An Evaluation of Mental Health First Aid Training in New York City

Mental illness affects an estimated one in five U.S. adults; however, estimates indicate that only half of U.S. adults with mental health illnesses seek treatment.\(^1\) Anxiety and depression are the two most prevalent mental illnesses in the U.S.\(^1\) ThriveNYC, a New York City-wide initiative to promote Mental Health for all New Yorkers, expanded Mental Health First Aid (MHFA), aiming to train 250,000 New Yorkers to understand mental health and support neighbors, friends, and family affected by mental health conditions, such as depression, anxiety, or substance misuse. Frontline New York City employees in particular were encouraged to take MHFA training as they are likely to regularly interact with individuals experiencing mental illness. During an 8-hour training session, MHFA provides information, teaches skills, and encourages participants to share their knowledge and skills. Following training, we surveyed participants trained between 2015 and 2018 to determine whether they told others about the training, shared the knowledge gained from the training, felt confident in the skills they learned, and used the training to help themselves and others, as well as to determine how and where participants applied knowledge gained through MHFA.

The COVID-19 pandemic is a shared traumatic experience that has disrupted life in our city and communities. There is a continued need in NYC for widespread mental health education and support programs like MHFA.

Most participants told others about Mental Health First Aid

- Nine out of ten participants (88%) told at least one person about MHFA training.
- A majority (87%) also shared knowledge gained from the training with others.

Participants used Mental Health First Aid training to help themselves or others

- Three quarters of participants indicated that they used their MHFA training to help themselves (79%) or others (76%) monthly, weekly, or daily.
- Participants most commonly used their training to help someone with depression (59%), anxiety (50%), general mental health (42%), substance misuse (26%), and suicide (24%).
- Participants most commonly used their training at work (51%), with friends (41%), and at home (30%).

<table>
<thead>
<tr>
<th>Help themselves</th>
<th>Never 21%</th>
<th>Monthly 29%</th>
<th>Weekly 23%</th>
<th>Daily 27%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Help others</td>
<td>Never 24%</td>
<td>Monthly 34%</td>
<td>Weekly 22%</td>
<td>Daily 20%</td>
</tr>
</tbody>
</table>

Data Source: Evaluation of Mental Health First Aid (MHFA) Training Survey, 2018
Participants felt confident in skills conferred by training

- Participants rated their confidence in the skills MHFA taught highly. These skills included: ability to recognize that someone may be dealing with a mental health problem or crisis, recognizing and correcting misconceptions about mental health challenges, and offering a distressed person basic information and reassurance; the median rating for each of these skills was four out of a possible five on a scale of strongly disagree to strongly agree.

Three quarters of participants were women and two thirds had a college degree

- The most common age range for participants was 25 to 44 (45%), followed by 45 to 60 (37%), 61 and older (11%), and 18 to 24 (6%).
- Most participants had at least a college degree or higher (68%); 27% had finished high school, 1% did not have a high school degree, and 4% did not specify.
- The most common self-reported racial or ethnic group among participants was Black (39%), followed by Latino/a (27%), White (20%), Asian (9%), Multiple Race (3%), Other Race (1%), and American Indian/Alaskan Native (0.5%).
- Seventy-five percent identified as women.
- Twenty-eight percent of participants lived in Brooklyn, 18% lived in Queens, 15% lived in the Bronx, 14% lived in Manhattan, 4% lived in Staten Island, and 21% did not report their borough of residence.
- Forty-two percent were affiliated with a city agency and 59% were affiliated with an organization other than a city agency, such as faith-based organizations, private businesses, and higher education institutions.

Definitions: Race/ethnicity: Race was defined as participants’ response to the question: “How would you describe your race? Select all that apply.” Participants who chose more than one race were coded as Multiple Race, according to the US Census guidelines. For the purpose of this publication, Latino/a includes persons of Hispanic or Latino/a origin, as identified by the survey question: “Are you of Hispanic origin or descent?” and regardless of reported race. Black, White, Asian, Multiple Race, Other Race, and American Indian/Alaska Native race categories exclude those who identified as Latino/a. “Other” gender: Participants were categorized as “other” gender if they selected one of the following responses to the question “how would you describe your gender?”: Transgender person, Non-binary person, N/A, prefer not to answer, other (please specify).

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