

Supporting the practitioner to support the client: Self-Care and Mental Health issues for Adult Education Guidance Services

Dr Marie Rooney

NOVEMBER 2019



FET
Guidance
HANDBOOK

LÁMHLEABHAR
Treoach um
Bhreisoideachas
agus Oiliúint



An Roinn Oideachais
agus Scileanna
Department of
Education and Skills

WHAT IS MENTAL HEALTH?

Positive mental health is of fundamental importance for adults and young people. But what is it?

Here are some definitions:

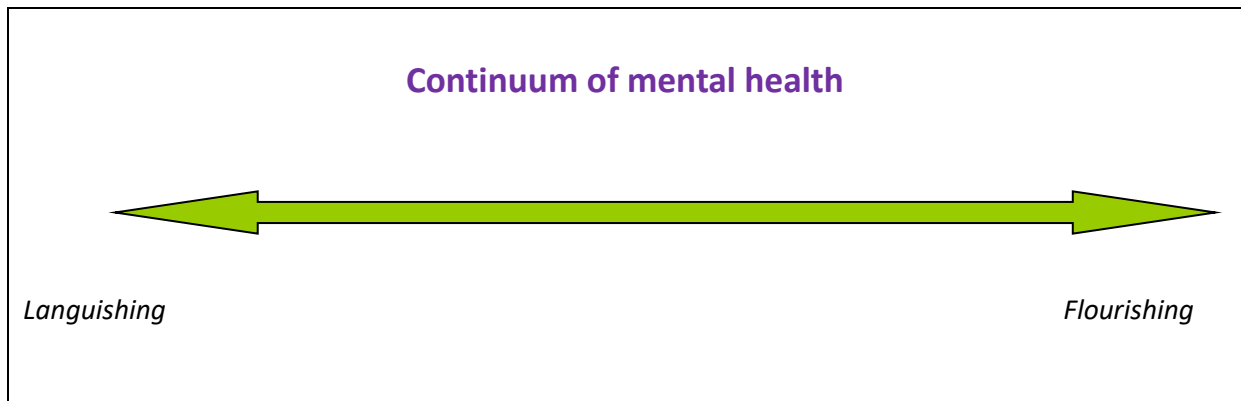
A state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. (*World Health Organisation*)

The emotional and spiritual resilience which enables us to enjoy life and to survive pain, suffering and disappointment. It is a positive sense of well-being and an underlying belief in our own and others' dignity and worth. (*Health Education Authority, UK*)

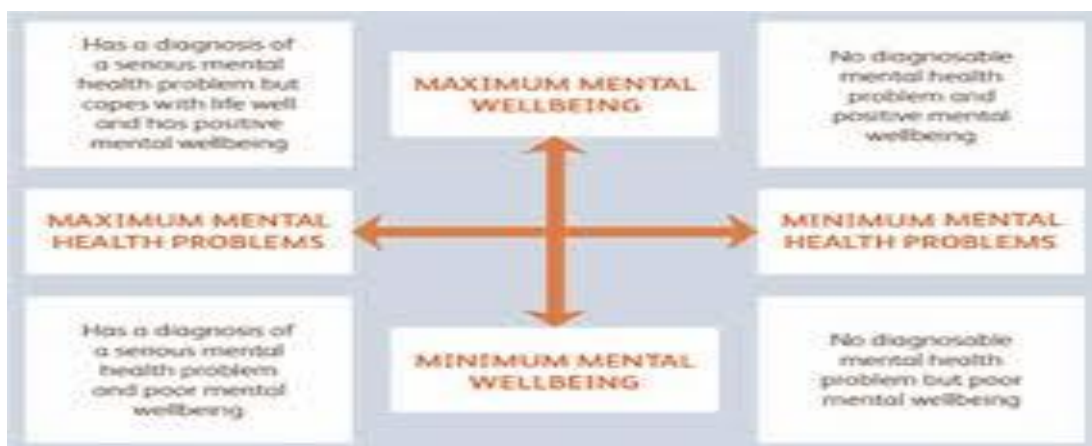
The balance between all aspects of life—social, physical, spiritual and emotional. It impacts on how we manage our surroundings and make choices in our lives—clearly it is an integral part of our overall health. Mental health is far more than the absence of mental illness and has to do with many aspects of our lives including how we feel about ourselves, how we feel about others and how we are able to meet the demands of life. (*Spunout.ie*)

Good mental health is a sense of wellbeing, confidence and self-esteem. It enables us to fully enjoy and appreciate other people, day-to-day life and our environment. When we are mentally healthy we can form positive relationships, use our abilities to reach our potential and deal with life's challenges. (*Western Australia Mental Health Commission*)

It is helpful to view mental health as a **continuum**:



The above diagram is often used to illustrate the spectrum of mental health. However, the diagram below emphasizes that **mental health is not simply the absence of mental illness**. This means that it's possible to have good mental health while living with mental illness.



None of us stays in the same position on the continuum all our lives. We all experience lows, anxieties and difficult phases as well as times when we are feeling great. There is no dividing line between the 'mentally ill' and the rest of us; between 'them' and 'us', as has been perceived to be the case in the past.

QUIZ

1	Globally, what proportion of people experience a diagnosable mental health disorder in their lifetime? <i>(World Health Organisation 2015)</i>	
3	What percentage of disability payments in Ireland are on mental health grounds? <i>(Dept of Social Protection)</i>	
4	The <i>Diagnostic and Statistical Manual of Mental Disorders</i> , most recently updated in 2013, lists how many types of mental disorders?	
5	What percentage of mental health difficulties begin between the ages of 15 and 25 years? <i>(World Health Organisation)</i>	
6	What percentage of traveller deaths are due to suicide? <i>(Pavee Point)</i>	

(Answers on page 31)

MYTHS

Below are listed some common beliefs about mental health problems. None of them are true.

- Having a mental health difficulty means you are crazy
- People with mental health disorders are violent or dangerous
- The Irish are more prone to mental health problems
- Ireland's suicide rate is on the rise
- Everyone who 'hears voices' has a mental health problem
- Psychiatric medications are the answer/Psychiatric medications are evil
- Mental health problems are a sign of weakness.
- Schizophrenia means split personality
- You can't recover if you have a mental health disorder

Stigma and Disclosure

- Mental health problems are still ranked at or near the bottom in public acceptance of difference. The National Disability Authority repeatedly finds that people are less comfortable having a work colleague or neighbour with mental health difficulties than with other disabilities.
- Another survey (Ahead) found that 63% of people with mental health problems would not tell their employer.
- A significant percentage of learners with mental health difficulties do not disclose this on enrolment in further education

<https://www.youtube.com/watch?v=JYYsRqtkhsM>

President Trump Says He'll Focus On Mental Illness, Not Gun Control

Mental illness and violence

Psychiatrists and psychologists have been looking at the data on this for a long time, and there's just no evidence of a connection between mental illness and violence. Instead, researchers have discovered that people with major mental illnesses are 2.5 times more likely to be the victims of violent outbursts than the general public.

According to the [National Center for Health Statistics](#), less than 5% of the 120,000 gun-related killings in the US between 2001 and 2010 were perpetrated by people diagnosed with mental illness. Only [1%](#) of discharged psychiatric patients commit violence against strangers using a gun, according to a study from the National Library of Medicine at the National Institutes of Health's online database.

In 2015, the psychiatrist Michael Stone catalogued a comprehensive database of [more than 235 mass murders in the US \(most of them shootings\)](#) and found that attackers were very likely to be men (by a ratio of 24 to one), and that often they are seeking "acts of revenge or retribution for perceived slights and wrongs." Stone said that many mass shooters tend to have "paranoid personality configurations," which can be associated with feelings of unfairness and disgruntlement, but [so do roughly one in 10 Americans](#).

Stone said many people assume that because someone has committed a deadly act, that must mean they're crazy. But that's not true.

Recovery

The Recovery Model is now advocated in mental health services around the world, including Ireland. Recovery is not the same as 'cure'. It is about claiming/reclaiming a socially valued lifestyle and social empowerment rather than becoming 'symptom-free'. It means taking control of one's life rather than being a passive 'patient'.

Key factors in recovery are

- *Hope,
- *Empowerment and
- *Social connectedness,

all of which may be developed through participation in education. There is no single path to recovery, but, for some people, the opportunity to engage in education and learning can be a powerful way of (re)gaining autonomy, meaning and hope.

Memoirs of Mental Health Recovery

1. *Mind on Fire: A memoir of madness and recovery* by Arnold Thomas Fanning
2. *Girl, Interrupted* by Susanna Kaysen
3. *An Unquiet Mind* by Kay Redfield Jamison
4. *The Scar: a personal history of depression and recovery* by Mary Cregan
5. *Me and my mate Jeffrey: A story of big dreams, tough realities and facing my demons head on* by Niall Breslin
6. *The best is yet to come: A memoir about football and finding your way through the dark* by Alan O'Mara

Pat Deegan Recovery Stories, Youtube
www.recoverystories.info/pat-deegan-film-clips

The experience of **FET adult learners with a history of mental health difficulties:**

1. Education as a step in Recovery

There is no single path to recovery, but, for some people, the opportunity to engage in education and learning can be a powerful way of (re)gaining autonomy, meaning and hope.

2. The value of learning

Affirmation	A sign of recovery	Salvation
Therapy – “Learning is my prescription”		Occupation

3. ‘Part of society’

Social and economic benefits

Confidence

“I really felt ...I was never going to work again. ...I had met so many people who had never returned to work...I thought Oh my God, is this the way I’m going to end up?”

Only 15% of people with longstanding mental health problems in Ireland are in employment

4. Stigma/disclosure

Even though there is now greater public awareness of mental health problems, they are still ranked at or near the bottom with regard to public acceptance of difference. Surveys by the National Disability Authority repeatedly find that people are relatively less comfortable having a work colleague or neighbour with mental health difficulties than with other disabilities. Another survey (Ahead) found that 63% of people with mental health problems would not tell their employer.


It is likely that a significant percentage of students with mental health difficulties do not disclose this on enrolment in further education.

5. Support

Learners with mental health difficulties report that encouraging and positive attitudes from staff are the most important support:

* Interest and encouragement	* Respect
* Flexibility	*Key person – usually but not always the course co-ordinator

WRAP PROGRAMME




Mental Health Recovery

Including:

Wellness Recovery Action Planning[®]

WRAP[®]



Mary Ellen
Copeland, PhD

info@mentalhealthrecovery.com - www.WRAPandRecoveryBooks.com - 800.366.2882
All rights reserved. Wellness Recovery Action Plan[®] and WRAP[®] are registered trademarks.

WRAP[®] covers the following topics:

- What are you like when you are well?
- Wellness Toolbox – things you can do to stay well.
- Daily Maintenance Plan – things you commit to doing daily to stay well.
- Identifying Triggers - how to cope with what throws you off balance and how to manage this.
- Identifying Early Warning Signs and plan your own “Action Plan”.
- When things break down, what you can do and how to get yourself back on track.
- Crisis Planning - how you can stay in charge when a crisis does happen
- Post Crisis Planning.

RECOVERY COLLEGE

Recovery College is a place of learning, connection, opportunity and hope for people living with mental illness, their carers, families and friends.

Promoting person-centred education where the voice of the lived experience is heard and respected in equal partnership with clinicians and professionals.

The first Recovery College in Ireland opened in Castlebar (GMIT) in 2013. There are now four other Recovery Colleges in operation.

- Mayo Castlebar
- Dublin North East, Louth and Meath
- South East – Kilkenny, Waterford, Wexford
- Roscommon East Galway
- Donegal Letterkenny (West Donegal, Strabane, Derry and Coleraine)

RECOVERY COLLEGE – SAMPLE TIMETABLE

Connect Café for World Mental Health Week	10.30am – 12.30pm
Hearing Voices (Morning workshop)	10.15am – 12.30pm
WRAP Café	11.30am – 1pm
Psychosis and Me (Morning Information Workshop)	2pm – 4pm
Let's Talk Anxiety (4 morning workshops)	9.30am – 1pm.
WRAP Café	11.30am – 1pm
Recovery Principles and Practice (Staff)	9.30am – 1.30pm
WRAP (Wellness Recovery Action Plan) – Level 1	10am – 4.30pm
Staying Well at Christmas	2pm – 4.30pm
Good Stress/Bad Stress	2pm – 5.30pm
Moving Forward/Goal Setting	10.15am – 12.30pm

RESEARCH ON MENTAL HEALTH BENEFITS OF PARTICIPATION IN EDUCATION

The greatest benefits experienced from learning are confidence, new friends and contact with other people, direct health benefits and new employment or volunteer work. (Lavender and Aldridge, *The Impact of Learning on Health*, 2000)

There is good evidence that education in general has a positive effect on mental health and reduces depression. These results were found particularly in the case of women..... Other studies have shown that adult learning is associated with higher life satisfaction and psychological wellbeing (Public Health England, *Adult Learning Services Report 2014*)

There is growing evidence of associations between participation in various types of adult learning and improvements in wellbeing, health, and health-related behaviours. After controlling for other factors, adults who engaged in at least one academic, accredited course increased their levels of exercise. Those who took at least one vocational, accredited course reduced their alcohol consumption. Other studies have estimated the effect of education on reducing the risk of depression during adulthood. Simulation results suggest that these improvements in mental health could result in healthcare savings worth some £230m annually. In addition, studies of adults in their 30s and 40s have reported a correlating relationship between measures of participation in learning and outcomes such as life satisfaction and/or psychological wellbeing. Furthermore, data from the English Longitudinal Study of Ageing (ELSA), a large-scale survey of adults aged 50 and above, has been used to investigate the impact of learning participation on various measures of psychological wellbeing. It was found that, after allowing for other influences on wellbeing, participation in learning was significantly associated with wellbeing outcomes. Amongst these older adults, it was leisure courses, rather than vocational courses, which appeared to have significant effects. (Chandola and Jenkins (2012) *The scope of adult and further education for reducing health inequalities*)

Partnerships, and closer working relationships, between the adult education services and the community mental health services seemed to offer the best outcomes for service users. A focus on preparing people for success through peer support, group participation and social engagement was identified as a core part of successful participation. (Bray Adult Education Network (2016) *Education and Recovery; Achieving Positive Outcomes in Education for Adults with Mental Health Difficulties*)

For Learners: How learning can help your wellbeing

- *Research shows that learning throughout life is associated with greater satisfaction and optimism, and improved ability to get the most from life.
- *People who carry on learning after childhood report higher wellbeing and a greater ability to cope with stress. They also report more feelings of self-esteem, hope and purpose.
- *Setting targets and hitting them can create positive feelings of achievement.
- *Learning often involves interacting with other people. This can also increase our wellbeing by helping us build and strengthen social relationships.

LEARNERS AND MENTAL HEALTH DIFFICULTIES

Our mental health influences how we think, feel and behave; it affects our capacity to learn, communicate, form and end relationships; and, it impacts how we adapt to change and life events. Mental Health Difficulties affect approximately 1 in 4 people and can cause significant adverse effects upon individuals' ability to carry out day-to-day activities. The types of mental health difficulties learners may experience include: depression; bi-polar disorder; social anxiety disorder and other anxiety and stress disorders; panic attacks; obsessive compulsive disorder; schizophrenia; and eating disorders.

How might mental health difficulties affect learners?

- Problems concentrating and maintaining focus on studies due to psychological distress, which may lead to disorganisation, change in study habits, build-up of work load, additional pressure and a drop in performance.
- Decreased interest/involvement in classes, class discussions or the course in general.
- Low morale and lack of confidence. Consistent late arrivals, absences or ill health, evidence of fatigue, weight loss or gain.
- Difficulty communicating with others and anxiety in social situations leading to avoidance behaviours and withdrawal from social activities.
- Difficulty making decisions, forgetfulness and disorganised thoughts.
- Learners may avoid classes for fear of being asked to express an opinion on the spot.
- Learners may find large crowded rooms and examination environments extremely anxiety provoking.
- Learners may have medical, counselling or therapy appointments which mean they need to miss some teaching sessions.
- Learners may find it challenging to make initial contact in seeking help.

Advice on discussion with a learner

*If you are worried about a learner the first step is usually to talk to them, find out a little more about what is going on, listen, reassure and be sensitive. Pointing the learner in the direction of appropriate support services or assisting them to make contact (in person, via phone or email) may be all that is needed. The guidance counsellor may see the learner and refer her/him for help. The learner may already be in touch with their GP or mental health services.

*When discussing mental health difficulties with learners only ask what is relevant; you do not need to discuss everything or all details about their difficulties.

*Do not hesitate to seek advice from other sources. Although you must obtain learners' consent to discuss confidential information with someone else, if a learner does not give consent you can always seek advice without giving the learner's name.

*When issues arise that indicate a serious risk to a learner or others, explain that you cannot keep information confidential due to Duty of Care for the learner.

Some suggestions for supporting learning

What tutors can do:

- Provide time and non-threatening activities to settle learners in and enable them to start to get to know one another
- Ensure that learners know where to find things, where to get help and support and what will be expected of them
- Spend time agreeing some group ground rules to promote respect for diversity within the group, respect for everybody's right to learn, etc.
- Challenge and deal with any negative or discriminatory comments or reactions of other learners or staff.
- Support organisation of work and time management including providing study skills support/ tools e.g. planning structure, revision timetables
- Create a climate in which the learners' views and preferences can be expressed
- Ensure that learners experience some success straight away
- Help learners recognise their achievements
- Provide positive and encouraging feedback
- Show where progress is being made
- Emphasise the positive
- Ensure you never humiliate or embarrass any learner
- Be friendly and interested
- Find out what the learner wants to get out of the learning experience and allow them to set their own targets
- Break large tasks into smaller steps if this is necessary
- Ensure that a variety of media and of teaching/learning styles are available
- Provide helpful comments on assignments and suggest ways in which improvements could be made
- Provide notes, e.g. on moodle
- Allow learner to sit near door/leave room for a break if feeling very anxious/claustrophobic

What co-ordinators can do:

- mentoring/learning support – support in planning and organising work, study skills, time management
- regular review times with co-ordinator/resource person/guidance counsellor
- peer support – linking learners/study buddies/self-help groups
- phone call from co-ordinator when absent for a few days
- flexibility re time off for medical/counselling appointments
- ensure that the learner knows how co-ordinator can be contacted if problems arise and that s/he will respond appropriately
- help to negotiate leave of absence/part-time attendance/extension of course
- support and liaison to organise successful return to course

Possible modifications to assessment: alternatives to group work assignments/extension of assignment deadlines /extra time or separate room in examinations

UNIVERSAL DESIGN

Universal Design is defined as

the design and composition of an environment so that it may be accessed, understood and used to the greatest practicable extent, in the most independent and natural manner possible, in the widest possible range of situations, and without the need for adaptation, modification, assistive devices or specialised solutions, by persons of any age or size or having any particular physical, sensory, mental health or intellectual ability or disability.

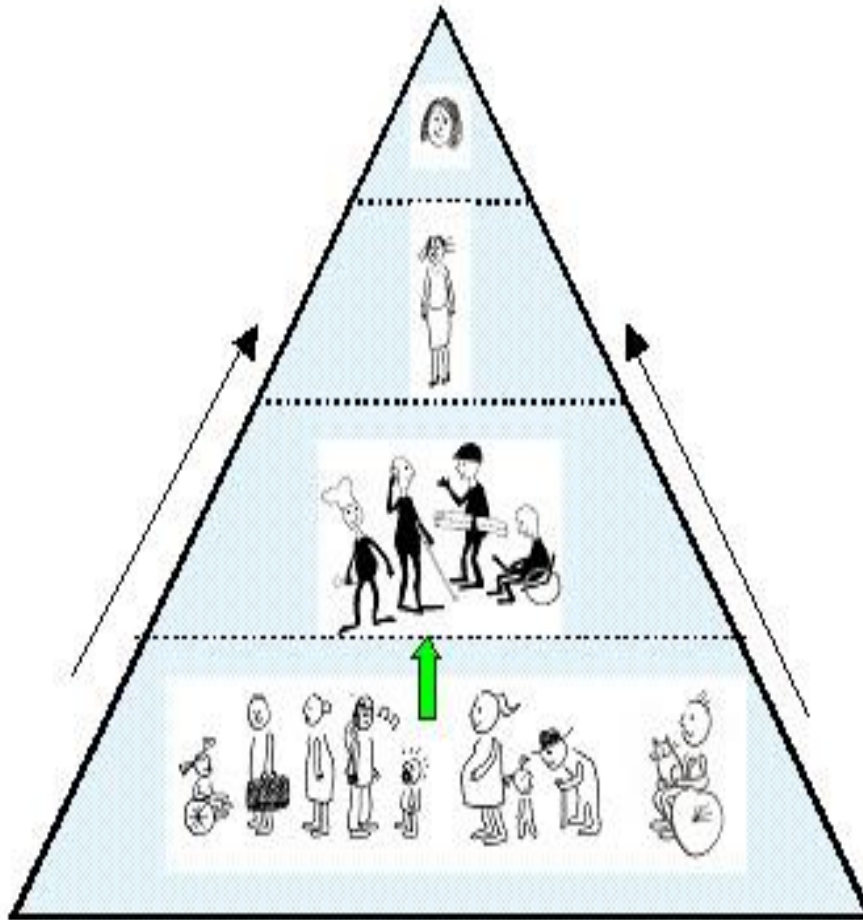
(Disability Act, 2005)

Design which facilitates people with disabilities can actually improve function for everyone. The more organisations move towards Universal Design, the less they need to worry about the nuts and bolts of reasonable accommodation. The concept of Universal Design is usually applied to tangible products, as in the following example:

If more than one option is available for a design feature, choose the more inclusive feature. For example, when installing a handle on a door, it is always better to opt for a lever handle, rather than a door knob, as the lever handle can be opened using the elbow or a closed fist, benefiting people carrying shopping bags as well as people with limited strength in their hands.

(National Disability Authority website)

Universal Design can apply to services as well as products. Building up good policies and procedures to promote inclusion of learners with mental health difficulties will improve the experience of adult learners in general as well as developing the quality and equality of the education service. **Good practice in relation to students with mental health problems is simply good adult education practice.**



Understanding universal design through a pyramid model:

- **Level 4:** Personal assistance where adjustments, assistive technology and including solutions are not sufficient, e.g., mentors, personal assistants
- **Level 3:** Reasonable adjustments to the individual, e.g., assistive technology
- **Level 2:** Adaptions to groups with similar needs, e.g., accessible literature for student with reading difficulties
- **Level 1:** Universal design: including most students in the ordinary solutions

(National Disability Authority)

MANAGING GROUP WORK AND DISCUSSIONS

Undertaking group work and contributing to class discussions can be very problematic for learners with social anxiety disorders. The element of unexpectedness regarding if and when they may need to contribute can compound anxiety and stress. Being clear about expectations regarding class contribution, as well as group work ground rules, may help learners to manage anxieties and give them time to prepare their contributions in class.

Try to use small group approaches and activities which give all learners the chance to contribute if they feel comfortable, but do not necessitate verbal contributions from all members or put any learner on the spot.

Asking learners to work in pairs or small groups and seeking feedback from the pair/small group can mitigate the need to put any learner on the spot.

Try to provide reassurance to specific learners that they will not be put in situations which they are uncomfortable with. This may improve confidence.

Learners may find it difficult to raise concerns about their studies with other learners present and 1:1 support should be offered if needed.

Guidelines for Discussing Support with a Learner

1. Don't make any assumptions

- Remember each person's experience of mental health difficulties is unique and so is the way it impacts on their learning at different times, if it does so at all. Learners with mental health difficulties do not all need the same level of support and many will not need any extra support.
- Learners will not all have the same goals. Academic success, e.g., achieving a full award, may be important to some. Others may experience this as a source of anxiety or distress and may gain greatly from participation in the course, aiming for success in some modules or to achieve a full award over a longer time.

2. Knowing about diagnosis or details of conditions and treatment may not help you at all

- A diagnosis is a medical label and knowing it will not necessarily help you at all to understand what support, if any, a person will need
- There is still a huge amount of fear and stigma surrounding certain diagnoses which are not just unhelpful but deeply damaging. There is also a great deal of misunderstanding of diagnostic terms, e.g. schizophrenia, which the general public tends to wrongly assume is a permanent condition involving hearing voices and violent behaviours. Very many people who have been given this diagnosis have successfully accessed and achieved positive outcomes in a range of learning environments including FE and Higher Education
- Whilst it's not necessary to know in detail about treatments or medication for these learners any more than for those who have heart disease or asthma, it may be useful to know something about *the impact on learning* of any treatments or medication since some can have effects on energy levels, concentration, memory or aspects of physical functioning

3. Remember that having mental health difficulties and living with the stigma and discrimination that are still associated with them can lead to a loss of confidence and self-belief which can itself be very disabling

- A learner may not need academic support but may need support with feeling valued and respected, and in identifying and using their strengths and abilities if they are to succeed in learning.
- Most of us experience anxieties about starting new things or meeting new people, or worry about our abilities in new contexts. For adults whose early experiences of education have not been fulfilling, or whose confidence has been damaged by life experiences or illness, these anxieties may be worse. Reassuring learners with mental health difficulties that some level of anxiety about accessing new learning opportunities is common and that as a learning provider you anticipate it and support learners to deal with it can be very helpful

4. There is no substitute for talking – and listening!

- Depending on their previous experience, some learners may not yet be sure about what will support them to succeed. You may help them to think through what to expect and what support they might need.

- Talking with them will also give you the opportunity to get a more rounded picture of the person as a learner
- Keep the conversation focussed on what is relevant to the learning and how you can support the learner to achieve. Be very careful not to slip into the role of counsellor.
- *“Seek first to understand, then to be understood... Most people do not listen with the intent to understand, they listen with the intent to reply.”* Stephen R. Covey.

5. Know your limits

- It is important to acknowledge and recognise personal and professional limits when offering support. Don't raise false expectation in the learner. Don't try to take responsibility for solving other people's problems. At the same time, acknowledge that you do have a responsibility not to ignore problems.
- Listen, reflect and refer when appropriate. Some people just want to talk. Make your own limits clear to the learner. Don't feel you have to come up with a total solution.

6. Support the learner to understand the requirements of the learning programme.

Identify any potential challenges and what might be done to address them

This could include:

- Number of hours engaged in learning per week / Programme scheduling and any difficulties arising from this / Amount of private study expected to deliver coursework, assignments, projects, etc. / Group sizes / Any work placements, visits, trips or residentials / Examination or assessment requirements

7. Be aware that some learners may have other anxieties or concerns such as:

- Finding their way around a large building or campus / Coming in through crowded entrances where people gather to chat or smoke / The social aspects of the learning – breaks, using the canteen, etc. / What the other learners are like and how they will be treated / Additional costs for materials, trips and visits, exam fees, etc. / Childcare or transport issues / Literacy, numeracy or IT skills / Study skills e.g. essay writing, revision techniques, research etc.

8. Talking about interests, strengths and abilities is as important as talking about anxieties and difficulties

- Find out about the learner as a person – are they involved in voluntary work, or mental health service user groups? How do they spend their spare time? Do they work or have they worked previously? What did they do?
- Find out why the learner wants to do this course – do they want to get a job? Or promotion? Are they doing it for pleasure? To learn a new skill? Or to combat social isolation?
- Finding out about these things will enable you to get a more balanced picture of the person as a learner and to see where learning fits in with their life
- It may also help you and the learner to move away from a 'deficit' – 'what they won't be able to do' – approach to a more positive 'building on what they can do' approach, which is more empowering.

CONFIDENTIALITY QUIZ

1. Once one member of staff knows about a learner's mental health issue, then the organisation is required to share that information with all other staff.

True

False

2. If a learner declares a mental health issue, all members of staff who will work with them should be informed

True

False

3. Once informed consent has been given/not given, it may be reviewed.

True

False

4. Confidentiality is absolute: once something is disclosed it must never be shared

True

False

5. Sensitive information about a learner should never be left on a screen or desk in an office.

True

False

(Answers on page 31)



Wellbeing is not merely about pleasure, cheerfulness, happiness or positive emotions. Happiness can come and go in a moment, whereas wellbeing is a more stable state of being well and feeling satisfied and contented.

In recent years, we have developed much better understanding of what wellbeing is made up of. Up to a few decades ago, psychology had focused on people's problems and difficulties and how they could be remedied, but not on how people could flourish and be happy. The positive psychology movement, launched in 1999, has developed into a science of human strengths, virtues and happiness and what makes life worth living.

The psychology of wellbeing includes the idea of the importance of self-care. Some people find it difficult to accept the value of giving time and effort towards taking care of yourself. As Amy Plant wrote in *The Journal.ie* (December 2017): "Ireland seems to be one of the only countries where the phrase "you love yourself" is considered an insult of the highest order. We're a nation of self-deprecators, we fob off anything that even comes close to praise, lest we get a "big head". The result is a population who often confuses self-care with self-pity, indulgence or the shirking of responsibility. In reality self-care is not selfish, it's not a matter of telling ourselves that we're never wrong, it is simply a matter of taking care of your mental, emotional and physical health. It is the key to a good relationship with yourself and others and paramount to enact change in our lives".



"Self-care and being loving and gentle toward ourselves helps us to be more present and calm, so we can respond wisely, intuitively and effectively to a variety of circumstances." (Reneé Peterson Trudeau)

Elements of Wellbeing

Martin Seligman, the founder of positive psychology, considers that there are five elements to wellbeing, with the acronym **PERMA**, and that people can learn to increase each one in their lives:

- **Positive emotion** – feeling good. The pleasant life. This element includes happiness, but happiness is not the only element in wellbeing.
- **Engagement** – when your strengths match your challenges. In its best manifestation this can become a state of ‘flow’ when, using your highest strengths and talents, you become completely absorbed in a task and lose track of time.
- **Relationships** – human beings are social animals. ‘Other people are the best antidote to the downs of life and the most reliable up’. Doing a kindness produces the single most reliable momentary increase in wellbeing of any activity Seligman and colleagues have tested.
- **Meaning** – time given to something greater than ourselves. Human beings need meaning and purpose in life.
- **Accomplishment** - working towards and achieving goals



WELLNESS TOOLKIT

We all have things, people and activities in our lives that support our wellbeing and help us to stay well. It's good to be aware of what these are, particularly the activities of which we are in control. They can be a resource when things are not going so well in our lives. This is sometimes referred to as our **wellness toolkit**. The tools in this kit vary among individuals – what makes one person feel good might be hated by another.

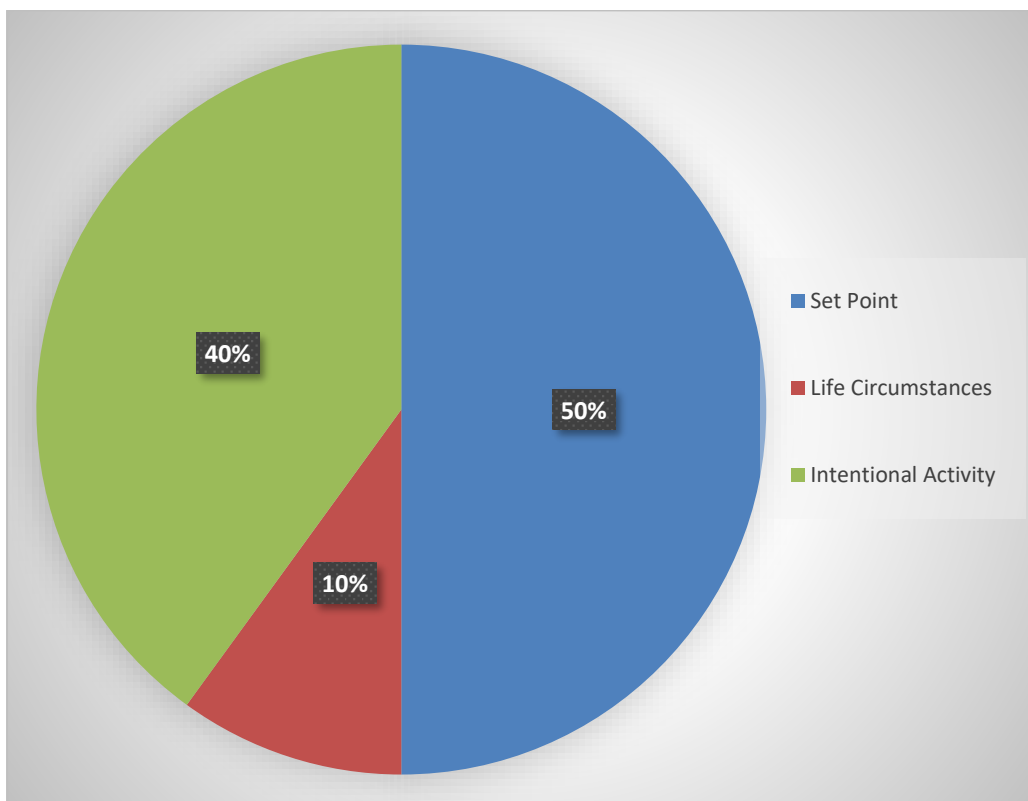
Things that support my wellbeing

If you make a list of your own Wellness Tools while you are in good form, it can be a useful resource for you to turn to in periods of stress.

What determines our wellbeing? – ‘the 40% solution’

American psychologist Sonja Lyubomirsky has done a lot of research on happiness and wellbeing. She and her research team concluded that:

- 50% is determined by our **genetic inheritance** (temperament, personality), what Lyubomirsky calls our **set point**
- 10% is determined by our **life circumstances** (partner, family, job, income, health)
- 40% is determined by our **‘intentional activity’** (the things we choose to pursue in life, including the way we think and behave)



Please note: This chart represents the relative amounts of happiness that are derived from these sources for individuals in the population at large. The experience of any one individual may not match this exactly.

Lyubomirsky’s conclusions are disputed by some other psychologists. Furthermore, the theory seems to assume that everyone’s basic needs are met, whereas it is hard to believe that for a person who is homeless their circumstances account for only 10% of their happiness. So it’s best to view the percentages as approximate. Even so, the theory is quite illuminating, especially in the amount of agency/control attributed to the individual.

As Maureen Gaffney writes in her book *Flourishing*: ‘You cannot change your genetic inheritance, although you can make some changes to the way you manage your temperament and personality. Trying to change your life circumstances will contribute only modestly to your happiness. **[About] 40% of your potential for wellbeing lies in your own hands - what you choose to attend to in your life, the activities you choose to engage in and the goals you set for yourself’.**

WORK – SATISFACTION AND STRESS

Work can be a great source of satisfaction but can also cause stress.

Ways in which work is good for my wellbeing:

Ways in which work causes me stress:

COPING WITH STRESS

Individuals have different ways of coping with stress, some healthier and more effective than others. If you have listed the elements in your *Wellness Toolkit* it can be helpful to look at them when under stress and try to use some of them to take care of yourself. When you are stressed, it's all too easy to forget them.

Studies of teachers under stress have found that the main coping strategies that teachers reported were having good friends and family, having a sense of humour, times of solitude, exercising, getting enough sleep and having a healthy diet, seeing stress as a problem that can be solved, having a positive attitude and letting things go.

Advice from a Buddhist monk leading a retreat:

- If you want happiness for an hour, take a nap.
- If you want happiness for a day, go fishing.
- If you want happiness for a month, get married.
- If you want happiness for a year, inherit a fortune.
- If you want happiness for a lifetime, help somebody else.

Recent research in the psychology of wellbeing confirms that helping others is one of the best ways to feel good and the 'feel good factor' tends to last. It's interesting how sometimes modern research confirms the wisdom of old sayings, eg, 'Kindness is its own reward'.

However, the fact that your work involves helping people does not, unfortunately, mean that you feel good all the time. Other things get in the way, including the challenges and stresses involved in dealing with people who are in distress or who sometimes exhibit difficult behaviour, and also external pressures and conflict. Worse, if you experience 'burnout' – which can result from stress and lack of self-care – you can lose belief in the value of your work and it can seem pointless.

Which of these stress management strategies might help you?

Focus on what is in your control

Make a list of the things which are causing you stress. Now divide them into two lists: those which are within your control and those which are not in your control. Decide to focus on the things which are in your control. Put the others aside.

Remember the *Serenity Prayer*:


Grant me the serenity
To accept the things I cannot change,
Courage to change the things I can,
And wisdom to know the difference.

For each of the stressors over which you have some control, brainstorm a list of possible solutions or at least ways of making the situation better than it is. Decide which one or two you are going to tackle first.

Time Management

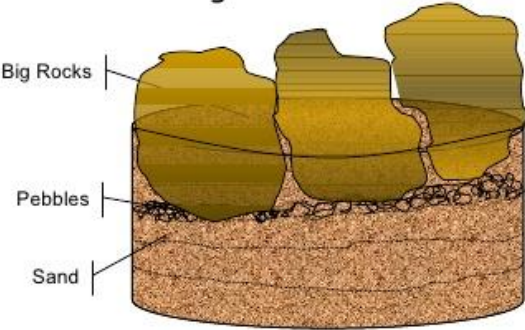
Improving your time management has been shown to be an extremely effective way of improving your wellbeing. One of the best theories of time management is that of Stephen Covey, who wrote about it in his book *First Things First*.

The Covey time management grid is an effective method of organising your priorities. It differentiates between activities that are important and those that are urgent. Important activities have an outcome that leads to the achievement of your goals, whether these are professional or personal. Urgent activities demand immediate attention, and are often associated with the achievement of someone else's goals. Inevitably, there is a tendency to focus on things that are urgent – and often the urgent things are also important. Stephen Covey's approach to time management is to create time to focus on important things before they become urgent. Sometimes this just means doing things earlier. The real skill is to commit time to processes that enable you to do things more quickly or more easily, or ensure that they get done automatically. Examples would be clearing your desk and doing the filing, creating a daily to-do list (and a discipline to use it) or investing in new software. Covey uses a metaphor of filling a bucket with rocks, pebbles and sand to represent activities of declining importance. Very often if you commit specific times for the important activities you will also find time to fit in the less important ones.



1. Tasks can be divided by importance into Big Rocks, Pebbles, and Sand.
2. Your time is like a large glass beaker.
3. If you put the Sand and Pebbles in first, you will never fit in the big rocks.
4. However, if you put in the Big Rocks first, then there will be plenty of room for the Pebbles and Sand around the Big Rocks.
5. If you make time for the Big Rocks, then the Pebbles and Sand will take care of themselves.

Big Rocks Don't Fit

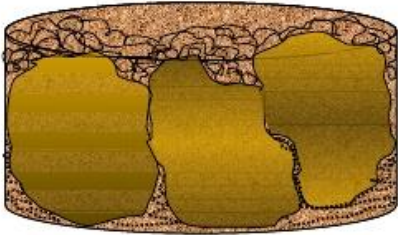


Big Rocks

Pebbles

Sand

Put In the Big Rocks First — Everything Fits



Dean P. Briggs, Ph.D. The Big Rocks in IT 2/2/2007 2

Unitask

Try to focus on one task at a time and be present in the moment as you do it. When we attempt to focus on a number of tasks simultaneously, what actually happens is that we switch back and forth between tasks, paying less attention to each – taking 50% longer to finish the task and making up to 50% more errors. While one-pointed attention may appear to slow us down, it actually makes us more productive.

Boundaries

You were probably drawn to this work out of a desire to help people. However, for your own wellbeing and self-care, it is essential that you have clear boundaries as to your time, availability, expertise and emotional involvement. Boundaries protect your emotional wellbeing, defining the limits of your role and responsibility. Martyrdom and over-availability do not make for a happy work life.

Many people will not have experienced appropriate boundaries in relationships earlier in their lives. This will also be the case for many of your learners, who, as a result, may have particular difficulties in maintaining appropriate boundaries with others. In these circumstances it is important for the co-ordinator/teacher to manage the relationship within appropriate boundaries.

Below is some sensible advice adapted from the University of Sheffield Learning and Teaching Services (2015):

- Start as you mean to go on. Explain your role, how you can be contacted, and the limits of your availability at the first meeting.
- Stay within your own role and area of expertise. If a learner presents with a problem that would benefit from more expert/dedicated support, encourage or arrange for the learner to access that.

Network support/Professional Development

Attending network meetings with professional colleagues and availing of professional development opportunities will help to support your morale and learning.

Gratitude

‘Gratitude is a very powerful thing... the single strength that correlates the most with happiness. Grateful people are naturally happier’. (Martin Seligman). Another example of the wisdom of old sayings, and one we’ve all heard: ‘Count your blessings’.

Gratitude is a sense of **appreciation**, ‘an interior attitude of thankfulness, regardless of life circumstances’. When things are going well in your life, it’s easy to be grateful, but gratitude is more important when things are going wrong. Even so, we all know people who, although materially prosperous and ‘successful’ are discontented with their lives, and others who live in much more straitened circumstances but are happier and more content. Happy people

seem to have the knack – or have developed the habit – of appreciating the good things in their lives.

Many studies have traced a range of impressive benefits to keeping a **gratitude journal** - writing down the things for which we're grateful. Benefits include better sleep, fewer symptoms of illness, and more happiness. The basic practice is straightforward. Usually people are simply instructed to record five things they experienced in the past week for which they're grateful. The entries are supposed to be brief—just a single sentence—and they range from the mundane (“waking up this morning”) to the sublime (“the generosity of friends”). Some people like to write in their journal every day and find that beneficial, but for most people that might be overdoing it and in general it is found that writing once or twice per week is more beneficial than daily journalling.

<https://www.youtube.com/watch?v=43zvl2b1oD4> – Martin Seligman on gratitude

Gratitude exercise

Write down three or four things that you are grateful for during the past week:

- 1.
- 2.
- 3.
- 4.

Nature

Spending time outdoors in nature is good for mental and physical wellbeing. Gardening can relieve stress and is good for body, mind and soul. Microbes in the soil can boost our levels of serotonin, which promotes wellbeing and contentment.

Exercise

Physical exercise produces endorphins—chemicals in the brain that act as natural painkillers— improves the ability to sleep, reduces stress and improves mood. It's good for mental as well as physical health. Regular exercise can be more effective than anti-depressants for mild to moderate depression and is a natural and effective anti-anxiety treatment. Of course when we feel overstretched and under pressure we tend to exercise less. The more stress you feel, the more you need to exercise.

Relaxation Techniques / Mindfulness

You can practise relaxation exercises just about anywhere. Learn from mindfulness, yoga, breathing exercises and other methods that help your physical and mental facilities connect. Switching to calmer modes of dealing with stress will help you respond to situations more effectively.

Sharon Salzberg, an American teacher of mindfulness and meditation, published a book called *Real Happiness at Work: Meditations for Accomplishment, Achievement and Peace* (2015). She suggests many '**Stealth Meditations**', which take only a minute and can help you to centre or ground yourself during the day at work, e.g.,

*As you sit down at your desk or workspace, spend a few moments just listening to the sounds around you and notice your reaction to them.

*If you start to feel overwhelmed, take a quick, centring moment – as short as following three breaths – to connect with a deeper sense of yourself.

*At the beginning of a meeting (or a class), silently offer the phrases of loving-kindness ('May you be well. May you be happy. May you live with ease') to all in the group.

*Set an intention for the day before beginning work, such as 'May I treat everyone today with respect, remembering each person wants to be happy as much as I do'.

*If you are nervous about speaking before a group, spend a few moments doing a loving-kindness meditation before you get up to speak. This can allay feelings you may have of feeling judged or measured by the group. They are no different from you.

*If you find a colleague/manager difficult, try saying to yourself 'Just like me, this person has suffered in life. Just like me, they've made mistakes and have regrets. Just like me, they want to be happy'.

Happiness-Enhancing Strategies from The How of Happiness: A New Approach to Getting the Life You Want. (Sonja Lyubomirsky)

- (1) **Counting your blessings:** Expressing gratitude for what you have (either privately – through contemplation or journaling – or to a close other) or conveying your appreciation to one or more individuals whom you’ve never properly thanked.
- (2) **Cultivating optimism:** Keeping a journal in which you imagine and write about the best possible future for yourself, or practising looking at the bright side of every situation.
- (3) **Avoiding overthinking and social comparison:** Using strategies (such as distraction) to cut down on how often you dwell on your problems and compare yourself to others.
- (4) **Practicing acts of kindness:** Doing good things for others, whether friends or strangers, either directly or anonymously, either spontaneously or planned.
- (5) **Nurturing relationships:** Picking a relationship in need of strengthening, and investing time and energy in healing, cultivating, affirming, and enjoying it.
- (6) **Doing more activities that truly engage you:** Increasing the number of experiences at home and work in which you “lose” yourself, which are challenging and absorbing.
- (7) **Replaying and savouring life’s joys:** Paying close attention, taking delight, and going over life’s momentary pleasures and wonders – through thinking, writing, drawing, or sharing with another.
- (8) **Committing to your goals:** Picking one, two, or three significant goals that are meaningful to you and devoting time and effort to pursuing them.
- (9) **Developing strategies for coping:** Practicing ways to endure or surmount a recent stress, hardship, or trauma.
- (10) **Learning to forgive:** Keeping a journal or writing a letter in which you work on letting go of anger and resentment towards one or more individuals who have hurt or wronged you.
- (11) **Practicing religion and spirituality:** Becoming more involved in your church, temple, or mosque, or reading and pondering spiritually-themed books.
- (12) **Taking care of your body:** Engaging in physical activity, meditating, and smiling and laughing.

www.thehowofhappiness.com



Based on an extensive review of the evidence, five simple steps improve mental wellbeing:

1. Connect...

With the people around you. With family, friends, colleagues and neighbours. At home, where you learn or work, or in your local community. Think of these relationships as the cornerstones of your life and invest time in them. Building these connections will support and enrich everyday life.

2. Be active...

Go for a walk or run. Step outside. Cycle. Play a game. Garden. Dance. Exercising actually makes you feel good once you do it – sometimes it's just the thought of it that we struggle with. Most importantly, discover a physical activity you enjoy and that suits your level of mobility and fitness.

3. Take notice...

Of things around you. Be curious. Catch sight of beautiful or unusual things and stop for just a moment to take it in. Really notice the changes going on every day. Savour the moment, whether you are - walking to work, eating lunch or talking to friends. Don't do too many things at once. Be aware of the world around you and what you are feeling. Reflecting on your experiences will help you appreciate what matters to you.

4. Keep learning...

Try something new. Rediscover an old interest or hobby –or take up a new one. Sign up for that course. Take on a different responsibility at work. Fix a bike. Learn to play an instrument or how to cook your favourite food. Set a challenge you will enjoy achieving. Learning new things will make you more confident as well as being fun.

5. Give...

Do something nice for someone - a friend, or a stranger. Thank someone. Smile. Laugh. Volunteer your time. Join a community group. Look out, as well as in. Seeing yourself, your happiness and wellbeing, as linked to the wider community can be incredibly rewarding and creates connections with the people around you so you are much less likely to feel isolated, lonely or depressed.

For more information go to: www.foresight.gov.uk

Reproduced from Aked, J., Marks, N., Cordon, C., Thompson, S. 'Five Ways to Well-being' A report presented to the Foresight Project on communicating the evidence base for improving people's well-being. New Economics Foundation

Answers to quiz page 4

1	Globally, what proportion of people experience a diagnosable mental health disorder in their lifetime? <i>(World Health Organisation 2015)</i>	One in four
3	What percentage of disability payments in Ireland are on mental health grounds? <i>(Dept of Social Protection)</i>	33%
4	The <i>Diagnostic and Statistical Manual of Mental Disorders</i> , most recently updated in 2013, lists how many diagnoses of mental disorders?	265
5	What percentage of mental health difficulties begin between the ages of 15 and 25 years? <i>(World Health Organisation)</i>	75%
6	What percentage of Traveller deaths are due to suicide? <i>(Pavee Point)</i>	11%

Answers to Confidentiality Quiz page 18

Once one member of staff knows about a learner's mental health issue, then the organization is required to share that information with all other staff.

FALSE: Informed consent means that the learner must stipulate who they are happy for the information to be shared with, preferably giving written consent, and then on a 'need to know' basis only

If a learner declares a mental health issue, all members of staff who will work with them should be informed.

FALSE: Again this could only happen with explicit, informed consent of the learner. The learner must be consulted on all levels of information sharing. Where possible, learners should be encouraged to consider the benefits of appropriate information sharing

Once informed consent has been given/not given, it may be reviewed.

TRUE: It is good practice to review who a learner has agreed their information can be shared with.

Confidentiality is absolute: once something is disclosed it must never be shared.

FALSE: There are certain types of information that a member of staff must legally share e.g. child protection issues, crime, something which indicates a danger either to the learner or someone else. Learners must be made aware of these legal implications early on in the relationship.

Useful Resources - Support

yourmentalhealth.ie is a joint initiative of the HSE and the NOSP in Ireland. It is designed to be an online space where anyone can access information on how to look after their own mental health and how to support those around them. Links include online wellness workshops and videos, podcasts, a cognitive behavioural therapy (CBT) app called WorkOut, and an online service directory (available on the home page) which can be searched by area and provides a list of relevant mental health support services. www.yourmentalhealth.ie

National Youth Council of Ireland – Youth Mental Health Services Signposting Tool provides information on available youth mental health services, training programmes, community supports and children’s rights. Searches can be conducted by region and by support service required.

<http://www.youthhealth.ie/signposts>

HSE’s **National Office for Suicide Prevention (NOSP)**. Resources include mental health promotion posters, details of regional suicide prevention officers, guidance documents on best practice, information booklets, and practical guidance resources for communities and schools engaging in suicide prevention work. The NOSP also provides information on relevant events and training opportunities both for practitioners hoping to upskill and for people in need of mental health support.

safeTALK This programme is focused on improving skills that help spot suicide risk in others, or alertness. safeTALK is a half-day training programme designed to equip participants with the skills necessary to identify persons at risk of suicide within their communities, and to assist them in accessing suicide first aid resources. In Ireland, the service is usually delivered locally through the HSE Regional Resource Officers for Suicide Prevention. A list of these officers is available and training opportunities can be accessed on the yourmentalhealth.ie website.

ASIST (Applied Suicide Intervention Skills Training) This programme is directed at improving intervention skills. ASIST is a two-day interactive workshop designed to train practitioners and caregivers in suicide and self-harm first aid. Participants are encouraged to examine their own beliefs and relationships and how these may impact on their approach to intervention. They are trained in how to reduce the immediate risk of suicide and to provide positive support to those engaging in self-harm. ASIST is usually delivered locally through the HSE Regional Resource Officers for Suicide Prevention. A list of these officers is available and training opportunities can be accessed on the yourmentalhealth.ie website.

Mental Health First Aid is a programme focused on improving intervention skills. It is the help offered to a person who is developing a mental health problem or who is experiencing a mental health crisis, until appropriate professional treatment is received or until the crisis resolves. It follows the model that has been successful with conventional first aid. It is available through Mental Health First Aid Ireland which is supported in making the programme available by the HSE and Saint John of God Services.

Mental Health Ireland's website is an information and signposting resource:

www.mentalhealthireland.ie Their [A-Z of Mental Health](#) gives information and advice on a number of issues related to mental health and wellbeing, including Anger, Mindfulness, Panic Attacks, Self-Management Tips

Headstrong – an organisation supporting young people's mental health. www.headstrong.ie

Aware - provides support & information for people who experience depression, anxiety or mood disorder and their concerned loved ones. www.aware.ie HELPLINE PHONE: 1890 303302

Grow - a peer support and mutual-aid organization for recovery from, and prevention of, serious mental illness. www.grow.ie PHONE: 1890 474 474

Recovery International Ireland – a self-help group for improved mental health and recovery from nervous symptoms www.recovery-inc-ireland.ie PHONE: 01 6260775

Shine - dedicated to upholding the rights and addressing the needs of all those affected by enduring mental illness including, but not exclusively, schizophrenia, schizo-affective disorder and bi-polar disorder. www.shineonline.ie. HELPLINE PHONE: 1890 621631

Bodywhys (The Eating Disorders Association of Ireland) – support for people affected by eating disorders. www.bodywhys.ie HELPLINE PHONE: 1890 200 444

Samaritans – a confidential emotional support service. www.samaritans.org. Free to Call Number - 116 123

Pieta House - a free, therapeutic approach to people who are in [suicidal distress](#) and those who engage in [self-harm](#). www.pieta.ie

Spunout.ie – Irish youth information website which aims to educate and inform about the importance of holistic wellbeing

Mental Health Matters for FE Teachers Toolkit- free download on shop.niace.org.uk/mh-fe-toolkit.html

Mental Health in Further Education (MHFE) - an e-network for anyone who has an interest in mental health and adult learning. www.mhfe.org.uk

REFERENCES/RESOURCES – WELLBEING

www.alustforlife.com founded by Niall Breslin (Bressie). Aimed at enabling people to improve their holistic wellness and to educate on how the mind and body can be made more resilient. A well-designed website and a great resource. Includes some articles on teacher stress and wellbeing.

www.padraigomorain.com books, courses and downloadable audios, sharing knowledge and expertise about mindfulness.

First Things First: to live, to love, to learn, to leave a legacy by Stephen Covey (1994). Very good on time management and on setting priorities

Real Happiness at Work: Meditations for Accomplishment, Achievement and Peace by Sharon Salzberg (2015). Gives many practical tips for dealing with stress and achieving personal fulfilment at work.

Flourishing: how to achieve a deeper sense of well-being, meaning and purpose – even when facing adversity by Maureen Gaffney (2011). Quite a lengthy book, but gives a good summary of positive psychology and strategies for wellbeing.

Flourish: A new understanding of happiness and well-being and how to achieve them by Martin Seligman (2011). Chapters 1, 2, 6 and 9 give a very good overview of current thinking and research in positive psychology.

The Mindful Path to Self-Compassion: Freeing yourself from destructive thoughts and emotions by Christopher K Germer (2009). A good introduction to mindfulness, with an emphasis on practising loving kindness and self-compassion

PERMA (2012) youtube martin seligman perma. A 25-minute talk in which Seligman explains his PERMA theory of wellbeing and describes research findings on wellbeing and happiness

Flourish – a new understanding of wellbeing (2012) youtube martin seligman flourish. A 30-minute talk by Seligman on PERMA and on flourishing as opposed to mere alleviation of misery

The How of Happiness: a practical guide to getting the life you want by Sonja Lyubomirsky (2007). A description of Lyubomirsky's research and findings on happiness.

This resource published by NCGE with permission of Dr Marie Rooney.