

Activity Plan



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NAME OF THE ACTIVITY:

SIGNS VS SYMPTOMS

OVERVIEW

THIS SESSION EQUIPS PARTICIPANTS WITH PRACTICAL SKILLS TO RECOGNIZE EARLY WARNING SIGNS OF MENTAL HEALTH STRUGGLES IN YOUNG PEOPLE. THROUGH HANDS-ON ACTIVITIES, GROUP DISCUSSION, AND CASE ANALYSIS, THEY LEARN TO DIFFERENTIATE BETWEEN SIGNS AND SYMPTOMS, ASSESS RISK, AND INTERPRET LESS VISIBLE INDICATORS OF DISTRESS.

OBJECTIVES:

TO BUILD PARTICIPANTS' CONFIDENCE IN IDENTIFYING BEHAVIORAL RED FLAGS, UNDERSTANDING THE DIFFERENCE BETWEEN NORMAL FLUCTUATIONS AND PERSISTENT CONCERNs, AND APPLYING THE MHFA FRAMEWORK TO RESPOND TO YOUNG PEOPLE WITH EMPATHY AND WITHOUT ASSUMPTIONS.

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COMPLEXITY AND TIME:

LEVEL 2, 90 MINUTES

GROUP SIZE:

30 PARTICIPANTS

THEMES ADDRESSED:

MENTAL HEALTH, SIGNS AND SYMPTOMS
MENTAL HEALTH LITERACY

MATERIALS:

SIGNS AND SYMPTOMS CARDS
SHORT DESCRIPTIONS OF YOUNG PEOPLE
LIST OF NON-VERBAL SIGNS

TARGET GROUP:

YOUNG ADULT FROM 18-30 YEAR

RESOURCES:

SIGNS AND SYMPTOMS FLASHCARDS:

[HTTPS://WWW.CANVA.COM/DESIGN/DAGM_MUCNLW/YFPLOY6UXZ9JFHGSSFICQ/EDIT?
UTM CONTENT=DAGM_MUCNLW&utm campaign=designshare&utm medium=link2&utm source=sharebutton](https://www.canva.com/design/DAGM_MUCNLW/YFPLOY6UXZ9JFHGSSFICQ/EDIT?utm_content=DAGM_MUCNLW&utm_campaign=designshare&utm_medium=link2&utm_source=sharebutton)

LIST OF NON-VERBAL CUES:

[HTTPS://WWW.CANVA.COM/DESIGN/DAGND2W8ANQ/OFWIREP7I2LGTKIZFP066A/EDIT?
UTM CONTENT=DAGND2W8ANQ&utm campaign=designshare&utm medium=link2&utm source=sharebutton](https://www.canva.com/design/DAGND2W8ANQ/OFWIREP7I2LGTKIZFP066A/EDIT?utm_content=DAGND2W8ANQ&utm_campaign=designshare&utm_medium=link2&utm_source=sharebutton)

INSTRUCTIONS:

AT THE BEGINNING OF THE SESSION, GROUPS OF PARTICIPANTS WILL RECEIVE FLASHCARDS WITH DIFFERENT BEHAVIORS (SOCIAL WITHDRAWAL, MOOD SWINGS, EXCESSIVE FATIGUE). THEY CATEGORIZE THESE AS SIGNS OR SYMPTOMS AND DISCUSS HOW THEY MIGHT PRESENT DIFFERENTLY IN YOUNG PEOPLE (20 MIN). THIS ACTIVITY STRENGTHENS THEIR ABILITY TO ASSESS FOR RISK OF HARM BY IDENTIFYING RED FLAGS IN BEHAVIOR. YOU CAN ASK THEM:

“WAS IT HARD TO DECIDE IF SOMETHING WAS A SIGN OR A SYMPTOM?”

“HOW DO YOU UNDERSTAND THE DIFFERENCE BETWEEN SIGNS AND SYMPTOMS?”

“HOW CAN WE DIFFERENTIATE BETWEEN USUAL EMOTIONAL UPS AND DOWNS AND WARNING SIGNS OF A DEEPER MENTAL HEALTH ISSUE?”

YOU WILL THEN INTRODUCE THE MHFA FRAMEWORK, HIGHLIGHTING THE IMPORTANCE OF RECOGNIZING PATTERNS RATHER THAN ISOLATED INCIDENTS. PARTICIPANTS WILL EXAMINE SHORT DESCRIPTIONS OF YOUNG PEOPLE DISPLAYING MENTAL HEALTH CONCERN (30 MIN). WORKING IN GROUPS OF 3 OR 4, THEY DISCUSS WHAT SIGNS STAND OUT, WHICH SYMPTOMS MAY BE UNDERLYING AND HOW TO APPROACH THE SITUATION WITHOUT JUMPING TO CONCLUSIONS

TO DEEPEN THEIR UNDERSTANDING, THE SESSION MOVES INTO (20 MIN) AN INTERACTIVE EXERCISE WHERE PARTICIPANTS ANALYZE LESS NOTICEABLE INDICATORS OF MENTAL HEALTH STRUGGLES. THEY EXPLORE NON-VERBAL CUES SUCH AS CHANGES IN SPEECH PATTERNS, SOCIAL INTERACTIONS AND BODY LANGUAGE. IN SMALL GROUPS, THEY REVIEW FICTIONAL MESSAGES (“I’M JUST TIRED ALL THE TIME” OR “I DON’T FEEL LIKE HANGING OUT ANYMORE”) AND DISCUSS WHAT UNDERLYING MENTAL HEALTH CONCERN THESE STATEMENTS MAY SUGGEST. THIS EXERCISE CHALLENGES THEM TO THINK CRITICALLY ABOUT THE DIFFERENCE BETWEEN TYPICAL EMOTIONS AND PERSISTENT WARNING SIGNS. EACH GROUP WILL ANSWER TO THESE QUESTIONS: “WHAT SUBTLE OR NON-VERBAL SIGNS IN THIS SCENARIO MIGHT BE EASY TO OVERLOOK IN REAL LIFE, AND WHY?”

“WHICH SIGNS OR PATTERNS IN THIS CASE SUGGEST THAT THIS MIGHT BE MORE THAN JUST A TEMPORARY EMOTIONAL STATE?”

“IF YOU WERE A YOUTH WORKER, HOW WOULD YOU APPROACH THIS PERSON IN A WAY THAT FEELS SUPPORTIVE BUT NOT INTRUSIVE?”

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DEBRIEFING AND EVALUATION:

“WHAT WAS THE MOST CHALLENGING PART OF IDENTIFYING SIGNS AND SYMPTOMS AND WHY?”
“HOW CAN WE DIFFERENTIATE BETWEEN TEMPORARY EMOTIONAL STRUGGLES AND SIGNS OF A MORE SERIOUS MENTAL HEALTH CONCERN?”
“WHAT ARE THE RISKS OF MISINTERPRETING OR OVERLOOKING EARLY SIGNS OF MENTAL HEALTH CONCERNS?”
“IN WHAT WAYS CAN NON-VERBAL CUES BE JUST AS IMPORTANT—IF NOT MORE—THAN VERBAL ONES IN IDENTIFYING MENTAL HEALTH CONCERNS?”
“SHOULD PEOPLE BE RESPONSIBLE FOR RECOGNIZING THEIR OWN MENTAL HEALTH STRUGGLES, OR IS IT THE ROLE OF OTHERS TO STEP IN?”
“ARE WE TOO QUICK TO LABEL DISTRESS AS A MENTAL HEALTH ISSUE RATHER THAN ACKNOWLEDGING IT AS A NATURAL PART OF LIFE?”
“CAN OVER-AWARENESS OF MENTAL HEALTH ISSUES LEAD TO OVERDIAGNOSIS OR UNNECESSARY CONCERN? WHERE IS THE LINE BETWEEN BEING PROACTIVE AND BEING INTRUSIVE?”

TIPS FOR FACILITATOR

LEARN MORE ABOUT MENTAL HEALTH FIRST AID ALGEE HERE: [HTTPS://WWW.MHFA.COM.AU/EXPLORING-THE-MHFA-ACTION-PLAN/](https://www.mhfa.com.au/exploring-the-mhfa-action-plan/) ALSO, ENSURE THAT PARTICIPANTS UNDERSTAND SIGNS AS OBSERVABLE BEHAVIORS (EXTERNAL ASPECT) AND SYMPTOMS AS INTERNAL EXPERIENCES THAT CANNOT ALWAYS BE VISIBLE. MENTAL HEALTH CHALLENGES ARE NOT ALWAYS BLACK AND WHITE, SO ENCOURAGE PARTICIPANTS TO CONSIDER INTENSITY, DURATION AND CONTEXT WHEN ANALYZING PEOPLE. IT IS IMPORTANT NOT TO JUMP TO CONCLUSIONS SINCE IT CAN BE AS DANGEROUS AS NOT NOTICING SIGNS AT ALL. IF PARTICIPANTS STRUGGLE WITH CATEGORIZING SOME BEHAVIORS, POINT OUT THAT RECOGNIZING MENTAL HEALTH STRUGGLES IS COMPLEX AND THAT BESIDES KNOWLEDGE, THEY NEED EXPERIENCE TO NOTICE IN THEMSELVES AND OTHER YOUNG PEOPLE AS WELL.

FOLLOW UP

PROVIDE PARTICIPANTS WITH MATERIALS, RESOURCES ABOUT SIGNS, SYMPTOMS AND EMOTIONS OF VARIOUS MENTAL HEALTH CHALLENGES, HOW TO HANDLE THE CONVERSATIONS ABOUT THEM – BESIDES MHFA ALGEE MODEL AND WHAT THEY CAN DO AS INDIVIDUALS TO HELP THAT PERSON OR THEMSELVES.