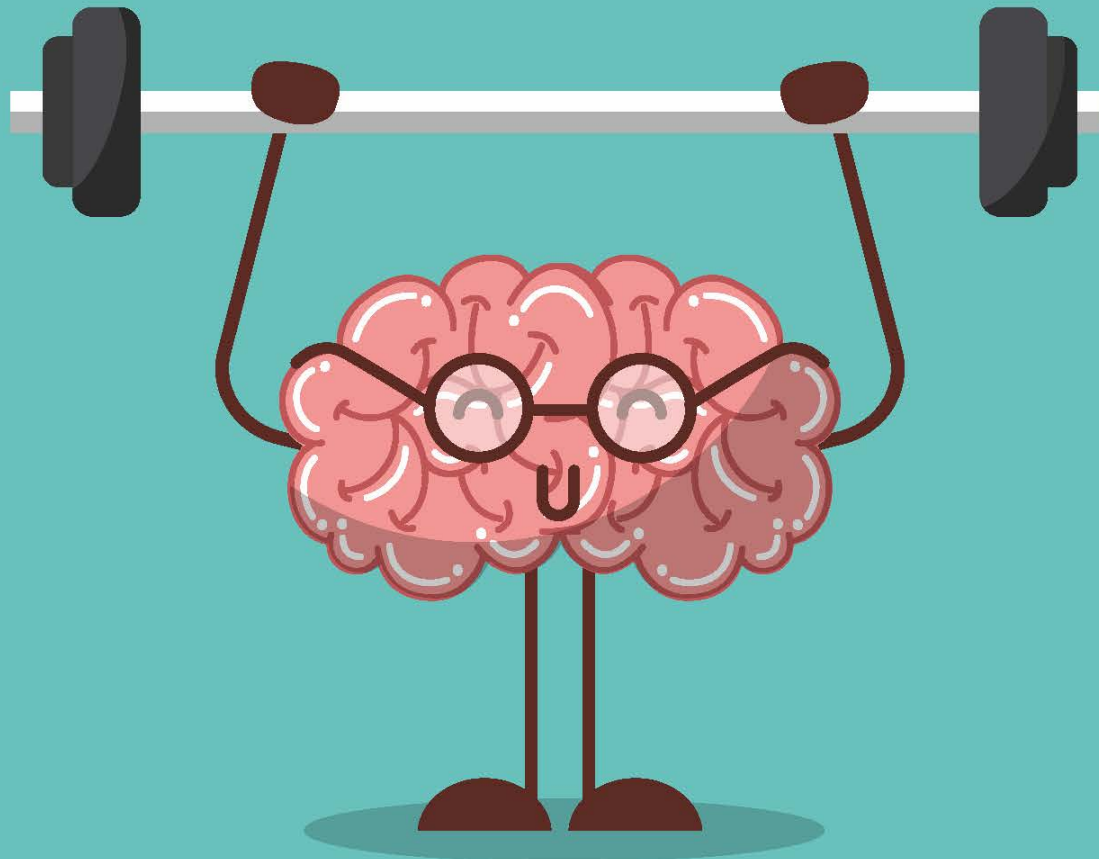


Mental Health First Aid at the FSU Jena

Dr. Hendrik Huthoff

Head of Education at the Jena School for Microbial Communication



Disclaimer

I am not a mental health care professional

I do not provide any sort of treatment advice

Mental Health First Aiders at the FSU



Hendrik Huthoff



Anne Dünger



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<https://www.uni-jena.de/en/mhfa>



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Zentralinstitut für
Seelische Gesundheit
Landesstiftung
des öffentlichen Rechts

What is mental health first aid?

Mental Health First Aid (MHFA) is a training course which teaches people how to identify, understand and help someone who may be experiencing a mental health issue.

MHFA won't teach you to be a therapist, but it will teach you to listen, reassure and respond, even in a crisis – and even potentially stop a crisis from happening.

You'll learn to recognise warning signs of mental ill health, and develop the skills and confidence to approach and support someone while keeping yourself safe.

You'll also learn how to empower someone to access the support they might need for recovery or successful management of symptoms. This could include self-help books or websites, accessing therapy services through their GP, their school or place of work, online self-referral, support groups, and more.

What's more, you'll gain an understanding of how to support positive wellbeing and tackle stigma in the world around you

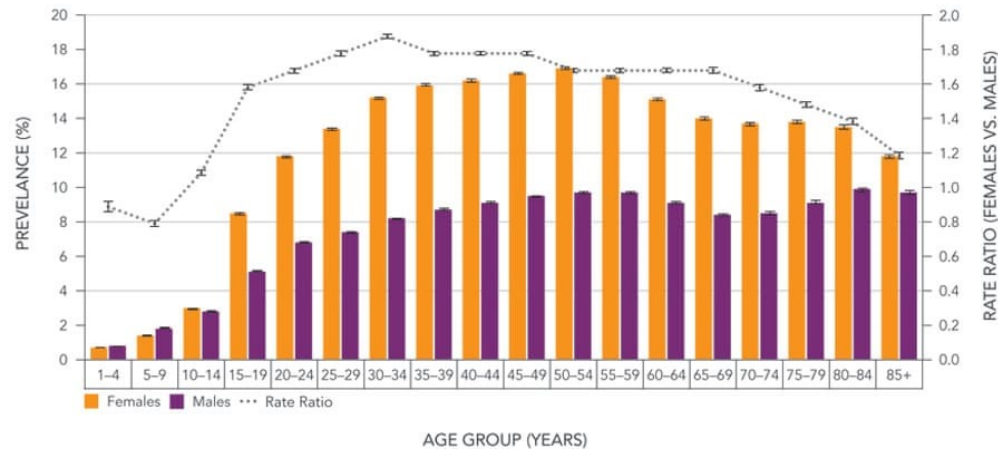
**One in four people suffer mental disorders
in their lifetime**



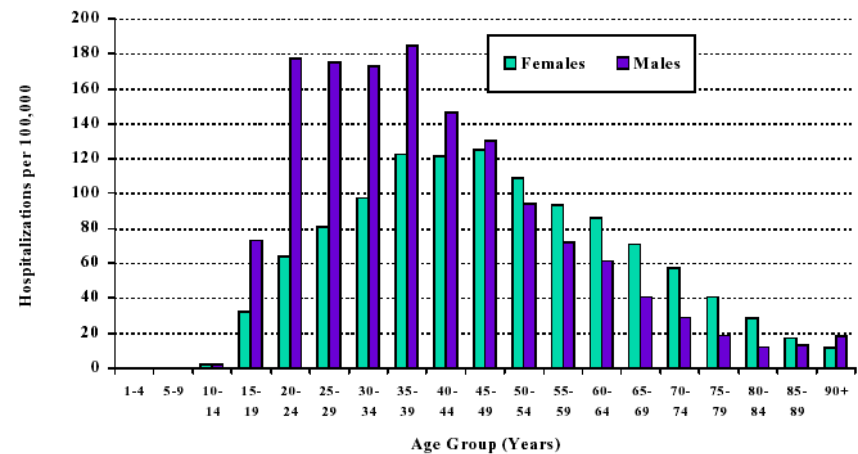
**World Health
Organization**

Age dependency of common mental disorders

anxiety



schizophrenia



* Using most responsible diagnosis only

Source: Centre for Chronic Disease Prevention and Control, Health Canada using data from Hospital Morbidity File, Canadian Institute for Health Information

* 74% of mental health conditions have onset before 24 years of age

* On average it takes 8 years after onset to seek treatment

Mental Health of doctoral researchers – a hot topic

nature
cell biology

Editorial | Published: 28 March 2018

A PhD state of mind

Nature Cell Biology 20, 363 (2018) | Download Citation ↓

Recent surveys have linked academia and PhD studies to a risk of experiencing mental health issues. Despite the lack of extensive data, the negative impact of the stresses of lab life should not be underestimated, and PhD students and research trainees should be supported.



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Work organization and mental health problems in PhD students



Katia Levecque^{a,b,*}, Frederik Anseel^{a,b,c}, Alain De Beuckelaer^{d,e,a}, Johan Van der Heyden^{f,g}, Lydia Gisle^f

You are not alone

Twenty years on, Dave Reay speaks out about the depression that almost sunk his PhD, and the lifelines that saved him.



SUPPORT

Why mental health matters

Nature talks to five researchers about the stresses of a hyper-competitive environment, and what needs to change.



MENTAL HEALTH

Out of the darkness

Depression and related disorders can be devastating, but there are ways to fight them.

Cries for help

An outpouring on Twitter highlights the acute pressures on young scientists.

Poor mental health is an issue for many of our readers, as underscored by the response to a tweet sent by @NatureNews last week, which highlighted rates of depression and anxiety reported by postgraduate students (see go.nature.com/2gtixq). The reaction blew us away: more than 1,900 retweets and around 230 replies.

"This is not one dimensional problem. Financial burden, hostile academia, red tape, tough job market, no proper career guidance. Take your pick," read one. "I'd love to see some of the comments under this thread published," wrote one responder. "There needs to be real conversation about this, not just observation." We



euacde COUNCIL FOR DOCTORAL EDUCATION

STYLE GUIDE FOR AUTHORS

The Doctoral Debate

Evidence for a mental health crisis in graduate education

Teresa M Evans¹, Lindsay Bira², Jazmin Beltran Gastelum³, L Todd Weiss⁴ & Nathan L Vanderford^{4,5}

With mental illness a growing concern within graduate education, data from a new survey should prompt both academia and policy makers to consider intervention strategies.

HowStuffWorks / Health / Mental Health / Mental Disorders

Getting a Ph.D. Can Harm Your Mental Health

BY SHELLEY DANZY SEP 14, 2017



30% of doctoral researchers are at risk of developing a common psychiatric disorder

Table 4

Prevalence of common mental health problems in PhD students compared to three comparison groups, Flanders, 2013: %, risk ratio adjusted for age and gender (RR), 95% confidence interval (CI).

Source	PhD students	Comparison group 1: Highly educated general population			Comparison group 2: Highly educated employees			Comparison group 3: Higher education students		
	SJR	HIS			HIS			HIS		
Year of survey	2013	2013			2013			2001, 2004, 2008, 2013		
	N = 3659	N = 769 ^a			N = 592			N = 333 ^b		
	%	%	RR	CI	%	RR	CI	%	RR	CI
Felt under constant strain	40.81	27.47	1.38	(1.18–1.62)	26.69	1.43	(1.20–1.70)	30.21	1.16	(0.96–1.42)
Unhappy and depressed	30.30	13.60	2.09	(1.65–2.65)	12.31	2.22	(1.70–2.91)	18.48	1.42	(1.09–1.84)
Lost sleep over worry	28.33	18.13	1.62	(1.32–2.01)	17.16	1.70	(1.35–2.15)	18.13	1.35	(1.03–1.76)
Could not overcome difficulties	26.11	12.00	2.36	(1.82–3.06)	10.57	2.71	(2.01–3.64)	12.69	1.85	(1.35–2.54)
Not enjoying day-to-day activities	25.41	13.07	2.21	(1.74–2.82)	12.31	2.39	(1.82–3.13)	10.88	1.68	(1.19–2.38)
Lost confidence in self	24.35	7.95	3.48	(2.52–4.79)	7.56	3.54	(2.47–5.06)	10.24	2.04	(1.43–2.91)
Not playing a useful role	22.46	9.20	2.33	(1.73–3.15)	8.15	2.54	(1.80–3.59)	10.88	1.78	(1.26–2.53)
Could not concentrate	21.74	10.67	1.94	(1.48–2.54)	9.01	2.14	(1.56–2.92)	10.57	1.53	(1.07–2.20)
Not feeling happy, all things considered	21.15	11.11	2.15	(1.64–2.81)	9.43	2.41	(1.77–3.29)	11.45	1.49	(1.05–2.10)
Felt worthless	16.17	5.30	3.40	(2.29–5.07)	4.30	4.11	(2.57–6.59)	4.22	3.16	(1.82–5.48)
Could not make decisions	14.95	6.00	2.74	(1.87–4.02)	5.03	2.97	(1.91–4.62)	6.04	2.16	(1.35–3.48)
Could not face problems	13.36	4.27	3.69	(2.39–5.68)	3.81	3.82	(2.34–6.24)	4.24	2.42	(1.38–4.25)
GHQ2+	51.11	26.80	1.90	(1.62–2.22)	24.96	2.02	(1.69–2.41)	30.61	1.53	(1.27–1.84)
GHQ3+	39.53	18.40	2.26	(1.85–2.75)	16.12	2.56	(2.03–3.22)	22.21	1.63	(1.29–2.06)
GHQ4+	31.84	14.00	2.43	(1.92–3.08)	11.79	2.84	(2.15–3.74)	14.55	1.85	(1.38–2.49)

^a Including 14 PhDs.

^b Including 1 PhD student.

General Health Questionnaire 12

able to concentrate

feel useful

capable making decisions

enjoy normal activities

able to face problems

feeling happy

lost sleep to worry

constantly under strain

unable to overcome difficulties

unhappy and depressed

lost confidence in self

think yourself worthless

0 = same as usual 1 = less (Q1-6)/more (Q7-12) than usual 1 = much less (Q1-6)/more (Q7-12) than usual
4 point total indicates risk of having or developing a psychiatric disorder

Topics covered during MHFA training

1. How to deliver MHFA
2. Depression
3. Anxiety Disorders
4. Psychoses
5. Addictions
6. Eating disorders
7. Suicide and Self-harm

Support

- Your University? MHFA at FSU Jena
- Psychosocial counselling at Studierendenwerk
- Ambulant Psychotherapy at Hospital
- Your personal doctor
- Check for online counselling services in your native language
- (Friends & family)



**Coming in early 2022:
MHFA training for all staff at the FSU**



My personal observations with MHFA @ FSU

- Currently 2/3 requests for consultation per week
- Majority MSc: 100% of consultations in November 2021
- Majority international students/employees
- Effects of pandemic, both national and international
- Academic-related anxieties and problems
- Not everybody needs treatment!!

Key take home messages:

- It's OK not to be OK – Mental illness can happen to anybody
- Help is out there – Don't feel ashamed to ask for it
- Therapy works – and making use of it doesn't mean you are crazy!

Anybody can become a mental health first aider!