



Canadian Mental
Health Association
Nova Scotia
Mental health for all

Association canadienne
pour la santé mentale
Nouvelle-Écosse
La santé mentale pour tous

MENTAL WELLNESS AND RESILIENCE TOOLKIT

WELLNESS IS WITHIN YOUR REACH!



ABOUT CMHA NS DIVISION



**Canadian Mental
Health Association**
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The Canadian Mental Health Association (CMHA) is a national charity that helps maintain and improve mental health for all Canadians.

As the leader and champion for mental health, in Nova Scotia, CMHA NS Division promotes the mental health of all and supports the resilience and recovery of people experiencing mental illness and mental health challenges.

With our branches in Halifax-Dartmouth, Colchester East-Hants and Southwest Nova, CMHA delivers safe, inclusive evidence-based programs, training and navigation support that helps all Nova Scotians be well and stay well.

These programs are free to access and available to everyone living in Nova Scotia.

Together with our branches, we advocate for policy change that addresses housing, employment and job insecurity, working life conditions, social inclusion and non-discrimination. We are also part of a federation, which means we are a collective of organizations across the country, bound together by a brand and mission.

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INTRODUCTION

THE THREE FOUNDATIONS

These are the building blocks of the entire Toolkit.

You will notice these themes and concepts coming up repeatedly throughout this book.

- 1)** Everyone has mental health. We all move up and down on the mental health continuum.
- 2)** The Social Determinants Health and mental health are inseparable.
- 3)** We each have a role to play in our own mental health and in building mentally healthier communities.

The aim of this toolkit is to provide tools, guided reflections, and information that can be used to support ourselves and others as we deal with the stressors of life and take the steps towards community wellness that are within our reach.

Our mental health is deeply connected to the struggles and stresses we regularly face, and this toolkit aims to prepare everyone to support their own mental wellness and give them the skills to contribute to a mentally healthier community.

Part 1 of the toolkit is divided into three sections, with each section building on the last. Each section is designed for people to work through either as an individual or with others.

WHAT'S INSIDE THE TOOLKIT?



When you see this symbol in the Toolkit, it means there is an activity or reflection exercise connected with that section.

Please feel free to print off or photocopy the worksheet pages. They are all found in the appendix at the end of the Toolkit.

The toolkit can be useful for deepening conversations and understandings about mental health and can offer some practical tools for use in an individual's life.

Not every component or activity may be relevant for your needs and it is recommended that you use the toolkit as it is appropriate for you.

If you are a service provider, it is suggested that you work through the toolkit yourself before guiding someone else through the work.

SECTION 1: UNDERSTANDING MENTAL HEALTH AND DEVELOPING SELF-AWARENESS

Section 1 begins with some information on the social determinants of health and how mental health is impacted by the social determinants of health. The section includes information on what mental health is and has a variety of strategies and tools for you to better care for your mental health.

Caring for your own mental health is as important as caring for the mental health of others, because when we care for our mental health, we can become better able to cope with uncertainty, support those around us, and contribute to change in meaningful ways.

As every person has different needs, some of these strategies will work better for you than others - do not be discouraged! These tools are designed for you to try several and see what works best for you.

The goal of Section 1 is for you to improve your understanding of what mental health is, know how to care for your mental health, and reflect on addiction as a coping mechanism.



We have included a Glossary at the end of the toolkit with definitions for bolded words or phrases.

SECTION 2: CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

Section 2 focuses on creating a supportive environment both in your community and in the workplace. When we contribute to our communities and welcome contributions from others, we can start to develop a culture that encourages inclusivity, meaningful connections and community care.

The goal of Section 2 is for you to be able to recognize stigma, to feel comfortable having conversations about mental health, to identify your network of support, and to work toward creating a supportive workplace environment.

SECTION 3: SUPPORTING SOMEONE THROUGH A MENTAL HEALTH CONCERN OR IN CRISIS

Section 3 covers what to do when someone is experiencing a Mental Health Concern and Mental Health Crisis, as well as discussing suicidal ideation. Although you can skip ahead to this section, it is strongly suggested that the previous two sections be completed first.

While this section does provide advice for assisting someone in crisis, it does not replace professional help or training. This section is a tool in your toolkit and should be used as such.

The goal of Section 3 is to develop strategies for someone who discloses a mental health concern or a mental health crisis, to know where to access crisis numbers and supports, to have a basic understanding of how to respond to suicidal ideation, and to have an aftercare plan for yourself.

By opening this toolkit, you have taken the first steps to building a stronger and more resilient community. This toolkit is not about perfection - it is about progress.

Be kind to yourself throughout this process and know that you are making a difference for yourself and your community.

We are in this together.

**“IT IS IN COLLECTIVITIES THAT WE FIND
RESERVOIRS OF HOPE AND OPTIMISM.”**

— ANGELA Y. DAVIS

UNDERSTANDING MENTAL HEALTH AND DEVELOPING SELF-AWARENESS

SOCIAL DETERMINANTS OF HEALTH

Mental health is complex and is affected by many factors, including how we take care of ourselves, how we interact with those around us, how we are supported in our workplaces and communities, and how the social determinants of health impact our lives.

The social and cultural determinants of health are the non-medical factors that influence our health.

As we work through this Toolkit, we will address many aspects of individual and community mental health. The influence of the Determinants of Health is important to understand and reflect on as we learn more about our mental health.

Some Social Determinants of Health (conditions which impact our health):

- Education
- Employment and working conditions
- Food security
- Gender
- Geography (Rural or Urban)
- Access to health and social services
- Housing
- Immigration status
- Income level
- Indigenous ancestry
- Impacts of racism
- Social exclusion
- Access to social safety net

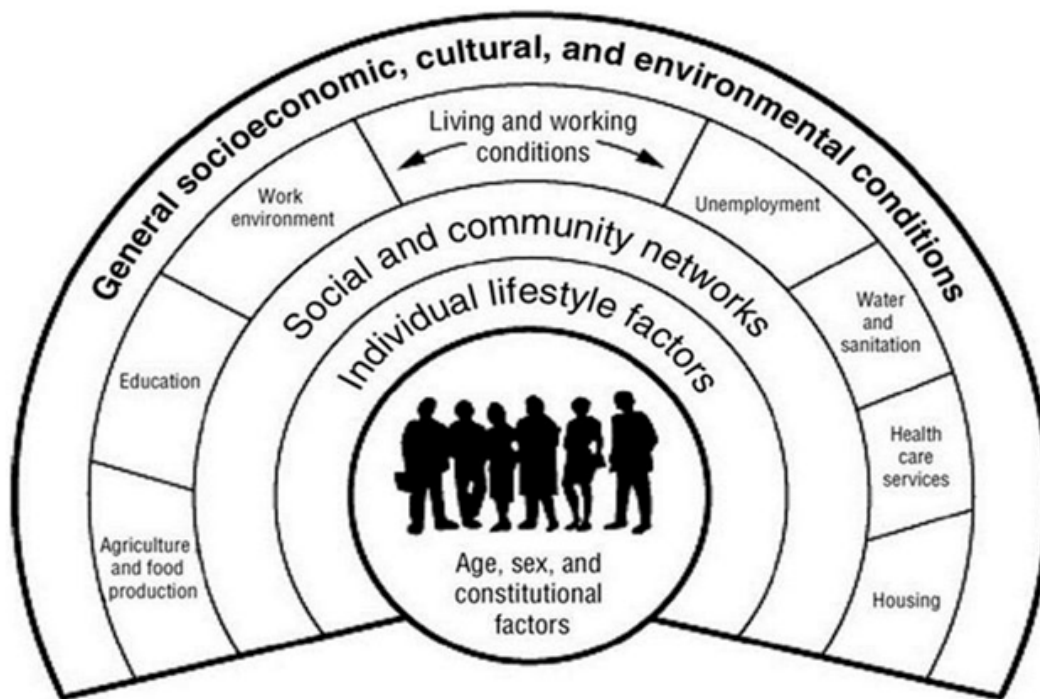
According to the Canadian Mental Health Association – Ontario, there are three types of social determinants that significantly impact on mental health:

- Freedom from discrimination and violence
- Social inclusion
- Access to economic resources

Source:

World Health Organization [WHO/Europe](#) | [Social determinant](#)

Raphael, D., Bryant, T., Mikkonen, J. and Raphael, A. (2020). *Social Determinants of Health: The Canadian Facts. Social Determinants of Health: The Canadian Facts, 2nd Edition*



Dahlgren G, Whitehead M. The Dahlgren-Whitehead model of health determinants: 30 years on and still chasing rainbows. *Public Health*. 2021 Oct;199:20-24. doi: 10.1016/j.puhe.2021.08.009. Epub 2021 Sep 14. PMID: 34534885.

Social and cultural determinants of health are the interrelated social, political and economic factors that create the conditions in which people live, learn, work, play and age.

Health inequities occur when some people in a population have the resources and opportunities they need to achieve their full health potential, and others do not.

Many health inequities are due to factors beyond the control of individuals (e.g., history, economic and social conditions, discrimination). People living in poverty and who experience other forms of discrimination (e.g., discrimination based on gender, race/ethnicity, disability) are likely to experience more illness, stress and injury, and even to live shorter lives.

Improving access to the social determinants of health is one way to improve mental health.

Check out this link for a Poverty Assessment Tool: It is a clinical tool designed for primary care providers to better identify and serve clients who may be impacted by poverty.

www.cfpc.ca/CFPC/media/Resources/Poverty/Poverty_flowNS-2016-Oct-28.pdf



Please see Section 1 Activity 1: Your Social and Cultural Determinants of Health (p.44)

Changing the determinants of health requires systemic change. Systemic change can be thought of as lasting changes in our communities that address all of the individual barriers that impact health, such as housing, food security, or health care.

Working towards systemic change for improved mental wellbeing across our population is important work. It is also long-term work that requires patience, persistence and ongoing learning, change, communication, and care.

SOCIAL DETERMINANTS OF HEALTH AND MENTAL HEALTH

Now that you have reflected on the social determinants of health, it is time to dive into what mental health means. As we navigate these determinants or work to change their impact, there are things we can do to care for ourselves and for the people around us.

We are individually and collectively dealing with many challenges – from economic problems, housing shortages, to climate crises and a global pandemic. It's no secret that our mental health is deeply affected by the uncertainties of the world and by the struggles and stresses we regularly face.

As we deal with these challenging situations, we need to build our skills to help ourselves and our communities to keep going and thrive.

This section focuses on three major topics:

1. Defining mental health and mental wellness
2. Exploring your personal connection to self-care
3. Positive and Negative **coping mechanisms**

After reading this section of the toolkit and completing the accompanying activities you should be able to:

1. Name some self-care strategies that work for you
2. Be able to guide someone else in naming self-care strategies
3. Understand the difference between mental health and mental illness
4. Understand the relationship between stress and substance use



WHAT IS MENTAL HEALTH?

There are many ways to understand mental health and wellness. Some cultures or communities relate mental health to physical or spiritual health, or to connections to one's community or place. Something that might be considered a mental health problem in one culture or community might be seen as a unique strength in another.³

In Western culture, definitions of mental health tend to look at the individual - a person's state of well-being, ability to enjoy life, sense of purpose, and ability to manage life's highs and lows.⁴ When we think of mental health, we often think of mental illness – depression, anxiety, bipolar disorder, schizophrenia, etc. However, mental health encompasses more than just mental illness, and having good mental health is about much more than the absence of mental illness.

Mental Health refers to our overall state of well-being.

Everybody has mental health. When we are generally able to handle life's highs and lows, we might say our mental health is good, or that we are experiencing mental wellness.

For more information about different cultural views of mental health please visit: <https://multiculturalmentalhealth.ca/>

When we are struggling to cope, we might say our mental health is not very well, or that we are struggling with our mental health. It is important to note that someone might live with a mental illness, but still be in good mental health! We will explore the continuum of mental health further in this section.

Mental illness is a significant disturbance in thought, feeling, and perception that is severe enough to affect a person's day-to-day functioning.⁶ Mental illnesses tend to fall into patterns that can be diagnosable by a trained professional (a doctor, psychiatrist, or psychologist). They can be severe and/or chronic, or can be episodic, occurring once in a person's life, never to occur again. Perceptions of what Western medicine describes as mental illness also vary with culture.⁶

Seeking out and receiving a medical diagnosis is required for medication and usually for work or school accommodations. It can also be time consuming, emotionally draining, and difficult to access. For this reason, sometimes people self-diagnose, and some find that recognizing patterns of thought and learning ways to manage those patterns can be helpful to them in their own recovery.



Please see **Section 1 Reflection: Mental Wellness** (p.46)

MENTAL HEALTH AS A CONTINUUM

It is entirely possible to live with a **mental illness** and be in good mental health, just as it is possible to not have a mental illness and be in poor mental health.

It can be helpful to view mental health as a continuum⁴, with mental wellness on one end and mental unwellness on the other.

As we can see in the diagram below, **mental wellness** typically includes feeling physically well, having normal sleep patterns and fluctuations in mood, having consistent performance, and being socially active. On the other end of the continuum, mental unwellness may include high levels of anxiety and low mood, having disrupted sleep patterns, being physically ill, absenteeism, and isolation from others.

A person can fall anywhere on this continuum depending on different circumstances, and at various times in their lives.

For example, when a person feels a sense of purpose, has strong relationships, and feels connected with others, has a good sense of self, has healthy **coping mechanisms**, and who generally enjoys life may sit closer to the green zone of the continuum.

In some Indigenous cultures, strong connections with family, community and nature may also be important to mental wellbeing.⁷

This toolkit is based on an understanding of mental health rooted in Euro-Canadian concepts of health and wellness.

The creators of the Toolkit are middle-class professionals of European ancestry with lived, clinical, and/or community experience of mental illness and mental health.

We are aware that people of other cultural and class backgrounds may have different perceptions of mental illness and mental wellness.

We have attempted to ensure that the Toolkit is as open-ended as possible to allow for the reflection of other points of view in the content and use of the Toolkit.

Please feel free to adapt, adjust and change any activities or content as needed to reflect your experience and community.

However, during times that a person feels they lack purpose, does not have strong relationships or connections, has unhealthy coping mechanisms, or is not enjoying life, they may find they are sitting closer to the red zone. It is normal and even healthy to occasionally be in the red zone, particularly following a highly stressful or traumatic experience. Please be kind to yourself and to others who are in this zone, seek help and assist others to do the same.

It is normal to move up and down the mental health continuum. When we realize we are stuck in the orange or red zone – or sometimes a person close to us might help us realize we are stuck in an orange or red zone - it is important to reach out for some help and extra support. There are many ways we can help ourselves move towards the green area of the continuum as well.

THE MENTAL HEALTH CONTINUUM MODEL

MENTAL HEALTH: COPING WELL	MENTAL HEALTH: BEGINNING TO SLIDE	MENTAL HEALTH: SLIDING	MENTAL HEALTH: NO LONGER COPING
<ul style="list-style-type: none"> • Normal fluctuations in mood • Normal sleep patterns • Physically well, full of energy • Consistent performance • Socially active 	<ul style="list-style-type: none"> • Nervousness, irritability, sadness • Trouble sleeping • Tired, low energy, muscle tension, headaches • Procrastination • Decreased social activity 	<ul style="list-style-type: none"> • Anxiety, anger, pervasive sadness, hopelessness • Restless or disturbed sleep • Fatigue, aches and pains • Decreased performance, presenteeism • Social avoidance or withdrawal 	<ul style="list-style-type: none"> • Excessive anxiety, easily enraged, depressed mood • Unable to fall or stay asleep • Exhaustion, physical illness • Unable to perform duties, absenteeism • Isolation, avoiding social events

ACTIONS TO TAKE AT EACH PHASE OF THE CONTINUUM

MENTAL HEALTH: COPING WELL	MENTAL HEALTH: COPING WELL	MENTAL HEALTH: SLIDING	MENTAL HEALTH: NO LONGER COPING
<ul style="list-style-type: none"> • Focus on task at hand • Break problems into manageable chunks • Identify and nurture support systems • Maintain healthy lifestyle 	<ul style="list-style-type: none"> • Recognize limits • Get adequate rest, food and exercise • Engage in healthy coping strategies • Identify and minimize stress 	<ul style="list-style-type: none"> • Identify and understand own signs of distress • Talk with someone • Seek help • Seek social support instead of withdrawing 	<ul style="list-style-type: none"> • Seek consultation as needed • Follow health care provider recommendations • Regain physical and mental health • Call support or crisis lines as needed



Please see Section 1 Activity 2: Building Self Awareness (p. 44 and 45) to help you identify and create your own continuum. Everyone's mental health continuum is unique.

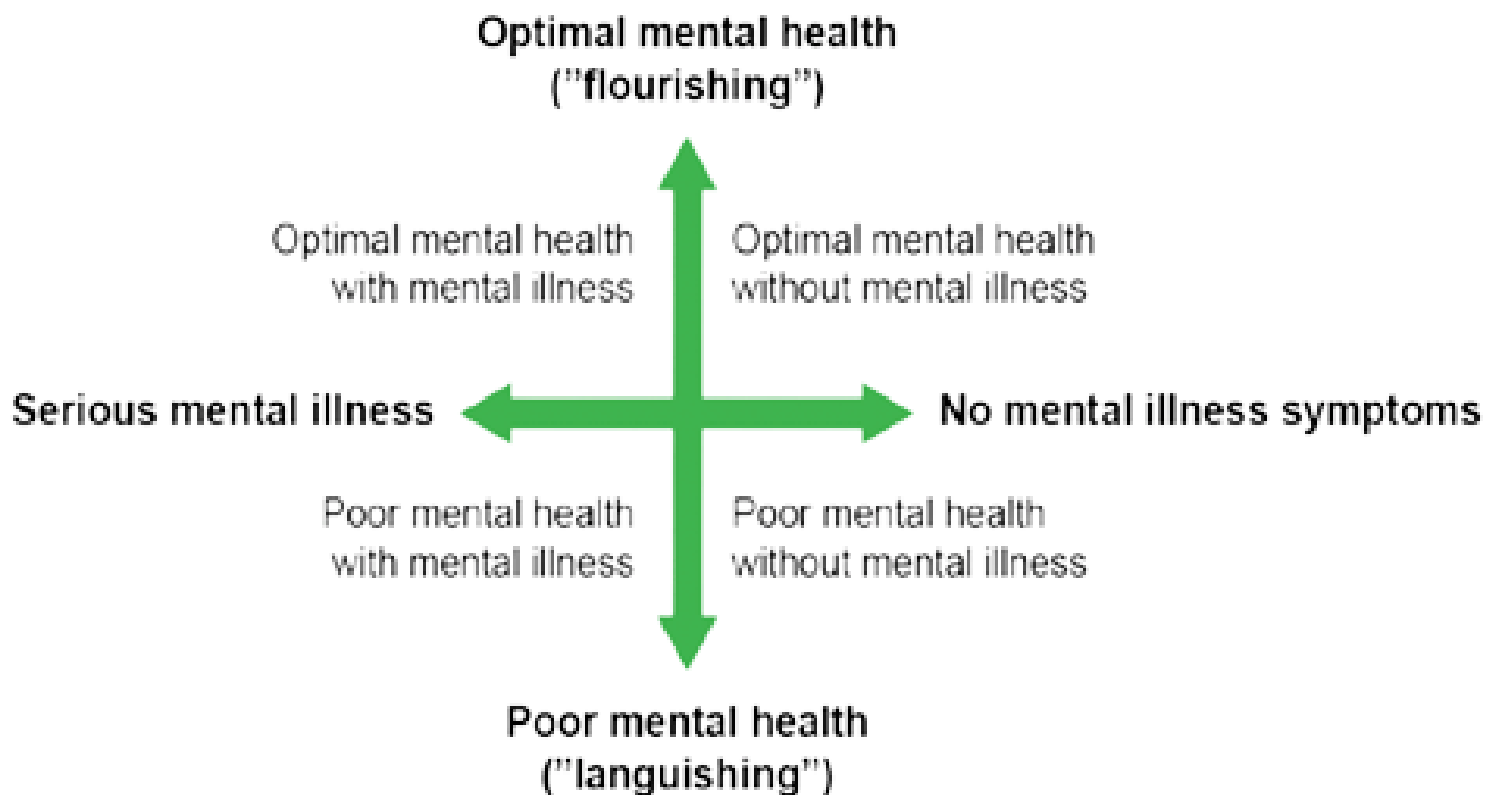
Another continuum worth noting is known as the **Flourishing Continuum**.

This model shows that anyone, regardless of mental health diagnosis, can either have **flourishing mental health** or **languishing mental health**.

Flourishing mental health is known as a state of high wellbeing, whereas **languishing mental health** is known as a state of low wellbeing.⁸

It is normal to have times when our mental health is flourishing, and other times when it is languishing.

If we notice we are stuck in the 'languishing' area, we might need to reach out for some extra support or give ourselves a bit of extra care. We can all experience optimal or poor mental health whether or not we have a mental health diagnosis.⁹



(Dual Continuum Model of Mental Health and Mental Illness; McKean, 2011; taken from Report of the Provostial Advisory Committee on Student Mental Health (2014).)

SELF-CARE

One way to help us flourish and feel mentally well is by engaging in **self-care**.

Self-care is often mistakenly thought of as “selfish,” “time-consuming,” and “expensive” behaviour. However, practicing some sort of self-care strategy is necessary for maintaining mental well-being.

Self-care looks different for everyone based on personal preference, culture, and the social and cultural determinants of health.

Self-care is all about how you can benefit and strengthen your future self; this will be different every day depending on your needs. Sometimes, self-care is making a home-cooked meal, getting some exercise, and making the bed. Other times, it's watching your favorite show, having a frozen pizza, and leaving the chores for later.

While it is beyond the scope of this toolkit to list every form of self-care, here are some examples of activities that have been proven to have a positive impact on mental health:

MEANINGFUL CONNECTION:

The human need for connection runs deep.

However, sometimes it's not possible to connect with other people in person. Did you know that making connections with pets, trees, special places, favorite hobbies, or spiritual practices can really help with feelings of isolation?

Meaningful connection is defined by the person experiencing it. Something that brings one person a sense of connection might be completely different from what brings another person a sense of connection. One way to connect might be volunteering.

By volunteering, individuals can gain a sense of belonging in their communities.

Volunteer Nova Scotia or 2-1-1 are good places to start when seeking opportunities to volunteer in your area. Helping others is often a good way to help ourselves.



Reflection: What helps me feel connected?

JOURNALING:

Journaling has been found to influence levels of stress.¹⁰

By writing expressively about the events in our lives, we can deal with our emotions, relieving stress. Try to incorporate journaling into your daily routine – whether it's the first thing you do when you wake up, or the last thing you do before going to bed.

Consider these prompts:

- What am I proud of?
- What am I grateful for?
- What would I like to accomplish in life?
- How do I make time for self-care?
- If someone described me, what is something positive they would say?
- What do I know about myself that I didn't know a year ago?
- When do I feel most in tune with myself?
- How does my body feel right now? What am I grateful to my body for doing today?

Reflection: What journaling prompt could I answer right now?



NATURE:

Being out in nature has been shown to benefit mental health by reducing stress and promoting physical activity and social connections.¹¹

You can engage with nature by visiting a local green space, like a park, or a blue space, like a river or a lake. You can also go for a walk or hike along a local trail, start watching the wild birds in your neighborhood, or take care of some houseplants in your home. Going out hunting, trapping or fishing is another way that people connect with nature.¹²

Reflection: How can I get more connected with nature today?



GRATITUDE:

Studies have shown that practicing gratitude is associated with life satisfaction, positive affect, and self-esteem.¹³

By making this a daily activity, we can work to increase our mood. You can practice gratitude by thinking of three things you are grateful for each day. Even the practice of asking “What am I grateful for?” and searching for answers has been shown to have a positive effect on our brain chemistry.¹⁴

Reflection: What am I grateful for today?

MOVEMENT:

We all know physical activity is good for our overall health.

This includes our mental health. Studies have shown that physical activity boosts our levels of “feel good” chemicals like serotonin and dopamine.

This makes us feel happier.

When we engage in movement or reach a goal we set for ourselves, like deciding to do some physical activity and following through on it, we feel good.

Movement, like self-care, looks different for everyone; it’s all about moving your body in a way that brings you joy. This could be cleaning your house, dancing in your kitchen, doing some yoga, or going for a workout at your local gym.

Reflection: How can I get more movement into my day?



SELF-CARE REFLECTIONS

Reflecting on your own self-care methods will set you up for a plan to engage in meaningful activities that protect your mental health and reduce stress. While some stress can be beneficial and can help us get things done, too much of it can lead to anxiety, depression, sleep problems, muscle tension, and serious physical health outcomes like high blood pressure and stroke.¹⁵ These outcomes can contribute to further health problems, but we can try and prevent them by focusing on self-care.

Self-care looks different for everyone. Here are some examples of self-care activities:

- If you live in an area with accessible sidewalks, you might go out for a walk in your neighbourhood
- If you have a front stoop, you might sit outside and say hello to your neighbors.
- If you are someone who enjoys being around others and wants to strengthen connections in your community, you may decide to engage in some volunteer work.
- If you prefer to be alone, you might borrow a book from the local library and curl up at home with a cup of hot tea.

You may already do some of the self-care activities we have previously listed in this toolkit. Any form of self-care can help you 'fill your cup' and care for your mental health.

Self-care is ever changing and context dependent. As circumstances and situations in our lives change, the types of self-care we need and can access also may change. It's important to re-visit our self-care strategies and keep them current and relevant to our lives. What works for us this week might not be what we need next week. It is important to keep checking in and re-assessing our needs.

We all have mental health and it's important to protect it to help us flourish and live our best lives.



Please see Section 1 Activity 3: Filling your Cup (p.46)

STRESS AND ADDICTIONS

When stressed, some people may turn to unhealthy coping mechanisms such as substance use or gambling to relieve anxiety and insomnia. A concurrent disorder refers to two or more disorders that exist at the same time. A common concurrent disorder is mental illness and addiction. Over 50% of people looking for help for an addiction are also experiencing a mental illness.¹⁶

While these coping mechanisms may have immediate effects on stress, they have the potential to cause more problems in the long run. Problems may include conflicts in relationships, issues with health, feelings of distress associated with gambling,¹⁷ and adverse longer-term health outcomes like cancer, heart disease, and alcohol-related injuries associated with alcohol use. ¹⁸

To reduce harm and support Canadians to engage in responsible alcohol use, the Canadian Centre on Substance Use and Addiction has developed low risk drinking guidelines.

For more information on Canada's low-risk alcohol drinking guidelines, please see:

https://ccsa.ca/sites/default/files/2020-07/2012-Canada-Low-Risk-Alcohol-Drinking-Guidelines-Brochure-en_0.pdf

In response to a recognized need for guidelines to support people who gamble to make well-informed, responsible decisions about their gambling, the Canadian Centre for Substance Use and Addiction has also developed lower risk gambling guidelines. These guidelines are designed to reduce gambling-related harms for themselves and those around them.

Canada's low risk alcohol drinking guidelines:

1. Having no more than 10 drinks per week, with no more than 2 drinks per day most days for people assigned female at birth
2. No more than 15 drinks per week and 3 drinks per day most days for people assigned male at birth Plan non-drinking days every week to avoid developing a habit
3. A drink is defined as 12 oz of beer (5% alcohol content), 12 oz of cider/cooler (5% alcohol content), 5 oz of wine (12% alcohol content), or 1.5 oz of distilled alcohol (40% alcohol content)¹⁹

If you think your substance use or gambling is starting to affect your day-to-day life, consider the following questions:

1. Do I have a hard time setting limits for myself?
2. Do I have a hard time stopping, even when I want to?
3. Is it causing problems in my personal life, relationships, or at work?
4. Is it stopping me from functioning on a day-to-day basis?

If you would like to change your relationship with substance use or gambling, refer to the Resource section of the toolkit for additional supports.

There is a growing movement of people who practice and advocate for sober living.

A webpage based out of Halifax is dedicated to building networks in Nova Scotia for people who are living sober.

Check out — [Sober City](#) for many resources, including Blog posts and advice, a YouTube channel, a weekly online gathering, and a guide to sober-friendly restaurants in Halifax.

There are also many resources online for tips on ways to plan for socializing without substances, and free apps such as www.sobergrid.com which advertises itself as a social network for the sober community and allows users to reach out to the community for support when they are struggling to maintain their sobriety.



SECTION 1 SUMMARY

Self-care and self-awareness are important aspects of maintaining our mental health and wellness. While mental health and wellness are complex and variable for everyone, we can do a lot to support ourselves to cope with **stressors** in healthy ways. When we take action to do even the smallest thing to take care of ourselves, we often find that we have more to offer those around us, in our families and in our communities.

In this section we covered what mental health and wellness means and understanding mental health as a continuum. Self-care strategies - the things we do to protect our mental health and make us feel good - were identified, and we discussed some common but unhealthy **coping mechanisms**.

CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

Being aware of our mental health needs and taking care of ourselves is important, but another part of feeling mentally well is having and taking care of our social connections.

Social connections strengthen our mental health, and how the people around us support mental wellness and understand mental health makes an impact on our mental health.

Being a part of a supportive community is important for mental wellbeing, and includes our personal relationships and the larger community we live in.

This section focuses on four major topics:

1. Mental Health Stigma
2. Normalizing Conversations about Mental Health
3. Informal Mental Health Supports
4. Mental Health in the Workplace



After reading this section and completing the activities you should be able to:

1. Identify some stigmas around mental health and use strategies to combat those stigmas.
2. Begin having regular conversations about mental health both at work and in your social circle
3. Lead a casual conversation about mental health with someone who has not completed the toolkit
4. Identify the informal supports in your life
5. Assist someone else identify the informal supports in their life
6. Assess your workplace for how it supports employee mental health

STIGMA AND MENTAL HEALTH

In Section 1 of this toolkit, you learned the difference between **Mental Health** and **Mental Illness**, mainly that while everyone has mental health, not everyone has mental illness. There is a negative association around mental illness - a **stigma** - that can often create obstacles or barriers to the care and support we need to thrive.

According to the Centre for Addiction and Mental Health (CAMH), **stigma** refers to negative attitudes (prejudice) and negative behaviour (discrimination) toward people with substance use and mental health problems.

Stigma comes from misinformation and a fear of what we don't understand, and it is very harmful. Prejudice and discrimination can stop people in our communities who live with addictions or mental illness from getting or keeping a job, securing housing, or participating in social events. Prejudice and discrimination can also contribute to people keeping their problems a secret. A person might not reach out for help, and their illness or addiction may get worse without treatment.²¹

These two links – one to the main site for the Centre for Addictions and Mental Health and the other to their courses – are excellent tools for you to access.

If you are looking to continue your learning this is a great place to start.

- <https://www.camh.ca/>
- <https://www.camh.ca/en/health-info/mental-health-101>

There are a few common stigmas associated with mental illness and addiction, such as the belief that if a person just “tried harder” they could overcome their illness. Sometimes people start to believe these things about themselves and can be extremely hard on themselves. This is called “**self-stigma**.” See below for more information on **self-stigma**. Please be kind to yourself if you are struggling with your mental health.

Another **stigma** often associated with mental illness is that those with mental illness are violent. However, in a given year, 1 in 4 people living with a mental illness are likely to be a victim of violence.²²

The stories that make the headlines are those that highlight and dramatize violent acts²³ but this is not the truth about most people with mental illnesses. We need to be mindful of the media we consume and remember that what is shown in movies and on the news is usually exaggerated.²⁴



Please see Section 2 Reflections: Personal Conceptions of Mental Illness (p.48)

The language we use in casual conversation can contribute to **stigma**. Too often, people living with a mental illness are told that “it’s not a big deal” or to “be positive”. Consider for a moment if you were talking to someone who said they had the flu - would you tell them to get over it? Or think that they were making it up? Remember - a mental illness is a real illness.

Mental Illness is sometimes referred to as an invisible disability because other people cannot readily see it. Living with a mental illness can be very hard work and affects people in many different ways. Sometimes it can be difficult to attend school or work or to keep up with the daily activities of life. Again, this does not mean a person is weak or “not trying.”

Living, coping, and caring for ourselves when we have a mental illness can be a big job all on its own.



Image retrieved from: Madeline Wilkerson (2016). 7 Myths about Mental Illness.
<https://www.theodysseyonline.com/7-myths-about-mental-illness>



The language we use to talk about mental illness can harm self-esteem and create **self-stigma**.

Saying things like “I’m so OCD” when you really mean organized, or “the weather is being bipolar” when it changes throughout the day can have a negative impact on someone with that diagnosed mental illness.

Self-stigma can be a significant barrier, preventing people from seeking the help they need to manage their illness. It impacts people’s ability to make social connections and reduces the person’s desire to understand or claim their illness as part of their experience.²⁵

When talking about mental health we can further reduce stigma by using person-first language. Person-first language puts the individual before the condition.

For example, a person who lives with schizophrenia, or a person with a substance use disorder.^{26,27}

Some, however, prefer identity-first language, where the condition is viewed as an important part of their identity, rather than a disorder.

Simply put, the best way to address someone is in the way they prefer to be addressed. It is important to listen to others and avoid speaking for them.

These two links are a great resource if you are looking to learn more about a harm reduction approach.

- <https://ontario.cmha.ca/harm-reduction/>
- <https://www.hri.global/what-is-harm-reduction>

A lot of stigma surrounds substance use and addiction.

People who use drugs are sometimes blamed for their addictions, but, as we learned in Section 1, addiction is complex.

Rather than judging the person, consider a harm reduction approach. Using a harm reduction approach helps us avoid stigma, by accepting people who use drugs as they are, and being committed to meeting people “where they are” in their lives without judgement.²⁸

HAVING CONVERSATIONS ABOUT MENTAL HEALTH

Part of creating healthy and resilient organizations and communities is learning to have regular conversations about mental health, making it as normal as talking about the weather.

Remember –it is healthy to move across the mental health continuum and everyone has mental health. By talking about our own experiences, we can make it easier for others to identify and share their experiences as well.



Of course, this should be done at your own comfort level and respecting your own personal and/or professional boundaries.

However, when we are open to sharing and normalizing our experiences and feelings, we can create open, honest environments where others feel safer to share their own struggles, and where we can begin to create respectful and supportive environments.

When we start to open up and have regular conversations about mental health, sometimes people might express difficult feelings or emotions. It is important to approach these conversations with empathy and respect. Empathy, though, isn't the same as sympathy.

According to Dr. Brené Brown, empathy involves 'feeling with people' and giving the person space to feel their emotions. Sympathy, she says, involves distancing ourselves from the discomfort, and trying to make a person's situation better by pointing out the positives.

Empathy fosters social connection, and this connection makes it easier to talk about mental health. Instead of trying to make it better, Dr. Brown suggests simply saying "I don't even know what to say right now, but I'm just so glad you told me".²⁹

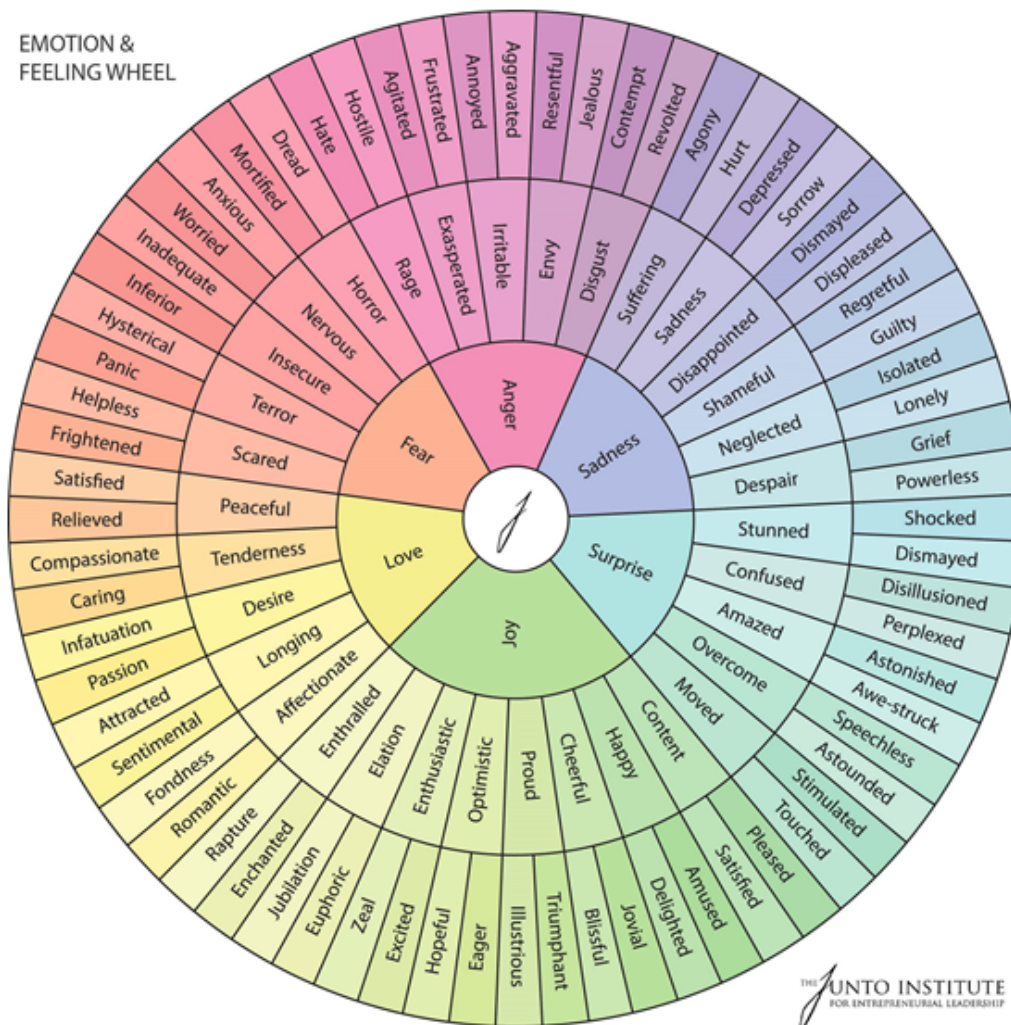
Often when someone discloses a difficult feeling, it isn't what we say, but the empathetic companionship we offer that is helpful.

I'VE LEARNED THAT PEOPLE WILL FORGET WHAT YOU SAID, PEOPLE WILL FORGET WHAT YOU DID, BUT PEOPLE WILL NEVER FORGET HOW YOU MADE THEM FEEL.

- MAYA ANGELOU

This is the ability for us to understand, express, and manage our own, and others, emotions.³⁰ It's normal to experience a range of emotions, especially surrounding major events. For example, the COVID-19 pandemic has caused a lot of stress for a lot of people.

77% of adults in Canada said they felt negative emotions as a result of the pandemic³¹—including worried, bored, stressed, lonely, and sad. 41% said their mental health had deteriorated since the start of the pandemic. The ability to allow ourselves to feel and experience a wide range of emotions is called **emotional agility**, and it is not always comfortable.³²



Retrieved from: Hodder, David (n.d.) <https://www.davidhodder.com/emotion-and-feeling-wheel/>

“Discomfort is the price of admission to a meaningful life”

- Susan David

While it can be hard to identify our emotions, especially tough emotions like grief, guilt, or fear, it's important for us to practice doing so.

By learning to allow ourselves to experience our emotions, we can begin to process them and move forward.

If we push them aside or refuse to acknowledge them, we risk amplification: our emotions get stronger just because we've ignored them



When we practice **emotional literacy** and demonstrate **emotional agility**, we make it easier for those around us to do the same.

Take a moment here to reflect on your own emotions using the Emotion Wheel. Which emotions are you able to easily name when you feel them? Which emotions are harder for you to identify?

'NATURAL' MENTAL HEALTH SUPPORTS

Natural supports are the unpaid, informal, ordinary relationships we all have every day in our lives.

These might be with a neighbour, a friend, an elder, someone in a local café, a family member, a housemate, a religious leader, a co-worker, a teacher or mentor etc. Some examples of natural supports include giving someone a ride somewhere, offering an introduction, companionship, listening, friendship, problem solving or neighbourly support like collecting your mail or mowing your grass while you are away.³³

People tend to offer support in different ways. One person might be great at giving advice, another might be a compassionate listener, and another might be really good at making you laugh. It can be helpful to think about the ways in which different people in our lives offer support, as well as the ways in which we offer support to others.

When we're faced with challenges in our lives, most of us will first turn to someone we know (e.g. someone in our natural support network) for support. These informal mental health supports play an important role in our mental wellbeing.³⁴ Studies have shown that most people experiencing a mental illness will seek some form of informal support.³⁵

Not only do these social connections make us feel included, but they can also reduce our stress, give us a sense of purpose, and increase our self-worth and self-esteem.^{36,37}

Consulting with people in our natural support networks can assist us in solving problems as they give us advice, help us connect with other resources or professional support, and by having someone empathetic to talk to.³⁴

A note on relationships: It is beyond the scope of this toolkit to go into detail about unhealthy relationships.

If you suspect you are in a relationship that is not healthy for you and/or the person you are in a relationship with, please look at the resources available at <http://www.nsdomeesticviolence.ca/> for support.



Please see Section 2 Activity 1a and 1b: Social Connections and Natural Supports (p.49 and 50)

For a comprehensive guide for developing and encouraging stronger natural supports in your community, please check out this resource: http://aaddalaska.org/wp-content/uploads/2017/06/guide_natural_supports.pdf

It is an in-depth document that enhances the activities completed in the toolkit.

If the activity laid out above did not work for you, another way to approach identifying and developing informal community supports is called “Pod Mapping.” This approach was developed by disability activist Mia Mingus as part of building community care networks.

Check it out here: <https://transformharm.org/pods-and-pod-mapping-worksheet/>

MENTALLY SUPPORTIVE ENVIRONMENTS AND THE SOCIAL DETERMINANTS OF HEALTH

Mental Health and the Social Determinants of Health are strongly connected. Even though anyone from any background can experience challenges with their mental health, when we experience challenges that intersect with the Social Determinants of Health our stress levels increase dramatically.

When our mental health is poor for a long time or we are living with a severe and chronic mental illness, our access to work and income can be impacted – leading to more challenges that lie within the Social Determinants of Health field.



Please see Section 2 Activity 2: Supporting Amy (p. 51)

Let's look at Amy:

Amy is a single parent of two children. She grew up living in poverty and didn't have access to the resources and funds that would have supported her education. She now works full-time at a low-paying job.

Amy started to work while she was in high school and couldn't attend post-secondary school. Amy and her children are experiencing food insecurity because after rent and bills there isn't much money left for food.

There are also no affordable grocery stores in her neighborhood. Not only is it difficult to carry groceries home on the bus, but it is time-consuming as well. The high time demands on Amy have created a lack of time for her to plan and prepare low-cost nutritious meals or take part in physical activities and now she is experiencing some health issues that have caused her to miss work.

Because of missed days at work, she does not have enough money for her next rent payment. She is at risk of being evicted from her apartment, which would render her and her two children homeless. Amy is managing, but the ongoing stress of her situation is beginning to have a negative impact on her mental health.



We can see from this example that Amy's struggles with mental health are directly related to her situation, which has been shaped by the social determinants of health in which she lives. While we can use coping strategies and/or medication to deal with the symptoms and help us cope with an immediate situation, dealing with the root cause is a separate issue.

If Amy is able to access professional help for her mental health, she might learn helpful skills and be better able to cope with the **stressors** in her life. She might also learn about some different programs or resources that could be helpful for her, and that might help her reduce her stress levels.

"You have to act as if it were possible to radically transform the world. And you have to do it all the time."

— Angela Davis

For Service Providers:

Counselling, coping skills and access to available resources are incredibly important for mental health. However, we also need systemic change that improves everyone's access to the resources and opportunities they need to achieve their full health potential.

Systemic change takes a long time. It requires patience and perseverance. Although we may not be able to immediately create systemic changes (eg. improved access to housing, food security, transportation, social inclusion), we can advocate with others for systemic changes, and we can work towards change in areas where we have influence, such as organizing with others to meet the needs you see in your community and volunteering with an organization working to address the issues you care about. Being attentive and responsive to the feedback received from the people who access your services can also be a great way to improve services and can guide us towards advocating for the systemic changes that will most improve the health and well-being of those who access our services.

If you would like to advocate for better mental health in your community by addressing the social determinants of health, consider writing to your local member of parliament. You may ask them to support initiatives that provide equitable access to resources such as safe and affordable housing, living wages and adequate nutrition, and access to quality mental health care.

If you are with a community-based organization, consider drafting a position statement that brings your organization's mission together with support for the wider social determinants of health. Having a position statement makes it easier for an organization to respond with action and/or solidarity statements when an issue that impacts community mental health arises.

MENTAL HEALTH IN THE WORKPLACE

Work can take up a significant portion of time for many people.

Therefore, it is important for workplaces to foster good mental health so we can thrive in both our work and personal lives. Employment can be very beneficial for our mental health, as it provides regular routine and structure, increases our income, and challenges us to grow and contribute in new ways.

Workplaces can also be stressful, however. Learning skills for healthy communication with co-workers, practicing self care and learning to manage stress are all important mental health skills to bring into the workplace. Each person in a workplace can contribute to a healthier workplace environment for everyone.

Individual employees and managers can and do make significant contributions to the overall health of a workplace environment. For a workplace to be mentally healthy in the long-term and to gain the benefits of being a mentally healthy workplace, organizational changes are often required. There are resources in the Resource Guide for creating mentally healthier workplaces.

For more information on how to take care of your mental health at work, and for some tips and resources, please see: Resources for employees (workplacestrategiesformentalhealth.com)



Please see Activity 3: Workplace Mental Health (p. 52)

Research shows that in Canada the total cost of mental health problems and mental illnesses in relation to absenteeism, productivity, economy and health care, add up to \$50 billion per year, and 30% of disability claims relate to mental health. ^{38,39}

Workplaces can benefit from promoting mental wellness. According to the Government of Canada, mentally healthy workplaces have:

- more engagement
- higher morale
- better staff retention and recruitment
- employee satisfaction
- more productivity



There is also a reduction in:

- absenteeism
- health costs
- grievances
- medical leave and disability
- workplace injuries³⁹

Research shows that supportive work environments can support individuals with a mental illness to succeed in their roles.

Learning opportunities, sufficient training, supportive colleagues and management styles, and positive workplace culture all contribute to an employee's success within an organization.⁴⁰



When workplaces or organizations create supportive environments and meaningfully integrate people with a diversity of experience and backgrounds, they encourage and create space for new thoughts and ideas. This can help move organizations forward, become more resilient and creative, and can help them become better able to address the issues that people face daily.

The Mental Health Commission of Canada, along with the Bureau de normalisation du Québec and the Canadian Standards Association, have developed a Psychological Health and Safety Standard for the workplace. The Standard is intended to guide organizations in creating and maintaining a psychologically safe and healthy environment for its employees.

The Standard identifies 13 psychosocial factors that influence mental health in the workplace:

- Organizational culture
- Psychological and Social Support
- Clear Leadership and Expectations
- Civility and Respect
- Psychological Demands
- Growth and Development
- Recognition and Reward
- Involvement and Influence
- Workload Management
- Engagement
- Balance
- Psychological Protection
- Protection of Physical Safety

SUPPORTING SOMEONE THROUGH A MENTAL HEALTH CONCERN OR MENTAL HEALTH CRISIS

KNOW YOUR BOUNDARIES AND YOUR PERSONAL LIMITS AND USE THEM TO PROTECT YOUR OWN MENTAL HEALTH.

This section of the toolkit contains tips and best practices you can use when supporting others through a **Mental Health Concern** or **Mental Health Crisis**, including supporting someone who is having suicidal thoughts. Please keep in mind that the strategies and tips are meant only as a guide, and are not meant to replace professional training or support. They are tools that you can use in the moment.

If you are not comfortable having these conversations, please reference the Resource section to direct someone to support. Connecting someone to the support they need is an important role. It is courageous and responsible to help someone find the help they need.

This section focuses on six major topics:

1. What a Mental Health Concern is
2. How to support someone when they disclose a Mental Health Concern or a Mental Health Diagnosis
3. What a Mental Health Crisis is
4. How to support someone during a Mental Health Crisis
5. How to support someone who is thinking about suicide
6. How to care for yourself after caring for someone else

After reading this section of the toolkit and completing the accompanying activities you will be able to:

1. Name some strategies to support someone with a mental health concern
2. Name some strategies to support someone experiencing a mental health crisis
3. Know where to access crisis numbers and additional supports
4. Know how YOU like to receive and offer supports
5. Know what your aftercare plan is after supporting someone experiencing a mental health crisis

SUPPORTING SOMEONE WHO HAS A MENTAL HEALTH CONCERN



When engaging in conversations about mental health, it can be helpful to understand the difference between a **mental health concern** and a **mental illness**.

A **mental illness** is a diagnosable disorder in thought, mood, or behavior which follows certain identifiable patterns, causes distress to the individual and has been occurring (possibly on and off) for an extended period.⁴²

A **mental health concern** is a distressing concern in mood or thought that has been occurring for a shorter period of time.⁴²

A person disclosing a mental health concern or diagnosis might feel afraid or nervous about sharing.

They may be worried about being judged or stigmatized. When someone shares a mental health concern or diagnosis, it's important to respond to it in an open and respectful manner.

A disclosure might sound like "I've been having a lot of anxiety lately and I feel worried about it," or "I was just diagnosed with bipolar disorder, and I wanted to let you know."

Here are a few tips to consider when responding to the disclosure of a mental health concern or diagnosis: ⁴³

- Thank the person for sharing with you. Keep the conversation distraction-free. Find a quiet place where you can focus on the conversation.
- Don't second-guess feelings; all emotions are valid, and a person might feel any number of ways about their diagnosis or concern. Take the opportunity to practice empathy.
- Keep questions open and relevant to learning how you can best support them. If the person wants to tell you about their diagnosis, listen to what they offer to share, but don't probe or expect the person to teach you about it.
- Now that the person has shared their concern, you can ask what they think might be helpful for them. Would they like you to check back in with them in a few days? Is there anything they need right now that might support them? Is there anyone else they would like to let know? Ask about self-care strategies that they find helpful.
- Practice active listening by asking clarifying questions. For example, "When you said...what did you mean?" Share what you understand and check with the person to determine if you have understood correctly.
- Know and stay within your boundaries to protect your own mental health.
- Ensure confidentiality. Disclosing a mental health diagnosis or concern is personal, and it is important that the person sharing their concern has control over who does and does not know their personal information. Do not share another person's information unless they specifically ask you to.
- Avoid diagnosing the person; mental illnesses are complex and require the expertise of a professional.
- Ask about existing support networks. Do they have a doctor or counsellor? A supportive friend or family member who they can talk to?
- There are a wide range of telephone and online supports available. If the person is interested, you can share a list of available mental health resources with them (see Resource section). The person may want support to make a call or send a text or they may want to call on their own.

SUPPORTING SOMEONE THROUGH A MENTAL HEALTH CRISIS



A mental health crisis is “any situation in which a person’s behavior puts them at risk of hurting themselves or others and/or prevents them from being able to care for themselves or function effectively in the community.”


A mental health crisis will differ based on the person, the situation, and any diagnoses they might have. They also happen for a variety of reasons, including stresses at work, school, or in relationships.

Someone experiencing a mental health crisis might:

- Not engage in daily tasks
- Have mood swings
- Engage in risky behavior
- Display abusive behavior towards themselves or others
- Isolate themselves from others
- Lose touch with reality
- Experience paranoia⁴⁴

If someone you know seems to be going through a crisis, there are some things you can do to de-escalate and calm the situation.

Some of the basic skills and techniques for de-escalation include:

- Start by taking a moment to calm yourself. Simply stopping to take a deep breath can be a helpful way to start.
 - Staying calm and being kind
 - Try to speak in a low, quiet voice, even if the person you are supporting is speaking quickly or loudly.
 - If in a busy spot, consider moving to a quieter place - avoid having an audience
- 
- Assess your environment for safety. Have a friend or coworker with you, stay in a visible area, keep exits accessible to you.
 - Being mindful of your body language (e.g., Calm facial expression, uncrossed arms, leaving personal space)
 - Practice active listening by asking clarifying questions and checking with the person if you have understood correctly. For example, you could say, "I'm hearing ... am I getting that right?"
 - Giving the person your full attention
 - Remaining nonjudgmental
 - Focusing on their feelings (e.g., Understanding how they are feeling right now)
 - Allowing silence
 - Being clear and direct
 - Offering choices (e.g., Would they like to sit or stand? Would they like some water to drink?)
 - Avoiding saying 'no' or disagreeing 45-47



Please see Section 3 Reflection – Receiving and Offering Support (p. 54)

ADDRESSING SUICIDAL IDEATION (SUICIDAL THOUGHTS)

Sometimes, a mental health crisis can involve thoughts of suicide. It is important to have a plan to address these thoughts if they are shared. If this is not a conversation you feel comfortable having, it is important to respond with empathy and respect and thank the person for sharing with you, then *find someone you can connect them to*. This could be someone in their support network, or a resource like the **Canada Suicide Prevention Crisis Line (1-833-456-4566 or text 45645)** or the **Mental Health Mobile Crisis Line (1-888-429-8167)**.

There are a few warning signs to look out for, the biggest one being a *change in normal behavior*. Has the person stopped sleeping, or are they sleeping a lot more compared to before? Has their nutrition changed? Their hobbies? If you can see that there has been a change, consider the following signs as well:

- Person has experienced recent loss or many losses
- Talking about suicide
- Increase in substance use
- Feeling helpless or hopeless
- Withdrawing from loved ones
- Changes in mood⁴⁸

When someone tells us they are thinking about suicide, it can be overwhelming. However, it's important to be empathetic and listen to the person without judgment. It's okay if you can't relate to their situation, or if you don't know what to say to make them feel better.

It is likely that you will not be able to change their situation, and that's *not* your responsibility. What is required of you is that you make the person feel heard and you do what you can to ensure their safety.

ASK, LISTEN, GET HELP

The first thing to do when you think someone might be talking about suicide is to ASK. It might feel awkward, but this will help you move forward with the conversation.

According to the Canada Suicide Prevention Crisis Line, research shows that talking about suicide does not increase the likelihood of someone dying by suicide.⁴⁹ Asking shows that you care. It is important to ask in a way that is kind and warm, but also open and direct - this shows that you are willing to talk about it.

It is okay to say, “I’m noticing some things that are concerning me (tell them what you have been noticing), and I am wondering, are you thinking about suicide?”

If they say yes, **LISTEN** and give them time to talk through their feelings. Do not try to offer a quick fix. Then **GET HELP**. You can say “Thank you for telling me. I care about you, and I want you to be safe, but I need some support to do that well. I would like to call a support line to give us a hand here.”

The Canada Suicide Prevention Crisis Line would be a very appropriate call to make in this situation.

Crisis Numbers to know:

- **9-1-1**
- **Canada Suicide Prevention Crisis Line at 1-833-456-4566 or text 45645**
- **Mental Health Mobile Crisis Line at 1-888-429-8167**

Please see Resource Guide for more supports.

Here are some ways to help keep a person safe if they have shared suicidal thoughts:

- Remain calm and be kind. Avoid leaving the person alone. If you’re not with them, try to find someone to stay with them until they are stable and can talk to a professional.
- Engage in active listening and allow the person to work through their feelings.
- Encourage them to take one step at a time and focus on just getting through the day
- Ask them if they’ve felt this way before. If they have, ask them how they got through it last time. If they haven’t, offer empathy and connect them with resources. This is a scary time for them. Give them space to talk. Be present.
- Call the **Canada Suicide Prevention Crisis Line** and ask for guidance on how best to offer support in the situation.
- If a situation is an emergency or a life is in imminent danger, call **911**. The person might need professional help or crisis intervention to get through this moment. You can stay with the person while they speak with the crisis team.
- If a person is not in immediate danger, or after the crisis has passed, encourage them to access professional help. You can stay with them while they call the **Nova Scotia Health Authority Intake Line (1-855-922-1122, Monday to Friday 8:30-4:30 or voice mail)** to make an appointment. You may be asked to leave a voicemail when you call and should have a number available where you can receive a call back during business hours. The person you are supporting might be more comfortable with you calling while they are with you.

If someone shares that they are thinking about suicide, it is important to avoid:

- Getting angry with the person
- Finding an easy solution to the problem
- Telling them to 'cheer up' or changing the subject
- Telling them they should be grateful, and they have no reason to feel this way⁴



Tip: It is a good idea to have resources readily available and accessible. For example, save crisis numbers to your phone contacts, or keep resource numbers on a piece of paper in your wallet, etc.

This may bring you some comfort and confidence when entering these challenging conversations.⁴⁸

If you would like to support someone to create a safety plan, the Centre for Suicide Prevention has released a comprehensive **Suicide Prevention Safety Plan Toolkit**. These safety plans are designed to be created when a person is NOT actively in crisis.

Please take some time to look through their website: (<https://www.suicideinfo.ca/resource/safety-plans/>)

Another helpful site is the Stanley-Brown Safety Planning Intervention site at <http://www.suicidesafetyplan.com> for guidance on how to help someone you know create their own Safety Plan. This program also offers trainings on how to implement and use a Safety Plan. <https://bgg.11b.myftpupload.com/sample-page/>

Please note: these Safety Plans are designed for someone wishing to help someone they know who is struggling with thoughts of suicide.

If you personally struggle with recurrent suicidal thoughts, please reach out to the Canada Suicide Prevention Crisis Line for support and call the Nova Scotia Health Authority Intake Line to make appointment with a counsellor.

REMEMBER: if the person you are supporting is in imminent danger of harming themselves or others, or if they have already harmed themselves or another person, call **9-1-1**.

AFTERCARE

Supporting someone through a mental health crisis and talking about suicide can be difficult, and it can be especially difficult for people who have previous experience with suicidal behaviours. Please take care of yourself and ask for support.

It's important to look after your mental health after handling such a situation. Here are some steps to follow that can help:

Do a Check-In

Check in with the person you supported. This not only shows them you care; it keeps you up to date on their wellbeing. This can help you feel a sense of relief by knowing they're safe and taken care of. Keep in mind that getting help isn't always easy; if the situation was one where you had to connect them with a professional, they might be upset with you. This doesn't mean they don't - or won't eventually - appreciate your support. They might feel embarrassed or scared. Know that you did the right thing by doing what you could to keep them safe.

Self-Care

Take a moment to reflect on what you need, and then spend time caring for yourself. Self-care looks different for everyone but going back to the self-care plan you completed in Section 1 of the toolkit for inspiration is a great start. Try to spot the difference between what you **NEED** and what you **WANT**, as these might not be the same. Be attentive to your **coping mechanisms** and try to resort to those that are good for your health if you can.

Talk to someone

Debriefing with someone you trust can help you process the situation. It can also help you gain insight and understanding. You can choose someone from the inner circle of your support system mapped out in Section 2, or a professional, or call the Canada Suicide Prevention Crisis Line and ask to talk with someone about your experience. It is important to respect the other person's privacy by keeping their identity confidential.

Set Boundaries

Use the situation to inform how you'd like to approach a similar crisis in the future. If this person goes into crisis again (or if you find yourself in a support role again) do you have a preferred contact method? Are there certain times when you're not available? Are there topics that are triggering or off-limits for you? Setting these boundaries means you can continue to be there for the person in a way that protects your mental health. Ensure you respectfully communicate these boundaries to the person you are supporting.⁵⁰



Please see Section 3 Reflection: Caring for yourself after supporting someone in crisis (p.56)



SECTION 3 SUMMARY

A person can experience a mental health crisis and suicidal ideation for many reasons.

While we can't change their individual circumstance, we can listen without judgment and support them through the situation, as well as connect them to more formal supports.

This section of the toolkit provides a considerable number of supports to use when assisting someone experiencing a mental health crisis, but it is only the beginning of your learning.

There are many resources and trainings available to learn more about supporting someone experiencing a mental health crisis. There are further supports and resources in the Resource Section of the toolkit.

CONCLUSION

This toolkit covered a variety of topics designed to grow your understanding of mental health and support both yourself and your community.

Mental health is complex and is affected by many factors: the care and supports we receive from and offer to our communities, how we take care of ourselves, how we are supported in our workplaces and how the social and cultural determinants of health impact our lives.

By working together and all of us contributing in whatever ways we can, we can create healthier, more resilient communities. Take care of yourselves, and of each other. We are in this together.

GLOSSARY

Accommodation: An accommodation reduces or removes barriers to learning or working to ensure fair and equitable access to the classroom or workplaces.⁵¹ “Mental disability” is considered a protected characteristic in the Nova Scotia Human Rights Act. For example, a person living with a diagnosed mental illness may be eligible for alternative testing conditions, modified presentations or adapted workspaces.⁵²

Concurrent Disorder: An individual who is experiencing both a mental illness and a substance abuse problem.⁵³

Coping Mechanism: the strategies people often use in the face of stress and/or trauma to help manage painful or difficult emotions. Coping mechanisms can help people adjust to stressful events while helping them maintain their emotional well-being.⁵⁴

Emotional Agility: The ability to feel and experience a wide range of emotions.

Emotional Literacy: The ability to name, understand, express, and manage our own emotions, and to recognize the emotions of others.

Flourishing Mental Health: is an individual’s subjective well-being, of which there are several dimensions – emotional well-being (e.g., positive affect, happiness, life satisfaction), psychological well-being (e.g., self-acceptance, personal growth, purpose), and social well-being (e.g., social acceptance).⁵³

Harm Reduction Approach: an evidence-based, client-centred approach that seeks to reduce the health and social harms associated with addiction and substance use, without necessarily requiring people who use substances from abstaining or stopping.⁵⁵

Languishing Mental Health: is the absence of mental health (extremely poor) and the opposite of flourishing (optimal mental health). People who are experiencing languishing mental health are neither mentally ill nor mentally well; rather, they may feel they are “running on empty,” or feeling “hollow” or devoid of positive emotions toward life.⁵³

Mental Health: Our overall state of being. Everybody has mental health, just like everybody has physical health. Mental health includes our emotions, our feelings of connection with others, our thoughts and feelings, and our ability to manage life’s highs and lows. Our mental health can be optimal or poor, or somewhere in between at any given time.

GLOSSARY (*CONTINUED*)

Mental Health Concern: A distressing concern in mood or thought that has been occurring for a short period of time.

Mental Health Crisis: “Any situation in which a person’s behavior puts them at risk of hurting themselves or others and/or prevents them from being able to care for themselves or function effectively in the community.”⁵³

Mental Illness: A diagnosable, significant disturbance in thought, feeling, and perception that is severe enough to affect a person’s day-to-day functioning.

Mental Wellness: A personal optimal state of mental health. A state of being able to cope with life’s highs and lows and experience a wide range of emotions.

Natural Supports: The unpaid, informal, ordinary relationships we all have in our lives.

Self-Care: Actions taken to preserve or improve one’s health.

Stigma: The negative and prejudicial ways in which people living with mental illness are labelled.⁵³

Self-stigma: A negative and prejudicial belief that a person believes about themselves.

Stressor: Any event or situation that an individual perceives as a threat; precipitates either adaptation or a stress response.⁴⁴



LEARNING: TOOLKIT ACTIVITY PAGES

The following section of the Toolkit is a collection of activities, designed to help you think about, discuss, and reflect on the concepts addressed in the Toolkit.

On each page you will see the related Toolkit section, and the number and name of the associated activity or reflection. You will find more information about the activities in the Toolkit sections.

Please feel free to print out or photocopy these pages as you need them!

SECTION 1: UNDERSTANDING MENTAL HEALTH AND DEVELOPING SELF-AWARENESS

Activity 1: Your Social and Cultural Determinants of Health

Take a moment to reflect on the ways that the social determinants of health impact your life and wellbeing.

How do these factors interact to influence your current state of health?

Often, we have a mix of protective (positive affect on health) and risk factors (negative effect on health) when it comes to the social determinants of health.

Example: On page 25 we meet Amy. The Determinants of Health that are risk factors for her include Income, Education and Gender. She has a home and can feed her family, so Housing and Nutrition are currently protective factors. However, both factors are unstable at the moment. The many risk factors in Amy's situation have an impact on her mental and physical health.

MY SOCIAL AND CULTURAL DETERMINANTS OF HEALTH

HOW DO THESE FACTORS INFLUENCE MY HEALTH? ARE THERE OTHER FACTORS TO CONSIDER?

Housing:

Income:

Education:

Food Security:

Impacts of racism:

Impacts of sexism:

Other:

SECTION 1 – UNDERSTANDING MENTAL HEALTH AND DEVELOPING SELF-AWARENESS

Reflection: Mental Wellness

There are many ways that different communities and cultures understand and relate to mental health and wellbeing. What are some of the ways your community defines mental wellness?

IN MY COMMUNITY, MENTAL WELLNESS IS:

Example: Connection with friends and/or family, productivity at work, living a balanced life...

ACTIVITY 2: BUILDING SELF AWARENESS

Take a moment to reflect on your own mental wellness:

- What helps you feel mentally well?
- What steps and actions do you take to keep yourself mentally well?
- How do you know when you are starting to feel mentally unwell?

Next, think about your behavior when you are starting to feel unwell. These changes of behaviour occur when you are “sliding” along the mental health continuum.

They could be large changes in behaviour or routine, such as calling in sick to work or staying up all night, or smaller changes, such as increased irritability or a lack of appetite.

How does your nutrition change? Do you engage in less or more movement? Do you sleep longer, or do you become more restless?

(see next page for worksheet)

GREEN "COPING WELL"	"SLIDERS"	RED "NO LONGER COPING"
Sleep:	Sleep:	Sleep:
Movement:	Movement:	Movement:
Nutrition:	Nutrition:	Nutrition:
Social:	Social:	Social:
Other:	Other:	Other:

You can come back to this activity when you are feeling unwell to identify which behaviors you need to engage in to get back on track towards mental wellness. Remember to be kind to yourself. It is normal to move along the mental health continuum and landing in the orange or red zone is not a personal failure.

Treat yourself with the same kindness and compassion that you would offer to someone else. Ask for support and try to practice **self-care** when you notice yourself starting to slide into the yellow or orange zones.

SECTION 1 – UNDERSTANDING MENTAL HEALTH AND DEVELOPING SELF-AWARENESS

Activity 3: Filling your Cup

You may have heard the saying “You can’t pour from an empty cup.” For this next activity, take a moment to think about what ‘fills your cup’. What makes you feel happy, fulfilled, and satisfied? Try to think of broad categories.

These activities can be done in many ways. Writing on paper might work for some people, but not for all. We can cut out magazine pictures or draw pictures if we are more visual learners or write words on paper that fill our cups and physically put them into a cup to draw out as needed. Feel free to be creative and do what works for you!

WHAT FILLS MY CUP?

Example: Family, creativity, community connection, nature, a tidy environment

Now that you have identified what you need in your life to feel fulfilled, think about specific activities that you can do to meet those needs.

MY SELF-CARE ACTIVITIES

Example: Spend time with a loved one, paint, go for a hike, make my bed in the morning

Great work! You have just identified your personal self-care activities. Next, we will look at the opposite end and identify things that make us feel drained and push us towards mental unwellness. Using broad categories, try to think about what 'drains your cup'.

WHAT DRAINS MY CUP?

Example: Untidiness, too much social media, being stuck inside

Now that you have identified the things that can make you feel unwell, think about actions that you can take to avoid them, or do them in moderation.

HOW TO AVOID DRAINING MY CUP

Self-care is ever changing and context dependent. As circumstances and situations in our lives change, the types of self-care we need and can access also may change. It's important to re-visit our self-care strategies and keep them current and relevant to our lives. What works for us this week might not be what we need next week. It is important to keep checking in and re-assessing our needs

SECTION 2 – CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

Reflection: Personal Conceptions of Mental Illness

Think about the negative messages you have received from the media about mental illness. How have these messages influenced your understanding of mental illness?

THE IMAGES OF MENTAL ILLNESS THAT I'VE BEEN SHOWN ARE:

Example: I have seen mental illness blamed for acts of violence on the news

HOW HAVE THESE IMAGES INFLUENCED MY VIEW OF MENTAL ILLNESS AND MY IDEAS OF PEOPLE WHO LIVE WITH MENTAL ILLNESS?

Example: I feel unsafe around people who live with a mental illness

Now take a look back on the section on stigma and mental health.

With compassion, gently reflect to yourself: How might the ideas I have learned affect the ways I interact with people living with a mental illness? How might these ideas affect me personally? Do I make assumptions about people without knowing them or their story? Are there ways I can start to change this?

SECTION 2 – CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

Activity 1a: Social Connections

Think about your social connections. These can be people who are close to you, like friends, family, or a partner. They can also include people who are less close to you but are still part of your day-to-day, like the waitress at your local coffee shop, your bus driver, or your neighbour.

This activity is designed to help you identify your social connections. Those who are closest to you will go on the circle closest to the middle. Those who are less close to you, but still play an active role in your life, will go on the second circle. Those who are not close to you, but who still make up part of your community, will go on the outer circle.



Now, think about how the people you included in the activity support you:

- Who do you turn to when you need to talk?
- Who provides you with a sense of community?
- Who gives good advice?
- Who can make you laugh?
- Who are the people you see regularly in your day? This may be the person at the corner store, the bus driver, the person who delivers your mail, etc. These are all valuable social connections!

Are there people on your map who would turn to you for support?

Now that you have created your social connections “map”, try to see if there is anything missing, or if you might like to make any changes to your social connections.

SECTION 2 – CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

Activity 1b: Natural Supports

Now that you have created an image of your network of support, take a second to reflect on the natural supports in your life. How do you support those in your closest circle? What are some ways you contribute to the wellbeing of those in your outer circle, and they to you?

**WHAT ARE SOME NATURAL SUPPORT CONTRIBUTIONS I CURRENTLY OFFER?
WHAT ARE SOME THAT I MIGHT LIKE TO OFFER?**

**WHAT ARE SOME NATURAL SUPPORT CONTRIBUTIONS I RECEIVE?
HOW CAN I ENSURE THE PEOPLE WHO OFFER THESE SUPPORTS KNOW THEY
ARE APPRECIATED?**

SECTION 2 – CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

Activity 2: Supporting Amy

This activity asks you to read Amy's story and consider how you would support her. You will have to consider a variety of factors. What would you do if Amy came to you for support? What are some strategies or resources you would connect her with? How can she use her informal supports here?

There are many factors to balance here, but this is your chance to practice empathy. Take your time and really imagine how you could best support Amy.

Amy is a single parent of two children. She grew up living in poverty and didn't have access to the resources and funds that would have supported her education.

She now works full-time at a low-paying job. Amy started to work while she was in high school and couldn't attend post-secondary school.

Amy and her children are also experiencing food insecurity because after rent and bills there isn't much money left for food. There are also no affordable grocery stores in her neighborhood. Not only is it difficult to carry groceries home on the bus, but it is time-consuming as well.

Because of a lack of time to plan and prepare low-cost nutritious meals or take part in physical activities, Amy is experiencing some health issues that have caused her to miss work. Because of missed days at work, she does not have enough money for her next rent payment. She is at risk of being evicted from her apartment, which would render her and her two children homeless.

Amy is managing, but the ongoing stress of her situation is beginning to have a negative impact on her mental health.

SECTION 2 – CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

How would you support Amy?

Provide some tips or suggestions that might be helpful.

What changes are within her control to make? What services or programs might be helpful to her?

If you were Amy's service provider, what systemic changes might you advocate for?

Example: Provide Amy with information about food programs close to her

Activity 3: Workplace Mental Health

Consider your organization. What steps have been taken to support employee mental health? What else could be done to improve employee mental health?

What do you, as an employee, need from your organization to feel mentally well in the workplace? You can use your answers to these questions to create a plan of action.

Although we have provided space for you to begin this assessment here, creating a plan of action takes a team, not just one individual.

Use these boxes below to get started, but do not feel discouraged if you do not have all the answers just yet. Reach out to other members of your workplace to see what you can all do together to improve employee mental health.

Take a look at the Standards for Workplace Psychological Health and Safety for guidance.

SECTION 2 – CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

HOW DOES MY ORGANIZATION SUPPORT EMPLOYEE MENTAL HEALTH?

HOW CAN MY ORGANIZATION BETTER SUPPORT EMPLOYEE MENTAL HEALTH?

WHAT DO I NEED TO FEEL MENTALLY WELL AT WORK?

WHAT CAN I SUPPORT MYSELF TO BE MENTALLY WELL AT WORK?**SECTION 3 - SUPPORTING SOMEONE THROUGH A MENTAL HEALTH CONCERN OR IN CRISIS****Reflection: Receiving and Offering Support**

Take a moment now to reflect on how you best receive and offer support. Is there something that you wish others would do for you? What kinds of support are you excellent at offering?

HOW DO MY VALUES AND BELIEFS IMPACT HOW I BEST RECEIVE SUPPORT?

Example: I prefer if people offer me support without coming too close to me when I am upset.

HOW DO MY VALUES AND BELIEFS IMPACT HOW I BEST OFFER SUPPORT?

Example: I believe people need to feel heard, so I try not to say things like "at least..." because I feel it might minimize someone's experience.

SECTION 3 - SUPPORTING SOMEONE THROUGH A MENTAL HEALTH CONCERN OR IN CRISIS

Reflection: Caring for yourself after supporting someone in crisis

AFTER SUPPORTING SOMEONE IN CRISIS, I WILL CHECK IN WITH MYSELF:

How are you feeling? What do you need right now? How can you meet those needs?

AFTER SUPPORTING SOMEONE IN CRISIS, I WILL TAKE CARE OF MYSELF BY:

AFTER SUPPORTING SOMEONE IN CRISIS, I WILL TALK TO:

AFTER SUPPORTING SOMEONE IN CRISIS, I HAVE LEARNED THESE NEW THINGS ABOUT MY BOUNDARIES:

RESOURCES

LINKS TO RESOURCES FOUND IN PART 1 OF THE TOOLKIT

On this page you will find all of the linked resources mentioned throughout Part 1 of the toolkit.

These are supplemental resources that enhance the material of the toolkit, and we strongly encourage you to check them out.

Included is a short description of each resource, a link to the resource, as well as where it can be found in the toolkit.



SECTION 1: UNDERSTANDING MENTAL HEALTH AND DEVELOPING SELF-AWARENESS

https://www.cfpc.ca/CFPC/media/Resources/Poverty/Poverty_flowNS-2016-Oct-28.pdf

Found in: What is Mental Health?

Check out this link for a Poverty Assessment Tool. It is a clinical tool designed for primary care providers to better identify and serve clients who are impacted by poverty.

<https://multiculturalmentalhealth.ca/>

Found in: What is Mental Health?

What mental health is depends on your cultural background. Check out this link for more information about culturally safe and competent mental health care.

https://ccsa.ca/sites/default/files/2020-07/2012-Canada-Low-Risk-Alcohol-Drinking-Guidelines-Brochure-en_0.pdf

Found in: Stress and Addictions

Resource for more information on Canada's low-risk alcohol drinking guidelines.

<https://gamblingguidelines.ca/lower-risk-gambling-guidelines/what-are-the-guidelines/>

Found in: Stress and Addictions

Resource for detailed information on Canada's lower risk gambling guidelines.

LINKS TO RESOURCES FOUND IN PART 2 OF THE TOOLKIT

SECTION 2: CREATING MENTALLY SAFER AND SUPPORTIVE ENVIRONMENTS

<https://www.camh.ca/>

<https://www.camh.ca/en/health-info/mental-health-101>

Found in: Stigma and Mental Health

These two links – one to the main site for the Centre for Addictions and Mental Health and the other to their courses – are excellent tools for you to access. If you are looking to continue your learning this is a great place to start.

<https://ontario.cmha.ca/harm-reduction/>

<https://www.hri.global/what-is-harm-reduction>

Found in: Stigma and Mental Health

These two links are a great resource if you are looking to learn more about a harm reduction approach.

<https://www.avanmuijen.com/watercolor-emotion-wheel>

Found in: Having Conversations About Mental Health

The Emotion Wheel found in the toolkit is one of many such wheels. This wheel has many learning activities that go along with it, suggestions about ways it can be worked with, and a variety of ways it can be printed/displayed.

http://aaddalaska.org/wp-content/uploads/2017/06/guide_natural_supports.pdf

Found in: ‘Natural’ Mental Health Supports

This is a comprehensive guide for developing and encouraging stronger natural supports in your community. It is an in-depth document that enhances the activity completed in the toolkit.

<https://transformharm.org/pods-and-pod-mapping-worksheet/>

Found in: ‘Natural’ Mental Health Supports

If the activity laid out in the toolkit did not work for you, another way to approach identifying and developing informal community supports is called “Pod Mapping.” This approach was developed by disability activist Mia Mingus as part of creating a supportive community.

https://www.mentalhealthworks.ca/wp-content/uploads/2019/02/CMHA_Mental-Health-Works-Guidebook-8.5-x11r.pdf

Found in: Mental Health in the workplace

Guide from Mental Health Works containing information on mental health accommodations in the workplace.

LINKS TO RESOURCES FOUND IN PART 2 OF THE TOOLKIT

SECTION 3 - SUPPORTING SOMEONE THROUGH A MENTAL HEALTH CONCERN OR IN CRISIS



<https://www.suicideinfo.ca/resource/safety-plans/>
www.suicidesafetyplan.com.

Found in: ASK, LISTEN, GET HELP

If you would like to support someone to create a safety plan, the Centre for Suicide Prevention has released a comprehensive **Suicide Prevention Safety Plan Toolkit**. This program also offers trainings on how to implement and use a Safety Plan.

Sample plan: <https://bgg.11b.myftpupload.com/sample-page/>

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