

NYSCDA MEETING - JANUARY 11, 2018

TYPICAL VS PROBLEM BEHAVIORS

Note: It is important to keep in mind that people differ in the number of symptoms that they have and the severity of their symptoms.

What To Look For in Campers/Staff...

- Mood changes. Look for feelings of sadness or withdrawal that last for several days or severe mood swings that cause problems in relationships.
- Intense feelings. Be aware of feelings of overwhelming fear for no reason — sometimes with a racing heart or fast breathing — or worries or fears intense enough to interfere with daily activities.
- Behavior changes. These include drastic changes in behavior or personality, as well as dangerous or out-of-control behavior. Fighting frequently, using weapons and expressing a desire to badly hurt others are warning signs.
- Difficulty concentrating. Look for signs of trouble focusing or sitting still, which might interfere with ability to perform in specific activities.
- Unexplained weight loss. A sudden loss of appetite, withholding food or frequent vomiting might indicate an eating disorder.
- Physical symptoms. Compared with adults, children with a mental health condition may develop more headaches and stomach aches rather than sadness or anxiety.

It's Time to Intervene When...

- You've noticed something just doesn't seem right, with camper/staff but aren't sure why.
- Your camper's/staff's behaviors seem different than others in their peer group.
- Your camper/staff is starting to have difficulties with other campers and staff.
- You've noticed some of the signs and symptoms below for more than a week:
 - Feeling sad, empty, hopeless, or worthless
 - Sensitivity to sound, sight, smell, or touch (that is not pre-existing)
 - Feeling overly worried
 - Acting out sexually
 - Unable to participate in typical camp activities
 - Feeling like their brain is playing tricks; e.g. they may be hearing knocking or scratching sounds, or their name being called
 - Loss of interest in things they used to enjoy
 - Withdrawal from others
 - Changes in sleep patterns or energy levels
 - Irritability, aggression or restlessness
 - Problems with concentration, memory or thinking
 - Changes in eating patterns, e.g. loss of appetite, vomiting or overeating

You Should Get Help Immediately if your Camper/ Staff Is...

- Having thoughts or making plans of killing or hurting themselves or another person.
- Hearing voices or seeing things that no one else can hear or see.
- Experiencing unexplainable changes in thinking, speech, or writing.
- Being overly suspicious or fearful.
- Showing a drastic and sudden decline in ability to participate in camp-related activities.
- Having sudden personality changes that are bizarre or out of character.



MENTAL HEALTH AT CAMP

MENTAL HEALTH DISORDERS...

- Are common : Approximatey 1/5 children have a mental health disorder.
- Are treatable : 80% of those who seek treatment, improve.
- Often develop early in life : 50% occur before age 14 and 75% occur before age 24.
- **Suicide** is the second leading cause of death for people aged 15 to 24

Basic Tips for Managing Campers with mental health disorders...

- Gather information about the camper's mental health issues prior to their arrival.
- Once a release is signed, ask the camper's mental health provider/s for a statement inclusive of information about symptom management, behavioral issues and medication. *If camper is on a new medication, allow sufficient time for adjustment.
- Remind parents that camp is typically not a good time for a medication holiday.
- Inform staff about the mh problem on a need-to-know basis and respect confidentiality.
- Remind staff that diagnoses do not define campers.
- Remind staff that their job is to make observations in an open-minded manner and not to "fix" underlying mental health issues.

Basic Tips for Managing Staff who are Struggling with mental health issues...

- Designate a "safe" place that staff can go to unwind if they are struggling.
- Designate a specific staff person/s that staff can speak to if they are feeling overwhelmed.
- If you are the person to initially engage with the struggling staff person:
 - Let them know that you're concerned. Tell them what you've noticed and why it concerns you. Let them know that they're not alone. Ask how you can be helpful. Listen and get comfortable with silence, avoid judgments, jumping to conclusions, attempts to "fix". Let them know that there will be a time when they will feel better.

If you feel that a camper or staff person could be suicidal, A.C.T. (www.stopsuicide.org)

- **Acknowledge:** Take it seriously.
- **Care:** Show concern; let the person know that you are there to support them.
- **Treatment:** Get help immediately (Do not leave the person alone if they are suicidal).

** For mental health issues that arise at camps without mental health staff and/or requiring specialized intervention, it is important to maintain a list of local mental health resources/professionals who will respond to crises.*

** The following resources/ screening tools can also be useful when mh needs/crises arise:
Natl. Suicide Prev. Hotline: 1-800-273-8255, <https://findtreatment.samhsa.gov/> ,
<http://screening.mentalhealthscreening.org/bybo> , <https://www.jedfoundation.org/mental-health-resource-center/>*

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RED FLAG BEHAVIORS

“RED FLAG” CAMPER BEHAVIORS - IT’S TIME TO INTERVENE WHEN...

- A camper has had dramatic mood swings for a significant period of time.
- A camper is using and/or brings alcohol or drugs into the bunk.
- A camper resorts to violent behaviors to communicate; e.g. if s/he grabs his hockey stick to threaten a counselor when they are trying to get him up in the A.M.
- A camper expresses suicidal ideation; e.g. “Nobody likes me and nobody will miss me if I jump from the top of the rock-climbing wall!”
- A camper shows signs of self-harm; e.g. cutting, throwing up food after meals, burning his/her skin, head banging etc.
- A camper becomes sexually preoccupied and/or inappropriate.
- A camper becomes withdrawn and unwilling to participate in any activities for several days.
- A camper becomes irritable and angry for several days, spreading negative attitudes throughout the bunk.
- A camper continues to bully/mistreat others, despite repeated requests to discontinue.

“RED FLAG” STAFF BEHAVIORS - IT’S TIME TO INTERVENE WHEN...

- A staff member is using and/or brings alcohol, edibles or other drugs into the bunk.
- A staff member can no longer accompany campers to activities due to symptoms of anxiety.
- A staff member expresses paranoid thoughts about another staff person and/or camper.
- A staff member becomes depressed, unable to sleep or awaken on time to care for campers.
- A staff member expresses suicidal ideation, e.g. “there’s no sense in going on...”
- A staff member becomes overly obsessed with the cleanliness of the bunk and will not leave until s/he checks in a ritualistic manner to make sure that the chores have been completed.
- A staff member acts out sexually and/or becomes sexually preoccupied.
- A staff member who shows signs of mania, with decreased need for sleep, grandiose delusions and an altered mood state.
- A staff member who reports hearing voices and/or who’s thoughts are difficult to follow.

