

BEHIND HAPPY FACES

SORORITY FACILITATION GUIDE - TABLE OF CONTENTS

Lesson 1: Understanding Mental Health 2

Lesson 2: Your Mental Health 8

Lesson 3: Changing Ineffective Coping 19

Lesson 4: Before the Breakdown 27



Learning Objectives:

These outcomes show what knowledge and skills participants should gain from the lesson. It is crucial you review the goals of the lesson with the students so they know what they will learn.



Handout:

It is time to distribute a handout/materials to participants. These can be found in the Handouts section of this packet. Make copies in advance!



Write on flip chart:

The main points are included in PowerPoint presentations. In the event you do not have access to a computer/projector, write examples and instructions on flip chart paper in the front of the room.



Group discussion:

It is time to prompt participants with questions or dialogue for group discussion.



Interactive Activity:

It is time for an activity, like role playing or a game. These activities help participants feel more connected to the information.



Instructions:

Read information or directions aloud to the groups.



Watch the video:

Each lesson includes videos to help introduce the topic and engage viewers to take part in the lessons. It is important to make sure you test them in advance to make sure the video and audio work on your technology—either DVD player or computer and speakers.

BEHIND HAPPY FACES

Lesson 1: Understanding Mental Health

Lesson one provides a definition of mental health and discusses the reasons people do not seek help for mental health challenges. This lesson is a perfect introduction to the topic of mental health. It allows sisters to explore their current thoughts and feelings about mental health, while offering a clear definition for them to build a positive foundation of understanding. The lesson also highlights the barriers that prevent women from seeking help. The first step in getting someone to access help or to accept treatment is learning more about why she may be resistant. Every mental health challenge is different for each person.

Facilitator:

To facilitate this lesson effectively, it is helpful to have experience or training as a facilitator in other areas of campus life. If you have a member who is or has been a resident assistant, student organization leader, peer advocate, or even is studying to be a teacher, she could be an excellent facilitator for this program.

Time needed:

45 minutes

Objectives:

AT THE CONCLUSION OF THIS PROGRAM, PARTICIPANTS WILL BE ABLE TO:

- State a correct definition of mental health.
- Name common reasons people do not seek help for their mental health challenges.
- Identify personal barriers to seeking help, explore the sources of those, and work on how to address them.

Setting:

- Choose a room that offers a lot of open space for small groups to be able to spread out and not be distracted by others. Members will need to be able to either sit and gather on the floor or move chairs around into small groups.
- You will play a PowerPoint presentation and videos during the lesson, so connect a laptop to a projector and screen.

Group size:

The chapter should be divided into small groups for the workshop. Groups should be no larger than 10 to make sure connections and conversations remain personal.

- Before the lesson begins, ask members to count off into groups of 10 (or less), then move to different areas of the room.
- We recommend placing a trusted member or chapter officer in each group who can help follow instructions and facilitate small group discussion.
- If your chapter has more than 200 women, we recommend you use more than one room with different facilitators.

Program Flow

To start, play the “Lesson 1, Video 1” video to highlight the overall Behind Happy Faces program. Then lead each group through the three exercises. Show the “Lesson 1, Video 2” video. After watching the video, lead the groups through one final exercise.

Materials Needed:

- For each small group: Two flip chart pieces of paper and markers.
- For each person: One notecard
- For facilitator: One flip chart piece of paper

Technical requirements:

- Ability to show video online or on DVD
- Ability to facilitate PowerPoint presentation

Before you begin:

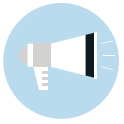
- Test the video, sound and PowerPoint before the lesson begins to ensure everyone will be able to hear and see the video. This is crucial to the program’s success.
- Gather supplies.
- Break the chapter into small groups as people arrive. Groups should be no larger than 10 people. If you have a chapter smaller than 50 women, consider groups of five people.
- Distribute supplies to each group/person.



Video (5 minutes)

To start, let's watch a video of Ross Szabo, the creator of the Behind Happy Faces mental health curriculum, explaining more about the purpose behind the program.

Play the "Lesson 1, Video 1" video for the group.



INTRODUCTION:

- 25 percent of college students experience a mental health disorder. **CHANGE PPT SLIDE**
- Suicide is the second leading cause of death on college campuses. **CHANGE PPT SLIDE**
- Young women experience higher rates of anxiety, depression and eating disorders, and they have a higher rate of suicide attempts than young men.
- Outside of mental health disorders, students are dealing with lack of sleep, stress, substance abuse, body image issues and other challenges. **CHANGE PPT SLIDE**

FACILITATOR NOTES:

This part of the lesson is vital to helping members understand the purpose of the activities they will be doing. Stress the introductory points to help everyone understand the goals of the workshop.

CHANGE PPT SLIDE

- 66 percent of students do not seek help for their mental health. **CHANGE PPT SLIDE**
- The purpose of this lesson is to help us better understand a definition of mental health, the reasons people do not seek help and our own personal barriers to achieving effective ways of addressing challenges in our lives.

CHANGE PPT SLIDE

Exercise 1 (7 minutes)



INSTRUCTIONS:

You will have three minutes to do this activity. In your groups, answer this question: What words, ideas, people, movies, songs, books, celebrities and scenarios do you think of when you hear the words mental health? **CHANGE PPT SLIDE**



On one page, each group should make a list of everything they think of when they hear the words mental health. Remember, the categories to discuss are words, ideas, people, movies, songs, books, celebrities and scenarios.

Give the groups three (or so) minutes to discuss.

SHARE:

Ask each group to choose a representative to the words they wrote down in each category. After several groups share, ask, "Does any other group have additional comments we have mentioned so far?" This will help you keep the discussion from being repetitive and assist in moving on to the summary.

CHANGE PPT SLIDE

SUMMARIZE:



- We did this exercise to identify all of the things we think of when we hear the words "mental health."
- It is important to know how we think about mental health to be able to have an honest conversation about the topic. **CHANGE PPT SLIDE**



Exercise 2 (7 minutes)

INSTRUCTIONS:

You will have three minutes for this next exercise. On the list you just made:

- Determine how many of the words you wrote have a negative connotation, how many have a positive connotation and how many are neutral. Count the totals.
- Next, answer this question: Why do you think you had more negative or positive answers? **CHANGE PPT SLIDE**

SHARE:

Ask each group to choose a representative to report how many negative, positive and neutral associations you have. Each representative should also state why the group feels they had more negative or positive associations. **CHANGE PPT SLIDE**

SUMMARIZE:

Often people associate the words mental health with negative ideas. Some people only think of worst-case scenarios, suicide or diagnoses of mental health disorders.

Mental health is not about having a problem. Mental health is a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. **CHANGE PPT SLIDE**

FACILITATOR NOTES:

Write down the definition of mental health on a piece of paper and post it in front of the room. Keep it in front of the room for the rest of the lesson.

Mental health is a state of well-being in which every individual reaches his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.



Exercise 3 (7 minutes)

INSTRUCTIONS:

Your group will have three minutes for this activity:

- On a second piece of flip chart paper, write down all of the reasons you believe people do not seek help for their mental health challenges.
- Then answer this question. What are the connections between the reasons people do not seek help and how negatively mental health is viewed? **CHANGE PPT SLIDE**

SHARE:

Ask a representative from each group to share with the large group the answers to these questions. **CHANGE PPT SLIDE**

After several groups share, ask, "Does any other group have additional comments we have not mentioned so far?" This will help you keep the discussion from being repetitive and assist in moving on to the summary.

SUMMARIZE:

It is important to make the connection between people feeling embarrassed, ashamed and afraid of judgment, with negative ideas of mental health. **CHANGE PPT SLIDE**

For example, when someone thinks of a school shooter or celebrity breakdown as an example of mental health, she generally won't want to be viewed as being in the same category as that person.

If mental health is constantly viewed negatively, then a person is less likely to seek help.

By realizing that mental health is really more in connection to overall wellness, we can decrease the stigma. **CHANGE PPT SLIDE**



VIDEO (5 minutes)

Play the “Lesson 1, Video 2” video for the large group.



Exercise 4 (10 minutes)

- The goal of this next exercise is to learn more about the mental health challenges we are all trying to address.
- Sometimes we are not aware other people are going through the same difficulty we have experienced.
- This exercise will be completely anonymous.
- It requires trust and a willingness to share.
- The work in this exercise should be confidential to the group. **CHANGE PPT SLIDE**

INSTRUCTIONS:



- Each person in your group has a notecard.
- On the notecard, write down one thing no one knows about you. If others knew this piece of information, they would better understand you.
- This should be about a meaningful experience, how you deal with emotional challenges or something that affects you. **CHANGE PPT SLIDE**
- After everyone has finished writing, one person should collect all of the cards and shuffle them. Then pass the notecards to each member of the group. It is OK if you get your own notecard.
- Each member reads the notecard aloud. No one should identify who wrote which card.
- After all notecards have been read aloud, each member of the group will say one word or thought that stayed with them from what was shared. **CHANGE PPT SLIDE**

SHARE:



- What did you learn from this workshop overall?
- Did you find you have things in common with sisters you did not realize?
- Do you feel more connected to others after hearing what they wrote down? **CHANGE PPT SLIDE**

SUMMARIZE:

- Each person’s experience with mental health is different. This exercise showed you that you aren’t alone. It’s important to have conversations to feel connected to each other. **CHANGE PPT SLIDE**
- Building a foundation of how to address mental health requires us to communicate honestly and openly. We should do this only with people we trust.
- The stigma surrounding mental health has multiple layers and affects all of us. **CHANGE PPT SLIDE**
- Remember mental health is not having a mental illness. It is a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. **CHANGE PPT SLIDE**

- Mental health is as necessary as physical health. We talk about and focus on our physical health in a lot of ways, even if we do not have physical problems. It is time for us to start giving the same attention to our mental health. **CHANGE PPT SLIDE**

Next workshops (2 Minutes)

- In the next Behind Happy Faces workshop, we will learn the five categories of mental health challenges and about the mental health spectrum that helps us balance our lives.
- In future lessons, we will learn about coping mechanisms and how to help a friend.
- If you need to talk to someone about your mental health, the counseling center on campus is a great place to start. There are also more resources on the ZTA Behind Happy Faces website.

FACILITATOR NOTES:

We recommend scheduling the workshops on a calendar at the start of the semester. Let the chapter know when the next Behind Happy Faces workshop will take place.

[< BACK TO TABLE OF CONTENTS](#)

BEHIND HAPPY FACES

Lesson 2: Your Mental Health

This lesson helps young women better understand the mental health challenges in their lives and learn about a spectrum to identify how they are addressing those challenges. People are often overwhelmed by the amount of mental health challenges that impact them. Knowing how to categorize those challenges helps a person recognize how severe the issues are. When someone is more aware of what is affecting her, she can begin to determine how to work towards having a balanced life.

Facilitator:

To facilitate this lesson effectively, it is helpful to have experience or training as a facilitator in other areas of campus life. If you have a member who is or has been a resident assistant, student organization leader, peer advocate, or even is studying to be a teacher, she could be an excellent facilitator for this program.

Time needed:

45 minutes

Objectives:

AT THE CONCLUSION OF THIS PROGRAM, PARTICIPANTS WILL BE ABLE TO:

- Classify mental health challenges into five categories.
- Identify where they are on the mental health spectrum.
- Connect how mental health challenges impact where a person is on the mental health spectrum.

Setting:

- Choose a room that offers a lot of open space for small groups to be able to spread out and not be distracted by others. Members will need to be able to either sit and gather on the floor or move chairs around into small groups.
- You will play a PowerPoint presentation and videos during the lesson, so connect a laptop to a projector and screen.

Group size:

The chapter should be divided into small groups for the workshop. Groups should be no larger than 10 to make sure connections and conversations remain personal.

- Before the lesson begins, ask members to count off into groups of 10 (or less), then move to different areas of the room.
- We recommend placing a trusted member or chapter officer in each group who can help follow instructions and facilitate small group discussion.
- If your chapter has more than 200 women, we recommend you use more than one room with different facilitators.

Program Flow

To start, play the “Lesson 2, Video 1” video to introduce the workshop. After watching the video, lead the groups through the three exercises.

Materials needed:

- For each small group: Two pieces of paper and markers
- Set of 24 notecards—copy and cut from the Your Mental Health handout
- For each person: Two notecards
- For the facilitator: Your Mental Health Key (see Handouts Section)

Technical requirements:

- Ability to show video online or on DVD
- Ability to facilitate PowerPoint presentation

Before you begin:

- Test the video, sound and PowerPoint before the lesson begins to ensure everyone will be able to hear and see the video. This is crucial to the program’s success.
- Gather supplies.
- Print and cut a set of 24 notecards from the Handouts Section for each group.
- Break the chapter into small groups as people arrive. Groups should be no larger than 10 people. If you have a chapter smaller than 50 women, consider groups of five people.
- Distribute supplies to each group/person.



“Your Mental Health” Video (6 minutes)

- We are going to watch a video to introduce this lesson. The video includes a message from Ross Szabo and a video of young women talking about their experiences with mental health challenges as well as the mental health spectrum. **CHANGE PPT SLIDE**

Play the “Lesson 2, Video 1” Video for the large group.



INTRODUCTION:

- In the first lesson, we learned how to be more open with our emotions, a definition for mental health and barriers that prevent us from working on our mental health challenges. **CHANGE PPT SLIDE**
- We live in a society where people are practically having a competition to see who is more busy or stressed out. Students like to know who has more papers, tests, work and who sleeps less. There seems to be a sense of achievement if you are the busiest person you know. This is a competition no one wins. **CHANGE PPT SLIDE**
- Oftentimes, people want to work on their balance—their mental health—but do not know where to begin.
- This lesson gives us a map to better determine what is happening to us and how to talk about our challenges. **CHANGE PPT SLIDE**

FACILITATOR NOTES:

This part of the lesson is vital to helping members understand the purpose of the activities they will be doing. Stress the introductory points to help everyone understand the goals of the workshop.



Exercise 1 (5 minutes)

INSTRUCTIONS:

- Being honest, open and non-judgmental of each other during these exercises will help us learn more about mental health and our sisters. **CHANGE PPT SLIDE**
- As we learned in the first Behind Happy Faces workshop, we are all trying to address different challenges in our lives. Yet, sometimes, we are not talking about them with those who can help.
- Opening up in these lessons allows us to grow closer as sisters, support each other and know how to be there when it matters most. **CHANGE PPT SLIDE**



Take one page of paper and turn it horizontally. Refer to the mental health spectrum diagram on the PowerPoint. Please draw this spectrum on your page. Once everyone is finished drawing the spectrum, explain each part of the spectrum to the group.

Able to Balance	Difficult to Balance	Needs Assistance to Balance	Needs Constant Assistance to Balance	Not Able to Balance
-----------------	----------------------	-----------------------------	--------------------------------------	---------------------

- Able to Balance**: A person who manages harmful stress, is aware of triggers and has effective coping mechanisms. This person is able to balance her life without often thinking about her mental health.
- Difficult to Balance**: A person who is aware of stress, triggers and ineffective coping, but struggles to find a way to address challenges effectively.
- Needs Assistance to Balance**: A person who is triggered by stress, feels hopeful to change how she copes and may need therapy, medication, exercise, yoga or set structure to specifically address her mental health.

- *Needs Constant Care to Balance* : A person who needs a structured life that includes supportive, nurturing people around her constantly. She may need to be part of a program or treatment center.
- *Not Able to Balance* : A person who has a mental health challenge so severe that even with help, she is unable to engage with those around her. **CHANGE PPT SLIDE**

FURTHER INSTRUCTIONS:



- On a notecard, each member in the small group will write down where she feels she is on this spectrum.
- You can only choose one place. It is ok for you to choose a place between two locations on the spectrum. You could be between able to balance and difficult to balance etc. Your answer will be anonymous to the larger group. This is not a competition. **CHANGE PPT SLIDE**
- The goal is to get an accurate assessment of where you are, so you know what you need to work on. **CHANGE PPT SLIDE**

SHARE:



- Ask a representative from each group to count the total numbers for each place on the spectrum and report it to the larger group. Keep track of the counts for each piece of the spectrum as the small groups report.
- If anyone is comfortable, tell us why she identified with each category on the spectrum.
- Can someone who feels she is in the Able to Balance category share why?
- Can someone who feels she is in the Difficult to Balance share why she feels that way?
- Can someone in the Needs Assistance to Balance share why?
- Can someone in the Needs Constant Assistance to Balance share why?
- Can someone in the Not Able to Balance category share why? **CHANGE PPT SLIDE**

FACILITATOR NOTES:

If there is a category or categories no one identified with, it is OK. Tell the group it is OK that no one is in a category. Review the definition of the category and reassure members that if they are in that category at some point in their lives, they can find a way to balance whatever challenge they are facing.

SUMMARIZE:

- The goal of this activity is to help you identify how you are addressing your mental health.
- Where you are on this spectrum today may not be where you are on it next week or in a month.
- As our situations change, our ability to address what is happening can also change. **CHANGE PPT SLIDE**



Exercise 2, Part 1 (15 minutes)

INSTRUCTIONS:

- This exercise is to help us better understand the range of mental health challenges people can experience in life.
- Each group should turn the other page horizontally.

- Write these headings across the top of the page from left to right: Everyday Challenges, Environmental Factors, Significant Events, Mental Health Disorders, and Developmental Disabilities.
CHANGE PPT SLIDE

FACILITATOR NOTES:

Each group should already have the 24 Your Mental Health notecards you copied and cut out before this lesson. Each card has one mental health challenge written on it. You will ask the groups to put each card into a category. Some of these challenges like bipolar disorder, should really only fit in one category. Other challenges like bullying can be debated to fit under multiple categories. A document—Your Mental Health Key—with all of the possible answers for these cards is included at the end of this workshop.



Everyday Challenges	Environmental Factors	Significant Events	Mental Health Disorders	Developmental Disabilities
---------------------	-----------------------	--------------------	-------------------------	----------------------------



- You have five minutes to discuss each of these 24 cards and decide in which category each card belongs.
- Some of the cards could be placed in more than one category.
- It's OK for you to keep those cards separate and identify the categories in which the card could fit.

CHANGE PPT SLIDE

- | | |
|---------------------------------------|-----------------------------------|
| • Bipolar Disorder | • Sexual Abuse |
| • Death | • Depression |
| • Breakup | • Eating Disorders |
| • Lack of Sleep | • Unhealthy Stress |
| • ADHD | • Body Image Issues |
| • Low Self-Esteem | • Borderline Personality Disorder |
| • Physical Abuse | • Parents' Divorce |
| • Anxiety Disorders | • Rejection |
| • Autism | • Intellectual Disabilities |
| • Drug/Alcohol Addiction | • Adjusting to College |
| • Schizophrenia | • Bullying |
| • Parents with Drug/Alcohol Addiction | • Identifying Sexual Orientation |

SUMMARIZE:

- I am going to read all of the cards and give you the correct answers for each card.
- If a card could be in multiple categories, I will let you know which categories in which it could fit.

CHANGE PPT SLIDE

Exercise 2, Part 2 (5 minutes)

INSTRUCTIONS:



- You have two minutes to answer this question:
- What percentage of the people in Greek life at our school will deal with challenges that fall under each category during their entire lives?
- For example, what percentage of people deal with everyday challenges, what percentage for environmental factors, significant events, etc.?
- Note: There are more challenges in life than the 24 listed on the notecards. Think about the overall categories instead of the specific challenges.
- You can choose from the following ranges:

0-25 percent

25-50 percent

50-75 percent

75-100 percent **CHANGE PPT SLIDE**

SUMMARIZE:

After the exercise, tell all of the groups that the correct answers are:

- Everyday Challenges : 100 percent
We will all face stress, trying to get enough sleep, body image and self-esteem challenges throughout our lives.
- Environmental Factors : 100 percent
Environment plays a role in all of our lives. Even if we did not go to schools or grow up in homes that were abusive, the environment we grew up in shapes our lives.
- Significant Events : 100 percent
Addressing significant events that cause loss, rejection and change is important because these events can often lead to ineffective coping mechanisms.
- Mental Health Disorders : 25 percent
The National Institute of Mental Health estimates 25 percent of the adult population in the United States experiences a mental health disorder in a given year.
- Developmental Disabilities : 5 percent
Estimates show that 1 to 3 percent of the U.S. population has an intellectual disability, 1 percent of people have autism/Asperger's Syndrome and 1 percent of people have ADHD. That gives us the total of 5 percent of the adult population having a developmental disability. **CHANGE PPT SLIDE**



Exercise 2, Part 3 (5 minutes)

INSTRUCTIONS:

- We are going to do the first exercise again to see if anyone has changed her place on the mental health spectrum after learning more.
- Sometimes, after having a clearer vision of the challenges we face, it is possible for us to realize we are not addressing some challenges as effectively as we hope to. **CHANGE PPT SLIDE**
- On a notecard each member in the small group will write down where you now feel you are on this spectrum.

- You can only choose one place. It is ok for you to choose a place between two locations on the spectrum. You could be between able to balance and difficult to balance etc. Your answer will be anonymous. This is not a competition.
- The goal is to get an accurate assessment of where you are, so you know what you need to work on. [CHANGE PPT SLIDE](#)

FACILITATOR NOTES:

Write the numbers down for each category. After you finish, compare the numbers from the first time you did the exercise to the second time.



SHARE:

- Ask a representative from each group to count the total numbers for each place on the spectrum and report it to the larger group. Keep track of the counts for each piece of the spectrum as the small groups report.
- Does anyone who changed where she is on the spectrum want to share why she changed her answer? [CHANGE PPT SLIDE](#)

SUMMARIZE:

- It is helpful to understand the different categories of mental health challenges for us to better conceptualize how we address our mental health.
- Again, I want to stress that where we identify ourselves on the spectrum today may not be where we are next month or in the future.
- We should all try to balance our lives. Sometimes it is more difficult to do that based on what we are addressing. [CHANGE PPT SLIDE](#)

Wrap Up (2 minutes)

- From the day we are born until the day we die, we are all on the mental health spectrum.
- Knowing where we are on the spectrum and what challenges impact our mental health better prepares us for the future and improves our ability to live in balance.
- Remember, identifying where you are on the spectrum is not a competition. The most important component is being honest with yourself and allowing yourself to work on whatever challenges you face. [CHANGE PPT SLIDE](#)
- If you need to talk to someone about your mental health, the counseling center on campus is a great place to start. There are also more resources on the ZTA Behind Happy Faces website. [CHANGE PPT SLIDE](#)

Next Workshop

In the next workshops, we will learn about coping mechanisms and how to help a friend.

FACILITATOR NOTES:

We recommend scheduling the workshops on a calendar at the start of the semester. Let the chapter know when the next Behind Happy Faces workshop will take place.

[< BACK TO TABLE OF CONTENTS](#)

Your Mental Health Key

FOR FACILITATOR USE - EXERCISE 2, PART 1

Each group should already have the 24 Your Mental Health notecards you copied and cut out before this lesson. Each card has one mental health challenge written on it. You will ask the groups to put each card into a category. Some of these challenges like bipolar disorder, should really only fit in one category. Other challenges like bullying can be debated to fit under multiple categories.

Below are acceptable answers for where participants can place the cards in the categories for mental health challenges that affect our lives. After members complete the activity in small groups, review the answers below. If a card could go in multiple places the first answer behind the term is the most likely category for the card.

Mental Health Challenges	Category
Bipolar Disorder	Mental Health Disorder
Death	Significant Event
Breakup	Significant Event
Lack of Sleep	Everyday Challenge
ADHD	Developmental Disability
Low Self Esteem	Everyday Challenge
Physical Abuse	Environmental Factor, Significant Event
Anxiety Disorders	Mental Health Disorder
Autism	Developmental Disability
Drug/Alcohol Addiction	Mental Health Disorder
Schizophrenia	Mental Health Disorder
Parents with Drug/Alcohol Addiction	Environmental Factor, Mental Health Disorder
Sexual Abuse	Significant Event, Environmental Factor
Depression	Mental Health Disorder
Eating Disorders	Mental Health Disorder
Unhealthy Stress	Everyday Challenge
Body Image Issues	Everyday Challenge
Borderline Personality Disorder	Mental Health Disorder
Parents' Divorce	Significant Event, Environmental Factor
Rejection	Significant Event, Everyday Challenge
Intellectual Disabilities	Developmental Disability
Adjusting to College	Everyday Challenge, Significant Event
Bullying	Significant Event, Environmental Factor
Identifying Sexual Orientation	Significant Event

BIPOLAR DISORDER

DEATH

BREAK UP

LACK OF SLEEP

ADHD

LOW SELF ESTEEM

PHYSICAL ABUSE

ANXIETY DISORDERS

AUTISM

**DRUG/ALCOHOL
ADDICTION**

SCHIZOPHRENIA

**PARENTS with
DRUG/ALCOHOL
ADDICTION**

SEXUAL ABUSE

DEPRESSION

EATING DISORDERS

**UNHEALTHY
STRESS**

**BODY IMAGE
ISSUES**

**BORDERLINE
PERSONALITY
DISORDER**

**PARENTS'
DIVORCE**

REJECTION

**INTELLECTUAL
DISABILITIES**

**APPLYING/ADJUSTING
TO COLLEGE**

BULLYING

**IDENTIFYING SEXUAL
ORIENTATION**

BEHIND HAPPY FACES

Lesson 3: Changing Ineffective Coping

The Changing Ineffective Coping lesson helps members better understand what coping is, how coping mechanisms develop and the importance of making them more effective. This lesson is a critical step for a person to be able to build the foundation necessary to address mental health challenges. When people talk about physical health they often focus on exercises to help strengthen someone's body. Coping mechanisms are just as important in helping a person adequately prepare to adapt to life's emotional difficulties.

The lesson explains the differences between effective and ineffective coping and allows participants to further examine how they are addressing issues in their lives. Changing coping mechanisms can be a long process that requires awareness and effort. The process of changing coping requires one to build new pathways in the brain to break old behaviors/habits. Changing coping can help a person gain positive emotional growth.

Facilitator:

To facilitate this lesson effectively, it is helpful to have experience or training as a facilitator in other areas of campus life. If you have a member who is or has been a resident assistant, student organization leader, peer advocate, or even is studying to be a teacher, she could be an excellent facilitator for this program.

Time needed:

45 minutes

Objectives:

AT THE CONCLUSION OF THIS PROGRAM, PARTICIPANTS WILL BE ABLE TO:

- State a definition of coping.
- Differentiate between effective and ineffective coping.
- Demonstrate the steps to make coping more effective.

Setting:

- Choose a room that offers a lot of open space for small groups to be able to spread out and not be distracted by others. Members will need to be able to either sit and gather on the floor or move chairs around into small groups.
- You will be playing a PowerPoint presentation and videos during the lesson, so you will need a computer connected to a projector and screen.

Group size:

Members will be working in pairs or groups of 3 for this lesson.

Program Flow:

To start, play the Coping video to introduce the subject. Then lead each group through the four exercises.

Materials Needed:

- For each person: 2 pieces of paper and a pen

Technical Requirements:

- Ability to show video online or on DVD.
- Ability to facilitate PowerPoint presentation.

Before You Begin:

- Test the video, sound and PowerPoint before the lesson begins to ensure everyone will be able to hear and see the video. This is crucial to the program's success.
- Gather supplies.
- Distribute supplies to each group/person.
- For exercise 2, participants will need to see the definitions for effective and ineffective coping. Write them on a piece of paper to post in front of the room:
- Effective Coping should reduce stress, lessen the intensity of your triggers, allow you to face more challenges, help you become more productive, and be more engaged with the people in your life.
- Ineffective Coping reduces your ability to address stress, prevents you from developing your mental health, and can be harmful to your overall physical/mental health.
- For exercise 4, participants will need to see the steps for changing ineffective coping mechanisms. Write this list on a piece of paper to post in front of the room:

Steps to Change Ineffective Coping

1. Identify the coping mechanism you want to change.
2. Recognize when you are coping in an ineffective manner.
3. Replace ineffective coping with an effective coping mechanism.
4. Practice the effective coping mechanism.
5. Be patient while trying to get results in changing the coping.
6. Build a healthy environment to help change the coping.
7. Acknowledge small victories, learn from setbacks.



Coping Video (3 minutes):

This video features an introduction from Ross Szabo talking about coping mechanisms and what you will learn in this lesson. **CHANGE PPT SLIDE**



INTRODUCTION (1 MINUTE)

- In the first lesson, we explored what mental health is and the barriers preventing us from seeking help. In the second lesson, we covered the categories for mental health challenges and how to have a balanced life. This lesson is about coping.
- Coping is one of the most important elements of exploring mental health. The goal of this lesson is to help us determine what our coping mechanisms are and how to change ineffective ones.
- Think about it this way: A lot of us use exercise to strengthen our bodies. Learning about coping mechanisms is a way to strengthen our minds. **CHANGE PPT SLIDE**
- If you want to change your ineffective coping mechanisms you need to become aware of the behavior you are using, then practice effective behaviors.
- It takes a unique amount of time for different people to change coping mechanisms. Mental health disorders can also complicate this process.
- When trying to adapt or change a coping mechanism, stay patient and don't give up. **CHANGE PPT SLIDE**

FACILITATOR NOTES:

This part of the lesson is vital to helping students understand the purpose of the activities they will be doing. Stress the introductory points to help everyone understand the goals of the workshop.



Exercise 1 (10 minutes):

INSTRUCTIONS:

Coping is the way we deal with stress from adversity, disadvantage and other problems in our lives. Some examples of coping mechanisms are drinking alcohol, self harm, flipping out or talking about your feelings with a friend. **CHANGE PPT SLIDE**



- For the next exercise, you are going to be working in pairs, so once I finish giving the instructions, choose a partner. If there is an uneven number it is okay to work in groups of three. **CHANGE PPT SLIDE**
- In a survey of 500 students, the top three answers to the question, "How do you cope with stress?" were eating, drinking alcohol and exercising.
- The survey showed that the most common causes of stress are school, dating, thinking about the future and finances. **CHANGE PPT SLIDE**
- You and your partner/s will have five minutes to write down 5 causes of stress, 5 feelings from those causes and 5 ways you cope with those causes/feelings.
- For example someone gets stressed out when they think about their future. It makes them feel nervous. They cope with that by talking about the future with their friends, sometimes they cope by drinking alcohol.
- Write down all of the causes, feelings from those causes and coping mechanisms you use now. **CHANGE PPT SLIDE**

SHARE:

- I want to hear from several groups about how the causes of stress make them feel and how they cope with those causes and feelings. **CHANGE PPT SLIDE**

SUMMARIZE:

- These lists of coping mechanisms are a start to helping us understand how we address stress and other difficulties in our lives.
- It's important to separate the causes from the feelings, because sometimes you are coping with how a cause of stress makes you feel. For example school may be a huge cause of stress, but is the feeling of being overwhelmed or afraid that leads you to cope a certain way. **CHANGE PPT SLIDE**
- We need to be able to identify what a coping mechanism is in order for us to be able to change it.
- We don't need to change all of our coping mechanisms. The next exercise will help us determine which ones we may want to work on making more effective. **CHANGE PPT SLIDE**



Exercise 2 (5 minutes):

INSTRUCTIONS:

- You now have two minutes to separate your first list of coping mechanisms into the categories of effective or ineffective coping.
- This exercise is meant to help you identify a coping mechanism that you might want to change.
- Discuss this question with your partner/s:
- Could any of the ineffective coping be made to be more effective? **CHANGE PPT SLIDE**



FACILITATOR NOTES:

This exercise is meant for students to identify their own coping mechanisms as a guide for themselves. You do not need to engage with students to help them see that a coping mechanism they feel is effective may be ineffective. The goal is for them to begin to identify these differences on their own.

Effective coping reduces stress, lessens the intensity of your triggers, allows you to face more challenges, helps you become more productive, and allows you to be more engaged with the people in your life.

Ineffective coping reduces your ability to address stress, prevents you from developing your mental health, and can be harmful to your overall physical/mental health. **CHANGE PPT SLIDE**

SHARE:

- I want to hear from several groups about how an ineffective coping mechanism could be more effective. **CHANGE PPT SLIDE**



SUMMARIZE:

- The longer we use a coping mechanism the harder it can be to change it.
- Our brains create pathways for our actions. The longer we repeat actions the more automatic they become.
- There are a lot of actions we've been doing for so long we don't even think about them anymore. We just do them. **CHANGE PPT SLIDE**



HOW WE TREAT OURSELVES (2 MINUTES)

Before we learn the steps for how to change an ineffective coping mechanism, it's good to think about how we treat ourselves. All of us have an inner voice that can play a large role in our confidence, understanding and what we think of ourselves. **CHANGE PPT SLIDE**



FACILITATOR NOTES:

This exercise can cause some students to realize how they talk to and treat themselves for the first time. It may lead to them having a lot of emotions. It's important to keep this exercise focused on the positives that can come from understanding self-compassion. If you feel your class needs to do this exercise anonymously with notecards please feel free to do so.

Exercise 3 (8 minutes)

INSTRUCTIONS:

- Think about a time that you faced rejection or loss. It could be a breakup, parents' divorce, loss of a friend, being bullied, someone being mean to you or death of someone close to you. Write the experience you had on the top of the paper.
- Draw a line in the middle of the page. On the left side write down all of the things you said to yourself as you went through this situation.
- On the right side write down all of the things you would say to a friend who was going through the same situation. **CHANGE PPT SLIDE**

SHARE:

- Let's have a few people share some of their answers.
- Please remember to be respectful of others during this exercise. Some of us may be coming to a realization for the first time and that will lead to sensitivity. **CHANGE PPT SLIDE**
- Let's have a few people share why they think they might treat a friend differently than they treat themselves. **CHANGE PPT SLIDE**

SUMMARIZE:

- We did this exercise to help show you that the way you treat yourself is sometimes harsher than the way you treat a friend.
- This is extremely common and you shouldn't feel bad if you are doing this to yourself.
- The purpose of this exercise was to show you how you can improve the way you talk to yourself. Changing the way you talk to yourself will help you tremendously in being able to change ineffective coping mechanisms. **CHANGE PPT SLIDE**



CHANGING COPING MECHANISMS (5 MINUTES):

It's important to know the steps you can take to change your coping mechanisms. These steps make changing an ineffective coping mechanism seem simple, but it's easier said than done. Depending on how long someone has been using a coping mechanism, it can take professional help, a lot of time, and an immense amount of work to achieve the change you want. **CHANGE PPT SLIDE**



1. Identify the coping mechanism you want to change.
 2. Recognize when you are coping in an ineffective manner.
 3. Replace ineffective coping with an effective coping mechanism.
 4. Practice the effective coping mechanism
 5. Be patient while trying to get results in changing the coping.
 6. Build a healthy environment to help change the coping.
 7. Acknowledge small victories, learn from setbacks. **CHANGE PPT SLIDE**
- Often people try to change how they cope, but when they can't do it in a week or a month they give up. It's very common to hear someone say they wanted to eat healthy, exercise, stop harming themselves or change a behavior and not know the steps to make the change last. Persistence is vital to develop a new behavior and achieve more effective coping. **CHANGE PPT SLIDE**



Exercise 4 (10 minutes):

INSTRUCTIONS:



- This next exercise helps us see how long it can take to learn a new behavior.
 - Take five minutes to talk with your partner about learning to do something you do well. That could be driving a car, playing an instrument, playing video games, riding a bike, or playing a sport. **CHANGE PPT SLIDE**
1. Who helped you learn how to do the activity you do well?
 2. What were some obstacles to learning the activity? How did you deal with those?
 3. What steps did you need to take to learn the activity you do well?
 4. How long was it between the first time you tried this activity until you could do it really well? How long did it take until you felt like you could do this activity without thinking about it?
 5. What motivated you to keep trying to learn how to do this activity? **CHANGE PPT SLIDE**



SHARE:

- Let's have three different groups share their answers for each question.
- Let's have a couple of people answer what did you learn about how long it takes to learn a new behavior?
- Let's have a couple people answer how learning a new behavior ties into building more effective coping mechanisms? **CHANGE PPT SLIDE**

SUMMARIZE:

- The goal of this exercise was to help us understand what it takes to learn a new behavior.
- As you were learning how to do another behavior, your brain was creating new pathways and connections to help you do this. For most people, strengthening those pathways improves their ability to do something new.
- It can take months or years to create effective coping mechanisms. Practicing the new behavior and being patient is really important. **CHANGE PPT SLIDE**

- Some effective coping mechanisms you can try are exercise, writing, reading, yoga, meditation, hanging out with/talking to friends, volunteering, relaxation or sleep. **CHANGE PPT SLIDE**
- Being committed to your coping can better prepare those with a mental health disorder during times of crisis.
- Effective coping is one of the pillars of optimal mental health. Learning how to build more effective coping helps us in all areas of life.
- Sometimes to better understand our coping we need to seek help from a mental health professional. **CHANGE PPT SLIDE**

Next Lesson:

In the next lesson we'll learn about how to help a friend who might be struggling with his or her mental health. If you need to talk to someone about your mental health, the campus counseling center is a great place to start.

FACILITATOR NOTES:

We recommend scheduling the workshops on a calendar at the start of the semester. Let the class know when the next Behind Happy Faces workshop will take place.

[< BACK TO TABLE OF CONTENTS](#)

CHANGING INEFFECTIVE COPING

Exercise 1

List 5 Causes of Stress

List 5 Feelings from Those Causes

List 5 Coping Mechanisms

Exercise 2

Look at your list of 5 coping mechanisms. Separate the list into two categories effective or ineffective coping mechanisms.

Effective coping reduces stress, lessens the intensity of your triggers, allows you to face more challenges, helps you become more productive and allows you to be more engaged with the people in your life.

Ineffective coping reduces your ability to address stress, prevents you from developing, your mental health, and can be harmful to your overall physical/mental health.

Exercise 3

On the back of this page draw a line down the middle of the page. At the top of the page write down a difficult event you experienced like a bad grade, parents' divorce, death or some kind of rejection. On the left side write down all of the things you said to yourself when you went through this. On the right side write down all of the things you would say to a friend in the same situation.

Exercise 4

1. Who helped you learn how to do the activity you do well?
2. What were some obstacles to learning the activity? How did you deal with those?
3. What steps did you need to take to learn the activity you do well?
4. How long was it between the first time you tried this activity until you could do it really well? How long did it take until you felt like you could do this activity without thinking about it?
5. What motivated you to keep trying to learn how to do this activity?

BEHIND HAPPY FACES

Lesson 4: Before the Breakdown

This lesson helps you learn more about how to approach a friend who needs help, recognize signs of a mental health breakdown, and learn tips of what actions to take when you believe someone is suicidal. This lesson is important in helping women be better prepared to assist their friends.

For college students who have had suicidal thoughts, 67 percent report they first disclosed them to a friend. Most people also first disclose other serious mental health challenges to friends. Helping women be prepared to take action during times of crisis is a necessary step for intervention and prevention of worst case scenarios. It is also vital for women to know they cannot be a friend's therapist, and the best thing they can do is get their friend to a professional equipped to help her.

Facilitator:

To facilitate this lesson effectively, it is helpful to have experience or training as a facilitator in other areas of campus life. If you have a member who is or has been a resident assistant, student organization leader, peer advocate, or even is studying to be a teacher, she could be an excellent facilitator for this program.

Time needed:

45 minutes

Objectives:

- Identify warning signs of someone who may be experiencing a severe mental health breakdown.
- Demonstrate what actions are helpful to approach a friend, family member or partner who needs help.
- Differentiate the differences between what a friend can do and what can only be done by a mental health professional.

Setting:

- Choose a room that offers a lot of open space for small groups to be able to spread out and not be distracted by others. Members need to be able to either sit and gather on the floor or move chairs around into small groups.
- You will play a PowerPoint presentation and videos during the lesson, so connect a laptop to a projector and screen.

Group size:

The chapter should be divided into small groups for the workshop. Groups should be no larger than 10 to make sure connections and conversations remain personal.

- Before the lesson begins, ask members to count off into groups of 10 (or less), then move to different areas of the room.

- We recommend placing a trusted member or chapter officer in each group who can help follow instructions and facilitate small group discussion.
- If your chapter has more than 200 women, we recommend using more than one room with different facilitators.

Program flow:

- To start, play the “Lesson 4, Video 1” video to introduce the subject matter. Then lead each group through the three exercises.

Materials:

- For each small group: One piece of paper, markers, Talk to a Sister handout

Before you begin:

- Test the video, sound and PowerPoint before the lesson begins to ensure everyone will be able to hear and see the video. This is crucial to the program’s success.
- Gather supplies.

Make sure to print enough copies of the Talk to a Sister handout for each small group. Bring extras!

Print and cut enough Support a Sister cards for each person.

- Break the chapter into small groups as people arrive. Groups should be no larger than 10 people. If you have a chapter smaller than 50 women, consider groups of five people.
- Distribute supplies to each group/person.



Introduction (2 minutes)

- In the first lesson, we explored what mental health is and the barriers preventing us from seeking help. In the second lesson, we covered different categories for mental health challenges and how to have a balanced life. The third lesson was about how to create more effective coping mechanisms. This final lesson is about how to help a friend who might be struggling with mental health challenges.
- The goal of this lesson is to reach people before they breakdown—before it is too difficult to get them the help they need. **CHANGE PPT SLIDE**



Lesson 4, Video 1: “Before the Breakdown” Video (10 minutes)

This video features an introduction from Ross Szabo and clips of young women talking about what they have gone through after losing someone close to them, as well as what they have done to approach a friend.

Exercise 1 (10 minutes)

INSTRUCTIONS:

- In this small group activity, you will share a time you intervened in a friend’s life because you were concerned about him or her.
- You will do this completely anonymously, but it requires trust and a willingness to share.
- I am going to read the instructions, then you can get started. **CHANGE PPT SLIDE**

1. On your notecard, write what your friend was doing that led you to feel you needed to intervene. For example, it could be after a breakup, when someone wasn’t doing well in school or another situation. If you have never helped a friend in this situation, write about a time where you think you could have.

2. Next, write down if your attempts to help that friend worked or did not work.

3. Pass all of the cards to one person in the group.

4. That person will shuffle the cards and pass one to each member.

5. Then read the cards aloud to the group.

6. Go around the group again and have each member say one word or theme that stuck with her about helping a friend. **CHANGE PPT SLIDE**

SHARE:

Let’s have several groups share some themes they heard as they did this exercise. **CHANGE PPT SLIDE**

SUMMARIZE:

- We did this exercise to show how common it is to intervene in a friend’s life. We are not always successful in doing this.
- There are a lot of reasons why we may or may not be successful. The next exercises are designed to help us better understand how to approach a friend. **CHANGE PPT SLIDE**



Exercise 2 (10 minutes)

INSTRUCTIONS:

- This next exercise will help us understand how to approach a person experiencing a mental health challenge.
- This could mean talking to a friend who has anxiety or depression, went through a break-up, got rejected, is drinking or abusing drugs, or other similar situations.
- These exercises are not intended for someone who you think is suicidal. We will address that later. **CHANGE PPT SLIDE**
- In your groups, think about the following scenario. You notice a change in your friend's behavior that causes you concern. She is not eating regularly. She is constantly stressed. You feel like she's hiding her emotions.
- You will take five minutes to discuss the questions on the Talk to a Sister Handout to help you better understand how to approach your friend.
- After your group has answered the questions, a representative from each group will report your answers to the large group. I will let you know some positive answers. **CHANGE PPT SLIDE**



Write five ways you can express you are having this conversation because you care about your friend.

Acceptable answers to this question should include:

- "You are not doing the things you used to do, and I am concerned about you."
- "I am your friend and want to make sure you are OK."
- "I know you would do the same for me."
- "Sometimes people do not think these kinds of things can get better, but it is important to try."
- "I know it can be hard to talk about these things, but it is the only way that you can find away to address this." **CHANGE PPT SLIDE**

Write down five open-ended questions you could ask your friend to help her talk about what she is going through.

Acceptable answers to this question should include:

- "How are you?"
- "How have you been feeling?"
- "What have you been thinking about?"
- "Is there anything stressing you out right now?"
- "Do you feel like anything has changed in your life?"
- "Do you want to talk about anything?"
- "Is there anything I can do for you?" **CHANGE PPT SLIDE**

FACILITATOR NOTES:

SHARE:

After everyone is done with the worksheet, ask several groups how they responded to each question.

SUMMARIZE:

Below, we list the questions from the handout along with positive answers to review with the chapter. After you facilitate sharing for each question, summarize the recommended responses/answers for the chapter.

Write down five steps you can take if your friend refuses to get help and her situation gets worse

Acceptable answers to this question should include:

- Talk to a counselor about steps you can take.
- Research the problem to see what might work for other people in a similar situation.
- Never give up.
- Let her know you care and your door is always open to her.
- Keep listening to anything she says.
- Do not judge her. **CHANGE PPT SLIDE**

You are not a psychologist.

- In your group, make a list of what a doctor and/or physical therapist could do to help a person with a broken leg. Then, make a separate list of the ways you can or have helped a friend/family member who had a broken leg.
- Look at the lists and notice there are things a doctor can do that you cannot. There are also things you can do that a doctor cannot. Both roles are valuable in helping a person. Much like you cannot set a bone and put on a cast, you also cannot diagnose a friend and be her therapist. **CHANGE PPT SLIDE**
- Write down six things you can do to take care of yourself while your friend is in a mental health crisis.
- As you are trying to help a friend, you may not be able to sleep because you are texting her all night. You stop doing normal things like eating, studying and working to be there for your friend. List steps you would take in this scenario to better care for your mental health while helping your friend. **CHANGE PPT SLIDE**

Acceptable answers to this question should include:

- Get sleep.
- Talk about how your friend is affecting your life.
- Exercise.
- Make time for yourself.
- Do something fun.
- Write about your emotions.
- See other friends or family.
- Practice yoga or meditation. **CHANGE PPT SLIDE**

SUMMARIZE:

- When reaching out to a friend, it is important to establish trust and a system to be able to help.
- Being aware of the person's feelings and learning how to effectively engage her leads to more success in getting her the help she needs.
- Mental health challenges are extremely individualized. It can be hard to know exactly how to reach someone.
- If you are concerned about a friend or family member, one of the best things you can do is go to the counseling center and talk to a counselor about the person to find out more about your options. **CHANGE PPT SLIDE**

Exercise 3 - Understanding Suicide (10 minutes)

- Let's come back together as a group and talk about how to respond to someone who is thinking about taking her own life.
- When a person is suicidal, the steps we just learned change. The approach is more direct, and it is vital to take action. **CHANGE PPT SLIDE**
- A lot of students do not know the difference between feeling depressed and having depression. **CHANGE PPT SLIDE**
- When someone feels depressed, upset or sad, she typically knows the cause. A person can go through a break-up, rejection, divorce or experience the death of a loved one and know why she is upset.
- The opposite of feeling depressed is happiness. **CHANGE PPT SLIDE**
- When someone has depression she often doesn't know the cause. She feels lonely, stops doing the things she enjoys, doesn't have energy, sleeps all day, stops taking care of herself, doesn't find interest in things she typically enjoys. People who have depression commonly have thoughts about death and suicide.
- The opposite of having depression is vitality. **CHANGE PPT SLIDE**
- If a person experiences a difficult event or traumatic situation they can feel depressed for a long time and then develop clinical depression.
- A person is more at risk for having a difficult event trigger depression if there is a history of depression in his or her family.
- Whether you feel depressed or have depression you should talk to a professional about what is happening. They can help you determine the difference. You should never self diagnose or determine what you are going through on your own. **CHANGE PPT SLIDE**
- In many situations, people care about a friend, but do not know what signs to look for that she may seriously be contemplating suicide. Let's make a list of the biggest warning signs. What do you think the signs are? Call them out and I will write them down. **CHANGE PPT SLIDE**

FACILITATOR NOTES:

Bring everyone back together into one large group.



FACILITATOR NOTES:

Write down the warning signs that someone is suicidal on a flip chart piece of paper as members say them aloud. After you create your list go over the main signs with the PowerPoint.

Let's go over a list from the American Foundation for Suicide Prevention to ensure we covered all of the warning signs. **CHANGE PPT SLIDE**

- Talking about wanting to kill herself, or saying she wishes she was dead.
- Looking for a way to kill themselves, such as hoarding medicine or buying a gun.
- Talking about a specific suicide plan.
- Consistently feeling hopeless or having no reason to live.
- Feeling trapped, desperate or needing to escape from an intolerable situation.
- Having the feeling of being a burden to others.

- Feeling humiliated.
- Having intense anxiety and/or panic attacks.
- Losing interest in things or losing the ability to experience pleasure.
- Insomnia.
- Becoming socially isolated and withdrawn from friends, family and others.
- Acting irritable or agitated in a highly unusual manner.
- Showing rage, or talking about seeking revenge for being victimized or rejected, whether or not the situations the person describes seem real. **CHANGE PPT SLIDE**
- The actions you take when someone is thinking about suicide are important. The video covered the main actions to take. Here they are again:
 - *Try to get them to a professional.*
 - *Know the warning signs.*
 - *Do not handle the person alone.*
 - *Be direct with your questions about suicide.*
 - *Do not judge.*
 - *Do not keep secrets.*
 - *Remove harmful objects.*
 - *Never leave the person alone.*
 - *Call for help.* **CHANGE PPT SLIDE**

Exercise 4 - Frequently Asked Questions About Suicide (5 minutes)

INSTRUCTIONS:

- When someone is suicidal it's difficult to know what to say.
- We're going to go over some of the most frequently asked questions about suicide from the American Foundation for Suicide Prevention. **CHANGE PPT SLIDE**

Q: If someone really wants to end their life, is there anything I can do to stop them?

- **A:** Most of the time, when someone thinks or talks about suicide they actually have mixed feelings about dying. Most often, suicidal feelings come from having a mental illness, and these illnesses can be treated with professional help. Medication, talk therapy, or a combination of the two has been shown to save lives. The best way to help is to encourage and assist the suicidal person to get the help they need. **CHANGE PPT SLIDE**

Q: What should I do if I encourage a suicidal person to get help but they refuse?

- **A:** To someone feeling suicidal, depressed or anxious, the idea of talking to a doctor or mental health professional can seem overwhelming. Sometimes suicide seems like the only way to control their pain. Continue to tell them that you're concerned about them, and to suggest that a professional who understands what they are feeling can help them to feel better. Let them know you're there to listen, and offer help finding or getting to a doctor, mental health professional, or hospital emergency room. You can also help by staying with them and calling the National Suicide Prevention Lifeline at 1-800-273-8255. If you're concerned they will hurt themselves call 911. **CHANGE PPT SLIDE**

Q: If a friend confides in me that they are thinking of suicide and makes me promise not to tell, shouldn't I respect their right to privacy?

- A: Privacy is very important, but your friend's life is even more important. Depression and other mental disorders may be distorting their judgment and leading them to want to hurt themselves. Even if you lose your friendship, saving a life is the most important priority. Tell someone you trust about your friend and ask for their assistance getting them to a professional. **CHANGE PPT SLIDE**

Q: My friend purposely cuts herself when she is upset. IS this the same as making a suicide attempt?

- A: Some people cut or otherwise hurt themselves when they feel overwhelmed by difficult or stressful feelings, or to relieve their inner tension. Many people who cut themselves never attempt to kill themselves. However, in some cases, self-harm is the first indication that someone may be at risk for suicidal behavior. Whether or not they feel an impulse to take their own lives, someone who is cutting or otherwise hurting themselves needs help. Health and mental health professionals are trained to determine whether a person is at risk for suicide, and to suggest a treatment plan to help them with their self-harm behavior and underlying feelings. **CHANGE PPT SLIDE**

- **Q. Is someone who has had suicidal ideation or a recent attempt and is now feeling better still at risk for suicide?**
- A. Successful treatment for serious depression or suicidal behavior significantly reduces the long-term risk for suicide. However, it can be difficult to know where a suicidal person is in their recovery. Someone who has felt suicidal may work hard to hide his or her feelings, and may appear to be functioning well socially, professionally, or academically. In some cases, a person who has made the decision to die may seem calmer and at peace. Each year suicide claims the lives of people who seemed happy, well-liked, and successful to his or her friends, families, and others around them. Staying in treatment after the suicidal thoughts and symptoms seem to be getting better is the best way to ensure a successful recovery. The decision to stop treatment should be made together by the mental health professional and patient. **CHANGE PPT SLIDE**

Conclusion (2 minutes)

- The goal of this lesson was to provide you with tips on what you might be able to do to help a friend.
- This advice should never take the place of professional help or guidance. If you are worried about a friend, please talk to a counselor, mental health professional or call 1-800-273-TALK (8255). **CHANGE PPT SLIDE**
- We gave you signs to look for when a friend is suicidal, but this does not mean you are trained to treat someone who is suicidal. The most important thing a friend can do when someone she cares about is in crisis is get that person to a mental health professional.
- If you need to talk to someone about your mental health, the campus counseling center is a great place to start. **CHANGE PPT SLIDE**
- If a person experiences a difficult event or traumatic situation they can feel depressed for a long time and then develop clinical depression.
- A person is more at risk for having a difficult event trigger depression if there is a history of depression in his or her family.
- Whether you feel depressed or have depression you should talk to a professional about what is happening. They can help you determine the difference. You should never self diagnose or determine what you are going through on your own. **CHANGE PPT SLIDE**

[< BACK TO TABLE OF CONTENTS](#)

Behind Happy Faces is sponsored by Zeta Tau Alpha

TALK TO A SISTER

List 5 ways you can tell your friend you're having this conversation because you care about them:

List 5 steps you can take if your friend refuses help and their situation gets worse.

Write down 5 open ended questions to help your friend talk about what they are going through.



List 6 things you can do to take care of yourself while your friend is dealing with a mental health crisis.

Make a list of what a doctor or physical therapist can do to help your friend who has a broken leg and make a list of what you can do to help a friend.
