



# Seeking help in times of trouble

Starting conversations about mental health  
with administration and IT students

# We're talking mental health

This resource is intended as a **starting point for discussion**

**The information and teaching suggestions in this resource are designed for use in further education colleges and are specifically designed for students on Administration and IT related courses.**

They highlight the importance of talking about problems, as a means of dealing with mental distress and of signposting students to existing and new networks of support. The materials have been written in response to discussions with colleges across the United Kingdom and in recognition of the pressures and demands for students on Administration and IT courses. It is reported that there are increasing numbers of students disclosing mental health needs and/or presenting in mental distress<sup>1</sup>.

Further information on this can be found on pages 6-8. This resource is intended as a starting point for discussion.

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## Target audience

The resource is aimed at level 2 and 3 (SCQF levels 5 and 6) students on Administration and IT related courses.

It is suitable for all students in this cohort.

## Aims

To raise awareness of some of the reasons why stress and mental health problems can arise for those working in administration and IT related occupations.

To promote the importance of seeking help when in distress and encourage help-seeking behaviour.

To raise awareness of sources of support, including family and friends, both within the college and through external services.

## Activity

## Learning outcomes

1 2 3

To generate awareness and discussion surrounding mental health and the importance of talking when in distress.

3

To understand why this is an issue in administration and IT related courses and occupations.

4

To identify potential personal support networks as well as those which exist within the college or externally.

2

To be aware of stress and how more significant concerns may begin to develop and impact on student life.

3

To be aware of depression as a significant health issue. (Extension activity.)

## How to use this resource

**These learning materials are designed for a 45–65 minute session, depending on the time available and the learning ability of students. The material is designed to require little written input and is primarily tutor- and discussion-led.**

Elements of the session will be supported by PowerPoint slides. Each element of the plan includes background information to support staff who may not be familiar with mental health issues and provides options for expanding learning if appropriate.

These materials should be seen as part of a broader provision to support health and wellbeing. The lesson is focussed and does not cover the breadth of potential work that can be done in relation to mental health issues.

The Charlie Waller Trust provides a range of resources for staff working in FE and HE institutions and schools. One of these is a free e-learning package, comprised of six 20-minute modules. Originally designed for HE, there are now specific FE modules available that are highly relevant to FE colleges and the post-16 provision. It will be of particular value to staff wanting more information and to develop their skills; it is recommended that all staff look at this resource:

<http://learning.charliewaller.org>





## Safeguarding

**Talking about mental health issues can be a trigger for both students and staff. It is important that all are aware of support available to them if they need help.**

All staff should be aware of the College's Safeguarding Policy and know how to refer students to help available through Student Services. Leaflets and posters for local NHS and community services should be made available to students as part of the lesson.

The College should also ensure staff are aware of support available to them through their line manager and Employee Assistance Programme (EAP).

There is a range of national support services, including websites and helplines, that provide information, advice and/or a listening ear to anyone, including young people and staff.

These include but are not limited to:

**SAMARITANS**  
[samaritans.org](http://samaritans.org)

**CALM (Campaign Against Living Miserably)**  
[thecalmzone.net](http://thecalmzone.net)

**MIND**  
[mind.org.uk](http://mind.org.uk)

**SAMH**  
[samh.org.uk](http://samh.org.uk)

**YOUNG MINDS**  
[youngminds.org.uk](http://youngminds.org.uk)

**PAPYRUS**  
[papyrus-uk.org](http://papyrus-uk.org)

**STUDENTS AGAINST DEPRESSION**  
[studentsagainstd Depression.org](http://studentsagainstd Depression.org)

**THE MIX**  
[themix.org.uk](http://themix.org.uk)

## Resources required



Slides 1-13 available at  
**[charliewaller.org/fe-industry-guides](http://charliewaller.org/fe-industry-guides)**



View this clip  
**<https://youtu.be/WcSUs9iZv-g>**



Information on support services available from  
**Student Support Services**



## Background information for tutors

Between 2017 and 2018, the Office for National Statistics published analysis of deaths from suicide in different occupational groups for people aged 20 to 64 years, based on deaths registered in England between 2011 and 2015, and an analysis of registered deaths in the UK from suicide by sex, age, area of usual residence of the deceased and suicide method.

### Key points

- 1 in 4 people in the UK will experience a mental health problem.<sup>1</sup>
- In 2018, there were 6,507 suicides registered in the UK.<sup>2</sup>
- There were 18,998 suicides in men and women aged between 20 and 64 years between 2011 and 2015, which constitutes a rate of around 12 deaths for every 100,000 people per year; for around 7 in 10 (13,232) of these suicides, an occupation was provided at the time of death registration.<sup>2</sup>
- Despite having a lower number of deaths overall, rates among the under 25s have generally increased in recent years.<sup>3</sup>
- The rate of suicides among 10- to 24-year-old females has significantly increased since 2012.<sup>3</sup>

**1 IN 4**  
people in the UK will  
experience a mental  
health problem



## Why do more men die by suicide?

**The Samaritans' report 'Men, Suicide and Society' (2014)<sup>7</sup> identifies risk factors that make men at particular risk:**

- Men are often brought up to believe that their feelings are not important and that it is not okay to talk about them.
- Men are much less likely than women to have a positive view of counselling or therapy, and when they do use these services, it is at the point of crisis.
- Men are less likely to talk with friends and family about their feelings and worries.
- Men are more likely than women to respond to stress by taking risks, like misusing alcohol and drugs.
- Relationship breakdown is more likely to lead men, rather than women, to suicide.
- Socio-economic factors: people experiencing social and economic deprivation are more at risk, and unemployed people are two to three times more likely to die by suicide than those in work. Suicide increases during economic recession.
- Men are more likely to hold stigmatising views of mental illness and suicide than women.



## Industry comment

**IT professional and lecturer George Howie discusses his experience with students and industry professionals and highlights the benefits and consequences of using technology**

- As social beings, we strive to connect with others, seeking companionship and psychological contact with those around us. Being socially active has been shown to ease stress, anxiety and low mood, while promoting a stronger sense of self-worth and increased feelings of comfort and joy.<sup>5</sup>
- “A lot of organisations are reporting increases in numbers of students disclosing mental health problems or presenting in mental distress. There are pressures and demands for students on administration and IT courses.

**Technology has such a presence in our lives, and it can be the most amazing tool to connect families and friends.”<sup>6</sup>**

- While social media may not provide the same psychological benefits as face-to-face interaction, it can have many positive impacts on our wellbeing, such as:
  - Staying connected with family and friends around the world
  - Providing the opportunity to make new friends and increase our social circle
  - Seeking or providing emotional support in challenging times
  - Providing an outlet for creativity and self-expression<sup>5</sup>

- “It can be easy to become addicted to technology like social media and smartphones. This can sometimes be a distraction in a classroom setting; increasing psychological issues such as distraction, depression and the need for instant gratification.”<sup>6</sup>
- Social media is a relatively new technology, and although there are benefits to the numerous platforms available, there is increasing evidence of negative consequences to prolonged use, such as:
  - Feelings of inadequacy
  - Increased feelings of isolation
  - Exposure to cyber-bullying<sup>5</sup>
- “I can also speak from experience as a Computing Lecturer in a college. Some of my own students have shown difficulty in not being able to put away their mobile phones, and it can cause distractions to their learning. The smartphone can be such a powerful tool as well as an addiction.”<sup>6</sup>
- Overuse of social media has other negative consequences such as a ‘fear of missing out’ (FOMO). Studies have also shown that in socially awkward or anxious situations, individuals turn to their mobile devices and social media as a ‘security blanket’ to self-soothe; conversely this can remove them from the face-to-face contact that can help ease feelings of anxiety.<sup>5</sup>





# Activity 1

## Introduction

### Aim

To generate awareness and discussion surrounding mental health and the importance of talking when in distress.

### Objectives

To recognise that both physical and mental health are important to wellbeing.

To recognise that mental health is perhaps more difficult to talk about.

### Resources required



Slides 2–4 available at  
[charliewaller.org.uk/fe-industry-guides](http://charliewaller.org.uk/fe-industry-guides)



See page 11



5–10 minutes

### Tutor asks

You have had a headache for several days and your vision is blurred. You feel too unwell for work or college.

What might you do?

#### Facilitate discussion

Use prompt cards. Small groups discuss and try and reach consensus.

- Would you do different things at different times of the day or week?
- Google it?
- Would you talk to a doctor?
- Who else?
- Would seeking help start to make things better?

### Tutor asks

You have been feeling down and anxious for several days and dread getting up for college or work.

What might you do?

#### Facilitate discussion

Use prompt cards. Small groups discuss and try and reach consensus.

- Would you do different things at different times of the day or week?
- Google it?
- Would you talk to a doctor?
- Who else?
- Would seeking help start to make things better?

### Tutor asks

Why might it be more difficult to seek help for an emotional problem than a physical one?

Elicit responses and facilitate discussion.

# Activity 1

## Introduction

### Key points to draw out and tutor narrative

Everyone has both physical and mental health and both can be good or poor depending on our circumstances.

It is equally important to seek help for our mental health problems as for physical issues.

Early intervention can help people to start talking about their mental health prior to any escalation of difficulties.

**Talking and sharing feelings is usually what starts to help people feel better.**

It can be hard to do this because:

- Shame and stigma can be huge barriers to talking about mental health issues. This can make it difficult for students to disclose mental health needs. They may fear not being offered a place on the course, being treated differently, not being offered a work or placement role and may fear that they are letting people down.
- People often have different attitudes towards seeking help for their physical and mental health.
- Men and women will often respond differently. Men are often raised to be 'strong', 'tough' and 'dependable', and many (wrongly) view having a mental health difficulty as some form of weakness.
- Other people say that telling anybody they are struggling with their mental health would feel like admitting there was something wrong with them as a person.
- Students learn at different stages of their lives. Some students will attend college direct from school, while others may be adult returners faced with different responsibilities or demands. People often have different attitudes toward seeking help for their physical and mental health and may find it difficult to speak to other students or college staff.
- Different communication tools exist and be aware that social media can play a role in our day to day lives. There are positive and negative aspects to social media and other on-line forums. They can help us connect with others in a variety of ways but access is 24 hours per day and different age groups may access different resources.



# Activity 1

## Prompt cards

7

Cut out options and ask students to work in small groups to discuss and reach consensus on what they might do.

**Make an appointment  
with the doctor?**

**Call an ambulance?**

**Go to Accident  
and Emergency?**

**Do a Google search?**

**Speak to a friend?**

**Speak to a family  
member?**

**Call a helpline e.g.  
NHS Direct?**

**Speak with your tutor?**

**Speak to the  
college nurse?**

**Counselling service?**

**Someone else?**

**Someone else?**



# Activity 2

## Stress container

2

### Aim

Enabling a discussion regarding stress and some of the sources as well as how people can help protect their mental health by avoiding feeling overwhelmed.

### Objectives

To introduce individuals to the stress container model.

To discuss what sources of stresses may flow into the container.

To recognise what may happen if coping strategies are not available.



### Notes

- The stress container is based on the Brabbin and Turkington (2002) model<sup>7</sup> that can be used to indicate when difficulties start to develop and negatively impact on an individual's mental wellbeing.
- The point at which an individual reaches this threshold can vary and early warning signs can be similar or very different from that of other individuals.
- Using this model may allow you to identify some of the group's stressors.
- When considering healthy coping strategies, it may be helpful to consider the 'Five Ways to Wellbeing'.<sup>8</sup>
  - Connect
  - Keep learning
  - Be active
  - Give
  - Take notice

### Resources required



Slides 5–8



Available from your College (these will be specific to each college and are not provided here)



15 minutes

## Activity A

### Introduce a definition of stress

A distinction can be made between pressure and stress.

An elastic band can be a useful visual aid to demonstrate the following:

- When the band is under no tension it is ineffective.
- When under some tension the band is fulfilling its purpose effectively.
- When under too much tension (pressure) the band will snap.

When individuals experience little pressure or stimulation, they can become bored.



## Tutor asks

**What are some of the sources of stress that you may encounter?**

### Facilitate discussion

Small groups if helpful and reach consensus – stretch beyond student life.

Acknowledge that stress can impact on other areas of our lives.



# Activity 2

## Stress container



### Activity B

#### Introduce stress container model

#### Tutor asks

##### **What happens if stress keeps pouring into the container?**

Confirm via slide that container is likely to overflow.

Introduce concept of the tap and prevention of an overflow of stress.

##### **What are the positive strategies used that have the effect of opening the tap and reducing or allowing stress to flow away?**

#### Facilitate discussion

Encourage people to consider what works for them.

Visual representations of unhelpful and helpful strategies on slides can be used as the discussion progresses to demonstrate the need for effective coping strategies to balance the impact of stressors on the individual.

- Acknowledge that individuals do not always use helpful coping strategies.
- The following examples of unhelpful coping strategies could be given – staying up late/disrupting healthy sleeping pattern to complete work, or avoiding completing work altogether.
- Unhelpful coping strategies can 'clog up' the stress container tap and have little or no effect on our overflowing container.
- Effective coping strategies are things that can be considered restorative and likely to promote positive mental and physical wellbeing.
- It should be acknowledged that effective coping strategies will likely differ from person to person.
- Individuals should be encouraged to consider the most effective strategies that will allow them to manage their own levels of stress.
- Taking time to engage in a range of things can decrease levels of stress and help students to return refreshed. They can look to focus on elements of their course and the demands that may come with acquiring skills or working within administration or IT.
- Talking about and sharing experiences can often lead to increased personal resilience and a decrease in feelings of overwhelming levels of stress.



## Key points to draw out and tutor narrative

- Everyone can experience stress at certain times in their lives and this can relate directly to the person's environment and/or personal circumstances.
- Stress, leading to mental health issues, can be generated from any aspect of our lives. Some of these stress factors may be circumstances beyond our control, whereas other areas of our lives might see a person able to exert more influence or control over the source of stress and its impact.
- All individuals react differently to stress and managing mental health needs.
- Outline what support can be obtained through Student Services and provide leaflets and links to sources of support.

## Stress container

- Based on Brabbin and Turkington (2002) model<sup>7</sup> - consider the tipping point where stress overflows – that can be the point at which difficulties start to develop and there can be a potential deterioration in mental health.
- At what point an individual reaches that threshold varies and each of us may have early warning signs that can be similar or very different to other people, including family and friends.
- You will have identified some of the group's stress factors during the discussion around PowerPoint Slides 5-8.
- Acknowledge that individuals do not always use helpful coping strategies – we do sometimes use unhelpful coping strategies.
- Examples of unhelpful coping strategy - stay up late, disrupt sleep to complete, avoidance.
- Give examples of potentially helpful coping strategies – balanced diet, exercise and consider the Five Ways to Wellbeing.<sup>8</sup>
- Acknowledgement that when people are stressed they often cut out or stop participating in the things that reduce stress and prevent an overflow of stress which can leave the person with a sense of being overwhelmed.
- It can be useful to recognise what causes you stress/distress and the strategies you might employ that prevent an overflow of stress.
- Talking and sharing feelings is usually what starts to help people feel better.



# Activity 3

## Talking about suicide

3

### Aim

Enabling a discussion regarding suicide and acknowledging that there are increased numbers of students presenting with significant levels of mental distress which can in some instances lead to thoughts of suicide and an intention to die.

### Objectives

To watch the video and discuss the content, highlighting what Kevin (narrator) says about the impact on others, regret, the fact that people do care and the importance of talking when distressed.

### Notes

- The video is American but is still relevant to the UK.
- Kevin discusses diagnosed mental health issues; however, it is possible for people to feel suicidal because of mental distress and not have a mental health issue.
- The helplines are not UK-based so draw attention to the UK and local support helplines.

### Activity A

Introduce YouTube film:  
I survived jumping off the Golden Gate Bridge

<https://youtu.be/WcSUs9iZv-g>

Say that sadly every year many people take their own life; many of them will not have received any help for their mental health problems.

### Discussion of video

Emphasise the need for people to talk about issues and the 'regret' in the clip.

### Activity B

**Optional activity depending on time and group, but you must ensure that Activity 4, which looks at where to find help and support, is covered in the total allocated time.**

Introduce the fact that there are many myths surrounding suicide. Students could be encouraged to explore personal or societal misconceptions surrounding suicide in relation to mental health related issues.

Tutors may find it useful to refer to common myths surrounding suicide on the Samaritans website available at: <https://www.samaritans.org/scotland/how-we-can-help/if-youre-worried-about-someone-else/myths-about-suicide/>

Students should be made aware of appropriate support within the college when concerned about their own ability to stay safe or if concerned about the safety of others.



### Resources required

↓ DOWNLOAD  
POWERPOINT

Slides 9-10 links to film and website

⌚ TIME  
REQUIRED

10–15 minutes

## Key points to draw out and tutor narrative



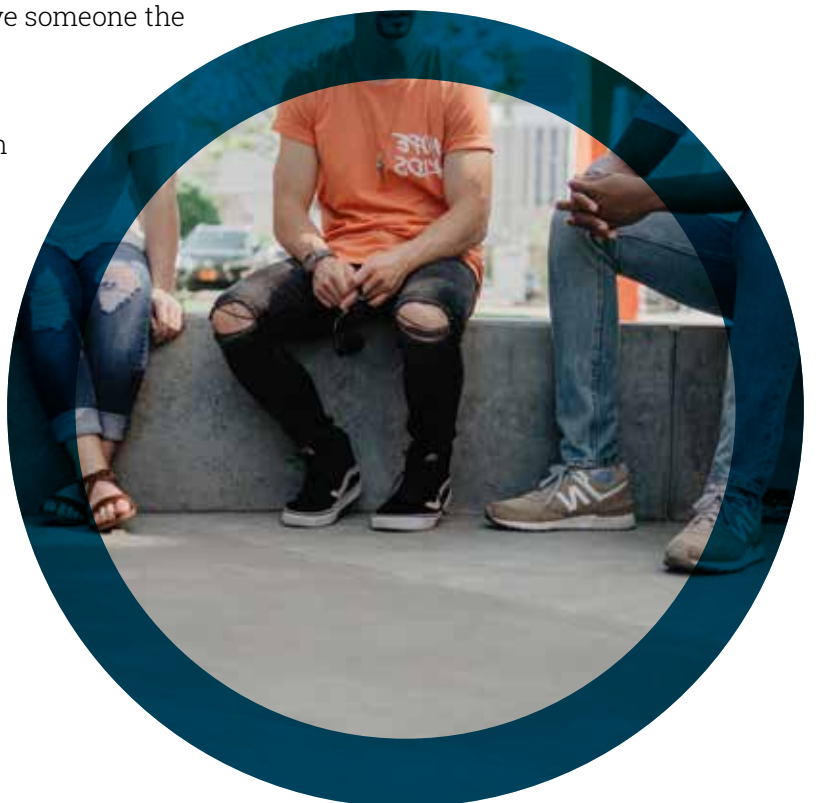
### Activity A

- The film describes one man's attempt to take his own life by jumping from the Golden Gate Bridge. He is one of the 1% who survive. He talked to 19 other survivors; they all described "instant regret" as they jumped. How many potentially of those 2,000+ (since the bridge was built) who did not survive may have felt the same. Perhaps all?
- The survivor points out, "It's OK not to be OK. It's not OK not to ask for help and support."

### Activity B

Common myths surrounding suicide<sup>9</sup>:

- People who talk about suicide aren't serious and won't go through with it.
- If a person is serious about killing themselves then there's nothing you can do.
- You have to be mentally ill to think about suicide.
- People who are suicidal want to die.
- Talking about suicide is a bad idea as it may give someone the idea to try it.
- Most suicides happen in the winter months.
- People who say they are going to take their own life are just attention seeking and shouldn't be taken seriously.





# Activity 4

## Seeking help

4

### Aim

Enabling students to identify where help can be found for themselves, or a friend they are concerned about.

### Objectives

To increase awareness and discussion surrounding mental health and the importance of talking when in distress.

To identify potential personal support networks.

To have awareness of other forms of support which exist within the College or are available externally to themselves or a friend.



### Tutor asks

**If someone you know was feeling really low and desperate, who could they talk to?**

#### Facilitate discussion

Collect ideas from others including friends, family, college services, managers and colleagues at work.

The list produced might be left displayed on walls in rooms and potentially collated for any student newspaper or communication source such as the intranet.

Hand out college support leaflets and go through content.

#### Key points to draw out and tutor narrative

Asking for help isn't easy but it really is the first step to helping things get better. Even though you may worry about upsetting them, family and friends can be there for you.

Outline what support can be obtained through Student Services and provide leaflets and links to sources of support.

### Resources required



Slides 11-14



Available from your College (these will be specific to each college and are not provided here)



5-10 minutes

## Additional links and support

### SANE

[sane.org.uk/sane\\_on\\_suicide](https://sane.org.uk/sane_on_suicide)

### CALM

[www.thecalmzone.net/](http://www.thecalmzone.net/)

### Safeguarding

A briefing paper for the Further Education and Skills sector:  
Responding and supporting individuals at risk of taking their own life.

<https://mhfe.org.uk/sites/default/files/Suicide%20briefing%20final%20copy%202.pdf>

## References

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- 6 George Howie, IT Professional and Lecturer
- 7 Brabbin and Turkington (2002)
- 8 Five Ways to Wellbeing (New Economics Foundation (NEF), 2008)
- 9 Myths about suicide - Samaritans  
<https://www.samaritans.org/scotland/how-we-can-help/if-youre-worried-about-someone-else/myths-about-suicide/>



## Remembering Charlie

Charlie Waller was a strong, funny, popular, good-looking and kind young man, with a close and loving family. To the outside world, he had everything to live for. Yet in 1997, at the age of 28, Charlie took his own life. He was suffering from depression.

In response to this tragedy, his family founded The Charlie Waller Trust, to open up the conversation around depression, and to ensure that young people are able to understand and look after their mental health and to spot the signs in others.

Charlie sits at the heart of our story, our vision and our purpose.

### GET IN TOUCH

hello@charliewaller.org  
01635 869754

### FIND OUT MORE

charliewaller.org

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### SUPPORTING US

If you have found this resource useful please consider donating to help us continue our work



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To donate £10 **Text 'CWT' to 70085**

This costs £10 plus the cost of a standard rate message



Online

Visit [charliewaller.org/donate](https://charliewaller.org/donate)

### The Charlie Waller Trust

First Floor • Rear Office • 32 High Street • Thatcham • Berkshire RG19 3JD

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