ICEBREAKERS, GROUPS AND MENTAL HEALTH!
OH, MY!

Brought to you by:
The Nicasa Prevention Team
ICE BREAKERS MAKE THINGS HAPPEN

An icebreaker is a special-purpose ship that is designed to navigate through dangerous ice covered waters.

This is how the name “ice breaking” began to be applied to clearing the course for learning in a setting that could feel “dangerously” uncomfortable as members don’t know each other or know what to expect.
can be used whether kids/people know each other or not.
How did you get your name?
BENEFITS OF ICEBREAKERS

1. They are fun. Laughter is a positive thing!
2. Kids get involved quickly and more easily.
3. Barriers are broken.
4. People get to know each other or know more about each other.
5. Help clear out the cobwebs!
6. Icebreakers create interaction that is nonthreatening.
7. They can instill confidence.
8. Opening up communication is key to success.
9. Creativity will improve.
10. New ideas will be generated.
And even more benefits.........

- Icebreakers create a rich learning atmosphere.
- They prepare kids to learn.
- Icebreakers improve facilitation skills. They are good for you, too!
- They can make kids feel special.
- Motivating through activities can create more learning success down the road.
- Many learning styles can be used.
- Isolative participants can engage more easily.
- Icebreakers make commonalities more evident.
- Out of the box thinking is a life tool.
And now it’s time for M&Ms
Icebreakers are great because they can be used in all settings and across the lifespan.
THE ONE WORD Challenge

CreatingaGreatDay.com
DO’s FOR CREATING THE RIGHT KIND OF ICEBREAKER

- Plan ahead, make a good choice and practice.
- Have supplies ready.
- Allow sufficient time for completion and processing.
- Process everything.
- Relax! and have fun.
- Reduce complex instructions.
- Monitor what happens.
- Don’t repeat it.
- Have a back up plan.
- If it doesn’t work, don’t blame......process it!
AND NOW THE **Don’ts** FOR ICEBREAKERS

- ...forget to gauge who is in your group
- assume they must occur only at the beginning of group/activity
- force participation.... ask yourself; what does participation look like?
- provide painful feedback....this may be setting a tone for group interest.
- occur too many times without variety....
- no direct relevance
- lack of preparation or going in “cold”
What's awesome??

Llamas are AWESOME!
AND FINALLY:

Carefully crafted, icebreakers can be very powerful. Create a fun atmosphere for learning and help people retain information.
TIME FOR GROUP!
ESSENTIALS FOR UNDERSTANDING AND FACILITATING GROUPS

- Observe with eyes that honor people.
- Know that poor behavior might be a math problem: Frustrations > Skills
- Priorities, attitudes and goals can become more evident because of the group experience.
ATTRIBUTES OF FACILITATORS

- Open
- Honest
- Fair
- Consistent
- Focused
- Active listeners
- Accessible
- Flexible
- Assertive
- Enthusiastic
- Adaptive
- Proactive
- Responsive
- Resilient
Group Size?
What is your goal?
The more you understand yourself the better you are able to understand what motivates others.
Go in cold or plan?

IT’S OK,
I HAVE A PLAN
How?
When?
are the expected rules of conduct that are important for the group’s full participation and success.

- Four walls behavior
- Control what you can
promote participation

Thank you for continuing to keep it real
A FEW KEY DON’TS….JUST DON’T DO IT!

- Be afraid of disagreement
- Allow one person to dominate
- Let one point of view override the group
- Assume because of background, environment or culture
- Be the font of all wisdom
- Disclose your past as an adolescent
Food or no food?
Rewards or no rewards?
Leadership Squares
ACTIVE LISTENING AND BRAINSTORMING

- **Active Listening**
  - Expresses understanding
  - States the problem
- **Brainstorming**
  - Generates new ideas
  - Uses knowledge of the group
The most therapeutic materials on the planet (no kidding):

- Legos
- The Box o’Crap
- Uno
GROUP BEHAVIOR GOALS

- Be fully present
- Be responsible for your own needs
- Listen and respond
- Take risks
- Lean into discomfort
- Accept conflict as a catalyst
- Be open-minded
- Honor confidentiality
- Accept diversity
- Decide what participation looks like
Behavior, Grades and Relationships
COMMON SITUATIONS WHERE YOU MAY NEED TO INTERVENE

- Side bars
- On time
- Never ending discussions
- Internal conflict
Process

EVERYTHING!
Resiliency Model

- Problem solving
- Sense of future
- Sense of humor
- Social competence
- Mentor
Model what you want to see.

Control your own biases

Predict what you want to see.
Ensure self care and co-facilitator care.
closing your group with a feedback
You will have an impact on every person you come in contact with either by design or by default.

Which do you choose?

L. Tobin
Depression

Abuse of alcohol/drugs

Self-injury/Cutting

Physical complaints

Threats to run away

Inability to cope

Intense fear of becoming obese

Frequent outbursts

Aggression

Nightmares

Unusual behavior

Threat to harm self or others

Sexual acting out

Marked change in school performance

Nightmares

Threat to harm self or others
At least 1 in 5 children and adolescents has a mental health disorder

1 in 10 has a serious disorder

90% of people who develop a mental disorder show warning signs during their teen years
For the most part children can develop the same mental health conditions as adults, but their symptoms may be different.
SOME KIDS DON’T GET HELP BECAUSE........

- Many mental illnesses may look like typical adolescent behavior
- Stigma is alive and living in your neighborhood
- Families don't know about available treatment
- Kids may not have the vocabulary to tell us that something is wrong
- Families may be afraid of medication
Some illnesses that affect kids are:

- Anxiety disorders
- ADD/ADHD
- Autism Spectrum Disorders
- Eating Disorders
- Mood disorders
- Schizophrenia
- Substance Use Disorders
- Behavioral Disorders
- Non Suicidal Self-injury
CLINICAL DEPRESSION

• Deep despair, sadness, crying
• 1 in 13 teens experience symptoms

BIPOLAR DISORDER

• Extreme changes from happy to sad
• 1 in 100 teens have it
• Hard to diagnose, looks like depression
ANXIETY DISORDERS

• Overwhelming fear with no cause
• Risk is greater with family history

EATING DISORDERS

• Unrealistic thoughts about weight
• 1 in 20 teens suffer; 90% females
• Untreated it can result in hospitalization or death
SCHIZOPHRENIA

• Strange thoughts, unusual behaviors
• High functioning, then big decline
• Distrustful, no longer social, voices

ADHD

• Problems paying attention
• Can seriously impact ability to learn
OPPOSITIONAL DEFIANT DISORDER

- Stubborn, argumentative, hostile
- Major distraction in the classroom

CONDUCT DISORDER

- Verbal/physical aggression
- Junior sociopaths
- End up in detention centers
WATCH OUT FOR:

- Sadness, withdrawal, moodiness
- Intensity in feelings or anxiety
- Anger or risk taking
- Talking about suicide, subtle talk as well
- Difficulty concentrating
- Weight loss
- Changes in appearance
- Bruising, cuts.... Changes in how clothing is worn
- Change in peers
- Physical symptoms
A SHAMELESS PLUG FOR:

Assess for risk of suicide or harm (What is your approach?)

Listen nonjudgmentally

Give reassurance and information

Encourage appropriate professional help

Encourage self-help and other support strategies
KEY UNDERSTANDINGS:

- What is your role and what does your role allow?
- What do you know about your community for professional help and self-help?
- Are you prepared for a mental health issue?
- Do you have an agency protocol?
WHAT IS Normal?

- Change
- Weirdness
- Inexperience
- Self-consciousness
- Risk Taking
Steps YOU Can Take

NOTICE  TALK  ACT
“Adolescence is like having only enough light to see the step directly in front of you.”

— Sarah Addison Allen, The Girl Who Chased the Moon
Breakfast Club End Speech
REFERENCES

- Youth Mental Health First Aid
- Surviving Your Adolescence
- A Tribe Apart
- Maslow
- The Brains of You Nicasa Prevention After School Team