their experience
- Report to Wellbeing
- Offer resources e.g. relaxation tips on www.AnxietyUK.org.uk
- Give Us A Shout
- Student Minds

EATING DISORDERS



BEAT Helplines

Helpline: 0808 801 0677 📞

Studentline: 0808 801 0811 📞

Youthline: 0808 801 0711 📞

Having a conversation

- 1) Prepare for the conversation
- 2) Timing is important – avoid mealtimes
- 3) Positive language
- 4) Actively listen
- 5) Don't push too hard if someone isn't ready to talk
- 6) Signpost
- 7) Support through recovery

SELF HARM

Self-harm is a way of feeling in control of the pain that person is feeling



Self-harm is a physical way of expressing emotional pain



There are many different forms of self-harm e.g. alcohol and substance abuse, exercising excessively, pulling hair, fighting

Don't remove someone's form of self-harm unless it is an immediate threat to their life

Let them know you're there for them and don't be judgmental

Encourage them to seek professional help and call 999 if they are at risk to their life

YoungMinds Helpline
0808 802 5544

Harmless
www.harmless.org.uk

Samaritans
116 123

National Self
Harm Network
Forums
www.nshn.co.uk

Useful
organisations

Mind
0300 123 3393

Elefriends
www.elefriends.org.uk

SUICIDE

Common misconceptions about suicide:

- People who talk about suicide won't really do it
- Anyone who tries to kill themselves must be crazy
- If a person is determined to kill themselves, nothing is going to stop them
- People who die by suicide are people who were unwilling to seek help
- Talking about suicide may give someone the idea

Warning signs include:

- Talking about suicide
- Seeking out lethal means
- Preoccupations with death
- No hope for the future
- Self-loathing, self-hatred
- Getting affairs in order
- Saying goodbye
- Withdrawing from others
- Self-destructive behaviour
- Sudden sense of calm

Talking to a suicidal person:

- Be yourself
- Listen
- Be sympathetic
- Offer hope
- Take the person seriously
- Don't argue with them
- Don't promise confidentiality
- Don't blame yourself

How can you help?

- Get professional help
- Encourage them to talk about their feelings
- Report to Wellbeing who can follow up
- Talk to the Mental Health first aiders at the SU
- Encourage open discussions about suicide and mental health
- Report immediately if at risk to life – 999, Security

It is never your fault

- Helping someone with suicidal thoughts is likely to have a big impact on you, make sure to set boundaries and refer to professional services. It's not your responsibility.
- If someone does try to end their life, this is not your fault

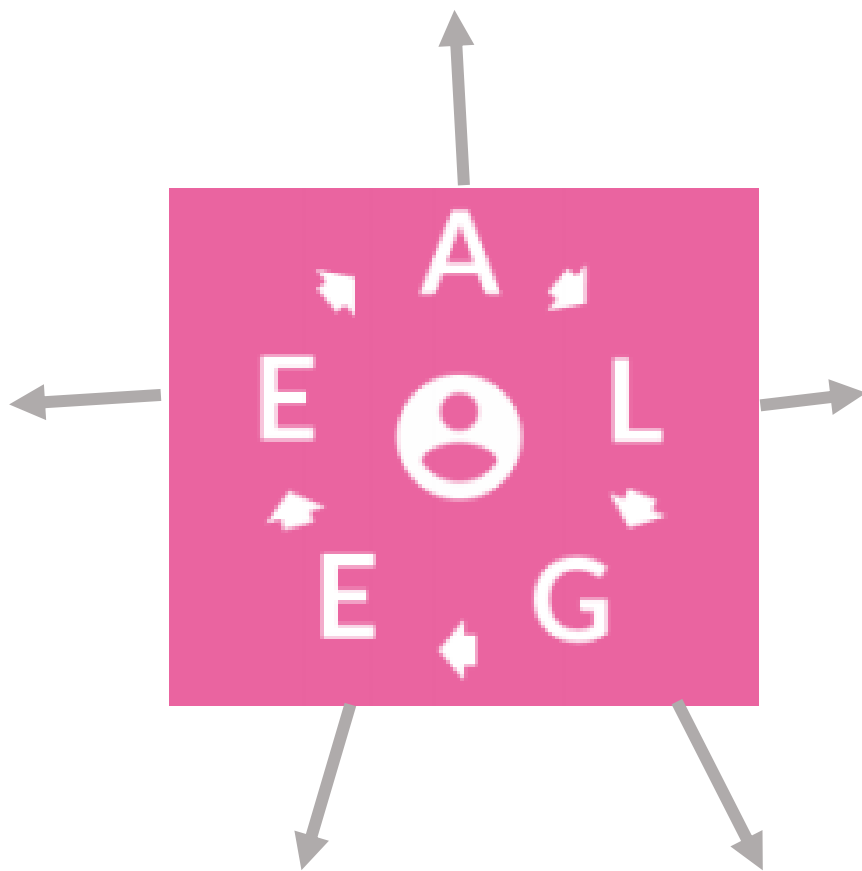
Approach the person, assess and assist with any crisis

Listen and communicate non-judgementally

Encourage other supports

Encourage the person to get appropriate professional help

Give support



ACTIVE LISTENING

"I've noticed you've stopped attending our weekly socials and we really miss you."

"What can I do to support you with that?"

Smile

Eye Contact

Posture

Mirroring

No distractions

Positive Reinforcement

Remembering details

Questioning

Reflection

Clarification

Summarisation

"I can tell that you're not ready to talk about this right now, but know that I care about you and I'm here for you when you're ready."

"It's okay to feel this way"

"Would it help if I just sat here with you?"

"Have you told anyone how you're feeling?"

"I can see that you're in a lot of pain. Do you want to tell me what's been going on?"

"I hear you and I know it's not an easy thing to do"

"There is hope"

"I don't understand, but I really want to."

"I will do anything I can, but I can't help you alone. Can we get you some support?"

"I can come with you to make an appointment with the counselling service"

"You're a good person"

"Take as long as you need"

"Your volunteer work has always been so important to you. I was concerned when you missed our last three committee meetings"

"Your life makes a difference to me"

"What would be the most helpful thing I could do to support you in getting treatment?"

STATISTICS

Depression

- 1 in 5 university students said they have a mental health diagnosis
- 1 in 10 university students reported a diagnosis of depression
- 75% of those said they concealed their diagnosis from their friends
- 30-50% severe diagnosis also have substance problems

Anxiety

- 8.4% of students reported having a diagnosis anxiety disorder
- 42.5% of students reported having high levels of anxiety, often or always feeling worried

Eating Disorders

- 1 in 10 people in the UK will experience partial or full symptoms of an eating disorder at some point in their lifetime
- 25% of those affected by an eating disorder are male
- Between 1.25 and 3.4 million people in the UK are affected by an eating disorder

Self-Harm

- 50% of students reported thoughts of self-harm
- 1 in 10 students reported thinking of self-harm often or always
- 4 in 10 students admitted to using alcohol or drugs to cope with their problems

Suicide

- 95 university students completed suicide in 2017
- Suicide is the most common cause of death for men aged 20 and 49
- 20% of people have suicidal thoughts
- 34% of females and 19% of males have had thoughts of suicide in their lifetime

SIGNPOSTING

Royal Holloway Counselling

counselling@royalholloway.ac.uk

01784 443128

Founders West

Royal Holloway Wellbeing

wellbeing@royalholloway.ac.uk

01784 443395

Founders West 1st Floor

Royal Holloway Health Centre

Campusdoctor.co.uk/Holloway

01784 443131

Mind

0300 123 3393

Mind.org.uk

Samaritans

01932 844444

Samaritans.org

Calm

0800 58 5858

Thecalmzone.net/help

Papyrus

0800 068 4141

Papyrus-uk.org

Nightline

0207 631 0101

Nightline.ac.uk

Saneline

0300 304 7000

Sane.org.uk

Crisis Line

0300 456 8432

SU Advice Centre

01784 276700

advice@su.rhul.ac.uk

BEAT

0808 801 0677

b-eat.co.uk

Anxiety UK

08444 775 775

Anxietyuk.org.uk

Royal Holloway Security

01784 443888

Royal Holloway Hall Life

01784 443237

Hall.life@royalholloway.ac.uk

Students Against Depression

01635 869754

Studentsagainstdepression.org

Mind Matters Surrey – IAPT

0300 330 5450

Mindmattersnhs.co.uk

Give Us A Shout

Text: 85258

Giveusashout.org

Talk to Frank

0300 123 6600

Talktofrank.com

No Panic

0844 967 4848

Nopanic.org.uk

ABC

0300 011 0213

Anorexiabulimiacaare.org.uk

Men Get Eating Disorders Too (MGEDT)

sam@mengetedstoo.co.uk

mengetedstoo.co.uk

Rethink Mental Illness

0121 522 7007

Rethink.org

SU Mental Health First Aiders

- Abi Jesson
- Serife Tumburi
- Natalie Bates
- Alison Baker
- Kyri Shionis
- Lucy Simpson

SU Mental Health First Aid Champions

- Sophia Bolton
- Dominic Brown
- Laura Black
- Phillip Dowler
- Susan Bond
- Sophie Bury

time to change

let's end mental health discrimination

What does stigma feel like?



10 minutes

Key message:

Nearly nine out of ten people with mental health problems say that stigma and discrimination have a negative effect on their lives. Stigma can be a major barrier preventing individuals from asking for support.

Activity:

This activity is designed to help an audience you are speaking to learn what it feels like to experience stigma.

Ask everyone to stand up.

Read out the different scenarios below and ask the audience to consider how open they'd feel about talking about a mental health problem.

1. You are at a family wedding.

The speeches have just finished and you are chatting with extended family (Grandparents, Uncles, Aunties, Cousins) that you have not seen for a while. The conversation moves onto your current health and one of your family members asks how you have been?

Remain standing if you feel you are able to be open about your mental health problem and talk to them about some of the difficulties you have recently had.

Sit down if you decide to brush it off and just say I'm fine.

2. You have just applied for a new job at a new organisation.

It's your dream job and you were very excited to hear you have been shortlisted for interview. In the interview the discussion moves on to ask about the gap in your CV where you had to take time out from work due to your mental health problem.

Remain standing if you feel you are able to be open about your mental health problem and explain to the panel your gap in employment.

Sit down if you decide to make up another reason.

3. You are on a first date.

Everything is going well, you have just finished your starters and waiting for main course to be served. You've decided that you would quite like to see your date again as things seem to be going so well. The conversation moves onto mental health and you discuss a TV programme that has recently been on about this.

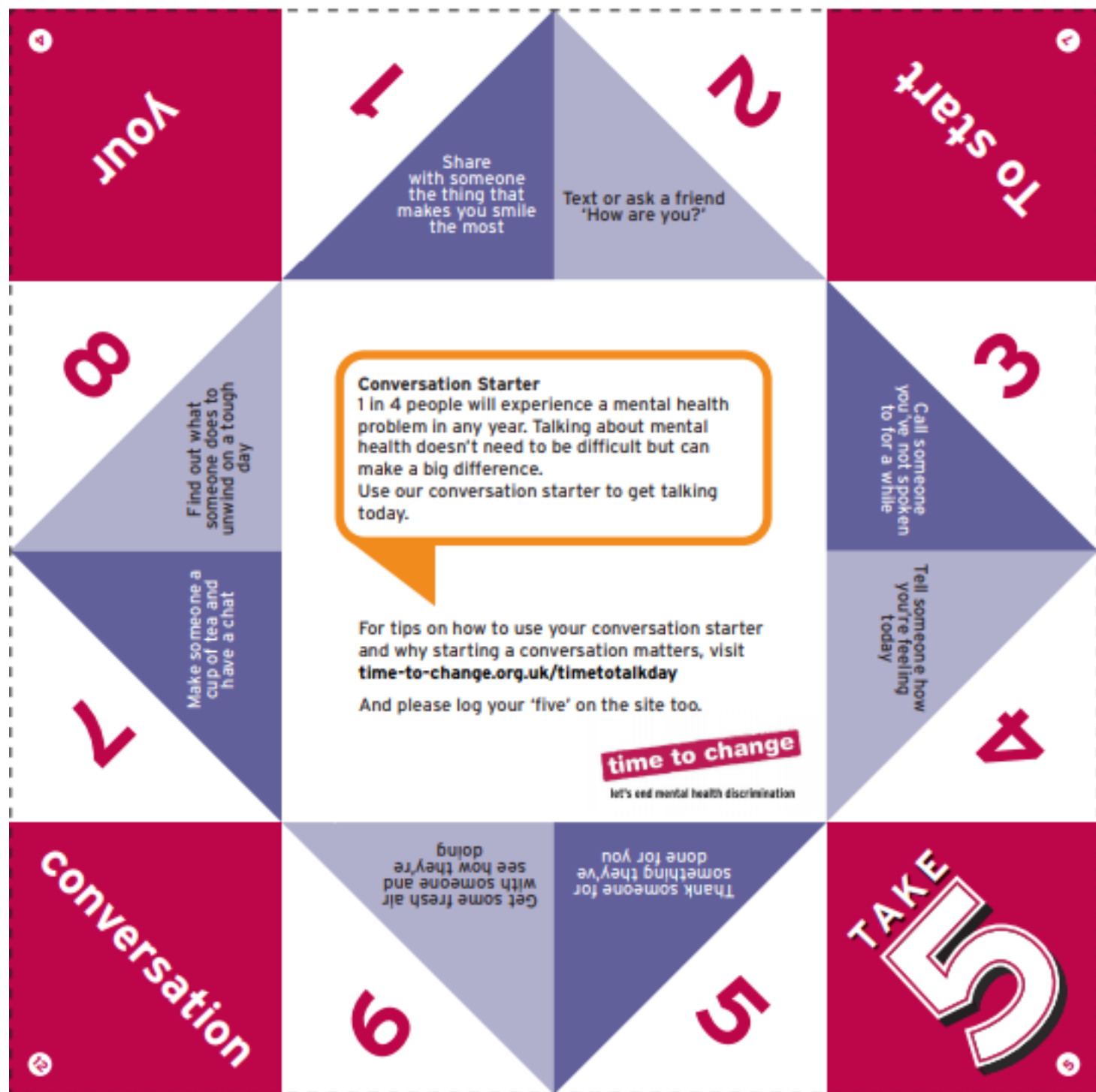
Remain standing if you feel you are able to be open about your mental health problem and let the other person know about your experience and connection to the programme.

Sit down if you say nothing at all.

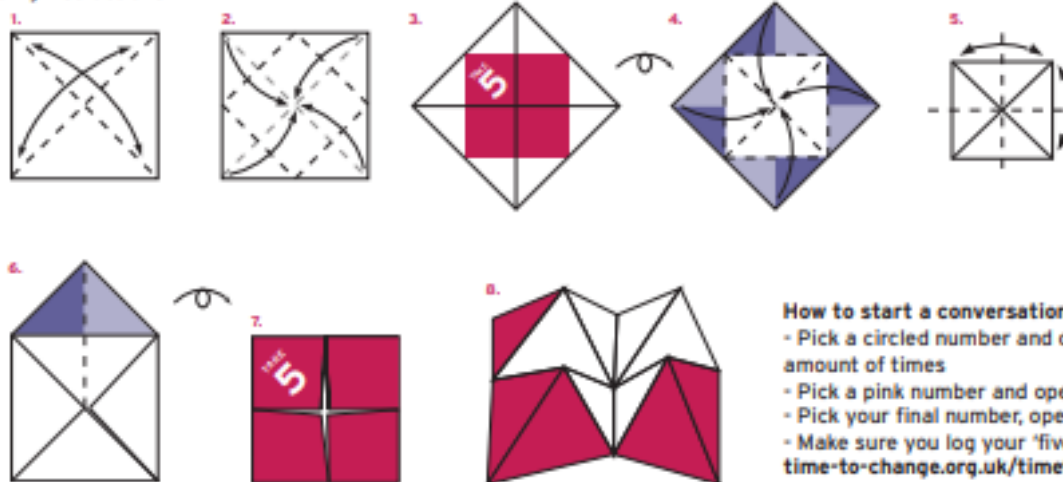
How many people are left standing?

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Discussion questions:

- What does each scenario make you think about?
- Why are some things harder to talk about than others?
- What do you think would happen if you did talk about your mental health?



Folding instructions



How to start a conversation

- Pick a circled number and open in alternate directions that amount of times
- Pick a pink number and open alternately that amount of times
- Pick your final number, open flap and start your conversation
- Make sure you log your 'five' on time-to-change.org.uk/timetotalkday