Zeta Sings The Blues

A Mental Health Toolkit

For The Sisterhood

For The Sisterho

One Zeta...Unified...Mobilized...ZetariZed!!!

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Welcome from the International Mental Health Team

The International Mental Health Initiative, "Zeta Sings the Blues," is a capstone program established by Zeta Phi Beta Sorority, Incorporated to increase awareness of mental health and fight stigmas associated with mental illness. International President Valerie Hollingsworth-Baker formed a team of mental health professionals to develop this new program to educate members of the sisterhood and the community. Although many individuals are impacted directly and indirectly by poor mental health, many suffer in silence. It is important to facilitate open dialogue, address misconceptions, and work to promote overall well-being. To this end, the program was launched on September 1, 2019.

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Introduction to Zeta Sings the Blues Toolkit

Compelling evidence demonstrates the pervasiveness of mental health. According to publications of the National Comorbidity Survey, a survey of the prevalence of mental health disorders in the United States, nearly half of Americans surveyed reported having met criteria for depression or anxiety in their lifetimes, and approximately a quarter of individuals reported meeting criteria for any mental health disorder in the previous year. The National Alliance on Mental Illness posits that 43.8 million adults experience mental illness every year, and approximately 10 million have been diagnosed with a severe and persistent mental illness. Even more humbling is the data reflecting the myriad individuals who are living with unidentified and untreated mental health conditions. Moreover, nearly 60% of adults who have mental health concerns did not receive care in the previous year.

Despite the stark nature of these statistics, it is heartening to know that mental health concerns are both preventable and treatable. In order to prevent and treat mental illnesses, one must set the foundation about the definition of health, which encompasses not only the absence of disease, but also the state of wellness, in all its forms. There is no health without mental health, and an understanding of this complex relationship is essential to fostering the overall well-being of our community members.

This toolkit has at its heart, the following **Mission** and **Vision**:

Mission: to destigmatize mental illness, provide awareness, and to educate our communities to increase overall well-being.

Vision: to promote healthy communities that support open dialogue about mental health and empower individuals to seek help instead of suffering in silence.

Goals and Toolkit Content

Users of The Toolkit will be equipped with information to assist in their efforts to:

- De-stigmatize mental illness;
- Increase awareness of symptoms, treatment options, and resources for mental health;
- Educate our communities in an effort to increase overall well-being; and
- Correct myths and misperceptions about mental health among community members.

The Toolkit Includes

1. An ***Information Brief*** containing data regarding mental health and mental illness and how communities can improve prevention of mental illnesses; promotion of mental health; public education and awareness; early identification; treatment; and crisis response.
2. A ***Discussion Guide*** intended for use when implementing community activities. It provides discussion questions and an overall structure for dialogue and engagement on topics related to mental health.
3. A ***Planning Guide*** that describes options for facilitating community activities as well as guidelines on steps to take at the local level to increase awareness about mental health and to promote access to mental health services.
4. An ***Evaluation*** to assist with assessing the impact and outcome of community activities.
5. A ***Resource Guide*** that contains national resources to review and/or share with audience members. In addition to these national resources, the authors of this toolkit encourage facilitators to research local resources to ensure easily accessible and relevant resources for attendees.

Overview of Mental Illness

What is mental wellness?

Mental wellness refers to a person's psychological, emotional, spiritual, and social well–being. It takes into account one's behavior, thoughts, and feelings about self and others. As a person advances through their lifespan, there are many factors that can affect mental health including but not limited to: genetics, family of origin, life experiences, stressors, and coping strategies.

What is mental illness?

Although everyone reflects mental health issues at times, not everyone meets criteria for mental illness as defined by the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*, which defines a mental illness/disorder as: "…a syndrome characterized by clinically significant disturbance in an individual's cognition [thoughts], emotion regulation, or behavior that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning." The term mental illness refers collectively to all diagnosable mental disorders. Symptoms of mental illness may negatively affect one's thinking, mood, behavior, and functioning across multiple domains. At its worse, the effects of mental illness have been associated with increased morbidity and mortality rates including premature death.

How widespread is mental illness?

According to the World Health Organization, mental illness results in more disabilities in developed countries than any other group of illnesses, including cancer and heart disease. Other published studies report that approximately 25% of all United States adults reported to have met the criteria for a mental illness within the past year, and nearly 50% of United States adults will develop at least one mental illness during their lifetime. The economic burden of mental illness in the United States is substantial, with estimates over $300 billion.

Common beliefs about mental illness

As indicated, 1 in 4 individuals meet the criteria for a mental health disorder. Despite the incidence, beliefs about mental illness are still largely negatively skewed. For example, a general survey of American attitudes about mental illness reveal:
- 38% of people do not want to move next door to someone who lives with mental illness

- 56% do not want to spend an evening socializing with someone with mental illness
- 33% do not want to make friends with someone who lives with mental illness
- 58% do not want to work closely with someone with mental illness
- 68% do not want someone with mental illness to marry into their family

It is within this context that the millions of individuals who live with mental illness navigate day to day decisions regarding wellness and resilience.
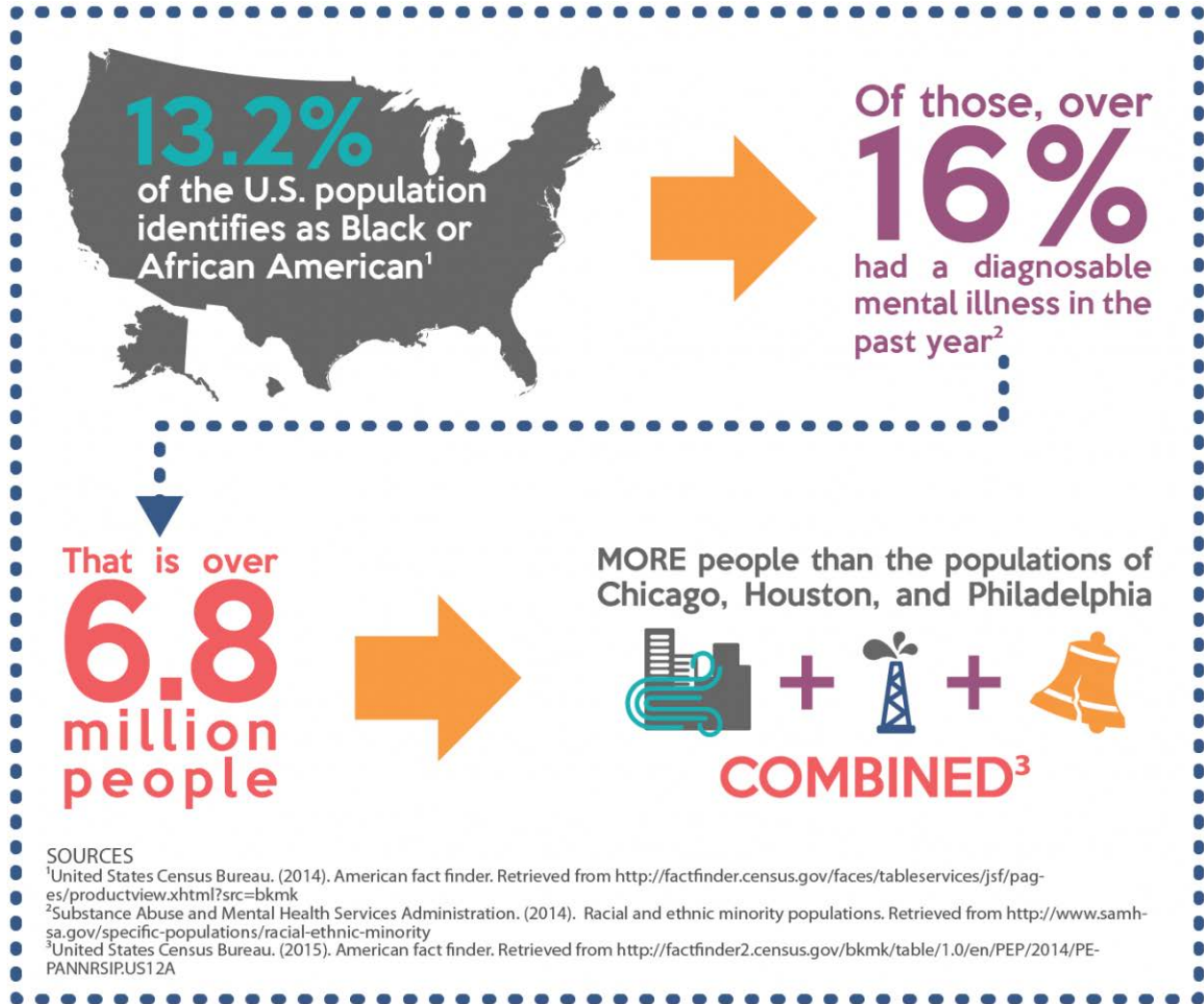
Why Address the Issue of Mental Health in the African American Community?

Although anyone can experience the symptoms of a mental health condition, African Americans often experience more severe forms that result from the impact of social determinants of health including: a lack of access to health care, the stigmas about mental illness, a lack of insurance, lack of providers who look like them, and a long list of additional barriers. According to the Health and Human Services Office of Minority Health, African Americans are 20% more likely than the general population to experience serious mental illness. Among the most commonly diagnosed mental health disorders among African Americans include:

- Major depression
- Attention deficit hyperactivity disorder (ADHD)
- Suicide
- Posttraumatic stress disorder (PTSD)

Albeit, African Americans have higher mental health diagnoses than Caucasian Americans, the mental illness stigma is even greater in the African American community. Within the African American community direct efforts to identify and understand mental illness will assist in releasing the stigma that not only isolates, but also hurts. For example, among African Americans, the idea of having a mental health diagnosis is accompanied by thoughts of shame, misconceptions regarding the cause, and attempts to situate the diagnoses within religious frames of reference, which may result in feelings of unworthiness, unfaithfulness, and failure. These misconceptions and negative emotions often impact African Americans' willingness to engage in care. Further, colloquial representations of mental illness, both within communities/families of origin and in the media, lead to minimization of the impact of these diagnoses. Naming depression "the blues" or something to "snap out of" places the burden of recovery fully on the individual experiencing the symptoms rather than framing the symptoms within the larger context over run with social determinants of health as contributors. Subsequently, knowing where to go for assistance that does not contribute to further shame and that provides a safe environment for care is often complicated and/or impossible.

Data from the United States Census Bureau (2014) indicates that of the 13.2% (e.g., 6.8 million individuals) who identify as Black or African American, over 16% of them had a diagnosable mental illness in the past year. (See image below)

13.2% of the U.S. population identifies as Black or African American[1]

Of those, over 16% had a diagnosable mental illness in the past year[2]

That is over **6.8 million people**

MORE people than the populations of Chicago, Houston, and Philadelphia

+ + **COMBINED[3]**

SOURCES
[1] United States Census Bureau. (2014). American fact finder. Retrieved from http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk
[2] Substance Abuse and Mental Health Services Administration. (2014). Racial and ethnic minority populations. Retrieved from http://www.samhsa.gov/specific-populations/racial-ethnic-minority
[3] United States Census Bureau. (2015). American fact finder. Retrieved from http://factfinder2.census.gov/bkmk/table/1.0/en/PEP/2014/PEPANNRSIP.US12A

While these figures are staggering, it is important to note that only about 25% of African Americans seek mental health care, which is significantly lower than the rate of utilization reported by white Americans (i.e., 40%). Some of the main factors that lead to African Americans' failure to seek mental healthcare are:

- ***Distrust and misdiagnosis.*** African Americans have been and continue to be negatively affected by prejudice and discrimination in the health care system. Misdiagnoses, inadequate treatment, and lack of cultural competence by health professionals cause distrust and prevent many African Americans from seeking or staying in treatment.

- ***Socio-economic factors.*** Factors such as income and access to affordable, quality health insurance coverage and care make treatment options less available. According to the U.S. Census Bureau, Current Population Survey, 2015 Annual

Social and Economic Supplement, five percent of African Americans under the age of 19 and 12% between the ages 19 and 64 had no form of health insurance.

- ***Lack of African American mental health professionals.*** Only 3.7% of members in the American Psychiatric Association and 1.5% of members in the American Psychological Association are African American.

- ***Medications.*** Some studies indicate that African Americans metabolize many medications more slowly than the general population yet they are more likely to receive higher dosages. This may result in a greater chance of negative side-effects and a decreased likelihood of treatment endurance.

Why Address Mental Health in Children and Young Adults?

YOUTH MENTAL HEALTH: EMOTIONS MATTER

EMOTIONS ARE A BASIC PART OF THE HUMAN EXPERIENCE—WE'VE ALL GOT THEM—AND MANY OF US STRUGGLE WITH HOW TO DEAL WITH THEM EFFECTIVELY.

The English language has over 400 words for emotions[1]

Studies show that men and women experience the same amount of emotion, but women tend to show it more[2]

Of 11-17 year olds who took MHA's Youth Screen[3]

55% said they often felt irritable or angry

69% said they often worry a lot

68% said they often felt sad or unhappy

45% said they often do not show their feelings

KIDS AND TEENS ARE DEALING WITH REAL PROBLEMS AND THE COMPLICATED EMOTIONS THAT COME WITH THEM.

According to the National Survey of Children's Health:[4]

2.2 million children have ever lived with a parent or guardian who has died

5 million children feel like their family often has a hard time covering "the basics" like food, or housing

7.7 million children have lived with someone who had a drug or alcohol problem

6.1 million children have lived with someone who had a mental illness or who was suicidal

2.9 million children have been treated unfairly because of their race or ethnicity

5.2 million children have seen or heard physical abuse between adults in their home

6.2 million children have been victims of violence or witnessed it in their neighborhood

And it doesn't stop there...

36% of children (ages 2-17) have been emotionally bullied or teased in the past year[5]

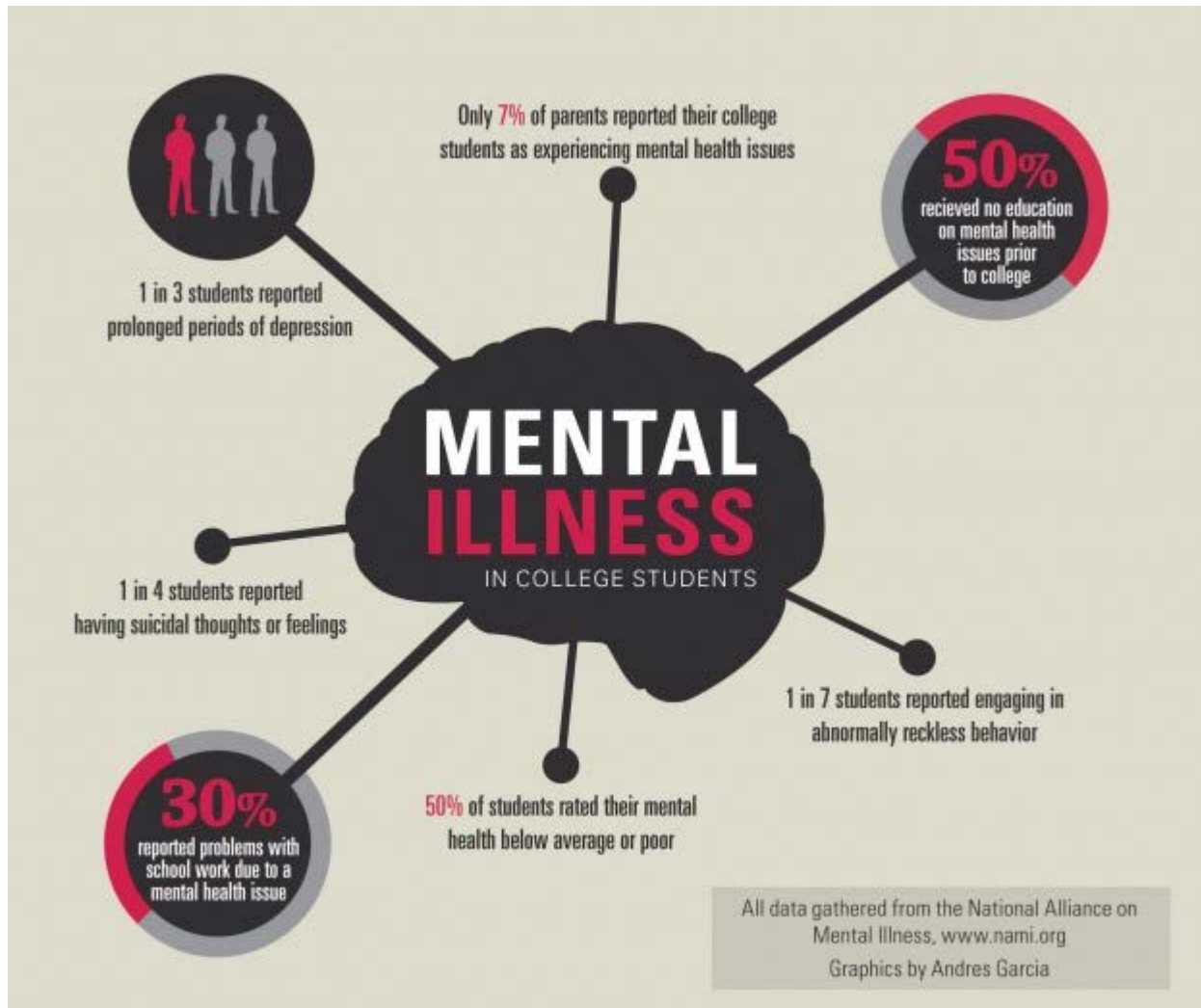**1.2 million** children (ages 8-18) are estimated to be caregivers[6]

82.9% of LGBTQ youth (age 11-17) who take a screen at mhascreening.org score "at-risk" for a mental health disorder[7]

Issues of psychological well-being in children are genuine, normal, and treatable. Albeit 1 in 5 children have a diagnosable emotional well-being issue, an overwhelming majority (i.e. 66%) of them get minimal to no assistance. Untreated psychological issues can disturb children's functioning across multiple domains including, but not limited to: at home (e.g., behavior and sleep disruptions), in school (e.g., attention and concentration concerns), and in the community (e.g., difficulty making neighborhood friends). Without treatment, kids with emotional well-being concerns are at an increased risk of school disappointment, contact with the criminal equity framework, reliance on social administrations, and even suicide.

Only 7% of parents reported their college students as experiencing mental health issues

50% recieved no education on mental health issues prior to college

1 in 3 students reported prolonged periods of depression

MENTAL ILLNESS
IN COLLEGE STUDENTS

1 in 4 students reported having suicidal thoughts or feelings

1 in 7 students reported engaging in abnormally reckless behavior

30% reported problems with school work due to a mental health issue

50% of students rated their mental health below average or poor

All data gathered from the National Alliance on Mental Illness, www.nami.org
Graphics by Andres Garcia

Mental illness often continues from childhood into young adulthood. The impact of mental illness on young adults, including those who attend colleges and universities, is undeniable. Approximately 30% of students diagnosed with a mental health condition reported difficulty performing school and work tasks as a result of the symptoms

associated with their diagnoses. This leads to reduced retention and graduation rates and longer matriculation times. The College and University life is not immune from the stigmas of mental health. Many institutions offer on-campus Counseling Centers, which are covered under the student enrollment fees however, the demand often exceeds the need and institutions are unable to service a large portion of the students who need it.

ZΦB

CAUSE BEING A FINER WOMAN DOESN'T MEAN PRETENDING TO BE "FINE"

Check On Your Strong Soror
DEPRESSION AND MENTAL HEALTH SCREENING MONTH
BETA SORORITY, INCOR
THE BLUES - INTERNATIONAL MENTAL

Love Yourself

...ngers. Give
...ot be "okay".

...l ways to
...r yourself.

... Treat
...reekend
...joy.

4. Take A
Notice sig...
overwhelm...
a minute ...

5. Be K...
yoursel...
else w...
supr...

Self-Compassion is Self-Care.

WORLD MENTAL HEALTH DAY OCTOBER 10
...ATA SORORITY, INC...
When things feel da...
know that you are...
...ATIONAL MENTAL HE...

HOW ARE YOU DOING? REALLY?

SISTERHOOD SHOULD STRENGTHEN YOU.

NOT SHATTER YOU.

Check On Your Strong Soror
DEPRESSION AND MENTAL HEALTH SCREENING MONTH
BETA SORORITY, INCOR
THE BLUES - INTERNATIONAL MENTA

SISTERLY LOVE SHOULDN'T HURT.

Check On Your Strong Soror
DEPRESSION AND MENTAL HEALTH SCREENING MONTH
BETA SORORITY, INCOR
THE BLUES - INTERNATIONAL MENT

Organizing an Activity

This Toolkit was designed to empower you to take the message of mental wellness to your community. To this end, you will find general guidance that may be helpful as you prepare to implement an activity.

Step 1: Develop a Planning Team

In 2016, Google embarked on a quest to build the perfect team. Working closely with researchers from Harvard University, they surveyed 180 Google teams, and the results of what became known as Project Aristotle converged on five traits that the most effective teams share (e.g., they foster a sense of psychological safety, team members are dependable, team members have clear roles, team members are intrinsically motivated by the work, and team members believe their work matters). Subsequent team-based science studies further identified five characteristics that, when balanced appropriately, contribute to a team's effectiveness (e.g., results-oriented; relationship-focused; process and rule followers; innovative and disruptive thinkers; and pragmatic). The key message, however, is that A TEAM OF EXPERTS DOES NOT MAKE AN EXPERT TEAM. An expert team is one that balances the strengths, talents, and contributions of a host of individuals who complement rather than compete with one another. In other words, how teams work together is more important than who is actually on the team.

Consider this team-based science as you work to explore skills and talents of prospective team members; set goals; establish expectations and deadlines; and delegate responsibilities. Consider getting the "right people on the bus" and do not be hesitant to ask the "wrong people" to get off the bus.

Step 2: Identify Target Audience

Consider your target audience. Who would you like to impact most? What skills do your team members embody? How can those skills and talents be best matched to your intended audience? Remember that the mental health needs and associated topics vary for each population.

Step 3: Select a Topic, Determine Content, and Select Presentation Format

The National Mental Health Team has provided a list of topics and presentation materials including PowerPoint slides in the Presentation Guide. Additionally, Zeta Phi Beta Sorority, Incorporated has a Z-HOPE manual outlining events for community service surrounding mental health topics. Specific examples include:

- More than the Blues: Depression

- Emotional Intelligence: Know Your Trauma and Triggers
- Love Should Not Hurt: Domestic Violence
- How Crowded is My Bed: Responsible Sexual Behavior
- Caregiving and Surviving
- Stress in The Workplace
- Loving Yourself
- Think Before You Speak
- Mental Health Complicated by Medical Health
- Substance Disorders

Other programs may be centered on community discussions regarding mental health. See below for a list of sample discussion topics.

- What does mental health mean to you?
- What is the difference between mental health and mental illness?
- Why is mental illness so stigmatized in our community?
- What does mental health stigma mean to you?
- What are some common types of mental illness?
- How have you been impacted by mental illness?
- What challenges, stereotypes, or misconceptions have you encountered that may impact mental health?
- What can you do to help educate others about the prevalence and importance of mental illness?
- Where can you get help for mental illness?
- How important is mental health in your community?
- How can you increase the importance of mental health awareness, prevention, and treatment in your community?

Additional programming topics are available at
www.ZphiB1920.org/zetanationalprograms

Step 4: Logistics
Give adequate attention to the details. Review the list more than one time and by more than one set of eyes. No detail is too small to address and consider. The following are helpful planning steps:

- Secure a location
- Ensure the space is equipped with necessary equipment
- Determine length of program
- Secure speaker (see below) and confirm availability
- Ensure accessibility requirements are met

Step 5: Secure a Qualified, Knowledgeable Speaker

Potential speakers include licensed mental health professionals and those who have skilled knowledge about the field of mental health. If you require assistance determining a speaker's qualifications, please reach out the National Mental Health Director and/or Co-Director for clarification.

Step 6: Advertise Event

Your event is only as successful as you make it. Leverage networks within the community to promote your event. Be mindful of branding guidelines when creating promotion materials including but not limited to:

- Personal invitations and emails
- Flyers
- Social media
- Radio, newspaper, and television announcements

Step 7: Execute with Excellence

Do everything with excellence in mind. A welcoming environment is one where participants feel safe and comfortable, especially in light of the discussion topics (i.e., mental health concerns). Remember to:

- Designate an official greeter who will remain visible at all times upon guests' arrival
- Arrive early to prepare space and greet attendees
- Provide handouts and local resources to guests
- Ensure the speaker has provided a headshot, a bio, and a resume, which the host will display and/or read

Step 8: Evaluate Event

The Z-HOPE manual contains a well-established evaluation form, which your team may utilize to allow participants to provide feedback about your event. If you or your speaker require more specific feedback, it will be helpful to design an evaluation that includes a combination of open-ended questions (e.g., "What did you learn from this event?") and multiple choice opens (e.g., "On a scale of 1-10, with 10 being best, how would you rate the usefulness of this event?")

Including Youth in Activity Planning and Execution

Even if young individuals (i.e., ages 4-25) are not experiencing symptoms of mental illness directly, they are likely affected by the symptoms and diagnoses of friends, family members, and neighbors. The voices of future generations are powerful, and when considering educational opportunities around mental illness, adequate space should be given to younger individuals to share their experiences of mental health and the ways in which it affects them. Young people of all ages can contribute creative and important ideas, which should not be minimized simply because of age. Adults and presenters are encouraged to include children and younger adults in the planning and execution stages of any community activities. Consider the following when determining how best to collaborate with children and younger individuals:

- What backgrounds do the children and young people represent?
- What resources can be allocated to support children and young adults with which you affiliate to execute their own mental health events?
- What planning strategies will allow children and young adults to execute events that ensure inclusion of all voices in all decision-making phases?
- What advisors, sponsors, or other adults are available to provide mentorship, guidance, oversight, and supervision for youth who may engage in mental health activities?

Additionally, the following are helpful considerations:

Children and young people are knowledgeable
It is important to spend time focusing on young people and their thoughts and concerns about mental health. How do they view and define mental health? What information do they want to hear about, see, and know about to be more informed? What impact would they like to make on their communities? How do they craft and deliver a developmentally-appropriate message?

Children and young people can reach their peers easily
The benefit of getting undergraduates and youth involved is that they already have access to their peers at colleges, community centers, libraries, local schools, and youth groups. Undergraduates and youth can find additional peer groups in other organizations that have established youth services in order to make a partnership. The intended audience is readily available in naturalistic settings.

Children and young people have schedules that differ from other adults'

Be cognizant of school, sports, clubs, and parents' work schedules and collaborate with children, young people, and parents (if applicable) about times and locations that work best for them. Keep in mind travel and location of events. Typically, events that take place immediately after school activities and work is prime to avoid excessive travel. Choose locations that are within walking distance, close to public transportation, are accessible, and have ample parking.

Tailor methods of communication to your target audience

While in-person and written invitations are best, most young people spend a lot of time online and on their phones. In fact, recent students suggest that individuals between the ages of 18-24 spend approximately 6-9 hours a day on average interacting with social media. Consider connecting and relationship-building that occurs via social media outlets and/or texting. Social media pages are malleable in that they can reach a host of audiences that span a wide age range. It is always important to highlight that children are encouraged to attend when developing marketing and invitations for these events.

Provide an open and safe environment during meetings

Allow children and young people ample opportunities to speak at planning sessions and during events. Consider benefits of scheduling additional time to address concerns relevant to this age range immediately after the event or at another predetermined time. If possible, encourage children and young people to have their own planning sessions concentrating on their own ideals and concerns. Make time for relationship-building, fun, and refreshments.

ZΦB
ZETA SINGS
THE BLUES

"Tis The Season"

Zetas Go GREEN For MENTAL HEALTH AWARENESS MONTH May 16th

CONTROL YOUR SPACE.
You have the right to set healthy personal, emotional, and technological boundaries to protect your mental health.

OCTOBER 10
WORLD MENTAL HEALTH DAY

Honoring your mental wellness helps you to be of greater service to your community.

LOOK WITHIN
TO SERVE THROUGHOUT

Appendix 1: Mental Health Observances

May

- Mental Health Awareness Month
- Wear a green ribbon on May 16th in support of Mental Health Awareness Month
- Ask your Government Official to proclaim May as Mental Health Awareness Month

July

- Minority Mental Health Awareness Month
- Wear a green ribbon on July 16th in support of Minority Mental Health Awareness Month
- Ask your Government Official to proclaim July as Minority Mental Health Awareness Month

Recommended ways to observe these months/days:

- Support and increase awareness through social media platforms
- Host a community activity to increase awareness
- Disseminate educational information
- Volunteer with a mental health organization
- Educate yourself and learn the warning signs and symptoms of mental illness
- Participate in a Sisters Supporting *Sisters* activity to boost mood and reduce stress
- Take action on advocacy and legislative issues to expand legislation that supports mental health

Appendix 2: Frequently Asked Questions

What is the NAMI (800-950-6264) **HelpLine?**

The NAMI HelpLine is a free service that provides information, referrals and support to people living with a mental health condition, family members and caregivers, mental health providers, and the public.

What kind of resources does the HelpLine provide?

- Information about mental health conditions, treatment options and recovery strategies.
- Suggestions for coping with mental health symptoms or helping someone else.
- Referrals to treatment services, community support services and other useful organizations.

What resources is the Helpline unable to provide?

- Offers empathy, understand and support, but do not provide counseling
- Can help identify options, but can't provide specific recommendations for things like treatment
- Offers referrals to organizations, but do not provide individual casework, legal representation or other types of individual advocacy.

Appendix 3: Key Facts and
Early Detection Signs

- Mental health is just as important as our physical health.
- Everyone has mental health, but not everyone meets criteria for a mental disorder.
- One of the most important relationships that you will develop is with yourSELF.
- Love yourself as much as you have loved others.
- Be kind to your body; be kind to your mind.
- Hurt people, hurt people.
- Mental illness is real and treatable.
- Learn how to say "no." "No" is a complete sentence.
- Address your basic needs daily through activities such as sound nutrition, exercise, proper sleep, intimacy, and healthy social interactions.

The following behaviors may indicate a mental health concern among children:

- Decline in school performance
- Poor grades despite strong efforts
- Constant worry or anxiety
- Repeated refusal to go to school or to take part in normal activities
- Hyperactivity or fidgeting
- Persistent nightmares
- Persistent disobedience or aggression
- Frequent temper tantrums
- Depression, sadness or irritability

Parents and relatives are typically the first to see whether a youngster has issues with feelings or behaviors. Your observations, alongside those of teachers and different parental figures, can help decide if seeking professional help for your child is indicated. Early identification and treatment can reduce the likelihood of further mental illness concerns in the future. Above all, it is important to recognize that for children, who may be unable to adequately express thoughts and emotions, significant change from baseline behavior is a cause for concern. Talk to your child's pediatrician or licensed mental health professional about your concerns.

Appendix 4: Resources

Help-Lines

Anxiety and Depression Association of America: 240-485-1001

Children and Adults with Attention-Deficit/Hyperactivity Disorder: 800-233-4050

Depression and Bipolar SUPPORT Alliance: 800-233-4050

Mental Health America: 800-969-6642

NAMI Helpline: 800-950-6264

SAMHSA Treatment Locator: 800-662-4357

Schizophrenia and Related Disorders Alliance of America: 240-423-9432

Suicide and Crisis

National Foundation of Suicide Prevention: 888-333-2377

National Domestic Violence Hotline: 800-799-7233

Suicide Prevention: 800-273-8255

Research and Statistics

National Institute of Mental Health: 866-615-6464

Community Supports

Clubhouse International provides a directory of clubhouses. Clubhouses provide opportunities for education, employment, and social activities. Click the 'International Directory' tab on their website to find contact information for local clubhouses.

www.homelessshelterdirectory.org provides a national directory of homeless shelters, assistance programs, soup kitchens, and more.

Job Accommodation Network is an organization that provides resources and guidance on workplace accommodations and disability employment issues. Their website includes a directory of state vocational rehabilitation offices. *Phone*: 800-526-7234

2-1-1 Dial 2-1-1 from a local phone or use their website to search for organizations that offer local support resources and services.

Youth, Teens, School and College Students

Office of Adolescent Health

Website: http://www.hhs.gov/ash/oah/adolescent-health-topics/mental-health/
Description: The U.S. Department of Health and Human Services Office of Adolescent Health offers information about adolescent mental health across states, adolescent mental health disorders, and access to care.

The Jed Foundation

Website: http://www.jedfoundation.org/
Description: The Jed Foundation is an organization committed to the mental and emotional health of college students and preventing suicide among this population. The foundation runs several free online self-assessment and resource programs for students and campuses. It offers training tools for campus professionals to improve their mental health services for students.

Youth.gov

Website: http://findyouthinfo.gov/federal-resources/federal-links
Description: This is a hub of government information about youth mental health issues, including substance abuse, LGBT issues, bullying, and homelessness.

ULifeline

Website: http://www.ulifeline.org/
Description: A project of the Jed Foundation that provides a free, confidential online resource about emotional health to more than 1,500 colleges and universities.

LawLifeline

Website: http://www.lawlifeline.org/
Description: LawLifeline is a combined project of the Jed Foundation and Dave Nee Foundation. It is a free, anonymous, and confidential online resource for law school students to seek out information about depression, anxiety, suicide, stress, and self-harm.

School Mental Health Project
Website: http://smhp.psych.ucla.edu/
Description: The UCLA Center for Mental Health in Schools created the School Mental Health Project, an online collection of tools, research, publications, and resources for school practitioners and professionals.

Women

Office on Women's Health

Website: https://www.womenshealth.gov/mental-health/resources/
Description: The Office on Women's Health of the U.S. Department of Health and Human Services provides access to research, publications, Surgeon General Reports, and general information for women's mental health issues. This includes problems related to pregnancy and conception, menstruation, menopause, women veterans, suicide prevention, and mental illnesses.

Women and Mental Health index

Website: http://www.nimh.nih.gov/health/topics/women-and-mental-health/index.shtml
Description: The National Institutes of Health's Women and Mental Health index contains information, research, and publications about women's mental health.

World Health Organization

Website: http://www.who.int/mental_health/prevention/genderwomen/en/
Description: The World Health Organization website contains a section on global mental health as it relates to issues of gender and gender disparity.

Minority

Office of Minority Health

Website: http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=26
Description: The U.S. Department of Health and Human Services Office of Minority Health website provides statistics, news, and treatment information.

Seniors

National Institutes of Health

Website: https://www.nia.nih.gov/health
Description: The National Institutes of Health provides this online index of information, videos, and training tools about senior health, including mental health and wellness.

National Council on Aging

Website: https://www.ncoa.org/center-for-healthy-aging
Description: The National Council on Aging promotes programs that help seniors cope with mental health issues like depression, anxiety, addiction, and more.

Hotlines

Mental Health Project

Website: http://smhp.psych.ucla.edu/hotline.htm
Description: UCLA's School Mental Health Project compiled a list of hotlines that are useful for school practitioners.

Safe Horizon

Website: http://www.safehorizon.org/index/get-help-8/call-our-hotlines-51.html
Description: Sexual assault prevention and awareness organization Safe Horizon provides a hotline for domestic violence victims, sexual assault victims, and crime victims to receive 24/7 free crisis counseling and safety planning.

National Suicide Prevention Lifeline

Website: http://www.suicidepreventionlifeline.org/
Description: This is a confidential, toll-free, 24-hour suicide prevention hotline. Call 1-800-273-TALK to receive counseling and local referrals.

Teen Health & Wellness

Website: http://www.teenhealthandwellness.com/static/hotlines
Description: A list of hotlines for teens facing issues ranging from bullying and abuse to drugs and eating disorders.

National Domestic Violence Hotline

Website: http://www.thehotline.org/
Description: The National Domestic Violence Hotline provides 24/7 counseling and support to victims of domestic violence and abuse at 1-800-799-SAFE (7233).

Veterans Crisis Line

Website: http://www.veteranscrisisline.net/
Description: The Veterans Crisis Line provides confidential help for veterans and their families at 1-800-273-8255.

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