

Mental Health Awareness Statement

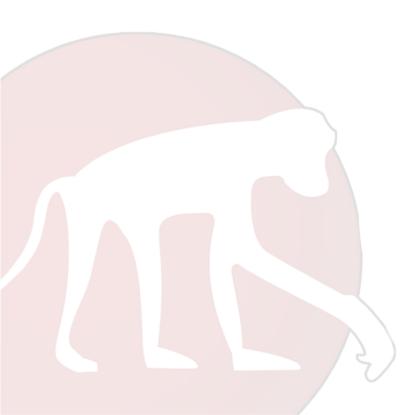
Fourth Monkey Education Ltd respects, supports and encourages applications from all areas of society, regardless of pre-existing physical or mental diagnosis or challenges. If the individual can activity and proactively participate in the training, then the charity will support that individual within the parameters of the Company policies, and to its best extent.

Fourth Monkey Education Ltd does not discriminate on any grounds and we activity support students with a variety of mental, physical and learning differences. The individualis central to our core values and the central element of our training ethos, namely that of ensemble.

This statement is specifically written to relate to the Company policy on positive attitudes towards mental disability/ difficulties, along with our pledge to support the #time4change initiative for positive and proactive awareness of mental health difficulties in the arts as much as is practical and within our remit.

Fourth Monkey Education Ltd has signed and agreed to the terms and conditions of the #time4change initiative and aims to promote awareness and support of mental health difficulties in our training and where practical and appropriate, in the wider community and arts sector as a whole.

Fourth Monkey Education Ltd will seek to revise this statement where appropriate and itshould be considered as a working document. Revisions will be added as policies, progressions and situations dictate, or as the Company deems appropriate.





Key Points of the Statement

In agreeing to actively promote positive attitudes and awareness to mental health in the arts by signing up to the #time4change charter, Fourth Monkey Education Ltd pledges to:

- 1. Not to discriminate on any grounds of mental health difficulties
- 2. Publicly promote and adopt evidence-based policies and best practices
- 3. Actively challenge discrimination and foster a culture of dignity and respect for all
- 4. Promote positive mental health messages, underpinned by diverse industry role-models and ambassadors
- 5. Support the development of a pan-performing arts network to actively develop and share resources and best practices
- 6. Regularly peer-monitor and review our progress against agreed standards and takepositive action on mental health issues, as indicated

Key Points in Action

As a training institution and in line with the practices set out in the #time4change charter, Fourth Monkey Education Ltd pledges to actively promote mental health awareness in thefollowing ways:

- Foster a culture of openness, through dialogue. Information will be given in welcomepacks and in welcome talks. Students will be encouraged in group sessions and 1:1 sessions to openly talk about 'shared experiences' from a variety of different angles. Support will be offered on multiple levels as detailed in the staff structure on page 5.Information will be placed in all staff and student social areas to begin opening the discussion and avenues for assistance.
- Commit to delivering an annual presentation, addressing issues of Mental Health and Wellbeing. The sessions will be conducted with a mixture of presentation, Q&A and discussions. The presentations will be delivered to all students after the first term of being with the Company. This will enable a greater sense of comfort, rapport and understanding within the group. This will also be timed to happen before the start of Spring performance seasons so that the students have the tools and information to be able to deal with the demands of the training and indeed the repertory performanceseasons.
- To provide annual mental health awareness training for staff. Annual staff training will take place which covers all full time and part-time staff members, where appropriate. This training will take the form of a presentation and discussion. The initial session willbe delivered in house by the Welfare Officer. Other CPD courses will be encouraged where appropriate.



- Put mechanisms in place to ensure access to debrief and supervision for staff workingwith students with mental health issues. There are clear line management structures inplace for staff. All staff members have been briefed on options open to them for external help and given training on resilience. There is an 'open' policy of communication between staff members within the Company and sharing (where appropriate/ with the appropriate person as situations and information dictates) is positively encouraged.
- <u>Provide annual peer assessment of another organisation and feedback on areas of goodpractice and recommendations for improvement of mental health care provision.</u> The Artistic Director will seek to build links with other training institutions regarding this matter and how best we can all assist each other.

Where possible and practical, Fourth Monkey Education Ltd will send delegates to CPDcourses to ensure staff and/or student ambassadors are sufficiently aware of processes and procedures relating to this statement.

Raising Awareness

As well as ensuring that all students have access to annual presentations, training, CPD(where appropriate), 1:1 sessions and mentors, the Company also ensures that information is placed in student and staff communal areas. This is to ensure that individuals have access to information, should they not wish to immediately divulge information to others in the Company.

Working with the Local Community and External Agencies

Fourth Monkey Education Ltd will, where practical and appropriate, seek to engage in work with external agencies on arts based projects. This is currently a work in progress as the Company expands over the next few years and seeks to have more of a positive presence in the local community and beyond. Where possible, Fourth Monkey EducationLtd will seek to engage in multi-agency work to benefit the awareness of information detailed in this statement and other ventures.

Staff Roles and Responsibilities

Whilst all staff and students are responsible for the welfare of themselves and others attimes, the following is a list of staff members with specific roles in relation to this statement.

Artistic Director & CEO	Responsible for all Staff & Students
Director of Training & Deputy CEO	Responsible for all Students, Teaching Staff & Support Staff
BA (hons) Acting Course Director	Responsible for all BA (hons) Acting Students
Year of the Monkey Course Director	Responsible for all YOM Students
Courses Manager & Student WelfareOfficer	Welfare Officer for all Students/ medical records keeper/Student Liaison Officer
Duty Officers	Support after office working hours for Students & Staff



Student Reps

Peer lead support for minor incidents & referrals to staff/ student body initial contact

Point of Contact and Flow of Communication.

Social Reps/ Year Reps/ Mentors

(Initial point of contact/social/minor concerns)

Please be aware that the reps are not trained welfare officers and whilst they will supportyou, they are still part of your cohort.

Courses Manager & Welfare Officer (Phill Stanley- phillip@fourthmonkey.co.uk)

In the absence of/ in conflict with the above, main point of contact for all course matters(YOM and BA (hons) Acting courses).

Director of Training

(Philippa Strandberg-Long - BA (hons) Acting: philippa@fourthmonkey.co.uk)(Mia Jerome - Year of the Monkey: gavin@fourthmonkey.co.uk)
In the absence of/ in conflict with the above, matters relating directly to professional development and matters relating to 1:1 sessions or tutorials.

Director of Training (Final escalation point)

In the absence of/ in conflict with the above, any unsettled issues and matters relatingdirectly to the preservation of/ further development of the FM brand/ Company.

Note: Although this system provides you with escalation points, it is important to understand that we are all here to support you throughout your time in House andbeyond.

Other Points of Contact:

Point of contact for building maintenance, space bookings, ticket booking duringproduction weeks - <u>jonne@fourthonkey.co.uk</u>

Point of contact for general production information, industry invites during production seasons, initial production scheduling will be the Fourth Monkey Producer, details will be supplied during production terms.

External Contacts List - (some information taken directly from the #Time4Change Charter)

Emergency Numbers:

999 - Emergency Services

911 - Alternative line for 999



112 - European Emergency number which can be used anywhere inside Europe. This line is also useful for people who's first language is not English, as they can pass you to an operator who can speak in the persons native language.

Non-Emergency Numbers:

111 - NHS Direct, If you wish to discuss yours or another symptoms and seek furtheradvice

101 - Non-Emergency Police number

Doctor

See your GP if you are struggling with mental health problems, but not in immediate danger. They will be able to discuss treatment options with you. Medication is not always necessary, but individuals can often benefit from psychological therapy, such as CognitiveBehavioural Therapy (CBT), alongside any self-help resources you might use. Your GP canrefer you to other services and assess you to exclude any underlying medical health condition that may be giving rise to your mental health symptoms.

artsminds

Collaboration between BAPAM, Equity, The Stage and Spotlight to provide online information, resources and advice to the performance industry Covers health, career, relationships, finances and helping others. www.artsminds.co.uk

CALM

www.thecalmzone.net, 0800585858

Heads Together

www.headstogether.org.uk

Papyrus

www.papyrus-uk.org, 08000684141

BAPAM

Delivers specialist health support and medical advice to help over-come work-relatehealth problems for professional and student performing artists, plus crew Call 020 7404 8444 or visit www.bapam.org.uk

Mind Info Line

Call 0300 123 3393 or text 86463 or visit www.mind.org.uk

Lines are open 9am to 6pm, Monday to Friday (except bank holidays)Provides information on a range of topics including:

- Types of mental health problems
- Where to get help
- Medication and other therapeutic treatments
- Advocacy

The info line can also signpost other sources of support in your area. Mind has free webinars and resources that show you simple, inexpensive and practical ways to mentalwellbeing.

<u>Samaritans</u>

Samaritans operate a 24 hour service on 116 123. More information can be found at www.samaritans.org.uk

acas

Further guidance is available at www.acas.org.uk



MENTAL HEALTH CHARTER: #TIME4CHANGE

Fact Sheet

To help you to know how to talk about mental health here is a fact sheet on symptoms and common language and terminology.

Mental Health and Wellbeing

It is important to remember that, like physical health, we all have mental health too.

What is mental wellbeing?

Mental wellbeing describes your mental state - how you are feeling and how well you can cope with day-to-day life. If you have good mental wellbeing, or good mental health, you are able to:

- Feel relatively confident in yourself you value and accept yourself and judge yourself against realistic standards
- Feel and express a range of emotions, appropriately and proportionately
- Feel engaged with the world around you you can build and maintain positive relationships with other people and feel you can contribute to the community around you
- Live and work productively
- Cope with the stresses of daily living and manage times of change and uncertainty

Mental health problems and wellbeing

If you experience low mental wellbeing over long period of time, you are more at risk of developing a mental health problem. If you already have a mental health problem you aremore likely to experience periods of low mental wellbeing than someone who hasn't. However, you can still have sustained periods of good wellbeing where you can manageyour life without becoming unwell.

Getting help if you are struggling

If you feel persistently down, for a duration of two weeks or more, or feel that you can nolonger cope, it is really important that you don't struggle on alone. Often, just naming that you're having difficulties can bring a sense of relief and make your circumstances feelmuch more manageable.

Many mild mental health difficulties can be resolved simply by talking to a friend, member of your family or staff. Often mild problems will resolve of their own accord or respond well to talking therapies.

Signs of mental health problems

It is important to evaluate these in terms of duration and severity of symptoms, having acluster of symptoms and the impact it has on social function.



Sleep can have an impact on mental health, as well as being a possible early indicator of the onset of mental health difficulties.

There are clinically effective self-help apps to address sleep problems and these can oftenbe more useful than medication. Google 'sleep hygiene' for advice on steps to take to prepare for a good night's sleep. NHS Choices also provides information and self-help advice. Your GP can discuss specialist treatment options with you.

Depression

Symptoms of depression may include:

- Persistent low mood, often worse in the evening
- Loss of interest in life and a lack of enjoyment of things you'd usually get pleasure from
- Feeling alone, even when surrounded by people
- Tiredness and a lack of energy
- Feelings of emptiness and worthlessness
- Feeling disconnected and unmotivated
- Loss of interest in sex
- Problems getting off to sleep, early morning waking with an inability to getback to sleep, problems getting out of bed in the morning
- Failing aspects of training or over-working
- Problems concentrating and remembering things
- Self-doubt
- Feelings of guilt and despair
- Suicidal thoughts

Bipolar disorder

Bipolar disorder, sometimes referred to as manic depression, is characterised by extreme mood swings. These can range from extreme highs (mania), to extreme lows (depression). Mood swings also have associated changes in sleep, energy levels, rate of speech and theability to think clearly.

Mania

Symptoms of mania may include:

- Feeling very happy, elated or over-joyed
- Talking very quickly
- Feeling full of energy
- Feeling self-important
- Feeling full of great new ideas, schemes or plans
- Inability to concentrate
- Easily irritated or agitated
- Being delusional, perhaps believing things that seem irrational to other people, having hallucinations and disturbed or illogical thoughts,
- Not feeling the need to sleep
- Not eating



- Poor impulse control and an inability to consider consequences of actions -for example, spending large amounts of money on unnecessary and often unaffordable items
- Risky or harmful behaviours that are out of character

Depression

Please refer to the previous section for a description of possible symptoms

Self harm

About 8% of the population engages in current, chronic non-suicidal self-injury. Of these,80% do so for emotional regulation.

Self-harming behaviours may involve:

- Taking too many tablets
- Cutting yourself
- Burning yourself
- Banging your head, punching walls or throwing yourself against somethinghard
- Punching yourself
- Sticking things into your body
- Swallowing things

Incidents of deliberate self-harm are greatest amongst women, LGBT+ people and thosewho have experienced physical, emotional or sexual abuse during childhood.

Taking drugs recklessly, engaging in unsafe sex or binge drinking are examples of lessobviously but still serious self-harming behaviours.

Someone who self-harms is usually in a state of heightened emotion, distress and unbearable inner turmoil. About 3 in 100 who self-harm over more than 15 years will killthemselves. That's more than 50 times the rate for those that don't self-harm.

Cutting can leave you with permanent scarring and is a route for infection. If you damagenerves and tendons this can lead to a reduction in sensation and function.

Self-harm is not necessarily a sign that you have a mental illness, though often people willhave an underlying clinical depression.

Eating disorders and compulsive exercising

Anorexia Nervosa

Anorexia Nervosa is a serious mental illness

What are the signs?

You may find that you:

- Think more and more about your weight
- Eat less and less calorie counting



- Exercise more and more, to burn off calories
- Can't stop yourself from wanting to lose weight, even when you are wellbelow a safe weight for your age and height
- Smoke more or chew gum to keep your weight down
- Obsessively check your weight, shape or reflection in mirrors
- Withdraw from social situations which may involve eating
- Wearing baggy clothes to hide one's body
- Water loading before being weighed
- Excluding certain food groups and making foods "good" and "bad"
- Avoiding mealtimes, especially at school
- Lose interest in sex

What happens?

- You take in very few calories every day. You eat "healthily" fruit, vegetables and salads but they don't give your body enough energy.
- You may also exercise, use slimming pills, or smoke more to keep your weightdown.
- You don't want to allow yourself to eat, but you buy food and cook for other people.
- You still get as hungry as ever, in fact you find you can't stop thinking about food.
- You become more afraid of putting on weight, and more determined to keepyour weight well below what is normal.
- Your family may be the first to notice your thinness and weight loss.
- You may find yourself not able to tell other people the true amount you are eating and how much weight you are losing.
- You may also make yourself sick if you eat anything you did not plan to allow yourself, particularly if you lose control of your eating and find yourself bingeing. However, this is known as 'anorexia, binge-purge subtype' rather than bulimia nervosa. Bulimia nervosa sufferers are by definition in the normal weight range.

Bulimia

People with bulimia attempt to control their weight by severely restricting the amount offood they eat, then binge eating and purging the food from their body by making themselves vomit or with the excessive use of laxatives. Such binge-purge cycles can betriggered by hunger or stress or a way to attempt to regulate emotional anxiety

Binge Eating Disorder

This is characterised by binge eating without subsequent purging episodes. It is one of the most prevalent eating disorders. The binge eating episodes are associated with three, or more, of the following:

- Eating much more rapidly than normal
- Eating until uncomfortably full
- Eating large amounts of food when not physically hungry



- Eating alone because of feeling embarrassed by the amount being eaten
- Feeling self-disgust, guilty or depressed afterward
- Marked distress regarding binge eating
- Binge eating occurs at least once a week for three months

 Some people will binge eat occasionally, without experiencing many of thenegative physical, psychological and social effects of binge eating disorder. This example may be considered an eating problem (or not), rather than a disorder.

Compulsive Exercising

Compulsive exercising, or anorexia athletica, as another way to purge calories can be asserious as bulimia and anorexia

Signs and symptoms may include:

- Working out with an injury or when unwell
- Feeling seriously guilty or depressed when not able to exercise
- Not taking rest or recovery days
- Working out for hours, beyond what could be considered usual or safe

Serious side effects may include:

- Dehydration
- Fatigue
- Injury
- Loss of bone density
- Osteoporosis
- Fracture
- Amenorrhea
- Reproductive problems
- Degenerative arthritis

Substance misuse and addiction

Using and abusing alcohol, drugs or other substances, such as aerosols, is not simply a 'choice', but a complex response, driven by many internal and external factors. Those who abuse substances have also been shown to demonstrate impaired inhibitory control –this may be due to drug–induced changes in the brain. This can result in higher levels of impulsivity and more risky choices. Your attitude about using/abusing can be critical to what you do, or don't do about it.

Anxiety

Some anxiety is good for you and will help you to remain alert and perform well. However, about 1 in 10 people will experience problematic anxiety, that is too intense or goes on for too long, at some point in their life. Problematic anxiety, if not addressed, canadversely affect physical and mental health as well as performance in all domains of life.



- Fast or irregular heart beat (palpitations)
- Sweating
- Shaking
- Blushing or looking pale
- Dry mouth
- Short of breath
- Pressure of speech or breathy speech
- Dizziness/fainting
- Gastrointestinal disturbance nausea, vomiting, abdominal cramps, constipation, diarrhoea
- Increased frequency of passing urine
- Physical pains with no obvious cause
- Muscle tension
- Headaches
- Tingling in hands and feet and possibly lips
- Sleep disturbance
- Nightmares
- Low tolerance for stressors outbursts of anger, road rage or avoidance of conflict
- Irritability
- Difficulties concentrating
- Poor memory, forgetfulness, difficulty recalling names or numbers
- Feeling worried
- Lethargy

Panic Attack

This is intense anxiety that is unpredictable and sudden in onset. The experience can bevery frightening and people can think they are about to die. Of all the patients who present to A and E with severe chest pain, thinking they are having a heart attack, 25% are actually having a panic attack.

Generalised Anxiety Disorder

This is where symptoms of anxiety are experienced much of the time in most or all settings.

Treatment Options Self-help Learning to relax

This can help to alleviate symptoms of anxiety and tension and something like guided meditation apps or yoga classes can be really useful ways of developing the more specialised skills required. It is important to use these practices regularly and not just intimes of crisis, if they are to be of most benefit.



Self-help books

There are a number of useful self-help books, based on cognitive behavioural therapyprinciples, on the market.

Cognitive Behavioural Therapy

Cognitive behavioural therapy (CBT) is the most widely-used therapy for anxiety disorders. Research has shown it to be effective in the treatment of panic disorder, phobias, social anxiety disorder, and generalised anxiety disorder, as well as a number of other conditions.

Cognitive behavioural therapy addresses negative patterns and distortions in the way welook at the world and ourselves. As the name suggests, this involves two main components: Cognitive therapy examines how negative thoughts,

or cognitions, contribute to anxiety. Behaviour therapy examines how you behave andreact in situations that trigger anxiety.

The basic premise of cognitive behavioural therapy is that our thoughts—not external events—affect the way we feel. In other words, it's not the situation you're in that determines how you feel, but your perception of the situation.

Medication

Medication can be an important aspect of treatment for some people with anxiety.

Antidepressants

Although originally approved for the treatment of depression, the newer Selective Serotonin Reuptake Inhibitors are also useful for treating anxiety. They usually take 4 to 6weeks to work and may need to be continued for some months after symptoms have resolved.

Benzodiazepines

Common tranquillisers, like diazepam, are very effective at treating anxiety but they are also very addictive and so only for very short-term use of less than four weeks duration. They must also never be used in panic disorder because of possible paradoxical reactions

Beta-blockers

Beta-blockers, such as propranolol, do not treat the anxiety itself but can effectively treat some of the physical symptoms of anxiety, including a rapid heartbeat, palpitations and atremor (shaking) by blocking the effects of the stress hormones adrenalin and noradrenalin. They are short-acting and can be used just before anticipated anxiety- provoking situations such as auditions. They are contraindicated in asthmatics and those with low blood pressure.

As with any mental health symptoms, it is advisable to have a discussion with your GPto exclude any underlying medical causes for your symptoms.