



**MANDELA  
WASHINGTON  
FELLOWSHIP**

**FOR YOUNG AFRICAN LEADERS**

# Mental Health 101: A Train the Trainer Model

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# Program Objectives

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- Define mental health in the context of wellness
- Describe the mental health continuum
- Evaluate biases around mental illness
- Identify signs and symptoms of mental health impairment
- Delineate between mental illness and spiritual illness
- Define trauma and its impact on behavior
- Discuss the impact of structural systems on mental health and behavior
- Describe the role of brain and hormonal imbalance on mental health
- Identify skills and strategies to support individuals and families
- Practice skills using case studies and role plays

# Day 1 Agenda

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- 1 Introductions
- 2 Let's talk mental health!
- 3 Naming and Defining Terms
- 4 Identifying signs and symptoms
- 5 Q & A



WHAT DO YOU THINK OF  
WHEN YOU HEAR THE TERM  
“MENTAL HEALTH”

# Continuum of Mental Health

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- We all experience varying degrees of mental health at different points in our life.
- Most people fall in the middle
- Although there are risk factors, anyone can become mentally ill given the right circumstances.

# Mental health in a systemic context

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- Power
  - The capacity or ability to direct or influence the behavior of others or the course of events (Dictionary.com)
  - Ability to wield force, authority, or influence. the power to mold public opinion (Merriam-Webster)
- Privilege
  - A special right, advantage, or immunity granted only to a particular person or group (Dictionary.com)
  - Unearned benefit enjoyed by an individual or group beyond what is available to others (uca.edu, 2017)
- Oppression
  - A situation in which people are governed in an unfair and cruel way and prevented from having opportunities and freedom (Cambridge Dictionary).
  - A combination of prejudice and institutional power that creates a system that regularly and severely discriminates against some groups and benefits other groups (Smithsonian, 2023)

# Defining Terms

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## Mental Health is

- Maintenance of successful mental activity
- Ability to engage in productive activities
- Ability to obtain and maintain healthy, fulfilling relationships
- Ability to adapt with change and cope with stress.

# Wellness

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- State of being in good health (Dictionary.com)
- “Active process through which people become aware of, and make choices toward, a more successful existence.” (National Wellness Institute)
- The rejection of social scripts and ability to imagine new ways of being (Patricia Hill Collins)
- Awareness, understanding, and freedom to humanity (Dr. Ebony White)



## ACTIVITY

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In Groups of 4, write your own definitions of wellness

# REPORT OUT

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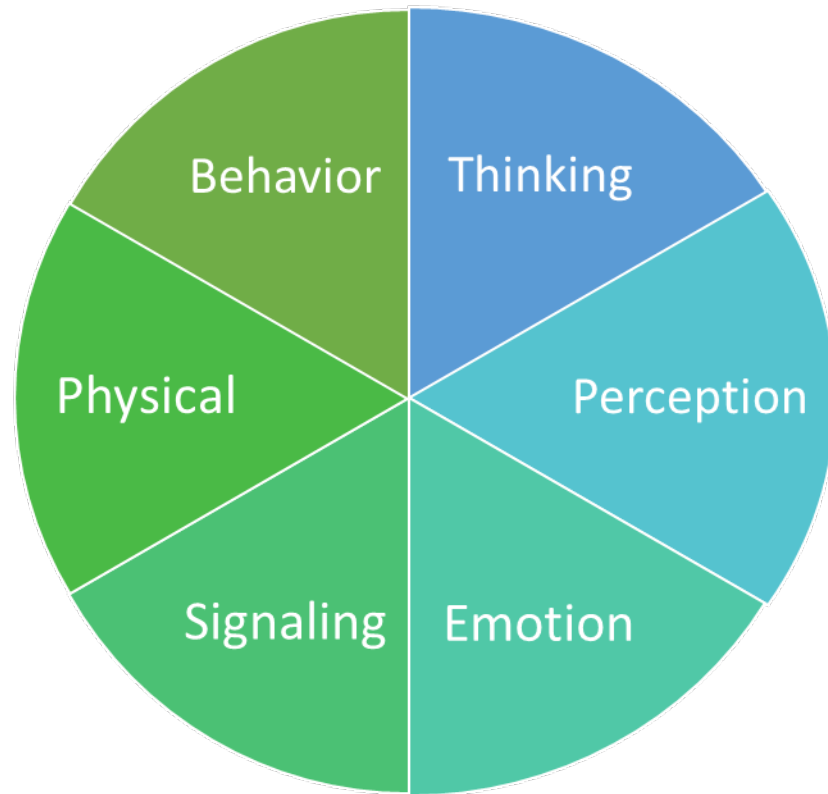
What comes to  
mind when you  
hear the term  
“mental illness?”



# What is mental illness?

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Disruption in one or more area of functioning



# Definitions

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- Mental Health

“a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.”

- Mental Illness

“collectively all diagnosable mental disorders” or “health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning.”

# Signs & Symptoms of Mental Illness

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- Feeling very sad or withdrawn for more than 2 weeks (e.g., crying regularly, feeling fatigued, feeling unmotivated).
- Trying to harm or kill oneself or others - or making plans to do so.
- Out-of-control, risk-taking behaviors that can cause harm to self or others.
- Sudden overwhelming fear for no reason, sometimes with a racing heart, physical discomfort or fast breathing.
- Severe mood swings that cause problems in relationships.
- Drastic changes in behavior, personality or sleeping habits (e.g., waking up early and acting agitated).
- Extreme difficulty in concentrating or staying still that can lead to failure in school/work.
- Intense worries or fears that get in the way of daily activities like hanging out with friends or going to classes.
- Intense responses to minute stimuli
- Disheveled/Unkempt appearance (poor hygiene, “don’t care”)

# Day 1 Continued

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- 1 Recap
- 2 Causes of Mental Illness
- 3 Mental Illness & Spirituality
- 4 Nigeria's Response to Mental Health Crisis
- 5 Q & A

# Definitions of wellness

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- **Group E:** It is a continuous state of having total physical, emotional, psychological, economic, mental, social, sexual and spiritual health of an individual in order to function maximally in any given situation to enable a fulfilled life.
- **Group A:** A state of being physically, socially, emotionally, psychologically, financially, economically, and spiritually stable to perform the activities of daily living to achieve self-actualization.
- **Group C:** An optimal state of the mind encompassing physical and psychosocial well-being of an individual or person in relationship with the environment.
- **Group D:** A process of creating an awareness of health-sustaining behaviors in order to achieve a state of physical, emotional, mental, and psychosocial resilience and optimal health.



# What causes mental illness?

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- Who knows?
- Genetics
- Environmental Stressors
- Specific Stressor

# Mental illness does **not** mean...

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- You are a bad person or a bad parent
- You are evil
- You are being punished
- You are weak
- You are possessed
- You are crazy

# Self-Reflection Activity

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- What are some beliefs you have about mental health and mental illness that influence ways in which you provide care?
- Where do these beliefs come from?
- How does stigma impact mental health care?

# Mental Health Legislation in Nigeria

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- Lunacy Ordinance of 1916
- Lunacy Act of 1958
- First mental health policy (promotion, advocacy, prevention, treatment, and rehabilitation) 1991 (Saied, 2023)
- In January 2023, Mental Health Bill 2021 signed into law (Saied, 2023)
- What are the barriers to implementation?

# Mental Health & Spirituality in Nigeria

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- One traditional healer per 500 population vs. one medical doctor per 40,000 population (Anjorin & Wada, 2022)
- A study of ~ 1000 Nigerians, found about 80% of people with mental problems sought mental health care from informal providers such as priests, spiritualists, or traditional healers (Lasebekin et al., 2012)
- Agara et al.(2008) discovered that participants believed mental illness was linked to:
  - Witchcraft (93.3%)
  - Punishment for sins (73.3%)
  - Supernatural causes (66.7%)

# Mental health treatment in Nigeria

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- 1 in 4 Nigerians have a mental health issue (Soroye et al., 2021)
- 80% of Nigerians with serious mental health issues don't receive care (Wada et al., 2021)
- Only 300 psychiatrists for over 200 million people (Saied, 2023)
- Most individuals receive treatment from traditional leaders, churches, prayer camps, and imams (Anjorin & Wada, 2022 ;Lasebekin et al., 2012)
- In a study of about a 1000 Nigerians, approximately 80% of people with mental problems sought mental health care from informal providers such as priests, spiritualists, or traditional healers (Lasebekin et al., 2012)
- The traditional remedies include (Labinjo et al., 2019; Urigwe, 2010)
  - herbs, spiritual therapy, counseling, and psychotherapy
  - Study showed use of water (66.7%), biblical verses (66.7%), fasting and prayer (96.7%), counseling (90%), beating (40%), and occupational therapy (13.3%)
  - Some evidence support the claim that Traditional healers can deliver effective psychosocial therapies, enabling social engagement and enhancing coping mechanisms
  - These therapies may assist to relieve discomfort and improve minor symptoms of depression and anxiety, but little evidence that they can alter the course of serious mental illnesses

# Solutions for Mental Health Issues in Nigeria?

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- Integrate mental health in primary care
- Community based rehabilitation centers
- Education campaigns to reduce stigma
- Pastors and other religious leaders promoting mental health care and education
- Anything else?

# Participant Solutions

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- Partner with healers using models that have worked before
- Advocate for courses (Diplomacy) and early, extensive training in school
- Ongoing training and re-training
- Ensure there are mental health services/units in every healthcare facility (on some level this is already happening)
- Advocate and volunteer when stakeholders are called upon
- Introduce into children's schools early
- Partner with CHEWs (Community Health Extension Workers)



# Self-Reflection Activity

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- How can we reconcile our spiritual and cultural beliefs with our mental health knowledge?
- Role play validation assessment

# Day 2 Agenda

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- 1 Recap of Day 1
- 2 Let's talk about trauma!
- 3 Ecological Systems Theory
- 4 Practicing Skills
- 5 Daily Care Practices

# What is Trauma?

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- **Trauma** is the reaction that occurs when the demands of very stressful events exceed our available coping resources and result in severe distress.
- Experiencing a serious injury to yourself
- Witnessing a serious injury to or death of someone
- Facing imminent threats of serious injury or death
- Experiencing a violation of personal physical integrity
- An emotional wound or shock often having long-lasting impact
- “Trauma is also a wordless story our body tells itself about what is safe and what is a threat.” — **Resmaa Menakem**
- “Trauma is not what happens to us, but what we hold inside in the absence of an empathetic witness” - Peter Levine

# Physiological Response to Trauma

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- Brain – Autonomic Nervous System (ANS) – Exposure to trauma or stress has a dramatic impact.
  - Parasympathetic Nervous System (PNS) - maintains normal physiological activity, decreasing the heart and breathing rate, blood flow to the extremities while decreasing the blood flow to digestive system.
  - Sympathetic Nervous System (SNS) - protect the body when there is a perceived threat to survival or body integrity by activating the fight or flight (or freeze) response.
  - Polyvagal theory – highlights the nuances of the way the ANS operates. Suggests a social engagement component which is alert to our social environments and relationships.
  - Autonomic stress response is triggered similarly by both physical and emotional pain, individuals who continually perceive danger in their environments will elicit a constant autonomic response of alertness, which ranges from a state of vigilance to terror.

# Trauma

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- It is NOT the objective severity of the trauma, but how it is experienced by the person/community that determines traumatic stress responses.
- Viewed through a cultural lens, an individual's/community's subjective perceptions of the trauma experience can sometimes be quite different from a counselor's.
- The way the individual/community interprets the meaning of the trauma will influence subsequent distress, reactions, and ways of coping.
- Cultural differences can also exist in beliefs about if, when, and how to resolve traumatic stress symptoms, and about help-seeking and utilization of supportive resources outside their community

# Post Traumatic Stress Disorder (PTSD)

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- PTSD is a mental health condition that's triggered by a terrifying event (either experiencing it or witnessing it).
- Symptoms may include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts about the event.
- Symptoms can worsen, lasting for months or even years and interfere with functioning.
- A history of exposure to a traumatic event that meets specific stipulations and symptoms from each of four symptom clusters: intrusion, avoidance, negative alterations in cognitions and mood, and alterations in arousal and reactivity.



# PTSD example from US

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- Within the same time period
  - 3,500 American troops were killed during the eight-year war in Iraq
  - 3,113 people were killed on the streets of Philadelphia.
  - According to FBI data, between 2002 and 2012, 5,000 homicides occurred in Chicago (nearly 3x the number of Americans killed in action in Afghanistan).
- Research among residents who had been exposed to violence in their cities
  - Symptoms of post-traumatic stress disorder (PTSD): nightmares, obsessive thoughts, a constant sense of danger.
  - Two thirds of respondents said they had been violently attacked at some point in their lives.
  - Half knew someone who had been murdered.
  - Of the women interviewed, a third had been sexually assaulted.
  - 30 percent of respondents had had symptoms consistent with PTSD (equal or higher than that of veterans of wars in Vietnam, Iraq & Afghanistan).



# PTSD example from US

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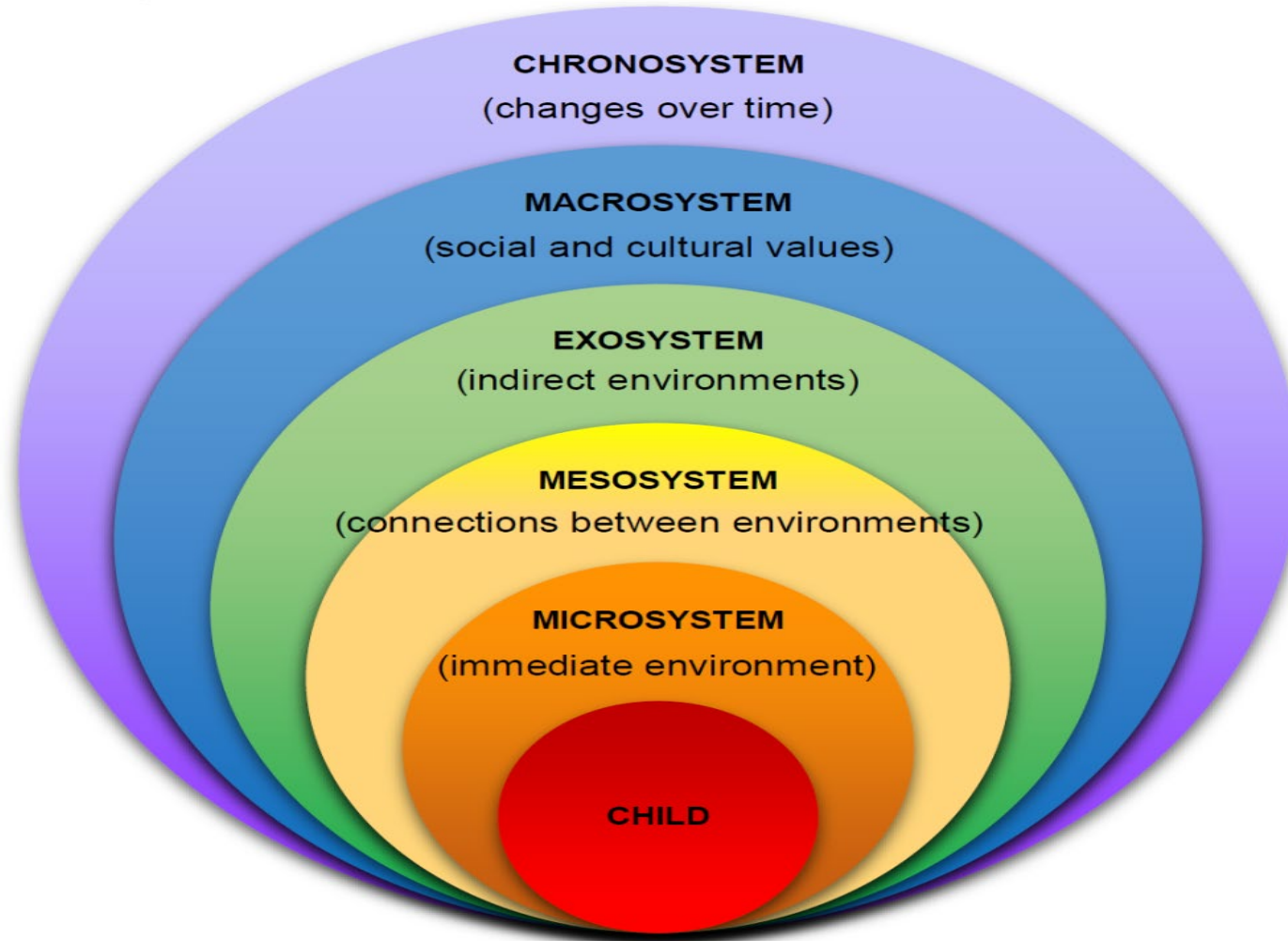
- Effects of untreated PTSD on neighborhoods that are already struggling with unemployment, poverty and the devastating impact of the war on drugs.
  - Women are more likely to show signs of anxiety and depression and to avoid places that remind them of the trauma.
  - In children, PTSD symptoms can sometimes be misdiagnosed as attention deficit hyperactivity disorder (ADHD).
  - Kids with PTSD may compulsively repeat some part of the trauma while playing games or drawing, have trouble in their relationships with family members, and struggle in school. Men with PTSD are more likely to have trouble controlling their anger, and to try to repress their trauma symptoms with alcohol or drugs. Though most people with post-traumatic stress are not violent, PTSD is also associated with an increased risk of aggression and violent behavior, including domestic violence.

“Because of all the gun violence, we have a lot of traumatized people—and it’s not just the people who are being shot and shot at, it’s the people who are witnessing it, the vicarious trauma” Dr. Marleen Wong



# Ecological Systems Theory

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# Time to Practice!

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- In Groups, develop a case study! (15 minutes)
- We will use these case studies to practice skills!

# Daily Care Practices

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- TIPP Skills
- Journaling (be creative)
- Engage in enjoyable hobbies (farming, cooking yam 😊 )
- Spend meaningful time with loved ones
- Mindful activities (showering, eating, moisturizing)
- Take time to rest and recharge (sleep does not count)
- Dance it out
- Exercise
- Use PTO
- Eat lunch away from office
- Do kid-like activities (i.e., color)

# Thank You!



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# Thank You!

