

# STILL / FALLING

BY RACHEL ABERLE

## STUDY GUIDE

### DIGITAL LIVE BROADCAST

Supported by



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# COMPANY LIST

Nina  
Nick  
Playwright

Lisa Baran  
Matthew Rhodes  
Rachel Aberle

## PRODUCTION TEAM:

Director  
Assistant Director  
Youth Mental Health Advocate  
Talkback Panelist (school performances)  
Talkback Panelist (public performance)  
Set Design  
Lighting Design  
Associate Lighting Design  
Company Manager  
Live Stream Technician  
Audio Engineer

Rachel Aberle  
Leslie Dos Remedios  
Shilpa Narayan  
Christina Cook MA, RCC  
Dr. Lynn D. Miller, Ph.D., Lic. Psych.  
Ken MacDonald  
John Webber  
Michael Hewitt  
Melissa McCowell  
Peter Carlone  
Reza Saeedi

## GREEN THUMB THEATRE:

Artistic Director  
General Manager  
Production & Facilities Manager  
Development & Outreach Manager  
Tour & Company Manager  
Sales & Tour Coordinator  
Education Liaison  
Accountant

Rachel Aberle  
Breanne Harmon  
Madelaine Walker  
Georgia Beaty  
Miku Beer  
Anna Garoucheva Gonzalez  
Aliya Griffin  
Susan Cai

As a touring company, Green Thumb Theatre's work often takes place throughout the traditional homelands of most of the Indigenous Nations and cultures across British Columbia and beyond. Green Thumb's offices are located on the traditional, ancestral, and unceded territory of the *xʷməθkʷəy̓əm* (Musqueam), *Skwxwú7mesh* (Squamish) and *səlilwətaʔ* (Tsleil-Waututh) People.

Anxiety BC (now Anxiety Canada) reviewed and approved this study guide content relating to anxiety.  
[www.anxietycanada.com](http://www.anxietycanada.com)

Green Thumb Theatre is a member of the Professional Association of Canadian Theatres and engages, under the terms of the Canadian Theatre Agreement, professional Artists who are members of the Canadian Actors' Equity Association.

Production photos of Lisa Baran by Sarah Race Photography

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# ABOUT ANXIETY AND DEPRESSION



**Anxiety affects our thoughts, body, and behaviours. It is:**

- Our body's reaction to perceived danger or important events
- Something that everyone experiences from time to time

**Too much anxiety can:**

- Prevent you from engaging in age-appropriate activities
- Prevent you from meeting expected developmental milestones

**Common examples of interference and disruption include:**

- Academic failure
- Keeping isolated or failure to join in and make friends
- Refusal to go on school field trips
- Resisting participating in new activities or trying new things
- School refusal

*"It started as anxiety, it moved to full depression... I started to disengage from friends, family, society in general..."*

<http://www.cbc.ca/news/canada/british-columbia/age-of-anxiety-panel-1.3255344>

Depression is a mood disorder that causes a persistent feeling of sadness and loss of interest. Also called major depressive disorder or clinical depression, it affects how you feel, think and behave and can lead to a variety of emotional and physical symptoms. Just like anxiety, some sadness or occasional feelings of being depressed is normal. Feeling depressed once in a while does not mean that you have major depression.

Self-injury or self-harm, is the deliberate and direct harm of one's body tissue without suicidal ideation, in an attempt to cope.

# SYNOPSIS

What do you do when you have a great life – wonderful family, good marks, and awesome friends – but getting up and facing each day feels like a battle? Green Thumb’s award-winning hit show offers a realistic, honest, and bitingly funny look at the difference between ‘teen angst’ and mental illness. Reimagined for a digital format in the style of a confessional online video, **STILL/FALLING** is performed by a single actor portraying Nina or Nick as they find themselves slipping into a dark reality they cannot understand, and as they search for a light to lead them out of the dark. In the wake of a pandemic and rising levels of depression and anxiety in young people, **STILL/FALLING** is a timely and important conversation starter.



## CONTENT ADVISORY

The content of this play may prove to be an intense experience for some viewers. The main character’s portrayal is an honest, open and candid representation of a teen with anxiety, depression and displaying non-suicidal self-harm. It is advised that all Teachers, School Counsellors, School Psychologists and Administration be informed about the nature of this play, and be aware that some scenes may be emotionally triggering to some students. It is advised that students should be made aware of the play’s themes prior to viewing.

The pre and post performance discussion questions and exercises will be valuable to support students’ immediate and long-term well being and self-care. It is strongly recommended that Teachers allot some class time for the students to discuss the themes and topics of the play after viewing, either informally, or formally with the exercises and activities provided in this guide.

Schools should be ready to deal with various reactions and questions from the students. It is our hope that this play will encourage youth in crisis to reach out for help, and therefore Teachers, Counsellors and in-school Mental Health Teams should be prepared to debrief and deal with possible disclosures from at-risk students in the days and weeks following the performance.

## WHY THIS PLAY?

Green Thumb Theatre chose to produce **STILL/FALLING** to encourage conversation and awareness, and to help students gain a deeper understanding of an increasingly common experience of high anxiety, depression, or a combination of both in themselves and their peers. Green Thumb Theatre creates and produces plays that explore social issues relevant to the lives of children, youth and young adults. We provide theatre that celebrates the language and stories of today’s generation and culture to stimulate empathy, debate and critical thinking. As with all of our plays, we challenge our audiences to re-examine their beliefs and prejudices and to define their feelings and aspirations.

# HOW TO USE THIS GUIDE

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Green Thumb recognizes how important discussions around mental health are in order to destigmatize mental illness and engage youth in conversations about their own mental health and selfcare. Green Thumb also recognizes and values the role that teachers play in positively influencing youth development, and how they can be front line supporters to youth who may be struggling with mental health concerns.

To create this educational guide, mental health professionals and teachers were consulted and information from websites providing current, credible and respected mental health and educational peer-reviewed research was used. Subject areas are explored that may inspire viewers, while furthering knowledge and facilitating dialogue about mental health after watching the production of **STILL/FALLING**.

The British Columbia Ministry of Education curriculum was analyzed to ensure the following exercises could be utilized to address Grade 8-12 Core Competencies/Content in the area of Planning, Arts Education – Visual Arts, English Language Arts – Creative Writing, Communications – Media Arts, Health Leadership, and Physical and Health Education. British Columbia's curriculum has been redesigned to respond to the demanding world students are entering. As well as Essential Learning, Literacy and Numeracy Foundations, the Ministry of Education has identified Communication, Thinking, plus Personal and Social competencies students will need to develop for successes in the future. **STILL /FALLING** specifically addresses these by offering opportunities to:

- Analyze strategies for promoting mental well-being, for self and others.
- Assess and evaluate strategies for managing problems related to mental well-being and substance use, for self and others.
- Create and evaluate strategies for managing physical, emotional, and social changes during puberty and adolescence.
- Take creative risks to experience and express thoughts, emotions, ideas, and meaning.
- Construct meaningful personal connections between self, text, (and) world.
- Understand and care about themselves and others, and to find and achieve their purposes in the world.
- Assess how prevailing conditions and the actions of individuals and groups affect events, decisions and developments (cause and consequence).

<https://curriculum.gov.bc.ca/competencies>

**Cathryn McPhee**, MEd in Health Education and Active Living  
Study Guide Author

# ABOUT THE PLAYWRIGHT

## **RACHEL ABERLE**



A graduate of Studio 58, Rachel is a playwright, director, performer and the Artistic Director of Green Thumb Theatre. As a performer she has appeared with companies including The Arts Club, The Vancouver Playhouse, Chemainus Theatre Festival, Caravan Farm Theatre, Prairie Theatre Exchange, Royal Manitoba Theatre Centre, and she toured The Firehall Arts Centre's hit show **CHELSEA HOTEL: THE SONGS OF LEONARD COHEN** across Canada for over four years. Her debut script **STILL/FALLING** (Green Thumb Theatre) has played to audiences across North America, and received the Jessie Richardson Theatre Award for Significant Artistic Achievement. Her second play **THE CODE** (Green Thumb Theatre) was recognized with a Jessie Award for Outstanding Production, the Sydney J. Risk Prize for Outstanding Original Script by an Emerging Writer, and was included on Tapeworthy's Best of Stage 2018 – selected out of almost 200 shows worldwide. Directing credits include Green Thumb's 2017 revival of **NOT SO DUMB**, and most recent tour of **CELESTIAL BEING**, and **I KNOW WHAT I SAW** at Studio 58's professional theatre training program. Rachel was selected for the 2017 Playwrights Lab at the Banff Centre and was one of only 15 international artists selected for the ASSITEJ Next Generation Program at the 2018 ASSITEJ Artistic Gathering in Beijing.

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*“Be patient with yourself.”* RACHEL ABERLE

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# A NOTE FROM THE PLAYWRIGHT

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Being a teenager is hard. Your body is changing, your hormones are all over the map – and this affects your mood. It can make what could seem like a small crisis to someone else seem like the end of the world to you. It can make you angry. It can make you sad. It can make you anxious.

These are all statements that are true to a degree, and all statements I heard a number of times when I was a teenager. I heard some version of these statements from my parents, from my teachers. My friends and I repeated these phrases to each other as well in times of stress. I repeated these phrases to myself, increasingly, as my mood went from bad to worse over my grade 12 year. I blamed my age bracket for my increasing anxiety and sadness, trying to chalk up the emotional turmoil I was dealing with to being a typical teenage phase.

By the time I received help, I was at a point of crisis. It took me a long time to ask for help with my mental health, and even longer for people to really hear me when I asked. Conversations around mental health were nowhere near as common as they are today. People – including myself – were much quicker to jump to the narrative of a typical teenage fluctuation in hormones than to dig deeper and question whether what was happening to me might require more attention and more targeted help.

My intent in creating this piece was to normalize conversations around mental health, and to offer avenues for youth and young adults to connect with one another on these topics, and encourage conversation with the adults in their lives as well. I hope that teenagers who see **STILL/FALLING** will take away that drowning in emotional distress is NOT what a normal teenage experience has to look like, and that they will learn to ask for help early and often if they are feeling overwhelmed. I hope too that both the students and educators who see **STILL/FALLING** will begin to look out for the kinds of signposts that can be indicators of mental illness. As we begin to acknowledge how common mental illness is, I hope that as a community we can begin to look out for each other, and create positive space for people who are struggling.

And to anyone out there who sees this play who is suffering; who has reached, or is close to reaching a point of crisis, I hope this play can let them know that they are not alone. Ask for the help you need – it is out there, and it does make a difference. And as you embark on a path towards recovery, be patient with yourself. Be patient, and be kind.

**Rachel Aberle**

# TERMINOLOGY RELATED TO THE PLAY

**ANXIETY** – Anxiety is part of our internal warning system; it is the fear or worry and physical changes in our body that we feel when we feel something bad might be about to happen. Everyone feels anxious at times, but too much anxiety can interfere with school, work, home-life and relationships.

**ANXIETY PROBLEM** – Anxiety is normal, and we all experience it. But anxiety can become a problem when it becomes intense and continual interfering with your daily life at home, school, and/or at work over a longer period. Anxiety attacks can take many different forms; two of the most common forms are social anxiety and panic disorder. Anxiety disorders are very treatable.

**COUNSELLING OR THERAPY** – It's useful to talk to someone about any problem - some people find that simply talking with friends or family can help them feel better. A mental health professional can offer more: they have training, experience, and emotional distance (since they don't know you). They use different theories to listen to you and support you, and they have expertise to approach different problems or patterns to manage your distress.

**DEPRESSION** – Feeling sad or low from time to time is a part of life, but a persistent low mood could be a sign of depression. For some people, depression makes them irritable or causes them to act out against others. Depression, often characterized by negative or critical thoughts towards self or others, becomes a problem when those feelings don't go away, as well as if they intensify or begin to interfere with school, work, family and friends, in your daily life. Depression is also a treatable problem. Sometimes people who develop depression may also have a history of anxiety. There is no evidence one disorder causes the other, but there is clear evidence that many people suffer from both disorders.

**MENTAL HEALTH** – Mental health is defined as a state of well-being in which every individual realizes their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community.

**MENTAL ILLNESS** – Mental illnesses can take many forms, just as physical illnesses do. Mental illnesses are characterized by alterations in thinking, mood or behaviour associated with significant distress and impaired functioning.

**PANIC ATTACK** – A sudden rush of intense fear or discomfort, which includes at least 4 of the following symptoms: racing or pounding heart, sweating, shaking or trembling, shortness of breath or feelings of being smothered, feeling of choking, chest pain or discomfort, chills or hot flashes, nausea or upset stomach, dizziness or lightheadedness, a sense of things being unreal or feeling detached from oneself, numbness or tingling sensations, fear of losing control, and fear of dying. Panic attacks tend to start quickly and reach a peak within 10 minutes. The peak generally lasts for about 5 to 10 minutes before the symptoms start to settle; however, it can take quite some time for all the symptoms to subside.

**PANIC DISORDER** – People with panic issues experience unexpected and repeated panic attacks. They can become terrified that they may have more attacks and fear that something bad will happen because of the panic attack (such as losing control or dying).

**SELF-CARE** – Any intentional actions you take to care for your physical, mental and emotional health.

**SELF-HARM / INJURY** – Self-injury means that someone hurts themselves on purpose but doesn't intend to end their life. Common acts of self-injury include cutting skin and burning skin. Self-injury itself isn't a mental illness, but may be a sign that someone needs care and support. People who self-injure are not trying to end their lives, but they can experience those thoughts. When they self injure, they are trying to cope with difficult or overwhelming thoughts or feelings.

**SOCIAL INCLUSION** – This means feeling you belong, are valued and respected and able to take part in your community and benefit equally from what your community has to offer.

**STIGMA** – A set of negative and often unfair beliefs that a society or group of people have about something and the shame that a person carries as a result of being associated with it. There is a lot of unnecessary stigma around mental health, which prevents people from seeking help.

**STRESS** – A state of mental or emotional strain or tension resulting from adverse or very demanding circumstances; a state of mental, emotional or physical strain when the demands placed on you are more than you can cope with. Stressful events (or events that lead to stress) can be either positive - such as graduating and going to university, or negative - such as an illness in the family or feeling overwhelmed by homework and exams.

**SUICIDE** – The deliberate taking of one's own life is the second leading cause of death among young people in Canada. Suicide and motor vehicle accidents account for almost sixty percent of youth deaths. This figure is not just relevant in Canada – globally, suicide is among the top three causes of death among young people (aged 15 to 34). Suicide itself is not a mental illness, but results when a person feels like their life is unbearable.

**SUICIDE IDEATION** – Having thoughts about how to kill oneself, which can range from a detailed plan to a fleeting consideration and does not include the final act of killing oneself. The majority of people who experience suicide ideation do not carry it through.

**Sources:**

<http://www.anxietycanada.com/learn-about-anxiety/anxiety-in-youth/>

<https://www.porticonetwork.ca>

<http://www.heretohelp.bc.ca/ask-us/whats-the-difference-between-psychotherapy-and-counselling#sthash.DN9KKRGO.dpuf>

# PRE-PERFORMANCE DISCUSSION



1. How do you define mental illness?
2. When you picture someone who's mentally ill, what do you see?
3. What things at school or home are sources of stress/pressure?
4. Brainstorm some of the pressures of being a teenager.
5. How do students typically cope with these stresses?
6. Do you know of anyone who has experienced mental illness?

### **Suggested pre-performance videos:**

1. Millie – Most likely to panic (1 min. 19 sec.)  
<https://www.youtube.com/watch?v=VRKcDAOILI4>
2. The Science of Depression (3 min. 45 sec.)  
<https://www.youtube.com/watch?v=GOKItKFFIQI>
3. Mental Health Awareness (5 min. 15 sec.)  
[https://www.youtube.com/watch?v=\\_OzWt8zZ0rw](https://www.youtube.com/watch?v=_OzWt8zZ0rw)

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*"It's only a period which will pass and I'll help you get out of it."*

<http://depressionteenshelp.com/teenagers-and-depression/>

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## WHAT TO CONSIDER WHILE WATCHING

1. Is this portrayal reinforcing the myths about mental illnesses, or does it address these myths or highlight a new way of understanding mental health?
2. What is the difference between feeling blue and being depressed?
3. How would you want to be treated if you developed or were struggling with your mental health?
4. What does this mean to you: 'There is no health without mental health.'

## POST-PERFORMANCE QUESTIONS

1. What kinds of support did Nina seek out for her mental health problems, if any?
2. What do you think would have happened if Nina had let her parents or her friends know earlier how she was feeling and what she was experiencing?
3. How did Nina's family/friends respond to her mental health problems? Were they helpful?
4. What if you were Nina's friend and she told you what was going on and how she was feeling, how would you respond?
5. Is anxiety a sign of weakness? Is Depression? Define Courage.



# ACTIVITIES AND EXERCISES

## ACTIVITY: MENTAL ILLNESS - TRUE OR FALSE

Below are some common statements about mental illness and suicide. Read them aloud to your students and have them identify if they are True or False.

### **Mental illnesses aren't real illnesses.**

**FALSE** – Mental illnesses create distress, don't go away on their own, and are real health problems with effective treatments. When someone breaks their arm, we wouldn't expect them to just "get over it." Nor would we blame them if they needed a cast, sling, or other help in their daily life while they recovered.

### **Mental illnesses don't affect very many people.**

**FALSE** – All of us will be affected by mental illnesses. Researchers estimate that as many as one in five Canadians will experience a mental illness at some point in their life. You may not experience a mental illness yourself, but it's very likely that a family member, friend, or co-worker will experience challenges.

### **Telling yourself to "relax" is a very effective way to deal with anxiety.**

**FALSE** – When you struggle with anxiety, it's not as simple as just telling yourself to "relax." Most people have to learn some new coping strategies to help them better deal with anxiety. The good news is that there is help available.

### **If you have a mental illness you will never recover.**

**FALSE** – People can and do recover from mental illnesses. Today, there are many different kinds of treatments, services, and supports that can help. No one should expect to feel unwell forever. The fact is, people who experience mental illnesses can and do lead productive, engaged lives.

### **Half of all lifetime cases of mental illness begin by age 14.**

**TRUE** – Mental health illnesses are the most prevalent of all health issues amongst children, adolescents, and young adults, and are much more likely to disrupt young people's lives than physical ailments. Early identification and linking young people with resources to strengthen their mental health is key to reducing the burden of mental illnesses. Like any health issue, we are better equipped if we are able to recognize the signs and symptoms early. Early recognition and appropriate help seeking can happen only if young people know about the early changes that may indicate a mental health issue, the types of help available and how to access this help.

### **Only 'emos' self-harm, it's part of modern-day youth culture.**

**FALSE** – There's no such thing as a typical person who self-harms. It can affect anyone of any age, background or race, and regardless of whether they are an extrovert or an introvert. People who have had traumatic childhood experiences, or people struggling with issues of identity (eg. sexual orientation or gender) may use self-harm as a means to cope and manage their painful emotions.

**People who experience mental illnesses are weak and can't handle stress.**

**FALSE** – Stress impacts well-being, but this is true for everyone. Sometimes people who have experienced mental illnesses may gain tools that actually aid them with managing stress. Many people who experience mental illnesses learn skills like stress management and problem-solving so they can take care of stress before it affects their well-being. Taking care of yourself and asking for help when you need it are signs of strength, not weakness.

**Anxiety problems are common.**

**TRUE** – Anxiety problems are the most common mental health problem. In fact, approximately 1 in 4 teens will experience some type of problem with anxiety at some point. If you struggle with anxiety, you are not alone!

**Kids can't have mental health issues like depression**

**FALSE** – Even children can experience mental health challenges. In fact, many mental health challenges first appear when a person is young. Mental health challenges may look different in children than in adults, but they are a real concern. Mental health challenges can impact the way young people learn and build skills, which can lead to challenges in the future. Unfortunately, many children don't receive the help they need.

**People who attempt suicide are just looking for attention.**

**FALSE** – A suicide attempt is often the critical event that leads a deeply distressed person to a first contact with a helping professional such as a physician, psychologist, or school counsellor. An attempt at suicide is a desperate cry for help when dealing with unbearable pain – this is not an action – that should be classified as attention seeking behaviour.

**Talking to someone about whether or not they are suicidal will make their suicidal symptoms worse.**

**FALSE** – Asking someone if they have thoughts of suicide will **NOT** put the idea in their head if they are not suicidal. If they are having suicidal thoughts, knowing that you are concerned enough about them to ask may give them the courage to ask for help.

**Sources:**

[https://www.cmha.ca/mental\\_health/myths-about-mental-illness/#.Vg7jr0udBuY](https://www.cmha.ca/mental_health/myths-about-mental-illness/#.Vg7jr0udBuY)  
<http://teenmentalhealth.org/learn/suicide/>

## ACTIVITY: WIPE OUT STIGMA

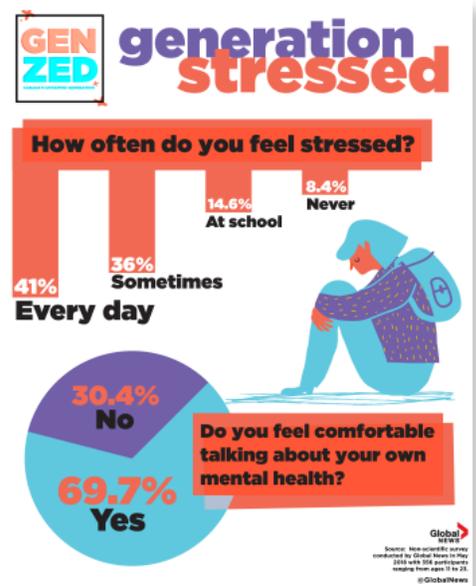
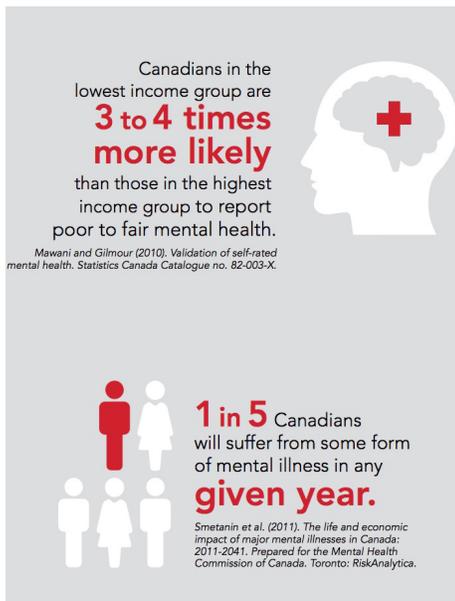
It is well recognized that teens and young adults resist seeking help due in part to misinformation and stigma attached to mental illness. In this activity, have students research anxiety disorders and depression, and then identify and dispel the myths still attached to these mental illnesses.

*Create public awareness posters/graphics that debunk common myths about mental illness.*

### MATERIALS:

- Markers, poster board, magazines, scissors
- Computer with Internet access/Smart phones

Help students in your school understand depression and anxiety by getting together in small groups to create an eye-catching poster/graphic that tackles one of the myths discussed in class. To get information to back up the statements made on your poster, use the websites listed on the student resources pages (24-25) to research mental illness facts in terms of how common it is, what outcomes can come from seeking help early and the importance of creating a safe community where mental illness is not stigmatized.



ACTIVITY: KNOW YOUR RIGHTS / MAKE YOUR RIGHTS

Create a Student Bill of Rights

The 1960 Canadian Bill of Rights and Freedoms was this country's first federal law to protect human rights and fundamental freedom. Considered ground-breaking at the time, it was eventually superseded by the 1982 Canadian Charter of Rights and Freedoms. Section 15 - Equality Rights of the Charter, makes it clear that every individual in Canada - regardless of race, religion, national or ethnic origin, colour, sex, age, or physical or mental disability - is to be considered equal. This means that governments must not discriminate on any of these grounds in its laws or programs.

Guide to the Canadian Charter of Rights and Freedoms:

http://www.canada.ca/en/canadian-heritage-services/download-order-charter-bill.html

With this Charter in mind, research and create a "Student Bill of Rights" for your school, making sure to include mental health. Brainstorm ideas on how to educate and promote tolerance, understanding and acceptance in your school. Research has identified social inclusion to be one of the strongest determinants of mental health. How can you ensure basic rights are afforded to all students in your school community?

A sample of the Canadian Mental Health Association's Client Bill of Rights can be seen at:

http://camh.ca/en/your-care/your-rights/bill-of-client-rights

Canadian Charter of Rights and Freedoms document page with various sections like Democratic Rights, Mobility Rights, Equality Rights, Official Languages of Canada, Minority Language Educational Rights, and Citation.

## EXERCISE: TAKE CHARGE: TAKING CARE OF YOURSELF

Using the resources at the end of this guide and the self-care guidelines on the next page, think about the following:

1. WHO? Who in your inner circle can you talk to and share how you are feeling? Who are some professional helpers you can talk to?
2. WHERE? What credible resources can you turn to?
3. WHAT? Self-Care – 3 things you can do to be good to yourself; positive ways that you can cope or de-stress when you are having a tough time.

### CLASSROOM DISCUSSION:

1. Ask the students to spend a few minutes thinking about possible answers to fill in the grid below. Then together with the whole group have students brainstorm options to all three columns.
2. Reflecting on Nina's situation, have the class brainstorm together possible solutions that Nina could have used earlier to help her understand her emotions and reach out for help.
3. Have each student prepare their own personal Take Charge Plan with resources, people and self-care activities. This would include individuals that they trust and feel would support them during times of increased stress.

<b>Who to go to for help –</b> Three people you can trust	<b>Where to go for help –</b> (credible resources)	<b>Self-care –</b> Three healthful things you can do to be good to yourself
1. Name of School Counsellor/ Teacher i.e.	1.	1.
2.	2.	2.
3.	3.	3.

Feel free to add more resources and supports to this list. Check out the Wellness Modules at Here to Help [www.heretohelp.bc.ca/wellness-modules](http://www.heretohelp.bc.ca/wellness-modules)

Remember, if self-care isn't working for you, and negative or anxious thoughts or emotions are starting to overwhelm you, the best way to cope with your feelings is to talk to someone.

# PREVENTION

Mental health is not just the absence of mental illness. Positive mental health involves emotional and psychological wellness, healthy self-esteem and relationships, and an ability to take control of actions and feelings on a daily basis. By being aware, we can take positive steps toward mental health when the balance is disrupted. There is no magic solution, but the key is to do small, regular, consistent activities.

## TIPS FOR CONTROLLING STRESS

**TALK ABOUT IT** - Sharing your troubles with a friend may help you to put things in perspective and to feel that you're not alone. You may also learn some other ways to manage stress effectively.

**HEALTHY DIET** - A good diet is often the first thing to go when we're feeling stressed. Making a meal instead of buying one ready-made may seem like a challenge, but it will be probably cheaper and certainly better for you and the simple action of doing something good for yourself can soothe stressful feelings.

**SLEEP** - Getting a good night's sleep can reduce stress levels. We know that over time your body will wear down with poor sleep habits. The average teenager requires 8 to 10 hours of sleep. The best practice is to shut off screens one hour before bedtime.

**VISUALIZATION** - Athletes achieve results by picturing themselves crossing the finish line first. Use the same technique to practice "seeing" yourself succeed in whatever situation is uppermost in your mind.  
<http://au.reachout.com/articles/how-to-challenge-negative-thoughts>

**EXERCISE** - You don't have to train for a marathon, but regular, moderate exercise helps ease tension, improves sleep and self-esteem. Making exercise a habit is key.

**ENJOY YOURSELF** - Taking the time for a favourite hobby is a great way of connecting with and nurturing your creative self.

**SET REALISTIC GOALS** - Learning to say no is essential for some people. Assess your schedule and identify tasks or activities that you can or should let go. Don't automatically volunteer to do something until you've considered whether it is feasible and healthy for you to do so.

**LEARN RELAXATION TECHNIQUES** - Practicing meditation or breathing awareness every day can relieve chronic stress and realign your outlook in a more positive way. Good breathing habits alone can improve both your psychological and physical well-being. Additional resources at  
<http://au.reachout.com/mental-fitness/chilling-out>  
<https://www.anxietycanada.com/articles/how-to-do-progressive-muscle-relaxation>

### VIDEO ON SELF-CARE AND COMPASSION (5 min. 13 sec.)

<https://vimeo.com/groups/126256/videos/118911442>

**SELF-HELP EXERCISES** <https://www.walkalong.ca/explore/self-help-exercises>

## **THINGS YOU CAN SAY TO A TEENAGER WITH ANXIETY OR DEPRESSION:**

- “No matter how bad things seem, I want you to know that I’m here for you.”
- “Even if all I can give you is a shoulder to cry on, I want you to know you can count on it.”
- “Depression and anxiety are illnesses. They can happen to anyone, and they’re nothing to be ashamed of.”
- “Asking for help doesn’t make you weak, and it doesn’t mean you’ve failed. It’s one of the bravest things a person can do, and you should be proud of yourself.”
- “I might not have any advice to give, but if you ever want to talk about what you’re feeling, I promise I will listen.”
- “I know everything feels really hard these days, so don’t be afraid to tell me what you need.”
- “Even though you don’t feel like yourself these days, I want you to know that to me, you’re still the same amazing person.”
- “I may not be able to completely understand what’s going on for you, because I haven’t experienced it myself, but I’m here for you all the same.”
- “I can’t tell you how long you’re going to feel this way, but I can tell you I plan on being here for you whenever you need me.”
- How can I help?”

## **THINGS TO AVOID SAYING TO A TEENAGER WITH ANXIETY OR DEPRESSION:**

- “Snap out of it! Go have fun!”
- “You know, a lot of people in the world have it way worse than you do.”
- “Stop pitying yourself so much.”
- “Just remember, what you’re feeling isn’t really real. It’s all in your head.”
- “You have to stop playing the victim all the time.”
- “I don’t get it, you don’t look sick.”
- “Just try to look on the bright side more.”
- “Get some rest and take some vitamins. That’s what I do when I’m stressed, and it always works.”
- “Come on, smile! Don’t look so blue!”
- “You just need to go on a date or meet someone.”
- “Whenever I feel down I have a hot bath, and I feel great again. Try that?”
- “You know, there are other ways to get attention.”

<http://depressionteenshelp.com/teenagers-and-depression/>

## ACTIVITY: A NOTE FROM A FRIEND

### Responding to a Friend in Need

I've been trying to figure out how to tell you, but it's embarrassing, so I keep putting it off. I started hurting myself again a few weeks ago. It makes me feel so ashamed and like there's something wrong with me... I don't know why I do it. It's like I want to scream, but I don't want people to think I'm a freak, so instead I just do this because it's like it can just be my secret, you know? I don't want to do this anymore, but I don't know how to stop. Can we talk? All I know for sure is that something has to change.

When somebody has the courage to tell you that they self-harm it is incredibly important to show them that you take them seriously, regardless of how severe, or not, the injury is. Your reaction may have a tremendous impact on them. Being available, whenever possible, to talk to a friend who self-harms can make all the difference, as feelings of isolation are often part of the problem. Let the person self-harming know that self-harm is very common and that individuals who do it are by no means alone.

***In pairs, look at "A Note from a Friend". Consider what response you would give to this person as a friend.***

- What can you do that is helpful?
- What do you think would not be helpful?

Make sure that your friend knows who they can go to for expert help. Encourage your friend to seek help. If they are reluctant to tell other people, it's important to acknowledge that you aren't able to help them all on your own. If your friend is under 18 years old, help should be from a trusted adult or mental health professional.

Using the list of resources on pages **24 & 25**, find 3 websites/phone numbers that provide useful/helpful information that you can share with your friend so they realize they are not alone, and there is help for them.

Be sure to take care of your own emotional well-being. Supporting a friend who self-injures can be difficult, so make sure that you also have some good supports in place and that your friend who self-injures knows who you may be talking to (e.g. do not gossip or talk to other peers about your friend's self-injury without his/her permission). You may want to talk to a mental health professional.

## FOR TEACHERS: A NOTE FROM A FRIEND

### Responding to a Friend in Need

After the student pairs have completed “A Note from a Friend” exercise, provide an opportunity to discuss their responses and ensure the following feedback is highlighted:

- DO NOT tell the person what to do – allow them to have control over what they want to happen.
- DO NOT tell them to stop. Although this seems counter intuitive, it is very difficult and takes time and support to stop – the person will need to find other safer ways of coping first.
- DO offer to support them in seeking help if that is what they want.
- DO continue to be their friend.
- Seek help for yourself if you need support.
- Offer to listen to them and give them time and space to talk.
- Offer to help if they need it.

**Do not allow students to share detailed information regarding self-harming.** When educating youth about self-harming behavior, it is most important to stress that self-injurious behavior is serving some function and helping someone cope in some way. It is a coping strategy among several others (such as substance abuse, disordered eating, or risk-taking). Educating students about the signs of distress in themselves and others, as well as teaching the use of positive coping skills, is appropriate and encouraged.

As a follow up exercise, have each student brainstorm things that they do when they are feeling low that help them feel better, then meet as a group and list each students’ activities on a whiteboard for all students to see.

Additional educational supports for teachers can be found at:

<http://www.cmha.ca/documents/youth-and-self-injury>  
<http://www.heretohelp.bc.ca/infosheet/self-harm>  
<https://www.anxietycanada.com/resources/educator-resources>  
<https://capmh.biomedcentral.com/articles/10.1186/1753-2000-6-13>

***When talking about the subject of self-harm it is important to acknowledge that this could be a trigger for young people who are currently self-harming or have self-harmed in the past. Be aware of any students that may be affected and make sure support is outlined and highlighted.***

#### Sources:

<http://www.samaritans.org/how-we-can-help/schools/deal/deal-resources/dealing-feelings/self-harm-myths-and-facts/>  
<http://sioutreach.org/learn-self-injury/>

## **ACTIVITY:**

### **CHANNELING EMOTION: MAKING POEMS OUT OF FEELINGS**

Writing poems can be a cathartic emotional release and through a writing process students may tap into their emotions and express them in powerful, beneficial ways. Often times the writer may be unintentionally burying such feelings, and through this suggested activity students may become more open to the idea of poetry.

Have students reread 'Normal Girl', one of Nina's poems in the play, as an example of how poetry can illustrate emotion. Then have students write their own emotion-based poem, using some of the writing strategies found below.

**Normal girl**  
**Normal heart**  
**Normal brain**  
**Then it starts**  
**A creeping feeling: sorrow, dread**  
**A tiny voice inside my head**  
**Stay inside, keep out of sight**  
**Something in you isn't right**  
**Darkness in you, black as night**  
**Ugly, shameful, full of spite**  
**Frightened girl**  
**Jagged heart**  
**Crooked mind**  
**Tears you apart**  
**Horrid girl**  
**Broken brain**  
**Ugly heart**  
**Am I insane?**

**(Rachel Aberle - Still/Falling)**

#### **Make a list of emotions that you noticed within the play.**

- Choose one of the emotions, and, without naming the emotion, describe in detail, using concrete images, and think of a specific time when you may have experienced that emotion. "What happened? What did it look like? Sound like? Taste like?"
- How does this emotion help people?
- How does it hurt people? Or hurt you?
- Personify this emotion. If it were a person, what would it do?
- Incorporate a simile or a metaphor to further gain understanding of the emotion.

# RESOURCES

## WEBSITES FOR YOUTH

**ANXIETY CANADA** – <http://www.anxietycanada.com>

**CANADIAN MENTAL HEALTH ASSOCIATION** – <http://www.cmha.ca>

**EARLY PSYCHOSIS INTERVENTION (EPI)** – <https://www.earlypsychosis.ca>

**FOUNDRY** – <http://www.foundrybc.ca>

**HEADS UP GUYS** – <https://headsupguys.org/>

**HEALTHY PLACE** – <http://www.healthyplace.com>

**HELPGUIDE.ORG** – <http://www.helpguide.org>

**HERE TO HELP** – <http://www.heretohelp.bc.ca>

**HERE TO HELP** – <http://www.heretohelp.bc.ca/plainer-language-series>

**JACK.ORG** – <https://jack.org>

**KELTY MENTAL HEALTH** – <http://keltymentalhealth.ca>

**KELTY MENTAL HEALTH PODCAST** – <https://keltymentalhealth.ca/podcast>

**MIND YOUR MIND** – <http://mindyourmind.ca>

**MINDFULNESS FOR TEENS** – <http://mindfulnessforteens.com>

**REACHING IN...REACHING OUT** – <http://www.reachinginreachingout.com>

**REACH OUT. COM** – <http://au.reachout.com>

**SELF-INJURY OUTREACH AND SUPPORT** – <http://sioutreach.org>

**TEEN MENTAL HEALTH** – <http://teenmentalhealth.org>

**TEENS HEALTH** – [http://kidshealth.org/teen/your\\_mind/](http://kidshealth.org/teen/your_mind/)

**UBC MEN'S HEALTH RESEARCH PROGRAM** – <https://menshealthresearch.ubc.ca/resources/>

**WALK ALONG** – <https://www.walkalong.ca>

**YOUTH IN BC** – <http://youthinbc.com>

**YOUTH BEYOND BLUE** – <https://www.youthbeyondblue.com>

**THE CANADIAN ASSOCIATION FOR SUICIDE PREVENTION – CRISIS CENTRES ACROSS CANADA**  
<https://suicideprevention.ca/resources/>

**KIDS HELP PHONE – 1-800-668-6868** **If you think someone's life is in danger, call 9-1-1.**

## **WELLNESS APPS**

*Available from the App Store and Google Play for free*

**BOOSTERBUDDY** – A free app designed to help teens and young adults improve their mental health.

**BREATHE2RELAX** – Breathe2Relax is a portable stress management tool which provides detailed information on the effects of stress on the body and instructions and practice exercises to help users learn the stress management skill called diaphragmatic breathing.

**CALM** – Calm is a meditation, sleep and relaxation app. Calm creates unique audio content that strengthens mental fitness and tackles some of the biggest mental health challenges of today: stress, anxiety, insomnia, and depression.

**GUIDED MIND** – Relax and get guided through meditations on a variety of topics dealing with the stresses and challenges of day-to-day life.

**iChill** – iChill helps with stress management by guiding the user in the use of the Community Resiliency Model, a set of wellness skills.

**MINDSHIFT CBT** – MindShift CBT is a free anxiety management app, developed by Anxiety Canada.

**MIND YOUR MOOD** – Co-created with youth and MindYourMind, this is an easy-to-use app that allows youth and young adults to track their moods securely on their phone.

**THINKFULL** – For iPhones only and aimed at older youth and young adults

## **WEBSITES FOR TEACHERS**

**CENTRE FOR MENTAL HEALTH IN SCHOOLS** – <http://smhp.psych.ucla.edu>

**HEALTHY SCHOOLS BC** – <http://www.healthyschoolsbc.ca>

**KELTY MENTAL HEALTH** – <http://keltymentalhealth.ca/school-professionals>

**NASP (NATIONAL ASSOCIATION OF SCHOOL PSYCHOLOGISTS)** – <http://www.nasponline.org>

**SELF INJURY OUTREACH AND SUPPORT FOR SCHOOL PROFESSIONALS** –  
<http://sioutreach.org/learn-self-injury/school-professionals/>

**TEEN MENTAL HEALTH FOR EDUCATORS** – <http://teenmentalhealth.org/care/educators/>

## **PODCASTS FOR PARENTS**

**WHERE YOU ARE** – <https://keltymentalhealth.ca/podcast>  
**#OURANXIETYSTORIES: THE ANXIETY CANADA PODCAST** –  
<https://www.anxietycanada.com/ouranxiestories>

# SHARE YOUR THOUGHTS AND OPINIONS!

We love getting mail and your students' feedback!

## GREEN THUMB THEATRE:

**Mailing address:** 5522 McKinnon Street, Vancouver, BC, V5R 0B6

**Email:** info@greenthumb.bc.ca

**Phone:** 604-254-4055

**Fax:** 604-251-7002

### Write a Letter!

Ask your students to write us a letter to share their thoughts and opinions on the performance of **STILL/FALLING**. Send it to us at Green Thumb!

### Write a Review!

Have your students write a theatre review about this performance of **STILL/FALLING**. Send it in to us at Green Thumb!

### A theatre review usually includes the following:

- A brief summary of the story.
- A comment on the quality of the play itself.
- A description of the costumes and set and a comment on whether these were interesting and appropriate.
- A comment on the actors' portrayal of the characters and on the director's skill at pulling the whole show together.

There are many examples of reviews in newspapers and online that you could use to introduce the concept and format of a theatre review. Take a look at "How to Write a Play Review" on Wiki How.

<http://www.wikihow.com/Write-a-Play-Review>

### CHECK US OUT ONLINE:

 @GREENTHUMBTHEATRE

 /GREENTHUMBTHEATRE

 @GR\_THUMBTHEATRE

 GREEN THUMB THEATRE

## #STILL/FALLING

[WWW.GREENTHUMB.BC.CA](http://WWW.GREENTHUMB.BC.CA)

# THANK YOU!

Thank you for taking the time to use and review the **STILL/FALLING** Study Guide as a resource to further enrich your students' experience watching the play.

Visit our website at <http://www.greenthumb.bc.ca/> and tell us what you thought about the play, your experience, and future play ideas. We welcome letters as well. You can also add our link to your classroom website to explore the site as an activity.

The materials contained within this study guide are provided for general information purposes only and do not constitute professional advice on the subject matter. The information provided is not intended to replace the specialized training and professional judgment of a health care, mental health, or school counselling professional. Every effort has been made to cite the owners of the copyrighted materials and to make due acknowledgment. If situations are identified where this has not been achieved, please notify Green Thumb Theatre so appropriate corrective action can be taken and appropriate credit given.



