



Behavioral Red Flags

Mental Health in the Workplace

One in four adults will
experience the **symptoms**
of a mental health condition in
any given year.


One in twenty people are
living with a **chronic** mental
health condition.

57% will not seek help.



Depression alone is estimated to account for 200 million lost work days per year, at a cost of up to 40 billion dollars to employers.



A close-up photograph of a person's face, which is mostly obscured by their hands. The person's hands are pressed against their face, with fingers spread, suggesting a gesture of despair, stress, or emotional pain. The background is softly blurred, showing hints of an indoor setting with light coming from a window.

We wouldn't
hesitate to help
someone in
obvious physical
distress. Why is
mental distress
different?



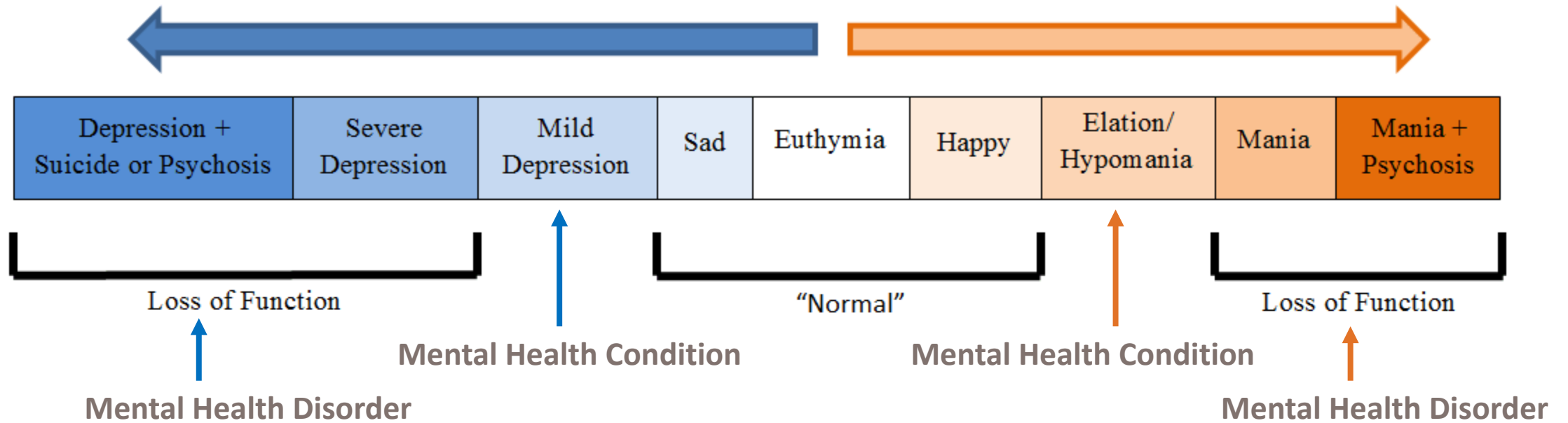
The Connection

Stigma, Shame, Fear

- Not wanting to “pry” or offend
- Fear that someone may “snap” with no warning
- The shame associated with mental health
- Feeling helpless and/or powerless
- Lack of knowledge
- Not having a plan if people do confide in you.



**Mental Health is
everyone's business.**



The Continuum of Mental Health

We Are All Here Somewhere

When Should You Be Concerned?

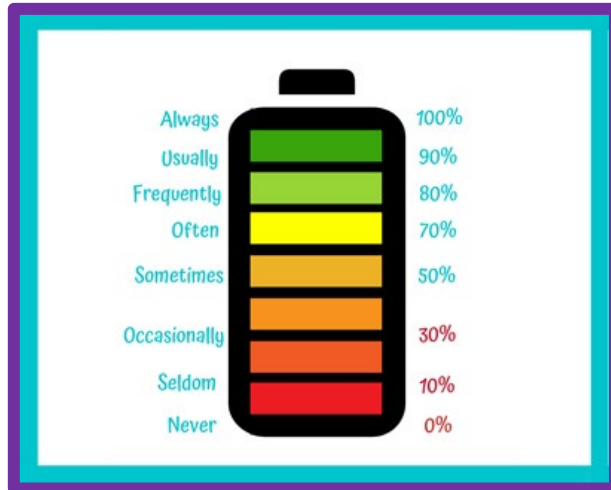
Understanding Risk

- Risk Factors vs. Warning Signs (Red Flags)
 - Risk Factors increase the probability of a certain outcome over time. *Risk factors **cannot predict short-term** outcomes.*
 - **Risk Factors** can be **Static** (family or personal history) or **Dynamic** (current, open to change and fluctuations: divorce, grief, loss of a job)
 - **Warning Signs or Red Flags** are recent changes in behavior or functioning that are cause for concern and may indicate the need for intervention.
- Risk Factors + Red Flags are a strong indication that intervention may be warranted.

Red Flags

- We are focusing on **observable behavior**. We are NOT diagnosing, making assumptions or judging.
- As managers and colleagues who interact with our co-workers on a daily basis, we are noticing **changes** across four domains:
 - Behavior and performance that are uncharacteristic of the individual
 - Physical appearance
 - Problems with emotional regulation
 - Thought patterns as evidenced by speech

FACTORS TO CONSIDER



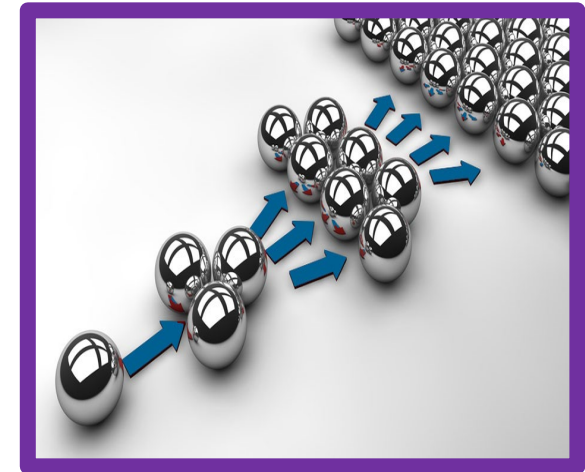
FREQUENCY

Individual exhibits these symptoms/behaviors much of the day, or many times per day.



DURATION

The situation has been consistent over time.



IMPACT

What you are observing is interfering with work performance, relationships, projects

EARLY CHANGES



- An emerging pattern of being late, cancelling, or forgetting commitments
- Missed deadlines
- Declining work quality
- Reluctance to take on new challenges
- Failure to complete tasks in a timely manner
- Not returning emails and calls



- Tired-looking
- Disheveled clothing
- Poor grooming
- Appearing more unkempt than usual for that person

Emotional Changes



- Negative affect and attitude
- Defensive reactions to criticism or suggestions
- Irritability
- Sadness
- Anxiety
- Apathy



Thought Process

- Difficulty concentrating or focusing on tasks
- Appears distracted
- Indecisiveness
- Carelessness



WORSENING SIGNS AND SYMPTOMS



- Withdrawing from colleagues; lack of participation in meetings
- Absenteeism or “presenteeism”
- Odd or erratic behavior: extreme talkativeness; very long emails with random detail
- Easily overwhelmed with change of any kind



- Declining personal hygiene
- Dressing inappropriately
- Cuts or bruises in various stages of healing
- Dramatic weight loss
- Haggard appearance

Emotional Changes



- Increasing sadness
- Expressions of hopelessness or despair
- Increasing anxiety
- Frequent expressions of anger or rage
- Appearing to be shut down



Thought Process

- Self-blame
- Grandiosity
- Mind going blank
- Confusion, disorientation
- Paranoia, suspicion
- Flight of ideas

POSSIBLE CRISIS: FROM IRRITATION TO ANGER AND AGGRESSION

Aggression and violence are not the same.

- Verbal Aggression can be a raised voice, yelling, posturing, getting in another's personal space, being confrontational, making threatening statements
- **Aggressive behaviors** are most often fear-based.
- **To De-Escalate**
 - Remain calm; focus on **LISTENING** to the person
 - Never yell back; speak in a calm voice
 - Don't say "Calm Down!"
 - Don't be condescending, or threatening
 - Don't get defensive if they are making accusations at you
 - Don't get in the person's physical space or touch them

KEY ACTIONS:

1. **Call 911 if you fear for your safety or the safety of others.**
2. Attempt to de-escalate the situation.



CRISIS: ACTIVE PSYCHOTIC STATE

- Person has lost touch with reality
- Totally withdrawn
- Extremely confused or disorganized speech
- Inability to carry out basic job functions
- Extreme suspicion
- Very limited, flat affect
- Extreme expressions of rage and sadness
- Delusions: voicing very unusual beliefs or ideas
- Hallucinations; visions or hearing voices
- Irrational actions

Psychosis is a syndrome, or a collection of symptoms, rather than a diagnosis.



CRISIS: ACTIVE PSYCHOTIC STATE

De-Escalate Until Help Arrives:

- How you **initially respond is critical**
- Emotional states are contagious! Remain calm and confident.
- Use short, simple sentences. Speak in a gentle, non-threatening tone of voice.
- **Never argue** with someone who is delusional, or attempt to tell them they are wrong.
- Focus on what is important to them by **LISTENING** to understand.

KEY ACTIONS:

1. Call 911
2. Be a **SAFE PERSON** for the individual in crisis
3. De-escalate until help arrives.



ALWAYS VALIDATE

- Validation is a communication to someone that their responses **make sense** and are **understandable** given their current situation.
- It is a refusal to treat someone as **irrational or wrong, regardless of their behavior**.
- Validation involves unconditional positive regard.
- We convey that we want to partner with them to help them.

LOSE THE "BUT"



CRISIS: Suicidal/Homicidal Ideation

- Warning Signs:
 - Expressions of hopelessness, being trapped, giving up, wanting to be dead, expressing severe emotional distress and pain
 - Asking about life insurance payout policies, especially as it relates to cause of death.
 - Making very clear verbal statements that they intend to harm themselves or someone else.
 - Person is in a state of extreme despair, high agitation and/or rage, especially in the presence of intoxication.
 - Talking, writing, or posting on social media about death, dying or getting revenge against someone.

SUICIDE

- In a workplace setting, there are a some risk factors we may be aware of that increase the danger:
 - Recent loss of a loved one
 - Divorce or separation
 - Loss of custody
 - Domestic violence, survivor or perpetrator
 - A mental illness and social isolation
 - A recent reversal of fortune
 - Recent release from a psychiatric hospitalization



CRISIS: SOMEONE IS ACTIVELY SUICIDAL

- **Call 911.** Safety is your priority.
- Check your company policy regarding calling the employee's emergency contact person to alert them of concerns.
- You can say to the employee "Given what you've told me, I have concerns about your safety. I have a responsibility to make sure you get immediate help. Your safety is the most important thing right now."
- When calling 911, give all the details that the employee has shared with you and any statements the employee reportedly made to others.
- When the emergency responders arrive, they will talk to the employee to assess further and determine next steps.
- Sometimes people deny the comments they made to you; it will be important for you to share what they told you

Having the Difficult Conversation

Ask, Join, Commit



The Connection

Having the Difficult Conversation

“It is one of the great paradoxes of the human condition – we ask some variation of the question, “How are you feeling?” over and over, which would lead one to assume that we attach some importance to it, yet we never expect or desire or provide an honest answer.”

Marc Brackett

Director, Yale University’s Center for Emotional Intelligence

True or False?

Everyone who is experiencing a mental health challenge needs to see a professional.

FALSE

A variety of professionals can help a person who is experiencing a mental health challenge.

TRUE

Advice and information are pretty much the same thing.

FALSE

You may need to adjust how you approach a person depending on your relationship to them.

TRUE



The Connection

ASK: Initiating the Conversation

- Don't wait for the “perfect moment”: in the presence of red flags, or if your instincts are telling you something is wrong, **reach out**.
- Plan to put aside enough time for this conversation, in a private place free of distractions.
- Your non-verbal communication is as significant as your words.
- If someone does disclose emotional distress, be prepared with a plan to address their particular situation.
- Be prepared that the person may not open up to you immediately; in this case, let them know you are always available if and when they want to talk.

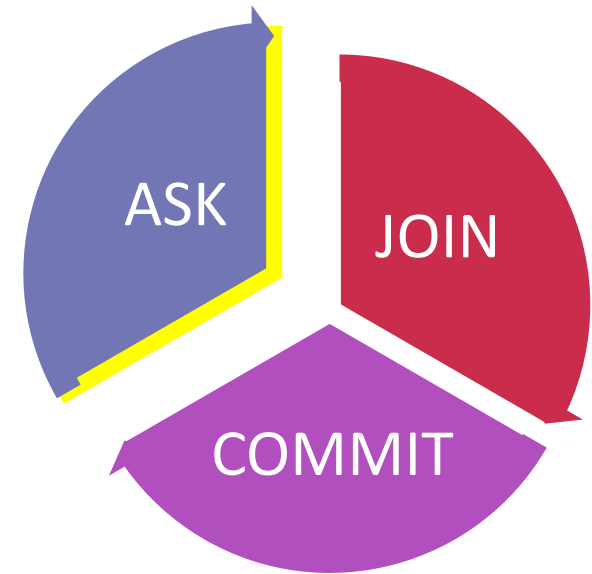
ASK

- Setting the tone of the conversation is critical: this must not come across as a performance problem, coaching session, or disciplinary issue.
- We are not imposing our assumptions of what we think is happening, we are describing **what we have observed**.
- We are sharing our observations out of concern for their wellbeing, with the goal of **understanding** and **assisting**.
- Our attitude is one of *compassionate curiosity* and concern.
- Think SAFETY



What NOT to Say

- *“I’m sure everything is ok but I’m just checking in.”*
- *“I know you would never consider doing something foolish like...”*
- *Guilt Trips: “Think of your family!” “We need you here!”*
- *Over-reacting: “I’m shocked!” “Oh no that’s terrible!”*
- *Judging: “I know you’re upset but you are really not handling this well.”*
- *“You used to be so positive and productive, and now...”*
- *“I hope this is not about the raise you didn’t get.”*



GIVE REASSURANCE AND INFORMATION, NOT ADVICE

HELP IS NOT GIVING ADVICE

I remember during my breakup, I just threw myself into work. What you should do is ...

You really need to talk to a professional about that.

You'll get over it. Just don't worry about it.

The way you're handling this isn't healthy.

HELP SOUNDS LIKE

Breakups can be tough. It's natural for you to be hurt and upset.

I'm here for you if you want to talk. There are also people who are trained to help you work through these feelings.

You are not alone.

I care about you and I've noticed a change in _____ (mood, eating, exercising, etc.).

JOIN: Be Solution-Focused, Offer Options

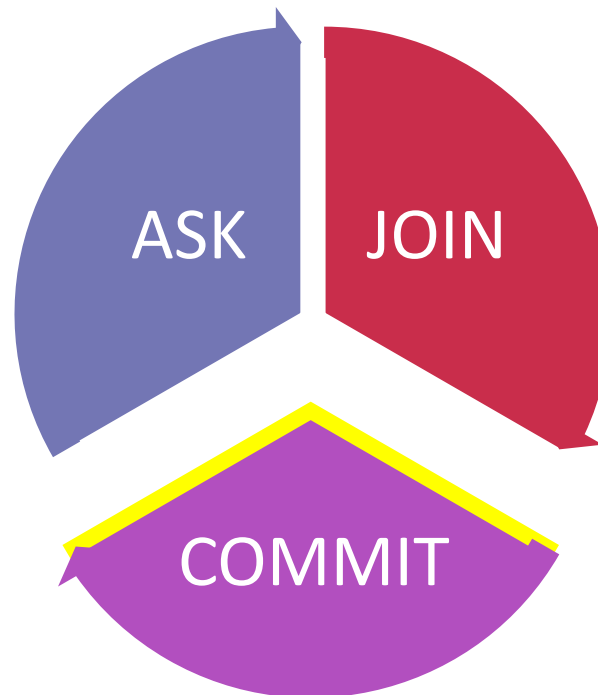
When people feel heard and safe, they are ready to consider options.

- People who are overwhelmed are literally experiencing multiple stressors at once and may find it difficult to prioritize or plan.
 - If they struggling to perform job tasks, can you reduced their workload?
 - Would a flexible schedule be helpful?
 - Do they need to take a medical leave?
- Offer choice whenever possible



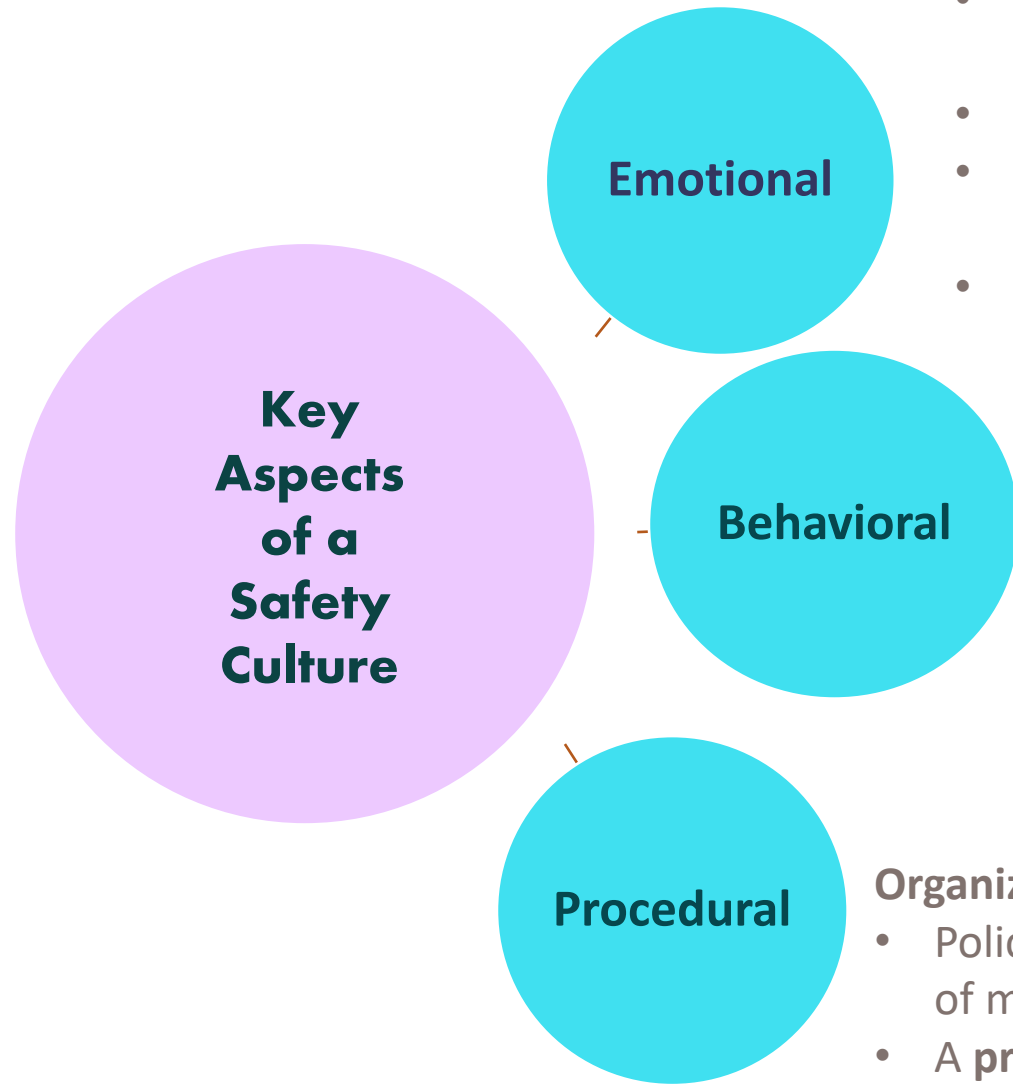
COMMIT

- Demonstrate that you are genuinely committed to this person, through this crisis and beyond.
- Resist the effort to make promises you can't keep but be positive.
- *"We will be here for, you have a caring community supporting you."*



What About Self Disclosure?

- Sharing our own lived experience of mental health conditions is extremely impactful in overcoming isolation and shame, and normalizing conversations about mental health.
- The personal decision to disclose should be made with care.
- Everyone's experiences of illness are unique; don't assume we know everything about another person's journey.
- Validate challenges but be sure to share hopeful stories; “war stories” or those that end with someone having to leave their job, or someone taking their life, are traumatizing.
- Don't make it about us: employees should not be comforting us.



How Employees Feel

- A sense of connection, and a shared sense of purpose for employees
- Culture of kindness and mutual support
- “Learning Orientation” vs. punitive approaches
- Cultural responsiveness

Management Practices

- Employees have choice and flexibility
- Asking HOW people are doing, not just **what** they are doing
- Encouraging transparent communication
- Role-modeling a humble mindset that shows you are human

Organizational Support and Resources

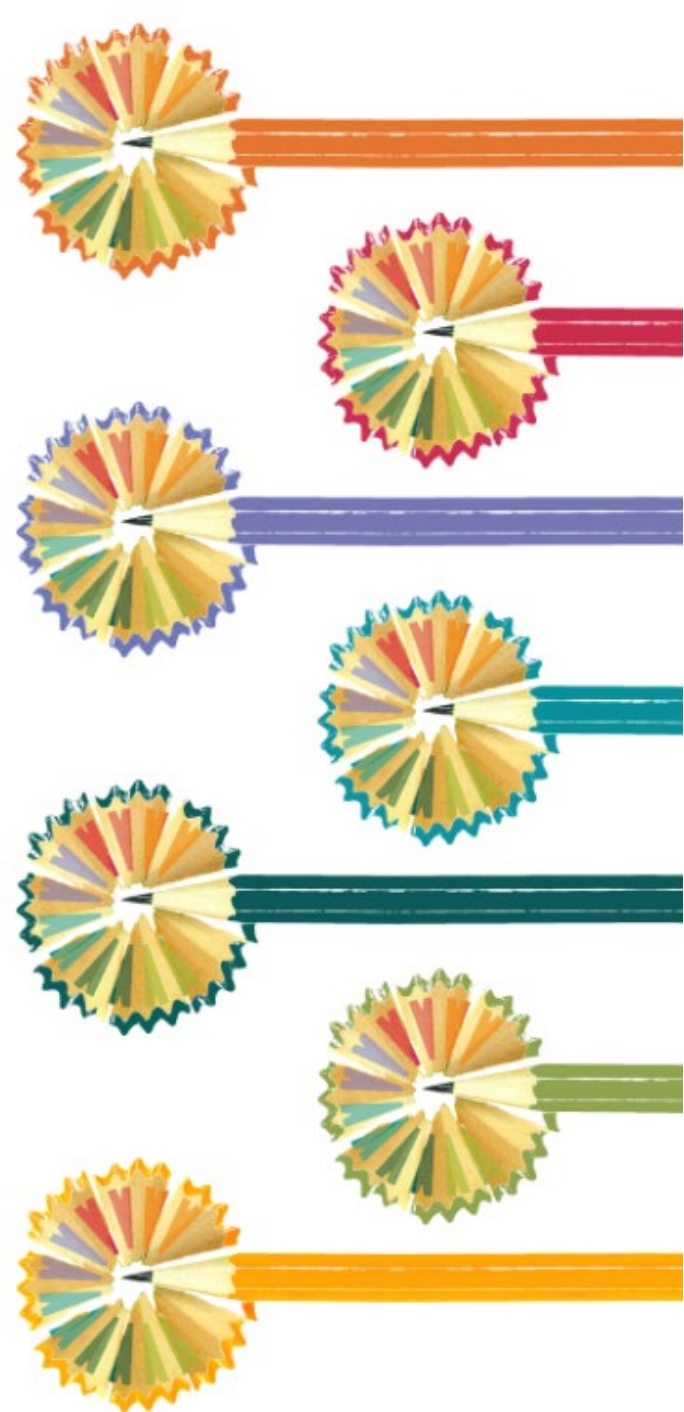
- Policies, practices, structures, and systems of management that promote self-care
- A **process** for management to follow if someone is struggling emotionally



In an Emergency

- **National Suicide Prevention Lifeline**
 - Lifeline offers free services 24/7.
 - Call **988** or **1-800-273-TALK (8255)** or visit suicidepreventionlifeline.org.
- **Crisis Text Line**
 - Text **"MHFA" to 741741** for free 24/7
- crisis counseling or visit crisistextline.org.





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