Strategies for Providing Crisis Intervention and the Importance of Confidentiality in the Workplace

Who am I?

- Jaymie McCammon, MSW LCSW

- 2004 graduate of Millikin University, Decatur, IL

- 2007 graduate of University of Illinois Champaign – Urbana School of Social Work

- Experienced working in residential treatment center; community mental health care; public health; group private practice; private practice mental health

- 17 years working in the field of mental health

- Extensive training in EMDR, a therapy approach to treating trauma; experience working with clients who have complex trauma

- Experience treating Obsessive Compulsive Disorder

- Currently work with teenagers and adults

Objectives

- Identify symptoms of trauma and mental health struggles
- Recognize the importance of confidentiality
- Become aware of barriers to seeking support
- Report strategies to help employees who are struggling

Why does this topic matter?

- My client's experiences and it's affects on their treatment
- My own experience as an employee who navigated a stressful event at work
- Statistically, many people go 11 years between onset and treatment for mental illness
  - Multifactorial barriers to accessing care
  - National Institute of Health https://pmc.ncbi.nlm.nih.gov/articles/PMC1361004/

Why should we be talking about mental health and work?

- We spend approximately 90,000 hours at work over the course of our lifetime.

- An employee's mental health affects their work, and their work affects their mental health.

- Poor mental health can affect physical health, leading to more time off work.

- Burnout and stress affecting productivity and profit for employer.

- Potential for more turnover if employees burnout or feel as though no one cares

Why Should We Talk about Mental Health and Work?

Cleveland Clinic: 2021 survey indicating 76% of employees have one symptom of a mental health condition

Of that 76%, 84% of respondents indicated at least one thing about the workplace was negatively impacting their mental health

2024 American Psychological Association Work in America Survey: 92% of respondents validate the importance of working for an organization that offers support for employee mental health; values their psychological well-being

Work Conditions that Negatively Impact Mental Health

- No paid sick leave

- Working night shifts or rotating shifts

- Unpredictable pay and job insecurity

- Inflexibility of the work schedule increases anxiety

- Excessive workload leading to burnout or exhaustion

- Poor pay causing a person to stress about money and work, leading to depression and anxiety symptoms

- Stigma related to mental health struggles

- Gossip, hostility among colleagues, retaliation, politics

What Helps?

- Seek understanding – don't assume
- Use empathy – how would you want to be treated if you were struggling?
- Create safety for the person who is struggling.
- Foster a supportive environment (accommodations, informational posters)
- Protection from harm and psychological safety
- Connection and community
- Work-life harmony
- Mattering at work
- Opportunities for growth

"People do well when they can."
- Dr. Ross Greene

Notice the behavior, seek understanding

Types and Rates of Mental Health Struggles

- Anxiety Disorders: 19.5% annual adult prevalence
  - Symptomology of anxiety disorders

Types and Rates of Mental Health Struggles

- Major Depressive episode: 8.3% annual adult prevalence
  - symptomology of depressive disorders

Types and Rates of Mental Health Struggles

- Post-Traumatic Stress Disorder: 3.6% annual adult prevalence
  - Symptomology of PTSD

Types and Rates of Mental Health Struggles

- Bipolar Disorder: 2.8% annual adult prevalence
 - Symptomology of Bipolar Disorder

Types and Rates of Mental Health Struggles

- Obsessive-Compulsive Disorder: 1.2% annual adult prevalence
    - Symptomology of OCD.

Types and Rates of Mental Health Struggles

- Substance Abuse
- Comorbid with other mental health diagnoses
- Chronic disease where people compulsively seek and use drugs or alcohol despite harmful consequences
- Relapse is common because of changes to the brain stemming from drug or alcohol use
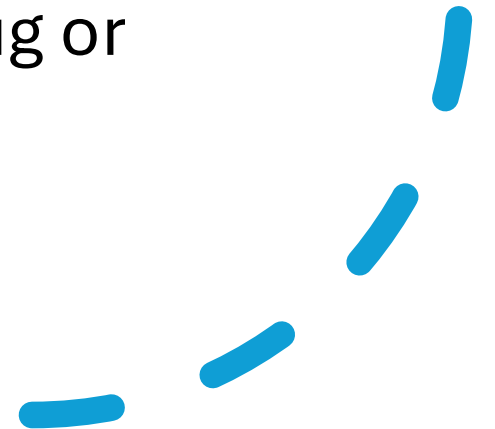
Barriers to Seeking Help

- Stigma and shame
- Privacy concerns – lack of confidentiality
- Fear that speaking up may affect job or promotion opportunities
- Fear of retaliation or punishment
- Culture of the organization
- Adverse consequences (as in the case of substance use)
- Vulnerability
- HR staff's or supervisor's response – are you available?
- Other's experience when speaking up

Confidentiality

- Helps to feel confident in asking for help
- Knowing information will be kept private ensures a sense of safety when things feel unsafe
- Legal and ethical considerations for confidentiality
- Knowing information will be confidential ensures trust with administrators and the organization – employee retainment
- How have you navigated your own personal challenges? Who supported you, and what helped?

Resources and Protections for Employees

Family Medical Leave Act (FMLA)*

Short term disability options*

Employee Assistance Program (EAP)*

Community Mental Health Resources and Private Mental Health practices

*contact HR to learn more about rules and regulations on how these protections are used

National Resources

Nami.org National Alliance on Mental Illness

988 Suicide and Crisis Hotline

SAMHSA.gov Substance Abuse and Mental Health Services Administration

Nimh.nih.gov National Institute of Mental Health

Local chapters of Alcoholics Anonymous, Narcotics Anonymous, Al-Anon, or Celebrate Recovery groups

How to Support Employees Who Come to You for Help

- Effective listening is important:
  - Be aware of your own assumptions
  - Be mindful of how your values affect your ability to understand the situation and related to the person
  - Notice countertransference, or your own emotional reaction to the person who is seeking help

Other listening considerations

- Excessive use of silence may communicate disinterest

- Limit distractions

- What is your facial expressions saying? Are you making eye contact?

- Notice what your body language communicates.

Other listening considerations

Use open ended questions instead of Yes/No questions.

Summary paraphrases:

- Summarizes in your own words, when a person pauses
- "Sounds like…"; "I'm hearing you say…"; "So, in other words…"

Reflecting emotion:

- Notice the other persons verbal and nonverbal cues
- Trying to accurately label the other person's emotions
- Builds empathy and rapport
- Encourages the other to express emotion and describe their experience
- Defuses anger, fosters compliance, and avoids arguments or confrontation

Avoid these types of statements

Statements that invalidate the person's experience
- "It could have been worse."
- "Others have it so much worse."

Assuming you know how others feel
- "I know how you feel."

Confrontation
- "Well, you should know better than to…"

Religious platitudes
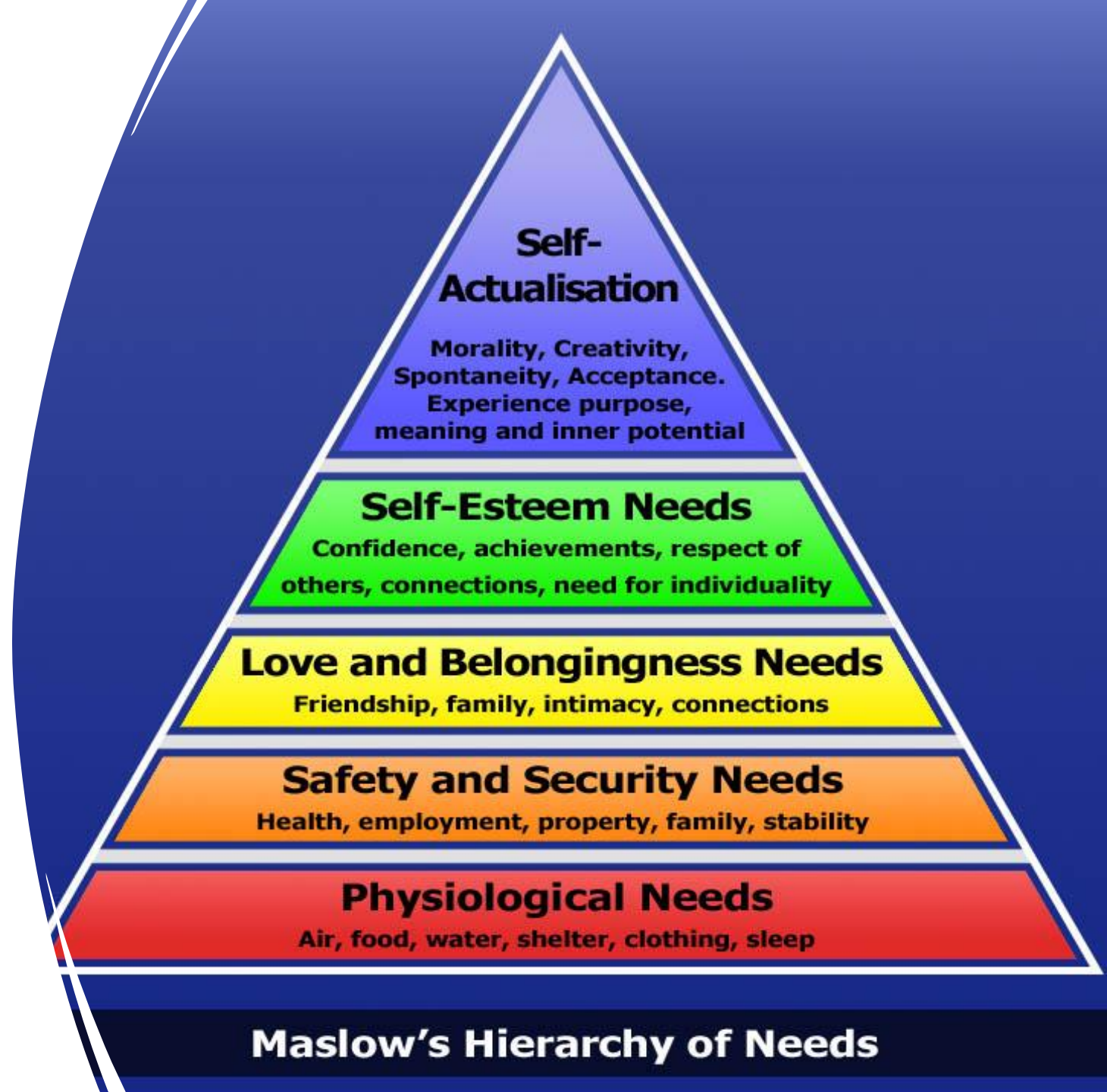- "God won't give you more than you can handle."

Attempting to relate by sharing your own struggles
- "Let me tell you about the time…"

Crisis Intervention Considerations

- Maslow's Hierarchy of Needs – what is it and why is it an important consideration?

- Start with meeting basic physical needs first

- Helps a person feel safe and cared for

Self-Actualisation
Morality, Creativity, Spontaneity, Acceptance. Experience purpose, meaning and inner potential

Self-Esteem Needs
Confidence, achievements, respect of others, connections, need for individuality

Love and Belongingness Needs
Friendship, family, intimacy, connections

Safety and Security Needs
Health, employment, property, family, stability

Physiological Needs
Air, food, water, shelter, clothing, sleep

Maslow's Hierarchy of Needs

SAFER-Revised
Model of Crisis
Intervention
(Everly, 1995)

Stabilize

Acknowledge the crisis

Facilitate understanding

Encourage effective coping

Recovery or referral

Stabilize

Introduce	Introduce yourself
Establish	Establish rapport with the person
Describe	Describe limitations in your role or your ability to help
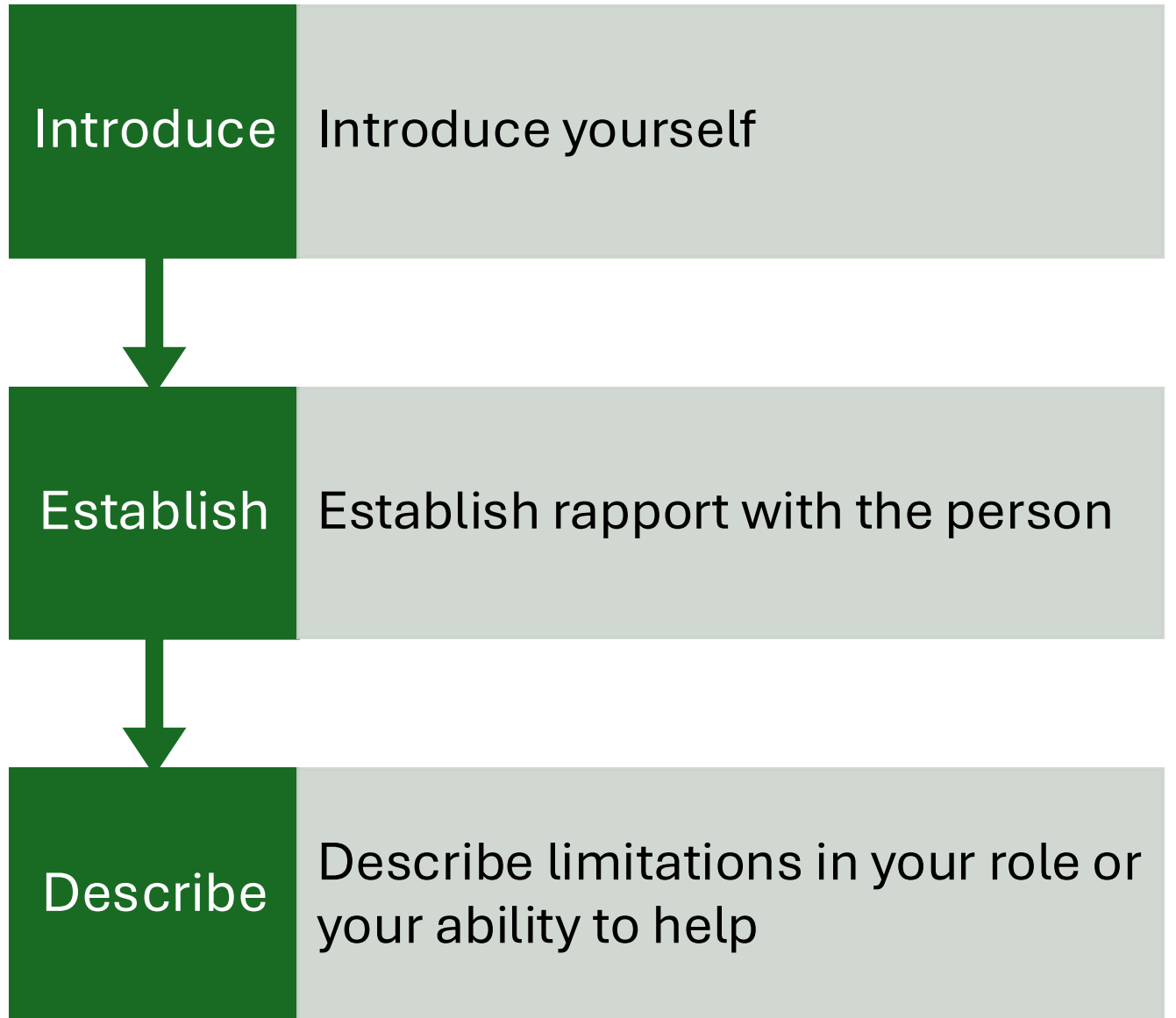
Acknowledge

Let the person tell their story.

Start to think about the ways you help as the person describes their situation.

Facilitation of Understanding

Using empathy and reflective listening strategies

Normalize emotional responses

Offer reassurances as appropriate

Encourage Effective Coping

Meet basics needs
- Maslow's Hierarchy of Needs

Liaison/Advocacy
- Local services and agencies; EAP; counseling services

Cathartic Ventilation
- Let the person tell their story or express emotions, if helpful and doesn't cause further psychological pain

Social support
- Who does the person identify as supportive in their life?

Encourage Effective Coping

Information
- Connect the person with important and helpful information
- Gives sense of efficacy and agency

Problem-solving
- Help person problem solve if appropriate

Conflict resolution
- Consider whether psychological distress is stemming from interpersonal conflict, and what interventions can help resolve the conflict.

Spiritual
- Is the person's spiritual beliefs a support? Can they be connected to their faith community?

Encourage Effective Coping

- Financial
  - Consider the effects of financial stress on the person's psychological struggles. Are there community or workplace resources to help?
- Normalization
  - Their feelings are valid. Their response to the stressor makes sense.
- Hope
  - A lifeline to get a person through the difficulty
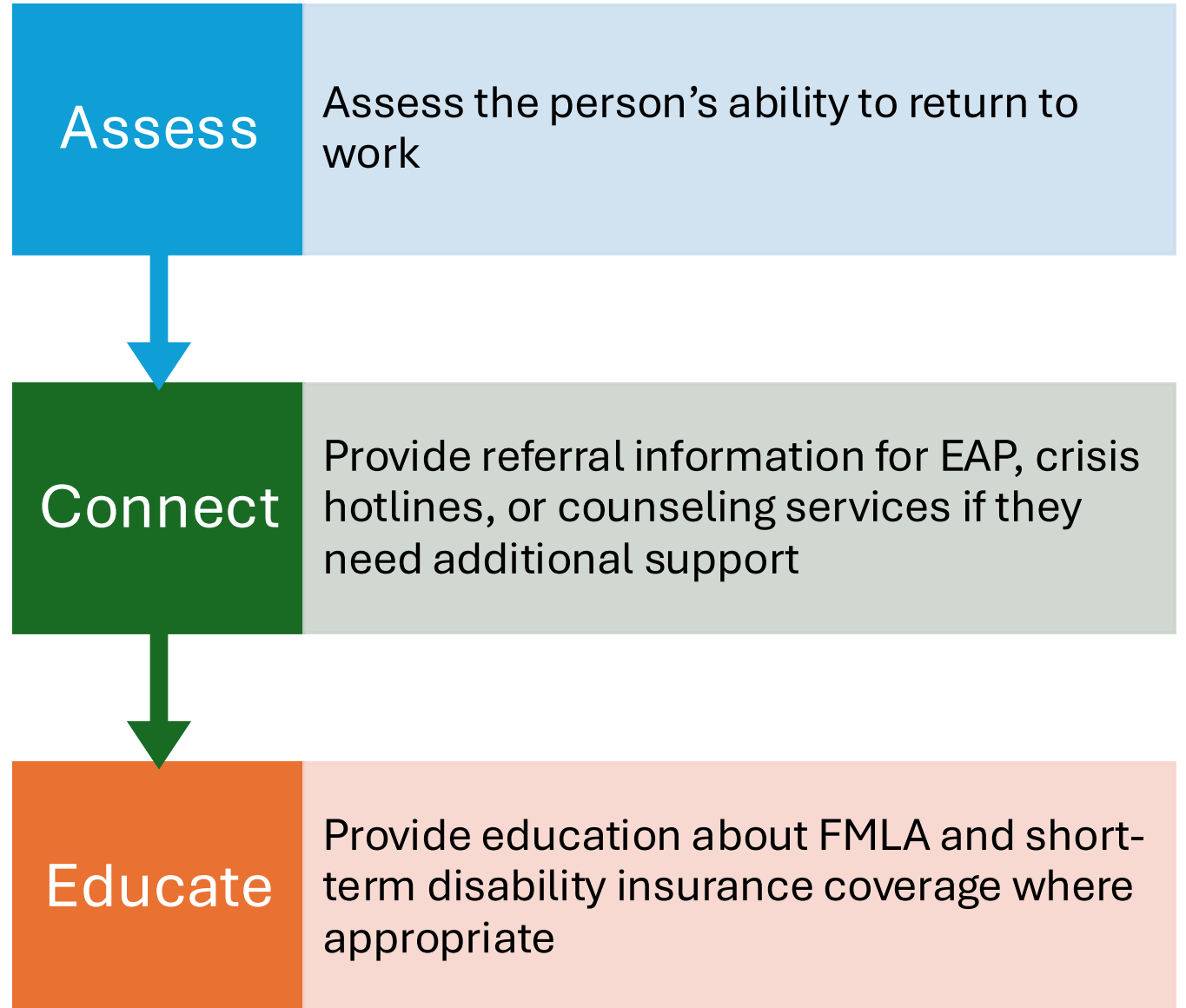
Example of Crisis Intervention

SAFE-R Model Example

Special Consideration: Suicide

Ask	Ask: "Are you thinking about suicide?"
Be	Be there, listening without judgement; reduces suicidal thoughts
Safety	Help keep them safe: Do they have a plan; reduce access to lethal means
Connect	Help them connect: call or text 988; reach out to supportive friends or family
Follow up	Follow up: ongoing supportive contact can prevent suicidal actions

Links to information

- https://health.clevelandclinic.org/work-policies-condition-and-mental-health
- https://www.webmd.com/mental-health/what-to-know-about-work-and-mental-health
- https://pmc.ncbi.nlm.nih.gov/articles/PMC1361004/
- Samhsa.gov
- Nami.org
- Nimh.nih.gov
- Everly, G. S., Flannery, R. B., & Mitchell, J. (2000). Critical incident stress management: A review of the literature. *Aggression and Violent Behavior, 5, 23-40.*