Pathways in Crisis Services Project

Center for the Application of Substance Abuse Technologies (CASAT)

CAS 255: Substance Abuse Prevention



Curriculum Infusion Introduction



Topics







- Crisis Response System
- Suicide Prevention
- Trauma
- Cultural Considerations
- Compassion Fatigue

Disclaimer

This presentation may include readings, media, and discussion around topics such as suicide, trauma, and crisis intervention and may be difficult.

Please listen to yourself and reach out if you are having difficulty with these topics.





Crisis Response System Impact

- Suicide
- Family pain
- Psychiatric Boarding
- X The wrong care in the wrong place
- Law enforcement working as "mobile crisis"



Nevada Crisis Response System



HIGH-TECH CRISIS CALL CENTERS



24/7 MOBILE CRISIS



CRISIS STABILIZATION PROGRAMS



ESSENTIAL PRINCIPLES & PRACTICES

Acuity and Severity

Inpatient Psychiatric Stabilization (Psychiatric Advanced Directives)

Residential/Sub-acute
Crisis Stabilization (Peerled, Respite, Crisis
Stabilization Centers)

23 hour Outpatient Crisis Stabilization (CCBHC, Crisis Stabilization Centers, Observation Units, Crisis Triage Centers), Outpatient Walk-in Crisis Services, Ambulatory Withdrawal Management

24/7 Mobile Crisis (CCBHC, Rural Clinics, DCFS Children's Mobile Crisis, MOST, Civil Protective Custody, Mobile Recovery Outreach Teams, Crisis Intervention Training)

Crisis Counseling and Supportive Service, 24/7 Crisis Call Line

Community Based Crisis Screening, Prevention, Early Intervention and Support (ASSIST, SAFE-TALK, Mental Health First Aid, Psychological First Aid, NAMI Warm-Line, Zero Suicide Screening, Collaborative Assessment and Management of Suicidality, Signs of Suicide, 2-1-1 Information and Referral)

SUICIDE PREVENTION STARTS WITH YOU

Friends and family exhibiting unusual behaviors may be showing signs of a struggle with their mental health.

Help prevent suicide by recognizing warning signs.





Common Risk Factors for Premature Death

HOMICIDE MVAs & Suicide Accidental Poisoning Legal System Involvements Emergency Room Visits

Prevention & Intervention OpportunitiesIndicated & Clinical

Mental Health & Chemical Dependency Treatment Contacts
Emerging Behavioral Problems &
Mental Health Disturbances

School Difficulties

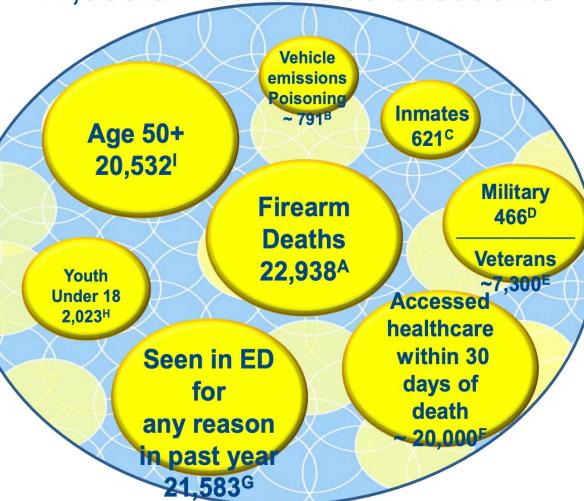
Alcohol and Substance Misuse
Disruptive Family Factors
Disadvantaged Economic & Social Factors

Selective & Indicated

Universal & Selective

Identifying Areas of High Need and/or Opportunity



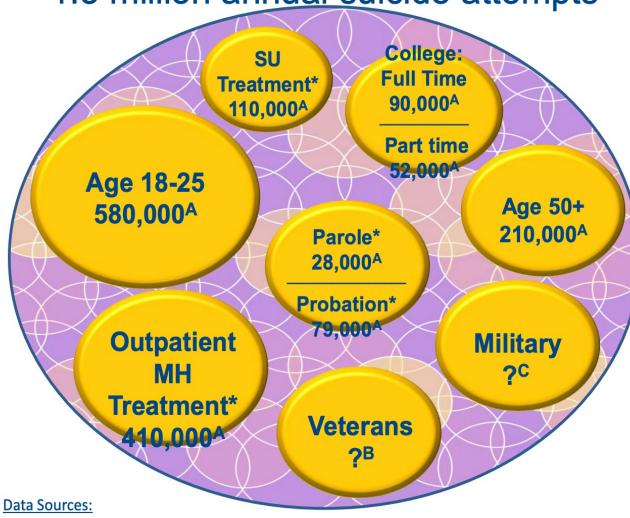


Data Sources:

- A. CDC WISQARS 2016
- **B. CDC WONDER 2014**
- C. Bureau of Justice Statistics 2014
- D. DoDSER CY 2016 Q1-4 Reports

- E. Department of Veterans Affairs 2016
- F. Luoma et al, 2002; Ahmedani et al 2014
- G. Ahmedani, 2018. Personal communication
- H. CDC WISQARS 2016
- I. CDC WISQARS 2016

1.3 million annual suicide attempts



- A. National Survey on Drug Use and Health
- B. In progress
- C. In progress
- * Last 12 months



Zero Suicide Framework

LEAD system-wide culture change committed to reducing suicides TRAIN a competent, confident, and caring workforce patients with suicide risk via comprehensive screenings **IDENTIFY ENGAGE** all individuals at-risk of suicide in a suicide care management plan suicidal thoughts and behaviors using evidence-based treatments TREAT TRANSITION individuals through care with warm hand-offs and supportive contacts **IMPROVE** policies and procedures through a continuous quality improvement plan

Discussion

What are ways to create a culture that supports mental health?

Do you believe suicide is preventable?



Collaborators in Suicide Prevention





Adverse Childhood Experiences (ACE's)

Early death

Burden of
disease, distress,
criminalization,
and
stigmatization
Coping/adoption of
health risk behavior

Allostatic load and disrupted neurological development

Complex trauma/ACE

Race/social conditions/local context

Generational embodiment/historical trauma

Source: Centers for Disease Control and Prevention. (2016). Violence prevention: *The ACE pyramid* (adapted by RYSE Youth Center). https://www.cdc.gov/violenceprevention/acestudy/about.html

ACEs can have lasting effects on...



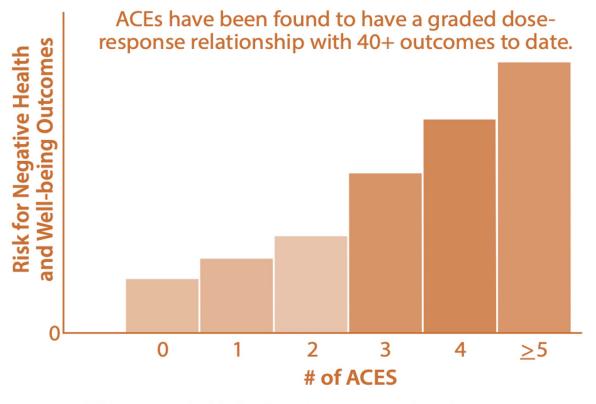
Health (obesity, diabetes, depression, suicide attempts, STDs, heart disease, cancer, stroke, COPD, broken bones)



Behaviors (smoking, alcoholism, drug use)



Life Potential (graduation rates, academic achievement, lost time from work)



*This pattern holds for the 40+ outcomes, but the exact risk values vary depending on the outcome.

○ ○ Preventing ACEs

Strategy	Approach
Strengthen economic supports to families	 Strengthening household financial security Family-friendly work policies
Promote social norms that protect against violence and adversity	 Public education campaigns Legislative approaches to reduce corporal punishment Bystander approaches Men and boys as allies in prevention
Ensure a strong start for children	 Early childhood home visitation High-quality child care Preschool enrichment with family engagement
Teach skills	 Social-emotional learning Safe dating and healthy relationship skill programs Parenting skills and family relationship approaches
Connect youth to caring adults and activities	Mentoring programsAfter-school programs
Intervene to lessen immediate and long-term harms	 Enhanced primary care Victim-centered services Treatment to lessen the harms of ACEs Treatment to prevent problem behavior and future involvement in violence Family-centered treatment for substance use disorders

Intervene Lessen **Immediate** and Long-Term Harms





Primary Care Settings



Victim Centered Services



Evidence Based Treatment



Family Therapy





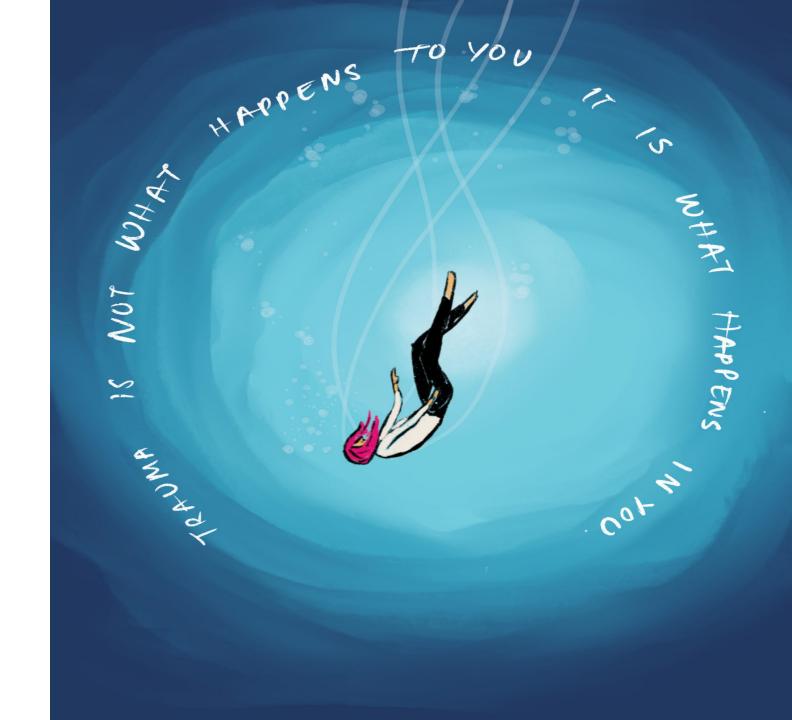
Substance Use Disorder Treatment

ACEs



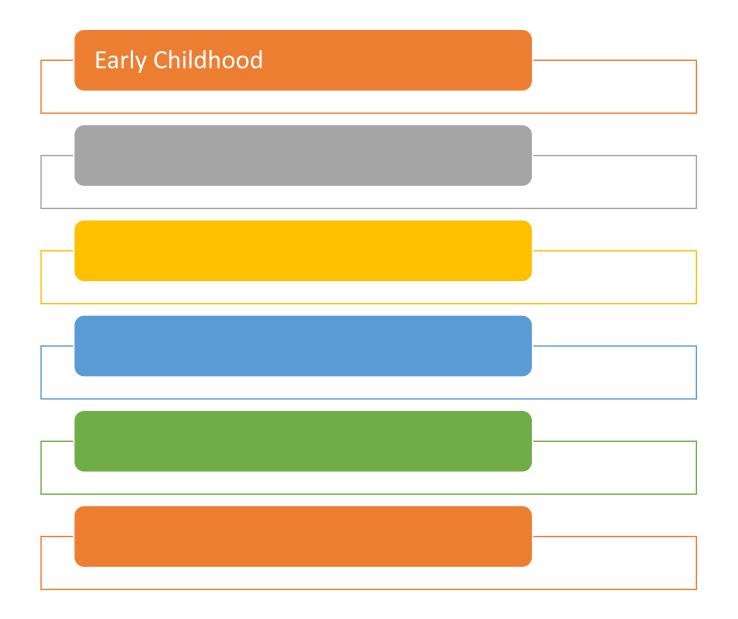


Trauma





Grief Reactions Across the Lifespan









Cultural Sensitivity

Cultural Sensitivity is defined as: a) Being aware that cultural differences and similarities between people exist without assigning them a value — positive or negative, better or worse, right or wrong.





Cultural Sensitivity Tips

- 1. Ask non-judgmentally about the individual's beliefs around and understanding of their illness.
- 2. Don't push individuals to accept a psychiatric diagnosis—build trust over time and use terms that are acceptable to them, including: "stress," "nerves," "sadness," "worries," etc.
- 3. Consider describing mental illness as a biological disorder rather than a psychological problem or weakness.

Bedford, M, 2019



Cultural Sensitivity Tips

- 4. Ask if the patient observes any religious or traditional customs or practices that you should know about. Also ask about religion and spirituality in general, which can be a helpful source of support for those with mental health problems.
- 5. If possible, request a referral for the individual to a mental health provider that speaks their language, and ideally is from the same cultural background.
- 6. If a language concordant provider is not possible, be sure a <u>professional interpreter</u> is used when there is a language barrier. Don't rely on family members to interpret. Bedford, 2019



Cultural Humility

- Lifelong commitment to self-evaluation & self-critique
- Fix power imbalances
- Develop partnerships with people & groups who advocate for others



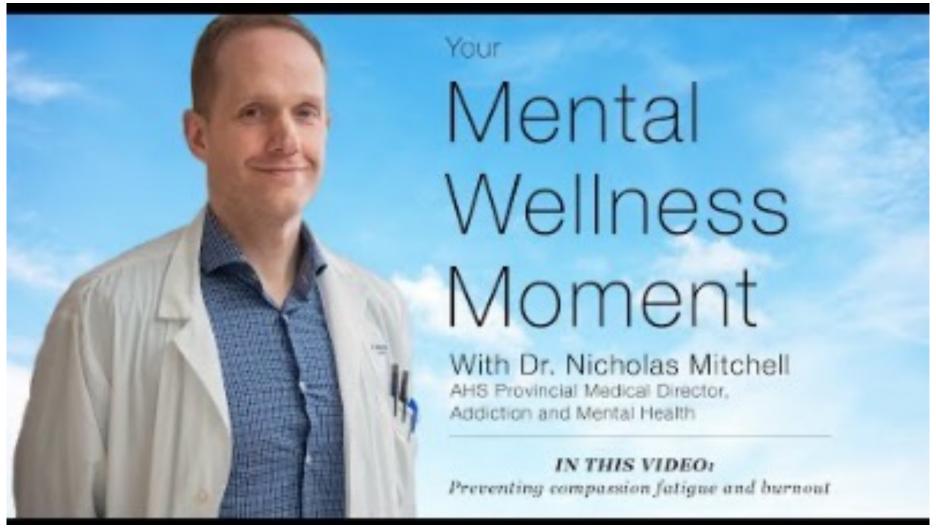




healing respect
healing respect
view
grief
burden sorrowful expecty
presenteffeet
point
scalcable
unlocking
bursting
moment fully
compassionate letters
www.tagxedo.com



Preventing Compassion Fatigue and Burnout





Proposed solutions for combatting stigmatization among providers on the front lines of the opioid crisis

Training in traumainformed care and practice Social contact to cultivate belief in wellness combat feelings of helplessness and hopelessness

Education to reframe and shift perceptions about addiction and harm reduction

Increased compassion satisfaction

Inward-facing interventions to build resiliency and support mental health

The most insidious aspect of compassion fatigue is that it attacks the very core of what brings helpers into this work... empathy and compassion for others.

Figley Institute, 2012



There are Ways to Prevent Compassion Fatigue

Develop a self-care plan that includes:

- Exercise
- Nutrition
- Sleep
- Creative endeavors
- Spiritual Activities
- Social Support

Organizations should:

- Promote discussions of self-care plans
- Encourage leadership to model self-care
- Offer regular trainings specific to warning signs for compassion fatigue



Resources

Suicide Prevention:

- Zero Suicide Institute
- Zero Suicide Listserv
- NV Office for Suicide Prevention
- NV Zero Suicide Initiative
- The Lifeline and 988
- UNR LiveWell Resource Page





Resources

Community Resources:

- UNR Disabilities Resource Center
- Nevada Center for Excellence in Disabilities Directory
- CASAT on Demand Resources & Downloads
- Pacific Southwest Addiction Technology Transfer Center (PSATTC)
- The Mental Health Technology Transfer Center Network
- The Prevention Technology Transfer Center Network
- Dep. of Health & Human Services Aging and Disability Services Division
- SAMHSA's Technology Transfer Center (TTC) Programs





This publication was supported in whole or in part by the Nevada Division of Public and Behavioral Health Bureau of Behavioral Health, Prevention, and Wellness.

The opinions, findings, conclusions and recommendations expressed in this publication/program/exhibit are those of the author(s) and do not necessarily represent the official views of the State of Nevada.





