



Transcript:

The Impact of Mental Health on Students & Youth Part 4: How to Have Meaningful Conversations with Youth About Mental Health

Presenter: Angela Begres
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ANN SCHENSKY: Hello, everyone, and welcome. We're going to give people a couple of minutes to get in and get settled. And we will get started right at half past the hour.

OK, we're going to get started. Again, welcome everyone to Part 4 of our series, How to Have A Meaningful Conversations with Youth about Mental Health. Our speaker today is Angela Begres. This webinar is brought to you by the Great Lakes MHTTC and SAMHSA. The Great Lakes ATTC, MHTTC, and PTTC are all funded under the following cooperative agreements.

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Also, if you have questions for the speaker, please put them in the Q&A section also at the bottom of your screen, and the speaker will respond to these questions. You will be directed to a link at the end of this presentation to a very short survey. We would really appreciate it if you could fill it out. It probably takes about three minutes, and it's how we report back to SAMHSA. The recording of this webinar, along with the slides, and any other handouts will be available on our website. It usually takes us about a week to get everything up there. And certificates of attendance will also be sent to all who attend the full session, and they will be sent to you via email. And that usually takes about a week. If you would like to see what else we are doing, please follow us on social media.

And our speaker today is Angela Begres. Angela is a licensed clinical social worker who did her training at the University of Chicago, where she obtained her MSW. She's an experienced trainer-presenter contracted both independently and through various nonprofits in the Chicago area, Michigan, and other areas. She has experience integrating mental health education programs into the curriculum for students and staff within the Chicago and



West Cook County Public Schools. Welcome back, Angela, we're happy to have you.

ANGELA BEGRES: Thank you so much, and good morning, good afternoon to everyone who is here today. So this is Presentation 4 out of four. If you have joined us for all four, it's so nice that you've been part of these. If this is your first time, I'm happy that you're here. So a lot of my experience is on prevention and education, but I also do a private practice here in the state of Michigan and work mostly with youth and young adults, and really try to focus in minority communities.

So I'm really happy to be here again with all of you. Today, we're really going to focus on having meaningful conversations with youth about mental health. So previously we've talked about recognizing signs and symptoms, assessing youth for mental health challenges, and talked a little bit about how COVID has impacted an increased anxiety, and depression, and stress for youth. So today, I'm really going to focus on providing all of you with some tips and guidance on how do we start a conversation with youth?

How do we have meaningful conversation with youth? And then also what are some helpful resources that we can have can have in hand if we are concerned about someone that we know? So, again, learning objectives for today, really talking a bit more about how to recognize and talk about mental health. I'm going to provide some strategies on how to start a conversation. Also, how to support youth if they're not ready to talk. That's something I oftentimes hear from people is, well, my youth doesn't really want to talk, or when I do approach them, they shut me off right away. So I'm going to talk a little bit more about that. And then I'm going to end today with talking again about some types of professionals, evidence-based treatments for mental health.

So I always like to get started with having my participants just kind of check in with themselves. So I want you to take a few minutes to check in with yourself, think about how are you feeling today? And it is a good reminder that our emotions come in a spectrum, and we have a full spectrum of emotions, not just positive emotions. And it's OK to just be OK. It's OK to be tired, upset, angry, frustrated, right?

There's a lot of other feelings besides happy, so I want you all to just think about how are you feeling today? And if you want to share in the chat with all of us, that would be great. So I'm just going to give you a few seconds, and think about how are you feeling? All right, so I saw tired and exhausted. Ooh, I see energized, absolutely, yeah.

So I also want us to take a minute and just ground ourselves to be here today. Virtual learning, virtual education, working from home can be really difficult. We have many different distractions at home. Many of us might be transitioning maybe from one work to sitting here and being part of this



presentation. So I want to take a minute to do a grounding exercise, and this is a mindfulness or breathing exercise.

So it's called four-count breathing. And what I want all of you to do is just to kind of sit comfortably, and just for a minute, pay attention to your breathing. And what we're going to do is we're going to inhale to a count of four, and then exhale to a count of four. So if you can all just take a few seconds. Sit comfortably. And then what I'm going to do is I'm going to start counting, and what I'm going to ask you to do is inhale.

So basically you're going to Inhale, 1, 2, 3, 4, and then exhale, 1, 2, 3, 4. And I'm going to do it one more time, so just Inhale with me, 1, 2, 3, 4, and then exhale, 1, 2, 3, 4. And what's helpful about just being mindful about our breathing is that it helps bringing oxygen into our brain, and it also releases toxins that we might have. Doing this also allows us to regulate our feelings and our reactions.

So mindfulness can be really simple. Many of you have smartwatches who are scheduled to ask you to breathe or have some level of mindfulness for a minute. So I highly, highly encourage all of you here to be mindful about that because mindful breathing helps our mental health, helps our responses, and helps release a lot of different toxins. And if we can do it, we can model it for those youth around us as well.

So making mental health a priority. So childhood is a time for growth and development both physically and mentally. These changes often can produce a risk for serious problems with mental health. The Child Mind Institute's 2016 report estimates that one in five US children meet the criteria for a mental health illness.

It's so important to talk about mental health on a regular basis. If your child seems to be doing fine, we still want to be able to talk to them about their mental health. And being able to have constant frequent conversation about feelings about our mental health sets a good stage for youth to be able to come back and talk to you if they are feeling like their mental health is struggling.

Kids and teens who feel supported during a difficult time, typically are better equipped to deal with their mental health struggles and have better chances for healing and recovery. So being able to feel heard and understood increases the likelihood for youth who struggle with mental health to heal and recover. This is also why prevention is really important, right?

If we start talking to youth early on, we're able to recognize signs and symptoms early. And it's much easier to treat something early on than when it becomes more severe. And that's a big goal. And I think that that's going to be a positive outcome from this pandemic is the concept of making mental health a priority.



And talking about the impact of COVID, here's some stats. I have covered the stats in previous webinars, but I still want to put it out here because I think it's really, really important to recognize how our youth are being impacted by COVID-19. So this data comes from the National 4-H Council and the Harris Poll. They surveyed a couple of youth and adolescents in 2020, and this is the results.

81% of those teens said that mental health is a significant issue. 64% of teens believe that the experience of COVID-19 will have lasting impact in their generation's mental health. In fact, in the last webinar, I mentioned that the impact of COVID-19, what has been seen and what research is showing, is that the impact's going to have a lasting effect of almost nine years on adolescent's mental health. Seven in 10 teens have experienced struggles with mental health.

55% of teens say they've experienced anxiety, 45% excessive stress, and 43% depression. 61% of teens said that COVID-19 pandemic has increased their feelings of loneliness. 82% of teens desire America to talk more openly and honestly about mental health issues in their country. And 79% of those teens wish there was an inclusive environment or safe space for people in schools to talk about mental health.

Now, again, I think for all of us that are here today, we have the ability and the power to be advocates. And we want to make sure that we are advocating for youth to have more resources, more spaces for them to talk about mental health, more space for them to openly express their struggles, their symptoms, their challenges because that's part of early intervention. If we're able to create a safe space for young people to talk, we're able to provide them help early on.

And like I said, research is showing that the impact of COVID-19 on youth mental health is going to have lasting effects of approximately nine to 10 years. So it's something that we're starting to recognize currently, but we have to be mindful that this is going to have a lasting effect as well. So starting to talk about mental health with youth is really important, and that's really our main focus for today.

I am a Mental Health First Aid instructor, and one of the main things we talk about in the Mental Health First Aid program is that one of the greatest protective factors for youth is a positive relationship with at least one trusted adult. And the key here is having at least one trusted adult can be a significant protective factor for youth. So there's a lot of risk factors. We just talked about it, right?

A lot of youth have been severely impacted by COVID, increasing their depression, increasing stress, increasing anxiety, and that's why starting to build trusted relationships with youth is really important. And creating open



and honest conversations with adults from a young age will make talking with an adult about mental health issues less intimidating for teens.

A lot of youth do find talking about their mental health intimidating, and there's many reasons for that-- we're going to talk about those throughout this course today-- but some of them include fear of how trusted adults will react or fear about how adults in their lives will react. There's also stigma. We know that stigma is a big issue around mental health in our communities, so a lot of youth have fear about talking about their mental illnesses because of stigma. Other reasons why youth fear talking about mental health is that they might not know that what they're experiencing is not typical, or they may not recognize that there is help and that they can get better. So by having those conversations, we are supporting youth, and we're helping them find those resources. And talking openly about it can just help youth know that they're not alone, and sometimes that's all they need to hear.

So we've talked about stress, and I think stress is really important. And we've seen an increase in stress for youth. Kids and teens handle long-term stress and other mental health issues in dramatically different ways. Some will withdraw and isolate themselves, others will start acting out, and some might suffer in silence. Age can play a role in how a child responds to stress. In younger kids, very often, anxiety will present as behavior changes, and no one thinks it's anxiety.

So you may see a child being more irritable. You may see a younger child having a lot more tantrums, also unwilling to try new things, or avoiding school. And those are some things we want to be mindful as adults is recognizing what is leading to these behaviors? What is leading to that irritability in the youth? What may be the reasons for the tantrums? And oftentimes, avoiding school is a big warning sign for anxiety. I'm curious to see how young people are going to respond to school opening back up. I know here in my area, they're starting to open back up. And a lot of the youth I work with are very hesitant to going back to school, so I'm curious to see how that will turn out.

Now, when we think about older, like adolescents and teens, they're more likely to voice their emotions or concerns that they're having. They're also more likely to talk about their struggles around mental health. So being mindful and paying attention to that is helpful. You might also see some warning signs in teens such as isolating themselves, spending too much time in their rooms, withdrawing from friends and family. And those are all some signs of stress and anxiety in youth that as adults we want to pay attention to. There's other things we want to be mindful and other ways that we can recognize youth stress. So changes in sleeping or eating patterns, again, I cannot emphasize enough the struggle that so many of our youth are having right now with sleeping. So we want to explore that, assess where it's coming from, and try to support youth in managing sleep because sleep is critical for physical and mental health.



Youth require eight to 10 hours of sleep every night. And so if we see any changes in sleeping or eating patterns if we see increased aches and pains. So oftentimes youth express-- we hold anxiety and depression in different parts of our bodies, and sometimes although we may not notice it, the symptoms can be physical. So you might have constant headaches. You might have stomach ache. You might have GI problems. And those can be associated with depression, anxiety, or stress.

We might also recognize or notice increased focus on their body. Knowing that right now youth are spending so much more time on their computers, many of them are connecting to social media. And although it's a helpful resource to have, we also know that there is a lot of pressures in those platforms. So we could see a lot of more focus in youth bodies.

There may also be things like-- there may also be things like young people feeling like they're being still very often, and so not exercising like they usually would. So they might notice or be more concerned about their body type. Difficulty separating in younger youth, we may see what we often call separation anxiety. And this is what I'm saying when youth are starting to go back into school, I'm wondering if difficult separating will increase. So with younger kids, we want to be mindful of that, right? Has their anxiety increased? Is this different than post-- before COVID. And sometimes it's just getting back into the routine, and that's really all that it takes, right? So we want to be mindful not to pathologize kind of typical behavior for mental health challenges. But the best way to find out really what's impacting the youth is by talking to them and having those open, meaningful conversations. And then we might also notice withdrawing, right?

So withdrawing is a big warning sign for a lot of different mental health disorders. So if you notice that the young person is withdrawing from friends and family, if you notice that the young person no longer wants to do the things that they really enjoyed, and say they enjoyed playing soccer or basketball, and no longer want to do any of it. So those are some clear warning signs that the young person might be struggling or experiencing some symptoms of a mental health challenge or a disorder.

So I talk to young people a lot, and they tell me a lot of many different reasons why they avoid talking to their parents about their mental health. I found an article by Mental Health America that surveyed youth on some of the reasons why they avoid talking to their parents about their mental health. And this is what the youth reported.

I don't know how my parents will react. My parents will be sad or disappointed. My parents will be angry or won't take me seriously. My parents will ask too many questions. My parents already have enough to worry about. I think it's important for us to know that young people really value their parents. Oftentimes, their goal is to please and make their parents proud, and



there could be a lot of guilt about putting a burden in their parents if they talk about their mental health.

And we want to just be mindful of this and acknowledge it. And so if we are the parents, or if we're the professional, or if we're the teacher, there are ways that we can support youth through some of these feelings. So we can empower youth to really choose a time and place where they would feel comfortable sharing about their mental health concerns with their parents, right? So we can tell the young person, you know, I want you to feel empowered in choosing when is a good time? When is a good place to talk to your parents about some of your feelings or your concerns about your mental health?

It's also important to normalize for youth that parents might feel upset or disappointed, and it might not necessarily be at them. It may be their own fear of what if I could have done something different? Or what if I caused this issue? Right? So we want to help young people normalize that. Even if parents are feeling sad, or worried, or even disappointed, it's not directed at them, but it's more really internal of maybe I did something wrong or some guilt.

So the last thing is if we notice, or if the young person is really worried, there's a couple of things we can say. Which parent would you feel more comfortable talking to? Or if you don't feel comfortable talking to your parents right now, here's some other professionals that you can talk to. We can always also ask the person would you feel comfortable if I was there with you while we had this conversation with your parents?

And I would say I got this data from Mental Health America, but this is not rare to me. And I'm wondering if other professionals that are in this call hear this from the youth that they work with. A lot of youth are really worried about talking to their parents, and especially during COVID-19 because they don't want to put another burden on their parents. I also notice a lot of young people reporting that their parents dismiss or don't take them seriously, right? So another part of this is just if we are parents, we want to be really mindful of how we respond to youth when they're trying to share some of their feelings, emotions with us. I think it's important to remember that young people are developing, and growing, and changing, and their experiences oftentimes are brand new. Whereas for us as adults, we might have already experienced a lot of what they feel, a lot of their emotions, so we might not think they're as important or as impactful.

Whereas for youth, those feelings, those experiences can be the very first time they have them, so it can be really, really impactful. So we want to be mindful, right? We want to normalize for youth that oftentimes parents want to be there and they care, and some of those fears are not necessarily correct. But we also want to help in the education of parents and professionals about



being able to be present and listening, and supporting youth in these conversations and this discussion.

And the truth is that there are so many of us. and I think me included with my own family members as a professional, it's really scary to hear a sibling or my own child coming to me with mental health disorders because I want to fix them. And that's not a thing, right? We can't fix a mental illness, especially if we're the parent. So we want to normalize having a discussion is about supporting and listening, and maybe connecting. It's not about trying to fix something.

So how do we talk to kids about mental health? I think this is important to think about it, right? How do we start the conversation? How do we frame this conversation? And remember that the way we frame the conversation will depend on how old the child is. With some kids, we can be very straightforward, with others, we may need to spend some more time explaining things for them.

So the first thing I want to mention, and I think you all would agree with this, right? When we're starting a conversation with youth, we want to make sure we minimize distractions. I also want to remind you all that starting a conversation is just that, we're starting it. It shouldn't be finding a solution right away. Sometimes starting the conversation is just like I'm going to tell the young person, I'm going to kind of knock on the door and hopefully, open the door.

And it might take multiple conversations to get to a place where we are helping the young person find resources, or we're helping the person really open up to us because young people need to feel like they trust you. And sometimes when young people share information with us, there is so much more underneath that, right? So think of an iceberg. Sometimes we're only seeing like 10%, the very tip of the iceberg. So we really want to explore it to find the other 90% of what's really going on with the youth.

So the first thing we want to do as the adult when we're approaching a youth and we're trying to start a meaningful conversation about mental health is we want to make sure we minimize those distractions. So I know I am, I'm really addicted to my phone. So being really mindful on making sure that your phone is away from you, you're not texting or scrolling through social media because that can obviously prevent the connection if you're trying to have a meaningful conversation.

Also pick a quiet, private place, right? So dinner at family's house on Friday, probably not the best time to start that conversation. So what is a good private, quiet place? If we're the parents and we have other kids, maybe finding a quiet place for you and that one child, right? So some private place, even individual time for the young person.



If we work in a school, right? Thinking about where is a place where we can communicate with the young person. And if we're virtual, asking the young person and their family if they can provide some privacy for the young person. Also, make sure you have set aside enough time to talk. So if you're going to start this conversation, 7:00 AM before you have to drop off your kid at 7:30, is not a good time, right? So giving yourself and the young person enough time to really sit down and talk.

Having enough time will open your mindset on being able to talk openly without feeling rushed, so keep making sure that we have enough time. And sometimes it could even be helpful to let that young person know, like, hey, I'm here with you. I have no other things I need to get to, so please feel free to talk to me. There is no rush. So that can really help start pull down some of the walls and open up the conversation with you and the young person. Again, back to phones, being mindful and trying to silence your phone. And if you have any kind of smartwatch, making sure that we try to avoid looking at it or looking at the time. All of those things can be distracting, and sometimes you might show that you're not really interested in being there paying attention to the youth. Now, I oftentimes hear, well, young people are so, you know, they live in technology. It doesn't matter, right?

Young people have the same perceptions that we do as adults. We know when someone's being present and paying attention to us, and so they're able to recognize those as well. So being mindful of that is really important. It's also OK to notice that you need to have this conversation and tell the young person, you know, I'm starting to notice some concerning symptoms with you. And I think it would be helpful for us to have a conversation. When would be a good time for you?

So even just that would be a great way to open the conversation and empowering the young person to tell you when it would be a good time for them. So keeping those things in mind as well, allowing the young person to choose the time and place for that conversation. Sometimes giving it some space also helps the young person and you as the adult to rest on your thoughts and prepare what you want to talk about.

So it almost give a heads up, like, this is what we're going to be talking about, so just know, and prepare yourself for that conversation. So I think that's a really important tip to take away, right? It could be helpful to even ask that young person when would be a good time for us to talk? And let's add that to our schedule or to our calendar.

So here are some steps for talking with your teen. Listening is number one, right? We all want to think that we're the best listeners ever, but I'm going to be completely honest with all of you, we're not. We're really bad listeners. So what does it mean to listen? Really listening means stopping the voices in your head and trying to actively pay attention to the person who's speaking. We also want to listen without judgment, right?



That doesn't mean don't allow your natural judgments to come around. Just be aware of them. We all judge. It's part of our being to sometimes have judgments, but we can recognize the judgments and also not react to those judgments. So we want to be really mindful of that, especially when we're trying to listen, and especially when we're trying to support a young person who could be suffering from some mental health challenges.

We also want to ask if they've thought about what they might need to get better. Again, I'm going to continue to use the word empower, right? A lot of research says that if the young person makes the choices, they're more likely to follow through with those choices, more likely to follow through with treatment, and more likely to recover from a mental health disorder, or a substance use disorder. So we want young people to really take some leadership on what they need.

And the truth is we can't tell young people what they need, especially if they're the ones who are having those symptoms. So let's allow them the space to tell us what they need. If they haven't thought about what may help them feel better, or what they might need, then listen, and talk to them, and try to support them in thinking about what are some of the things that they will need?

We also want to learn, right? If the young person brings you information, if you know that the young person has a mental health challenge or a mental health disorder, make sure that you learn what that means, what that looks like. And there are some helpful resources that I put at the end of this PowerPoint that you can utilize to learn such as Mental Health America, the National Alliance of Mental Illness, SAMHSA.

So there's a lot of different evidence, a lot of different resources that have really good information around mental health disorders. Confidentiality is also really important. We want to make sure that we clarify to youth what confidentiality means and when confidentiality will not be able to be followed, right? So we can say something like I'm here for you and just want to make sure you know that anything you share with me is confidential unless there's life-threatening challenges, right?

So unless there is threat to yourself or others. And then we would have to get certain people involved. Usually what I would say is some things like everything we share here is confidential, unless you're a harm to self or others. And then we have to get your parents involved so that they're aware of what's going on. So we always want to make sure that we respect young people's confidentiality.

Sometimes respecting confidentiality is something as simple as like, if we know that a young person struggling with sleep, don't share that with your neighbor, or your best friend, or your sister because for young people that may be a breach of confidentiality. So just be really mindful if you're going to



share some of these challenges, allow the young person to give you permission.

Hey, is it OK if I talk to your Aunt Suzanne who is a therapist? Can I tell her that you're struggling with your sleep? Would that be OK with you? Being able to have those real conversations with youth will really validate the fact that you're there for them, and that you support them, and that you notice them, and I think that's really important.

We also want to normalize. Assure your child that having a mental health issue is common and does not mean that they can't get better. I talked about stigma earlier, and I will talk about stigma again. But you know, stigma, what we hear the news, what we see in social media, there is a lot of fear of what mental illnesses look like. So it's OK, and it's really important to normalize that having some of these symptoms does not mean that you're always going to feel like this, that they're not alone in that experience, and that they can get better.

That's different than saying, oh, don't worry. You're going to feel better tomorrow, right? That's saying like, I'm here with you, and you can get better, and we're going to kind of find some help so that you're going to start to feel better soon. You want to also acknowledge your fear, but don't let it rule your behaviors, right? It is normal and typical for us to feel some fear if we're talking to a youth who might be experiencing symptoms of a mental health disorder.

What we want to acknowledge is that it's OK to be honest and say, wow, that must be really hard for you, or that's really scary. But we don't want to react to that with a severe like, oh, no, that's terrible! Right? So be really mindful of how we respond to that. I oftentimes explain this as you want to be a duck in the pond, right? You want to make sure that you look confident in having this discussion because if you look confident, then that young person is going to feel safe.

So a duck on the pond basically is on the top. They're kind of gliding around. They seem like they're just kind of floating, but on the bottom, their feet are just flapping away trying to stay up and moving. And so if you're scared or you have some fear around what the young person is telling you, that's OK, but I want you to try to be a duck in the pond. Still feel and show confidence that you're there with them and that you're going to assist them so that they feel safe as well.

And like I said before, right? Our job is not to fix. As a parent, our job is not to fix. As a teacher, our job is not to fix. As a counselor, our job is not to fix, right? It's to support young people. And so if we're the parent, if we're the teacher, we can offer an impartial counselor. And that's really important that we offer that to young people, and that they know that that counselor will also follow confidentiality because young people when they're experiencing mental



health challenges, they might be experiencing thoughts and emotions that can be really frightening.

And it can be really scary to start opening up. So if we break the confidentiality, not only is that preventing them from opening up to you, but it's also preventing them from opening up to other people. So it can be really impactful. And then we also want to make sure that we prepare to be an advocate for young people. So finding the right mental health treatment is like finding the right medical provider. It takes time and effort to make sure you're getting the best care you need.

I cannot emphasize this enough. We want to make sure that young people or anyone who seeks mental health treatment is getting the best care they need. And when you seek therapy, it's about you. It's not about the professional, so you want to make sure that it's a good fit for you, that you feel comfortable. And if it's not, don't be afraid to try someone else, right?

Just like a medical provider, I'm pretty sure many of us here have tried many different medical providers. And just because we had one that we didn't like, we didn't just say, oh, I didn't like that general doctor, so I'm just never going to go to a doctor again, right? We said I really don't like the general doctor, so I'm going to go find someone else that maybe has this experience, or who maybe has worked with this type of illness.

So the same thing happens with the mental health professional. If one doesn't work, really encourage the young person not to give up, but to look for someone who maybe has more experience or more knowledge on things that are specific to the young person.

Now, there are definitely some things we want to avoid when we're having a conversation with youth. I always like to emphasize this. It's not they we do any of these on purpose, but sometimes in our effort to help young people, we do things that are not helpful. So we don't want to minimize how they're feeling or tell them you shouldn't think that way. It's quite difficult to bring up this conversation. Remember, that they probably worried about it for some time before coming to you. So be really careful for minimizing.

That's often one of the things I often hear from youth is that their feelings are minimized, or that we say, oh, that's just part of being an adolescent. It doesn't matter if it's part of being an adolescent. We just want to listen. Youth just want you to hear them. Don't let your emotions rule your response, specifically if you're angry. So be really careful with negative words like you're never going to get it together, or you are always depressed, right?

Those things are really impactful and can set a young person back for a long time. So it can really set a young person back from opening up or seeking support from others. It's also not uncommon for parents to feel guilt and blame themselves. So if your child has-- so oftentimes, we don't blame



ourselves if our child has asthma, right? But when it comes to a mental health disorder, we tend to blame ourselves.

So if we are a parent, checking in with ourselves and that feeling of blame, and recognizing that most of the time, it is not the parent's fault. A mental health condition is like a physical condition. There's a lot of risk factors that come into that, and being a parent usually is not the only one. So there could be a lot of reasons why a young person might develop stress, depression, or anxiety. And obviously, we just saw some research that shows how COVID has impacted or increased the risk for a lot of youth.

So being mindful of that and having that in the back of our head, like, we might feel a level of guilt, but reminding ourselves that we wouldn't feel this guilt if our child had a physical condition. So we want to treat ourselves with kindness when it comes to mental health disorders. Do not tell your child what they should do, instead ask what they want you to help them with. How can I help you? Is there something that you would like me to do? Right? So always ask them for how they want you to be involved.

We also want to avoid using the word crazy when talking about symptoms or experiences the youth might be having. Words have a lot of power, and sometimes words can support and create change, other times that can be really hurtful. And crazy is one of those words that oftentimes can trigger a lot of negative feelings, so you want to avoid using the word crazy when supporting our youth, or when young people are sharing some of their behaviors or symptoms.

If your child shares about bizarre thoughts or asks about strange sounds, pay close attention and explore. These experiences are early warning signs of more serious mental health problems. I think early can change the trajectory for their lives. So there are some things we want to be really careful of and be mindful of things that might be more severe, such as someone experiencing bizarre thoughts, or experiencing sounds or voices that aren't really there. We also don't want to argue. If you encounter resistance from your child, go back to listening, asking open-ended questions, and just repeating what you've said. Remember, young people may not be ready to open up right away. So if your child doesn't want to continue to open up, don't argue with them. Just say, hey, I'm here for you. If you want to keep talking later, let me know.

Maybe we can check in on them in a couple of days. Hey, remember the conversation we had? How are things going now? So don't be afraid of resistance. Actually, expect resistance from youth. And if you don't, that's great. If you do, that's OK. We will continue to try. Another one that we oftentimes try to do is to make excuses or blame others. So we don't want to make excuses or blame others. It's the school's fault. They should have done more. It's your father's fault, right?



We tend to try to find someone to blame, and that is clearly not helpful. And don't compare children to their siblings, right? Well, your brother didn't have that problem, or your sister didn't act that way. So important to keep these things in mind. Really try hard to avoid them. Again, this is part of the educational part. It doesn't come with any-- people don't do this intentionally. Parents don't do this intentionally, but sometimes in our effort to do our best, we tend to do things that could be harmful. And so that's why education is so important. We don't know unless we learn it, and that's part of this course. We want to also validate, right? Validating is really, really a part of communication. When we're trying to have open communication with anyone, we want to make sure that we take some time to validate how the person is feeling and what the person is sharing.

Especially when we're talking about mental health, we want to make sure that we can provide some validation around those feelings, and those emotions, or the young person's experience. So we can validate by our nonverbals, right? So your body language could be a way that we validate. Body language can be anything about how we sit with the young person.

If we can and if they allow us if we can touch their shoulder. Sometimes our non-verbals just mean like, how we keep eye contact, how we shake our head when we're listening to them. So that's a way that we can validate youth. And that's why we want to minimize distractions such as our phones because that doesn't really open space for validation. Another way that we can validate is to reflecting, right? Or summarizing what the young person is telling you. So what you just told me was that you've been feeling really stressed recently. So really trying to reflect the young person's what they told you, and maybe even clarify-- is that right? Is that what you're trying to tell me? So reflecting can be helpful. One thing that I find really helpful too is labeling feelings, and this is important depending on the age group, right? Many of us don't really know the full vocabulary of feelings, so labeling your feelings could be helpful. Some youth might not even know what they're feeling, so you might be able to name it for them. So you might say something like it seems like that really upset you, or it seems like that really made you feel sad, or ignored. So labeling those feelings could be really helpful. And oftentimes, when we mean something, it takes away some pressure from us. So teaching young people about feelings, and teaching young people to label their feelings, could be on its own, a really helpful technique and strategy.

And empathy, right? Even if you don't personally agree with their reaction to something, try to understand their perspective. So a good example of empathy is like a breakup, right? As adults, many of us probably have experienced a breakup. And so if a young person comes to us feeling really devastated and sad, we want to just empathize and say something like, yeah, breakups can be really difficult. It is OK for you to be sad and cry about it, right? That's just being empathetic.



Even if we know it's not that big of a deal. Even if, as adults, we're like, come on, that was not even a good person for you. Just being present for that person at the moment, and empathize with what they're feeling at that instance. So those are some things we want to consider. Even if we don't agree, we still want to make sure that we empathize with their feelings.

Now, I earlier talked about asking open-ended questions. And I am sure many of you have heard about open-ended questions and the power of open-ended questions. So open-ended questions require thought, and introspection, and are not often answered with one or two words. The goal of open-ended questions is to gather information and keep a conversation going. Try to ask questions in a way that is focused more on fact-finding and less on passing judgment.

If your child or teen isn't the talkative type, you can try making observations and ask if they're correct. For example, if you notice your teen isn't spending much time with friends, you might point it out and ask why. So you might say something like I notice that you haven't really been connecting with your friends recently. Is there something going on? So open-ended questions are really helpful. Again, the goal is for them to come from a place of fact-finding and not of judgment, right?

So and it is helpful in starting a conversation with a young person. So I have a script for all of you to kind of practice, right? So how are you feeling? I've noticed you haven't been logging into class recently. How are you feeling? How would you like things to be different? I know "blank." Acknowledge something that is happening in their life, anything you want to talk about. So this is a very simple kind of script on how to utilize open-ended questions. I did create a handout for all of you today, and that script is in the handout as well. But I highly encourage you to kind of come at your conversations with youth with some of these open-ended questions, because what we avoid from this is putting in our own judgments or our own ideas of what the young person's feeling. And we're allowing the young person to think and process how to respond to you in a way that could be more accurate.

Another way that we can help when we're talking to youth about mental health is use examples. A lot of the times young people like to see how others talk about their feelings and their mental health. So for young children, it can be helpful to find ways for them to represent their emotions visually. So this might be finding books with stories whose characters express different emotions. There's this book I use often. It's called the Grumpy Monkey, and it's a cute story about being grumpy.

So finding those books for youth could be helpful. Also, using a daily emoji chart. Ask kids to pick the emoji that represents how they feel that day. That's a really good way to teach youth about emotions. Another way that you can use emoji chart is having them think about how others feel when they behave



in a way. If you just do a simple Google search of an emoji feelings chart, you can find many different ones of those.

Put it in your office. If you're a parent, print it out and put it on your refrigerator. And if you have younger kids, it's helpful to be like, can you show me how you're feeling right now? Can you point at this chart, and tell me how you're feeling right now? Again, this allows for us to have open conversations about feelings. It's OK to cry. It's OK to feel like that. Can I do anything to make it better? Do you need any help?

You can also use the feelings thermometer, and that's another way to help kids understand that feelings have different levels. So we can be upset. We can be irritated. We can be angry, right? So there's different levels. There's ways that if we understand how we feel, our thermometer, like, our level of feelings are not as intense. So these are ways to teach youth about understanding feelings, processing their feelings, and talking about their feelings.

For older kids and teens, hearing stories of other young people who have struggles with mental health issues can reassure them that they aren't alone. And there are many celebrities-- sorry I went ahead. There are many celebrities who have been open about dealing with mental health challenges. And I could think of a couple of them right now. Demi Lovato is one that's really open about her experience with mental health.

Lady Gaga is a really big one too. She has a nonprofit called Born This Way where she advocates and supports mental health for youth specifically. And she's a big funder for the Teen Mental Health First Aid program. So just some people that have really experienced things. Like Lady Gaga experienced bullying. She had a lot of depression in adolescence, and she has used those feelings to make a difference.

And then Michael Phelps is another one who struggled deeply with depression. And, again, I say Michael Phelps because he's athletic. And so we can definitely utilize different people to share their experiences and help young people know that they're not alone, that mental health challenges and mental illnesses do not define them. And that these are our experiences, and we can grow and make a difference from those experiences. And so that's why I find some of those very empowering and very helpful to talk to youth about some people out there.

I've said this already, but I will repeat it. Listen without trying to fix them. It can be hard to step back when all you want to do is make things better, but trying to fix a mental health issue simply doesn't work. I know someone that oftentimes when their kid is having a struggle with their mental health, it's like, I think you have a cold. Let's just try to get you help for a cold. And it's not really a cold. They're just struggling with their mental health, right?



All we need is just to listen to what the young person needs, just being a listening ear. I mean, we can all relate, right? Sometimes we had a hard day, and we don't need someone to find a solution or to fix the hard day. We just need to sit down, and vent, and just kind of let it out. Young people need that too, right? They want you to just listen. So listen, connect, and be their support system.

Have in-hand some resources. Talk to your doctor. Look for therapists who can help. And also help them navigate this new challenge. So these are the main things I want you to take away. We're not trying to fix. We're here to listen, connect, and be their support system. That can make a big difference. That can change the trajectory of young people's mental health that can lead to better outcomes, recovery, so being mindful of this is really, really important.

I really like this, sharing your own experience. I think it could be helpful when we're talking to young people to model from our own personal experiences. Some modeling sharing about your emotions and challenges shows that it's OK to talk about feelings and that it's normal and common to have mental health struggles. If your kid or teen is struggling with anxiety, tell them that time you had a panic attack at work.

If they're feeling depressed, share your experience at college when you went through a particularly low period in your life. Show your child that you've struggled too, but that you're resilient, and that it's OK to ask for help if needed. The point isn't to burden your kid with your negative experience. The goal is to show that everyone struggles sometimes, even their caregivers. Since caregivers are role models, this is a particularly powerful message to send that could provide some reassurance that everything will eventually be OK. So it is OK to share with youth that you've also experienced anxiety or depression. And the goal really is to model, like, I've been through this, and this is what was helpful for me.

And that's almost like normalizing this experience for them, and helping them know that no one out there is perfect. Perfect is not an achievable goal, but we can seek support. We can seek guidance. And with the right support and the right help, we all can eventually be OK as well. And that's a message of hope, right? Oftentimes, we don't get those messages of hope, so it's really helpful to share from your own personal experience.

So I've talked about stigma. I want to define stigma for you. Stigma is defined as a cluster of negative attitudes and beliefs that motivate the general public to fear, avoid, and discriminate against people with mental illnesses. The most significant consequence of stigma is that people don't get treatment they need. In fact, only a half of those with mental health conditions get treatment. This is according to Mental Health America. People are afraid to disclose that they have mental health problems.



They fear that they will be treated differently. So stigma plays a significant role in getting help for mental health disorders, and it is why it's really important to talk about stigma, to educate teens, youth, about stigma, but also to recognize that while stigma does exist, most people they interact with will simply be concerned and want to help because they care, right? So we want to enhance the fact that a lot of us do want to learn, and we want to support, and we want to help.

And right now, there is a lot of programs available for schools, for adults to learn about mental health conditions, and learn how to help young people, and learn how to destigmatize mental illness. And I would say one of the ways that we destigmatize mental illnesses is by really being mindful with our language. Avoiding calling people who might be experiencing symptoms of depression, lazy, because people who experience depression aren't lazy. They have an illness that prevents them from having enough energy to do the things that they wish they could do. So we want to be really, really mindful with our language in how we describe things. Even if you're not describing it for your kids, right? Let's say you're talking about somebody, and you're like, oh, they're just so lazy. They never get out of their bed. They're always crying. That's a message you're sending to them. That's stigma you're promoting around mental health. So even if it's not directly towards the people we're trying to assist or the young person we're trying to talk about, mental health challenges, we want to be mindful of how we talk about people in general when it comes to our language.

So one thing I try to do and I really try to practice is avoiding saying things like, They're crazy. This weather is bipolar, you know? Things that send a message to having a mental illness is bad because we don't send any messages out there that having asthma is bad. We don't send messages out there that having diabetes is bad or chronic heart conditions are bad. But some reason, somehow, because of fear, because of lack of knowledge, there is a lot of fear around mental health disorders, and it's sent often through our language.

So be mindful of that. I want you all to think about moving forward, how do I change the language for myself so that I help destigmatize mental illnesses so more people start seeking help? Because the earlier we seek help, the more likely we are to recover. And there is a big overlap between experiencing mental health disorders in adolescence and having substance use disorders. So you know it's not only one thing. It can become a lot more severe. And that's the goal is preventing it from being so severe.

So try not to take it personally if your child or young person does not want to talk about what's going on, but don't give up. Again, I want to emphasize that it could be really hard for young people to talk about their symptoms, their experiences. Sometimes they're trying to make sense on their own of what's going on. Sometimes stigma is a reason why, so I really want you to try not to



give up in talking with young people if they're experiencing signs or symptoms of a mental health condition.

Like I said before, starting the conversation is knocking on the door, and if they just kind of leave it halfway open, that's an achievement. You did a great job, right? Move forward. Keep going. Try again later. Don't give up, and don't take it personal. If they say I'm not ready to talk right now, and there's nothing wrong with me. I am fine. All right, well, if you're ever ready to talk, you can always talk to me. You can talk to your dad. You can talk to your school, right?

Help them also think about who are the many trusted adults in their life that they can also talk to if they don't feel comfortable talking to you. And sometimes that can be the case, right? Sometimes young people might just not feel comfortable talking to one of their parents or someone at their school. So who is someone you feel comfortable talking to? Who would you like to be able to talk to at this point in time? So don't be afraid, and I really want you to take that with you. Don't give up in trying to reach out to them.

So how about this video about starting the conversation? It's about four minutes, but I think we have time. I'm going to hope that it works. And the reason why I like this video-- I think it's from the UK-- but the way they talk about starting the conversation is really helpful. And you hear from multiple people, not just the parents, but some professionals, other individuals. So while you watch this video, what I'm going to ask you to do-- sorry, I am going to stop sharing so I can get the video going [INAUDIBLE]. What I'm going to ask you to do is just pay attention to the different strategies that they mention in this video, and write them down. And then maybe after the video is done, if you can share that with us, that would be really helpful. What did you find-- what were some strategies that you found helpful in this video? So give me a second. Let me just make sure I take you all there.

[VIDEO PLAYBACK]

[MUSIC PLAYING]

- If you're honest with yourself, and you're actually watching what's going on with your teenagers, you know that you need to do something. So it's just taking that leap of faith to actually be brave enough to do it.

- You just got to pick the right time to have that conversation.

- I can't do this when I've just rushed home from work or trying to make tea or all the 50,000 other things you do every day. It needs to be when I go in and talk to her that I can just stay there.

- And be natural, and whatever comes out is OK. I would actually ask, hey, I've noticed that, you know, you don't seem as bright and bubbly.



- You're not behaving the way you normally behave.
- You're not sleeping as well.
- Is everything OK?
- Then leave a little bit of a pause. They may well start to talk and open up.
- And, of course, you get the innocent no, no, no, nothing's wrong.
- Don't give up at the first rejection. [LAUGHS] Because there might be more there that it's only one more little feeler away, and they will say something else.
- You've got to have a go. And if you muck it up a bit, then the next day you say, you know how I tried to broach the topic with you yesterday? I don't think it went real well. Can we try again? Ask the question to open up the conversation, and then shut up.
- You're not judging. You're not coming out with statements that are going to make them go, oh, I'm going to close down now.
- Really acknowledging those feelings and not just saying, oh, well, you shouldn't be feeling like that.
- I think she talked for about 2 and 1/2 hours in the end. I just waited till she finished saying all the things she wanted to say.
- Empathizing with them-- I hear what you're saying is that you're really going through a really tough time.
- Answering using her words, so that she knows that you're hearing her.
- Rather than spitting out the next solution that you've conjured up while you're thinking about it while they're talking to you.
- If she'd stopped talking, I'd just sort of say, well, how did you feel about that? Reassure her to keep on going when she was talking about things that were difficult.
- And just that gentle touch was yet mum's here. Mum's here. She wants to listen to me.
- I just offered to support her whichever way she wanted. It's being there, but not being in their face all the time is probably it.



- Really making sure that you're not picking on the small things at them. Sort of giving them a little bit of slack. I mean, not saying that you just let them get away with everything. But if their socks aren't in the washer, it's picking your battles.

- He will, you know, even send out a text message, hey, just thinking about you. Just making sure you're OK.

- Also explaining that everybody at times has trouble dealing with their emotions, and at certain times, those emotions can get too much for us to deal with on our own.

- Then actively saying here's a terrific website that I think you'll find really useful, why don't you go on to that in your own time.

- The thing that we found the most helpful was actually getting someone to see her.

- If we can't help you, someone can, but whatever, we're going to get through it together.

- I said we would like to make a suggestion that you see a counselor.

- I suggested her GP first.

- They're not going through it alone. Everybody's there to help, whether it be the parents, family, their friends, and the professionals that they're seeing. We're all a team behind them.

- It's persevering, persevering, and persevering. And just keep reinforcing that I'm here for you. I want to listen. I want to help.

[MUSIC PLAYING]

[END PLAYBACK]

All right, so I think this video does a really good job at emphasizing the goal of this presentation. What were some skills that you heard in this video that you think are really important? Or what were some skills that really stood out for you as you were listening to this conversation? If you could share that in the chat, that would be really helpful, while I get us started on my PowerPoint again. What were some things you heard that were helpful?

Pick your battles, absolutely, that's a good one. No judgment, yeah. Yeah, absolutely, really good, right? And so the reason why I also like this is don't give up. I thought that was a really powerful statement too. And one thing I also liked that I heard in this video was that he said we're here together. Whatever you need, we'll get through this together. How powerful is that



statement? I think that's a really, really helpful statement. I mean, oftentimes, you feel alone in that experience.

And so hearing from your loved ones that we're here together, I think can make a significant impact in a young person's life. Even if-- yeah, absolutely. I like-- yep, ask the question and use pause. I think that's a good one to think about. And remember, I don't know about all of you, but sometimes we have a hard time with that silence, and we want to keep adding information.

But just letting the person process those feelings, and process what they want to say. And sometimes that means asking a question and allowing yourself to sit in silence for a little bit. So I hope this was helpful for all of you. Again, you will have the slides in a couple of weeks as well if you want to see this video again. And I have put this the website to this in my references at the end of that PowerPoint. So if you want to use this website as a reference, I think that would be a helpful reference.

Again, I think is a UK website, but this is universal, right? Having these kind of conversations I think could be universal in any place in the world. All right, so I'm going to transition us, and before I go into the next slide, I always like to talk a little bit that I am going to have a brief discussion around suicide. And so I just wanted you to know that, so you feel comfortable with this discussion. And I think whenever we talk about mental health, especially if we're concerned about a young person, we always want to make sure that we also talk about suicide. Suicide's the second leading cause of death amongst adolescents here in the United States. And so it's something that we want to be mindful. And a mental health disorder puts young people at a risk of suicide. So when we are talking to youth about mental health, we want to always also assess for suicide.

I utilize these acronym called F.A.C.T.S. And I actually got it. It's not mine. I didn't develop it. I got it from a school-based suicide awareness program called Making Educator Partners in Suicide Prevention. And there is a handout that shows you the same information that's on this slide that is available for you in the chatbox. It also has more details, if you want to get trained on this curriculum. It gives you some details on how to get trained. It's for school personnel, so if you work for a school system, you can get trained for free. I'm not very familiar for it, so I'm not advocating for it. But I found this acronym, and I thought it was very, very helpful. So they have the acronym is F.A.C.T.S. And it talks about feelings, expressing hopelessness about the future. If you've attended any of my other webinars, I've stated that the National Suicide Lifeline says the feeling hopelessness is the number one risk factor for suicide.

So when we're assessing for suicide, we always want to make sure that we are kind of assessing feelings of hopelessness. And we assess that by thinking about future. How do you feel about your future? What are some of your future goals? Right? That helps us assess for hopelessness. Actions,



displaying severe overwhelming pain or distress, right? So are you noticing the young person acting or showing a lot of pain or distress because of their mental health?

Are you noticing any changes? Showing worrisome behaviors, cues, or marked changes in behaviors, including withdrawing from friends or changes in social activities, such as anger, hostility, or changes in sleep. Most importantly, assessing for threats, if you hear the young person talking about, writing about, or making plans for suicide. And I always highlight, nowadays, we have to be monitoring youth social media.

And in situations, expressing stressful situations, including those that involve loss, change, create personal humiliation, or involve getting into trouble at home, in school, or with the law. These kinds of situations can serve as triggers for suicide. So when we're assessing for suicide, we want to assess their feelings, their actions, any changes in their behaviors, for any threats that they may be talking about or sharing with people.

And we also want to assess for situations if there have been any situations that have led to increased risk. And this is very basic. That's why I encourage you to do more research if you want to know more about suicide. And if that's something you want to really learn more about, you can always let us know. And I will be happy to do a workshop around suicide on its own.

So how do we talk about suicide? Right? So how do you begin the conversation? The first thing I encourage you to do is have suicide crisis resources available. National Suicide Lifeline website, a really helpful resource. They have a lot of helpful tools for caregivers. Mention what signs, behaviors prompted you to ask about how they're feeling, right? I've noticed on your social media you talked about not wanting to be here anymore. Can you tell me more about that? And then asking the question.

There are so many myths and misunderstanding out there that if we ask these questions, we're putting that thought in their head. And that research has definitely invalidated that myth. That is incorrect. Asking the question directly can help the person feel seen, understood, and open the door for young people to talk more about their feelings. So especially with youth, you really want to be direct at how you ask these questions.

Are you thinking about suicide? Are you thinking about killing yourself? Are you thinking about ending your life? We want to say the specific questions. You want to avoid something like are you thinking about hurting yourself? Because hurting yourself is a very different thing than thinking about ending your life, and the young person might be thinking about ending their life, but not about hurting themselves. So that's why we want to be very specific with the questions we ask.



And then we want to validate that person's experience. Be willing to listen and allow emotional expression. Recognize the situation is serious. Don't pass judgment. Reassure that help is available. Don't promise secrecy. And don't leave the person alone. So if you are not the parent or the caregiver, your job really is to connect the young person to those individuals-- to the parent, or their caregivers-- to make sure that you connect them to the suicide crisis resources.

Or if you work in an agency, follow whatever protocols they have if a young person is talking about suicide. If you are a parent or a caregiver, your job is really to listen to them and assess for risk, and maybe he might need to be taken to a professional. So we want to be really mindful this is serious, and being able to ask these questions with confidence can mean saving a life. So I want you to be mindful of this as well.

Seeking help, right? Share available resources. I have given you a couple of resources. If you all have resources that you want to share with each other, feel free to add those in the chat. The National Suicide Lifeline is really helpful. There's also a text line, 741741. You want to text START or TALK before you send any messages. Let the person know that you're willing to go with them to see a professional when they're ready. And if you feel the situation is critical, take the person to the closest emergency room or call 9-1-1.

My personal experience. I have a young brother who allows me to share this. He experienced depression in high school. And for him, it was so reassuring, when he was asked to go see a therapist, he asked me, hey, can you drive me? I mean, he was in high school. I was starting college. I didn't have mental health background. I wanted to. I was really curious, but I didn't have the background. And my brother asked me, hey, can you take me to my therapy appointments? And I did.

This became our routine. On a weekly basis, I would take him to his therapist. I will sit outside the waiting room. I'll wait for him, and then we'll drive back home. It didn't require anything from me. I didn't need to be the therapist or the professional. All it did was that for him, it was really reassuring to know that someone he trusted was outside of that room and that if he needed anything, he can find me there.

So what I want to say with that is that we don't have to be the professionals to be able to talk to youth, or support them, or reassure them in this process. We just need to be there with them and be willing to listen and to help. And that on its own sometimes can be more significant and more impactful than anything else. So seeking professional help, like I said, I'm a big advocate of us being mindful and searching for the right fit for us when it comes to seeking professional help.



There are different forms of professional help. We have psychotherapy or also known as talk therapy, now, where kids work virtually or in person. And this really kind of involves talking to a professional to help reduce symptoms, increase life skills, and reduce problem behaviors. And there's also medication. oftentimes prescribed by a pediatrician or psychiatrist.

It's important to know that most young people with mental health challenges will not need medication, but for those who do, it's important that we discuss with those doctors or professionals what are the benefits and potential side effects of those medications? There's also family counseling which involves the whole family system, and it helps everyone can have a better understanding of what's going on for that person, and how can you support each other?

And then there's supports for parents. So sometimes parents are not sure how to help, and that's OK, right? Like I said before, you don't know what you don't know. So if you don't know how to support a young person, the best thing you can do is learn, right? Get some education. So there's a lot of free supports for parents.

One that I know of-- and I put the website in my resources-- is NAMI, the National Alliance for Mental Illness. They have a support group called Basics which is for parents with youth who have a recent mental health diagnosis. Again, some support groups where parents can get support for their youth if they were diagnosed with a mental health challenge.

And lastly, you may know this, but I end all of my workshops on practicing self-care. We need to take care of ourselves as well, especially if we are prepping out for a conversation with the youth around mental health or after these conversations. Think about how do you take care of yourself? Think about what has helped you cope in the past. Try to take time to eat, rest, and relax, even for short periods. Try to keep reasonable working hours.

Talk with friends, loved ones, or other people that you trust for support. So please, don't forget to also take care of yourself, and check in with yourself, and even label some of your own feelings because I don't think many of us were trained on how to do that. And it can be really impactful. Resources, they're all here. I have the National Helpline, the National Suicide Prevention Lifeline Crisis Text Line, the National Alliance on Mental Illness. If you want to stay in touch with me, I have my email on my Instagram.

And then if you have any questions, I am open for that. I think my last takeaway is remember that in every crisis, there's also a way to move forward. And if anything has come out of COVID-19, it's the need for us to talk about mental health more openly, to really focus on advocating for open conversations about mental health, and especially focused on having more available resources for youth when it comes to mental health treatment and supports.



So thank you all for being here today. I really appreciated it. That concludes my presentation, so I am open for any questions.

ANN SCHENSKY: Thank you so much, Angela. We currently don't have any questions in the Q&A section, but, again, all of this advice, as always, is very helpful, very timely. I think that a lot of people will be able to use it. And we do have one question. What resources are available for parents who speak Spanish?

ANGELA BEGRES: So Mental Health America has a Spanish site that will give you the resources in Spanish. NAMI, the National Alliance of Mental Illness-- which I've also put on my website-- also has resources for Spanish, so that's another place.

ANN SCHENSKY: Great, thank you. And your contact information is all on your slides, which people will get. What do you do when there's not a mental health provider, and there's a six-month waitlist?

ANGELA BEGRES: I agree. I think that's why we need to become more of an advocate for mental health. I would say don't give up. Keep calling those individuals with waitlists. Do some more research to see if there's other available professionals willing to see you. The good thing about COVID is that we have open doors to virtual. So maybe find out if there may be somewhere that's further away but that would take you virtually so that you don't have to drive. So just being more creative on how we seek those resources is important.

ANN SCHENSKY: Great, I think the being able to take advantage of Telehealth has sort of been a silver lining of COVID so. Someone said I mentor teens, and many of them have difficult backgrounds. They are often shut down emotionally, at least initially. It can take months to develop a relationship to be in a place where they feel safe. Any specific suggestions for teens who are especially closed off when a relationship is new, but you still see them struggling?

ANGELA BEGRES: Yeah, I think it's helpful to acknowledge the background, right? Like being culturally sensitive and acknowledge that maybe they've had a difficult time and that you want to help. Again, I think it's just leaving that door open and constantly checking in on them. Sometimes it can be helpful to find resources with similar backgrounds as well. That can make the person feel safer.

ANN SCHENSKY: Great, thank you. There was a question too that was how important is it to teach young clients accountability?

ANGELA BEGRES: I think teaching young people accountability is really important when it comes to accountability of like, how their behavior impacts other people. I think accountability also is separate from talking and thinking



about how the young person feels, and their emotions, and their mental health. So they're two separate conversations.

ANN SCHENSKY: Great, thank you. One more question is, how can we start a conversation with the youth who is struggling with mental health compounded with trauma that they are not fully aware of? And how do we explain that it's not their fault?

ANGELA BEGRES: Yeah, so, again, we open the door, right? If the young person is not really necessarily aware of the trauma right away, then maybe you start talking about what they're struggling presently. And over time, the young person might be willing and ready to talk about some of their trauma. I think when it comes to trauma, we have to really just let the person guide us through that process.

ANN SCHENSKY: Yes, and that is it for questions. So I want to thank you again, Angela, for this phenomenal presentation. I want to thank everyone for their time. And you will get the slides, handouts, all of the resources. They will all be posted on the Great Lakes MHTTC website. It will probably take us about a week, so feel free to check back in the product section and all of those things should be there.

ANGELA BEGRES: Thank you, everyone.

ANN SCHENSKY: Thanks, everybody.