Take care

Mental health awareness guide
for young adults

Resources for Living®
Being young and figuring out who you are is an exciting but challenging time. It can be challenging too. We know that mental health and suicide are very real problems that need to be talked about.

This guidebook will provide you with tools to help you support your mental health.
Depression

Is this something else?
In our teenage and young adult years, we go through major changes physically, emotionally and mentally. These changes can be confusing.

What to expect
Teens are getting ready for adulthood. And that means you want to start breaking free and being more independent. So it’s completely normal for you to spend less time with your parents and more time with your friends.

You may notice you:
• See yourself as invincible
• Have poor impulse control
• Experience mood swings
• Seem irritable
• Overreact to situations

Is it depression?
When you feel something is “off,” you may be tempted to chalk it up to growing up. However, get help if you notice you:
• Withdraw from family AND friends
• Are sad and irritable most of the day
• Have trouble with more than one area of life (school, work and friends)
• Stop enjoying things that used to make you happy
• Stop caring about the future
• Have major changes in behavior, sleep or appetite
• Hear from others that they are concerned about you
• Start using alcohol or drugs to feel better
• Have thoughts about harming yourself
Ways to get help
If you are struggling with depression, be sure to get help. Reach out to a parent or caregiver, a counselor at school, your doctor or a mental health professional. There is help available.

Positive self image
Feeling good about yourself isn’t about comparing yourself to others or being rich and famous. It’s about being the best version of yourself.

When you take time to nurture your self-esteem, you’re likely to find you can get more done and give more back. It’s not about being a super-hero. It’s about enjoying who you are, where you are in life and what you’re doing. It all adds up to self-acceptance.

Here are some ways you can strengthen your self-image:

Nurture your body
- **Diet.** Choose healthy meals and snacks. Limit junk foods, such as processed snacks or frozen dinners that have a lot of salt, fat and/or sugar. Problems such as restlessness, irritability, inability to concentrate, etc., may be the result of a poor diet. Eating a variety of healthy foods each day may help.
- **Exercise.** Moving your body helps boost your mood. It’s also good for your health. Arrange a time every day or as often as possible when you can get some exercise. Be sure to check with your doctor before beginning or changing your exercise habits.
- **Dress up.** Shop for and wear clothes that make you feel good about yourself.
- **Check up on your health.** Go for your physical exam every year. Follow up if you’re managing a chronic condition or illness.

Reducing tension and anxiety
There are many ways to deal with tension and anxiety, without using medications, such as:

- **Exercise** – Try to get 30 minutes or more of moderate physical exercise every day. Consult your healthcare provider before beginning an exercise program.
- **Recreation** – Take time out to do something you enjoy such as photography, painting, dancing, ceramics, etc.
- **Sleep** – Learn to recognize when you need more or less sleep. If you have trouble falling asleep, try reading, doing puzzles or watching television.
- **Counseling** – This may help you identify new ways of coping by changing your reactions, thoughts and feelings about anxiety-provoking situations.
- **Journaling** – Writing in a journal can help you solve problems and work through painful emotions.
- **Relaxation techniques** – Meditating, deep breathing and imagery may help you relax and overcome anxiety. Massage, hypnosis, and biofeedback (controlling stress from biological responses) may also be helpful.
- **Self-help groups** – Talking about problems with people who have had similar experiences can be helpful. You can find groups in your area through your health-care provider, caseworker, counselor or community information & referral agency.
- **Self-talk** – You might try coming up with positive ways of looking at yourself or situations in your life. Negative thoughts can lead to “tunnel vision” and keep us from reaching for our full potential.
Self-harm can be very confusing. After all, why would someone hurt themselves on purpose? Many people think self-harm and suicide are the same thing. But they're actually very different.

What is self-harm?
People who harm themselves use it as a way to cope with their upset feelings. By hurting themselves, they experience temporary relief from their emotional pain. Self-harm may include:
- Cutting
- Scratching
- Burning
- Carving
- Hitting, punching or head-banging

Why do people harm themselves?
Most people hate pain and getting hurt. So it can be confusing to hear about others injuring themselves on purpose. Why do they do it?
Scientists have learned there are two small parts of the brain that deal with pain. These areas experience both physical and emotional pain. So when a person self-harms, there's a brief peak in physical pain but then it goes down. When it does so, it also reduces the emotional pain, providing relief to the person.
Self-injury may also be an attempt to:
- Distract from painful feelings
- Create a sense of control
- Feel something when they are otherwise emotionally “empty” or “numb”
- Punish themselves

Suicide vs. self-harm
In cases of both suicide and self-harm, people are experiencing emotional pain. But the intent is different. People who attempt suicide are seeking to end extreme pain and anguish. They don’t necessarily want to die, but can’t see that things will improve or fathom living in pain any longer. Individuals who self-harm are seeking ways to cope with life, and in some cases, seek ways to “feel” as a way to remind themselves they are still living.

Responding to self-harm
If you or someone you know is self-harming, connect with a doctor or therapist right away.
Eating disorders

Many people worry about their weight, what they eat and how they look. Eating disorders may start as an attempt to feel more in control or fit in with a social group. But they can move into an unhealthy obsession with food, body weight or shape.

Eating disorders can affect people of all:
• Ages
• Genders
• Sexual orientations
• Body shapes and sizes
• Races and ethnicities

Eating disorders can surface due to:
• Genetics and biology
• Mental health issues
• Personality traits
• Social and cultural pressures

The most common types of eating disorders are:
• Anorexia nervosa, which can look like:
  - Losing weight by extreme dieting, starvation or over-exercising
  - Being underweight compared to people the same age and height
  - Showing very firm and restricted eating patterns or behaviors
  - Having a distorted body image
• Bulimia nervosa, which can look like:
  - Losing weight by vomiting, taking laxatives, exercising or fasting after binge eating
  - Fearing weight gain, even when normal or below normal body weight
  - Purging to prevent weight gain
  - Having a distorted body image
• Binge eating disorder, which can look like:
  - Eating an unusually large amount of food in one sitting, on multiple occasions
  - Eating in secret and/or very quickly
  - Eating despite not feeling hungry or being uncomfortably full
  - Feeling a lack of control, shame, disgust and guilt when thinking about their binge eating

The health consequences of eating disorders are severe and include:
• Abnormally slow heart rate and low blood pressure
• Risk of heart failure
• Decreased bone density
• Muscle loss and weakness
• Severe dehydration (can result in kidney failure)
• Severe constipation
• Fainting
• Fatigue and overall weakness
• Dry hair and skin
• Hair loss
• The growth of a downy layer of hair (lanugo) all over the body
• Low body temperature
• Reversible and irreversible brain damage and death.

Treatment for eating disorders is usually long-term and can be expensive. Treatment should include:
• Medical supervision to monitor the re-introduction of food
• Nutritional education
• Counseling and support groups.

If you think you see signs of an eating disorder, it’s important to speak up. People with eating disorders often struggle to find a way to bring up their problem. Some don’t think they even need or deserve help. If someone you know is struggling with an eating disorder, consider the following tips:

- **Learn.** The more you know, the better you may be able to help. Research and learn about eating disorders and treatment.

- **Talk.** Find time to talk, in private, and be prepared with what you want to say. Focus on specific behaviors you’re concerned about. Avoid giving advice. Let them know you are there for them and will help them seek help. Even if the talk doesn’t go well, don’t give up. You may need to let someone else like a parent or school counselor know you’re concerned.

- **Listen.** Even if you don’t understand what the person is going through, it’s important to support their feelings. Be prepared for them to deny the behaviors, get angry or minimize your concerns. Don’t take it personally. Let your friend or family member know you’re there for them.

- **Support.** Let them know you’re willing to help. Remind them there is no shame in talking about their issues or seeking help.

- **Get help.** Encourage them to seek help. Offer to help find a physician or therapist. Help them make the first call or appointment. Offer to go with them.

If you’re concerned about their health and safety, such as threats of suicide or if there is a medical or mental health emergency, call 911 at once.

**Tips to help with healthy eating**

- Don’t skip meals; try to eat every 4-5 hours
- Plan ahead for meals; keep your pantry full of healthy foods. Make sure to purchase foods that are quick and easy to prepare when time is limited.
- Eat at least 8 glasses or 64 fluid ounces of water daily.
- Limit high sugar beverages such as juice and soda
- Exercise; try to find activities that you enjoy doing. Aim for at least 30 minutes above your normal activities on most days of the week. If time is an issue, try to split it up to three 10 minute exercise sessions.
- Eat at least four servings of fruit and 5 servings of vegetables each day.
- Eat three servings of non-fat or low-fat dairy or dairy substitute. Examples include skim or non-fat milk or almond milk, yogurt and cheese.
- Eat six servings of whole grains. Examples are whole grain cereal, 100 percent whole wheat bread, whole wheat pasta, whole grain English muffins or tortillas.
- Focus on food. Take some time away from your school work or the TV when you eat. This can help you relax and become more aware of your feelings of satisfaction and fullness.
- Do something you enjoy at least once a day; take a hot bath or shower or listen to good music for example.

**Resources**

- **National Eating Disorders Association Helpline**
  Tel: 1-800-931-2237
- **Eating Disorder Referral and Information Center**
- **National Association of Anorexia Nervosa and Associated Disorders**
- **Anorexia Nervosa and Related Eating Disorders, Inc.**

Suicide prevention: Understanding & helping

**Know the signs**
Preventing suicide is so important. If you see these signs, get help. It could save a life. Look for these signs. It could save a life.

- Talking about death or suicide
- Lacking interest in the future
- Dropping out of activities
- Withdrawing from family or friends
- Giving away prized possessions
- Taking risks
- Saying goodbye like they won’t see you again

**Risk factors**
Some people are at a greater risk for suicide. Risk factors may include:

- Access to guns or pills
- Drug and alcohol use
- Previous suicide attempts
- Feeling alone
- Feeling angry
- Trauma and neglect
- Loss of a parent or parental fighting
- Exposure to bullying
- Family history of suicide

**How to help**

- **Ask questions.** Ask them if they are thinking about death or hurting themselves.
- **Encourage them to get help, talk to their parent or guardian, a counselor, or other support person.** Know it’s not your job to take the place of a therapist.
- **Offer to help them get support.** You can research treatment options or make calls.
- **Remove dangerous items.** Remove things like knives, razors, guns or drugs and ask their parent or guardian to help.
- **Do not make light of suicidal comments or thoughts.** Take all threats seriously.

**What can you do if you’re concerned about someone you know?**

It’s hard to hurt. It’s hard to see someone you love hurting. You don’t have to fix the problem on your own. Professionals, like therapists, are trained to deal with mental health issues that lead to thoughts of suicide. You may be scared, but it’s important to speak up. Take a deep breath, stay calm and:

- **Call 1-800-273-TALK (8255)**
- **Call us to get support**
- **Don’t leave a suicidal person alone**
- **Call 911**
Mental health for LGBTQ+ youth

Everybody worries about fitting in. And teens and young adults who are lesbian, gay, bisexual, transgender, questioning or queer (LGBTQ+), also face possible stigma and discrimination. This can put LGBTQ+ youth at an increased risk for mental health concerns.

Discrimination and mental health

LGBTQ+ youth are more likely to experience discrimination than their heterosexual and cisgender (people whose gender identity matches their physical sex) peers. For example, something as simple as having access to a restroom can impact the mental health of a young person who is transgender.

Here are some statistics to consider:¹

• 60 percent of LGBQ+ youth report being so sad or hopeless they stopped doing some of their usual activities.
• LGBQ+ young people are more than twice as likely to feel suicidal and over four times as likely to attempt suicide.
• Transgender youth are nearly four times as likely as their non-transgender peers to experience depression.
• Transgender students who were denied access to gender-appropriate facilities were 45 percent more likely to attempt suicide.

Coming Out: A Process

Have you come to a point on your journey where you’ve come to terms with your sexual identity and are ready to share? If so, you might be ready to come out.

Coming out involves owning your sexual identity or gender identity with the option to share with others. This isn’t an easy process and can involve much risk.

If you feel safe enough to speak your truth and are prepared for the outcome, you may be ready to take the leap. If you decide to come out, know that it’s a personal choice. You decide how, when and with whom this is shared.

Before you disclose

Coming out begins with accepting your own sexual identity. If you’re feeling confused or unhappy as you begin accepting your own sexual or gender identity, you might seek your own therapy first.

Therapists can offer support for LGBTQ+ issues and any other areas of importance. They can provide a safe space for you to share your feelings while offering healthy ways to cope.

You can search for local support resources or contact your Employee Assistance Program or medical plan to locate a counselor that meets your needs. The more support you have in place, the easier this process can become.

Disclosure: The next step

Now that you’re ready to disclose, here are a few things to consider:

• **The people to whom you’re about to disclose your personal information.** The bond you have with those you’re coming out to should be one that is built on mutual support and trust. Before you share, ask yourself if this is truly someone whose opinion you value. Is the person open-minded and do they share similar values? If the person tends to see social issues as black or white, then they may not be as accepting. Homophobia, myths, fears and labels can cloud a person’s ability to understand your point of view. If a person has some degree of flexibility, then they might be more open to learning more. It can help to have items on hand such as books or materials that discuss LGBTQ+ topics.

• **Timing and support.** Also, consider the timing of when you share. Keep in mind that life changes and health can affect how people react. Hopefully, your timing will be comfortable for you and the friend or family member you’re about to talk to.

• **Your support system.** Would it be helpful to have someone you trust with you either on the phone or in person? This might help lessen your own worries and help you feel supported. Before taking this step, weigh the pros and cons of having someone present.

After disclosure

Now that you’ve disclosed, assess your feelings. You’ve taken a huge step in sharing parts of your identity and it’s normal to feel a range of emotions. You might feel sad, overwhelmed, relieved or happy.

If the responses were less than positive, take the time you need to regain your footing. Be mindful that the people you disclose to may have their own process to go through as they take in new information. Give them time and space. Coming out may cause positive or negative reactions. Some may choose to distance themselves. If this is the case, tap into those in your support circle. They can create a space for you to share your experience as well as offer support. Caring for your own mental health can strengthen your ability to deal with the long-term effects of coming out.

Visit the following websites for information, resources and support:

• [glbthotline.org](http://glbthotline.org)
• [nami.org](http://nami.org)
• [lgbthealtheducation.org](http://lgbthealtheducation.org)
Mental health for Black, indigenous and youth of color

Mental health problems put many young people at risk for suicidal thoughts and attempts. But teens who are Black, indigenous or people of color (BIPOC) face even more challenges because of exposure to discrimination and potential violence. And these problems can add risk to their mental wellbeing.

Here are some important numbers to consider:

- Non-Hispanic American Indian or Alaskan native youth have the highest rate of suicide
- Suicide rates for Black children under the age of 13 is double that of their white peers
- Suicide death rates among Black youth are increasing faster than any other racial or ethnic group
- Black youth are less likely than their white peers to receive care for depression. And when they do get treatment, it’s often through the juvenile justice system.

Discrimination and mental health

Racism, discrimination and chronic stress are all tied to poor mental health. But people may not realize that racial discrimination can be a type of chronic stress. “Experiences with racism are stressors, and are chronic, unpredictable and uncontrollable – the worst kind of stress,” says Dr. Kwate of Rutgers University.

And trying to anticipate and prevent potential discrimination only adds to the stress. This might include:

- Trying to prepare for possible insults
- Paying careful attention to your speech or appearance
- Avoiding certain people, places and situations

What can you do?

Start by developing positive views of your race. And try to reduce the stigma of seeking help for mental health problems.

If you are experiencing mental distress, it’s a good idea to consult a mental health professional. And here are some other resources you can explore:

- Therapy for Black Girls
- Therapy for Black Men
- Therapy for Latinx
- Latinx Therapy
- Asian & Pacific Islander American Health Forum
- Asian American Health Initiative
- One Sky Center
- WeRNative

Remember, you aren’t alone. Help is available. Seeking help is a sign of strength.


Substance misuse in your teenage young adult years can have a lifelong impact both mentally and physically. Some people misuse substances because of peer pressure or to try to escape emotional or social problems.

**Substance misuse in teens:**
- Harms growth and development
- Often leads to new or increased risk-taking behaviors (such as unprotected sex, dangerous driving, legal problems, etc.)
- Increases the risk of later health problems (such as heart disease, high blood pressure, sleeping disorders, etc.)

**According to the Centers for Disease Control and Prevention (CDC):**
- The most misused substances by adolescents are alcohol, marijuana and tobacco.
- About 67 percent of children have tried alcohol by 12th grade.
- About 50 percent of 9th through 12th grade students reported having tried marijuana.
- About 40 percent of 9th through 12th grade students reported having tried cigarettes.
- Among 12th graders, close to 20 percent reported using prescription medicine without a prescription.
- Children, teens and young adults from 12 to 20 years of age account for about one-tenth of all alcohol consumed in the United States.

**What is the relationship between substance misuse and suicide risk?**
Individuals with substance misuse problems are sensitive to suicidal thinking and behavior. Substance misuse can lead to impulsive decision-making, especially for those who have other risk factors such as:
- Mental health disorders
- Physical pain
- Family history of suicide
- Relationship problems

*Teensubstance use and risks, Accessed February 2021.*
**Signs and indicators you need help:**
- Feelings of hopelessness, despair or worthlessness
- Talking about suicide, making statements that life is not worth living, not wanting to be around or wishing were dead
- Changes in behavior, including new or increased risk-taking behavior or impulsiveness
- Withdrawal from friends, family or activities you typically enjoy
- Refusing to attend school, skipping school, missing assignments or a decline in grades
- Change in eating and sleeping habits—too much or too little
- Decline in personal hygiene and appearance
- Use of drugs or alcohol

**Treatment referral resources**
Talk to a trusted adult and ask for help
- Call **1-800-273-TALK (8255)**
- Call us to get support
- Substance Abuse and Mental Health Services Administration (SAMHSA) Treatment Locator: **1-800-662-HELP** or search **samhsa.gov**
- The “Find A Physician” feature on the American Society of Addiction Medicine (ASAM) Web site: **aaap.org**
**Cyberbullying**

**Keep yourself safe from cyberbullying**
95 percent of young adults in the U.S. are online, making it the most common place for cyberbullying. The more you know about cyberbullying, the more prepared you’ll be to protect yourself.

**Understanding cyberbullying to keep yourself safe**

You can be cyberbullied through:
- Text messages
- Online chat or message forums
- E-mail
- Websites or video channels (YouTube, TikTok)
- Social media

It can happen in many ways. Here are a few examples:
- Posting of degrading photos
- “Hacked” accounts
- Impersonation

A bully can also post comments under your name that offend or anger others. This can be very dangerous if the bully intends to provoke other people to harm you. If you ever suffers bullying in this way, you’ll need to tell a trusted adult and call the police at once.

**It’s different from in-person bullying**

Like in-person bullying, cyberbullying can cause great harm. Cyberbullying victims are more likely to have low self-esteem and to consider suicide. Cyberbullying can:
- Happen at any time of day or night
- Cause a large amount of damage quickly
- Intrude on your home, school and social life
- Make the bully hard to identify

Cyberbullying can also happen by accident. It could be caused by something innocent like a joke that goes wrong. Cyberbullying takes many forms. But it needs to be stopped as soon as you find out about it.

**What can you do?**

If you’re bullied online:
- Tell a trusted adult and get help.
- Don’t respond to or forward cyberbullying messages.
- Keep evidence. Record the dates, times, and descriptions of instances when cyberbullying has occurred. Save and print screenshots, emails, and text messages.
- Block and report the person who is cyberbullying. Do not react to the bully or be aggressive.
- Know it’s not your fault and you don’t have to face it alone.
- Contact the your school or work for assistance.

In some cases, cyberbulling is against the law. Consult your state’s laws and law enforcement for additional guidance.

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Care across the continuum

It takes strength and courage to reach out for help. If you needed to go to the hospital for care, to keep you safe, you did the right thing. Going in-patient can be tough, but it can also be the start to building a better future.

Before you leave the hospital
Prior to discharge, discuss any concerns you have with your treatment team. The treatment team includes hospital staff, providers involved with you prior to hospitalization and providers who will be involved after discharge from the hospital. Consider talking about the following resources and how to best include these in your post-discharge plan:
- Brown Stanley Safety Planning Intervention
- Follow-up treatment and services
- Treatment plan
- Medication plan, if applicable
- Crisis contact numbers

When returning home
The time after you are discharged from the hospital following a suicide attempt can be filled with many emotions, questions and feelings of uncertainty. It is important to maintain an open dialogue with your support system and let them know how to help you.

Maintain clinical contact
It is essential to follow up and maintain all therapeutic/clinical recommendations after discharge. This can lower the risk of another suicide attempt. A clinician should be assessing your risk of suicide routinely. You and all members of the treatment team should maintain copies of the treatment plan along with a detailed safety plan. The safety plan outlines follow-up appointment dates and times, actions to cope with immediate and increasing distress, as well as contact numbers for support and crisis intervention.

If any changes to your treatment plan are needed, contact your provider immediately. Treat mental health like any other medical treatment. If you had a major surgery, you would follow up with providers to get the stitches removed, ask questions about wound healing, pain, etc. Following up with your treatment plan and after care is critical to recovery.

Build out your support system
The idea that “it takes a village” is highly relevant when it comes to dealing with stress and mental illness. Navigate through your network of friends, family and acquaintances to determine if, and how they may be able to help with your recovery. It can be a balancing act of maintaining and respecting your privacy while also supporting you and ensuring your safety. Having a broad support system in place allows you to have multiple trusted options for whom to turn to in a crisis. It can provide an extra layer of support and security.
Safety planning

Now that you have been discharged from the hospital, we want to support you in staying safe from harm. Not unlike a fire escape plan, a safety plan helps lay out next steps so things don’t escalate to the point of a crisis.

What is a safety plan?
A safety plan is a list of coping strategies and individuals or agencies you can contact for support. The plan should be brief and easy to read. The plan can be used before or during a crisis to help lower the risk of suicidal behavior.

Who should have a safety plan?
Anyone with a history of suicidal ideation or attempts should have a detailed plan that is easily accessible, like on their phone.

How should a safety plan be created?
Use the Brown Stanley safety plan form located in this toolkit. Sit down with trusted supports and read through the questions together. Write down realistic, achievable action steps covering these six important areas:
• Warning signs
• Internal coping strategies
• Social contacts who may distract from the crisis
• Family members or friends who may offer help
• Professionals and agencies to contact for help
• Making the environment safe

When to start using the safety plan.
After completing the form:
• Go over the plan with your treating clinician, family and friends. This discussion is important to make sure the plan is realistic and useful.
• Determine where you will keep the safety plan. Read over the plan whenever you are feeling stressed, depressed or suicidal.
• Update the plan when circumstances or needs change.

Find the Brown Stanley safety plan here: sprc.org
Financial wellness for young adults

Do you ever get to the end of the month and find yourself wondering where the money went? And each day, it seems as though there is another item to pay for. Not only does poor financial health make it difficult to save up, but it can have a drastic effect on your mental health, including depression, anxiety, and substance use. Individuals often find themselves trapped in a vicious cycle of financial hardship deteriorating their mental health, which in turn makes it more difficult to manage one’s money.

However bleak the situation may seem, you can take back control of your financial wellbeing and break the cycle.

Personal finances

Let’s face it, managing our money can be very stressful. But there are some basic strategies for making this aspect of life less stressful and, in the process, perhaps helping your income stretch further.

Consider the following suggestions for managing personal/household finances:

- **Determine as precisely as possible your income.** It is hard to set reasonable, workable budgets if you are unsure of what money is available for expenses.
- **Track your expenses.** Again it is helpful to be as precise as possible. For example, rather than simply having one broad category for “Food” you may wish to break it down into “Food Purchased from Grocery Stores”, “Meals at Restaurants”, “Snacks from Vending Machines or Concession Stands”, etc. The more detailed your expense tracking the easier it will be to find opportunities for reducing expenses. Accurately record checks that you write and save credit card receipts. Develop a system for recording cash purchases on a daily basis so they are not forgotten.
- **Be Organized.** Maintain accurate records. Keep receipts, bills, statements, etc. organized and in a consistent location. This will save time and unnecessary stress. Keep some type of calendar or “tickler file” system that reminds you when various payments need to be made. This will help you avoid unnecessary late fees and finance charges, freeing more income to go where you want it to go.

- **Determine priorities among expenses.** Some expenses may be considered essentials such as rent or, car payment, utilities, car insurance, etc. Others may not be essential like buying the latest smart phone or eating out.
- **Develop a budget.** Begin with essentials, then include high-priority expenses and finally all other relevant items. Does the total of expenses exceed available income? If so, you need to consider reducing or eliminating some expenses. This can be the biggest challenge. Deciding what can be eliminated or reduced takes discipline. Allow some flexibility in your budget, if possible, for unforeseen expenses (such as unexpected car repairs) and emergencies.
- **Limit Credit Card Spending.** As much as possible try to spend only what you can pay off each month, thereby avoiding costly finance charges (you may pay as much as 23% interest on some credit cards). Consider using any surplus income to pay down existing credit card debts. Once the debt is paid in full, the interest you were paying becomes additional income available for other areas.
- **Be a smart shopper.** Avoid impulsive purchases. Don’t shop when you are hungry. Prepare a list and stick with it. Look for bargains. Use manufacturer coupons or online discount codes.
- **Develop a plan for saving money.** Determine how much money is needed for each long term and short term goal, how much needs to be set aside monthly or annually, and how it should be invested to grow into the desired total. Then stick with your plan. The important thing about savings is getting started.

There are many other ideas for reducing expenses, creating a workable budget, and managing your household finances effectively.

‘Disabilities. Accessed February 2021
Proven methods of cutting expenses

The following are some proven ways of cutting down expenses and saving money:

• Cut down on restaurant and take-out meals. Preparing your own food saves lots of money.
• Bring your lunch to school or work. Put yourself on a lunch budget whereby you treat yourself one or two times per month.
• Shop various cell phone providers and their available plans to ensure you have the best plan possible
• Try to reduce utility bills by turning off lights when you’re out of the room, being conservative with the thermostat or air drying dishes and laundry.
• Avoid paying costly automatic teller machine (ATM) fees by using only your own bank’s ATMs, and make sure you’re not paying your bank for any fees for services you don’t want or need.
• Seek out garage sales or online listings like Facebook Marketplace for discount purchases.
• Source coupons for necessary items you would normally purchase, but not for items you don’t really need. Eat before you go grocery shopping so you won’t be tempted to make impulse purchases.
• Use your local public library.
• Comparison shop for clothing and household items.
• Take care of your teeth to prevent costly dental bills. In addition to brushing twice per day, flossing regularly can help drive down costly dental care.
• Exercise for a healthier body and state of mind. Consistent exercise over time can reduce health-care expenses.
• If you drive an automobile, learn how to change the oil rather than paying someone else to do it. Changing the oil yourself every 3,000 to 5,000 miles can save up to a few hundred dollars per year and help preserve the life of your car. If you are unable or not willing to perform this task yourself, seek out coupons in the mail and newspapers for reduced-price, oil-change deals.
• Join a co-op or food-buying club to save hundreds of dollars per year over regular supermarket prices.
• Buy store-brand cereal instead of national brands. If you go through a box or more per week, you can save over $100 per year by purchasing store brands.
• Shop around for the best gas prices and plan your errands and driving destinations to eliminate unnecessary miles.
• Pump your own gasoline and use the lowest-octane suggested in your vehicle’s owner manual. You can also save on gas by getting your engine tuned up as suggested and keeping the tires properly inflated.
• If you’re considering getting a dog or cat, look no further than your local animal shelters. The small purchase fee often includes vaccination and neutering, which can be expensive at the veterinarian’s office.
**Introduction to Federal Student Aid**

**Who is eligible for Federal Student Financial Aid?**

Almost all student aid is need-based. You are eligible if you are enrolled at least half-time in a participating school and meet these criteria:

- You must be a citizen or eligible non-citizen of the United States with a valid Social Security Number.
- You must have a high school diploma or a General Education Development (GED) certificate or pass an approved “ability to benefit” test.
- You must be enrolled in an eligible program as a regular student seeking a degree or certificate.
- You must register with the Selective Service, if required.
- You must maintain satisfactory academic progress once in school.

**What are the types of aid?**

There are three types of aid: grants, loans and work-study.

**Grants**

- Generally do not have to be repaid.
- Are for undergraduate students.
- Are based on need, school cost and enrollment status.

Grants include Pell Grants and Federal Supplemental Educational Opportunity Grants.

**Loans**

- Must be repaid with interest.
- Are available to undergraduate students, graduate students and parents who are paying education expenses for dependent undergraduate students.
- Maximum annual loan amounts based on grade level.

Loans include Federal Stafford Loans (both Direct Loan Program and the Family Federal Education Loan Program), Perkins Loans and Federal Plus Loans (for parents of dependent undergraduate students).

**Work-study**

Money is earned through campus or community services work and does not have to be repaid.

- Wages paid are at least the current federal minimum wage.
- Total award amount is based on level of need, funding level at the school and when application is made.

**Campus-based aid programs**

Federal Perkins Loans, Federal Work-Study and Federal Supplemental Educational Opportunity Grants are classified as “campus-based aid programs.” These programs are administered directly by the financial aid office at each participating school. Not all schools participate in these programs.

Campus-based programs provide a limited amount of funding for each participating school to administer each year. Therefore, the amount of aid is based on your need, other aid you receive and the availability of funds for that program at your school. Once the funds are allocated for the year, no additional awards can be made. These campus-based programs differ in this regard from the Federal Pell Grant Program where funds are available for every eligible student.
Other sources of financial aid

• **States**
  Contact the higher education agency in your state for information on available state aid.

• **Tax benefits for higher education**
  Internal Revenue Service Publication 970, Tax Benefits for Higher Education, provides detailed information on the Hope Credit, Lifetime Learning Credit, Student Loan Interest Deduction, Education Individual Retirement Arrangement (EIRA), Withdrawals from Traditional or Roth IRAs and interest on Education Savings Bonds. There are specific eligibility provisions and income limitations for most programs. The IRS publication is available by calling **1-800-829-3676**.

• **FAFSA**
  The Financial Aid for Student home page has a wide range of resources and information as well as several useful web sites.

• **Private Entities**
  Foundations, labor unions, associations, companies (for children of their employees), community or civic groups such as Kiwanis, Jaycees or 4-H Clubs and organizations in your area of study, such as the American Bar Association, may provide student aid.

• **U.S. Armed Forces and Veterans**
  Financial aid is available through the Reserve Officer’s Training Corps (ROTC) Program. For information on service requirements and the program visit the local recruiter or call **1-800-USA-ARMY**. Benefits may also be available to eligible veterans and dependents of certain veterans. Further information is available at **gibill.va.gov**.

• **Tax benefits for higher education**
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**Caution with Credit Cards**

Many credit card companies target college students, so discussions about using credit responsibly, making payments on time, and understanding which cards will best suit your needs is critical. It is best to find a credit card with no annual fees, a low interest rate, and a low credit line - $500 or $1000 at most. The **Federal Reserve Board** provides a free brochure on choosing a credit card and a guide to consumer protection laws.

If you don’t already have a checking account, consider opening one through your local bank. Learn the steps of balancing a checkbook and realistic spending limits.

With advance planning and discussion, and solid tools at hand, you will be able to stay on firm financial footing throughout the college years.
Peer frequently asked questions and mental health awareness video

1. How do I know what is “normal” or what is to be expected behavior?
Recognizing what you know to be typical behavior versus behaviors that seem excessive, new, or extreme may be indicators to have further conversation. The best way to know is to ask. Refer to the five action steps for communicating with someone who may be suicidal. These steps are supported by evidence in the field of suicide prevention and can be helpful in framing the conversation.

2. I’ve heard somewhere that you shouldn’t directly ask someone whether or not they are suicidal as that might “give them the idea”. Is that true?
This is a common myth that asking plants the idea. Research has shown the opposite. Asking directly is always best. According to the American Foundation for Suicide Prevention, the recommendation is asking, “Are you thinking of suicide?” Another way to phrase this could be, “Are you thinking of killing yourself?” It’s important to be straightforward.

Watch mental health providers and Aetna Mental Wellbeing colleagues discuss tools for mental health awareness and suicide prevention in this video Q & A.

“How and why the 5 steps can help.” Accessed March 2021.
National resources

National Suicide Prevention Lifeline
Call 1-800-273-TALK (8255) for suicide prevention hotline.

Centers for Disease Control and Prevention
(National Center for Injury Prevention and Control — Division of Violence Prevention)
Visit cdc.gov for links to suicide statistics, the SafeUSA website, prevention and safety information. Or call 1-770-488-4362.

Mental Health First Aid
Similar to CPR and First Aid training, Mental Health First Aid helps people identify, understand and respond to mental health issues. You can find a local training at mentalhealthfirstaid.org.

National Alliance for the Mentally Ill (NAMI)
NAMI’s toll-free number, 1-800-950-NAMI (6264), provides information about family support and self-help groups. Their website, nami.org, includes general suicide information links.

The Jason Foundation
Go to jasonfoundation.com to find suicide prevention resources for teachers, parents and students.

Suicide Awareness-Voices of Education (SAVE)
SAVE’s website, save.org, provides suicide education, facts and statistics on suicide and depression. It links to information on warning signs of suicide and the role a friend or family member can play in helping someone who’s thinking of suicide.

The Trevor Project
The Trevor Project provides crisis intervention and suicide prevention services to Lesbian, Gay, Bisexual, Transgender, Queer and questioning (LGBTQ+) young people under the age of 25. They can be reached at thetrevorproject.org and help is available at 1-866-488-7386 all day every day. You can also text START to 678-678 to text with a Trevor counselor 24/7/365.

Born This Way Foundation
The Born This Way Foundation helps young people increase their wellness and empowers them to create a kinder and braver world. People can take the kindness pledge by signing up to #BeKind21! Visit them at bornthisway.foundation.

American Foundation for Suicide Prevention
Visit afsp.org or call 1-888-333-AFSP (2377) for research, education and current statistics on suicide. The website also offers links to other suicide prevention and mental health sites.
Apps

**NotOK app™**

This is a free app that people can use to get help when they’re feeling vulnerable. The app lets your trusted contacts know they’ve been selected as part of your support group. If the time comes that you need to reach out, you can open the app and press a “notOK” button. Your contacts will receive a message with your location, asking them to contact you. Users can send an update, letting their supports know when they’re doing better. Find at [notokapp.com](http://notokapp.com)

**Substance Abuse and Mental Health Services Administration (SAMHSA)**

Visit [samhsa.gov](http://samhsa.gov) or call 1-800-622 HELP (4357)

**KnowBullying App(TM)**

This is a free app by SAMHSA that features strategies to prevent bullying, warning signs, and ways to support people who are being bullied. Find in your device’s app store.

**The JED Foundation**

Go to the [JED Foundation](https://www.jedfoundation.org) to learn how to be empowered to grow into healthy adults.

**Brown Stanley Safety Plan Template**

Go to [Brown Stanley safety plan template](https://www.brownstalnethisseplan.com) to develop a written set of instructions on what to do if you or someone you love should have thoughts of harming themselves.

**Liberate Meditation**

This is an app designed to provide a safe space specifically for Black, Indigenous, and people of color to develop a daily meditation routine.

**BeThe1To**

Go to [#BeThe1To](https://www.be1to.org) to learn 5 action steps on how to talk with someone who may be suicidal.
We’re here to help

Suicide is a tragic and complex public health problem. Sadly, the rates of suicide are growing. Some of the risk factors include life events, depression, substance use and a family history of abuse.

If you or someone you know is at risk for suicidal thoughts, it’s important to take action. Here are some resources and facts to help you get support for someone at risk of suicide.

Resource materials
Click an article title below to learn more on the topic.

- Facts about suicide
- Understanding depression
- Breaking the cycle of depression
- What to do if someone appears suicidal
- If you are thinking about suicide
- Understanding loss from suicide
- Grief after suicide

The EAP is administered by Resources For Living, LLC.
All EAP calls are confidential, except as required by law. Information is not a substitute for diagnosis or treatment by a professional. Contact a professional with any questions about specific needs. There may be other explanations for any or all of the above [behaviors/characteristics/symptoms]. This information is not a complete list of all signs concerning such [behaviors/characteristics/symptoms] and should not be used as a stand-alone instrument. EAP instructors, educators and participating providers are independent contractors and are not agents of Resources For Living. Provider participation may change without notice.