



Mental Health 101

SADAG



Who is SADAG?

- Founded in 1995 to help patients with Depressive and Anxiety Disorders
- Depression, Panic, Social Phobia, PTSD, Bipolar
- Telephone Counselling and referrals nationwide
- Only Suicide Crisis Line in the country
- 30 lines that deal with depression, trauma, anxiety, panic, suicide, bipolar, substance abuse, etc.
- 24 hours a day, 7 days a week
- 200 FREE Support Groups Nationwide
- Brochures, Pamphlets, handouts, etc.
- Schools Outreach – “Suicide Shouldn’t be a Secret”
- Corporate Talks and Wellness Days
- Advocacy projects such as Life Esidimeni, Health Market Inquiry, PMBs, etc.

SADAG MENTAL HEALTH SERVICES



MENTAL HEALTH

Your general state of mind and wellbeing. Something that should be looked after and as important as physical health.

MENTAL ILLNESS

Something that disrupts your mental state. It's a whole body illness that affects the way you think, behave, act and feel.



www.sadag.org

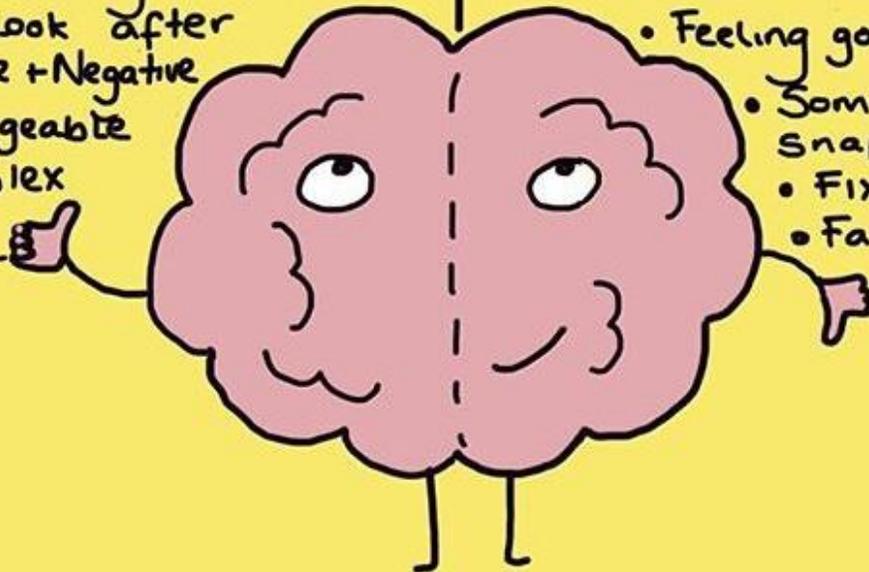
MENTAL HEALTH

IS...

- Important
- Something everyone has
- Intrinsically linked to (+ probably inseparable from) physical health
- On a continuum
- Worth making time for
- Part of being human
- Something we need to look after
- Positive + Negative
- Changeable
- Complex
- Real

ISN'T...

- A sign of weakness
- Shameful
- All in your mind
- Always something negative
- Something you decide to have
- Something to think about only when it feels broken
- An interchangeable term with mental illness
- Feeling good all the time
- Something you can snap out of
- Fixed
- Fake news



EXAMPLES OF POSITIVE AND NEGATIVE LANGUAGE



- A person who has schizophrenia', not a 'schizophrenic' or 'schizo'
- 'A person who has experienced psychosis' not 'a psycho'
- 'People with mental health conditions', 'people with lived experience', or 'service users' not 'the mentally ill', 'lunatics' or 'mad people'
- Someone who 'has a diagnosis of', 'is currently experiencing' or 'is being treated for' not 'a person suffering from', 'sufferer', 'victim' or 'the afflicted'
- Mental health 'conditions', not 'problems', 'illness', or 'disorders'
- 'Died by suicide', not 'committed suicide' (it's not a crime)
- 'Discharged from hospital', not 'released' (it's not prison)



SUICIDE LANGUAGE GUIDE



DO SAY	DON'T SAY	WHY?
"died by suicide" "took their own life"	"successful suicide" "unsuccessful suicide"	Because it suggests suicide is a desired outcome. No one wins if someone dies by suicide.
"took their own life" "died by suicide"	"committed suicide" "commit suicide"	Because it associates suicide with crime
"increasing rates" "higher rates"	"suicide epidemic"	Because it sensationalises suicide
"suicide attempt" "non-fatal attempt"	"failed suicide" "suicide bid"	It means that someone hasn't died, they are still alive and there is an opportunity to get them help. So not dying by suicide is not a fail
refrain from using the term suicide out of context	"political suicide" "suicide mission"	Because it is an inaccurate use of the term 'suicide'

Suicide Crisis Helpline: 0800 567 567

Mental Health in South Africa



- **1 in 3 South Africans** will or do have a mental illness at some point in their lifetime
- **Only 1 in 10 people** with a mental illness have access to mental healthcare and support
- **9 out of 10** people with a mental illness DO NOT have access to Mental Health
- **Less than 5 %** of the health budget is spent on mental health in the country
- Majority of that budget allocated to in-patient psychiatric hospital care

What teens have told us

- ***“My parents don’t understand me”***
- “Adults treat us like babies”
- ***“Adults don’t take our problems seriously”***
- “I told my parents about the bullying at school and they told me to be strong”
- ***“My parents think that all of my problems is cause I spend too much time on my phone”***

What teens have told us

- ***“My mom doesn’t have time for me – she is always working”***
- “My mother and father are always fighting – its never a good time to talk about my problems”
- ***“My problems would kill my mom, I cant tell her it would make her too sad”***
- “My father just lost his job he has enough problems to worry about”

Get over it – there will be plenty of other fish in the sea!

This is just your first break up – it was just puppy love!

You are still so young – what kind of problems could you possibly have!?

Study harder!

Stop hanging around those friends and concentrate at school then you won't have these issues!

It's from all the TV shows and youtube you watching that makes you depressed!



**I just want to go
to sleep and
never wake up**

**I don't want to be here
anymore. Everyone
would be better off if I
was dead.**

**I just want all
the pain to go
away.**

What teens say indirectly

**Whats the point
to anything
anymore**

**I cant
do life!!**

**I don't want to
cause my family
any more pain**

What teens say indirectly

- “I am feeling scared”
- “I feel like I have no one to talk to”
- “I just feel a lot of different things at once”
- “I am feeling very sad and it doesn’t want to go away”
- “My body, my mind and my heart is very tired”
- “Being a teenager is really hard”
- “I don’t know what to do or how to fix it”

What Teens don't say, speaks volumes

- Drastic change in eating habits – eating too much, lost their appetite
- Drastic change in their sleeping habit
- Withdrawing from family & friends
- Isolating themselves & always wanting to be alone/by themselves
- Drop in performance
- Loss of interest in things they enjoy

MENTAL HEALTH ON A SPECTRUM

HEALTHY

Normal mood fluctuations
Performing well
In control mentally
Physically well
Few sleep difficulties
Physically and socially active
Not use substances to cope
No or limited gambling

RESPONDING/ REACTING

Irritable/Impatient
Nervous
Sadness/Overwhelmed
Forgetfulness
Trouble sleeping
Intrusive thoughts
Low energy
Muscle tensions/headaches
Decreased activity/Socialising
Regular but controlled substance
use/gambling

INJURED/ STRUGGLING

Negative attitude
Anxiety
Poor performance
Poor concentration
Restless disturbed sleep
Recurrent images/nightmares
Increased aches and pains
Increased fatigue
Avoidance
Withdrawal
Increased substance
use/gambling is hard to control

CRISIS

Angry outbursts/aggression
Excessive anxiety/panic attacks
Suicide ideation
Can't perform duties, control
behaviour, or concentrate
Can't fall asleep or stay asleep
Sleeping too much or too little
Constant fatigue
Not going out
Substance/gambling addiction
Other addictions

DEPRESSION

What is Depression?

- ▶ It is more than just sadness
- ▶ It is a Mood Disorder and it is treatable
- ▶ Depression changes the way you feel and think
- ▶ Without treatment, symptoms can last for weeks, months or even years.
- ▶ Depression is a common illness (more than 300 million people worldwide are affected)
- ▶ At its worst Depression can lead to Suicide
- ▶ Depression affects women more than men (WHO stats) BUT men are 4 times more likely to die by Suicide



What Causes Depression?

Combination of issues:

- Relationships
- Family history and genetics
- Certain medications
- Drug or alcohol abuse
- Stressful events
- School or Exam pressure
- Trauma
- Loss or Grief
- Financial issues
- Family Problems (divorce, separation, abuse)



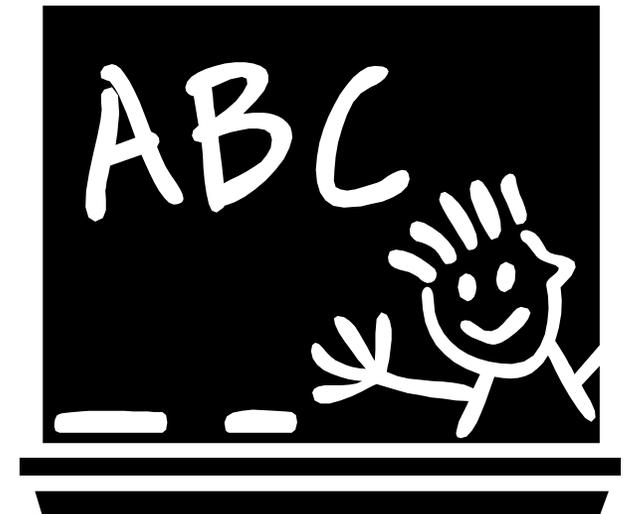
Signs of Depression

- ▶ **EMOTIONS** – sadness, anxiety, guilt, **anger**, mood swings, helplessness, **hopelessness**, overwhelmed, irritability
- ▶ **THOUGHTS** – negative self talk, battling to concentrate, struggling to make decisions, confusion, feelings of “What’s the point” or “I want it all to end”, thoughts of suicide or death
- ▶ **PHYSICAL** – chronic fatigue, lack of energy, sleeping too much/too little, weight gain or loss, **loss of motivation**, unexplained aches and pains, headaches, digestive problems, etc.
- ▶ **BEHAVIOUR** – crying, **quick temper**, **withdrawal from others**, changes in personal appearance, moving very slowly, agitated or unable to settle, **snapping/fighting** with people around you

IF SYMPTOMS PERSIST FOR LONGER THAN 2-4 WEEKS, THEN IT IS TIME TO SEEK PROFESSIONAL HELP

Depression in Children

- Apathy – don't care about anything
- Not caring about school or friends
- Behaviour problems – acting out, bullying
- Eating disorders – overeating, not eating
- Physical complaints – stomach, nausea, headaches
- Not wanting to go to school
- Weepiness and irritability
- Aggressive or moody
- Not wanting to go to school
- Difficulty sleeping or staying asleep
- Insecure, clingy, needy (excessive)



Depression in Adolescents

- Depression is more common in adolescents than in younger children
- Irritability, weepiness
- Increased sleep, tired all the time
- Drastic changes in eating habits
- Drop in school and social performance
- Behaviour disorders
- Risk taking behaviour – drugs/alcohol
- Decreased attention to personal appearance
- Withdrawal from family and friends – wanting to be alone all the time



ANXIETY

What is Anxiety?

- ▶ Characterized by feelings of worry and fear (constant fear)
- ▶ Natural response of the body to stress (BAD vs GOOD anxiety)
 - ▶ Triggers/Sources will indicate if its GOOD or BAD
- ▶ Enduring stress for long periods of time can lead to anxiety, depression
- ▶ Anxiety can affect one's daily activities
- ▶ Constant stress/anxiety can increase fatigue to the point that decision-making is impaired and individuals cannot properly take care of themselves

Symptoms of Anxiety

- ▶ Feeling frightened and scared
- ▶ Racing heart
- ▶ Chest pain
- ▶ Dizziness, feeling light-headed
- ▶ Nausea
- ▶ Difficulty breathing
- ▶ Tingling and numbness in fingers, face and toes
- ▶ Hot flushes and cold sweats
- ▶ Feeling disoriented, lack of concentration
- ▶ Fear of losing control, or doing something embarrassing
- ▶ Fear of dying

Coping Strategies

- Take a “time out” – slow down
- Take yourself out of the situation if possible
- Recall a time you handled a similar situation well
- Focus – on something concrete
- Count backwards from 20
- Remind yourself that attacks always end – *ALWAYS*
- Remind yourself that panic attacks aren't dangerous
- Stretch
- Get mad – don't let panic win!
- Breathe!!!



Strategies to Reduce Anxiety & Stress

- Massage
- Meditation
- Muscle relaxation
- Deep breathing
- Physical activity
- Play games
- Positive self-talk
- Read interesting literature
- Realize your own limitations
- Share your stress – family, friends, support group, counsellors, social worker, church, helplines
- Make a “to-do list” and eliminate “waste-timers”
- Time alone
- Visualization
- Keeping a journal
- Yoga and Relaxation Techniques
- Walking



Follow these Steps



Ask



Listen



Connect

Mental Health Check-In

- Rate from 1 – 10
- Ask yourself “How am I feeling right now?”
- Have I eaten? When last did I walk around or stretch? Have I gone outside today?
- Body check – physical check in (tense, headache, stiff, heart rate, breathing, etc.)
- Take a deep breath
- What is taking up most of my headspace right now?





Mindful Minute

Close your eyes & take 1 minute

SEE

Acknowledge **FIVE** things you see around you. It could be a pen, a spot on the ceiling, anything in your surroundings.

FEEL

Acknowledge **FIVE** things you see around you. It could be a pen, a spot on the ceiling, anything in your surroundings.

HEAR

Acknowledge **THREE** things you hear. This could be any external sound. If you can hear your belly rumbling that counts! Focus on things you can hear outside of your body.

SMELL

Acknowledge **TWO** things you can smell. Maybe you are in your office and smell pencil, or maybe you are in your bedroom and smell a pillow. If you need to take a brief walk to find a scent you could smell soap in your bathroom, or nature outside.

TASTE

Acknowledge **ONE** thing you can taste. What does the inside of your mouth taste like—gum, coffee, or the sandwich from lunch?

Check Your Battery

How are you currently feeling?

Feeling great!

Keep meeting your needs and practicing self-care.

Feeling okay.

How can you make your day a tiny bit better?

Struggling.

Practice triage. What area of your life is suffering the most right now? Focus on that one area today.



Feeling good!

How can you maintain the levels you're currently at?

Meh.

How can you love on your -self today? Be extra kind to yourself.

I'm empty.

Pinpoint what's draining you and try to create a boundary & then do one thing that fills you up.

BlessingManifesting

INVEST IN YOUR Mental Health

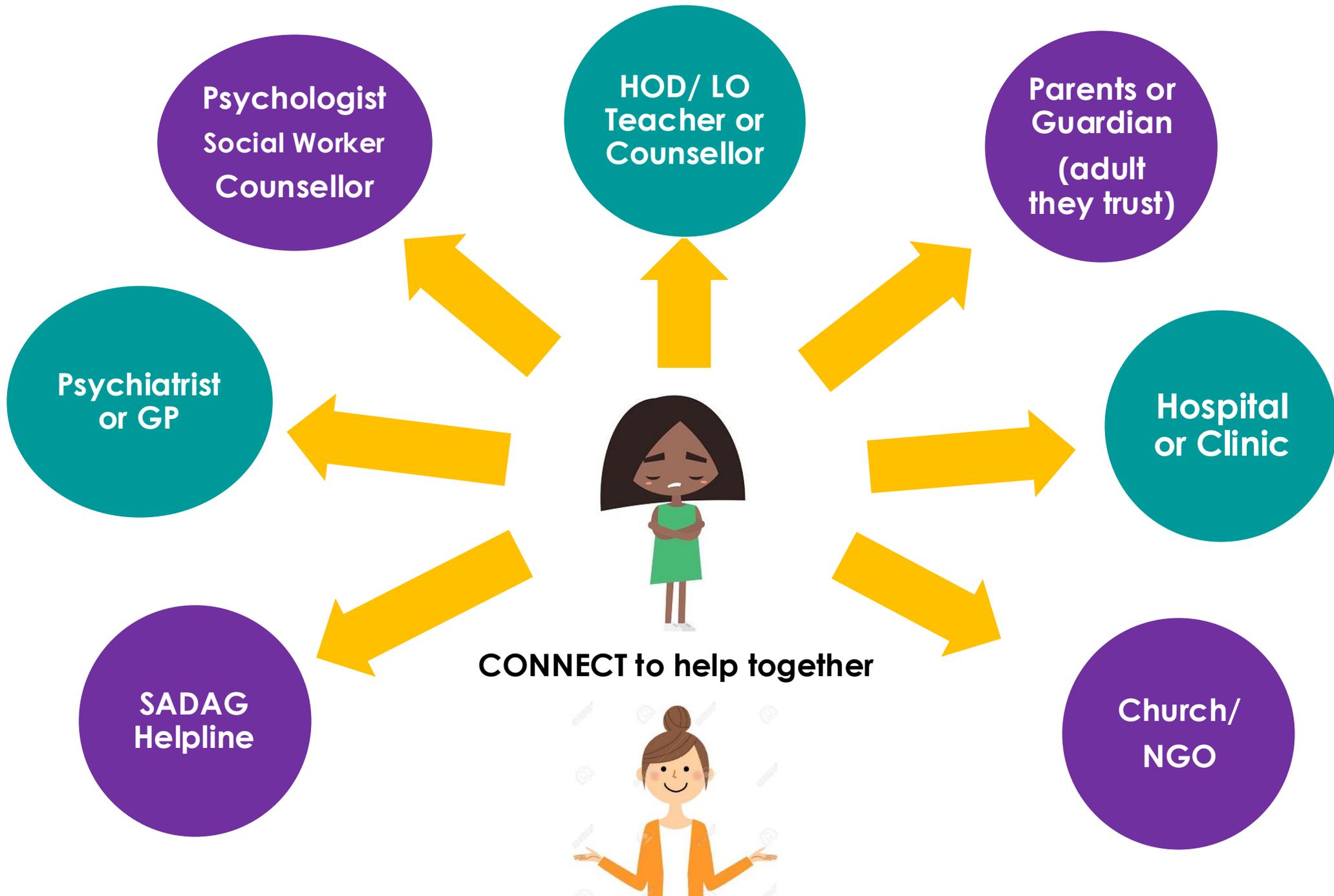
Invest 60 seconds of your day to look after your Mental Health

1. Get outside
2. Do some Activity
3. Mindfulness exercise
4. Connect
5. Reflect – gratitude
6. Helping others
7. Talk
8. Breathe
9. Fill up your energy
10. Planning/organise

Tips for Parents and Teachers



- Know the signs & symptoms
- Spot the signs and act on them
- Trust your gut feeling
- Don't wait
- Don't be afraid of asking directly
- Don't keep it a secret – you cannot fix the problem by yourself
- Don't brush off the problem – reflect on how they are feeling



What **NOT** to say...

- ▶ **“Think positively”**
- ▶ **“Pull yourself towards yourself and get on with it”**
- ▶ **“Just get over it”**
- ▶ **“Don’t think about it”**
- ▶ **“Snap out of it”**
- ▶ **“It’s all in your mind”**
- ▶ **“Just do some exercise and you will feel better”**
- ▶ **“But you everything to be grateful for. There are other people will far less”**

What to say...

- ▶ “I am here to support you if you need it”
- ▶ “I might not know exactly how you are feeling, but I am here for you”
- ▶ “I am sure this feels scary and overwhelming. I am here and I want to help you”
- ▶ “You’re not alone, help me understand what you’re feeling”
- ▶ “Together lets see what support we can get”
- ▶ “I am here to listen. What can I do to help?”

Mental Health Referral Pathways



CONSIDERATIONS:

- One size does not fit all
- Getting a learner help and support is very important
- Culture and religious beliefs play a huge role in mental health care
- No wrong or right way
- What works best for the learner at the time when they need help
- Focus on building support system of care
- Remember – the child is center of care

How SADAG can help in an Emergency

- ▶ Free telephone counselling – 24/7
- ▶ Crisis intervention and treatment action plan
- ▶ Assisting and guiding
- ▶ Referrals to resources (doctors, hospitals, Support Groups, counselling, rehabs, shelter, NGOs, etc.)
- ▶ Case management and support
- ▶ Information and resources – posters, brochures, handouts, etc.

TALKING ABOUT

MENTAL HEALTH

COULD & SHOULD BE

AS NORMAL AS TALKING

ABOUT **PHYSICAL HEALTH**

LET'S START A **#REALCONVO**

0800 567 567

WWW.SADAG.ORG



**YOU ARE ENOUGH
TODAY**

**YOU ARE ENOUGH
EVERYDAY**

THERE IS ALWAYS HELP
THERE IS HOPE

SUICIDE CRISIS HELPLINE 0800 567 567

SMS 31393

WWW.SADAG.ORG



SADAG

HELPLINES

SUICIDE CRISIS HELPLINE

0800 567 567

24
hours

DR REDDY'S
MENTAL HEALTH HELPLINE

0800 21 22 23

8am-
8pm

CIPLA
MENTAL HEALTH HELPLINE

0800 456 789

24
hours

CIPLA
WHATSAPP CHAT LINE

076 882 2775

9am-
4pm

DEPT SOCIAL DEVELOPMENT
SUBSTANCE ABUSE HELPLINE

0800 12 13 14

24
hours

ADCOCK INGRAM
DEPRESSION & ANXIETY HELPLINE

0800 70 80 90

8am-
8pm



WWW.SADAG.ORG SMS - 31393

24
hours



SADAG SOCIAL MEDIA HANDLES



**THERE IS
ALWAYS HELP
THERE IS
ALWAYS HOPE**

0800 567 567

