



WELCOME to the

Recognizing and Responding to
Youth in Distress *ECHO*

Cohort 2

*Session 1, Prevention and Early Intervention:
Building Resilience and Connection, March 12, 2024*

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Series Learning Objectives

At the conclusion of this learning activity, participants will be able to:

1. Assess mental distress and risk of harm in students
2. Respond to mental distress and risk of harm with appropriate mental health support
3. Coordinate care effectively with mental health providers

Schedule

1. [March 12th - Prevention and Early Intervention: Building Resilience and Connection](#)
2. [March 19th – What Might We Be Seeing: The Underlying Cause](#)
3. [March 26th – Getting Help When We Need It: Resources and Working with Families](#)
4. [April 2nd – What Can We Do As Individuals](#)
5. April 9th - Practical Strategies for this Moment in Time
6. April 16th – Learn About Youth Mental Health First Aid

Recognizing and Responding to Youth in Distress

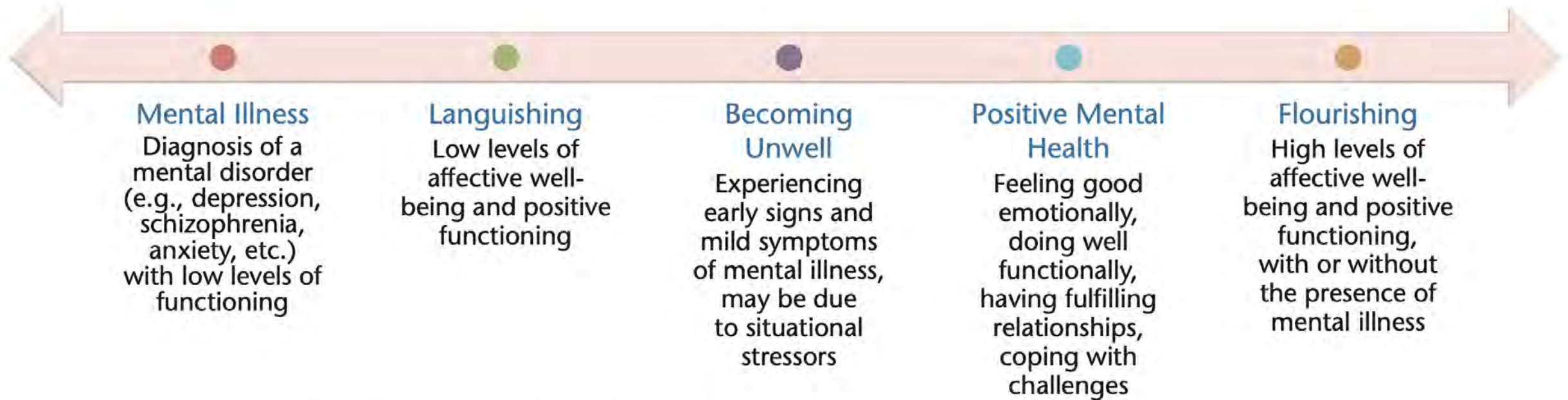
What we can do about it? Building
resiliency and connection

Becky Parton, MSW, LICSW

Dartmouth Trauma Interventions Research Center

Special thank you to Casey Rabideau, MS, OTR/L, BCP, as some of these slides are based on a
co-presentation we did

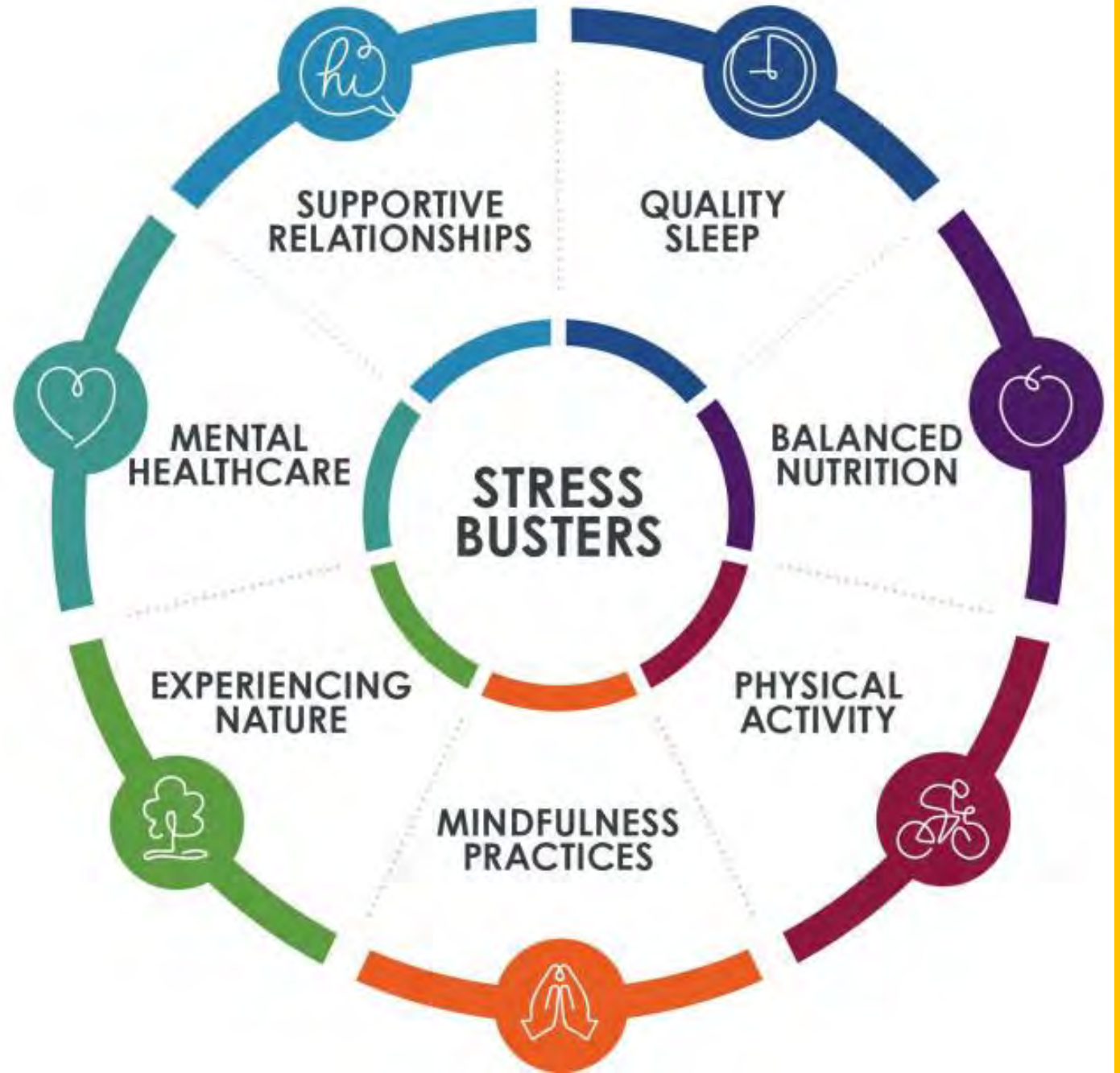
Mental Health: The Continuum



(Barry & Jenkins, 2007; Keyes, 2007; Miles, Espiritu, Horen, Sebian, & Waetzig, 2010; U.S. Department of Health and Human Services, 1999)

Building Resilience

[From: CA Surgeon General
Stress Buster Playbook](#)





This is an area where
you shine!

Attributes of a good role
model:

- Consistent
- Caring
- Non-judgmental
- Empathic

5 Tips for Adults

How to build safe, stable, nurturing relationships with kids



Be a good listener

- Talk to the child regularly
- Eye contact
- Repeat for understanding



Be consistent

- Follow through with what you say you will do



Show up

- For important events, for every day things
- If you can't be there, be honest



Avoid shaming

- Unconditional support, even if they make a bad decision



Don't aim for perfection

Created by Becky Parton, LICSW

Positive Childhood Experiences (PCEs)

As a child, how often/how much did you....

- Feel able to talk to your family about your feelings
- Felt family stood by you during difficult times
- Enjoy participating in community traditions
- Feel a sense of belonging in school
- Feel supported by friends
- Have at least 2 non-parent adults who took genuine interest in you
- Feel safe and protected by an adult in your home



6-7 PCEs >70% less likely to have adult depression

6-7 PCEs 3.5 times more likely to have social/emotional support as an adult

3-5 PCEs 50% less likely to have adult depression

*above is true even accounting for ACEs



Mindfulness: Simple Ways to Calm Stress



Squeeze Muscles: Starting at your toes, pick one muscle and squeeze it tight. Count to five. Release, and notice how your body changes. Repeat exercise moving up your body.



Belly Breathing: Put one hand on your stomach and one hand on your chest. Slowly breathe in from your stomach (expand like a balloon) and slowly breathe out (deflate).



Mindful Meal: Pay attention to the smell, taste and look of your food. No multitasking.



Meditative prayer: Sit in a relaxed, comfortable position. Pick something to focus on from the Bible, Qu'ran, or other religious or spiritual work. When your mind wanders, bring your attention back to the passage



Blowing Bubbles: Notice their shapes, textures and colors.



Coloring: Color something. Focus on the colors and designs.



Drink water: Take a sip of cold water, swallowing is calming



Listening to Music: Focus on the whole song, or listen specifically to the voice or an instrument.

Movement



Benefits:

- ✓ Increase oxygenation to blood
- ✓ Impact on heart rate (up-regulation)
- ✓ Opportunity for co-regulation

How to Implement:

- Practice together
- Build it into your day, make it fun
- Take *regular* movement breaks
- Can be formal (yoga) or informal (dance, play, tag, obstacle course)

Give Me “5”



Benefits:

- ✓ Increase body awareness
- ✓ Increase situational awareness
- ✓ Distraction from distress

How to Implement:

- Hang visual
- Provide laminated “cue cards”
- Practice with youth

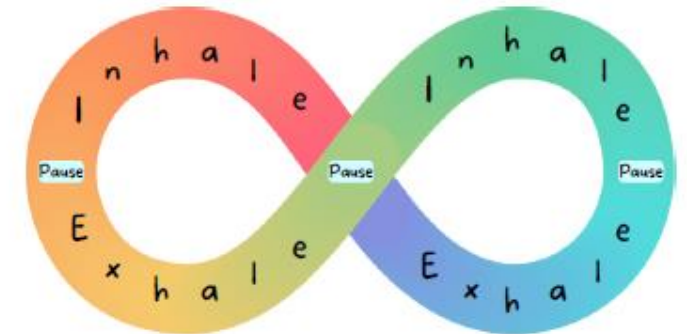
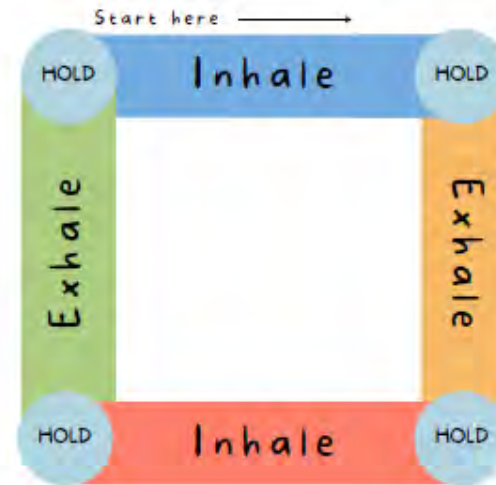
Breathing Exercises

Benefits:

- ✓ Increase oxygenation to blood
- ✓ Decrease heart rate (down regulation)
- ✓ Opportunity for co-regulation

How to Implement:

- Hang visual, have a calming space
- Use a video or audio guide
- Practice with youth



[Count, Breathe, Relax from Sesame Street](#)

Additional Strategies

- Guided Imagery
- Sequential Muscle Relaxation
- Superpower hands
- Use music to calm or hype
- Adapt or change social context
- Modify or switch environment
- Tangible/Manipulatives
 - Blowing Bubbles
 - Clay or Playdoh
 - Lotion
- Rhythm (clapping games, drumming)
- Intricate crafts/ bracelet making



DE-ESCALATION STRATEGIES

Four Phrases to Remember

NAME IT TO TAME IT

DAN SIEGEL, MD



"I notice you are feeling ..."

LOW AND SLOW

TERESA BOLICK, PHD



Lower your body
Lower your voice
Slow your speech
Slow your movements

REGULATE OVER EDUCATE



Give time and calm
Take care of emotions rather than
trying to fix

CONNECT OVER ISOLATE



Healing comes from connection

For more tips, check out:
<https://youtu.be/R2PSExM-NhU?si=L0GQhBP2dyckCSWw>

Co-Regulation

- Provide choices
- Provide space (physical and emotional)
- Follow their lead
- Practice your own deep breathing, relaxation

YOUR CALM
=
THEIR CALM

For more tips, check out:

<https://youtu.be/Pmx6Jczhbri?si=gkvtAbh7WDZemngA>

Validation

- Listen, open posture, respond with “I hear you” statements
 - “That sounds hard”
 - “I’m sorry that happened to you”
 - “I’m so glad you told me”
- Curious stance, non-judgmental
 - “Tell me more about that so I can understand better”
 - “Let’s talk about this more so we can figure this out together”
- Find out what they are looking for (listening vs. action)
 - “What are you hoping will happen next?” “What are you looking for today?” “What can I offer you today?” “What level of help are you looking for today?”

Responding to stress

- Being present
- Communicate safety
- Using connections to establish support and safety
- Help ground the youth in the present
- Help youth to regulate emotions or behaviors in safe ways
- Monitor your own body movements and volume

“You are not alone, it is not your fault.”

Resiliency Questions

- What are you feeling?
- What is your goal for the day?
- What/who do you need to reach your goal?
- Who are you feeling connected to?
 - *In your family, community, in this setting*



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*Session 2, What might we be seeing- the underlying
causes, March 19, 2024*



What Might We be Seeing: The Underlying Causes

Chase Trybulski, LCMHC, Dartmouth Hitchcock Medical Center

Children Need an Ally in the Community

Does it really take a village? YES! It does.

Parents, Family and Guardians are not the only important adults in the lives of youth.

You could notice a challenge in the life of a child and make a difference.

Knowing the signs and reacting supportively can have a lasting impact.

Adverse Childhood Experiences - ACEs

- Potentially traumatic events that occur in childhood (0-17 years)
- About 61% of adults surveyed across 25 states reported they had experienced at least one type of ACE before age 18, and nearly 1 in 6 reported they had experienced four or more types of ACEs. — Source: [Centers for Disease Control and Prevention, National Center for Injury](#)

[Prevention and Control](#)

ACEs Examples:

- Domestic Violence
- Family Mental Health Conditions
- Parental Substance Misuse
- Family Incarceration
- Neglect or Abuse
- Parental Separation
- Food Insecurity
- Divorce
- Household Dysfunction

Behaviors in Children

Think of behaviors as warning signs of problems, not character flaws.
Behaviors are often a child's way of communicating a greater need.

What you may see:

- Temper tantrums, non-compliance, aggressive behavior, low frustration tolerance
- Negative world view, low self esteem, fear of taking risks, poor social connections
- Avoidance, poor task completion, panic, poor attendance, deficient problem solving
- Inappropriate dress for the weather, bruises, insufficient supplies, challenging hygiene

Anxiety

Many children labeled with behavioral issues are actually dealing with Mental Health Challenges

Anxiety: Children with Anxiety are often expected to be shy, fearful or avoidant. They can also be explosive or aggressive as attempts to avoid stressful situations can lead to seemingly irrational behavior. Pressure to meet an expectation or feeling criticized may result in acting out as a way to escape the current feeling or situation.

Depression

Depression: Children often experience a lack of motivation, poor task completion, inconsistent engagement or tardiness when their hope or positive self view is lacking. Poor sleep, low mood and irritability may be a result of a negative world view and feeling overwhelmed by minor problems.

Trauma

Trauma: Children with trauma often have a lack of personal efficacy and poor locus of control. They may show physical symptoms of their abuse or neglect. They may also act in ways where they are recreating these events or trying to exercise power and control in their lives.

Resources

[Adverse Childhood Experiences \(ACEs\) \(cdc.gov\)](#)

[Mental Health Education | NAMI: National Alliance on Mental Illness](#)

[Mental Illness and Substance Use in Young Adults | SAMHSA](#)

[Youth Mental Health and Well-being in Faith and Community Settings: Practicing Connectedness A Toolkit of the HHS Partnership Center](#)

[Youth Mental Health In New Hampshire | Extension \(unh.edu\)](#)



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*Session 3, Getting help when we need it- resources
and working with families, March 26, 2024*

Getting help when we need it – resources and working with families

Mark Belanger, MBA

Strategic Advisor to Dartmouth Health

Assessing This Moment In Time for our Children and Adolescents

↑ Child and Adolescent Anxiety,
Depression, and Thoughts of Suicide

↓ Availability of child and adolescent
therapists (long wait lists)

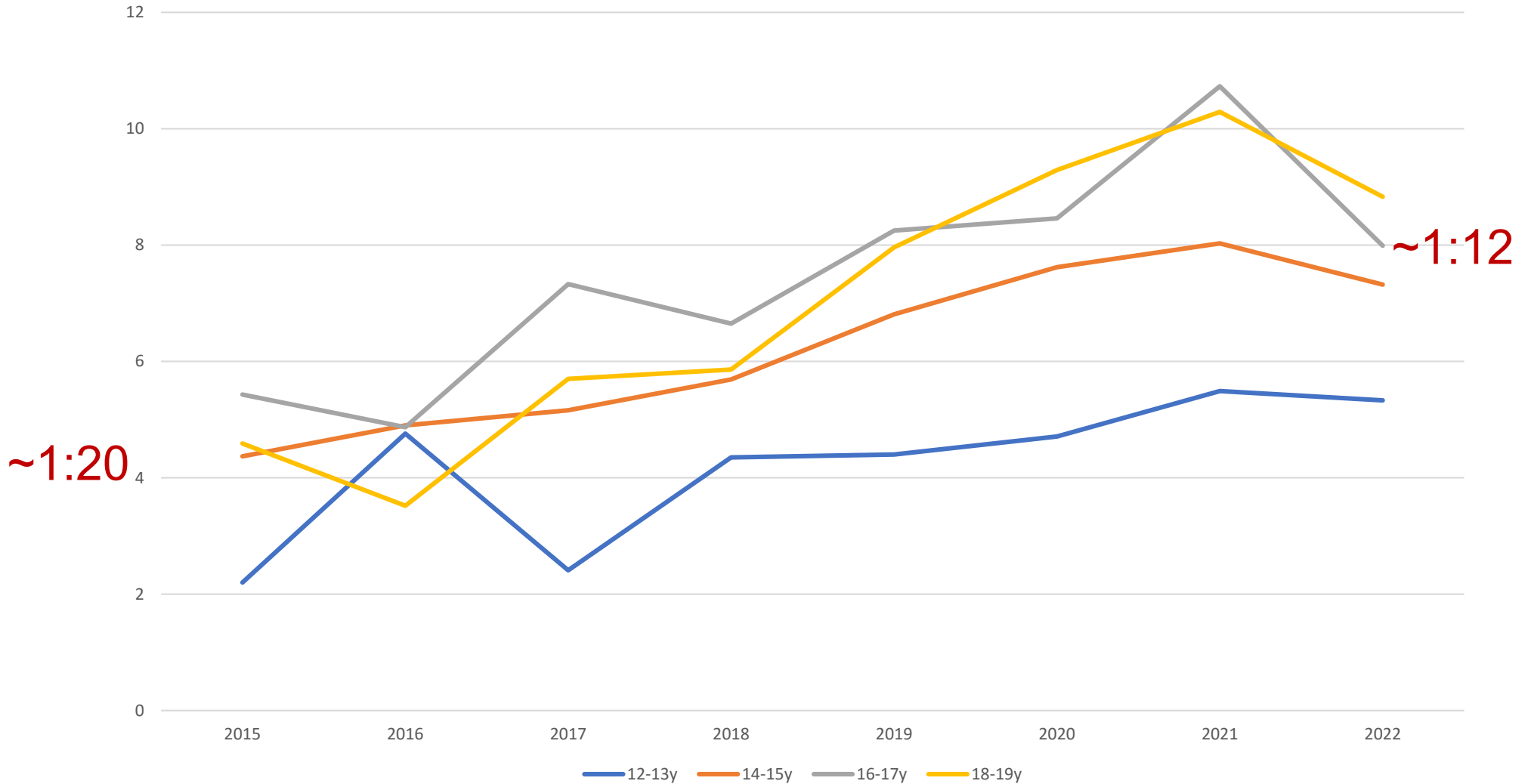
↑ Acting Out, Disengaging, Isolating

↓ Availability of crisis beds (Boarding in
Emergency Rooms)

↑ Parental challenges with stress, mental
health, and substance misuse

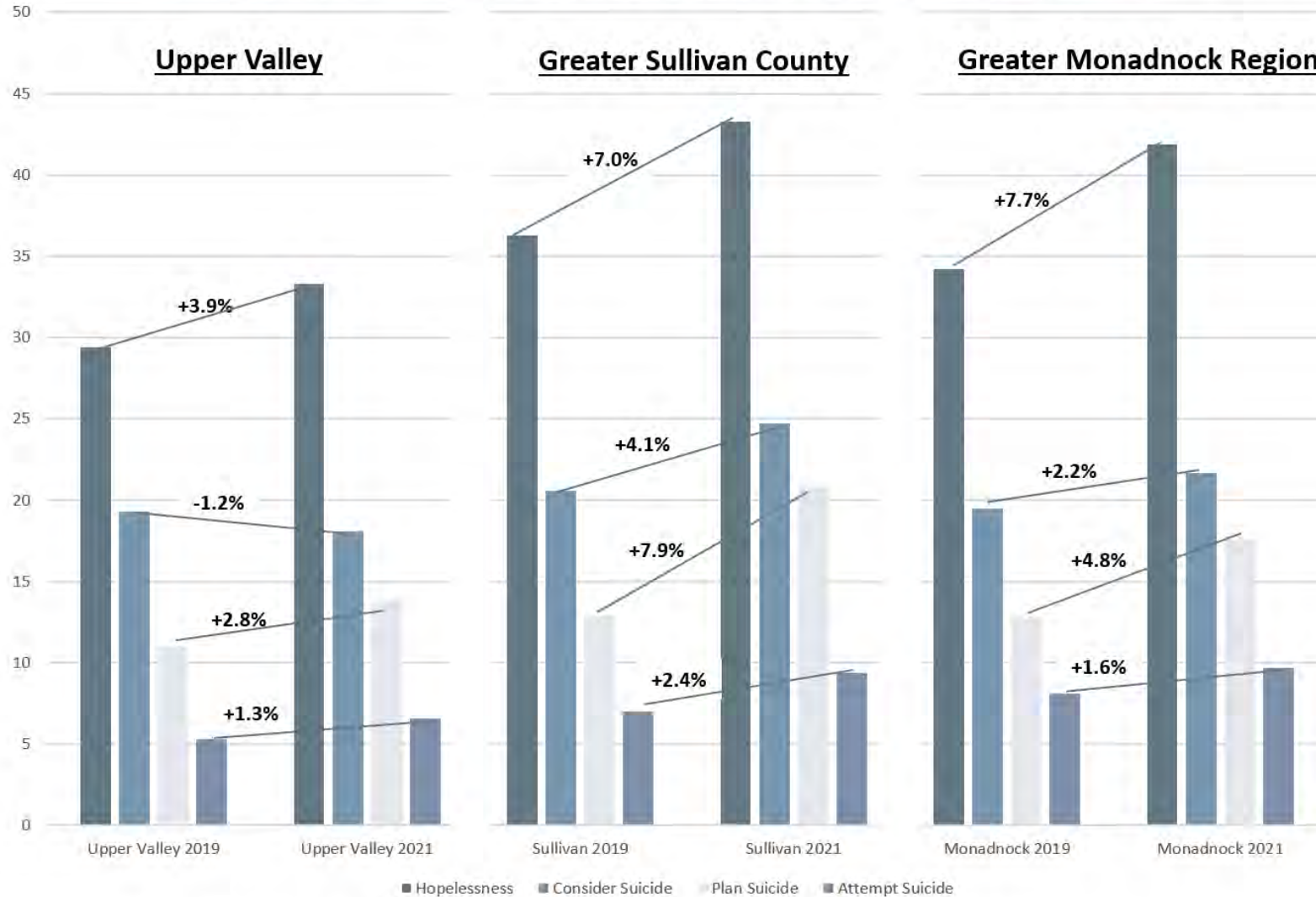
↑ Unhealthy Use of Social Media

High Risk: Severe Anxiety OR Moderately Severe/Severe Depression OR Suicidality by age and year - Dartmouth Health Pediatrics - Rural Adolescents age 12-19



Data Source: Dartmouth Health Clinics, Rural adolescents age 12-19, 2015-2022

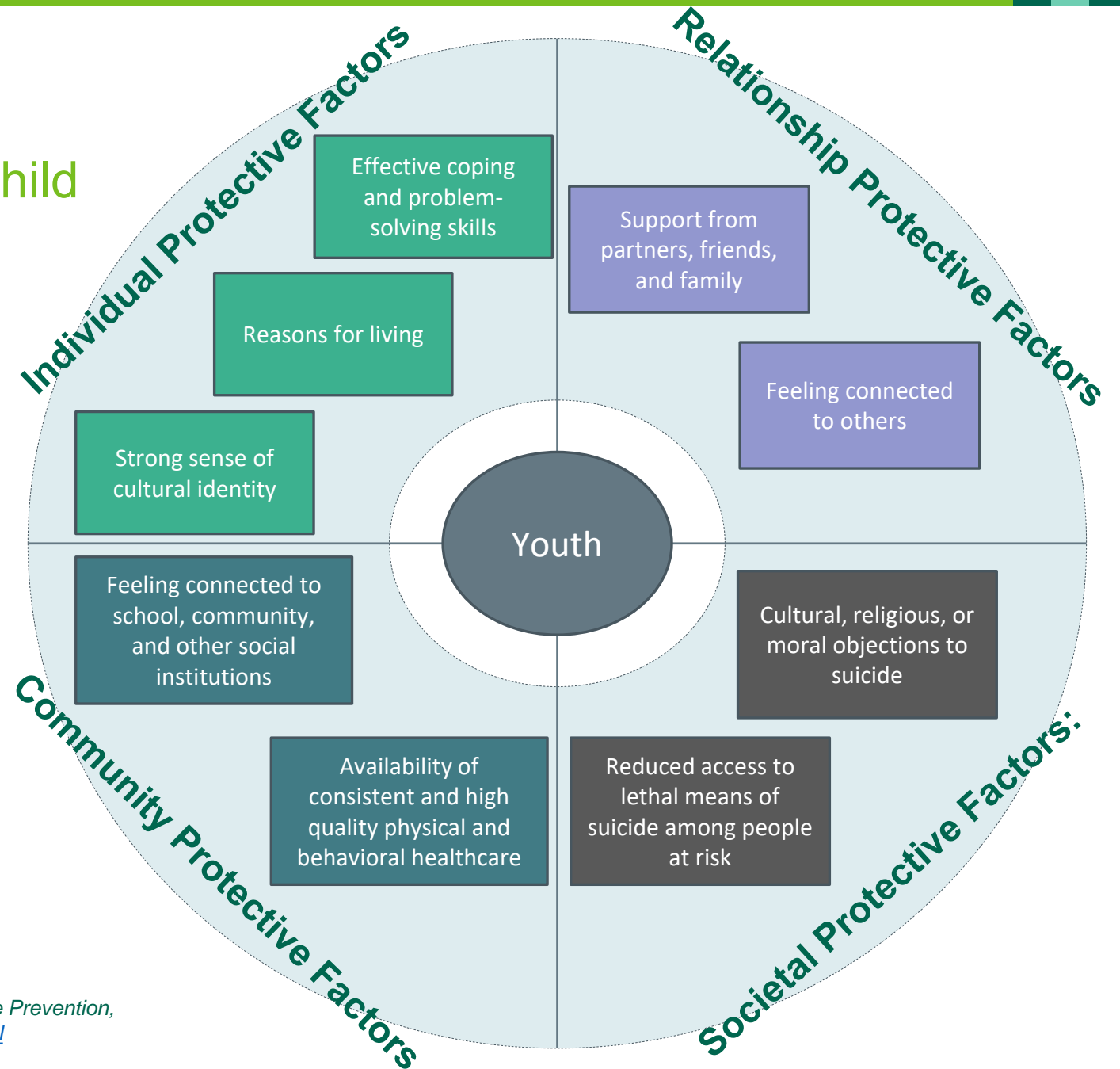
Youth Reported Suicide Risk for Rural Western NH – 2019 to 2021 Comparison



Suicide Risk Attributes Rural NH Students Grade 9-12

Self-Reported Attribute	Self-Reported Suicide Attempts
Poor academic performance	25% 1:4
LGBTQ+ gender identity	20% 1:5
Later adolescence (age 16-18)	10% 1:10
Black, Indigenous, and People of Color (BIPOC)	10-20% 1:5 – 1:10

The Community Supports the Child 'All Hands on Deck' To Build Protective Factors!



When Are We Over Our Heads? When Do We Need Help?

CDC's warning signs for suicide?

- Talking about being a burden
- Being isolated
- Increased anxiety
- Talking about feeling trapped or in unbearable pain
- Increased substance use
- Looking for a way to access lethal means
- Increased anger or rage
- Extreme mood swings
- Expressing hopelessness
- Sleeping too little or too much
- Talking or posting about wanting to die
- Making plans for suicide

Source: Centers for Disease Control and Prevention. *Suicide Prevention, Risk and Protective Factors*. <https://www.cdc.gov/suicide/factors/index.html>



Source: Be the 1 to. <https://www.bethe1to.com/bethe1to-steps-evidence/>

When A Child Needs Help Where Can You Turn for Support?

For Information



Dial 211

Online <https://www.211nh.org>

For a Behavioral
Health Crisis



Dial or Text 833-710-6477 or 988
Online and Chat

<https://www.nh988.com/>

For an Emergency



Dial or Text 911



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*Session 4, What can we do as individuals, April 2,
2024*

What Can We Do As Individuals?

Jeffrey Swayze

De-escalation: Tips for Self

- Be a de-escalation samurai
 - Helping someone back down the ladder
 - Calm mind, calm body, mastery
 - Welcoming mindset
- Know yourself
 - Your reactions to stress
 - You are the adult/professional: Think one degree softer
 - Can you find a way to “enjoy” it?

De-escalation: Know Yourself

- We remain balanced when we know who we are even when we feel threatened
 - Stress inoculation/ breathing
 - Scripting yourself “as the kind of person...”
 - Think about redirecting energy
 - Use adrenaline, don’t be ruled by it

De-escalation Principles

- Drop the Ego
 - Preacher mode doesn't help
- E.A.T: Empathy Absorbs Tension
 - Listening to the story is what leads to empathy

De-escalation Strategies

- Non-verbal body language
- Engage at lowest level of arousal
- “Inquisitive insertive phrase”
- Less about what you say and more about what you heard

De-escalation: Useful Approaches

- Calling someone over
 - “Can we chat for a minute?”
 - If you don’t know their name, ask for it, tell them yours
- “Who do you think you are?” “You can’t tell me what to do?”
 - Your chance to tell who you are and why it’s for everyone’s well-being for them to comply
 - Put rules in contexts that support your logic
- Escalation heightens
 - Give them autonomy and ask for feedback to participate in a plan
 - Is there anything I can do differently to earn your cooperation? I’d sure like to think there is.”
 - I’m thinking I might be doing something wrong. What do I need to do differently to get us back on track?”

Beyond Resilience: Building Anti-Fragility

- Resilience is not enough to navigate life
- Myth of the Hydra
 - Develop emotional redundancies
 - Cognitive flexibility
 - Reframe technique
- The “frame game”
- Discomfort training and why delayed gratification techniques and situational awareness help