



MENTAL HEALTH COLLEGE TOOLKIT

INTRODUCTION

My name is **Rachel**, and I'm a second year student at the University of Michigan. I'm studying biology, health, and society and hope to pursue a career in something related to mental health. During the summer of 2022, I interned at the Blue Dove Foundation with the intention of feeding my passion for mental health and learning more about possible careers for myself. I was not expecting to create something this empowering and important, and I am so glad I was able to be a part of it.

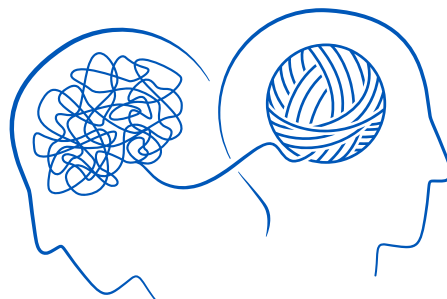
The purpose of this toolkit is to provide college students with a comprehensive explanation of common mental health disorders, resources, definitions, and so much more. Not many college students know or understand the topic, which makes it difficult for them to seek help when they are experiencing mental health challenges. I hope this toolkit gives all college students an understanding of mental health that's basic enough to help them recognize their own mood, behavior, and experiences and potentially connect them to one of the mental health disorders. Knowing that a feeling is not just being crazy, lazy, or weird but rather is a true mental health disorder can work to reduce the stigma associated with mental health and make more college students feel comfortable seeking treatment. Engage with this toolkit however you would like. That may mean using it as a scientific tool to learn the definitions of common mental health disorders or as a tool for you to learn about all the resources you have at your disposal. No matter how you use it, I hope it helps in your journey toward mental wellness.

Warmly,
Rachel Cohn, *Class of 2025*



TABLE OF CONTENTS

- **Statistics**
- **Part 1: Mental Health Values**
 - Being Values-Based Activity
- **Part 2: Mental Illnesses**
 - Depression
 - Anxiety
 - Disordered Eating
 - Bipolar Disorder
 - Substance Use and Addictive Disorders
 - Trauma
- **Part 3: Support and Resources**
 - Resources to Take Advantage of in College
 - Different Types of Therapy
 - Self-Care
 - How to Show Support: Community Building and Proper Terminology
 - National Mental Health Resources
 - Know your Local Resources Activity
 - My Personal Toolkit Activity
 - Jewish Teen Mental Health Resources
- **About the Blue Dove Foundation**



MENTAL HEALTH STATISTICS BY NAMI

YOU ARE NOT ALONE

Millions of people are affected by mental illness each year. Across the country, many people just like you work, perform, create, compete, laugh, love and inspire every day.



1 in 5 Adults in the U.S. are diagnosed with a mental illness each year.

1 IN 20

U.S. adults experience mental illness

17%

of youth (6-17 years) experience a mental health disorder

1 IN 3

young adults (aged 18-25) experienced a mental illness in 2020

3.8 M

had serious thoughts of suicide in 2020

Suicide is the 3rd leading cause of death among those aged 15-24 in the U.S:

90% of people who die by suicide may have experienced symptoms of a mental health condition

12 Month Prevalence of Common Mental Illnesses (All U.S Adults)

1% Schizophrenia
4% Dual Diagnosis

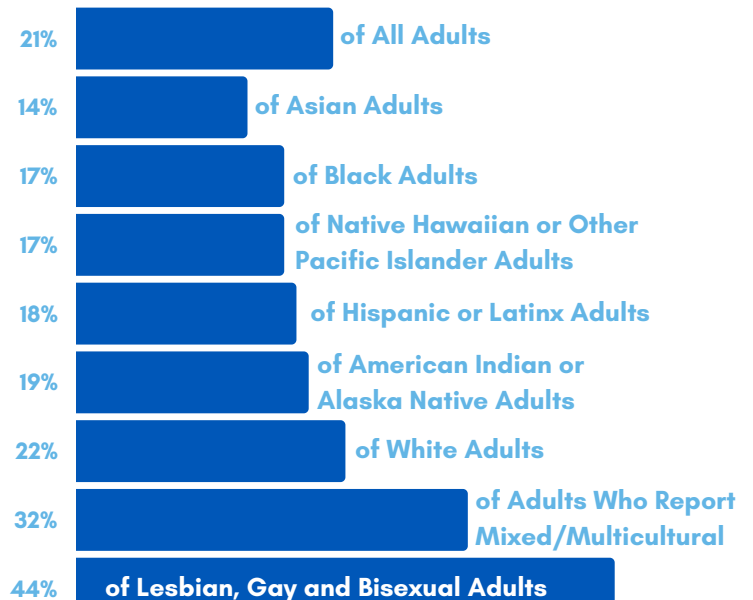
1% Borderline Personality Disorder



3% Bipolar Disorder
8% Depression

1% - Obsessive Compulsive Disorder
4% Post-traumatic Stress Disorder

12 Month Prevalence of any Mental Illness (All U.S Adults)



**Call the NAMI HelpLine at
1-800-950-NAMI (6264)**

Mental health is unique in college due to many factors, such as living in a new environment, being away from loved ones, and trying to manage stress from schoolwork. Here is a look into the current state of mental health of young adults (18-25).

PART I - JEWISH MENTAL HEALTH MIDDOT (JEWISH VALUES)

Our personal and community values help build the foundation on which we stand. They empower us to connect our thoughts to our mental wellness. The Blue Dove Foundation focuses on the following Jewish values in promoting mental wellness.

Note: These values have been adapted from the Blue Dove Foundation's Jewish Mental Health Values. To view their original form visit thebluedovefoundation.org/jewish-mental-health-values.

כל ישראל ארים זה לזה - Kol Yisrael Arevim Zeh La Zeh - All Jews are Responsible for One Another

We are all interconnected in unique and special ways, so we must be invested in the mental wellness and overall well-being of everyone. We must be willing, informed, and prepared to help one another, because we all benefit.



פיקוח נפש - Pikuach Nefesh - Saving a Life

For the Blue Dove Foundation, there is no greater priority than saving a life. This leads to the idea that having order, rules, and structure to your life is not restricting it but rather about enabling us to live our most meaningful lives and helping others do the same.



חסד וגבורה - Chesed u'Gevurah - Balancing Loving Kindness and Discernment

Kindness and limitation balance one another. Kindness requires us to put aside our projections and assumptions about what someone needs and really listen, so we can see what the person in front of us is saying. Too often we diagnose someone or think we know what might "fix" a situation, but when it comes to mental wellness, we must come from a place of listening and openness. We don't want to make anyone feel like they are defined by their illness or struggle. At the same time, we want people to know they are being heard. Unbounded kindness can lead to unrealistic promises, overextending, unhealthy dependence, and depletion. We must understand our limitations. We need to be aware of the realistic nature of our time, resources, and ability.



JEWISH MENTAL HEALTH MIDDOT (JEWISH VALUES)

רפואה שלימה - Refuah Shleimah - Healing and Wholeness

We recognize healing is not just physical; it is holistic, which is to say it has physical, mental, emotional, social, and spiritual components that are all interconnected. We also emphasize healing rather than curing. Even when mental illness is under control, healing and a return to wholeness is in order. We see healing as a process that has many components and may be a lifelong journey.



נושא בעול עם חברו - Nosei B'ol Im Chaveiro - Sharing a Burden with One's Friend

Beyond the idea that we are responsible for one another, we teach the value of supporting another person. Going along with the value of kindness, one of the greatest acts of kindness is to bear a burden with another. However, again, it is important to recognize and establish limitations in how much you can give to someone else.



לפני עיוור - Lifnei Iver - Before the Blind (Inclusivity)

We teach that we must not harm those in vulnerable positions, whether they be due to disabilities (deafness and blindness) or disempowered positions (widows, orphans, strangers, etc.). It is our responsibility to do our best to create a community that meets the needs and celebrates the value of everyone. Rather than looking at a disability or mental illness through the lens of handicaps, we can uphold this value by seeking to ensure all individuals are fully able to participate in the community.



תיקון עולם - Tikkun Olam - Repairing the World

This value focuses on social justice and communal responsibility. What can we, as human beings, do to make this world a better place? Building our community is essential if we're going to help meet the needs of all those who belong to it.

Blue Dove has taken this idea a step further with the value of repairing the soul. The work of repairing the world begins with repairing the soul. Before we are responsible to others, we are responsible for ourselves. In healing ourselves, we heal the world, and in healing the world, we bring healing into our own lives.



ACTIVITY: BEING VALUES-DRIVEN

We each have our own set of values, and being a college student can open us up to new communities and experiences that alter what we prioritize in our lives. The following activity allows us to think about how we can work on our mental health and wellness by creating a set of values we live by.








Below is a list of common values you may hold personally or identify with, because it's a value of a college organization you're a part of, such as a sorority, fraternity, service group, or sports team. Find ones that resonate with you the most, and write them in the shaded row in the table underneath. Feel free to add any other values that are not on the list. Then, think about the Blue Dove mental health value that connects to each of your own values, and place a checkmark in that box. There are questions to help you reflect on the activity on the following page.

Common Values

Justice, Sisterhood,
Brotherhood, Community,
Love, Individuality,
Connection, Engagement,
Philanthropy, Education,
Professionalism, Innovation,
Diversity, Inclusivity,
Compassion, Courage,
Service, Teamwork,
Perseverance, Respect,
Equality, Equity.



ACTIVITY: BEING VALUES-DRIVEN

| My Personal/ Organization's Values | | | | | |
|--|--|--|--|--|--|
| Everyone is Responsible for Each Other  | | | | | |
| Healing and Wholeness  | | | | | |
| Saving a Life  | | | | | |
| Balancing Kindness and Limitation  | | | | | |
| Sharing a Burden with One's Friend  | | | | | |
| Inclusivity  | | | | | |
| Repair the World  | | | | | |

ACTIVITY: BEING VALUES-DRIVEN

REFLECTION QUESTIONS

How can clarifying your values affect your mental health?

Which Blue Dove value did you connect with the most? Why?

Why did you choose to make the specific connections between the values you listed and the Blue Dove values?

PART II - MENTAL ILLNESSES - DEPRESSION

DEPRESSION One of the leading mental health disabilities globally, depression is a serious medical illness that can negatively affect feelings, thoughts, and actions.

Someone who struggles with depression may experience the following signs or symptoms:

- Sadness, irritability, restlessness, or lethargy
- Guilt, worthlessness, or helplessness
- Difficulty thinking, concentrating, or making decisions
- Unexplained pains, headaches, paralysis, or exhaustion
- Physical difficulties such as weight loss or gain, trouble sleeping, or sleeping too much
- Unexplained tearfulness or moodiness
- Difficulty coping or feeling overwhelmed with daily activities
- Thoughts of suicide or death

The exact cause of depression is unknown; however, a number of factors are linked to its development:

- **Life events or trauma:** Continued difficulties such as unemployment, abusive relationships, prolonged work stress, and other traumas or recent events like losing a job, childbirth, or the death of a loved one can “trigger” depression.
- **Family history:** There is not a single gene that causes depression, but it is heritable. This means if a member of your family has or had depression, your risk of the disease increases.
- **Serious or chronic medical illness:** The worry and stress of coping with a serious or chronic illness can lead to depression. Some illnesses also have side effects of depression, even if the illness is unrelated.
- **Medications and substances:** Prescription drugs can cause symptoms of depression, and drug and alcohol use can lead to or result from depression.

PART II - MENTAL ILLNESSES - DEPRESSION

Being a student in college can increase your chances of experiencing depression. Common factors include:

- Feeling overwhelmed and stressed out by school or work
- Being away from family and previous support systems
- Feelings of loneliness if you are struggling to make connections
- Being introduced to a world of alcohol and addictive substances at college parties
- Fear of the future for graduating students
- Lack of sleep in a new environment

Ending the Stigma: Things to Think About

- Someone with depression is not just sad, lazy, and unmotivated; they are suffering a real and serious illness.
- Nobody should ever feel awkward or insecure about receiving the treatment they need to alleviate their depression, whatever that treatment may be.

What treatment options are available for depression? ⁽¹⁾

- Therapy/counseling (individual, couples/family, and group)
- Coping techniques, psychoeducation, and management skills
- Medication or supplements
 - Most commonly prescribed antidepressants include the following:
 - **Selective serotonin reuptake inhibitors (SSRIs):** Lexapro, Zoloft, Prozac, etc.
 - **Serotonin and norepinephrine reuptake inhibitors (SNRIs):** Cymbalta, Effexor, Fetzima, etc.
 - **Norepinephrine and dopamine reuptake inhibitors (NDRIs):** Wellbutrin
- Residential treatment
- Intensive outpatient treatment

PART II - MENTAL ILLNESSES - ANXIETY

ANXIETY We all experience anxiety; worry, nervousness, and fear are normal parts of the human experience. But if it becomes unmanageable, disproportionate to the situation, or persistent after the source is removed, it could indicate a mental health condition.

Major anxiety disorders include:

- Generalized anxiety disorder (GAD): Chronic anxiety and excessive worry and tension, even without reason.
- Panic disorder: Unexpected and repeated panic attacks — sudden periods of intense fear with physical symptoms like chest pain, rapid or irregular heartbeat, shortness of breath, dizziness, or abdominal pain.
- Social anxiety disorder: Overwhelming anxiety and excessive self-consciousness in everyday social situations.
- Post-traumatic stress disorder (PTSD): Ongoing feelings of hypervigilance, unstable mood, panic, or extreme fear after someone experiences a terrifying, shocking, or dangerous event. The person may find themselves reliving the traumatic event.
- Agoraphobia: Anxiety about being in places or situations from which escape might be difficult or embarrassing or in which help will not be given in the case of a panic attack.
- Specific phobia: Irrational or excessive fear of a specific stimulus, which can include thoughts of said stimulus, images, anticipation of it, or even being triggered by the name of the stimulus.
- Obsessive-compulsive disorder (OCD)*: Intrusive, recurring, and unwanted thoughts, ideas or sensations that cause anxiety and result in an inability to control one's thoughts or behaviors.

**OCD was previously categorized as an anxiety disorder, but as the field of mental health has evolved, it has been reconceptualized as its own unique set of disorders. However, the challenges OCD creates are similar to the challenges those with an anxiety disorder face.*

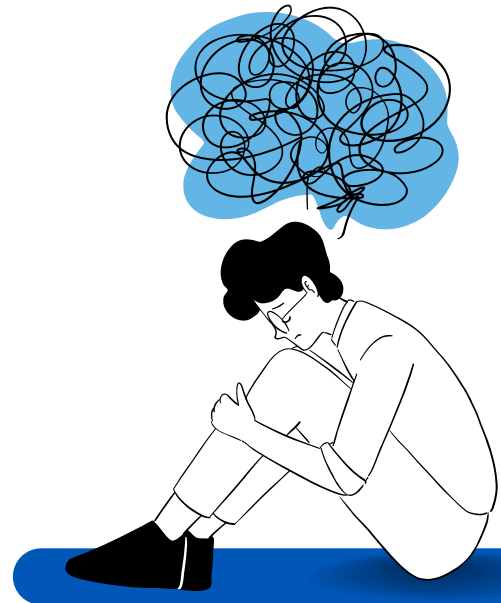
PART II - MENTAL ILLNESSES - ANXIETY

Someone who struggles with anxiety may experience the following signs and symptoms:

- Excessive fear or worry
- Avoidance behaviors
- Obsessive thinking
- Catastrophizing (jumping to extreme negative outcomes)
- Fatigue or insomnia (trouble sleeping)
- Restlessness or a feeling of being on edge
- Trouble focusing
- Feeling short of breath or otherwise physically uncomfortable
- Physical symptoms like a racing heart, tightening of the chest, quick breathing, sweating, trembling, gastrointestinal problems, loss of peripheral vision, dissociation

*Why do some people struggle with anxiety more than others?
An anxiety condition can be caused by a combination of factors:*

- Genetic predisposition
- Learned behavior
- A traumatic experience
- Hormonal and chemical imbalances
- Stressful life events, both big and small
- Certain physical health problems such as diabetes, asthma, or heart disease
- Substance use and misuse
- Other mental health conditions



PART II - MENTAL ILLNESSES - ANXIETY

Being a student in college can increase your chances of experiencing anxiety. Common factors include:

- Feeling overwhelmed and stressed out by school or work
- Being away from family and friends from home if there's an emergency
- New social situations such as Greek life, sports, dorms, or other student clubs
- Being introduced to a world of alcohol and addictive substances at college parties
- Being forced into independence with new responsibilities and having to make decisions that can be overwhelming

Ending the Stigma: Things to Think About

- Anxiety is not a personal weakness but rather a medical illness to be taken seriously.
- Shifting our mindset to see anxiety as a result of different risk factors — as opposed to being caused by mental inferiority — will allow us to create an environment where everyone feels comfortable discussing anxiety openly and getting the appropriate treatment from mental health professionals.

What treatment options are available for anxiety disorders?

- Therapy/counseling
 - There are different types of therapy treatments for different types of anxiety. One type of treatment is exposure therapy, which involves exposing the patient to the situation, event, or object that triggers anxiety, fear, or panic. The goal is for the patient to eventually feel calmer in these situations, as they know they are in a safe space.
- Support groups
- Stress management techniques
- Medication
 - Because the causes and symptoms of anxiety tend to overlap with those of depression, doctors generally prescribe the same antidepressants.

PART II - MENTAL ILLNESSES - DISORDERED EATING

DISORDERED EATING⁽²⁾ encompasses a range of psychological disorders characterized by severe and persistent disturbances in eating patterns that often come with distressing thoughts and emotions.

Disordered eating takes many forms, including:⁽³⁾

- **Anorexia nervosa:** Avoiding or severely restricting food or eating insufficient quantities that lead to being dangerously underweight.
 - Those with this disorder have an intense fear of gaining weight and often experience distorted thinking patterns about body image and food intake. They may weigh themselves repeatedly or engage in other unhealthy behaviors such as excessively exercising and hiding food.
- **Bulimia nervosa:** Recurrent and frequent episodes of restricting food intake, followed by eating unusually large amounts of food without control, followed by forms of compensation such as vomiting, using laxatives or diuretics, fasting, excessive exercise, or a combination of those.
- **Binge-eating disorder:** Losing control over eating with episodes of consuming large amounts of food that are not followed by any kind of purging, excessive exercise, or fasting, often causing those affected to be overweight or obese.
- **Body dysmorphic disorder**⁽⁴⁾: The inability to stop thinking about the perceived flaws in one's appearance. No matter how minor the flaw is, the anxiety and embarrassment it causes can lead someone to avoid social situations.
- **Avoidant restrictive food intake disorder:** When one limits the amount or type of food eaten without the distorted body image or issues with weight many with anorexia face. This mostly occurs in middle childhood and typically means the person does not eat enough calories to sustain themselves and develop properly.

PART II - MENTAL ILLNESSES - DISORDERED EATING

Each eating disorder comes with its own, sometimes fatal, set of symptoms that include the following (listed by disorder): ⁽⁵⁾

Anorexia:

- Extreme thinness
- Unwillingness to maintain a normal or healthy weight
- Intense fear of gaining weight
- Low self-esteem, influenced by their perceptions of body weight
- Physical deteriorations that can be fatal, including:
 - Thinning of bones
 - Severe malnutrition
 - Brittle hair and nails, and growth of lanugo (fine hairs on arms and legs to maintain body heat)
 - Gastrointestinal disturbance/damage
 - Dry and yellowish skin
 - Low blood pressure
 - Brain and heart damage
 - Slowed breathing and pulse
 - Lethargy, sluggishness, or feeling tired
 - Infertility

Bulimia:

- Inflamed and sore throat from stomach acid exposure
- Severe malnutrition
- Gastroesophageal reflux disease and other gastrointestinal disturbances
- Swollen salivary glands in neck and jaw
- Sensitive and decaying teeth from stomach acid exposure
- Severe dehydration from purging liquids
- Electrolyte imbalance that can lead to stroke or heart attack

PART II - MENTAL ILLNESSES - DISORDERED EATING

There are many other risk factors for developing eating disorders, including: ⁽⁶⁾

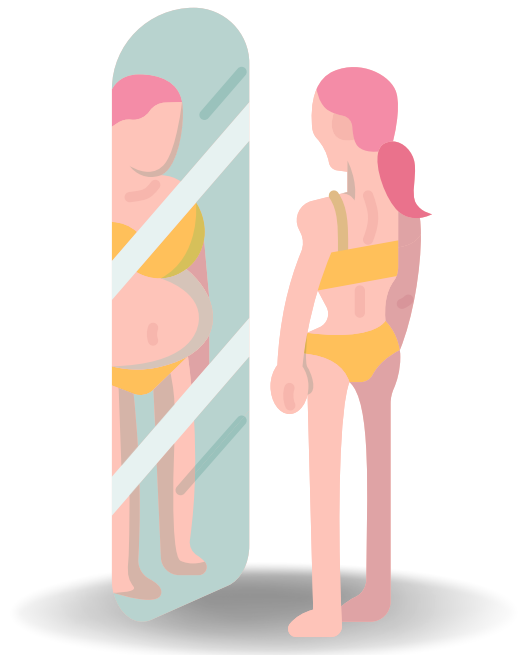
- **Family history:** Eating disorders are much more likely to occur in people who have had parents or siblings with one because of its genetic component.
- **Other mental health disorders:** People with eating disorders are likely to have a history with illnesses like depression and anxiety disorders, especially obsessive-compulsive disorder (OCD).
- **Engaging in forms of media** that promote unrealistic body expectations
- **Traumatic event or excessive stress**

Being a student in college can increase the chance of developing disordered eating due to many factors, including:

- Anxiety and depression that stem from school or work
- Low self-esteem from being surrounded by so many new people
- Inaccessibility to healthy food options in dining halls and unaffordable alternatives
- Social clubs and organizations where hierarchies are created based on appearance

Ending the Stigma: Things to Think About

- Eating disorders may occur as a mood regulation or coping mechanism for other situations instead of just in relation to one's weight.
- People of all body shapes and sizes can feel insecure and experience eating disorders, so it is important to not dismiss someone because their body "looks healthy."
- Ending stigma around obesity can further decrease some of the societal pressures that may trigger body dysmorphia and disordered eating.



PART II - MENTAL ILLNESSES - DISORDERED EATING

What treatment options are available for eating disorders?⁽⁷⁾

- Individual, group, and/or family psychotherapy
- Medical care and monitoring
- Nutritional counseling
- Medications — Antidepressants are the most common, but doctors have started to prescribe ADHD medications for binge eating.



PART II - MENTAL ILLNESSES - BIPOLAR DISORDER

BIPOLAR DISORDER⁽⁸⁾ describes shifts in mood, energy, and activity levels that can be sudden and surprising to the individual and others. There often is no obvious or identifiable trigger.

There are three types of bipolar disorder

- **Bipolar I:** Defined by manic episodes, although depressive and mixed episodes may occur.
- **Bipolar II:** Defined by a pattern of depressive and hypomanic episodes or incidents of extreme changes in mood, emotions, energy level, or activity level.⁽⁹⁾
- **Cyclothymic (cyclothymia):** Defined by episodes that are more mild but that persist for at least two years in adults or at least one year in children and adolescents. Because it is more persistent but less intense, it does not meet the diagnostic requirements for types I and II.

Individuals experience bipolar disorder differently, but the most common signs or symptoms include:

- Someone undergoing a **manic episode** might experience:
 - Intense feelings of elatedness, irritability, or energized behavior
 - Racing thoughts
 - A loss of appetite
 - Urgency in conversation with inappropriate and unwarranted energy or without clarity (called pressure speech)
 - Delusions or a belief that they are unusually important, talented, or powerful
 - Intense, sudden, or unprovoked irritability

PART II - MENTAL ILLNESSES - BIPOLAR DISORDER

- Someone undergoing a **depressive episode** might experience:
 - A low or empty mood
 - Feelings of helplessness, indifference, or hopelessness
 - Loss of motivation
 - Fatigue or lethargy
 - Sleeping too little or too much
 - Trouble making decisions
 - Difficulty carrying out daily tasks
 - A loss of interest in activities that once gave them pleasure
 - Thoughts of death or suicide

Researchers are studying the potential causes of bipolar disorder. Most experts agree there is no single risk factor; rather, it is likely that many factors contribute.

- Having a parent or sibling with bipolar disorder increases the likelihood of developing it.
- Some research suggests individuals with certain genes are more likely to develop bipolar disorder, though no single gene can cause it. More research may help the development of new treatments.

One must have the genetic predisposition for bipolar disorder, so college might not cause the disorder to manifest. But different factors of the college experience can trigger depressive or manic episodes in the following ways:

- Loneliness
- Being away from family or one's support system at home
- Stress and being overwhelmed by schoolwork
- Lack of sleep for a variety of reasons, including being in a new environment
- Being introduced to a world of alcohol and addictive substances at college parties
- Increased use of caffeine or other stimulants
- Inability to keep up with prescribed medications due to new daily routine

PART II - MENTAL ILLNESSES - BIPOLAR DISORDER

Ending the Stigma: Things to Think About

- Bipolar disorder is not a personal weakness, but rather a medical illness to be taken seriously, especially because it can sometimes be unpredictable.
- Educating ourselves about bipolar disorder to better understand it will allow us to create an environment where everyone feels comfortable discussing it openly and getting the appropriate treatment from mental health professionals.

What treatment options are available for bipolar disorder? ⁽¹⁰⁾

Bipolar disorder is a lifelong illness. The episodes of mania and depression will come back over time, so treatment must be long-term and usually includes both medication and psychotherapy.

- Medication
 - Mood stabilizers and second-generation antipsychotics for manic episodes
 - These medications work similarly to antidepressants in that they target neurotransmitters to lessen symptoms. We know less about exactly which neurotransmitters.
- Medications that target sleep or anxiety
- Antidepressants for depressive episodes
- Psychotherapy
 - Interpersonal and social rhythm therapy that works to improve medication adherence, manage stressful life events, and reduce disruptions in social rhythms and family-focused therapy.



PART II - MENTAL ILLNESSES - SUBSTANCE USE AND ADDICTIVE DISORDERS

SUBSTANCE USE AND ADDICTIVE DISORDERS⁽¹¹⁾

Substance use disorder (SUD) is a complex condition where one uses a substance despite harmful consequences to the point where their daily living is impaired. Symptoms can range from moderate to severe, with addiction being the most severe form of SUDs.⁽¹²⁾

SUD symptoms follow patterns that fall under four categories:⁽¹³⁾

- **Impaired control:** A craving or strong urge to use the substance; desired or failed attempts to cut down or control substance use.
- **Social problems:** Failing to complete major tasks at work, school, or home; giving up or cutting back on social work or leisure activities because of substance use.
- **Risky use:** Using a substance in risky or unsafe settings; continuing to use despite known problems.
- **Drug effects:** Tolerance (need for larger amounts to get the same effect); withdrawal symptoms (different for each substance).

Someone who is struggling with a substance use or addictive disorder may experience the following:⁽¹⁴⁾

- Behavioral changes, such as: Lack of engagement or interest in school or work, changes in appetite or sleep patterns, sudden mood swings, lack of motivation, mental health challenges.
- Physical changes, such as: Sudden weight gain or loss, deterioration of physical appearance, health issues, unusual smells on body/breath/clothing.
- Social changes, such as: Changes in friends or hobbies, legal problems related to substance use, continued use of substance despite its negative impact on relationships, financial challenges.

PART II - MENTAL ILLNESSES - SUBSTANCE USE AND ADDICTIVE DISORDERS

Individuals who experience SUD are more likely to experience a co-occurring mental illnesses. The most common ones include anxiety, depression, and ADHD.

⁽¹⁵⁾

Risk factors associated with substance use and addictive disorders include: ⁽¹⁶⁾

- Genetics and family history of substance use or addiction
- Favorable attitudes toward the behavior at home growing up
- Substance use by adults/parental figures growing up
- Abuse as a child
- Constant exposure to stress

Being a student in college can increase the chance of developing a substance use or addictive disorder. Common factors include:

- Constant or more extreme stress from school or work
- Easy access to drugs and alcohol
- Drugs and alcohol not being well regulated in off-campus environments
- Peer pressure and/or hazing in organizations that put individuals in a situation to engage with substances they might not have tried otherwise
- Not having an authority figure like parents or guardians to set and enforce rules regarding substance use.
- Being away from a support system that encourages one to make good decisions.



PART II - MENTAL ILLNESSES - SUBSTANCE USE AND ADDICTIVE DISORDERS

Ending the Stigma: Things to Think About

- Substance use disorders are not a result of a moral weakness or flawed character; they are complex disorders with behavioral components.
- No one is “stronger” than addiction; it can happen to anyone because of environmental and biological components.

What are the treatment options for substance use and addiction?⁽¹⁷⁾

- Detoxification centers
- Counseling and behavioral therapies
- Rehabilitation programs, such as short-term residential treatments, long-term therapeutic communities, and recovery housing
- Self-help and support groups
- Medications that support people experiencing withdrawal symptoms during detoxification and/or medications for co-occurring mental illnesses.



PART II - MENTAL ILLNESSES - TRAUMA

TRAUMA A traumatic event is a shocking, scary, or dangerous experience that affects someone emotionally. It can be any situation that leaves a person feeling powerless, and the more frightened and helpless someone feels, the more likely they are to sustain trauma. What is traumatic or distressing for one person may not be the same for someone else.

Each person has unique challenges associated with trauma, but there are multiple common responses, including:

- Worrying excessively
- Having frightening thoughts
- Reliving the traumatic experience
- Feeling disconnected or numb
- Returning frequently to describing the event in present-day conversations

As a result of trying to cope with trauma, a person may:

- Avoid people or places that bring back disturbing memories/responses
- Be very jumpy or easily startled
- Withdraw from others
- Cry frequently
- Have specific stimuli that set them off
- Struggle with trusting and relying on others

Physical symptoms may include:

- Digestive issues
- Chronic aches and pains
- A racing heartbeat
- Difficulty concentrating
- Insomnia or nightmares
- Eating disorders
- An inability to relax/increased alertness to surroundings



PART II - MENTAL ILLNESSES - TRAUMA

It is unknown why some experience trauma and others do not, but many believe genetics play a role in giving someone the predisposition while the experience triggers the changes in the brain. A traumatic event is a significant event that creates severe physical and/or emotional distress, such as:

- Natural disasters, such as hurricanes, fires, and tornadoes
- Any major loss, such as divorce, losing a job, moving
- Death, whether it is someone you knew or didn't know very well
- Abuse or neglect
- A medical diagnosis or severe injury
- Witnessing someone else's traumatic event or supporting someone who has experienced a traumatic event, such as a terrorist attack



Individuals can experience trauma at any point throughout their life. Challenging experiences in college may affect students in different ways and can potentially cause trauma. Examples include:

- Being alone and away from parents/guardians and family for the first time
- Consumption of and interactions with alcohol or drugs – using too much of a substance, unknowingly ingesting a substance without one's consent, or a negative interaction with someone who has used a substance
- Sexual harassment, assault, or rape
- Illnesses developed from a new environment

PART II - MENTAL ILLNESSES - TRAUMA

Ending the Stigma: Things to Think About

- If someone endures trauma, it is always serious no matter the occurrence, and people cannot “just get over it.”
- Something that is traumatizing for one person might not be traumatizing for someone else.
- Do not dismiss people dealing with trauma just because the experience does not seem bad enough to you; that person is experiencing legitimate psychological, physical, and emotional stress.

What are the treatment options for trauma?

- **Therapy**
 - **Somatic experiencing:** therapy that focuses on bodily sensations rather than thoughts and memories
 - **Cognitive-behavioral therapy (CBT):** a type of talk therapy that helps process and evaluate thoughts and feelings
 - **Eye movement desensitization and reprocessing (EMDR):** combines talk therapy with eye movements that can help “unfreeze” traumatic memories
 - **Rapid resolution therapy (RRT):** a relatively new approach that helps individuals permanently overcome the negative effects of trauma with a fast and relatively painless approach
- Psychiatric counseling
- In-patient treatment



PART III - SUPPORT AND RESOURCES

Resources to Take Advantage of in College

Most colleges have many types of support for students struggling with their mental health. They may include:

- **Student Resources**
 - Free counseling and psychological services
 - Short-term counseling for every student who needs it
 - Walk-in services and 24-hour phone support
 - Workshops and support groups
 - “Wellness zones” on campus to help people manage stress and relax
 - Databases to research other resources, learn about specific illnesses, and more
 - Services that can provide referrals to psychiatrists or therapists
 - Services that provide wellness checks
- **Academic and career support**
 - Academic advisors, career centers, and professional clubs to help manage the stress and anxiety that come from academics and figuring out a career.
- **Hospitals and clinics**
 - Programs designed for specific mental illnesses that provide more intensive treatment
 - Departments of psychiatry that provide outpatient care, hospitalization, and other emergency services

Note: Students would be responsible for paying any costs these services charge.



PART III - SUPPORT AND RESOURCES

Not every school offers all of these services, but it is important to know the resources your school does provide so you can take advantage of them. These services exist to support students in need, so there is no reason to be embarrassed or wary of utilizing them.

Many colleges also have an ample number of student clubs or organizations that have their own mental health resources, such as:

- Sorority and fraternity chapters may have mental health and wellness officers whose jobs are to provide resources, educate their chapters, and be a support system for those in need.
- Professional fraternities can help manage academic stress and set your career on track, which can provide reassurance about the future.
- Many faith-based groups have their own set of mental health resources.
- Many schools have volunteer and service clubs that focus on supporting those struggling with mental health in your school's community.
- Writing or journalism clubs that can be an outlet for people to express their feelings.

There are so many more resources out there, and if your school is lacking a club you think will help people with their mental wellness, start it yourself!



PART III - SUPPORT AND RESOURCES

Different Types of Therapy

There are many ways ⁽¹⁸⁾ to improve your mental health and mood in addition to traditional talk therapy. Seeking professional treatment for mental illnesses can sometimes be scary or overwhelming to think about. There are many types of therapy ⁽¹⁹⁾ and mental health support available; it is not one size fits all.

Below are a few alternatives to traditional talk therapy. The following therapies often take place under the guidance of a professional, but you can employ them on your own to invoke the same feelings of relaxation, safety, wellness, and freedom. They are perfect to try in a dorm room or college apartment when feelings of anxiety and depression are overwhelming, but the thought of seeking professional care is even more so.



PART III - SUPPORT AND RESOURCES

- **Art therapy**

- Helps people cope with emotional conflicts and increase self-awareness.
- Involves creating any type of art, including sculptures, drawings, and paintings, to express your emotions, which you then discuss with the therapist.
- Helps distract from pain and anxiety.
- Influences brain-wave patterns and substances released in the brain.
- Enables one to express hidden emotions; reduces stress, fear, and anxiety; and provides a sense of freedom.

- **Dance therapy**

- Uses physical movements and activity to release special neurotransmitters and endorphins and create a state of well-being.
- Can help people do the following:
 - Develop positive body image
 - Improve self-esteem
 - Reduce stress, anxiety, and depression
 - Decrease isolation and chronic pain
 - Increase communication skills
 - Encourage a sense of well-being

- **Music therapy**

- Involves listening to music, making music, discussing music, and singing as well as guided imagery with music to improve mood and provide relaxation.
- Can help ease stress, apprehension, fear, depression, sleeplessness, and muscle tension.
- Can lower heart rate, blood pressure, and breathing rate in times of anxiety or stress.
- Music therapists believe the rhythm of music is beneficial, because our heart beat synchronizes to it. At the same time, self-expression in music therapy can reveal subconscious thoughts and feelings.



PART III - SUPPORT AND RESOURCES



- **Imagery**

- Uses mental exercises focusing on visualization techniques that reduce stress, anxiety, and depression.
- Can help to relax and reduce anxiety with visualization or imagery through exercises such as palming and guided imagery.
- Supports both mental and physical health.

- **Virtual therapy**

- Provides therapy or mental health support from any location. Virtual therapy, also known as online therapy or teletherapy, takes place via secure phone or video calls. It is as effective as in-person alternatives.
- Since the COVID-19 pandemic, virtual therapy has become increasingly popular and will continue to be an option for patients. It has been found to be just as effective as in-person therapy and supports those who may not feel comfortable leaving their house to talk to someone.



PART III - SUPPORT AND RESOURCES

Self-Care

Self-care is different for everyone, and it can be categorized into several buckets, including emotional, physical, mental, social, and spiritual. The first step to creating a self-care practice is to get more in touch with your personal needs and interests.

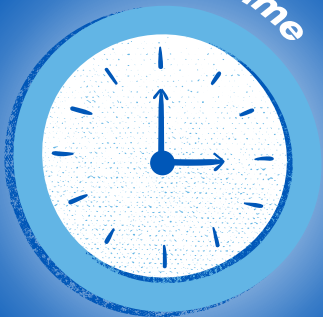
Self-care comprises two ideas: Intention & Time

Intention



If you had free time with zero obligations for a day, what would you do? How would you spend your time? Everyone has a different answer, and there are no wrong ones. Be willing to be honest with yourself about what experiences make you happy, no matter how stigmatized they may be. Hold yourself accountable for recognizing when something is not making you happy and fulfilled.

Time



A little self-care is better than none at all. The key is to make the time, and change your mindset to include self-care in your daily (or weekly) routine, even with your busy college schedule. When you use time and intention in your self-care practice, you'll find your mind will be clearer, and you'll feel more relaxed and re-energized.

PART III – SUPPORT AND RESOURCES

Getting started with self-care may include:



Being social

Being social in college can be hard, but once you find the community or group that makes you feel safe and supported, your journey to mental well-being will be so much easier.

Being alone

In college, there is the notion that you should always be spending your time with others, or you are not making the most of your college experience. This could not be farther from the truth; you need to take time for yourself to recharge and relax.



Getting organized



- Create an achievable to-do list each day that will help you feel accomplished but will not overwhelm you.
- Plan meals for the week to reduce stress around what you're going to eat in a day. Pre-planning meals — especially in college — can ensure you're nourishing your body even when overwhelmed with so many other things
- Learn to say no, even when it comes to going out with your friends at night and partying. It is OK to have a night in to recover and keep your body safe.

Reflecting

Write in a journal, make a list of important things and people in your life, practice gratitude.



PART III – SUPPORT AND RESOURCES

Relaxing/getting rest

- It may seem so hard to get adequate sleep in college with all the classwork and social scene, but really try to prioritize sleep. It can work wonders for your mental wellness.
- Yes, college classes are extremely difficult and come with lots of work, but creating study systems for yourself with lots of breaks can be helpful to find the right balance between rest and work.



Treating yourself



- Take yourself out to a nice meal, and spend money doing something you wouldn't normally do.
- Managing your money and spending in college can be a source of anxiety and stress, but it is important to step back and allow yourself to be treated every so often — no matter the cost.

Moving your body

- Explore your college town, whether by hiking along some of its nature trails or walking through the city looking at all the stores and restaurants.
- Going to the gym can be scary in college, so do not feel pressured to go if that isn't your thing. Try alternative ways to stay active like going on walks with friends, trying a dance class, or even just walking to class instead of driving.



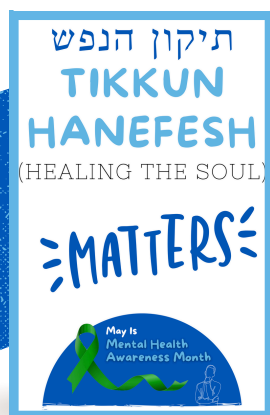
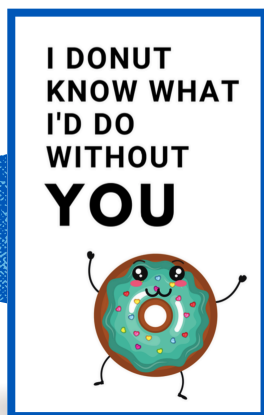
PART III - SUPPORT AND RESOURCES

Self-Care Through Gratitude

Gratitude has been proven to improve our own feelings of contentment and happiness. Expressing gratitude can boost self-esteem, enhance empathy, increase mental strength, and even help you sleep better. Creating a gratitude list, sending a card to someone, and journaling are all ways to practice gratitude. Thinking about who else or what else you are thankful for can help you work on yourself and your self-care by allowing you to relax, reflect, and feel joy.

Send an eCard to someone you feel grateful for to make them feel appreciated and make yourself feel joy!

Visit: <https://thebluedovefoundation.org/ecard>



PART III - SUPPORT AND RESOURCES

How to Show Support: Community Building and Proper Terminology

Helping your friends and those around you feel like they are a part of a community:

- Feeling like you do not belong is a huge reason people struggle with mental health in college. Going out of your way to make sure everyone feels like an essential part of the community will help them feel comfortable and supported.
- Treat everyone with care and respect, because you do not know what they are struggling with internally.
- Helping someone feel like they belong may allow them to be more open with you about their struggles. If they do open up to you, be sure to actively listen and keep your conversations private to create a sense of trust.

Mental Health Terminology and Glossary

Using the correct terminology when having conversations about mental health or anything else will make your friends and others who are struggling feel accepted, supported, and comfortable talking to you about their feelings. This is not an exhaustive list; rather, it serves as a jumping point to help us think about the way we are using language and how it affects others.



PART III - SUPPORT AND RESOURCES

| <i>Avoid using these terms</i> | <i>Use these instead</i> |
|---|--|
| Mentally ill person | <p>Person with mental illness</p> <ul style="list-style-type: none"> This makes people feel like a person first, above their illness. Note: Not everyone prefers person-first language. Follow the lead of the person you are talking with. |
| Normal or regular behavior | <p>Typical behavior</p> <ul style="list-style-type: none"> There is no clear definition of “normal” or “regular” behavior. “Typical” behavior helps us understand what is appropriate developmentally and is less judgemental. |
| Committed suicide or unsuccessful suicide attempt | <p>Died by suicide/Suicide survivor</p> <ul style="list-style-type: none"> Saying “commit” makes suicide seem like a crime, which places blame and furthers the stigma around suicide. |
| I am so OCD. That’s psychotic. The weather is being bipolar. | <p>I really like things to be organized. That’s interesting, intense, or unexpected. The weather has changed a lot today.</p> <ul style="list-style-type: none"> Using mental illnesses as adjectives inaccurately depicts them, which creates stigma and wrong assumptions |
| I’m going to be bad and have dessert. I’m so fat, etc. | <p>I would like dessert/I am feeling bloated or full</p> <ul style="list-style-type: none"> Food items do not have moral value, and body weight/size are not aspects of our worth. |

For a detailed glossary of mental health terms, see [Mental Health Glossary](#).

PART III - SUPPORT AND RESOURCES

National Mental Health Resources

988 Suicide & Crisis Lifeline | If you or someone you know is in immediate crisis, text or call 988. Learn more at 988lifeline.org. | 988 has been designated as the new three-digit dialing code that will route callers to the National Suicide Prevention Lifeline. Call or text 988 for 24/7, free and confidential support for people in distress, prevention and crisis resources for you or your loved ones, and best practices for professionals. The previous Lifeline phone number (1-800-273-8255) will always remain available to people in emotional distress or suicidal crisis.

Crisis Text Line | Text HOME to 741741 to connect with a Crisis Counselor 24/7. Learn more at crisistextline.org. | Free 24/7 support at your fingertips. A live, trained Crisis Counselor receives the text and responds, all from our secure online platform. The volunteer Crisis Counselor will help you move from a hot moment to a cool moment.

National Eating Disorders Association (NEDA) | 1-800-931-2237
www.nationaleatingdisorders.org/ | Supports Individuals and families affected by eating disorders and serves as a catalyst for prevention, cures, and access to quality care. The NEDA Helpline is available Monday-Thursday from 9 a.m. - 9 p.m. and Friday from 9 a.m. - 5 p.m. EST.

For a complete list of crisis lines and mental health resources visit thebluedovefoundation.org/resource_type/mental-health-support/

For Jewish mental health resources visit <https://thebluedovefoundation.org/jewishresources/>

PART III - SUPPORT AND RESOURCES

Activity - Know Your Local Resources

One of the best ways you can support your own mental health is by learning about the resources you have in your area. The journey toward mental health is not supposed to be taken alone; you should know who you can call on for help.

Take some time to research the local resources, so if you need them, you will know where to go. Record their name, phone number, location, hours of operation, and their service. You may not need to record each piece of information for every resource; record what you need.



Name of my organization's mental health and wellness officer (or similar title): _____











An adult I feel comfortable going to for help:









PART III - SUPPORT AND RESOURCES



My go - to person/people for support when I need it: _____









My campus health center:









My campus wellness/counseling center:









Local/campus text or phone hotlines:











PART III - SUPPORT AND RESOURCES



Local private providers (check with your health insurance): _____









Peer counseling:











PART III - SUPPORT AND RESOURCES

Activity - My Personal Toolkit

Use the template below to write out answers to the prompts. Know these answers, so you can use them whenever you need to. Also, thinking about your answers can help you support your mental health in ways you might never have considered before. Try to write an answer to all the prompts, as you never know when they will be useful. When you're done, rewrite all of your answers in the personality thought bubbles on the following page.

One thing I can do to calm myself.

One thing I will tell myself on a bad day.

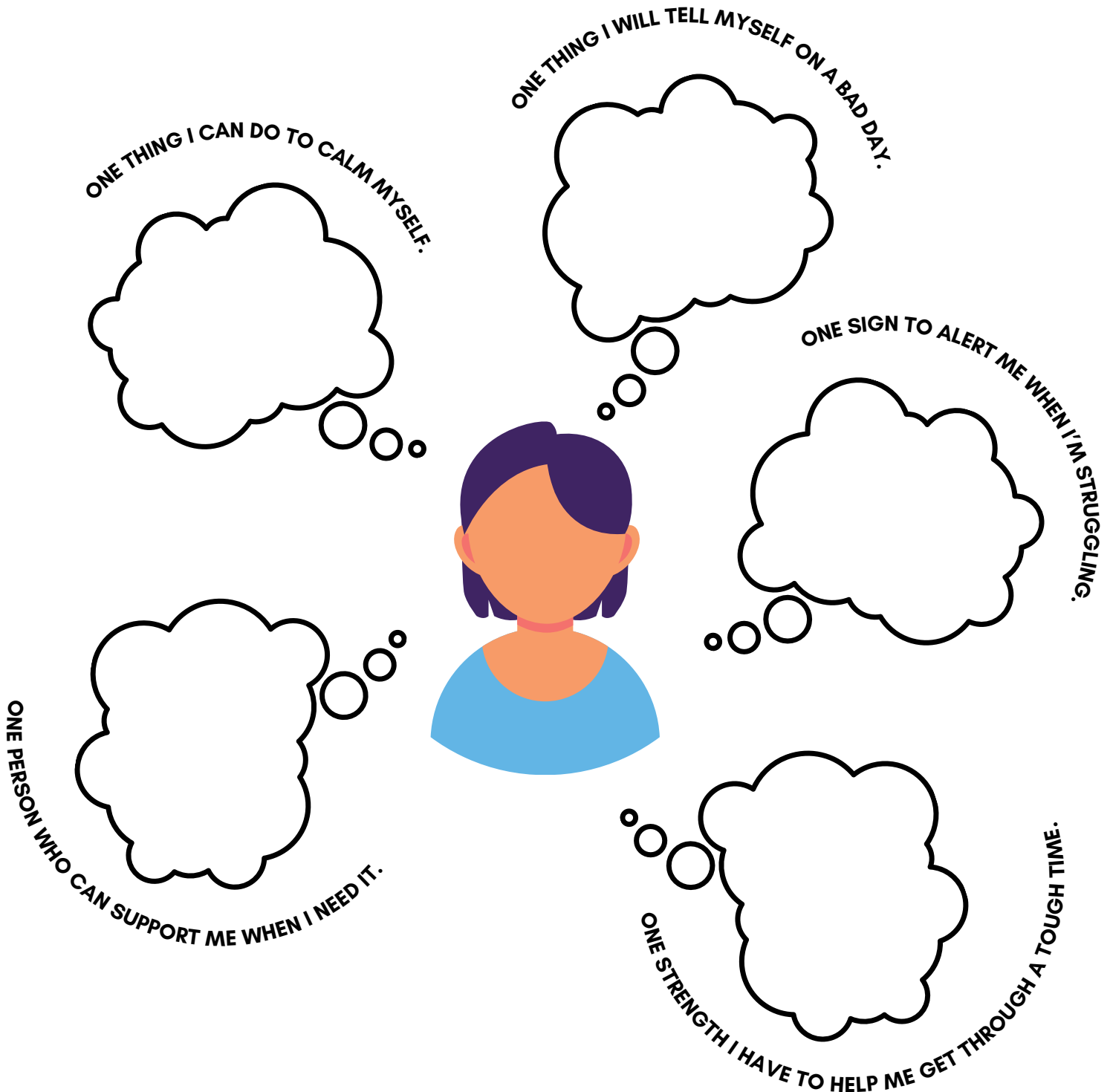
One sign to alert me when I'm struggling.

One person who can support me when I need it.

One strength I have to help me get through a tough time.

PART III - SUPPORT AND RESOURCES

Activity - My Personal Toolkit



FOOTNOTES

- (1) <https://www.webmd.com/depression/how-different-antidepressants-work>
- (2) <https://psychiatry.org/patients-families/eating-disorders/what-are-eating-disorders>
- (3) <https://www.nimh.nih.gov/health/topics/eating-disorders>
- (4) <https://www.mayoclinic.org/diseases-conditions/body-dysmorphic-disorder/symptoms-causes/syc-20353938#:~:text=Body%20dysmorphic%20disorder%20is%20a,may%20avoid%20many%20social%20situations>
- (5) <https://www.nimh.nih.gov/health/topics/eating-disorders>
- (6) <https://www.mayoclinic.org/diseases-conditions/eating-disorders/symptoms-causes/syc-20353603>
- (7) <https://www.nimh.nih.gov/health/topics/eating-disorders>
- (8) <https://www.nimh.nih.gov/health/topics/bipolar-disorder>
- (9) <https://my.clevelandclinic.org/health/diseases/21774-hypomania#:~:text=What%20is%20hypomania%3F,and%20be%20noticeable%20by%20others>
- (10) <https://www.nimh.nih.gov/health/topics/bipolar-disorder>
- (11) <https://www.nimh.nih.gov/health/topics/substance-use-and-mental-health>
- (12) <https://nida.nih.gov/publications/research-reports/common-comorbidities-substance-use-disorders/part-1-connection-between-substance-use-disorders-mental-illness>
- (13) <https://psychiatry.org/patients-families/addiction-substance-use-disorders/what-is-a-substance-use-disorder>
- (14) <https://www.mentalhealth.gov/what-to-look-for/mental-health-substance-use-disorders>
- (15) <https://nida.nih.gov/publications/research-reports/common-comorbidities-substance-use-disorders/part-1-connection-between-substance-use-disorders-mental-illness>
- (16) <https://newsinhealth.nih.gov/2015/10/biology-addiction>
- (17) <https://www.addictioncenter.com/treatment/medications/>
- (18) <https://www.urmc.rochester.edu/encyclopedia/content.aspx?ContentTypeID=85&ContentID=p07338>
- (19) <https://www.psychologytoday.com/us/types-of-therapy>

ABOUT THE BLUE DOVE FOUNDATION

The Blue Dove Foundation was created to address mental illness and addiction in the Jewish community and beyond. We work with organizations and communities – both Jewish and interfaith – across the country and around the world.



Our Work

1. Educate the community about mental health through a Jewish lens.
2. Produce powerful and engaging educational resources about the connections between mental wellness and Judaism.
3. Spearhead and design programs that can be replicated easily in communities across the country: mental health Shabbat dinners, various training programs, interactive events with speakers, and more.

Contact Information

info@thebluedovefoundation.org
(404) 490-2391

Our Mission

Transforming the way the Jewish community understands and responds to mental health.

Our Vision

A healthy, vibrant Jewish community that is welcoming and knowledgeable about mental health.

Our Values

The Blue Dove Foundation looks to traditional Jewish values – or middot – to guide as we strive to eliminate the shame and stigma around mental illness:
tikkun olam (repairing the world);
pikuach nefesh (saving a life);
refuah sleimah (healing and wholeness);
kol Yisrael arevim zeh la zeh (all Jews are responsible for one another);
nosei b'ol im chaveiro (sharing a burden with one's friend);
lifnei iver (inclusivity);
chesed u'gevurah (balancing loving kindness and discernment); and
b'tzelem Elohim (created in G-d's image).

WHY THE DOVE?

In the book of Genesis, Noah released a dove after the great flood in order to see if the water had subsided. It came back carrying a freshly plucked olive leaf (Hebrew: **עלה זית** alay zayit), a sign of life and of God's bringing Noah, his family, and the animals to a renewed land.

The dove represents peace of the deepest kind. It soothes and quiets our worried or troubled thoughts, enabling us to find renewal in the silence of the mind. Its roles as a spiritual messenger, maternal symbol, and liaison impart an inner peace that helps us go about our lives calmly and with purpose. Some believe the dove also represents hope, while others believe it denotes freedom.

Bringing peace, life, hope, and freedom for those facing addiction or other mental health challenges is the goal of the Blue Dove Foundation.

