

# Evaluation of a Multi-state Pharmacy-led Mental Health First Aid (MHFA) Training Initiative

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## Background

- Mental Health First Aid (MHFA) is a training designed to teach skills needed to identify and provide initial support to persons experiencing mental health crises
- A recent effort trained 4 pharmacists to conduct MHFA courses for pharmacy professionals across the U.S.

## Objectives

- Assess participant MHFA reluctance and confidence
- Describe participant use of MHFA skills since training
- Report open-ended feedback on MHFA training & use

## Methods

- Cross sectional anonymous electronic survey of pharmacy professionals (pharmacists, faculty, student pharmacists, and technicians) that participated in a pharmacist-led MHFA training in 2018
- Surveys distributed May-June, 2019 using 4-contacts
- The survey assessed beliefs/reluctance (6-items), confidence (7-items), and MHFA skill use (9-items) using established measures
- Analyses included descriptive statistics and a basic content analysis process to sort responses into topics

## Results

- Ninety-eight out of 227 participants responded (43.9%)
- Almost half of the participants were practicing pharmacists, one quarter were students
- Overall, respondents had favorable scores on reluctance items, although some did not know patients well enough to know when they are in crisis
- Participants reported high levels of confidence in performing MHFA skills
- Since being trained, respondents reported asking someone about their distressed mood (82%) asking someone if they are considering suicide (43%), referring someone to resources because of mental health crisis (61%), and engaged with a mental health crisis resource on behalf of someone (51%)
- Open ended responses suggested participants had concerns related to time, privacy, availability of mental health providers, stigma, lack of background on patients. Respondents were interested in continuing education.

## Discussion

- Future work can reinforce MHFA learnings, keep those trained engaged, and train additional pharmacy professionals in MHFA
- Research is needed to observe actual use of MHFA skills in simulation and practice

Pharmacy professionals trained in **Mental Health First Aid (MHFA)** are confident in their abilities to use MHFA skills and frequently engaged in activities like **asking about suicide and encouraging people in crisis to seek help**



Table 1: Responses to reluctance items for engaging in a mental health crisis (N=98)

Item	Percent response							Med (IQR)
	SD	D	N	A	SA	NA	NR	
There is very little that I can do to help if someone thinking about suicide doesn't acknowledge the situation	34	40	8	7	3	0	8	2 (1)
If someone contemplating suicide does not seek assistance, there is nothing I can do to help	48	34	5	3	2	0	8	1 (1)
If someone in a mental health crisis refuses to seek help, it should not be forced upon them	18	40	15	1	6	0	9	2 (1)
I cannot understand why anyone would contemplate suicide	56	18	12	1	3	1	8	1 (1)
I'm too busy to provide MHFA at work	58	19	7	4	3	0	8	1 (1)
I do not know most patients well enough to know when they are in a mental health crisis	27	29	15	9	6	6	8	2 (2)

SD=Strongly disagree, D=Somewhat disagree, N=Neither agree or disagree, A=Somewhat agree, SA=Strongly agree, NA= Not Applicable, NR=No Response, IQR= Interquartile range  
Cronbach's Alpha =0.79

Table 2 Responses to confidence items for performing Mental Health First Aid skills

Item: I am confident I can....	Percent response							Med (IQR)
	SD	D	N	A	SA	NR		
Recognize the signs that someone may need MHFA	1	1	0	46	39	11	4 (1)	
Ask someone if they are thinking about suicide	0	0	2	46	39	11	4 (1)	
Listen non-judgmentally to someone experiencing a mental health crisis	0	0	2	15	70	11	5 (0)	
Offer basic "first aid" level information to someone experiencing a mental health crisis	0	0	1	32	54	11	5 (1)	
Offer reassurance to someone experiencing a mental health crisis	0	0	0	35	52	11	5 (1)	
Encourage someone experiencing a mental health crisis to seek professional help	0	0	0	23	64	11	5 (1)	
Encourage self-help strategies for someone experiencing a mental health crisis	0	2	3	33	49	11	5 (1)	

SD=Strongly disagree, D=Somewhat disagree, N=Neither agree or disagree, A=Somewhat agree, SA=Strongly agree, NA= Not Applicable, NR=No Response, IQR= Interquartile range  
Cronbach's Alpha =0.82

Table 4: Respondent self-reported use of Mental Health First Aid skills since training

	Percent response				Med times if Yes (IQR)
	No	Yes	NA	NR	
Thought someone's behavior might indicate they are having a mental health crisis	13	72	1	13	2 (1)
Thought someone's behavior might indicate they are having suicidal thoughts	28	57	2	13	2 (1)
Asked someone about their distressed mood	4	82	0	14	3 (2)
Asked someone if they are considering suicide	40	44	2	14	2 (1)
Listened non-judgmentally to someone experiencing a mental health crisis	4	80	2	14	3 (2)
Referred someone to resources because you were concerned they might be experiencing a mental health crisis	22	61	2	14	2 (2)
Referred someone to appropriate resources because you were concerned they were considering suicide	37	45	3	15	1 (1)
Engaged with a mental health crisis resource for someone	51	32	3	14	2 (2)
Engaged with emergency medical or police services because of someone experiencing mental health crisis	63	19	4	13	2 (2)

NA= Not Applicable, NR= No Response median= if yes, how often? 1,2,3,4 or more times