Presenters

Tiffany Russell, LMSW
Social Services Manager, Niles District Library (MI),
Social Workers in Rural and Small Libraries (SWIRSL),
and Part-time Instructor, Western Michigan University,
School of Social Work

Anne Chapman, MPH
Director of Strategic Partnerships, Mental Health
First Aid, National Council for Behavioral Health
Mental Health First Aid

Anne Chapman, MPH - Director, Strategic Partnerships
National Council for Behavioral Health

We are the unifying voice of America’s health care organizations that deliver mental health and addictions treatment and services.

The National Council is committed to all Americans having access to comprehensive, high-quality care that affords every opportunity for recovery.

The National Council introduced Mental Health First Aid USA in 2008.
**Mental Health First Aid®** is the help offered to a person experiencing a mental health challenge, mental disorder or a mental health crisis. The first aid is given until appropriate help is received or until the crisis resolves.

*Mental Health First Aid® does not teach people to diagnose or to provide treatment.*
**Why Mental Health First Aid?**

<table>
<thead>
<tr>
<th>Mental health problems are <strong>COMMON.</strong></th>
<th>Learn how to <strong>NOTICE</strong> when someone needs help</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STIGMA</strong> is associated with mental health problems.</td>
<td>Promote <strong>UNDERSTANDING.</strong></td>
</tr>
<tr>
<td><strong>PROFESSIONAL HELP</strong> is not always on hand.</td>
<td>Encourage community members to <strong>SUPPORT ONE ANOTHER.</strong></td>
</tr>
<tr>
<td>Individuals with mental health problems often <strong>DO NOT SEEK HELP</strong></td>
<td>Help more people <strong>GET THE HELP THEY NEED.</strong></td>
</tr>
<tr>
<td>Many people are not well informed and don't know <strong>HOW TO RESPOND.</strong></td>
<td>Learn how to <strong>INTERVENE.</strong> You might <strong>SAVE A LIFE.</strong></td>
</tr>
</tbody>
</table>
Why Mental Health First Aid for public libraries?

- Serve as a gathering place for the community
- Information hub and resource center for people of all ages regardless of socioeconomic status
- Can provide an essential link to health care services by identifying individuals experiencing emotional problems, improving coordination with existing mental health resources, and informing individuals and their families of local supports available in their community
MHFA in Public Libraries

- **1,450+** libraries have held a MHFA training
- **36,000+** participants have been trained in libraries
- **California:** ~**170** libraries trained in MHFA
- **New York:** ~**100** libraries trained in MHFA

<table>
<thead>
<tr>
<th>Top 5 States</th>
<th>Number of Libraries</th>
</tr>
</thead>
<tbody>
<tr>
<td>California</td>
<td>170</td>
</tr>
<tr>
<td>New York</td>
<td>99</td>
</tr>
<tr>
<td>Ohio</td>
<td>84</td>
</tr>
<tr>
<td>Illinois</td>
<td>69</td>
</tr>
<tr>
<td>Texas</td>
<td>73</td>
</tr>
</tbody>
</table>
Utilizing MHFA in Rural Communities

Why Mental Health Matters in Rural Communities

6.5M
More than 6.5 million people in non-metropolitan counties experienced a mental health condition in 2016.

1.3M
Approximately 1.3 million people living in rural areas have thoughts of suicide each year.

Shortage
Chronic shortages of mental health professionals exist in rural areas, as mental health providers are more likely to practice in urban centers.
Rural Mental Health in US

- Rural/urban rates of Mental Health Disorders are the same
- Stigma and lack of anonymity
- 80-90% of BH providers work in urban areas
- Major challenges to landscape of family farming
- Suicide rate 3.5 times that of general population
- Farming communities are changing

Suicide rate
3.5 times that of general population

Farming communities are changing
2.5 Million
Mental Health First Aiders
Trained!
Curricula Overview

- Risk factors and warning signs of mental health and substance use problems.
- Information on anxiety, depression, trauma, substance use (including opioids), non-suicidal self injury, disorders in which psychosis may occur, disruptive behavior disorders and eating disorders.
- A 5-step Action Plan to help someone who is developing a mental health problem or is in crisis.
- Available evidence-based professional, peer and self-help resources.
Curricula Options

**CURRICULA**

- **Adult** Mental Health First Aid  
  18+ ENGLISH and SPANISH

- **Youth** Mental Health First Aid  
  Adults → K-12 ENGLISH and SPANISH

- **Teen** Mental Health First Aid  
  Teens → Grades 10-12

**MHFA DELIVERY PATHWAYS**

- **In-Person***  
  6.5-8 hours ADULT/ YOUTH/ TEEN

- **Virtual**  
  2 hours self-paced + 6 hours video conference ADULT/ YOUTH/ TEEN

- **Blended**  
  2 hours self-paced + 4 hours in person ADULT/ YOUTH

*Please note that all Instructor trainings are currently conducted in a virtual format.*
Curricula Enhancements (2020)

- Manual Updates
- Participant Processing Guides
- Centralized Crisis Sections
- Cultural Considerations
- Impact of Trauma
- Recovery
- Self-Care
Adult Curriculum Supplements

- Customized outreach to specific audiences
- Tailored content including scenarios
- Population-specific resources and statistics
How to Find Area Courses or Instructors

1. Go to www.mentalhealthfirstaid.org and click “Find a Course”

2. Search by City, State or by Zip code and select the search area (“Distance from Me”)

3. A list of courses will appear. Click “Download to Excel” to download search results

4. To see a list of Instructors, click the Instructors tab. If desired, filter instructors by Certification. Click “Download to Excel” to download search results
3,2,1 - Mental Health Call to Action!

3

**self care activities** that you can do in the next 7 days

2

**supports you can call** you can check in with if you need to

1

**goal** about mental health awareness to work toward during the next 12 months in your club
Thank You!

Contact: Hello@MentalHealthFirstAid.org
Trauma-Informed Approach in Libraries

TIFFANY RUSSELL, LMSW
Before we begin...

- Introduction
- Exercise
Let’s take a moment to...
Trauma

Individual trauma results from an event, series of events, or set of circumstances experienced by an individual as physically or emotionally harmful or life-threatening with lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being.

- From the Substance Abuse & Mental Health Services Administration (SAMHSA)
Who is affected by trauma?

What does trauma look like?
Trauma does not discriminate

- Most people will experience some form of trauma during their life
- 3 types of trauma – Acute, Chronic, Complex
- ACES – Adverse Childhood Experience Study
Other sources of trauma

- Generational poverty
- Structural and systemic racism
- Discrimination based on gender identity
- Homophobia
- Xenophobia
- Racism
- Ableism
- Sexism
- Child abuse
- Intimate partner violence
- Immigration
- Global pandemics
Adverse childhood and community experiences (ACEs) can occur in the household, the community, or in the environment and cause toxic stress. Left unaddressed, toxic stress from ACEs harms children and families, organizations, systems and communities, and reduces the ability of individuals and entities to respond to stressful events with resiliency. Research has shown that there are many ways to reduce and heal from toxic stress and build healthy, caring communities.
Effects of trauma

- Disrupts healthy development
- Affects relationships and family stability
- Mental health issues – depression, anxiety, agoraphobia, etc.
- Substance abuse issues
- Divorce
- Child abuse
- Increase in crime
- Poverty
- Unemployment
- Produce multi-generations of people with untreated trauma
Why is it important to understand trauma?

“Since trauma can have serious effects on health, behaviors, relationships, work, school, and other aspects of life, it is important for behavioral health, health care, and other providers to gain the knowledge and skills needed to promote healing, recovery, and wellness.” (SAMHSA)
Why is it important to understand trauma?

Shape our interactions with people we serve

Helps to eliminate judgement, stereotypes and biases

Helps us understand why people respond the way they do

Prevents retraumatizing individuals

Helps build trust with patrons
Where do we begin?
# The 4 R’s of Trauma Informed Service

<table>
<thead>
<tr>
<th>Realize</th>
<th>Recognize</th>
<th>Respond</th>
<th>Resist</th>
</tr>
</thead>
<tbody>
<tr>
<td>• the impact of the trauma, and understand how it affects with families, groups, communities and the individual.</td>
<td>• the signs and symptoms of trauma in the individual, family members, staff and others involved with the system.</td>
<td>• by integrating the principles and knowledge of trauma in policies, procedures and practices.</td>
<td>• re-traumatizing the individual.</td>
</tr>
</tbody>
</table>
BEGIN WITH A PERSON-CENTERED APPROACH

“Person-centered care...means consumers have control over their services, including the amount, duration, and scope of services, as well as choice of providers. Person-centered care also is respectful and responsive to the cultural, linguistic, and other social and environmental needs of the individual.” – SAMHSA

A person is placed at the center of a service

Treated as a person first – not their circumstance or label
How do we respond to patrons experiencing trauma?

- Apply compassion
- Acknowledge people's strengths
- Don't assume
- People First language
- Create welcoming spaces
- Focus on behavior
Applying trauma informed lens to policies and practices...

Have discussions about policies and who they target.

Are your policies enforced with equity?
“What’s wrong with you?”

to

“What happened to you?”
The same approach can not be used for everyone.

Each individual has their own unique story.

The more we learn about individuals and trauma – the more equipped we are to serve them.
Key Takeaways

- Definition of trauma
- Who experiences trauma?
- Trauma can cause of other physical, mental disorders
- Importance of understanding trauma
- Changing the way we respond to and think about trauma – What’s happened? vs. What’s wrong?
- Commitment to continuing the work – it is a process.
Thank you!

Contact Info:
Tiffany Russell, LMSW

tiffanyrussellmsw@gmail.com