

# MENTAL HEALTH AWARENESS MONTH

May 2021 — Week One



## May is Mental Health Awareness Month

Everyone has “mental health.” It is how we think, feel, and act in our daily life. It is how we look at ourselves, our lives, and the people we know and care about. Mental health is part of our overall health, at every stage of life, and it can change throughout our life.

It is especially important now, as we have experienced a year of social distancing and living through a global pandemic, that we care for our mental health. We want to help our children and youth learn that caring for their mental health is a vital part of living a healthy, fulfilling life, and that experiencing mental health challenges during their lifetime is not uncommon (1 in 5 children or youth have mental health challenges) and that it is not just ok, but it is important, to ask for help when they do. Help can come from loved ones, friends, and other trusted adults such as primary care providers, teachers, coaches, school counselors, and mental health providers, to name a few.

It is important for each of us to offer acceptance, support and respect for others who have mental health challenges in their lives and communities. That’s part of what strengthens our communities. And it’s what will help us as we emerge from the pandemic.



## May 1–5, 2021 is Vermont Abenaki Recognition and Heritage Week

“I have felt that my life was so small that it could fit inside an acorn and that I was as tenuous as the white breath of a rabbit in winter. That is when the stories told long ago in my faraway home came back to mind to restore my spirit.” This quote from the Abenaki story Sacred Houses by Tsonakwa and Yolaiklia speaks of the protective factors Abenaki find in their cultural traditions. As this week is Vermont Abenaki Recognition and Heritage Week, we wanted to acknowledge the importance of heritage and culture in building resilience for indigenous youth.



## School Mental Health Update

This past year filled with uncertainty and limited social engagement has taken a large toll on students’ mental health. It has equally impacted school staff as they have made heroic efforts to completely change their operations while constantly trying to reach their students. Skilled mental health supports are available in schools through our local designated mental health agencies. Accessing these supports improves readiness to learn, can identify family needs, and provide access to increased services. The Department of Mental Health and Agency of Education are coordinating efforts to strengthen social emotional learning, support inclusionary practices, and increase mental health resources to meet the needs of everyone in the school buildings as we all work to recover from this pandemic.

### Resources:

- [Vermont Family Network’s Puppets In Education](#) - created a [school program focused on anxiety](#) (now available virtually).
- [Vermont Afterschool](#) - [has quality summer opportunities](#) available to youth in every Vermont community
- [DMH School MH Services](#)
- [Culture of Staff Wellness](#)
- [Effective-School-Comm-Partnerships-to-support-SMH-Final.pdf \(schoolmentalhealth.org\)](#)
- [Additional resources from DMH](#)

## May is Maternal Mental Health Awareness Month

Expecting & caring for a baby can be an exciting, life-changing time. It can also be really challenging. Perinatal Mood & Anxiety Disorders (PMADs) can occur any time during pregnancy or the first year after childbirth, making it the leading complication of childbearing. Both common & treatable, as many as 1 in 5 women are affected by these conditions. There is evidence that fathers, partners, foster/adoptive parents, & other caregivers are similarly at risk from the stress of welcoming a baby.

It’s not just postpartum & it’s not just depression; there is a wide spectrum of emotional distress that can present with PMADs. Symptoms include feeling overwhelmed, irritable, weepy, empty, loss of interest, exhausted but unable to sleep, having scary or unwanted thoughts, &/or just not feeling like yourself. Left untreated, PMADs can have a profound & lasting impact on entire families. Universal screening for PMADs is a critical step in identifying individuals in need of treatment.

In 2018, VT was awarded a five-year cooperative agreement by HRSA to address perinatal mental health. The Screening, Treatment & Access to Mothers & Perinatal Partners (STAMPP) program was developed to improve the mental health & well-being of pregnant & postpartum women, their children & families, by developing & sustaining a coordinated system of mental health supports. For more info, please visit- Resources for Perinatal Mental Health During the Corona virus Outbreak | [Department of Mental Health \(vermont.gov\)](#).



## Recovery/Resiliency/Action-Oriented Section

Just as it was a transition for us to adjust to social distancing and health practices in the early phases of the pandemic, it will also be a transition to return to more typical activities. As we start to change our habits, this can make us uncomfortable. This is a type of positive stress that can actually promote resilience for the child going forward.

Analogies can help kids understand taking incremental steps. For youth: like the deep-sea diver returning to the surface, we may benefit from taking small steps toward re-entry after social isolation. For a younger child: think about how you approach going into cold water, do you just jump in (and feel the shock), or do you dip a toe first, then go in up to your ankles, until eventually you adjust and swim. Explore what those steps might look like in reconnecting socially and getting re-engaged in activities. It will help children and youth to know that you believe in them and they have support to step out of their comfort zone. Taking small risks is healthy and okay now.

### Activities

- For summer programming opportunities, check out Vermont Afterschool’s Summer Matters link: <https://www.vermontafterschool.org/summermatters/>
- Activities for Families (NFFCMH): <https://www.ffcmh.org/cmha-activites-for-youth>
- Summit: the annual event that brings more than 200 LGBTQ and allied youth <http://www.outrightvt.org/no-summit-not-summit/>

### Resources

- USA Today: [Scaffold Parenting in a post-pandemic world](#)
- For young children: [What Comes Next: Back to Child Care Following Shelter-in-Place](#)
- The Atlantic: [How to get our kids back on track](#)
- Self Magazine: [What Is Resilience, and Can It Help Us Bounce Back From This?](#)



## Workforce Appreciation Spotlight

The Vermont Department of Mental Health (DMH) wants to extend our gratitude to Vermont’s child, youth, and family mental health providers. During this unprecedented time, you have provided vital in-person supports in the community and congregare care settings. Your service and dedication are immeasurable; DMH and Vermonters thank you!









## Suicide is a Public Health Crisis

In Vermont, a person dies by suicide on average every three days, resulting in significant ripple effects on families, schools, communities, first responders, health care communities and systems overall.

We can reduce suicide rates if we work together to promote connection and community based supports, and reduce stigma that can keep people from talking about their mental health and asking for help when needed. Suicidal ideation is treatable, and suicide deaths are generally preventable.

## Suicide and the COVID-19 Pandemic

Vermont has struggled with high suicide rates that have been increasing over the past decade. Over the past ten years the US suicide death rate has increased by 23%, while the Vermont rate has increased by 43%.

The COVID-19 pandemic and resulting quarantine has increased common suicidal risk factors for our population, including increases in social isolation, financial and social stressors, grief and loss, and relationship issues. Vermonters have shown incredible resiliency throughout the pandemic resulting in stable suicide rates thus far. However, we still have a long road to recovery, and the mental health impact of this pandemic is expected to peak later than the physical one. Therefore, it is imperative Vermonters continue to support one another and maintain a focus on bolstering awareness and supports for those at risk.



## At Risk Groups

Suicide is the 8th leading cause of death in Vermont, and the 2nd cause for young people 15-34 years old, across all ages.

Risk factors can vary by age group, culture, sex, and other characteristics. For example:

- Stress resulting from prejudice and discrimination (family rejection, bullying, violence) is a known risk factor for suicide attempts among [lesbian, gay, bisexual, and transgender \(LGBT\)](#) youth.
- The historical trauma suffered by [American Indians and Alaska Natives](#) (resettlement, destruction of cultures and economies) contributes to the high suicide rate in this population.
- For men in the middle years, that challenge traditional male roles, such as unemployment and divorce, have been identified as important risk factors.
- In 2019, 13.4% of youth reported they had made a plan about how they would attempt suicide. Those concerns were higher among females and among lesbian, gay or transgender youth. About 1 in 6 female youth reported they made a suicide plan and about 1 in 12 attempted suicide at least once. In the same year, almost half of transgender youth made a suicide plan and about 1 in 3 attempted suicide at least once (YRBS 2019).



[Risk and Protective Factors](#) | [Suicide Prevention Resource Center \(sprc.org\)](#)

## What Can You Do to Help?

### What Can You Do:

- Check on your neighbors and your loved ones. If you know or suspect someone who has struggled with mental health in the past, reach out. Let them know you care and offer connection.
- Choose kindness. You never know what someone else is going through. A simple act of acknowledging another person who seems distressed can save a life. [Small Talk Saves Lives](#) | [Samaritans Campaigns](#)
- Understand that asking someone if they are feeling suicidal does not plant the thought in their head. Instead, it shows them you are open to having a direct conversation and enables clear communication
- Listen non-judgmentally — offer support and validation rather than advice or attempting to minimize their experience
- Connect them to supportive help through professional, peer or natural supports.



For more information on how you can #BeThe1To help save a life visit — [#BeThe1To Seize the Awkward](#) | [Talk With A Friend About Mental Health](#)

## Means Matters

### Reduce access to lethal means.

In 2020, of the 75 people who died by firearm in Vermont, 67 of those were death by suicide. Firearms have continuously been the most prevalent means for suicide with over 50% of suicide deaths resulting from this method.

Although firearms are the most prevalent means for suicide deaths, they are not the most common method for attempts.

Intentional poisoning is the most common suicide attempt method, accounting for 57% of intentional self-harm hospital visits.

Safe storage of firearms and medications during times of increased suicide risk is one of the most important factors in saving a life.

During a suicidal or mental health crisis, you have [options for temporarily storing potentially dangerous things](#), like firearms or medicines.

For more information visit: [Suicide Prevention](#) | [Vermont Department of Health \(healthvermont.gov\)](#)

## Zero Suicide

The Department of Mental Health supports approaches that will strengthen our existing suicide prevention efforts in Vermont like the Zero Suicide Program. Zero Suicide is a 7-pronged approach to building resilient communities and improving suicide safe care across our state, for young and older Vermonters.

### Want to get involved? Join the Vermont Suicide Prevention Coalition:

The Vermont Suicide Prevention Coalition consists of over 70 representatives from public health, education, state agencies, suicide prevention advocacy groups, youth leadership, mental health services and survivors throughout the state.

Our mission is to create communities of hope throughout Vermont in which schools, agencies and people of all ages are given the knowledge, attitudes, skills and resources to respond effectively to suicidal behavior.

### Our strategies include:

- Promoting the message that suicide across the lifespan is preventable
- Equipping health care and community based providers with the knowledge and skills to respond effectively to anyone in distress
- Increasing public awareness of the importance of addressing mental health issues and the characteristics of mental health wellness
- Establishing a broad-based suicide prevention, intervention and postvention program throughout Vermont
- Sponsoring a public information campaign to reduce the stigma associated with being a consumer of mental health, substance abuse and suicide prevention services and to increase connectedness and the promotion of mental health wellness
- Promoting positive youth development and life-long mental health
- Developing a five-year strategic plan to ensure long-term and sustainable approaches to prevention and early intervention



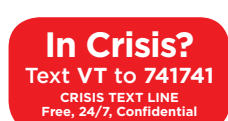
For more information, please visit [VTSP Coalition](#) | [VTSPC](#) or contact [info@healthandlearning.org](mailto:info@healthandlearning.org)

OR

Attend the Suicide Prevention Symposium (Save the Date below)

## Resources

If you or someone you know is having thoughts of suicide, help is available. Call 1-800-273 TALK to reach the suicide prevention Lifeline 24/7. Text the letters "VT" to 741741 for free, confidential text support. Or contact 211 to find a local counselor near you.



<https://vermontcarepartners.org/youth-and-adult-mental-health-first-aid/>

## Activities

- [Vermont Suicide Prevention Symposium — Bringing Prevention into Focus](#)



Vermont Suicide Prevention Symposium • August 4, 2021  
**CONNECTING COMMUNITIES**  
TO SUPPORT & SUSTAIN SUICIDE PREVENTION

- National Alliance of Mental Illness — Vermont (<https://namivt.org/>)
- The American Foundation of Suicide Prevention (<https://afsp.org/chapter/vermont>).
- Vermont Psychiatric Survivors

## Workforce Appreciation Spotlight

The Department of Mental Health wants to acknowledge the extensive commitment of the Designated Agencies who have signed on to implement Zero Suicide in their organizations. Zero Suicide is a set of evidence-based principles and practices for preventing suicide within health and mental health systems. Seven agencies in Vermont have joined the Zero Suicide initiative. In response to the COVID-19 pandemic, six of those Designated Agencies partnered with their local primary care offices to develop safe pathways to care for individuals needing support for suicidality. These efforts included bolstering awareness and identification of suicidal risk factors, developing protocols for triage and referral, and training in Counseling on Access to Lethal Means (CALM) an evidence-based practice for communicating with individuals at risk of suicide about how to effectively reduce their access to fatal means during times of suicidal crisis. This project benefited from the participation of 17 Primary Care Practices across Vermont and was supported by leadership from the Blueprint for Health.

