



DISCUSSION POINTS

- Prevalence of depression and anxiety
- Recognizing warning signs
- What to do in crisis situations
- Obtaining help

A red circular graphic is located in the bottom right corner of the slide.



PREVALENCE OF DEPRESSION & ANXIETY

- In 2015, an estimated 16.1 million adults aged 18 or older in the United States had at least one major depressive episode in the past year
 - Represents 6.7% of all U.S. adults (SAMHSA, 2015) in any given year
- The estimated lifetime prevalence of any anxiety disorder is over 18%
 - 12-month prevalence is more than 10% (Kessler et al., 2009)
- UC Graduate Student Well-Being Survey (2016)
 - Over one-third (35%, n=1,782) of respondents reported symptoms indicative of clinical depression, representing about 16,000 graduate students total

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GENERAL WARNING SIGNS

- Depressed mood most of the day, nearly every day
- Loss of interest or pleasure in fun activities
- Weight loss (when not dieting) or gain; decrease or increase in appetite
- Insomnia or Hypersomnia
- Feeling agitation or sluggishness
- Feeling fatigue or low energy
- Feelings of worthlessness or excessive or inappropriate guilt
- Difficulty with thinking, concentrating, or indecisiveness
- Thoughts of death or suicidal ideation (American Psychiatric Association, 2013)

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GENERAL WARNING SIGNS

- Excessive worry with no specific source
- Exaggerated startle reflex
- Inability to sleep due to worrying
- Difficulty concentrating
- Trouble controlling worrying thoughts
- Being easily fatigued
- Muscle tension
- Feeling that things will always end badly
- Always feeling on edge

(American Psychiatric Association, 2013)



CATEGORICAL WARNING SIGNS

- Behavioral Symptoms:
 - Isolating from others, using more alcohol or other substances, teeth clenching,
- Physical Symptoms:
 - Headaches, g/i distress, neck and back aches,
- Emotional Symptoms:
 - Feeling sad, weepiness, feeling irritable and angry, feeling numb, loss of enjoyment in pleasurable activities



WHAT ARE YOUR WARNING SYMPTOMS?

Level 1: On-track	Level 2: Struggling	Level 3: Could use assistance
Optimal Functioning:	Symptoms indicating you are having difficulty coping.	Many symptoms are causing concern.
OPTIMAL FUNCTIONING.	PRACTICE SKILLS AND TOOLS LEARNED TO COPE WITH STRESSORS. INCREASE SELF-CARE AND WELL-BEING ACTIVITIES.	REACH OUT FOR SUPPORT. ASK HELP FROM FRIENDS, FAMILY, CAMPUS RESOURCES, PEERMENT, COUNSEL, ETC.

Using skills and tools at Level 2 can prevent going to Level 3.

What changes can you make when you are beginning a difficult time (Level 2)?

- 1.
- 2.
- 3.



DEEP BREATHING

- Just notice your breath
- Breathe in through your nose and out through your mouth
- Breathe in for a count of four, hold; and exhale for a count of four



WHAT TO DO IN A CRISIS

SUICIDE WARNING SIGNS

- | | | |
|--|--|---|
| <p>Talk</p> <ul style="list-style-type: none"> • If a person talks about: <ul style="list-style-type: none"> • Being a burden to others • Feeling trapped • Experiencing unbearable pain • Having no reason to live • Killing themselves | <p>Behavior</p> <ul style="list-style-type: none"> • Increased use of alcohol or drugs • Looking for a way to kill themselves, such as searching online for materials or means • Acting recklessly • Withdrawing from activities • Isolating from family and friends • Sleeping too much or too little • Visiting or calling people to say goodbye • Giving away prized possessions • Aggression | <p>Mood</p> <ul style="list-style-type: none"> • People who are considering suicide often display one or more of the following moods: <ul style="list-style-type: none"> • Depression • Loss of interest • Rage • Irritability • Humiliation • Anxiety |
|--|--|---|



WORRIED ABOUT SOMEONE?

- Have an honest conversation
- If you think someone is thinking about suicide, assume you are the only one who will reach out
- How to talk to someone who may be struggling with their mental health:
 - Talk to them in private
 - Listen to their story
 - Tell them you care about them
 - Ask directly if they are thinking about suicide
 - Encourage them to seek treatment or to contact their doctor or therapist
 - Avoid debating the value of life, minimizing their problems or giving advice



WHAT TO DO IN A CRISIS

- If a person says they are considering suicide
 - Take the person seriously
 - Stay with them
 - Help them remove lethal means
 - Call the National Suicide Prevention Lifeline: 1-800-273-8255
 - Text TALK to 741741 to text with a trained crisis counselor from the Crisis Text Line for free, 24/7
 - Escort them to mental health services or an emergency room



WHAT TO DO IN A CRISIS

- **LIFE-THREATENING EMERGENCY: CALL 9-1-1 OR GO TO YOUR NEAREST HOSPITAL EMERGENCY ROOM**
- **DGSOM Medical and Graduate Students Crisis Resources**
 - Please refer to UCLA CAPS "Are you in a Crisis" resource page: <http://www.counseling.ucla.edu/Services/Are-you-in-a-crisis>
- **DGSOM Residents/Fellows/Medical and Graduate Students Crisis Resources**
 - National Suicide Prevention Hotline (24 hours): (800) 273-TALK (8255) or chat online
 - Crisis Text Line (24 hours): Text 741-741 from anywhere in the USA, anytime, about any type of crisis.
 - Ronald Reagen UCLA Medical Center: (310) 825-2111 Main line, (310) 825-2111 Emergency Department
 - Los Angeles Suicide Prevention Center: (310) 391-1233
 - Los Angeles County Psychiatric Emergency Team: (800) 854-7771
 - California Medical Association (CMA): Confidential Hotline for Substance Abuse or Psychological Problems (310) 383-2691



OBTAINING HELP

BEHAVIORAL WELLNESS CENTER & DGSOM MISSION

- **Commitment**
 - The DGSOM Dean's office is committed to ensuring that medical students, DGSOM graduate students, residents and fellows have mental health services while in training
- **Resources**
 - Graduate education and medical training can be stressful, therefore trainees can benefit from resources
- **Team**
 - Behavioral Wellness Center (BWC) will provide students with a team including, psychiatrists, psychologists and a social worker
- **Accessibility**
 - We are located in the Center for Health Sciences, and have clinicians available for early morning, daytime and evening sessions



BEHAVIORAL WELLNESS CENTER (BWC) SERVICES PROVIDED

- Psychiatric consultation
- Short-term individual psychotherapy
- Information about community based services and resources
- Group therapy (coming soon)
- Services rendered through Behavioral Wellness Center (BWC) are covered by insurance and co-pays have been waived



WHAT TO EXPECT

- Student calls Behavioral Wellness Center (BWC) and provides insurance information
- Intake is scheduled and completed
- Mental health coordinator determines clinician assignment and sets first appointment with student
- Student returns for first appointment
- Student begins psychotherapy and/or (if indicated) medication management
- Behavioral Wellness Center (BWC) Team continues to follow-up with student to assess acuity and needs



BEHAVIORAL WELLNESS CENTER (BWC) CONTACT INFO

- Behavioral Wellness Center (BWC) Contact Info
 - Phone: 310.825.9605
 - Email: bwc@mednet.ucla.edu
 - Website: <http://medschool.ucla.edu/bwc>
 - Location: 1st floor of the UCLA Center for the Health Sciences (CHS), room 18-218, 18-212
 - Administrative office hours: 8:00 a.m. – 5:00 p.m. with clinicians available for early morning, daytime and evening sessions



BEHAVIORAL WELLNESS CENTER (BWC) LOCATION

