Creating a Mental Health Informed Classroom Working as One

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Disclaimers

- This presentation is not to be considered clinical but educational. Relying on ouch as ooops is not available.
- It does not represent the opinions of the WTCS, WCTC, the DOC, or AAH.
- There is no remuneration, nor is anything being marketed or sold. I have no financial disclosures or conflicts of interest with the material in this presentation.
- I encourage you to be mindful. There is evidence to show Mindfulness helps with many things including mental and physical health, education, problem-solving, and creativity.
- Each of us has our own style as teachers, and our own unique learning environment. I hope the tips and tricks I describe you will make your own and include or revise as appropriate
- What if we don't engage? No Problem this is challenge by choice activity, but please don't get in the way of others' learning/trying. By the way... choosing not to do something can be mindful too.
- View previous sessions

Share... (objectives)

- Why boundaries matter
- Welcome students through best practices of Diversity, Equity, and Inclusion
- Identify the frequency of mental illness, and challenges for students
- Avoid Diagnosing and Review how to Respond to Disclosures of Mental Illness
- Self-Care & Teaching Strategies

Boundaries

Model – discuss what you can and cannot do/be

"Daring to set boundaries is about having the courage to love ourselves even when we risk disappointing others"

BRENE BROWN

- Strong boundaries are foundational strong is not the same as rigid.
- Attachment issues and research (maybe more for counselors),
 - Shorey, H.S. (2010) Maddux & Tangney Eds & 2022, Psych Today)
 - Benjamin, L. S. (2010 Maddux & Tangney Eds, & 2018)

Setting boundaries is an act of love towards yourself and an act of respect towards others.

Diversity, Equity, and Inclusion

- Do more than acknowledge Diversity: Welcome it! Embrace it! (Invisiblity. This prepares students for their future work)
- Equity, is not the same as equality, treating people the same is not always fair. What are we doing to help all people fully access our material? Universal Design, and we prepare students for their future work. (CC, Screenreader, etc.)
- Inclusion what do our images, examples, cases, speakers, videos look/sound like?

Intersectionality



Mental Illness is Common

- 1,000,000 people in WI have a mental illness Lambeau x 14
- Surviving and Thriving with mental illness is common
 - If you think about it, many people with mental illness are profoundly resilient as they are getting along while dealing with their illness.
- Suicide is within the top 10 causes of death in WI, and among young people (10-34yo) the second leading cause of death. It is preventable! See the Golden Gate Study
- Nonetheless Mental Illness can be a challenge how can we apply concepts of Diversity, Equity, and Inclusion
- Share what you see being hard for students in chat, please.
- This is why we are here today...

What events have happened on your campus and in your community?

• Our classes, campuses, and communities do no exist in isolation

 What things have happened to your students (them, their kids, their significant others, their families)? On your campus? In your community?

 Without graphic details or specific names, please list things in the chat...

How can we as a campus, department, or class respond to events like these?

- Waukesha Christmas Parade as an example
- Contacted the President, VP of Learning, Dean of Counselors, and Counselors, HR (EAP), and my Associate Dean and Dean
- Reminded people about vicarious trauma and to avoid graphic details
- Watch for shifts in behaviors, dissociation, and address them
- Get people to the help they want / need
- What accommodations can you make universal rather than special needs.
 - Can a due date be made flexible, can you strategize an alternative learning activity?
- I emphasized coping in my own class, highlighted the powerful helping response of the community – what worked.
- We can almost always do better I regret not reminding the above again as the anniversary and verdict approached





THIS CLASSROOM IS A





Who might be mentally III? We can't know... Why does it matter? What biases might be present?



Don't Diagnose

- There are only three reasons to diagnose
 - Reason to treat
 - Expedient Communication among Clinicians
 - Research
- If you are not qualified, you might be practicing medicine without a license
- If you are qualified, but it is not your role, there may be an ethical violation
- People are NOT disorders or illnesses. They HAVE them
 - Avoid She is schizophrenic, instead encourage people to use She has schizophrenia, and only if it matters
 - Avoid He is anorexic, but rather use He has anorexia, and only if it matters

If students disclose that they have a condition

- Thank them for sharing issues of trust, acceptance, vulnerability, etc.
 - If students do it publicly, possibly clarify how none of us can speak for all of a group, and re-engage in the topic of your lesson. **Don't out students!**
- Ask them if they have or need accommodations (refer them to your appropriate department for services – do not determine their accommodations on your own).
 - You might want to reach out to that department / those staff as well, possibly facilitate introductions.
- Ask them if they need help getting in touch with other campus services, for example counselors.
- Document what you did, consult, document that too, concrete behavior, do not diagnose.
- If you are concerned about their safety, ASK and refer as needed.

What wears you out? What helps you recover?



Self-Care

What wears you out? Please share in chat...

• What helps you recover? What are some of your self-care strategies? Please share in chat...

Self Care

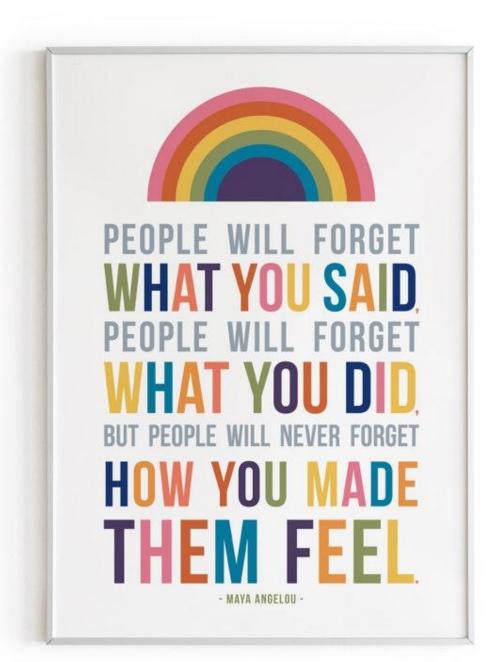
- Like Boundaries, Self Care is not Selfish Airlines even teach it to us...
- Can be simple, and should be deliberate a deep breath
- Diet healthy snacks, good hydration, rest, what thing do you need?
- Activity chair yoga
- Rest and sleep
- Time with people or alone
- Self-Talk
 - avoid shame,
 - avoid negative self-talk,
 - no shoulding on yourself
- Next time, I will...
- Be Assertive help people help you
- Play, Create, and be Grateful
- If you have to, apologize (create an oops and ouch environment)



Teaching strategies

- Center / Ground Yourself (MDs of old, and Polyvagal Theory)
- Make your classroom welcoming & safe
- Focus on people
- Help students center / ground
- Help students focus on learning, not grades
- Normalize mental illness,
- and even more importantly normalize getting help!
- Consider finding occupational examples of people with mental illness in history and highlight their contributions, not their illness
- Help students access resources
- Help students see they are more than a label, and now is not forever
- Practice mindfulness contrast here and now focus

Maya Angelou



Resources

- 9-1-1 or ER when imminent
- Lifeline 9-8-8 (previously 1-800-273-TALK (8255) https://988lifeline.org/
- Crisis Text Line Text HELLO to 741741, Free, 24/7, Confidential
- Big White Wall https://togetherall.com/en-gb/big-white-wall/
- NAMI started in WI (great example of grassroots how can a person make a difference)
- 2-1-1
- Counseling staff (peer programs?)
- Library staff (see next slide for article- Singer, H. 2020)
 - Have speakers in the library, NAMI, faculty, counselors, agencies
 - Create a directory
 - Provide input into the collection
- Psych (other helping professions) faculty
- SAMHSA Substance Abuse & Mental Health Services Administration
- Recognize, Respond, Refer
- http://breakingprejudice.org/ Breaking the Prejudice Habit (resources and activities and assignments about discrimination and prejudice).
- https://sites.google.com/site/ericahwojcik/bipoc-psych-papers-spreadsheet

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