

MENTAL HEALTH & WELLNESS TOOLKIT

for
Firefighters



BE KIND TO YOUR MIND



"The foundation of the vital community service we provide is the men and women who are our firefighters. Our work as firefighters puts us at a greater risk of mental health injury more than any other professions. Through a culture of training and sharing, the need to take care of one another while continuing to provide our valued services to the community. We invite you to review the information provided in our Mental Health and Wellness Toolkit to see what options resonate with you – there's no perfect fit for everyone. With the variety of information and access to resources included within this toolkit we hope there is something that works for you.

It is the goal that the information provided in the Mental Health and Wellness Toolkit will help members find and understand the information and resources needed to reduce occupational stress related to trauma and create better mental health resiliency for all.

Please reach out if you need some help – whether that be to your peers, your leaders or to me, directly. We are a community that cares for one another. We also understand that everyone is different. Together we will find the support or services you need."

Dan Derby, ECFO
Regional Fire Chief
Kootenay Boundary Regional Fire Rescue

Special Thanks to Dan Derby and KBRFR members for sharing this amazing resource.

Mental Health & Wellness Toolkit

This toolkit is designed to support our members to think about and work on their mental health. It provides information on the broad variety of mental health services, systems and supports available, no matter your interest or need. This could include overcoming general workplace stress, building healthy habits, tackling a mental health condition, finding resources or simply learning more about why mental health matters.

If you are unsure where to begin learning about mental health, please review the different options laid out in this toolkit. Members are also encouraged to reach out to peers, their Officer in Charge or Human Resources for support if they would like further and or immediate assistance.

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Mental Health & Wellness Toolkit Introduction

As firefighters we are at a higher risk of mental health injuries due to the traumas and stressors we experience. The purpose of this toolkit is to provide members with information and timely access to services to reduce occupational stress related to traumatic events. Everyone's experiences are different and it is the goal through education and actions to build a culture of normalizing mental health and wellness resilience.

What is Mental Health?

Mental Health refers to cognitive, behavioural, and emotional well-being. It is all about how people feel, think and behave. A healthy mind lets you learn, work, play and understand others. Mental health means having good coping skills to deal with your feelings and how to enjoy life even when you are exposed to stress and trauma. Having a healthy mind and body are equally important to contributing to healthy family relationships.

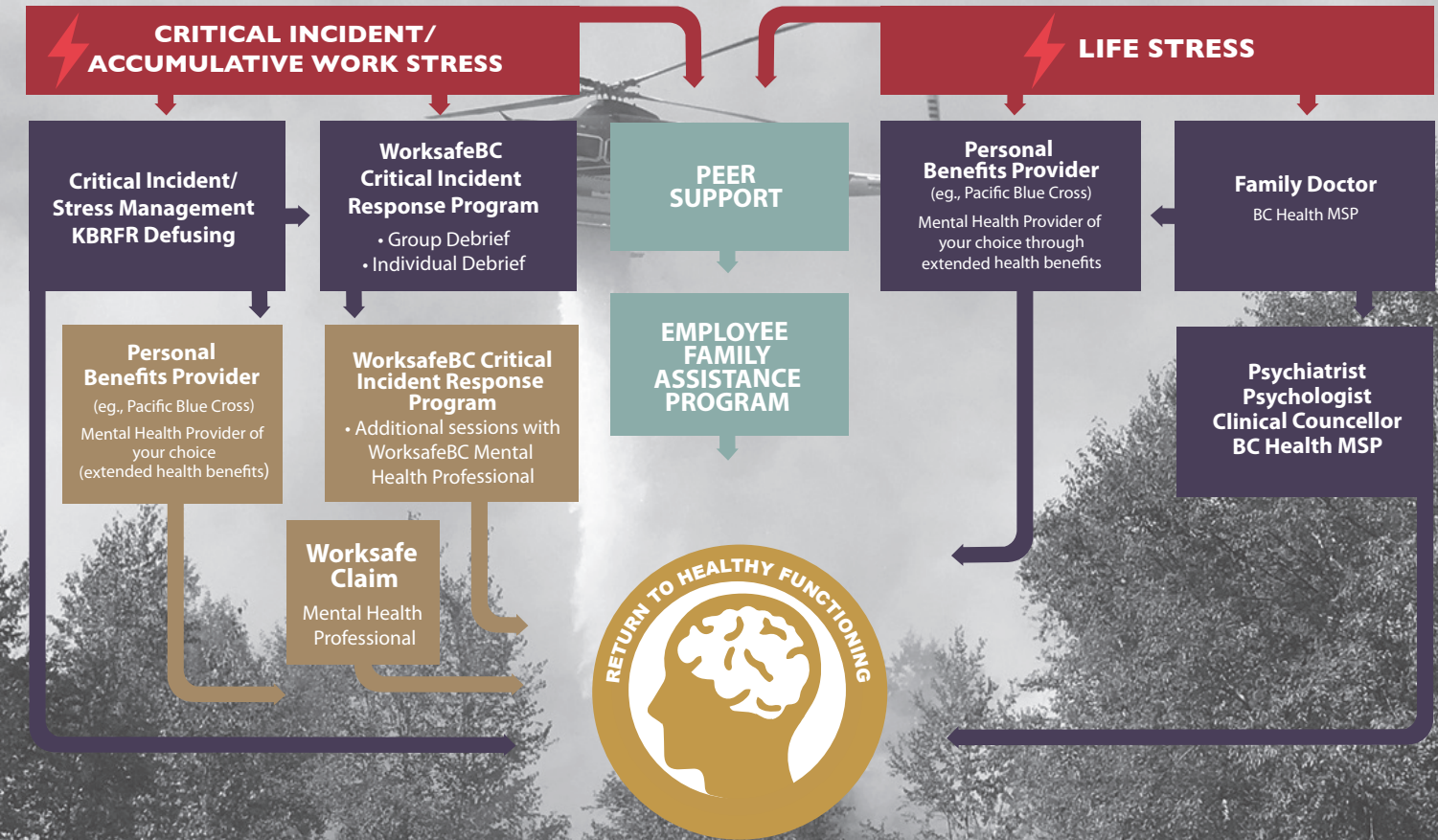
What are Mental Health Services?

- Broad range of therapies to assist people with their mental health & wellness
- Huge variety, such as talk therapy, treatment programs, medications and self-guided work
- Mental health professionals often specialize in a number of topics, such as anxiety, depression, relationships, grief or trauma. But you don't need a diagnosed mental health illness to access mental health services
- You can proactively work on your mental health, just like you might go to the gym or make changes to your diet to proactively work on your physical health
- When your mental health feels harder to manage it can affect personal happiness, family relations, performance at work and general health
- Help in dealing with these problems can result in increased self-esteem, improved personal and interpersonal relationships, better coping skills, higher job satisfaction and performance and reduced time away from work, family and friends



MENTAL HEALTH & WELLNESS RESOURCE ROADMAP

A roadmap of mental health & wellness benefits that are available to you.



Mental Health & Wellness Resources

Peer Support/Resilient Minds Training

“The Mental Health Commission of Canada (MHCC) defines peer support as “a supportive relationship between people who have a lived experience in common in relation to either their own mental health challenge or illness or that of a loved one.”

The ultimate goal of peer support is to help workers who are experiencing mental health challenges to achieve hope and recovery. For someone experiencing a challenge, the insight gained from a peer support worker’s experiential knowledge can be deeply supportive.

First responders attend calls and witness events that can cause them to experience strong emotional, physical, cognitive, or behavioural responses. These can be traumatizing and interfere with performance during and after incidents. They also face day-to-day life stressors that are common in many peoples’ lives at work and home. The compounding effect of life stress and trauma exposure can be detrimental to their mental health.

Often, co-workers who have had similar experiences can provide support and referral assistance through peer support, improving the lives of their peers and helping them towards recovery, empowerment, and hope. Peer support may also reduce the use of formal mental health, medical, and social services, which can reduce the cost of a first responder’s recovery.”

Quoted from “Supporting Mental Health in First Responders, Overview of Peer Support Programs, BCFirstResponderMentalHealth.com”

- Peer Support helps to reduce the stigma of accessing mental health, medical and social services treatment
- Find a co-worker or co-workers that you connect with to share issues that are bothering you and support them in return

Resilient Minds has supported hundreds of firefighters in BC and PEI to develop strategies to mitigate and better manage occupational stress, resulting in informed and healthier teams. Firefighters learn to;

- Recognize the effects of psychological stress/trauma in themselves and in peers
 - Communicate with peers who may be struggling
 - Respond promptly, safely and appropriately to distressed citizens
 - Apply personal strategies for managing stress, mitigating trauma, and boosting resilience
- **Innovative and Evidence-Informed** – Resilient Minds is a skills and resilience development training course designed by and for firefighters using the latest literature on resilience, stress, and stress-related injuries.
 - **Firefighters Train Firefighters** – Using a peer-to-peer model of instruction, the Resilient Minds curriculum is taught by firefighters to firefighters.
 - **Paid-on-call and Career Firefighters**– Resilient Minds is the only training program designed to train both career and volunteer firefighters and takes into consideration the differences in experience and resources available to these two groups.

For more information, please visit <http://www.resilientminds.cmha.ca/>

Refer to Module 2, and support peers using the “4Rs Action Toolkit” in the Resilient Minds Building the Psychological Strength of Firefighters Participant Workbook as a reference when speaking with peers you think may have a mental health injury.

THE 4R ACTION TOOLKIT

<p>RECOGNIZE</p> <ul style="list-style-type: none"> ✓ Verbal and non-verbal cues ✓ Best-to-address ✓ Strengths ✓ Relationship ✓ Time and place 	<p>RESPOND</p> <ul style="list-style-type: none"> ✓ Start a conversation ✓ State main concern simply and objectively ✓ Be a respectful listener (listen for understanding) ✓ Remind the person of their strengths ✓ Explore impacts
<p>RESOURCE*</p> <ul style="list-style-type: none"> ✓ Ask about coping ✓ Previous experience ✓ Brainstorm next steps ✓ Wrap up 	<p>RECONNECT</p> <ul style="list-style-type: none"> ✓ Check-in soon after the conversation ✓ Enquire about use of tools and strategies ✓ Recognize signs of improvement

*Specialized treatment, Counsellor/Practitioner (EFAP), Education, Peer Support & Self Care





Crew Defusing

Like a debriefing, it is an informal confidential and voluntary opportunity to learn about stress, share reactions to an incident, and vent emotions. The main purpose is to stabilize people affected by the incident so that they can return to their normal routines without unusual stress. Where appropriate, a formal debriefing may also be required.

- An informal confidential talk about the incident using a “**Crew Defusing Guide**”, see Appendix 1
- Involves only the crew that attended the call
- Ideally done 1-4 hours after the incident, lasting about 30 minutes

WorkSafeBC Critical Incident Response Program

The WorkSafeBC Critical Incident Response (CIR) Program is a confidential, early intervention initiative that provides critical incident intervention to workers and employers who have experienced a traumatic event in the workplace. The goal is to reduce the distress that workers and employers may experience immediately following an event, and to mitigate the development of further, more serious difficulties. **This is NOT a claim.** Your employer will not be notified you accessed this service but WorkSafeBC will have it on record.

Group Debrief – discussion led by a qualified mental health professional, accessed by the Officer in Charge contacting the WorkSafeBC CIR Program

- Confidential way for the group to share their thoughts and feelings of a call
- Notify FC Derby or DFC Gallamore that a Group Debrief has been requested
- Ideally occurs 24 to 72 hours after the event, lasting 60-90 minutes

Individual Debrief – a one on one discussion with a qualified mental health professional, accessed by personally contacting the WorkSafeBC CIR Program

- Confidential way for an individual to share their thoughts and feelings about an event
- Ideally occurs 24 to 72 hours after the event but can be accessed up to three weeks after an incident

Group and Individual debriefs are not limited to just one session. Will vary on a case by case basis. To request a group and or individual critical incident intervention, please follow these CIR program referral steps:

1. Call CIR program toll-free answering service at 1-888-922-3700. Your call will be returned between 9 a.m. and 11 p.m., seven days a week. Calls made after 11p.m. will be returned after 9 a.m. the next morning.
2. Please have as much of the following information as possible when you call:
 - a. Phone number of contact person seeking CIR intervention
 - b. Brief description of incident (number of workers)
 - c. Date and time of the incident
 - d. Location of the incident

3. In an effort to facilitate this process, you’ll be asked to provide a time and date that workers will be available to attend the intervention.
4. An individual employee may access these services confidentially by following the same steps.

WorkSafeBC Crisis Support Line

Contact us if **you or your family** is in emotional crisis and you’ve been injured at work. Our counsellors can provide support to you and your family, refer you to other services in your community, and alert us so we can follow up with you.

Phone toll-free: **1-800-624-2928**, 7 days a week, 24 hours a day

You don’t need a WorkSafeBC claim to call us for help.

If you believe you have a mental health injury from an event and it is preventing you from being able to work or affecting your ability to work and live a normal life, you may need to file a WorkSafeBC Claim.

To File a Claim:

- Step 1: REPORT THE INJURY TO YOUR EMPLOYER- just like a physical injury that happens on the job you need to report a mental health injury to your employer.
- Step 2: SEE YOUR PHYSICIAN: many physicians now receive training to help with mental health injuries or refer you to specialized treatment. Make sure to tell your physician that you believe the injury is work related.
- STEP 3: REPORT TO WCB: report the injury to WorkSafeBC by calling **1-888-WORKERS (1-888-967-5377)** or visiting www.worksafebc.com/en/claims

Starting a claim does not mean you are automatically off work. This will be dependent on a case by case basis. Be sure to keep your employer up to date with the status of your claim and any changes.



Employee and Family Assistance Program (EFAP)

- **DO YOUR HOMEWORK** - call your local government to inquire about your program. You could be eligible for:
 - **FREE** confidential counseling services for yourself and family
 - Offer counseling and coaching for a variety of issues i.e. stress, depression, anxiety, mental health, addiction, financial, relationship, parental, nutrition



Personal Benefits Provider (e.g., Pacific Blue Cross)

- Check to see if your extended health program provides access to a Mental Health Provider
- If so, you should have an annual personal benefits budget to see any variety of therapies such as Registered Clinical Counselor, Psychologist or receive online Cognitive Behavioral Therapy

Family Doctor/ BC MSP

- Many family physicians are now trained to assist you with mental health problems or direct you to the appropriate resources you require and are covered under BC MSP

Crisis Line

Two crisis lines offer immediate, 24-hour access to services for anyone in the province considering suicide or those with mental health or substance use disorders.

- **1-800-SUICIDE (1-800-784-2433)** is for individuals considering suicide, or for those who are concerned about someone who may be at risk of suicide.
- **310 Mental Health Support (310-6789)** is a crisis line that provides emotional support, information and resources specific to mental health and substance use disorders.



More Resources

Crisis Centre of BC www.crisiscentre.bc.ca

BC Mental Health & Substance Use Services www.bcmhsus.ca

WorksafeBC Critical Incident Response Program: **1-888-922-3700**
www.worksafebc.com/en/claims/report-workplace-injury-illness/critical-incident-response

WorksafeBC Mental Health Injury Claims: **1-888-WORKERS (1-888-967-5377)**
www.worksafebc.com/en/claims

WorkSafeBC Crisis Support Line: **1-800-624-2928**

Homewood Health: **1-800-663-1142** or www.homeweb.ca, see Appendix 4

Pacific Blue Cross: **1-800-PAC-BLUE** or use the Mobile APP

BC First Responder Mental Health www.bcfirstrespondermentalhealth.com

First Responder Health www.firstresponderhealth.org access their YouTube channel for their speaker series which covers a variety of mental health topics by mental health professionals from around the globe

Canadian Mental Health Association www.cmha.ca

Vancouver CISM Team www.vancouvercism.com

Trail FAIR – Family and Individual Resource Society – www.trailfair.ca

BCMSA: www.bcmsa.ca/psychological-support-toolkit-for-workers-and-employers/

911: If you require immediate emergency assistance

Crew Defusing Guide

Introduction:

A Defusing is intended to be an informal “talk” about an unusual or emotionally significant incident.

It is limited to the crew involved from a single station. The Defusing should be facilitated by the Officer in Charge from the incident (or someone they designate and last approximately 30 minutes. Ideally, it will be done 1-4 hours after the incident.

Goal:

The Defusing process provides a format for personnel to discuss their role in the incident as well as any feelings or reactions they experienced. This will help to reduce stress that could arise from exposure to critical incidents as well as educate members on healthy steps to take after an incident.

Rules:

1. Everything that happens in the Defusing is **confidential**
2. Participation is encouraged but not mandatory. Limited to only personnel that were involved in the incident. Should be done in a private area of the station.
3. You’re free to express yourself but it is not a time to critique. Only discuss **your** experience and no one else’s.
4. It is not a forum for discussion on departmental policy, criticism of specific personnel or critique of the operation. Stick to what you saw, what you did, what you felt or experienced.
5. There is no formal recording or written notes. No cell phones.
6. No one should leave the Defusing once it has started.

Process:

1. Read the goal of the Defusing to the group
2. Explain total confidentiality and have everyone agree
3. Explain the rules
4. **Fact Phase:** Each crew member, in any order, should be asked to relay **the facts** they experienced at the incident. From the time they pulled up on scene state a summary of **what they saw, what they heard, what they did.**
5. **Impact Phase:** After everyone has done **Fact Phase** go around the table again and relay what the worst part of the incident was for them, if any, or if anything stands out to them about the incident.
6. Educate participants on available resources:
 - Defusing Handout
 - Mental Health Wellness Toolkit
 - Support networks e.g., family, friends, co workers
 - EFAP Counsellors, WCB CIR Program, Family Doctor

Wrap Up:

1. Remind everyone of the confidentiality of the Defusing
2. Ask the following question, or a variation of: Is there something positive, or a lesson that can be taken from this incident?
3. Encourage members to check in on each other after some time has passed

Having the conversation How to support coworkers or employees

THE 5 STEPS APPROACH:

1. Prepare

- Are you in the right frame of mind to start this discussion?
- Do you have access to resources you may need (crisis line numbers, etc)?
- Do you have some time blocked off?
- Have you thought about where to have the conversation?

2. Talk about what you see

Mental illness is not invisible, identify any changes to:

- Physical health
- Eating habits
- Personal appearance
- Sociability
- Errors or accidents
- Punctuality
- Response to new tasks and familiar tasks
- Working more, unable to take a break

3. Ask if they are okay—in your own words

- Step back from assumptions
- Be curious
- Listen for understanding (see sidebar)

4. Ask what you can do to help

Reassure them that you are here if they need you. If you are a supervisor, ask what you can do to help support their success at work:

- Consider small “a” accommodations (everyday changes and supports)
- Ask what the employee/member is going to do to contribute to their success
- If appropriate, write next steps down either with the employee or after the meeting

Important: If you get a sense that this is warranted, ask if they are thinking about suicide. Be ready to connect them to resources (crisis line etc).

5. Take a moment for yourself

It’s important to take a moment to thank yourself and acknowledge that you have approached an important conversation and have started to build a stronger relationship with another human being.

- Take a walk
- Grab a coffee/tea/water
- Sit in silence for a few minutes

Listening for understanding

- Ask one question at a time
- Listen for the answers, allow pauses
- Avoid interrupting
- Seek clarification
- Don’t problem solve
- Take more time to gather information than you normally would
- Be aware if you are arguing or defending

Crew Defusing Handout

Critical Incident Stress (CIS), Anxiety and Trauma Reactions

Trauma- a deeply distressing or disturbing event

After a traumatic event, it is normal to experience emotional aftershocks or stress – sometimes immediately or sometimes hours, days, weeks or months later.

Stress - the introduction of strain or tension within an individual that results in changes to one's mental state and physiological response. During a stressful event, the brain sends the body rapid signals that unconsciously leads to a fight, flight or freeze response in the person. However, when a stressor is interpreted as unrelenting and even permanent, the mind may become consumed thinking about it even after it has been eliminated. The prolonged reaction to stress is referred to as anxiety and forms the basis for understanding the impact that trauma can have on the mind.

Firefighters have additional risk factors when they experience a stressful event on duty:

1. The traditional stress reactions of flight or freeze are not an option on the fire ground or at a medical emergency.
2. Emergency situations often have multiple stressful aspects that begin when the tones go off and may not end until the engine is restored to service.

Because of this demand on the human mind, firefighters may continue to feel anxious after a call and experience an Acute Stress Injury.

Managing Acute Stress Injuries

A traumatic event related to a critical incident is encoded in the brain in such a way that it is designed to never be forgotten. The memories of this call may lead to intrusive thoughts and stress reactions in the individual that may persist for days and up to months. This is what is referred to as an Acute Stress Injury, and is more identifiable to firefighters as “a normal reaction to an abnormal situation”. Despite the power of this memory, there are proven techniques developed to protect firefighters from developing this or harsher disorders.

Research has proven that Acute Stress Injuries can be largely eliminated in intensity and duration if individuals actively engage in Critical Incident Stress Management (CISM) as well as individual stress recovery practices. Through CISM, the impact of the memory has a chance to aerate in a contained safe setting and become broken down into digestible pieces by the individual. This process accelerates recovery and prevents an Acute Stress Injury from snowballing into something worse such as PTSD or depression.

Everyone reacts to trauma in a different way. Signs and symptoms of an Acute Stress Injury may include:

- Physical: Nausea, upset stomach, sweating, elevated heart rate and blood pressure, muscle soreness, chest pains, headaches, dizziness, chills, teeth grinding.

- Cognitive: Impaired thinking or decision making, poor concentration and memory, poor attention span, altered perceptions, disturbed thoughts.
- Emotional: Anxiety, guilt, fear, grief, irritable and agitated, helplessness, anger, numbness, feeling overwhelmed.
- Behavioral: Withdrawn, change in activities, emotional outbursts, loss/increase in appetite, inability to rest, increased drug or alcohol use, lowered sex drive, conflict or decreased interest in relationships.

Critical Incident Stress Coping Skills

DOs

- Talk about the incident.
- Maintain a healthy diet and exercise.
- Take time for leisure activities that you enjoy.
- Get plenty of good quality sleep.
- Maintain mindfulness.
- Expect the incident to bother you – CIS reactions are normal – but it is also ok to have no reactions as well.
- Educate yourself on CIS.
- Spend time and reach out to loved ones for support.
- Structure your time and stay busy.
- Get professional help if necessary
- Help co-workers going through the same thing by sharing feelings and checking to see how they are doing.

DON'Ts

- Use alcohol or drugs to numb feelings.
- Withdraw from family, friends and coworkers.
- Automatically stay away from work or other obligations.
- Think you're “crazy”
- Look for an easy answer to explain why the incident happened.
- Expect to get over it quickly.
- Make big life changes.
- Fight any recurring thoughts, dreams or flash backs – they will decrease over time.
- Keep quiet and bottle things up.

How to support someone who has responded to or experienced trauma

- **Do not be afraid to ask someone how they are doing. This allows them to tell you as much or as little as they need to at the time. Reach out to them, as it will be much harder for them to reach out first.**
- Let them know that it is okay to talk to you about how they feel about the incident and that you are there for them.
- It is OK to remind them that confusing feelings are a normal/common reaction.
- It is OK to let them know that you are sorry they had to go through this.
- Don't exclude them from social activities.
- Don't encourage them to hide their feelings or suggest they should be over it by now.
- Don't change the subject when they start to talk about the incident.
- Don't impose your explanation of why this has happened to them.
- Ask the person how they are doing, but be willing to say nothing. Just being there and listening is often the best help.

Critical Incident Response (CIR) Program

The WorkSafeBC Critical Incident Response (CIR) Program is a confidential, early intervention initiative that provides critical incident intervention to workers and employers who have experienced a traumatic event in the workplace. The goal is to reduce the distress that workers and employers may experience immediately following an event, and to mitigate the development of further, more serious difficulties.

What is a workplace critical incident?

A workplace critical incident is a sudden and unexpected workplace situation or event that causes a person to experience unusually strong emotional reactions that have the potential to interfere with his or her ability to function. Such events are markedly distressing and usually involve a perceived threat to one's physical integrity or the physical integrity of someone in close proximity. Examples of a critical incident can include witnessing or responding to a fatal accident, sustaining a serious physical injury, being assaulted, or being robbed by someone with a weapon.

Generally, an intervention is arranged for workers and employers who have witnessed, or been directly involved in an event. Interventions are offered to groups as well as to individuals. Through the CIR Program, an initial intervention can be accessed up to three weeks from the date of the critical incident.

Who can request an intervention?

Anyone can initiate the request for an intervention. When an incident occurs, please contact the CIR Program as soon as possible to give the program, the employer, and/or worker, the opportunity to determine whether an intervention is appropriate and/or necessary.

Who provides the intervention?

When the CIR Program receives a request for intervention, these services are provided by a qualified mental health professional located in the employer's or worker's community. Providers are registered counsellors, social workers, and psychologists who have specialized training to work with people who have

been through traumatic incidents. If a local provider is not available, a qualified provider can be brought in from another area.

The role of the CIR provider is to offer critical incident intervention to employers and workers following a traumatic event in the workplace. Although exceptions may occur, the CIR provider is contracted to provide short-term support in the form of a critical incident intervention, which is separate from the more extended treatment that may be necessary for some individuals.

What is an intervention?

A critical incident intervention is a structured individual or group process in which a provider helps the affected worker(s) to cope with the continuing effects of a traumatic incident. This kind of intervention ideally occurs within 24 to 72 hours of the event, but can be accessed up to three weeks after the incident. Participation is always voluntary. The purpose of the intervention is to focus on the well-being of the worker(s), not to find the cause of the incident or to assign blame. Discussions about non-incident related emotional issues or labour relations concerns would not be part of the intervention. To ensure that each situation is attended to in the most appropriate way, we ask our providers to first assess the needs and then proceed with the appropriate intervention.

During an intervention, the CIR provider explains the intent of the intervention and provides education around why participants may be experiencing strong reactions. Interventions are led by trained, qualified professionals who can address any strong emotions —

work with the peers to facilitate the intervention and provide support.

After the intervention, the provider will submit a brief intervention summary report to the CIR Program. If the initial intervention is done as a group, then this report will not include the names of the participants. If the initial intervention is done with an individual, then the report will contain the participant's first and last name or initials. Reports for individual interventions will be forwarded to the appropriate WorkSafeBC claim file, if one has been started. The costs associated with this initial intervention are covered through the CIR Program.

What if the worker needs further assistance?

Following the initial intervention, if the provider finds that a worker who was directly involved in the incident may benefit from further assistance, the provider will notify the CIR Program. At that time, a maximum of five hours of individual follow-up intervention with a CIR provider can be authorized. The cost of these additional five hours will be covered through the CIR Program, except in the instance where a WorkSafeBC claim has been filed and accepted for psychological injury. In that case, the follow-up intervention will be

an individual progress report, which will be forwarded to the claim file, if one exists.

For most workers, this brief course of early intervention is all that's necessary. For others, psychological treatment may be required. If a worker requires treatment beyond the follow-up support available through the CIR Program, the costs are not covered by the CIR Program. The worker may request further assistance by applying for a WorkSafeBC claim or finding alternate coverage of costs.

What if the worker registers a claim following an intervention?

Should a worker register a claim directly following an intervention, the CIR Program will notify the claim of any involvement to date and forward individual reports to the claim file.

Contact

If you have any questions, or need to request an intervention, please call our toll-free answering service in B.C. and Alberta at 1.888.922.3700. We will return your call between 9 a.m. and 11 p.m., seven days a week. Calls made after 11 p.m. will be returned after 9 a.m. the next morning.

Confidentiality

All information shared with the CIR Program and any CIR staff members and any services provided through CIR are confidential and will not be shared with anyone outside of the CIR Program except in the following circumstances:

- someone is considering harming him or herself or someone else
- a child under the age of 19 is at risk of harm or is being harmed
- a vulnerable adult is being abused or neglected
- a WorkSafeBC claim is commenced by the person utilizing the CIR program
- a court order requires the release of the information, or
- a regulatory college or professional association requires the release of the information for an investigation

1 A peer-support person is someone who has been trained to offer support to colleagues in crisis. For general information about peer support programs, please contact Incident Response Programs at 604.279.7520



Insert Family Assistance Program Here



Lined writing area for notes.



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Thank you for sharing

