

COACHES ACROSS CONTINENTS

FROM SELF ISOLATION TO COMMUNITY EMPOWERMENT

SUPPLEMENTAL RESOURCE

In response to a Pandemic, Coaches Across Continents worked with their Global Collaboration of large NGOs, small NGOs, corporations and governments to identify the needs of their home communities. One of the most significant issues articulated was the amplification of Mental Well-Being related concerns, particularly among youth populations.

Utilising its Curriculum Development Team and with the support of the Commonwealth Secretariat, CAC created a resource packet to address these issues.

By adapting & creating content that adjusts to isolation, limited participation, public hygiene, and health & safety regulation realities, this resource is designed to directly impact the Mental Well-Being of those that use the resource, as well as teach important aspects of navigating your community, particularly in a world with constantly changing guidelines and restrictions.

For the most accurate & latest information, please use the World Health Organization's resource:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

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UNSDG#3: MENTAL HEALTH IN ISOLATION



UN Sustainable Development Goal No. 3: Good Health & Well-Being.

Within this Goal, CAC selected **Target 3.4** - By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.

MENTAL HEALTH information from NCAA survey of 37,000 athletes

- Rates of Mental Health Concerns are 1.5-2.5 times higher than historically reported
- 2 in 5 feel overwhelmed constantly or most every day
- 1 in 10 felt so depressed it is difficult to function

MENTAL HEALTH information from CAC Partners

- 95% of youths Mental Health & Wellbeing have been Moderately to Seriously impacted by COVID-19
- Top 3 Mental Health issues: Anxiety, Loneliness, Stress
- Next 4 more common: Depression, Anger, Sleep Problems, Self Esteem

WORLD HEALTH ORGANIZATION MENTAL RESILIENCE

COVID-19 & PANDEMIC GUIDELINES

Watching a constant stream of COVID-19 related news can increase the likelihood of extreme anxiety and panic. In particular, social media frequently includes misinformation. **Focus on news sources that are reliable** and function to keep you safe such as the WHO website and the recommendations from your doctor. Limit your news intake to 1-2 times per day.

Practice tolerating uncertainty. Anxiety is triggered by uncertain and uncontrollable situations. Uncertainty can be uncomfortable which leads many people to become attached to specific outcomes. This is a way of trying to control the uncontrollable. One way to tolerate uncertainty and accept anxiety is by observing what anxiety feels like in the body. Work on allowing anxiety to be present and remind yourself it is ok to feel anxiety. Remember that the more unwilling we are to accept anxiety, the more anxiety increases.

Accept Change as best as you can. Use your experiences and draw on skills you have used in the past that have helped you to manage previous life adversities and use those skills to help you manage your emotions during challenging times.

Find moments of solitude. It might seem counterproductive during a pandemic where a lot of us are lonely, but it's important to connect with yourself. Do whatever activity allows you to be present in the moment and sit with your feelings and thoughts.

For more Mental Health Guidelines and Recommendations, visit:

www.who.int/mental_health/en/

MYTHS & FACTS

MENTAL HEALTH

Myth: Children don't experience mental health problems

Fact: Even very young children may show early warning signs of mental health concerns. These mental health problems are often clinically diagnosable, and can be a product of the interaction of biological, psychological, and social factors.

Half of all mental health disorders show first signs before a person turns 14 years old, and three quarters of mental health disorders begin before age 24.

Myth: People with mental health problems are violent and unpredictable

Fact: The vast majority of people with mental health problems are no more likely to be violent than anyone else.

Most people with mental illness are not violent and only 3%–5% of violent acts can be attributed to individuals living with a serious mental illness. In fact, people with severe mental illnesses are over 10 times more likely to be victims of violent crime than the general population.

Myth: Mental illness is a sign of weakness

Fact: Mental illness does not occur because of weakness.

Many people who do not struggle with mental illness think that having a mental health condition somehow indicates that a person who does is weak. This stigma is due, in part, to the fact that mental illness cannot be seen or easily diagnosed. Because of this, people tend to assume that mental illness must be due to a person's lack of ability to cope with the basic stresses of life. In reality, the changes in brain chemistry or structure that occur with mental illness can decrease a person's ability to cope with increased stressors on a chemical level.

Myth: Individuals with mental health problems can't work

Fact: Many individuals with mental illnesses lead normal, productive lives.

There is a stigma that people with mental illnesses are not productive and are not able to hold jobs or function in the workplace. However, just because someone has a mental illness does not mean that they are any less likely to be able to succeed in life.

SAFEGUARDING AND PROTECTION OF CHILDREN RECOMMENDATIONS - FOR FACILITATORS

The pandemic has led to an increase in online contact between organisations and their beneficiaries. Even if the virus is contained there will be an increase in online contact in the future. As a result it is essential to have a robust child protection policy including online contact. Here are some points to include in that policy:

All children, regardless of age, disability, gender reassignment, race, religion or belief, sex or sexual orientation, **have the right to equal protection from all types of harm or abuse.**

Ensure you **provide clear and specific directions to staff and volunteers** on how to behave online.

Provide supervision, support and training for staff and volunteers about online safety.

Develop clear procedures to respond appropriately to any incidents of inappropriate online behaviour, whether by an adult or a child.

Make sure your response **takes the needs of the person experiencing abuse**, any bystanders and your organisation as a whole into account.

Review the plan developed to address online abuse **at regular intervals**, in order to ensure that any problems have been resolved in the long term.

For more extensive **Child Safeguarding Procedures** please refer to CAC's SAFE Initiative document:

<https://coachesacrosscontinents.org/wp-content/uploads/2020/07/CAC-SAFE-Summation-2020-1-1.pdf>

ONLINE SAFEGUARDING AND PROTECTION OF CHILDREN RECOMMENDATIONS - FOR YOUTH

The pandemic has led to an increase in online contact between youth and their peers, their communities, and the broader & unregulated internet community. With this in mind, it is important to keep a few things in mind:

What you post is permanent. The Internet does not have a delete key. Any comment or image you post may stay online forever because removing the original does not remove any copies that other people/platforms made. Don't put anything online that you wouldn't want your parent or prospective employer to see.

Be aware of your Privacy Settings on any social media/internet platform. Adjust them accordingly.

Understand your **responsibility & accountability** for the material you share with the world.

Practice Safe Browsing. Cybercriminals often try to lure victims into clicking on certain ads or sites by making them tempting. Be cautious when clicking unfamiliar content.

Be Careful What You Download! Clicking on something dangerous is bad, downloading suspicious content puts you at even more risk.

Choose Strong Passwords. If you choose something predictable, it creates a security risk. Easy to remember passwords tend to be much more predictable. Randomised passwords kept in a secure location to remember them will always be the safest option.

Be Careful Who You Meet Online. People you meet online are not always who they claim to be. Indeed, they may not even be real.

CONNECTING VIRTUALLY AND ONLINE SUPPORT

RECOMMENDATIONS

Organisations and leaders have been trained to work face-to-face with youth participants. COVID-19 has required them to adapt quickly to online communication and engagement, often without sufficient training and knowledge. Here are some recommendations to share with your leaders who have direct online communication with youth:

Ideally you should receive **written or verbal consent** for children to be contacted from parents, carers and the children themselves as appropriate.

Be respectful of parents and guardians wishes to avoid causing home problems for young people. However, **work out strategies to understand the signs** if a young person is in danger or could be suffering from any kind of abuse.

Check in as regularly as time allows with young people to ensure you can **help quickly if their emotions experience sudden changes**.

Ensure almost all communication is relevant to your work. But ensure your communication is not always asking for things or sharing organisational information. Simply asking how they are or letting them know you are willing to help **demonstrates your emotional support**.

As much as possible **adapt your method of communication** to each young person depending on their preferred platform such as WhatsApp, Facebook etc in as safe a way as possible.

Understand where you should **report potential problems** within your organisation and with available social services in your location if necessary.

DISCUSSING MENTAL HEALTH IN A SAFE WAY

RECOMMENDATIONS

Mental well-being can be a very sensitive subject to discuss with young people. When facilitating conversations about mental health in the Mental Health curriculum please take into account these points:

Start the discussion in a relaxed setting. Jumping straight into a face-to-face conversation about mental health might be too intimidating for some. Using the curriculum to keep them active can take their mind off the anxiety and discomfort and allow them to express their feelings.

Ask open-ended questions. Asking questions about the group's feelings and genuinely listening to their response is a direct way to discuss mental health. The best types of questions are open-ended because the group can answer however they feel most comfortable. Finally, be persistent. Regularly ask them how they're doing and let them know that you're always available to talk.

Trust plays a significant role when it comes to discussing something as personal as mental health. Expecting someone to open up about their challenges can be difficult if you're not willing to do the same.

Be open about your own experiences. We've all struggled with our mental health at one point, and sharing those tough times is both relatable and encouraging. Being open shows people that it's okay to feel this way and that you can relate to what they're going through.

If it offends, it's offensive. Words that are well intended can be perceived as hurtful and many phrases have become insulting over time. Whatever the phrase, if a person in the group finds it offensive, then avoid it. We are all different and should strive to respect each individual experiences.

INFLUENCING GOVERNMENT POLICY

RECOMMENDATIONS

“One of the least effective ways to use research for influence is to write a paper and then ask ‘right, who do I send it to?’” Making sure that your published paper gets into the right hands is worthwhile, but it’s far more effective to **design research with policy impact in mind**.

“Evidence is more likely to influence policymakers when **presented to them during ‘windows of opportunity’**, when they are motivated to pay attention to and solve a problem.”

“Policymakers in the middle of a political change or crisis, and who are seeking advice, are far likelier to pick up the phone to researchers they already know than to make new contacts or start reading unsolicited reports.” **Cultivating relationships with policymakers** takes time, but it can yield significant opportunities for policy impact.

“The type of research required to get something on the public agenda is different from **research designed to influence specific pieces of legislation**.”

“The **way in which evidence is produced, framed, timed and presented** can be as important as its substance.”

“Identify the **actors with the power to change policy**, and the actors able to influence policymakers.”

Use an array of tools to communicate effectively. First, humanize complex issues. Second, use “killer facts.” Third, use visualizations to increase accessibility. Fourth, perfect your 30 second elevator pitch.

MONITORING & EVALUATING THE MENTAL HEALTH CURRICULUM

QUANTITATIVE - RECOMMENDATIONS

Quantitative Monitoring & Evaluation

Ask participants questions at the beginning and end of your programme which address specific mental health topics such as; anger, anxiety, depression, loneliness, lack of purpose, panic attacks, paranoia, self-esteem, self harm, sleep problems, stress, sadness etc. Compare the number of respondents answering positively/negatively before and after for analysis of the programmes impact.

Sample Baseline/Endline Questions:	No	Somewhat			Yes!	
<i>Do you feel anxious?</i>	0	1	2	3	4	5
<i>Can you think of a good way to manage stress?</i>	0	1	2	3	4	5
<i>Do you feel confident expressing your feelings with others?</i>	0	1	2	3	4	5
<i>Do you understand the importance of managing your emotions?</i>	0	1	2	3	4	5
<i>Do you feel connected to the other children?</i>	0	1	2	3	4	5
<i>Do you feel confident in yourself?</i>	0	1	2	3	4	5

*If you have access to the same youth over a period of time, ask these types questions on the beginning of the first day of sessions and then at the end of the last day of sessions.

*If you only have access to the youth for a single session/day, ask these types of questions at the end of the session.

MONITORING & EVALUATING THE MENTAL HEALTH CURRICULUM

QUALITATIVE - RECOMMENDATIONS

Qualitative Monitoring & Evaluation

You want to gain a deeper understanding and analysis of your participants before and after implementation of programming. Make sure qualitative reporting requirements are clear with coaches and facilitators before the programming so they know at the end of the programme they will need to provide a qualitative report evaluating the impact of the programme in-depth.

Whether through ‘formal’ interviews with participants, ‘informal’ conversation, or during the games in this accompanying packet, here are a few suggestions that should help you create reliable content to be used in Monitoring & Evaluation reports:

Convey Intent. It is important for the interviewer to know the intent behind each question so that it can be clearly conveyed to the interviewee.

Don’t Sway the Participants. Interviewees tend to agree with what they think the interviewer wants to hear instead of giving their unbiased answer.

Eliminate Interviewer Bias. Try to eliminate interviewer bias through the interview process as much as possible.

Consider a “Test Run” Period. It can be helpful to treat your first couple collections of Qualitative data as pilot programs. Learning from these first few test runs can have a significant impact on the quality of the study.

Make Time for Post-Interview Reflection. After an interview, Proeschold-Bell recommends immediately reviewing the data. “This helps capture good ideas that may otherwise be forgotten,” she says.

SOURCES & APPRECIATION

What now...?

1. Send us feedback on this resource! Which parts work for you, which parts would you adjust?
2. Share your game ideas! There are many sub-topics we have not addressed in this resource. We are on the hunt for more games to cover a wider range of issues dealing with mental health as well as other pandemic related issues.
3. **Stay safe, wash hands, and look after each other! Everyone needs support.**

**For feedback & game ideas please email: instruct@coachesacrosscontinents.org*

Sources

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