

h Commission de la santé mentale du Canada



Community Health Nurses of Canada Conference

June 28th, 2018

Mireille Cyr, Manager MHFA and OM Ashlee Mulligan, Program Manager, Prevention and Promotion





Commission de la santé mentale du Canada



Supporting Seniors' Mental Health

Hental Health Commission of Canada

Created in 2007 by the federal government as an independent, arms-length non-profit organization

Mission of MHCC is to promote mental health in Canada, and work with stakeholders to change the attitudes of Canadians toward mental health problems, and to improve services and support.

Vision: a society that values and promotes mental health and helps people who live with mental health problems and mental illness lead meaningful and productive lives.





Mental Health Strategy for Canada



CHANGING DIRECTIONS CHANGING LIVES

The Mental Health Strategy for Canada

Mental Health of Canada Commission de la santé mentale du Canada "Counter the impact of age discrimination on mental health."

"Help older adults to participate in meaningful activities, sustain relationships and maintain good physical health."

"Increase the capacity of older adults, their families, and those who work with them to identify mental illnesses, and intervene early when problems first emerge."





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Current Initiatives on Aging and Mental Health

- 1. Mental Health First Aid Seniors
- 2. Preventing suicide in older adults
- 3. Uptake of the Guidelines for Comprehensive Mental Health Services for Older Adults

4. Home Care and Seniors Mental Health Policy Guidance Paper



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Initiative 1: MHFA Seniors

An Innovative Approach to Supporting Seniors' Mental Health



You already know about physical first aid, now find out about the importance of Mental Health First Aid Training



What is Mental Health First Aid?

MHFA is the help provided to a person developing a mental health problem, a worsening of a mental health problem or who is in a mental health crisis.

The first aid is given until appropriate professional treatment is received or until the crisis is resolved.





Mental Health First Aid Does Not:

Train participants to become therapists or counselors

Provide participants with the skills to diagnose





Why MHFA?

Many people are not well informed, and often don't know how to respond



Increased ability to recognize changes in behaviour

There is stigma associated with mental health problems



Stigma decreased

Professional help is not always on hand; not everyone with a mental health problem seeks treatment



Helping behaviour increased





Mental Health First Aid Seniors





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Better Together



Acknowledgements

Development of this course was provided by an unrestricted educational grant from



GlaxoSmithKline

Curriculum for this adaptation was developed at





Resources

Information from valuable Canadian resources have been emphasized including amongst others:

- National Guidelines for Seniors' Mental Health
- Caregiving Strategies for Older Adults with Delirium, Dementia and Depression
- Delirium Resources
- Alzheimer Knowledge Exchange
- 4th (2012) Canadian Consensus Conference on the Diagnosis and Treatment of Dementia (CCCDTD).





What constitutes a "Senior"

- •Age sixty-five (65) marks the line
- between adulthood and old age
- commonly referred to as 'a senior'.
- 'an older adult' or 'an older person
- Physical, mental, social and spiritual aspects

You can't help getting older, but you don't have to get Old.





Stigma and Mental Health

Stigma is associated with mistaken perceptions of the individuals with a mental illness:

- Personally weak or to blame for their illness
- Dangerous or likely to become violent
- Unpredictable or difficult to interact with
- Unlikely to recover even with treatment





Video: Seniors and Stigma







"Ageism"

- Stereotypes and prejudices applied to seniors based solely on their age
- Occurs when people believe that promoting healthy living among seniors is unimportant or too late to make a difference
- Particularly prevalent in health care settings
- Decreases motivation, feelings of self-worth, quality of life and cognitive performance



some people are old mixtape; at 18 and some are 17517 inter a young at 90 ... time 257 is a concept that humans created' Yoko Ono (above)



Social Health

- Refers to an individual's ability to positively interact with others
- •A socially healthy senior can:
 - •Form secure and meaningful relationships with others
 - •Socialize and make friends with others
 - •Give and receive emotional support
 - •Engage in their community











Poor Social Health

- •More frequently challenged with losses
- •Seniors with smaller social networks are more
- vulnerable to poor social health
- •Socially unhealthy seniors can become anxious and/or depressed
- •Socially isolated seniors may become more at risk for mental health disorders and suicide





Why MHFA Seniors? 65+



The likelihood of experiencing a mental health problem or illness in a given year increases as of age 69

Depression highly prevalent in long term care settings (as high as 31%)

Can account for as many as 1/4 of emergency department visits

Currently, men aged 80 and older have the highest suicide rates in Canada

High rates of distress among caregivers





Aims of Mental Health First Aid Seniors

- Recognize the symptoms of mental health problems or crises as they develop in seniors
- Provide initial help when dealing with a mental health problem or crisis
- Guide a senior and/or caregiver toward appropriate professional help
- Provide strategies and resources to support both seniors and their caregivers





Course Outline

Day One

Day Two

- Seniors & Mental Health
- MHFA & Caregivers
- Substance Use Disorders
- Mood Disorders

- Anxiety Disorders
- Dementia
- Delirium
- Psychosis









Framework: ALIFE

- Assess Safety: risk of suicide, serious physical deterioration, and/or harm to others
- Listen non-judgmentally
- Information and reassurance
- Facilitate the senior getting appropriate professional help
- Encourage support for the senior and caregiver





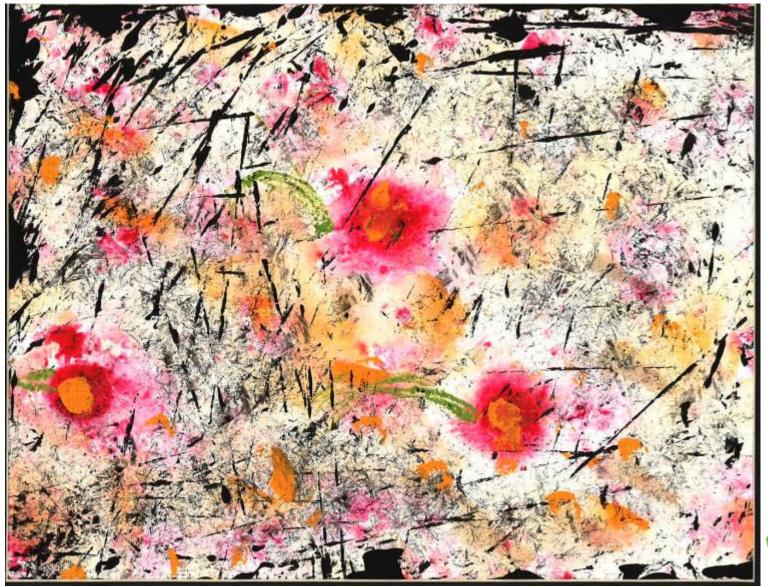
Each section covers:



- Artwork for discussion
- Overview of the disorder and its variations
- Changes of behaviour to be aware of
- Impact on person's life
- Risk factors
- Relevant concurrent Issues
- Role-play video (substance use, delirium, dementia)
- Case Study
- Activities



Roses through cracked Glasses





Case study

John is a 76 year old widower, living alone in his condominium, and has been feeling unwell for the last 2 weeks. He declined your invitation to go the annual winter fair, an activity he has enjoyed most years, claiming he is not interested this year, and no longer feels confident driving. He claims he feels tired but can't seem to get a restful sleep. He dislikes cooking for himself and thinks he has lost weight. He complains of constipation and stomach pains. He stopped playing bridge at the seniors' community center, and declined a trip to visit his daughter on the west coast next month. He cancelled his newspaper subscription as he complains he can't remember the details in the stories anymore.

How would you use ALIFE to support John?





Video: Delirium





The most basic of all human needs is the need to understand and be understood. The best way to understand people is to listen to them.

- Ralph Nichols





Exercise: LAST WORD RESPONSE

In pairs, hold a conversation in which each must use the last word that your partner says as the first word in your response.

Sample Dialogue:

- "This morning I drove my car to work."
- "Work seems to be piling up in my office."
- "Office etiquette requires me to attend all meetings."
- "Meetings seem to be a taking up most of my day." etc.



Listen Non-Judgementally

Attitudes

- Accept the person as they are
- Make no moral judgements about their situation
- Demonstrate Empathy

Verbal Cues

- Don't interrupt
- Ask questions to make sure
 Keep comfortable eye that both of you are clear on what is being said
- Warm tone of voice
- Restate what has been said
- Summarize facts and feelings

Non-verbal cues

- Be attentive
- contact
- Keep an open body position
- If appropriate sit down
- Try not to sit directly opposite



Empathy







Encourage Support for the Senior and Caregiver

Caregiver Challenges

- Lack of appropriate information
- What to expect/how to manage symptoms
- Lack of support to cope with adjusting to the role of caregiver





It is important that MHFAiders and Caregivers recognize that they need to take care of themselves in order to care for others

> almost everything will work again if you unplug it for a few minutes... including you.

Anne Lamott









Smartphone class 😳







Who are MHFAiders for Seniors likely to be?

Informal Caregivers

- Spouse/partner
- Child
- Other family
- Friends
- Neighbors

Service Providers

- Therapists
- Pharmacists
- Personal Support Workers
- Volunteers
- And many more...







How do I take a course?

- 1. Set up an in-house course
- 2. Attend a public course
- 3. Contact a MHFA trained instructor in your area to deliver the course
- 4. Consider training members of your team to be MHFA instructors







Public courses

July 23-27, Waterloo, ON August 20-24, Sudbury, ON September 17-21, Quebec, QC September 17-21, St. John's NF September 24-28, Whitehorse, YK October 15-19, Ajax ON October 15-19, Regina SK October 29-Nov 2, Moncton, NB November 19-23, Calgary, AB November 19-23, London, ON November 26-30, Victoria, BC November 26-30, Montreal, QC





Mental Health First Aid Seniors

List of **Public Courses** Website: <u>www.mhfa.ca</u>

To Organize an In-House Course Email: <u>mhfa@mentalhealthcommission.ca</u> Telephone: 1-866-989-3985







Initiative 2: Preventing suicide in older adults



The role of healthcare providers in suicide prevention

- Healthcare providers play a pivotal role in preventing suicides
- Those who die by suicide frequently contact a health care provider in the weeks and months prior to their death:
 - In adults ages 55 or older, up to 70% visited a primary care provider within a month of their death
- Physician and gatekeeper education are amongst the most effective suicide prevention measures







Suicide: Facing the Difficult Topic Together

- Online training module designed to increase understanding in suicide risk assessment, intervention, safety planning and available tools and resources
- Accredited by the College of Family Physicians of Canada and the Canadian Nurses Association



This accredited module will give you a firm understanding of suicide risk assessment, intervention, safety planning and available tools and resources.







Initiative 3: Guidelines for Comprehensive Mental Health Services for Older Adults in Canada

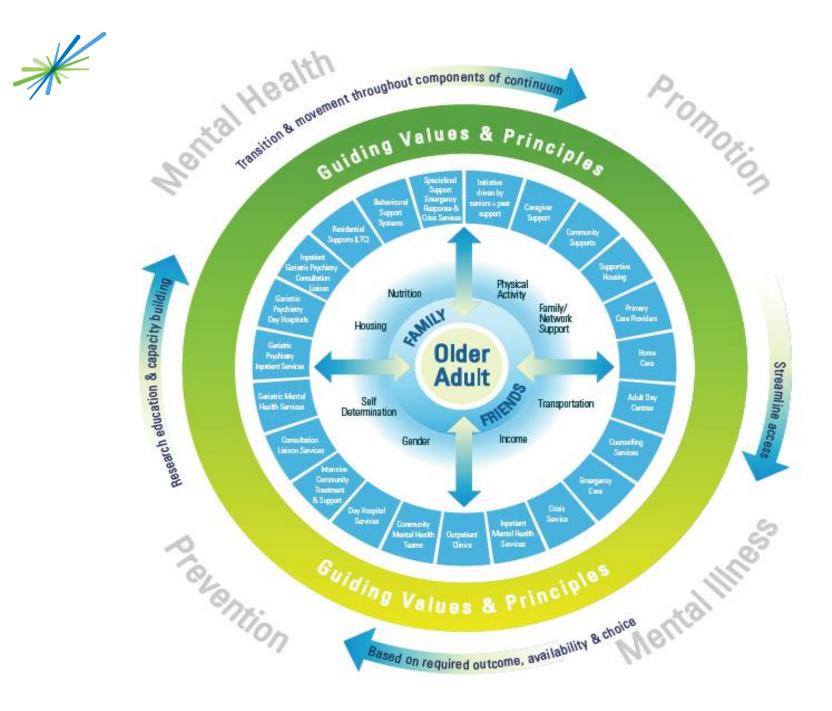


Focus: Drive uptake of *the <u>Guidelines</u>* to improve availability and quality of mental health services for older adults across the continuum of care.

Objectives of the current work:

- Get aging and mental health on the agenda
- Make guidelines more accessible and known
- Bring out diverse voices of seniors' lived experience
- Explore professional education issues (workforce development)











Initiative 4:Aging, Mental Health and Homecare



Objective: Develop a policy guidance paper with regard to mental health considerations in providing home care services to seniors building on work undertaken by CMHA and others in 2002.

Activities

- Literature review and scan
- Consult with stakeholders (roundtable) to identify issues related to mental health consideration in home care services. completed
- A discussion paper
- Broader consultation July- October 2018
- Final paper February 2019

To be included in the consultation email: aging@mentalhealthcommission.ca







For more information:

aging@mentalhealthcommission.ca

Francine Knoops, Lead Analyst - Strategic Policy and Stakeholder Relations fknoops@mentalhealthcommission.ca

Sareda Quah-Vo, Knowledge Broker squah-vo@mentalhealthcommission.ca



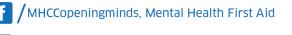
MHFA Questions/Comments?

Contact us:

Mireille Cyr Manager, Business Development bd@mentalhealthcommission.ca

Visit us:

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