



# **Supporting Good Mental Health at UAL**

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- Clients include Locksmith Animation, The Brit List and NFTS.
- Over a decade working in film and TV
- Over 7 years as a Samaritan
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- 30+ years of working in HR
- CIPD Fellow
- Clients include UAL and Market Research Society.
- Over 10 years as a Samaritan

# Content note for today's session

Today we will be talking about mental health.

This is a subject that is deeply personal to many people.

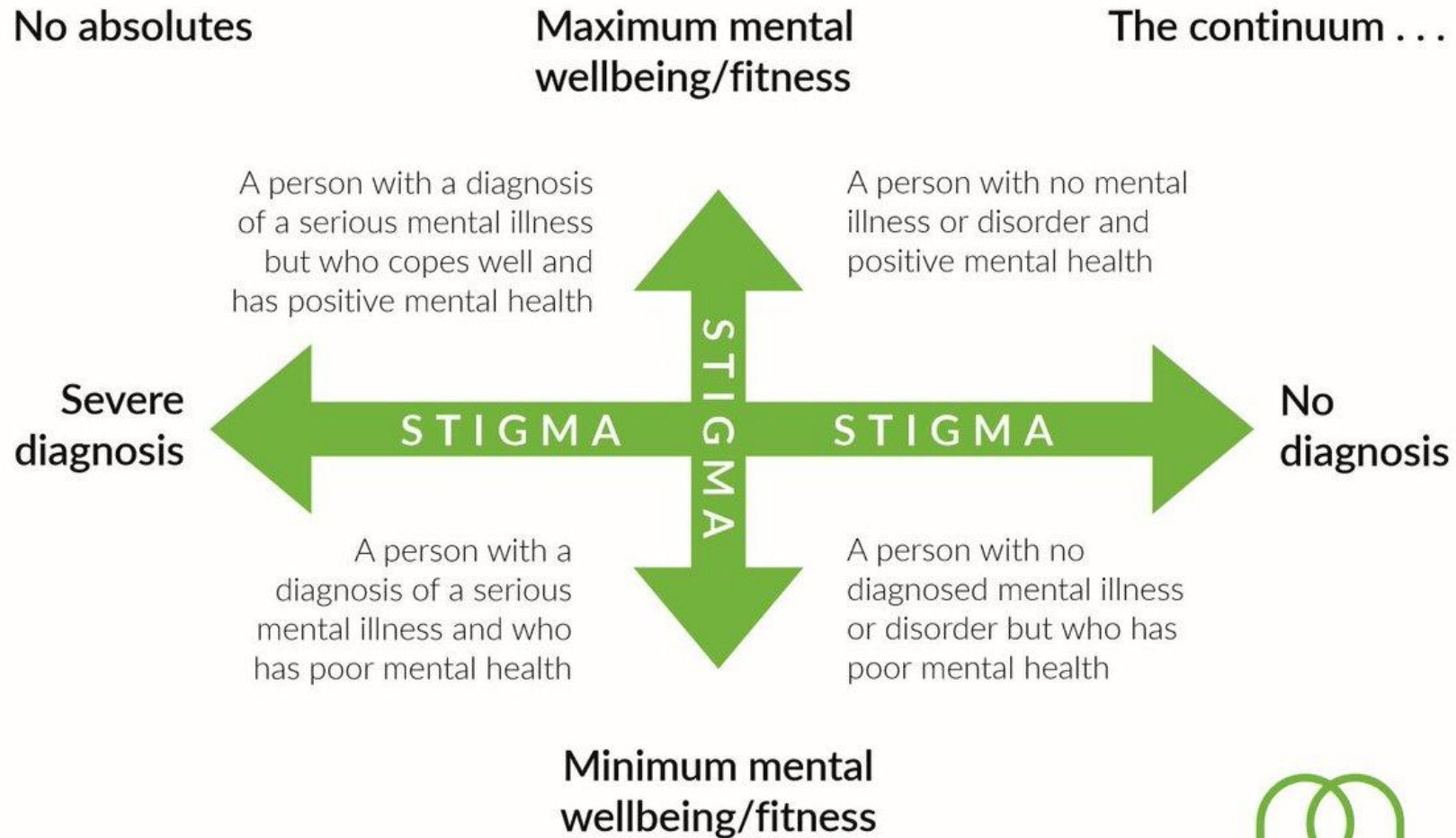
If you need a short break from the session for any reason, please take one.

Remember to use Student Services

# Aims of the session

- Understand what mental health is, and the context and stigma around mental health issues
- Gain some key information on common mental health issues
- Identify resources to draw on
- Consider how to provide support for someone in distress or possibly experiencing a mental health issue
- Understand the boundaries of support we can provide
- Consider how you can look after your own mental health

# The mental health continuum



# Mental health issues

- Not the purpose of this session to encourage you to make a “diagnosis”
- We are not medics
- Medics often struggle to make a diagnosis
- Diagnoses are sometimes incorrect
- Sometimes diagnoses are multiple
- Many people with severe mental health issues are never diagnosed
- We will focus on symptoms and behaviours that you may observe

## Signs and behaviours to watch for

- 4 areas, often with overlaps, not an exhaustive list:
  - A. Decline in ability to cope and thrive with study tasks
  - B. Changes in social interactions
  - C. Changes in physical health and appearance
  - D. Changes in how people express themselves

## A. Decline in ability to cope and thrive with study tasks

1. Difficulty with concentration and attention span
2. Difficulty making decisions
3. Slow thinking (everything takes longer)
4. Mind racing or going blank
5. Decreased memory
6. Avoidance of particular work situations
7. Loss of confidence and lower self esteem
8. Excessive checking, continually seeking reassurance
9. Disordered thoughts and perceptions
10. Jumbled words
11. Increased energy/hyperactivity
12. Lack of insight into own mental state
13. Low energy and motivation



## B. Change in social interactions

1. Social isolation and withdrawal
2. Not taking pleasure in activities previously enjoyed
3. Blunted or inappropriate emotions
4. Irritability or short-temperedness
5. Distress in social situations
6. Grandiose delusions
7. Elated mood
8. Suspicion

## C. Physical health and appearance

1. Poor sleep patterns - lack of sleep or sleeping too much
2. Changes in appetite and concern about food and diet - Overeating or undereating
3. Evidence of self-harm
4. Restlessness
5. Poor personal hygiene
6. Unusually unkempt appearance
7. Palpitations - chest pain, rapid heartbeat
8. Flushing
9. Shortness of breath
10. Dizziness headaches sweating, tingling and numbness
11. Choking, dry mouth, nausea
12. Muscle aches / pains
13. Greater intensity of smell / sound / colour

## D. How people express themselves

1. Slow and monotonous
2. Rapid and restless
3. Repetitive
4. Sounds resigned or deflated
5. Expressing odd ideas
6. Describing hallucinations (visual, auditory, olfactory, tactile)

## What can we do?

- We want to identify some appropriate approaches that you can take if concerned about a fellow student.
  - ❖ What should you do?
  - ❖ What should you NOT do?

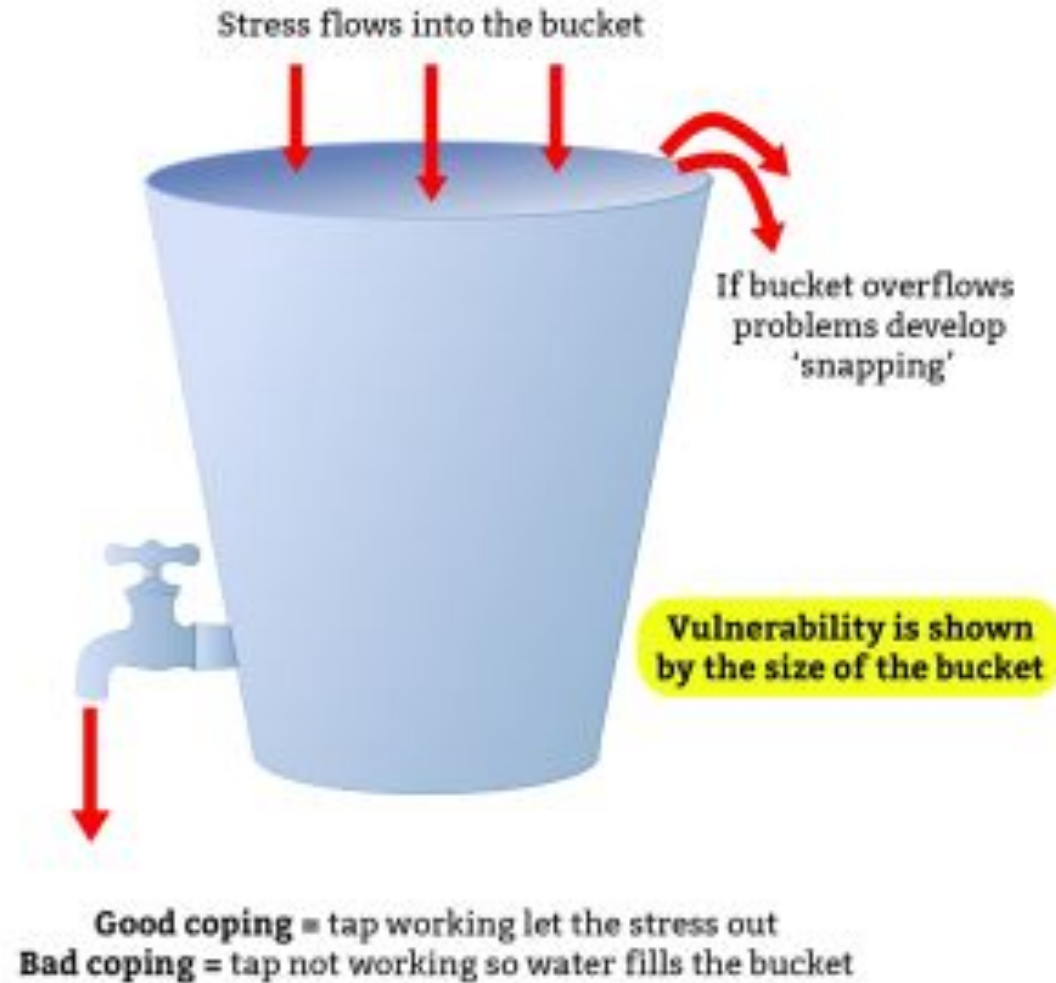
## Practical tips for maintaining clear boundaries

- Boundaries are crucial – we are not mental health professionals or carers
- Watchful waiting maybe appropriate – do you need to ‘jump in’ just yet?
- Early intervention is key, but wait for an appropriate time/place
- Be specific about your concerns – give clear examples

# Boundaries continued

- Signpost to additional support
- See yourself as a role model – look after your own wellbeing and work/life balance, and be courageous to name issues where you see them

# Stress Container

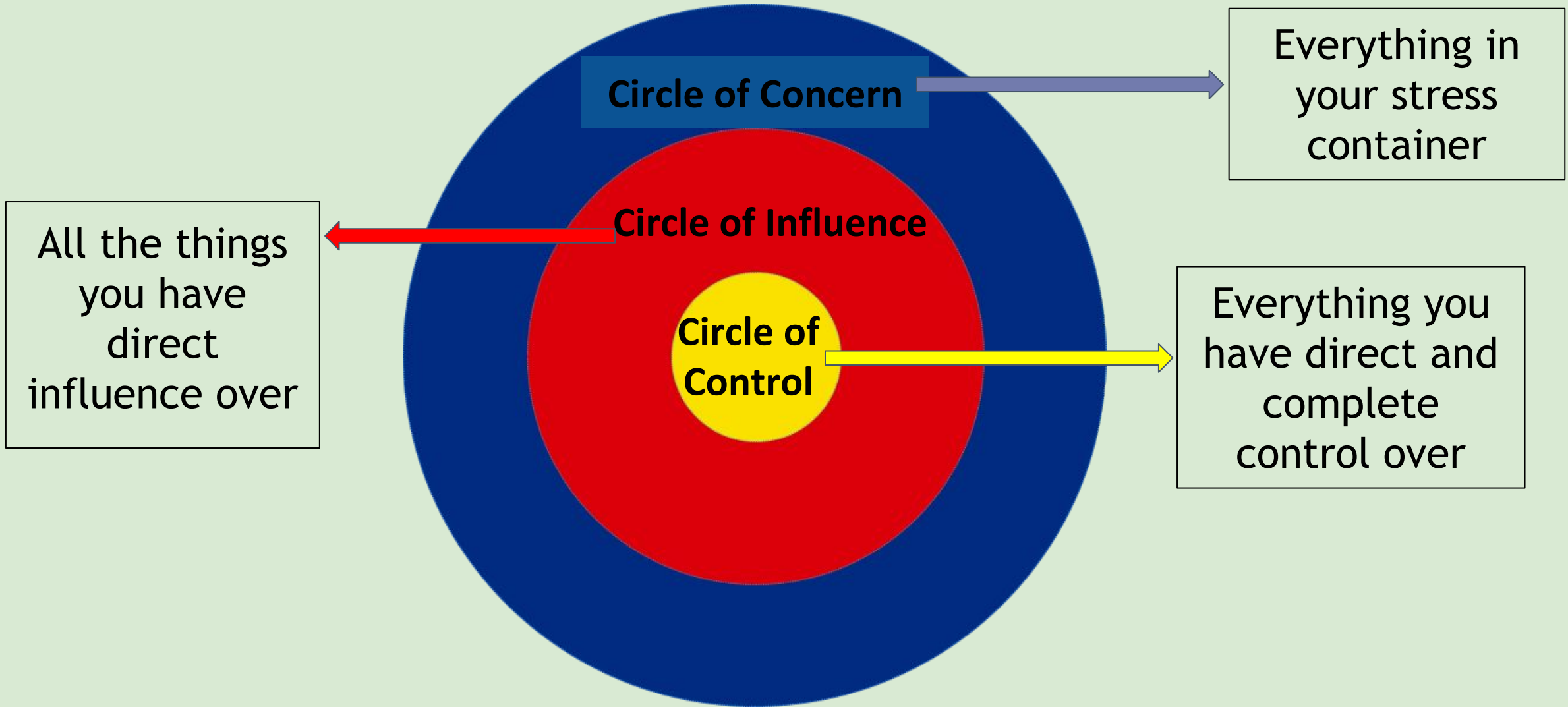


# Coping Tools





# What's in my Control?

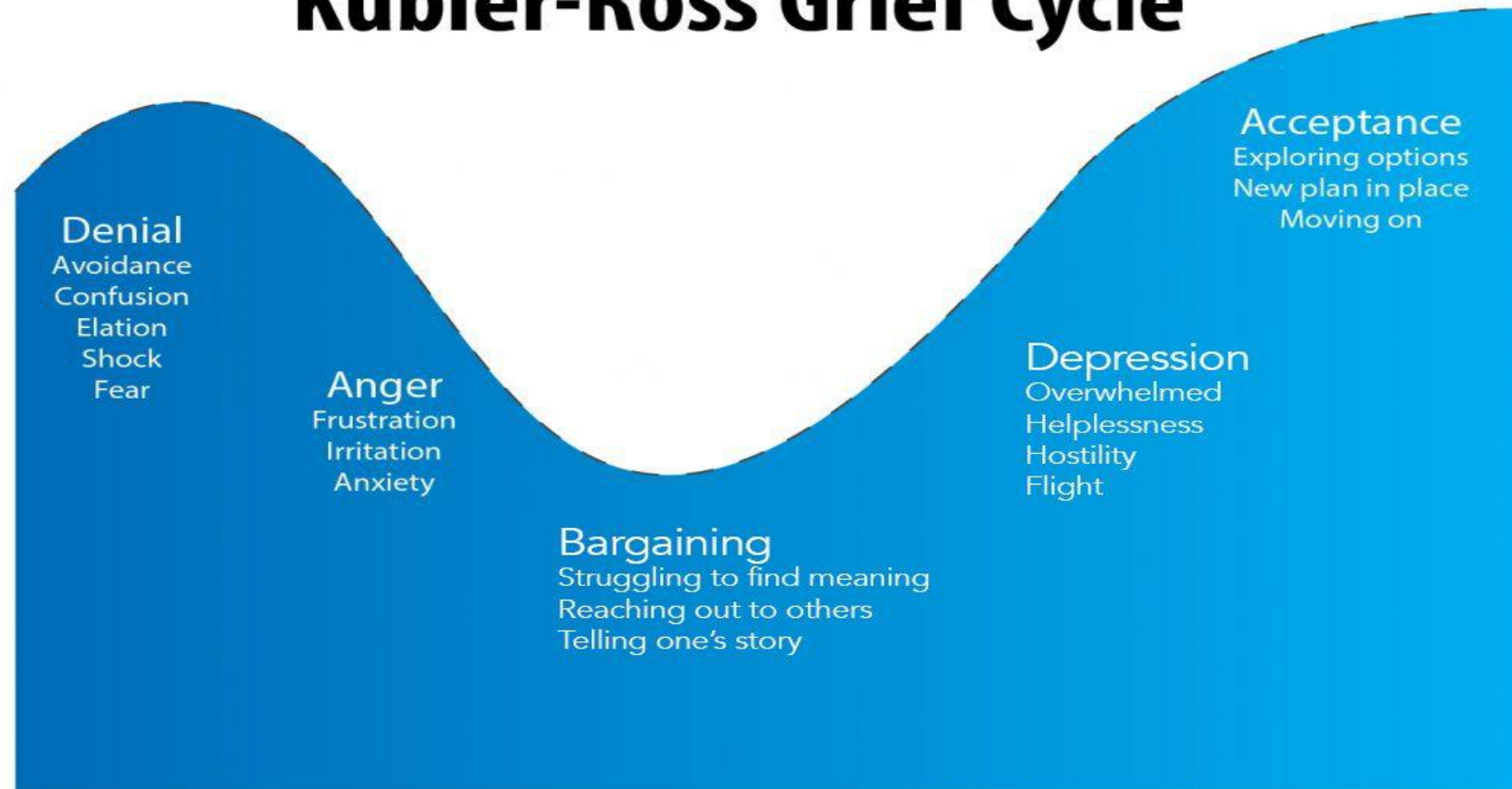


# The Power of Connection

- The emotion centre is the oldest part of the brain
- Our emotional centre responds to isolation with anxiety and depression in order to keep us safe.
- Connection is the antidote to trauma
- Tend and Befriend stress response can change our physiological reaction to stress

# Covid-19 - The Change Curve

## Kübler-Ross Grief Cycle



Information and  
Communication

Emotional  
Support

Guidance and  
Direction

## Covid-19 - Finding Meaning

- Collective loss of the world we lived in/ of 'normal'/ physical connection/ gathering with others....etc etc etc
- Your loss matters.
- It's important to recognise and acknowledge our feelings
- Meaning isn't a bypass to pain. If you don't feel it you can't heal it.
- We won't be able to find meaning in the middle of a pandemic. But you can create meaningful moments with others. What can you do to create meaning?

**BREATHE**





**4-7-8**



**4 seconds inhale through  
your nose**

**7 seconds hold**

**8 seconds exhale slowly**



**4-4-4-4**



**4 seconds inhale through your  
nose**

**4 seconds hold**

**4 seconds exhales**

**4 seconds hold**

# Student Services

**UAL Mental Health - studenthealth@arts.ac.uk**  
**020 7514 6251**

**Companion Scheme -**

**<https://www.arts.ac.uk/students/stories/arts-su-companion-scheme>**

**Blog post about Companion Scheme -**

**<https://arts-su.tumblr.com/post/614741138727993344/advice-companion-scheme>**

**Counselling and Health Team -**

**<https://forms.arts.ac.uk/counselling-and-health-advice-request/>**

**Emergency info:**

**<https://www.arts.ac.uk/students/student-services/counselling-health-advice-and-chaplaincy/helplines-and-emergency-support>**

**Virtual drop in sessions: <https://doodle.com/poll/nncn7iry9yfi3yx>**



## What other support is available?

- NHS mental health services – GP, IAPT (Improving Access to Psychological Therapies)
- Samaritans 116 123
- CALM (Campaign Against Living Miserably)
- Mind
  
- A&E

# Looking after yourself and others – “TAKE 5”

Give



Keep learning



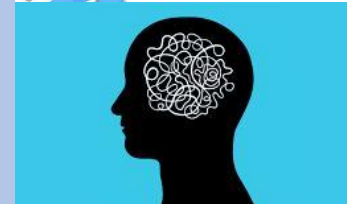
Be active



Connect



Take notice (Mindfulness)



## Thinking Distortions

**Generalisation** This means generalising out from a single negative event to seeing a pattern of never-ending defeat. Words like “never” and “always” often feature in such thoughts

“Why do bad things always happen to me?”

**Labelling** This is an extreme form of generalisation. It means taking a negative event or action and labelling yourself as a person, usually in a harsh, punishing way. We can also label other people based on single actions, in which case we may feel angry.

“I’m rubbish; I’m worthless”

“My tutor always thinks it’s my fault”

**Catastrophizing** This involves imagining the worst possible outcome to any situation, or giving undue weight to such scenarios- however unlikely they are.

“It’s going to be a disaster”

### **Scenario 1**

You whatsapp a friend and you see the blue ticks to say the message has been read. But your friend hasn't replied and it's been over a week. What has happened?

### **Scenario 2**

You are rushing to get some printing done for a presentation you are about to make. The person in front of you at the printer says they think that the printer is playing up. What goes through your mind?

### **Scenario 3**

Your Mum texts you to say she wants to have a chat tonight to discuss something important?

What could this be?