

UVM ScholarWorks

Educational Materials for Low-Barrier Mental Health Intervention in Essex, NY

Item Type	Presentation;Presentation
Authors	Miles, Rachel Elizabeth
Download date	2026-05-13 09:43:59
Item License	http://creativecommons.org/licenses/by/4.0/
Link to Item	https://hdl.handle.net/20.500.14849/1658

Educational Materials for Low-Barrier Mental Health Intervention in Essex, NY

Rachel E. Miles

Dr. Mary Katharine Halloran, Preceptor and Mentor

Elizabethtown Community Health Center

Elizabethtown, New York

July-August 2024

Project Identification & AHEC Focus Area

- Mental health and suicidality are ongoing challenges in Elizabethtown and Essex County as a whole. The student preceding me began to address these concerns by helping consolidate lists of providers in the county and through the Department of Mental Health.
- Nonetheless, the need is still great, and many people reach out for services, but cannot receive them in a timely manner or at all because the providers available do not have bandwidth. Wait times are often several months to a year, and very few if any folks are accepting new patients.
- Primary care physicians in Essex County express that they need more tools at their disposal for folks they may encounter needing mental health support. This can also help facilitate difficult conversations that family practitioners are not always comfortable having.
- Particularly in a community that is very small and in which folks are all deeply interconnected, being able to have private, personal consultation and intervention in the form of individual practices and techniques has the potential to be very powerfully helpful.
- Focus Areas Include:
 - Behavioral Health Integration – addresses the needs of individual mental health conditions
 - Social Determinants of Health – social and community context, built environment
 - Medical Practice Transformation – quality improvement, care coordination, cost containment, rural health care, primary care, care for underserved, disadvantaged populations, patient-centered care

Public Health Costs & Considerations

- Per the Essex County CNA 2022:
 - 14.09% of participants reported suicide to be one of their top 5 concerns in Essex County
 - 6.24% of participants reported that suicide is one of the health challenges they and/or a family member have dealt with (attempts and/or completions) in the past year
 - 75.67% of participants endorse that health is a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity
 - 31.13% of participants report that access to mental health services is one of the top 5 factors they consider when imagining a strong, vibrant, and healthy community
 - 47.05% of participants report that access to mental health services is the most significant need in their community (after only access to general healthcare, 49.32%)
- Per the Essex County government website and the American Foundation for Suicide Prevention:
 - Suicide is the 12th leading cause of death overall in New York
 - On average, one person dies by suicide every 5 hours in the state
 - Suicide is the 2nd leading cause of death in ages 15-34 and 3rd leading in ages 10-14
 - Suicide costs New York a total of \$1,806,769,000 of combined lifetime medical and work loss cost each year, or an average of \$1,167,918 per suicide death.
 - Over twice as many people die by suicide in New York annually than by homicide; the total deaths by suicide reflect a total of 33,091 years of potential life lost (YPLL) before age 65.

Community Perspective

- Interview 1: David Dysart, Community Member
 - “It’s important to talk to your doctor first if you feel uncomfortable talking to mental health – maybe that’s all you need.”
 - “There’s a stigma to it – and especially in this community, everybody knows each other’s business.”
 - “People won’t take care of themselves; everyone who really needs it, they don’t go. It’s only when they’re pushed that they seek care.”
 - “There’s so much else. This is one of the poorest counties in the state. You don’t have the big providers.”
- Interview 2: Jeanne Hummel, Health Centers Manager
 - “Telemedicine has been really helpful [during the pandemic] ... [but] when the funding goes, the need remains.”
 - “I wish we had more mental health care. Our only option is to get help.”
 - “Poor folks have no way to get help. They want it, but don’t know how.”

Intervention & Methodology

- To begin, 50 brochures were printed and prepared. The project was discussed with staff in the clinics, including nursing staff, clinic managers, front desk staff, and practitioners so they may utilize it when they see fit. Please see slide 9 (resources) for literature review that yielded content.

Naming and Accepting Emotions

One of the first and best things you can do for your mental health is to be kind. Many of us suffer from negative self-talk and are not always very nice to our own selves. Being hard on yourself may seem like it is helpful, and that maybe you are pushing yourself to be better.

But over time, this is very hurtful and makes us feel guilty for who we are. We may punish ourselves for what we cannot control, or believe we are not good or strong. Paying attention to the way you think and trying to break these patterns of self-dislike can make a big difference in how you feel overall.

This is very hard to do, but remember that you are capable, even if you do not always feel that way. Practicing these skills can make coping with tough times easier and help you improve your thoughts, feelings, and behaviors.

Visit www.positivepsychology.com/cognitive-distortions to learn more



**ELIZABETHTOWN
COMMUNITY
HEALTH CENTER**

YOUR MENTAL HEALTH MATTERS

WE LOVE YOU



Safety Planning

It can be very helpful to write down a "safety plan" so that when you feel bad, you know the right steps to take to feel better and get help.

- 1 **What are my Warning Signs?**
Write down three things that you notice in your mind or body when you start to feel bad.

- 2 **What are my Coping Strategies?**
Write down three things you can do to distract yourself and relax.


- 3 **Who are People to call?**
Write down three trusted folks to contact when needing support.

- 4 **Who are Professionals to call?**
Write down three providers or agencies for an emergency.

Suicide Hotline:
Call or text 988 or chat at 988lifeline.org/chat
Crisis Text Line:
Text GOT5 to 741741
Essex County Mental Health 24/7 Line:
Call 518-873-3570
Essex Mental Health Association 24/7 Helpline:
Call 1-800-440-8074

Movement

Moving your body is one of the quickest ways to improve your mood. There is a lot you can do at home, including walking and yoga. The famous "7-minute workout" is shown below, where you try 30 seconds of each exercise with 10-second breaks in between. Doing just a little exercise every day can help you a lot!



Helpful YouTube channels: Yoga with Adrienne, Robert's Gym, Popsugar Fit, and MadFit (See DrRowe for physical therapy work)
Never push too hard if a movement hurts!

Coping Skills

Every day, we all deal with a lot of stress. This can be "activating", which means we feel tension and pain in our bodies. Thoughts and feelings might then feel out of our control. Bringing yourself out of your head, and back into your physical body, can help a lot. These are some popular skills you can try, but different things work for everyone.

Square Breathing - Breathe in for 4 seconds, hold it for 4 seconds, breathe out for 4 seconds, and hold it for 4 seconds. Repeat.

Sensory Exposure - Name 5 things you can see, 4 things you can hear, 3 things you can touch, 2 things you can smell, and 1 thing you can taste. You can also take a hot or cold shower, or go outside in the sun or rain.

Body Mapping - Take a few minutes to close your eyes. Slowly bring awareness to each part of your body, from the top of your head to your toes. Try to focus and feel present.

Meditation

Mindfulness and meditation are some of the oldest practices in the world. Although it seems hard, the idea is simple. You do not need to have an "empty" mind - this is a myth.

At its core, meditation involves being still, acknowledging your thoughts and feelings as they come, and then letting them go. Trying 5-10 minutes of meditation once or twice a day can greatly benefit mental and physical health.


Helpful Apps: Plum Village, Medito, Waking Up

Affirmations

This one seems silly, but works very well! By choosing to be gentle and kind to ourselves, over time, we can un-do those years of negative self-talk. Many people will say good things about themselves in the mirror. You can also write nice and supportive words on post-it notes and paste them up around your home. Let's give it a try! "One of my best qualities is: _____"

Helpful Apps: I Am, Think Up, Insight Timer

The Triangle



Cognitive Behavioral Therapy, or CBT, is one of the most popular strategies for changing the way we think. Everything about CBT revolves around this triangle. Our thoughts, feelings, and behaviors all affect each other. By noticing and trying to adjust one, the others will also shift! Next time you notice you are having an unhelpful thought, consider alternative thoughts, and how they may lead to different feelings and actions in your life.

Helpful Apps: Woebot, Finch, Daylio, FreeCBT, Unstuck, Umbrella Journal, Clarity

Gratitude

Having a "gratitude practice" has been proven to help with well-being and overall outlook on life. Try writing 3 things you're grateful for each day, and notice how this makes you feel.

- (1) _____
- (2) _____
- (3) _____

Helpful Apps: 3 Good Things, 365 Gratitude

Results & Response Data

- If there was greater time, it could be valuable to record which patients receive the brochure, as well as those to whom it was offered who refused, or those who were not offered it at all. Over time it could be beneficial to analyze the changes in mood, outlook, and outcomes of those who began to utilize these practices and see if there are any statistically-significant differences between groups.
- Those who have seen the brochure believe that it is well-designed and attractive, and that they would consider picking it up if seen in a waiting room or exam room. If it were able to be printed in color, they report it would be even more so. The large font on the outer fold is eye-catching and it was said that it's nice that safety planning and hotline / text line numbers are readily accessible on the back side.

Proposed Effectiveness & Limitations

- The Department of Mental Health may have the most insight into the impact of this intervention, as they are the ones who interface with these patients on a most regular basis; the folks in the Community Health Center can also give opinions on how people react when given the pamphlet, or if they take it of their own volition
- Because there are so many other social determinants of health and other factors at play that reinforce generational poverty and trauma here, I recognize the scope of this project is small and that many other things such as housing, access to affordable healthcare, addiction, stigma, and much else contributes to suicidality

Recommendations for Future Projects

- Particularly if you are staying at the Namaste Inn bed and breakfast (on 12 Footbridge Lane), it could be beneficial to continue to strengthen the relationship with the Department of Public Health, as well as the Department of Mental Health. Partnership with them could foster discussion about further revision and distribution of the brochure, and where they feel like the highest-need areas are.
- It would certainly be beneficial to further integrate into the community, whether by attending E-town day, participating in the pickup volleyball league at the community center, or going to the Appalachian History Museum lectures – this could be a way to get better insight into what folks feel like they need.
- The brochure could also be posted in these places, as well as local restaurants, gas stations (Stewart's), libraries, the main grocery store (Tops) and pharmacy (Kinney's) in the area, and even potentially schools and workplaces. This might include the hospital across the street or other city / county offices.

References

- Riegler, Michelle; Stotz, Gavin; Fitzgerald, Kaitlyn; Munoz, Christian K.; Lewis, Jamie; Ring, Sebastian; Astorino, Todd A.. Acute Responses to the 7-Minute Workout. *Journal of Strength and Conditioning Research* 31(9):p 2572-2578, September 2017. | DOI: 10.1519/JSC.0000000000002073
- Alex M. Wood, Jeffrey J. Froh, Adam W.A. Geraghty, Gratitude and well-being: A review and theoretical integration, *Clinical Psychology Review*, Volume 30, Issue 7, 2010, Pages 890-905, ISSN 0272-7358, <https://doi.org/10.1016/j.cpr.2010.03.005>.
- Smith, J. C. (1975). Meditation as psychotherapy: A review of the literature. *Psychological Bulletin*, 82(4), 558–564. <https://doi.org/10.1037/h0076888>
- Rachman, S. and Shafran, R. (1999), Cognitive distortions: thought–action fusion. *Clin. Psychol. Psychother.*, 6: 80-85. [https://doi.org/10.1002/\(SICI\)1099-0879\(199905\)6:2<80::AID-CPP188>3.0.CO;2-C](https://doi.org/10.1002/(SICI)1099-0879(199905)6:2<80::AID-CPP188>3.0.CO;2-C)
- Barbara Stanley, Gregory K. Brown, Safety Planning Intervention: A Brief Intervention to Mitigate Suicide Risk, *Cognitive and Behavioral Practice*, Volume 19, Issue 2, 2012, Pages 256-264, ISSN 1077-7229, <https://doi.org/10.1016/j.cbpra.2011.01.001>.
- <https://essexcountyny.gov/wp/wp-content/uploads/NewYorkSuicideFacts.pdf>