## PROMOTING MENTAL HEALTH



**Syllabus** 

# "Mental health has no demographic or social boundaries; it affects us all."

Bob Wilkie Founder, I Got Mind

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## **Welcome From Bob Wilkie**

### Let Do This!



I would like to welcome you to the I Got Mind Facilitator On-Boarding program. The goal for I Got Mind since we started this journey in 2008 has been to educate and support athletes, parents, coaches, and organizations, in creating safe and productive environments for all to thrive. We are committed to promoting mental health wellbeing throughout our communities. We know that as good as sport is for our brains, it can also provide an incubator for a multitude of problems. I Got Mind is about creating solutions through education and facilitation, so that our clients can discover what they can be doing even better to encourage positive environments and curate positive mental health.

Your role in this initiative is critical. As an ambassador of change, you must be prepared, committed, and informed. The program you are about to undertake will give you all of those things. We will be with you each step of the way. We are excited for you to join our tribe and expand our programming for the benefit of all who participate. I Got Mind has been enhancing lives and facilitating communities to create a better future for everyone: athletes, parents, coaches, organizations, and now...you. We wish you the best and look forward to having you become our ambassador of change as we inspire people through the promotion of positive mental health.

Bob Wilkie Founder I Got Mind Inc.

## Section 1 Getting Started

### **Steps To Getting Started**

#### Step 1

Your I Got Mind (IGM) Journey will begin by completing a segment of the IGM curriculum for either: athletes, parents, coaches, organizations, and/or our signature Success Strategies program.

Once you have oriented yourself by completing some of these sessions, you will be ready to embark on the I Got Mind Facilitator On-Boarding program.

#### Step 2

Complete the 4 Unit Facilitator On-Boarding program. This self-directed series will provide new IGM facilitators with an overview of the organization's history and values. You will become familiar with your facilitative role and the participants you will be leading. Evidence based research about mental health and trauma informed practice will provide you with best practice and a base knowledge of the mental health landscape in North America. Through completion of the tasks in each unit and discussion with your IGM mentor, you will add to this syllabus, which will provide you with a wealth of material to include in your future facilitative work as part of the IGM tribe.



#### **Bob Wilkie with fellow IGM tribe**

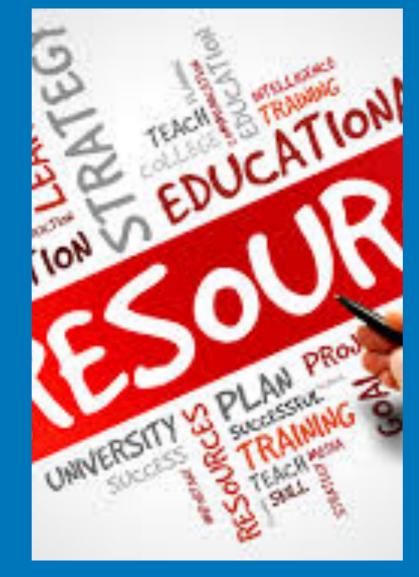
### How To Use This Syllabus

## **IGM** Overview

## Resources

## Tasks &





Get familiar with IGM by reviewing the IGM Overview section. Learn about our values and the organization's client base. Knowing the IGM story will provide you with a deeper understanding of how and why we do this important work. Review the resources provided and keep adding to the resources section. These resources will provide you with content, inspiration and ideas to customize your own facilitative content.



Use the tasks and worksheets to deepen your own learning and consider integrating them into your facilitative work. These tasks and worksheets will provide you with ideas to engage your participants in active learning.

## Section 2 I Got Mind Overview

### **I Got Mind History**



Founded in 2008, I Got Mind's focus is to promote the importance of mental health in the sporting world and beyond. Over the years of being heavily involved in sports, founder Bob Wilkie realized that the athletes he was coaching were heading down the same path he had traveled:

Unmet expectations, striving for perfection, pressure from coaches and peers all which lead to anxiety, depression and substance abuse.

I Got Mind is continuously growing, and a team of passionate former athletes and mental health experts are working together to support and educate as many people involved in the sporting community as possible.



## I Got Mind Values - Wellness \* Communication \* Knowlege 7



**WELLNESS:** Our minds, bodies and sense of self all need to be curated to thrive at work and play and all that we do.

**Communication:** Discovering the meaning in our stories and being able to share experiences, insights and learning is the gateway to living, working and playing at our best.

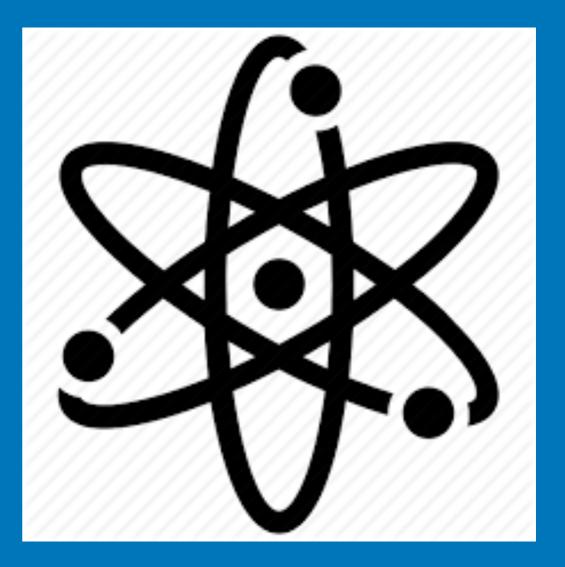
**Knowledge:** Learning about ourselves, our teammates (in life, sport & work) and the mental health landscape through evidence backed research gives us the power to succeed.

## **I Got Mind Clients**



Athletes. Parents. Coaches. Organizational Leaders.

The I Got Mind Team of former athletes and current mental health practitioners have teamed up to create curriculum to support each of these groups as they strive to live, work, play and compete at optimal levels. While these groups have their own unique attributes, their interconnection with one another is one of the key drivers fuelling the IGM systems approach in the development of this mental wellness emphasized curriculum.



## Section 3 Resources

## Articles, Videos, & Research

### **Presentation/Facilitation/Storytelling**

Video: <u>How To Be A Great Facilitator</u> Video Library: <u>Free Online Resources For Facilitators</u> Article: <u>How To Tell Your Story And Keep Your Audience Engaged</u> Article: <u>The Secrets Of Storytelling: Why We Love A Good Yarn</u> Article: <u>Why Your Brain Loves A Good Story</u> Infographic: <u>Presentation vs Training vs Facilitation</u>

### **Mental Health**

Article: <u>CAMH – Mental Health and Addiction: Facts and Statistics</u>
Article: <u>Mental health issues increased significantly in young adults over last decade</u>
Article: <u>Social media may play role in youth mental health woes, especially for girls</u>
Position Paper: <u>USports Best Practices Mental Health Guidelines (2020)</u>
Article: <u>Team Sport Athletes May Be Less Likely To Suffer Anxiety or Depression than Individual Sport Athletes</u>
Article: <u>Why Are So Many Teen Athletes Struggling With Depression?</u>
Article: <u>NBA Player Kevin Love Discusses Mental Health and Sport</u>
Article: <u>3 Types of Psychological Stress Affecting Athletes In Season</u>
Video: <u>Hans Selye – General Adaptation Syndrome (Stress)</u>
Documentary: <u>Triggered Too</u>

### **Substance Use**

Website/Research Guide: <u>Substance Use and Young People, Canadian Institute for Substance Use</u> <u>Research</u> 11

Report: Canadian Centre on Substance Abuse, Youth Sport Programs that Address Substance Use

Report: Report on the State of Public Health in Canada: Preventing Problematic Substance Use in Youth

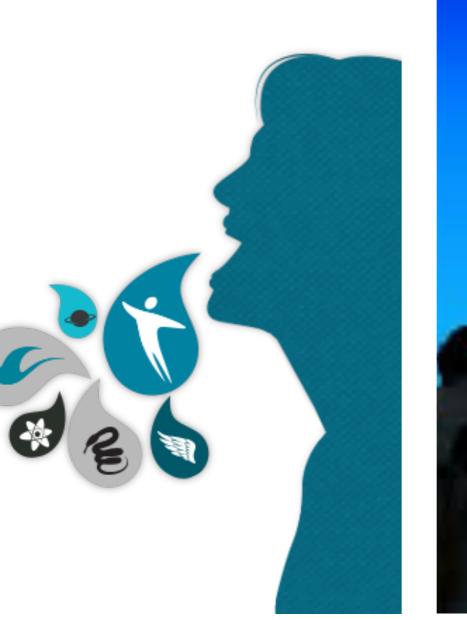
Discussion Paper: Addiction & Drug Abuse Among Athletes

## Storytelling, Presenting & Facilitating - The Dance

**Storytelling:** Personal, compelling, engaging. Bring your stories to the group with purpose, intention and clarity.

**Presenting:** Factual, relevant, credible. Deliver the evidence and facts about the importance of your story/subjectmatter/information.

**Facilitation:** Reflective, insightful, meaningful. Inspire your audience to discover their own meaning from your story and the facts.







### **The Data Is Alarming!**

The percentage of young Americans experiencing mental health disorders has risen significantly over the past decade, with no corresponding increase in older adults. (American Psychological Association, 2019)

Survey responses from more than 200,000 adolescents, ages 12-17 from 2005-2017, and almost 400,000 adults from 18 and over from 2008-2017 revealed:

Adolescents (12-17) reporting symptoms consistent with major depression in the last 12 months **increased 52%** from 2005 to 2017. A **63% increase** in young adults age 18-25 from 2009 to 2017.

**71% increase** in young adults experiencing serious psychological distress in the previous 30 days from 2008-2017.

The rate of young adults with suicidal thoughts or other suicide-related outcomes increased 47% from 2008-2017.

Shifts in sleep patterns of young people they are sleeping less than previous generations.

These factors appear to be unrelated to genetics or economics.

Moderate to serious mental distress rose from 24% in 2013 to 39% in 2017."

An increase in the use of digital media is dramatically changing how people interact (American Psychological Association, 2019)

In 2016, 32% of Canadian College students were diagnosed or treated for anxiety or depression in the previous year. (National College Health Assessment Survey) Findings from a few longitudinal, randomized and controlled studies suggest that social media and smartphone use may be contributing to the rising burden of mental distress among youth.

Youth hospital admissions for mental healthrelated reasons are increasing even as admissions for other issues are decreasing. Suicide has become the second-most common cause of death for Canadian youth, and the percentage of teenagers in Ontario reporting moderate to serious mental distress rose from 24% in 2013 to 39% in 2017.

During the same 2013-2017 time period, the percentage of teenagers reporting spending five or more hours a day on social media nearly doubled, rising from 11 per cent to 20 per cent. Girls, who generally have higher rates of self-harm and are seeing more drastic increases in selfreported depression, appear to be at greater risk for negative mental health impacts. Girls and young women tend to spend more time on social media than boys do, have more exposure to cyberbullying and show tendency to experience more mental health effects.

Youth who don't spend a lot of time in face-to-face socializing also face greater negative impacts, while those who do "appear to be relatively protected against the negative consequences of too much time online." (Researchers from the Hospital for Sick Children, 2020) 33% of all (US) college students experience significant symptoms of depression, anxiety or other mental health conditions. Among that group, 30% seek help. But of college athletes, with mental health conditions, only 10% seek help.

(University of Michigan School of Public Health Study, 2015)

Level of mental health distress is substantially higher in Canadian University athletes than in age cohort comparisons. (Sullivan, P., 2016)

Of the approximately 500,000 student athletes that compete annually in NCAA sports, 477 died from suicide between 2003-2013. (University of Washington study)

Individual sport athletes are more likely to report anxiety and depression than team sport athletes. (Pluhar et al, 2019)

Although drug use trends and rates vary from year to year, recent data shows that substance abuse remains a persistent and pressing problem for many young adults. In 2018, there were an estimated 34.1 million young adults (age 18 to 25) in the United States.

According to the 2018 National Survey on Drug Use and Health, more than one third of these young adults reported binge drinking (having 5 or more alcoholic drinks in a row) in the past month and about 2 in 5 young adults used an illicit drug in the past year.

Alcohol and marijuana are by far the most commonly abused substances among young adults, but the use of many other drugs has been reported by individuals within this age group. The National Institute on Drug Abuse reports that young adults are the biggest abusers of prescription opioid pain relievers, ADHD stimulants, and anti-anxiety drugs. (American Addiction Centre, 2018)

## Section 4 Tasks & Worksheets

Unit 1 - Setting The Stage (17-21) Unit 2 - Mental Health And High Performance (22 - 28) Unit 3 - Use of Self In The Facilitative Process (29-36) Unit 4 - Being Trauma Informed And Bringing It All Together (37-45) Feedback Form (46-47)

#### PERCEIVED STRESS SCALE (PSS)

The questions in this scale ask you about your feelings and thoughts during the last month. In each case, you will be asked to indicate by circling how often you felt or thought a certain way.

Scoring: PSS scores are obtained by reversing responses (e.g., 0 = 4, 1 = 3, 2 = 2, 3 = 1 & 4 = 0) to the four positively stated items (items 4, 5,7, & 8) and then summing across all scale items.

After you complete the PSS questions (on page 18) tally up your score and consider the following questions:

My Score \_\_\_\_\_

- 1. What, if anything was revealed to you about your stress in the last month?
- 2. What are the factors contributing to your stress level?
- 3. Do you see value in checking in with yourself through the use of this psychometric tool every now and then? Why or why not?

4. Do you see value in inviting those for whom you will be facilitating to use this tool? Why or why not?

## Unit 1: Perceived Stress Scale Worksheet (Page 2 of 2)

<u>0 = Never</u> 1 = Almost Never <u>2 = Sometimes</u> 3 = Fairly Often <u>4 = Very Often</u>

In the last month how often have you...

- 1. Been upset because of something that happened unexpected?
- 2. Felt that you were unable to control the important things in your life?
- 3. Felt nervous and "stressed"?
- 4. Felt confident about your ability to handle your personal problems?
- 5. Felt that things were going your way?
- 6. Found that you could not cope with all the things that you had to do?
- 7. Been able to control irritations in your life?
- 8. Felt that you were on top of things?
- 9. Been angered because of things that were outside of your control?

10. Felt difficulties were piling up so high that you could not overcome them?

For this task you will create a 2-5 minute video during which you will share a story about a stressful time in your life.

If you are a current or former athlete, coach or leader, recall a time during which you were actively competing/leading and felt stress. Consider the following questions as you craft your story:

1. What was the context of the situation or this time in your life? Was this an eustress situation?

- 2. How do you know you were stressed? Physical symptoms? Emotional symptoms? Other symptoms?
- 3. What was the impact on you? On others?

4. Were you aware of the stress at the time? If not, when did you realize this was a stressful point in your life?

5. When did the stress begin to lessen or end?

6. What resources within yourself or outside of yourself did you draw upon? What resources did you not have that you believe would have been helpful?

7. Please be prepared to share your audio/video with your mentor for discussion.

Find a location to store this recording and other's which you will be creating as part of this onboarding process so that you can refer to it/use it in your facilitation work.

### Please Complete This Prior To Your Unit 1 Mentor Meeting

1. What strategies might you encourage IGM clients to consider in order to tap into their eustress.

2. We discussed 3 of the IGM core values. What values do you bring to the IGM tribe? What influences have contributed to your value formation? Think about the IGM clients you will be working with and consider strategies for helping them identify and connect to their own values.

3. Which of the IGM client groups are you most drawn to work with? What is it about yourself and/or this group that draws you to them?

4. You completed a stress story video. Identify other times in your life when stress has been a factor. Consider how you might integrate these stories into your facilitative work. Consider how your stories might be shared with the different IGM client groups (athletes, parents, coaches, organizations)...the story will likely not change. Perhaps the learning emphasis for each group is slightly different?

5. The PSS is an exercise you may integrate into your facilitative work. Do you see value in including this type of exercise in your facilitative work? Why or why not? What, if anything, was revealed to you by competing the PSS?

6. Identify 1 key learning from this unit that feels important or stands out to you.

## **Unit 1: Notes From My Unit 1 Mentor Meeting**

### **Date and Time of Unit 1 Mentor Meeting**

What I would like to discuss:

Discussion points and Mentor feedback:

Other thoughts:

### **Unit 2: Hunter Holmes Story Worksheet**

### **Task Instructions**

1. Watch the Hunter Holmes inspired video posted in Unit 2 and read the Hunter Holmes Story (<u>https://pamplinmedia.com/ceo/165-sports/407632-306015-grieving-parents-wonder-if-their-teenage-sons-concussions-led-to-his-suicide-</u>)

(a) What message did you take away from the video segment?

(b) What is the importance of Hunter's story?

(c) How might you integrate Hunter's story into your facilitation? What would the learning opportunities be for athletes? Parents? Coaches? Organizations?

2. In Unit 4 we will explore how both we as facilitators and our participants can become triggered by the concepts we cover and by the content of what our participants share.

(a) What, if any, impact has Hunter's story had on you?

(b) How do you predict Hunter's story might impact IGM clients?

(c) How would you prepare IGM clients prior to viewing this segment and learning about Hunter's story? In unit 4 we will explore making our practice trauma informed to deepen your consideration for preparing your groups for engaging with complex subject matter such as suicide. This is a great start point to begin thinking in a trauma informed way.

1. Review the substance use material posted in the Resources section of your syllabus.

2. Conduct your own review of substance use within youth/youth athlete populations. Remember to use evidence based research to support your learning. While the IGM programming is not specifically targeting youth substance use, it is a relevant aspect of conversation to integrate into the IGM facilitative work.

3. Begin to consider ideas on how to engage athletes, coaches, parents and organizations to have conversation aimed at bringing awareness and insight to substance use issues.

4. Consider your own story with substance use. If you are or have been actively involved in sport, how did substance use impact your own experience? How did your participation in sport influence your relationship with substance use? How can your own story serve the IGM client base with whom you will be working? Remember....be mindful about sharing aspects of your story for which you have not emotionally reconciled...is this a story that you can share and be in full service to IGM clients? If not, search for other athlete-substance use stories to which you can anchor this discussion. Your story does not have to be about substance "abuse"...you may abstain completely or partially from substance use...what are the factors that have influenced your relationship with substance use?

5. Create a 2-5 minute video segment with your substance use story.

Athletes Connected (https://athletesconnected.umich.edu/about/) is a unique collaboration between the University of Michigan School of Public Health, Depression Center, and Athletic Department to increase awareness of mental health issues, reduce the stigma of help-seeking, and promote positive coping skills among student athletes. There are many athlete stories posted in video format on this website. For our purpose, explore the Will Heininger video at the youtube address posted below. You are encouraged to watch all of these stories as they may inspire relevant discussion points in your facilitative work.

1. Watch the video and then complete this worksheet. <u>https://www.youtube.com/watch?</u> <u>time\_continue=2&v=DQ7OXOrliGY&feature=emb\_logo</u>

2. How might earlier intervention programming in Heininger's youth sport experience made his experience different when he entered the NCAA? What may have been different for him if he had participated in IGM programs?

3. Think about how the Heininger story might integrate into your facilitative work. What salient points would you emphasize to athletes? Coaches? Parents? Organizations?

U Sports (Formerly the CIS), launched a Mental Health Best Practices Position Paper in 2020.

1. Review this paper (which is located in the Resources section of your syllabus) and then complete this worksheet.

2. What is the purpose of this position paper?

3. Review the Barron Depression Screener for Athletes. This is another quick screening tool that can be administered to athletes/IGM athlete clients. What additional mental health supports would you require to have in place/available should you decide to administer this screen? It is important to have a response plan in place in case a participant reports information on the screen that requires an immediate, professional mental health response.

4. Section 4 of this position paper provides suggestions on how to create (sport) environments which encourage mental wellness and resiliency. What is your opinion on these suggestions? What role do you see IGM assuming to support the fostering of these environments?

5. Review the best practices check list. What stands out as important to you?

1. Prepare a two minute video sharing either your own story or that of another youth athlete who has experienced a mental health challenge. At the beginning of the video message, indicate if your message is one targeted to athletes, coaches or parents. Consider the following when you craft your story:

(a) Context - background, setting, and time-period, etc.

(b) Details of the challenge

(i) How were you (or the athlete you are talking about) impacted?

(ii) Who were your supports?

- (iii) What was the outcome? What did you learn?
- (iv) How is this story in service of the IGM audience?
- 2. Be prepared to share your segment with your IGM mentor for discussion and feedback.

### Please Complete This Prior To Your Unit 2 Mentor Meeting

 Unit 2 has been heavy with critical thinking activities!! Good job getting through everything!! You have absorbed a lot of data about the youth mental health landscape especially as it pertains to youth athletes.
 Was there any information that surprised you? How does this evidence inform us as we strive to help youth (athletes) attend to their mental wellness?

By now you are getting a sense of how the IGM Facilitative system works....powerful personal stories together with evidence based research is shared with our clients who are then invited to engage in a reflective practice through which they discover personal insights and meaning. This process is done so as to fuel the IGM core values of wellness, communication and knowledge. You have, in a sense, experienced a taste of what IGM client's will experience when you are leading them.

The tasks you have completed thus far can be integrated into your own facilitative work. As the final critical thinking exercise for Unit 2, please review the tasks you have completed thus far in the on-boarding program. Consider the following questions:

What risks have you had to take to complete some of the tasks? What did it feel like to take these risks?
 What do you need to consider when inviting IGM clients to take risks?

## **Unit 2: Notes From My Unit 2 Mentor Meeting**

### **Date and Time of Unit 2 Mentor Meeting**

What I would like to discuss:

Mentor Feedback:

Other Thoughts:

28

1. At the end of Unit 2, you crafted a mental health story to share with either an athlete group, a coaching group or a parent group. Your story had a specific insight or learning that you wanted the group to take away. How could you scale your story to provide a meaningful insight for the other IGM client groups? (ie. if your original story was crafted to share with athletes, how could you "tweak" it for coaches, parents? or organizations?)

2. Articulate what insights each group might takeaway from your story.

Tip: The story itself likely doesn't require much change. What you ask your target audience to think about is likely the point that will need adjustment. Perhaps the perspective through which you tell the story changes?

You will integrate this into your facilitative work, how you deliver the story and which points you emphasize, will modify each time you integrate this story into your work.

Your story is being told in service of your audience.

Be cautious about sharing personal stories/experiences for which you have <u>unresolved</u> emotions. Powerful stories may have highly emotional content (think about Bob's story which includes the Swift Current bus tragedy). However, if you have reconciled and made peace with your emotional turmoil, you may be able to share the story in an effective way, which allows participants to engage with the learning and not feel pressured to take care of you!

Search and find a presenter/facilitator sharing a story which has highly charged emotional content and delivered in a powerful and in "service of the participants" manner. TED Talks often host this type of content. Feel free to find content elsewhere but if you can't find anything that resonates for you...check out the <u>TED Talks platform</u>.

- 1. Make note of what struck you about how this speaker presented their story.
- 2. How do you think the audience felt? What do you think the audience learned from this story?

1. One of your Unit 2 tasks was to craft a mental health story...what does the evidence and research say about this subject matter?

- 2. What are the facts of this subject matter?
- 3. This goes beyond citing data and statistics. How has this research informed advancements or change?

4. How are these facts connected to your learning objectives (ie. what you want your audience to learn from your story)? Integrate some statement about how the facts/evidence/research connects to the learning objectives.

## **Unit 3: Teaching Style Quiz Worksheet**

### **Task Instructions**

Take the GoTo Quiz (<u>https://www.gotoquiz.com/what is your teaching style 1</u>) and see what insights you discover about your teaching style.

### **Unit 3: Narrated PPT or Video Segment Worksheet**

#### **Task Instructions**

- 1. Create a 5-10 minute segment which demonstrates the dance! Incorporate storytelling, teaching/training and facilitation. Remember...these three approaches dance together!
- 2. Choose from the following topics:
  - (i) Leadership
  - (ii) Overcoming challenges
  - (iii) Disappointment
  - (iv) Mental Health
  - (v) The Competitive Spirit
  - (vi) Another topic of your choice that you feel is suitable for an IGM audience

#### **Task Instructions**

- 1. IGM programs are NOT designed to treat people who have experienced trauma. It is important that IGM facilitators be trauma informed. That is to be generally familiar about the signs and symptoms of trauma. Facilitators should be prepared to respond in a trauma informed way, should any person participating in an IGM program demonstrate symptoms which may be indicative of a trauma response. We will explore trauma informed practice in Unit 4.
- In preparation of learning more about trauma informed practice, please watch the "Triggered Too" documentary. You can access the segment (approx. 1 hour in length) by clicking this link <u>https://victormarx.com/triggered/</u>. When the page opens you will see a couple of documentary segments. Watch the "Triggered Too" segment...not "Triggered."
- 3. Please be aware that the stories you are going to hear are true. There are no actors or re-enactments in this documentary. Subject matter including physical and sexual violence, trauma associated with active military duty, and death of a child are explicitly shared and discussed. If you have any concerns for your own wellness in viewing this documentary, please <u>do not</u> watch this segment. You are welcome to discuss this with your IGM mentor and if you choose not to watch the segment and not to discuss this with your IGM mentor that is entirely up to you, without question. Your wellness is IGM's priority.
- 4. For those of you who choose to watch this segment, notice how the stories impact you. Notice if some stories impact you differently than others. You will be invited to reflect further on this segment in Unit 4.

If you feel unsettled at anytime during or after viewing this segment, please consider discussing how you feel with somebody you trust. You can also reach out to your IGM Mentor.

Please do not be alone with your discomfort.

#### **Please Complete This Prior To Your Unit 3 Mentor Meeting**

1. Brene Brown Ted Talk Reflection. Identify at least one example of how Brene used each strategy (storytelling, teaching/training, and facilitation).

Include the following:

(i) brief statement identifying at which point in the talk the strategy was applied(ii) brief statement about the characteristics you noticed about each strategy. ie. what tells you this is storytelling? Teaching/training? Facilitation?

- 2. What is one key takeaway that feels important for you after completing this unit?
- 3. We looked in more detail at the strategies of integrating storytelling, teaching & training, and facilitation into our approach. It's natural to feel awkward if integration of these strategies is a new approach for you. You are encouraged to start thinking about the stories you will share in your IGM work. Begin practicing the telling of these stories with your family and friends. The more you share your stories the more comfortable you will become with making your process "dance"!

### **Unit 3: Notes From My Unit 3 Mentor Meeting**

#### **Date and Time of Unit 3 Mentor Meeting**

What I would like to discuss:

Mentor Feedback:

Other Thoughts:

#### **Task Instructions**

1. At the end of Unit 3 you watched the "Triggered Too" documentary. Consider the following questions:

(i) Explain in your own words how a traumatic experience can impact a person's brain. You may want to re-watch the early part of the documentary where this is explained by Dr. Daniel Amen.

(ii) What might you see or hear when observing a person who is experiencing a triggered event?

(iii) Consider some of the events in your own life which you experienced as traumatic. What type of subject matter might trigger a response in you? If you choose not to share this answer in writing or with your IGM mentor that's absolutely ok. Consider spending some thought time with this. The very nature of the IGM facilitative work often encourages participants to share their stories, perhaps conflict, even abuse they were exposed to by teammates, coaches or parents. They may feel inspired to share with you other deeply personal aspects of their life outside of sport. It is important for you to begin to self-reflect on how another person's story might impact you. Many of you may not be able to identify anything specific at this time and that's ok. The important thing is to dedicate some thought time to this concept.

(iv) Practicing in a trauma informed way includes having a plan in place in the event you or a member of your participant group experiences a trigger response. The plan should be simple and clear. While we hope you don't ever have to lean into your plan it's good and responsible practice to be familiar with the steps in order to attend to your own wellness and that of your participants. Page 38 of your syllabus provides a suggested, detailed plan of action should you experience a trigger event. This self plan is summarized in point form on page 39. Page 41 is a point form plan of action to consider should you suspect a participant is experiencing a trigger event.

It's important to state (again!) that you are not being trained to be an expert in understanding trauma or treating trauma. This is an exercise for you to:

- 1. Recognize the signs and symptoms that you or somebody else may be having a trigger response
- 2. Familiarize yourself with a basic "to do" in the event that somebody may experience a trigger response

#### **Detailed Steps To Take If I Experience A Trigger Response**

1. Be aware of how I feel physically, mentally and emotionally. Be aware of sudden changes in how I feel. Our bodies and emotions are very revealing! The challenge can be that sometimes, especially when we are in action at work or play, we cannot even notice what our bodies and emotions are revealing. Before starting a facilitation session, spend 5 minutes being mindful about how you feel physically, mentally and emotionally. Breath. Do a head to toe scan of how you feel on the inside and the outside. This will help you centre yourself and be ready to bring your best you to the session and it will inform you about your physical, mental, and emotional state right now.

2. Changes in how you feel physically, mentally and emotionally are important cues. Maybe it's simply a change in the environment (temperature, lighting, or volume, etc.). Be aware of sudden and/or extreme changes. A stress or trigger response will activate your autonomic nervous system (ANS), you heart rate may increase, sweat response may activate, mouth may become dry, and skin may become flushed. Think about a time, maybe when you have had to speak publicly or just before you were about to compete in a high stake competition or maybe just before writing an exam...you will likely be able to recall how your body informed you that your ANS was activated. This is a healthy and normal response! If this happens when you are facilitating pause and notice what has been said or taken place just before your ANS kicked in. Sometimes the act of pausing and identifying the source of the activation is enough to recover and move forward. Have an activity that you can ask participants to complete while you regroup if necessary.

# **Unit 4: Trigger Response Planning Continued (Self)**

#### **Detailed Steps To Take If I Experience A Trigger Response**

4. If possible, go to another space or room. Breath. Drink some water. Take an inventory of yourself head to toe inside and out and notice how you feel. If you continue to experience physical, mental or emotional discomfort, call somebody you trust to talk about it. Your person should be someone who knows they are your contact in the eventuality that you need support. A fellow IGM facilitator or your IGM Mentor are both excellent options to take on this role.

5. In extreme situations, if you are unable to recover you may choose to end the session or where possible reach out to a fellow IGM facilitator to assume responsibility for completing the session.

6. If possible have your support person come to you to debrief and consider if further intervention is necessary.

# **Unit 4: Trigger Response Planning Continued (Self)**

#### Point Form Steps To Take If I Experience A Trigger Response

- 1. Prepare and self-scan before the session begins.
- 2. Be alert to changes, especially sudden and/or extreme physical, mental and/or emotional changes.
- 3. Pause (30 seconds -1 minute). If possible have an activity on-hand that requires little or no explanation and have participants work independently while your regroup.
- 4. Take a 10 minute break and rescan.
- 5. Call your trusted person.
- 6. End the session early/ask a fellow IGM colleague to take over.
- 7. Seek assistance from someone you trust or if necessary seek medical assistance.

Are there additional considerations you feel are important? If so add to this plan. Remember to keep it simple.

You are encouraged to deepen your knowledge of trauma informed practice by reading the material posted in the Resources section of this syllabus as well as by conducting your own research. There is a wealth of information available on-line...remember to use reliable, evidence supported sources.

#### **Detailed Steps To Take If A Participant Experiences A Trigger Response**

1. Best Practice is to always makes sure participants know the type of material to be covered in each session. If there is complex subject matter that you will be presenting which may pose an increased risk of triggering participants, when possible, give participants explicit choice to not attend.

2. Start each session with a centering exercise and encourage participants to notice how they feel physically, mentally, emotionally. Make this a part of your regular facilitation practice.

3. After you have done an opening centering exercise, if appropriate, remind participants that there may be subject matter that is troubling. Remind them to take care of themselves by leaving the room, getting a drink, taking a break if necessary. Tell them they do not need to ask to leave and take care of themselves during sessions. Remember, sometimes even the most benign discussion, image, music, subject matter can trigger a person. You don't know people. Making it a norm for people to excuse themselves for bio breaks without seeking permission is important.

4. You need to be aware of changes in behaviour, thinking, emotion, and physicality of participants. It may be inspired by something environmental (temperature, noise, etc.) or it could be an indicator that something more complex is happening. If your guts tell you it's something more complex, pause. Have a self explanatory exercise on hand and tell the group to work independently.

5. Discreetly check in with the participant you are noticing. Tell them what you are noticing. Ask them what they are feeling.

6. If they are experiencing a triggering event invite them to leave the room and ask them if they need or want something. Water? Food? Bathroom?

7. If the participant appears distressed ask them who you should call to come and assist them.

8. If they don't have anyone to call, call your trusted person to come and assist you.

9. While very unlikely....determine if more intrusive action is required. ie. medical assistance

10. Respect confidentiality. Tell the group that the participant was not feeling well. If the participants distress was obvious to others, listen to their concerns. Let them know the participant is safe.

# **Unit 4: Trigger Response Planning Continued (Others)**

#### Point Form Steps To Take If A Participant Experiences A Trigger Response

1. Pre-plan - Advise participants of complex subject matter before the session. Given them the option to not attend.

2. Best Practice - start each session with a centering exercise to bring awareness to mind and body.

3. Remind participants no need to seek permission to excuse themselves from the session if they need a break.

 Be observant - Notice changes in participant behaviour, thinking, emotion, physicality. Rule out environmental. Pause.

- 5. Check in with participant.
- 6. Leave the space with the participant. Do they need anything?
- 7. If you believe they are in distress who do they want you to call?
- 8. If nobody. Call your trusted person.
- 9. Is medical assistance required?

10. Respect confidentiality while still listening to other participants who may be aware of the distress. Reassure safety.

Are there other issues you believe need to be considered? Add to this plan if you feel it is important. Remember to keep this plan simple.

## **Unit 4: Bringing It All Together Worksheet**

#### **Task Instructions**

1. You are going to create one final video segment between 5-10 minutes long during which you will:

(i) Imagine you are facilitating either a group of athletes, parents or coaches in a virtual environment

(ii) This is your introductory session with the group

(iii) The objectives of the session are to:

(a) Introduce yourself and the I Got Mind organization to the group

(b) Introduce the objectives of the program and the introductory session (base it on a session you completed when you were getting oriented to IGM, or build on the 5 minute segment you completed in Unit 3)

(c) Apply the "dance" (Unit 3) by integrating one personal story, some research/evidence fromliterature about your subject matter, an activity to encourage participants to integrate their learning(d) Create a powerpoint to go with your segment

(e) Integrate visuals, videos, quotes, etc. into the powerpoint

#### **Please Complete This Prior To Your Unit 4 Mentor Meeting**

Unit 4 has had you busy doing doing doing! You have been applying much of what we have covered throughout the on-boarding program. Just a few more critical thinking questions to consider and then you are done! Congratulations!!

1. Emotional intelligence is a critical strength, especially when striving to deliver trauma informed service. How would you describe your inter-personal and intra-personal skills. What, if anything, would you like to strengthen?

2. What are some of the physical symptoms you might observe in a person who is having a trigger response? Emotional? Mental? Consider how witnessing somebody having these symptoms might impact you.

3. Were you surprised to learn that evidence suggests that approximately 76% of Canadians have been trauma exposed? Do you agree or disagree that a trauma informed approach in IGM service delivery is appropriate? Why or why not?

4. You are encouraged to discover some mindful based exercises. This is an excellent best practice to begin your sessions...both in-person and virtual.

5. The process of creating the final segment required you to pull together the learning from each unit. What did you do really well? What was most challenging? What do you want to improve upon?

# **Unit 4: Notes From My Unit 4 Mentor Meeting**

#### **Date and Time of My Unit 4 Mentor Meeting**

What I would like to discuss:

Mentor Feedback:

Other Thoughts:

#### **Task Instructions**

Thank you for completing the I Got Mind Facilitator On-Boarding Program! Your feedback is an important part of our ongoing process to deliver the best programming possible. We hope you will take 5 minutes to complete this feedback form. Your honest and constructive feedback will be integrated into our ongoing program improvement strategy. Please be as detailed as possible in your responses. Thank you so much for your input. Please email your IGM mentor your completed form.

1. My knowledge about the youth mental health landscape in North America has increased. strongly agree agree neither agree or disagree disagree strongly disagree

2. My knowledge about effective facilitation process has increased. strongly agree agree neither agree or disagree disagree strongly disagree

3. My. knowledge about the I Got Mind organization and the clients they serve has increased. strongly agree agree neither agree or disagree disagree strongly disagree

4. The least helpful learning aspect of this on-boarding program was:

5. One aspect of this program that I hope remains a core component of this on-boarding is:

### **Feedback Continued**

6. The mentoring aspect of the onboarding program was helpful to my learning. strongly agree agree neither agree or disagree disagree strongly disagree

- 7. Something I would like to see covered in this program that was not is:
- 8. The most helpful learning aspect of this on-boarding program was: