



"Mental Health First Aid Certification in the New Jersey Pathways to Regional Excellence Project (NJ-PREP): Supporting Overall Health on the Front Lines of Care" by Renée Edwards, Sara Haviland, Laci Hubbard-Mattix, and Susan Barnard, Rutgers University, Education and Employment Research Center, NJ-PREP, TAACCCT Grant is licensed under [CC BY-NC-ND 4.0](http://creativecommons.org/licenses/by-nc-nd/4.0/)

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New Jersey Health Professions Consortium:

**A Collaboration of
Community Colleges**

Issue Brief

Mental Health First Aid Certification in the New Jersey Pathways to Regional Excellence Project (NJ-PREP): Supporting Overall Health on the Front Lines of Care

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Mental Health First Aid Certification in the New Jersey Pathways to Regional Excellence Project (NJ-PREP): Supporting Overall Health on the Front Lines of Care

Renée Edwards, Sara Haviland, Laci Hubbard-Mattix, and Susan Barnard

In 2010, the Northern NJ Health Professions Consortium (NNJHPC) received a Health Professions Opportunity Grant from the Administration for Children and Families (ACF). The 10-college consortium from across Northern NJ had a mission to create pathways in Health Professions education leading to gainful employment. In 2014, The Consortium received a TAACCCT grant from the USDOL and became known as the New Jersey Health Professions Consortium (NJHPC). At this time the Consortium grew to 12 colleges across the State of NJ and broadened its career pathways focus to include non-credit – credit credentials, prior learning assessment and employment. Overall, NJHPC has represented and continually connects with the community colleges in the State. Its focus is to build, develop and foster communication and collaboration to ensure students enter and complete educational programs in the health professions leading to family sustaining wages in this high-demand sector. The TAACCCT grant ended in 2018 after serving 3,500 New Jersey residents. NJHPC has commissioned Rutgers to prepare this brief describing lessons learned throughout the Consortium.

INTRODUCTION

Mental health is a key component of overall health and well-being and can be particularly important for healthcare patients and their caregivers. Since our mental health has implications for our physical health, and our physical health has implications for our mental health,¹ those who require physical health care may be at risk for mental health challenges. However, these challenges may be overlooked by physical healthcare providers. Front-line healthcare workers are uniquely positioned to play a role in efforts to improve support for mental health in the current system. With proper training, they can become mental health first-aid experts, able to recognize signs of individuals in trouble and to connect them to proper professionals who can help. In 2017, Bergen Community College added a Mental Health First Aid (MHFA) certification to the formal requirements of its health professions programs with a goal of arming every program graduate with these valuable 21st-century skills, thereby improving the quality of care their graduates provide and offering them a competitive advantage in the job market. In this brief, we use interview and survey data to examine the experiences of the faculty and staff in implementing this program as well as the views of the students who received the course. We discuss how students viewed the program's effects on their lives, their employability, and their perceptions of mental health.

The link between mental and physical health is well documented. According to the Centers for Disease Control (CDC), mental health comprises our emotional, psychological, and social well-being, affecting how we think, feel, and act; it determines how we handle stress, relate to others, and make healthy choices.² Mental health concerns are common. Over half of Americans will be diagnosed with a mental illness or disorder at some point in their lives; one in five will experience a mental illness in any given year, and 1 in 25 lives with a serious mental illness such as schizophrenia, bipolar disorder, or major depression.³ Sadly, suicide is also becoming a larger issue in the US; nationwide suicide rates have been increasing in recent decades, and the rate of that increase has accelerated since 2006.⁴

Because mental health can impact physical health, individuals who are prone to depression or anxiety may have higher levels of chronic disease. Conversely, individuals facing physical health challenges may also be susceptible to episodes of depression or anxiety, their physical health having implications for their mental health. The aging of the U.S. population has been accompanied by an increase in the manageable but chronic conditions often associated with senior populations (e.g., arthritis, hypertension, diabetes). Today, nearly half of all Americans live with one or more of these conditions and could be at risk of experiencing mental health changes as a result.⁵

Healthcare providers typically engage with individuals whose physical health statuses are changing or who suffer from chronic conditions and are therefore well-suited to observe signs of mental health challenges. Though physicians and registered nurses can and should play a role in these observations, front-line healthcare workers (FHWs) are particularly well-positioned to serve as sentinels for patients in crisis. These workers include professionals and paraprofessionals who provide direct patient care and services beyond those provided by the highly professionalized physicians and RNs and occupy jobs that have lower educational requirements (e.g., certificates or on-the-job training).⁶ Given the high levels of patient contact inherent in their jobs, individuals on the front lines of care are uniquely positioned to recognize changes in mental health among patients and can play a role in efforts to improve support for mental health. FHWs are therefore ideal candidates for further training to help recognize the signs of mental health crises among the patients they come in contact with and to take initial steps to ensure that those facing mental health crises are connected with appropriate mental health professionals.

There are additional benefits to having mental health first aiders in the healthcare provider community, as patients are not the only at-risk population in the healthcare setting. Family caregivers face stressors that may affect their own health and the health of the patients they care for, and they, too, interact regularly with FHWs.⁷ FHWs are also embedded in a healthcare workforce that faces many pressures, such as long hours, demanding workloads, and the emotional stress of regularly facing life-and-death situations. These pressures may compromise the mental health of the workers themselves. New dentists, for example, experience high rates of professional burnout, anxiety, and depression.⁸ Approximately 400 physicians commit suicide annually,⁹ and studies suggest that somewhere between 2 and 4 out of every 10 resident physicians experience depression or depressive symptoms.¹⁰ Nurse suicides are woefully understudied in the US, but they suffer from burnout, depression, and suicide risk similar to that of physicians.¹¹ The mental health levels of FHWs are even less adequately addressed, though the jobs can feature mental health challenges such as work overload, role ambiguity, lack of supervisory support, and the emotional distress of working closely with ill and dying patients, as well as some aggressive or abusive patients.¹²

In addition to the mental health concerns that are prevalent in healthcare settings, substance abuse is a concern. Patients, family caregivers, and healthcare professionals have access to prescription medications that other people do not. This is especially relevant today, given that opioid abuse became so widespread in the United States that it was declared a national public health emergency in 2017.¹³ The ability to recognize the signs of substance abuse is a valuable skill for FHWs as efforts to alleviate the opioid epidemic –and to treat the individuals affected by it – continue.

Mental Health First Aid (MHFA) is an Australian-based, international training movement that is run in the U.S. by the National Council for Behavioral Health. It is an 8-hour course, taken in one or more sittings, that teaches individuals how to identify and safely respond to signs of mental distress or substance abuse.¹⁴ The program is built on a five-point action plan, in which trainees learn to assess individuals for risk of suicide or harm, listen nonjudgmentally, give reassurance and information, encourage appropriate professional help, and encourage self-help and other support strategies.¹⁵ Research supports the efficacy of the program generally, which has been shown to increase knowledge and confidence among its trainees. The program is designed to approach mental health crises using the same principles as traditional, physical first aid. The goal for traditional first aid is for laypeople to be equipped with the basic skills needed to preserve life, prevent further injury, and promote recovery should they encounter someone who is suddenly ill or injured; in MHFA, the patient being assisted is showing signs of mental health crises or substance abuse issues. The first aider is a stopgap care provider, armed with the basic mental health skills necessary to connect the patient with the appropriate professionals and to help stabilize the patient until help arrives.

Bergen Community College has been engaging with MHFA certificates since 2010, at first offering limited voluntary certifications. In 2018, the college shifted to a mandatory MHFA requirement in all health professions programs as part of a package of reforms it undertook for a New Jersey Pathways to Regional Excellence Project (NJ-PREP) grant. Bergen added these requirements with a goal of improving patient care in its graduates and offering graduates a competitive edge in the marketplace. In 2017, the Education & Employment Research Center (EERC) at Rutgers University conducted a research evaluation to determine how the expansion of MHFA was experienced at Bergen. This evaluation focused on how faculty and staff viewed MHFA, how students experienced it, and whether students perceived themselves to be more competent with regard to addressing others' mental health crises as well as recognizing changes in their own mental health.

METHODS

This brief is qualitative in nature. Interviews and surveys were conducted during the spring and summer of 2018 at Bergen Community College.

Interviews. EERC staff conducted three interviews with staff at Bergen who were involved with the MHFA course. This included two trainers and the dean of health professions. Interviews were recorded, and notes were taken. The notes were uploaded to NVivo qualitative data management software and coded for emergent themes and categories.

Surveys. Researchers at the EERC designed a mental health first aid course student survey and provided a copy to the division of health professions dean, who fielded copies to students in health professions programs completing the MHFA certification in Spring 2018 and Summer 2018. The survey was distributed twice – once in May 2018 and again in August 2018 – to two separate groups of students; 72 students took the survey in May, and 142 students took the survey in August. The surveys consisted of 11 mostly open-ended questions on paper, which students took during class time and returned to the dean. The completed surveys were mailed to the EERC, where they were transferred to an electronic format in Qualtrics, then uploaded to NVivo qualitative data management software. The surveys were then coded for emergent themes and categories. The survey was designed to understand student perceptions of the MHFA program and its usefulness to their personal lives and current or future careers.

BERGEN'S MENTAL HEALTH FIRST AID CERTIFICATION PROGRAM

Implementation Process

Staff in Bergen's health professions division first became aware of the MHFA grant when the college received a Substance Abuse and Mental Health Services Administration (SAMHSA) grant to train interested staff and faculty members to become MHFA instructors in 2012. dean of the health professions programs and several other instructors took the course at that time and became certified to teach it. Soon after, Bergen received a Health Professions Opportunity Grant (HPOG), and the dean suggested making the MHFA certification available to the students enrolled in health professions programs under the grant. Although the college chose to offer it in the health professions programs, the certification is designed for a broad audience of community members, faculty and students. The certification was offered to HPOG students on a volunteer basis. As the HPOG grant was ending, Bergen became the lead college in a consortium receiving a Round 4 TAACCCT grant for allied health programs. As part of its implementation of that grant, Bergen again offered the MHFA instructor certification, this time for staff and faculty involved in the grant consortium. Bergen took the opportunity to train several additional instructors beyond consortium staff with the goal of offering a MHFA course to TAACCCT students enrolled in its health professions programs. A total of thirteen MHFA instructors are currently certified to teach the course at Bergen.

At first, the courses were focused on students taking credit TAACCCT-sponsored programs. However, once the course started, it was so successful the dean of health professions expanded the certification to other health professions programs. During the spring and summer of 2018, students in a variety of credit and noncredit health professions programs completed the MHFA certification course. As the Fall 2018 term began, all students taking credit-bearing health professions programs were taking the MHFA certification as a required part of their curriculum.

The primary goals for including the MHFA certification as part of students' health professions education at Bergen were to help increase students' employability and to give students a valuable tool to apply to their future careers. As one health professions faculty member commented that health care is so deeply involved with patients and patient assessment that the MHFA certification really coordinates well with healthcare education. Students are learning how to assess patients; a patients' mental health is just as important to assess as physical symptoms are. In addition, this instructor commented that it is critical that healthcare workers be able to ask patients if they are suicidal or if they may hurt themselves without feeling uncomfortable, and that they are trained to do so in a way that will not make their patients uncomfortable. These are vital healthcare assessment skills that students learn as part of their MHFA course.

When a faculty member is ready to schedule the MHFA course, a request for instructors is sent to all available MHFA trainers. As one instructor commented, "whomever can do it signs up." Two instructors will often share the eight-hour course, either dividing it into two four-hour sessions or working together throughout the course.

Faculty have reacted positively to the inclusion of the certification in the health professions curriculum. In fact, several faculty members have taken the course themselves. There is a sense among faculty, support staff, and MHFA instructors that the certification is focused on necessary information for health professions students that is relevant to today's healthcare environment and will be beneficial to students' careers. One instructor said: "Listening nonjudgmentally and assessing: These are two key elements of the training, and these are both so intricately woven into healthcare."

Student Experiences

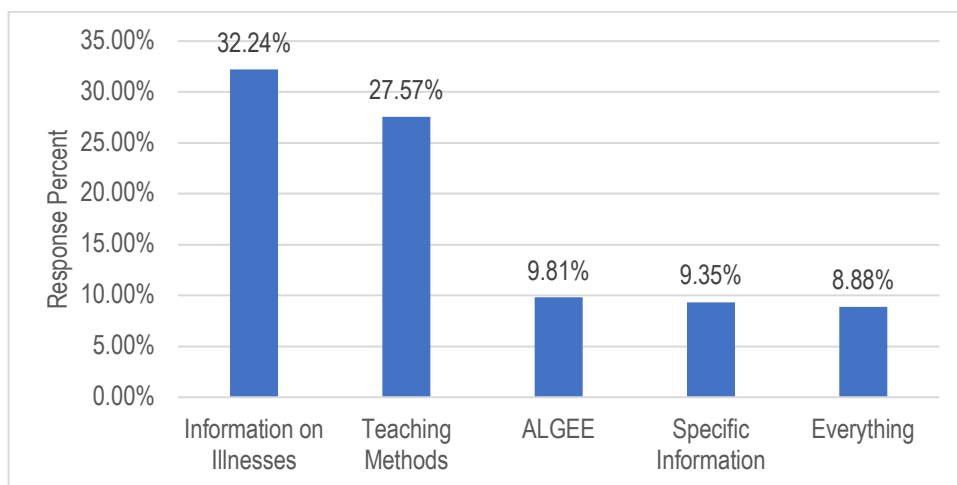
The mental health first aid certification student survey was designed to understand students' perceptions of the MHFA program and its usefulness to their current or future careers and their own lives as well as how they felt the course could help them, and how it may have changed their perceptions relative to mental health issues. Of the 214 total survey respondents, about half (49 percent) were enrolled in nursing programs and a quarter (26 percent) were in the dental hygiene program. Surgical technology students accounted for another 17 percent, and diagnostic medical sonography students for 10 percent of respondents.¹⁶¹ At the time of the survey, 80 percent of respondents were not yet employed.

Students had not heard of the MHFA certification prior to learning it would be included in their courses, but most responded positively when made aware. Of the 214 survey respondents, 91 percent had not heard of the MHFA certification prior to receiving it during their program. However, 78 percent of them responded positively when they heard it was to be included as part of their training. Most students simply said they felt "excited" when they heard about the course. One student said she was "looking forward to learn[ing] more about this area since there are so many people in the profession, both patients and possibly coworkers or employers, who are going through life with these challenges." Another said, "I thought that this would be a useful class for our profession as we deal with different types of people." Another said, "I was eager to learn because I know how important mental health education is and how it benefits patients." Most students echoed these sentiments; they felt the course would be a positive experience they could draw upon in their future careers. One noted, "I thought it would be interesting and useful to know, especially working with future patients." Another said she thought MHFA was "necessary, just like CPR." She continued, stating that "mental illness is becoming more and more known, therefore any methods/strategies to help someone dealing with mental illness is good. Specifically, with a profession such as nursing, I believe its beneficial and necessary."

While only 4 students responded negatively to hearing about the inclusion of the course, 15 percent indicated they were ambivalent about it in the beginning. A few of these students noted they were skeptical when they first heard it would be a mandatory requirement in their program. One said, "At first I was skeptical of what was going to be occurring, but after attending, I definitely believe it was worth it." Another noted she didn't think "too much about it" at first, but then started thinking that "it would be needed after all because nursing is all about understanding and helping people."

Students thought the most important element of the certification was how to recognize mental illness symptoms and how to handle mental crises. After taking the course, student respondents were asked what they thought the most important/informative elements of the certification were. Responses covered both information conveyed by the program and the ways in which it was transmitted. Over 30 percent of respondents indicated they felt the information they were given about mental illnesses was the most important element of the course, including how to recognize the symptoms, whereas 28 percent felt the teaching methods – how the course was taught – was most important. About 10 percent felt the teaching tool “ALGEE” (a mnemonic for: Assess for risk of suicide or harm; Listen non-judgmentally; Give reassurance and information; Encourage appropriate professional help; and Encourage self-help and other support strategies) was the most important information they learned during the course, 9 percent felt specific information given in the class was important, and 8 percent of respondents felt that all elements of the certification were equally important. Several students noted that they learned how to handle someone in mental crisis and were surprised to learn that “less is better,” as one student put it. She continued that she learned to “not try to force help on anyone but just let them know you are support, and a trustworthy person.” Others noted they learned how to de-escalate situations and how to approach different cases displaying different types of mental health issues. Some noted that being reminded that everyone handles situations differently and has different coping mechanisms was helpful. Several also specifically mentioned that recognizing the symptoms of drug addiction – a type of mental illness – was important.

FIGURE 1. Survey Respondents’ Perceptions of the Most Important/Informative Aspect of Bergen’s MHFA Certification *

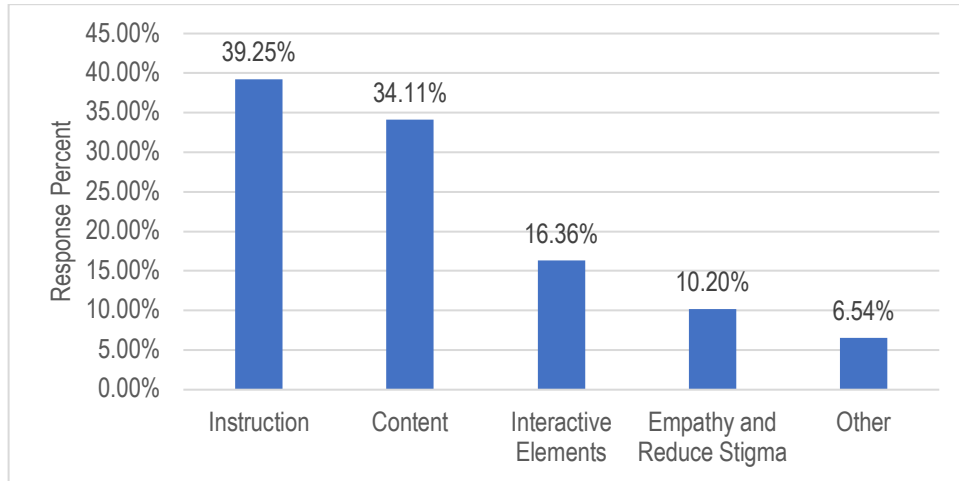


*Respondents were able to select more than one answer. The top five responses are represented here, comprising about 87 percent of responses.

Students felt the biggest strength of the program was the high-quality instruction. Students were asked what they felt the biggest strengths of the program were. Instruction was the highest-ranked category, with nearly 40 percent of respondents indicating the strength of instruction. This paired well with the previous finding, that 28 percent of respondents found the teaching methods to be the most important element of the course, to indicate many students liked the instructors and enjoyed the methods of teaching. One student said the presenters “were great, very engaging, and made the course interesting.” Another said the instructors “spoke from personal experience, allowing others to open up.” Many students enjoyed the case studies and liked working in small groups. Additionally, students liked the personal stories they heard and noted how relatable some of them were. The stories helped students relate to the experiences they were learning about and brought the skills they were learning into the practical realm. One student said, “it really opens up your mind to a new understanding and outlook to others’ life situations daily.” Another said the course gave the student “the ability to strip down labels and expose the needs of people without judgement.” Another student said she felt the most important part of the course was the ability “to recognize that everyone may have some sort of mental health condition” and that understanding this helps increase empathy and reduce the stigma associated with mental illness.

The content of the course and corresponding skills learned were also important to respondents, with nearly 35 percent feeling these were the biggest strengths of the program. One student said, “I think it is time to start taking mental health more seriously and increase awareness. I truly believe that MHFA should be a requirement at Bergen. It is incredibly important to be aware of mental health, side effects, and coping, etc.”

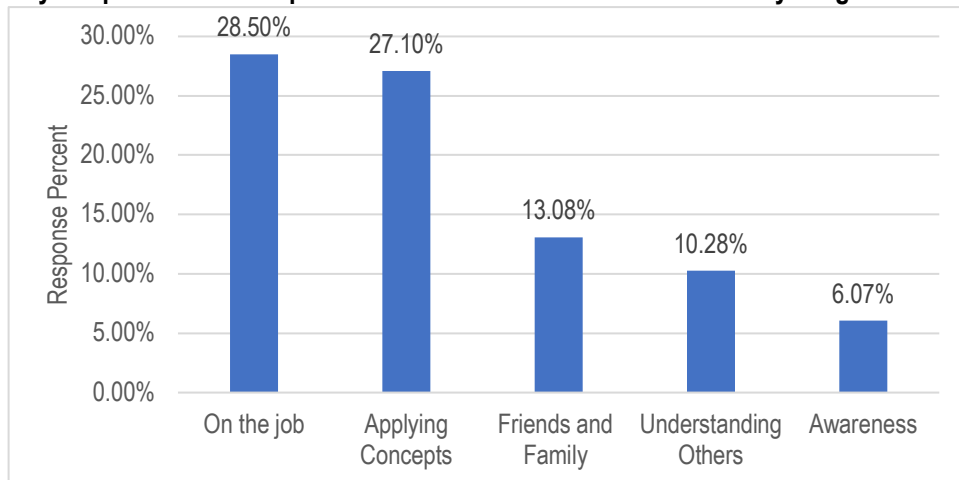
FIGURE 2. Survey Respondents’ Perceptions of the Strengths of Bergen’s MHFA Certification*



*Respondents were able to select more than one answer. The top five responses are represented here.

Students felt the certification would personally benefit them by helping them succeed in their future careers, giving them concepts they could apply to everyday life, and helping them better understand others. Nearly all (99 percent) of the students surveyed stated they felt the certification would benefit them personally. Of these, about 29 percent felt it would help them be successful in their future career. Slightly fewer (27 percent) felt it would help them personally because they could apply the concepts to their everyday life, and 13 percent felt it would give them better understanding of their friends and family and help them “deal with” any issues. Many students felt they would now be able to identify and help someone in mental distress, which was a huge strength of the program to them. Interestingly, only about 6 percent of respondents, 15 of the 214 students, felt the course would personally benefit them by increasing their empathy and making them aware of their own mental health; both of these being key points of the certification.

FIGURE 3. Survey Respondents’ Perceptions of the Personal Benefits Provided by Bergen’s MHFA Certification*

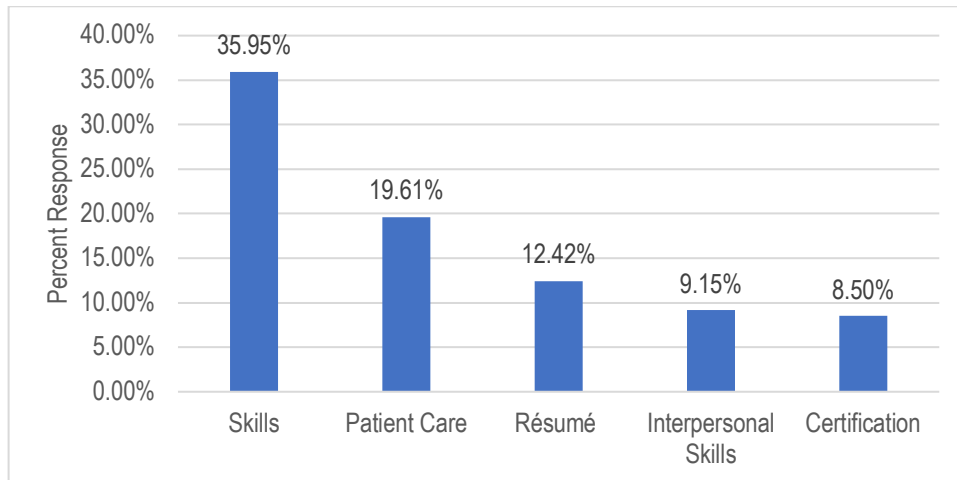


*Respondents were able to select more than one answer. The top five responses are represented here, comprising about 85 percent of responses.

Students felt the certification would help them find a job. The primary goal for the inclusion of MHFA certification in the health professions programs at Bergen was to increase students' employability by giving them skills desired by area employers. Students overwhelmingly agreed with this concept, with 81 percent believing the certification would help them find employment. Of these students, nearly 36 percent thought this boost in appeal to employers would be due to the increased skills they learned in the course, while others (20 percent) it would be due to the ways in which the course would help them care for patients. One student said she felt the certification "shows a well-rounded education." Others agreed, feeling it would "look good" on their CV or résumé. Many felt the certification would help them "stand out" among other applicants, and that employers would "see the benefit" of the certification. One said she hoped that including the certification on her résumé would give her a chance to answer questions about it during an interview. She believed such a conversation in an interview setting would show she has much to "bring to the table" in terms of employability. Another student said:

[The MHFA certification] shows we have experience in these specialized topics, and this training prepares us for dealing with all sorts of people. This shows that we are qualified to deal with people who are challenged, and employers will appreciate that we had such a training. It also shows that we invested in other areas [rather] than [just] our primary Dental Hygiene courses.

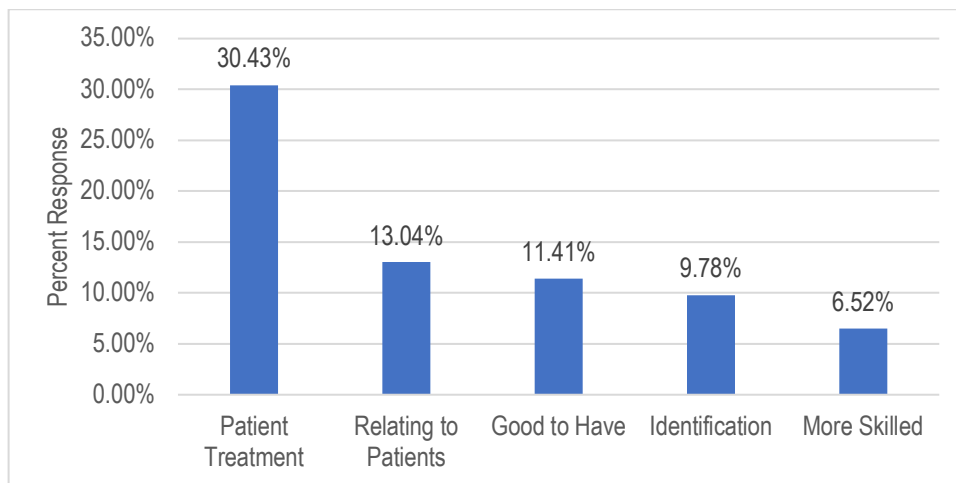
FIGURE 4. Survey Respondents' Perceptions of How Bergen's MHFA Certification will Benefit Them in Finding a Job*



*Respondents were able to select more than one answer. The top five responses are represented here, comprising about 86 percent of responses. Percentages were calculated based on the number of students who responded "yes—the training will help me find a job" (n=154 students).

Respondents felt the certification would help them better serve future patients. Similarly, students were asked how they felt the course would help them do their job once hired. Of the 184 students who responded to this question, 30 percent felt it would help them with patient treatment, and 13 percent felt it would help them relate to patients better. Some felt the training would help them because of the skills they learned (11 percent) or because it would help them identify mental health issues in others (10 percent). Many students noted that the certification would help them "better care for," "better serve," or better "work with" patients they encounter in their future career. One student said, "Being able to recognize when someone is in mental health distress will help me to do a better job in providing treatments to my future patients." Another commented that the course "prepares us on how to recognize certain disorders and deal with them accordingly [and] with more sensitivity and provides us [with] more confidence to face what previously [to us] was unknown, taboo, and scary." Another said, "so many people are suffering from mental illness, and as a healthcare provider, it is important to be able to understand people's situation."

FIGURE 5. Survey Respondents' Perceptions of How Bergen's MHFA Certification Will Help Them Do Their Job*



*Respondents were able to select more than one answer. The top five responses are represented here, comprising about 72 percent of responses. The response rate was relatively low for these categories because many students responded “yes” but did not elaborate on *how* the training would help them get a job. Percentages were calculated based on the number of students who responded “yes—the training will help me do my job” (n=184 students).

Few students indicated the course would help them self-evaluate their own mental health. Very few students commented on how the certification might help them with their *own* mental health, but a few noted that having the tools available to them would help them if they themselves experienced issues. One student said, “if I am dealing with a struggle I will know how to handle the situation.” Another said: “The job will be stressful. The skills will help [me] manage my stress and [the] emotions of the patient.”

CONCLUSION AND NEXT STEPS

Mental health awareness is a vital component of FHW education and job preparedness, and the MHFA certification is a promising way to instill this awareness in FHWs. Overall, the overwhelming positivity about the course felt by student respondents indicates the inclusion of the certification in the health professions programs at Bergen was highly successful in terms of student perceptions about its usefulness to their future job search and employability. In addition, the level of buy-in by health professions leadership and faculty allowed for fairly quick implementation and scaling and created a positive environment for the incorporation of the course.

When asked about sustainability, all interviewees stated the courses will continue to be a required element of the health professions programming at Bergen. Currently, the instructors teaching MHFA are also full time and adjunct health professions faculty at the school. To date, the instructors have been teaching the course at no cost to the school, partly because to maintain certification to teach it, instructors must teach at least three courses per year. Since there are multiple instructors at Bergen wishing to maintain their certification, there has been a willing pool of volunteers to teach the course. In addition, one instructor noted that she is willing to volunteer her time because she's right there at Bergen and believes it is an important element of health professions students' education.

Ideally, this research would be followed up with an additional study considering employer perceptions of the certification. Are employers aware of what MHFA certification is? Do they consider the certification useful? Would they consider a student with the certification as ‘more employable’ than another student without it? What elements of the certification do employers find the most useful for prospective employees to know? Would employers consider incumbent-worker training, so their current employees could become certified? These answers could indicate whether employers view the certification as useful, and to what extent. It would also be interesting to track the students who answered the above survey to find out whether they found

employment, whether they were asked about their MHFA certification by their employer, and whether they felt their employer was aware of what the certification was.

It would also be interesting to ask a different set of questions if future research were to be conducted. For example, did the certification change the students' preconceptions of mental health issues and people with mental health issues? A pre- and post-survey could be administered to assess this. Further, it is important to understand how the course affected its participants after some time has passed and they have had an opportunity to apply it to their work. Was it helpful? Why or why not? In what situations did they apply the lessons from the certification?

Finally, it should be noted that although FHWs are extremely critical in assessing and finding proper help for patients with mental health issues, they should not have the sole responsibility of identifying mental illnesses in patients. Care facilities should build and maintain a mental health infrastructure wherein mental health first aiders are only one component. By hiring graduates with MHFA certificates, employers can be confident that one piece of a crucial mental health framework is in place and that they have taken a solid first step toward building a culture that supports mental health. The certification is meant to teach individuals how to assist someone who may be experiencing a mental health or substance abuse challenge—it is not meant specifically for health care workers, nor is it meant to develop mental health practitioners. However, the course is seen as highly beneficial for Bergen's healthcare professional students and will certainly help them in their future careers.

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¹⁶ Percentages will not equal 100 due to rounding.

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