

### Using a Mental Health First Aid Approach

#### How and When to Use Mental Health First Aid

Mental Health First Aid (MHFA) is an internationally recognized, best-practice approach to offering care and support for an individual who may be exhibiting signs of a mental health challenge, experiencing a mental health crisis or experiencing a worsening of their mental well-being. Developed in 2001, MHFA training has been offered by the Mental Health Commission of Canada since 2006. The content shared below is sourced through Mental Health First Aid Canada.

Please note that reading the material covered in below does not formally certify you to administer MHFA. If you are interested in learning more, or becoming certified in Mental Health First Aid, visit the Mental Health Commission of Canada's [course website](#).

#### When to Use MHFA

Just as physical first aid can be administered to stabilize an injured person before formal medical treatment can be obtained, MHFA supports an individual experiencing a mental health challenge, crisis or decline until treatment by a certified mental health or other medical professional is available. MHFA includes:

- Learning to recognize behaviors or situations that require intervention
- Understanding how to step in appropriately
- Confidently initiating a conversation when someone is in a mental health crisis
- Connecting the individual with appropriate professional supports in a timely and efficient manner

**One of the helpful tools of Mental Health First Aid is a framework called ALGEES, which is designed to help protect an individual from harm until professional support is provided, in those instances when you observe someone to be in a mental health crisis.**

**Note: ALGEES can also be a useful framework when engaging in a more general mental health check-in conversation with a team member**

In using ALGEES, think: **stabilize** the situation and **connect** the individual to the appropriate professional support and resources.

#### How to Use the ALGEES Approach

**ALGEES** is an acronym offering a suggested approach you may use when you observe someone in a mental health challenge, crisis or decline. The approach, outlined below, can be used in part or in full and in any order, depending on the situation.

**A: approach, assess and assist** the person

**L: listen** non-judgmentally

**G: give** reassurance and information

**E: encourage** appropriate professional help

**E: encourage** self-help and other support strategies

**S: self-care** for the provider

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#### Approach, assess and assist the person

This action involves **assessing** the situation, **approaching** the individual and **assisting** as needed.

**Assess:** How is this individual presenting? What is the situation? What is the estimated risk of the individual harming themselves or others?

- If you know them well, consider their behavior or presentation in relation to their typical presentation or behavior. This step is about assessing for a specific, concerning *change* to the person's typical behaviour, not an arbitrary observation or judgement.
- Call 9-1-1 if you are concerned for their safety or there is potential for harm or crisis.

**Approach:** Be mindful of your body language and tone of voice when approaching the individual. Consider how you might want to be approached if you were in need of support.

Say hello and start with a caring question about a specific observation you have made regarding the individual's behaviour:

- "I've noticed that..."
- "How are you doing?"
- "How long have you been feeling this way?"

If the person does not engage in the conversation about how they are feeling, continue to gently inquire to confirm their potential level of risk. However, respect the individual's boundaries of privacy and confidentiality.

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### Listen non-judgmentally

This action involves **active listening**. Set aside any personal judgments or biases about the individual or their situation.

Give time and space for them to openly share what is going on for them. If needed, ask open-ended questions to help encourage them to share. Be empathetic and paraphrase:

- "What I'm hearing you say is \_\_\_\_\_, am I correct?"
- "Can you help me understand \_\_\_\_\_?"
- "Can you tell me more?"

If you need to respond to the individual, stick to **observable** facts of the situation. Consider their level of agitation; be patient, speak slowly and use simple language.

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### Give reassurance and information

This action involves **showing you care** and respecting the individual's human need for comfort and support. Let them know it is okay to talk openly and to ask for help and/or comfort. Once a person has felt listened to, it can be easier to offer them support and information.

At the time of crisis, offer emotional support to the best of your ability. Empathize with how the person feels and offer practical help with any tasks that may seem overwhelming for the individual in the moment. **Ask**, don't tell, them what they need.

Ask the individual whether you can share information with them about resources and support:

- "Given the situation, it is understandable that you're feeling this way. There are resources that have helped other people, would you like information about these supports?"
- "Are there certain resources you'd be interested in learning more about or getting connected to?"

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### Encourage appropriate professional help:

This action involves **connecting the individual to appropriate professional resources**. It reflects the importance of being clear about your role and the limits to the help you can offer, as a peer or manager, in the case of a mental health challenge, crisis or decline.

Ask if the individual if there are professionals in their life who might be able to support them at this time.

- “Is there a health care professional you know and trust that you’d like to reach out to?”
- “Can I assist you in contacting this person?”
- “Who would you like to reach out to first?”

You might also ask if the individual would like to know about other options available to them through the City. For example, with their permission, you can call the City’s EFAP provider, Homewood Health, at **1-800-663-1142**, **press 1 for first-call-care** if needed, and hand to the phone to the person once you have a professional on the line. It is highly recommended to have this number in your personal and work phones so it is available to you, should you or a colleague need it.

You may also offer the individual the BC Crisis Centre help line at **604-872-3311** as appropriate.

Throughout this process, keep in mind that this is *the individual’s plan* to create, not your plan.

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### Encourage self-help and other support strategies:

This action involves encouraging the impacted individual to **seek out support** in whatever way is most accessible, realistic and comfortable for them. If appropriate, ask if there are mental health strategies that have worked for them before:

- “When you’ve had a hard time in the past, what did you do to get through it?”
- “What do you usually do to take care of yourself when you’re not feeling great?”
- “Would you be willing to try something that has worked well before?”

Ask if there are other people who have supported them in the past that you could help them connect with:

- “Can you think of someone you have reached out to in the past?”
- “Who have you shared these types of challenges with before?”
- “What communities are you part of that may be able to help you?”
- “What can I do to help you get in touch with them?”

Remember, this is the individual’s plan, not your plan.

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### Self-care for the provider

This action involves **taking care of yourself** after the situation has passed.

Ensure you use your own self-care strategies to care for yourself as needed if you’ve supported someone through a mental health challenge or crisis. Expect to have feelings that will need to be processed. Reach out to your own preferred supports and remember the City resources available to you.

Remember the goal of the ALGEES approach is to **stabilize** the situation and **connect** the individual to the appropriate support and resources. Your role is to provide support and assistance in the moment of crisis, it is not to diagnose or treat the person or ‘fix’ the situation.

If the outcome of the situation is not what you expected or hoped for, instead of burdening yourself with challenging emotions, try to consider it as a learning opportunity. Once an appropriate amount of time has passed, you may ask yourself:

- “What did I learn from this experience?”
- “What will I do differently next time?”
- “How can I improve my understanding and comfort with an ALGEES approach?”

### Cross-Cultural Considerations

When using ALGEES with someone from a different cultural background than yourself, there are a few important things to consider:

- Be open-minded, observant and curious
- Be patient, especially if communication is a challenge
- Focus on trying to understand the individual's experience and how they feel
- Speak slowly, calmly and use simple language – especially if you speak a different first language
- Be sensitive to power, gender and cultural differences
- Ask questions to help the individual identify resources within their cultural community or cultural practices
- *Don't assume that what works for you will work for them*

### What if an Individual is Reluctant to Talk to You?

It may happen that an individual experiencing a mental health challenge, crisis or decline is reluctant to talk to you. If this is the case, do your best to follow the ALGEES framework while respecting their wishes:

- Validate their experience and acknowledge it can be hard to talk about emotions
- Share your concern and assure them that you care for their well-being
- Find out who they would be willing to talk to and help connect them as needed
- Let them know they can come talk to you at any time; leave the door open for future conversations
- Give/help them access resource information but leave it with them to take action

**If an individual is in a crisis or emergency situation, do not leave until appropriate support has arrived.**