

*PREPARING THE ADULT MENTAL HEALTH WORKFORCE TO  
SUCCEED IN A TRANSFORMED SYSTEM OF CARE*

UNDERSTANDING MENTAL  
HEALTH CONDITIONS

Module II

NASMHPD/OTA Curriculum

Module Created by Huckshorn,

Putnam and Jorgenson

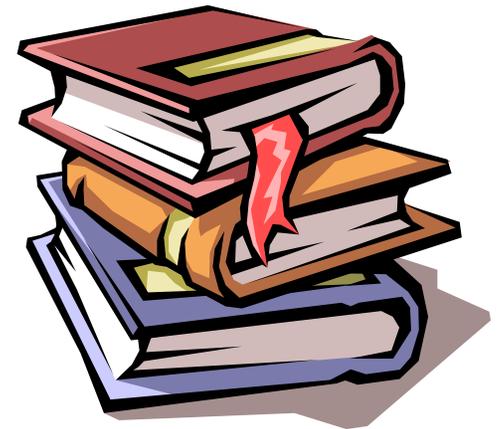
December 2008



# LEARNING OBJECTIVES

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- ✓ Define Mental Illness
- ✓ Outline the Primary Classification of Mental Illness
- ✓ Discuss Attitudes and Discrimination
- ✓ Describe Stress-Vulnerability



# Primary Definitions

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***Mental Illness (Condition):*** A disturbance in an individual's thinking, emotions, behaviors, and physiology

*(Keefe, 1998)*

***Mental Health:*** A state of well-being in which individuals function well in society and are generally satisfied with their lives. *(Keefe, 1998)*

# EMBRACING RECOVERY

*They said I would never get better.*

*I would always be mentally ill.*

*They said I would be in and out of mental hospitals  
the rest of my life.*

*I could never be the person I was before  
my mental illness.*

*I made up my mind in the hospital that I would  
prove them wrong.*

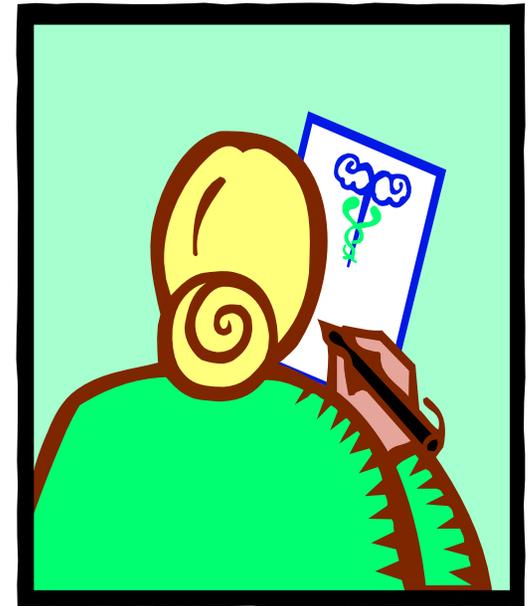
Andrea Schmook

# Primary Classifications of Serious Mental Conditions

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## Most common major disorders

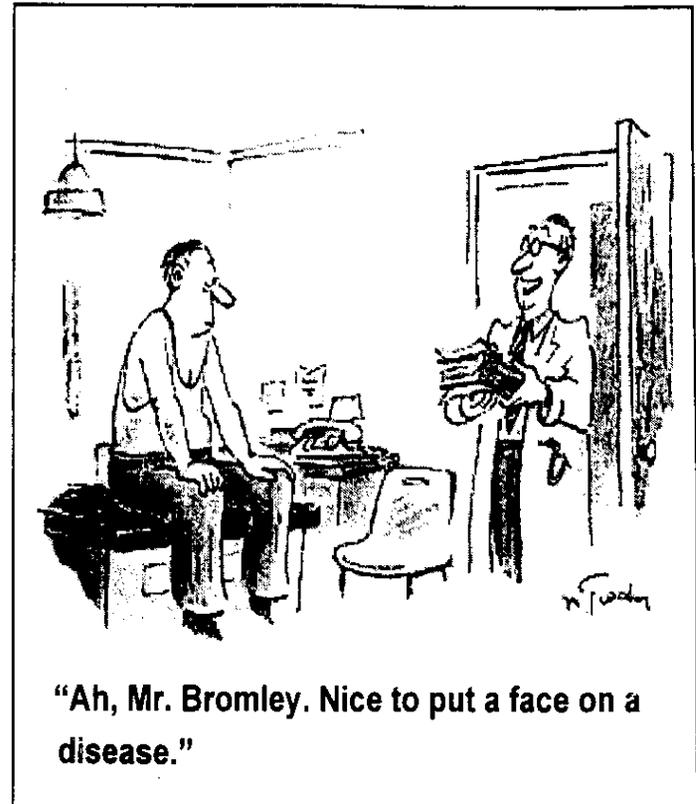
- ✓ Schizophrenia
- ✓ Bipolar Disorder
- ✓ Major Depression
- ✓ Post Traumatic Stress Disorder
- ✓ Borderline Personality Disorder



# Regardless of the Label ...

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- ✓ Respect
- ✓ Dignity
- ✓ Person First Language
- ✓ Individualized
- ✓ Person-Driven



# Schizophrenia

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Affects about 1 in every 100 persons

Occurs in every country, every culture, every racial group, and in every income level

Also known as a “thought disorder”

difficult to know what is real and what is not;  
can cause problems with motivation,  
concentration, and feeling joy.

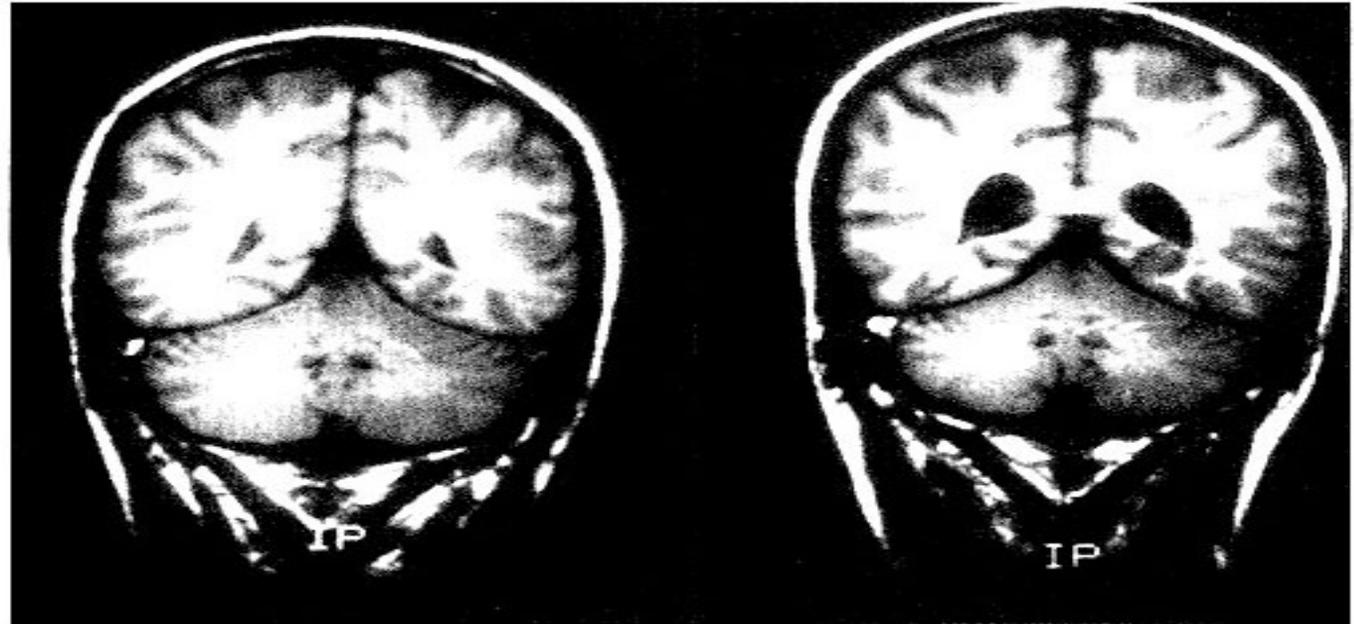
*(CMHS EBP Toolkits, 2003)*

# Schizophrenia

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This image is of 28-year-old identical twins, one with schizophrenia and the other well. It therefore clearly illustrates two points: (1) schizophrenia is a brain disease with measurable structural and functional abnormalities in the brain; and (2) it is not a purely genetic disease, and other biological factors play a role in its etiology.

## SCHIZOPHRENIA IN IDENTICAL TWINS



*Photo courtesy of Drs. E. Fuller Torrey and Daniel Weinberger.*

MRI scans of 28-year-old male identical twins showing the enlarged brain ventricles in the twin with schizophrenia (right) compared to his well brother (left).

28 year old  
Identical twins

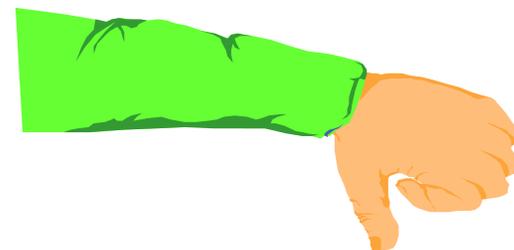
# Schizophrenia

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Schizophrenia is no one's *fault*.

**Old theories** -parenting,  
drug abuse, poverty,  
weak character-

**have been well researched and discarded**



Expert's believe in biological vulnerability,  
caused by the imbalance of chemicals

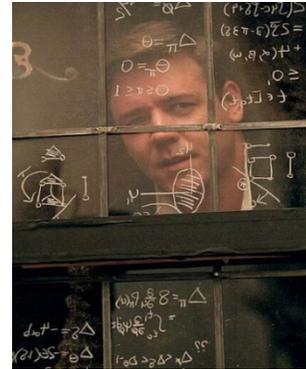
(neuro-transmitters) in the brain & environmental stressors

(CMHS EBP Toolkit, 2003)

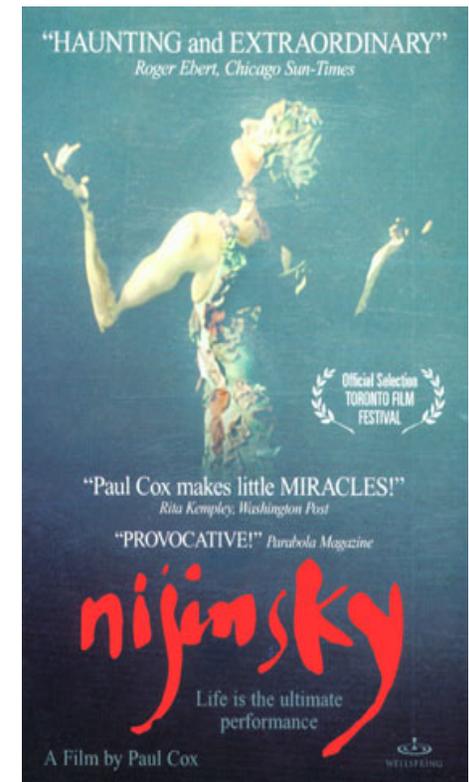
# Talented People with Schizophrenia in Recovery

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- ✓ John Nash
- ✓ Patricia Deegan, Ph.D.
- ✓ Vaslav Najinsky
- ✓ Fred Frese, Ph.D



**Patricia Deegan**  
Consultant to Advocates

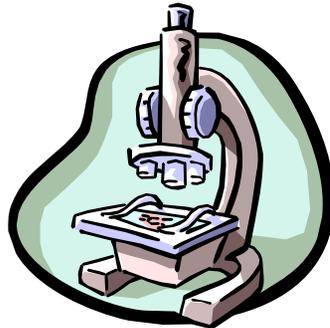


# Schizophrenia

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**Positive symptoms:** hallucinations, delusions, cognitive difficulties, a decline in social or occupational functioning, and becoming disorganized or even catatonic

*(CMHS EBP Toolkits, 2003)*



# Schizophrenia

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**Negative symptoms:** a lack of energy, motivation, pleasure, and/or being able to express emotions, and can be accompanied with feeling sad at times

*(CMHS EBP Toolkits, 2003)*



# Schizophrenia

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Hallucinations are *false perceptions*

*Hearing voices -- most common type*

*Seeing things - uncommon*

Delusions are strongly held *false beliefs*

- ▣ Individualized and real to the person.
- ▣ Thinking others are trying to hurt me,
- ▣ Having special powers, or
- ▣ Thinking someone else is controlling “my thoughts”

(CMHS EBP Toolkits, 2003)

# Schizophrenia

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Disordered cognitive symptoms

Declining social/job functioning

Disorganized behavior

Catatonia



*(CMHS EBP Toolkits, 2003)*

# Bipolar Disorder

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About 1 of every 100 persons

Also known as a “mood disorder”

Symptom “hallmarks” help clinicians diagnose

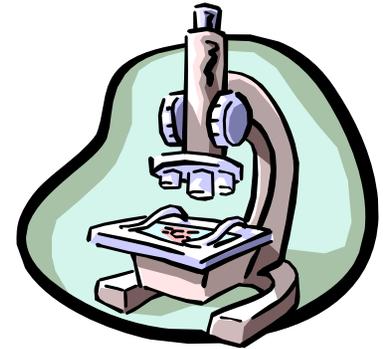


*(CMHS EBP Toolkits, 2003)*

# Bipolar Disorder

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Bipolar disorder...no one's fault.



Scientists believe symptoms are caused by a chemical imbalance in brain chemistry

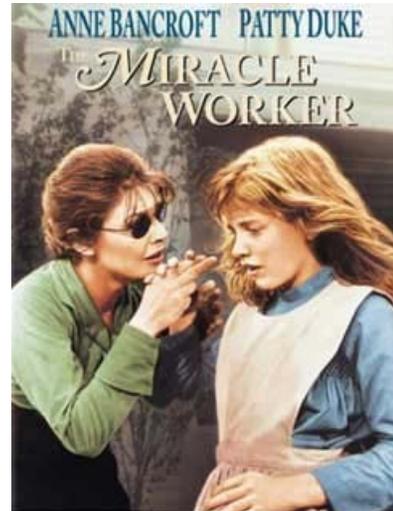
Symptoms typically emerge either in the teens or young adulthood, or later when people are in their late 30's or 40's (CMHS EBP Toolkits, 2003)

# Renowned People with Bipolar Disorder

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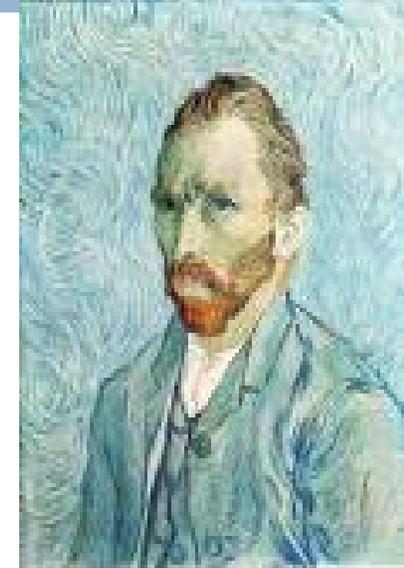
Patty Duke

Actress



Vincent van Gogh

Artist



Winston Churchill

Prime Minister



Vivian Leigh

Actress



# Bipolar Disorder

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Severe mood swings that range from “*severe depression*” to “*intense joy or elation*”

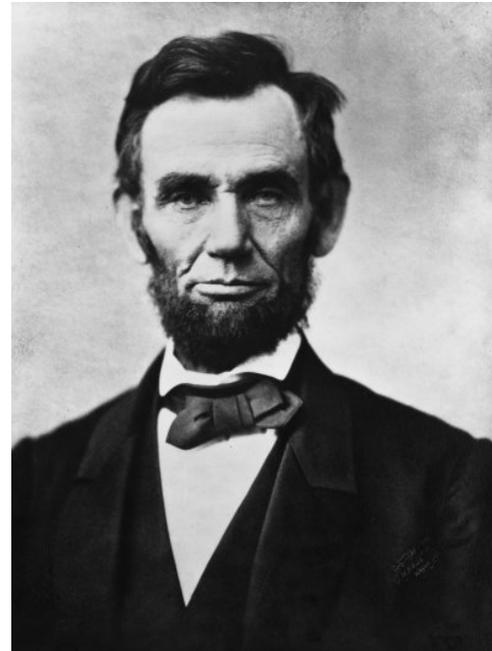
*Hypo-mania* and *mania* are words used to describe these states of “well being” or “elation”

A seriously low mood or significant depression is the other “major symptom” of bi-polar illness

(CMHS EBP Toolkits, 2003)

# Famous People who Struggled with Mental Illness

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**Mary Todd Lincoln & her husband  
President Abraham Lincoln**

# Major Depression

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Depression is the most common serious mental condition

**Major Depression:** This includes having one or more episodes that last at least 2 weeks where there is a very sad mood or the loss of interest in regular activities or interests

*(CMHS EBP Toolkits, 2003)*

# Major Depression: SYMPTOMS

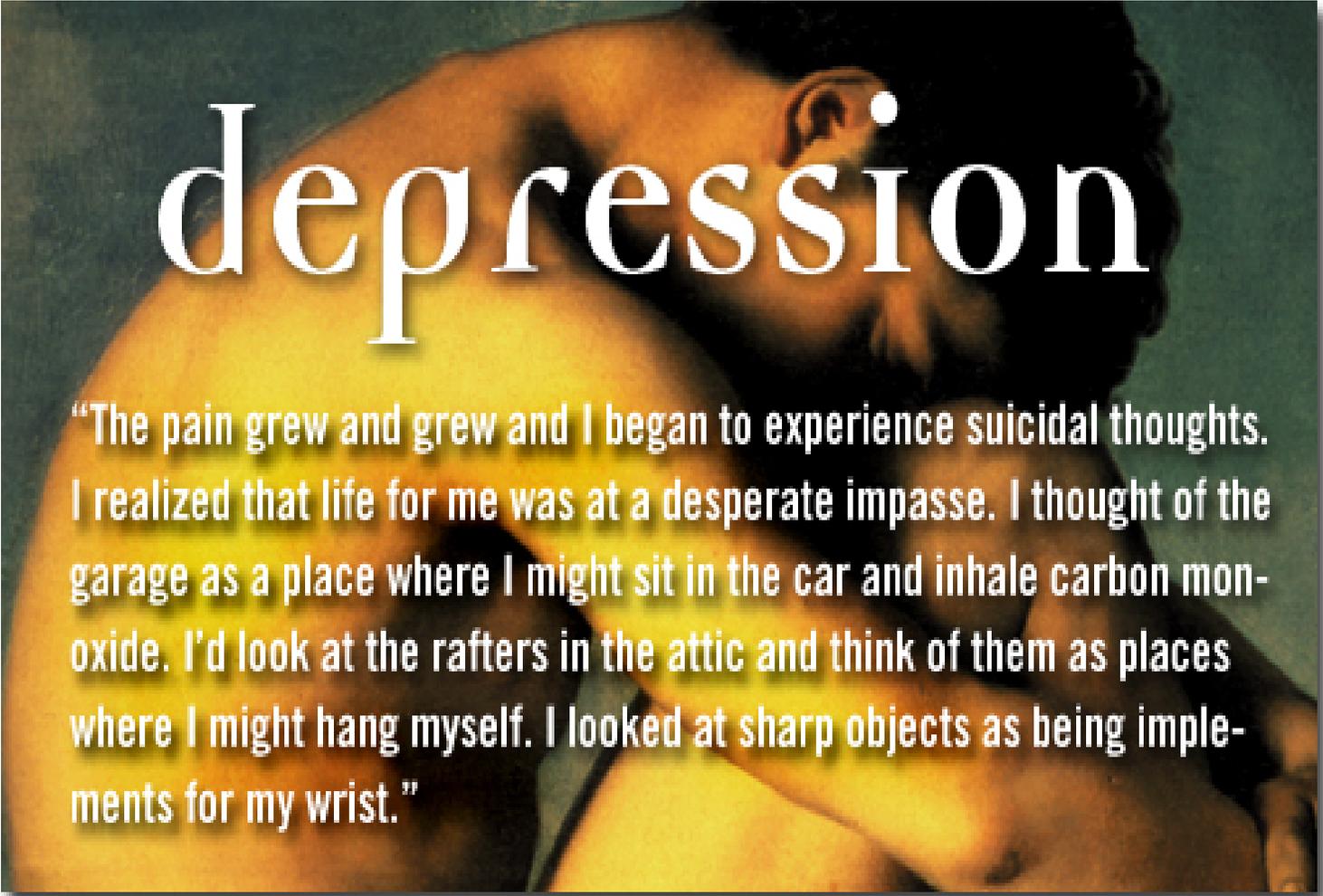
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- ✓ Sad mood, “feeling dark, down all the time”
- ✓ Change in appetite
- ✓ Feeling tired, having low or no energy
- ✓ Feeling helpless, hopeless, or worthless
- ✓ Suicidal thoughts or actions
- ✓ Concentration problems

*(CMHS EBP Toolkits, 2003)*

# Suicidal Thoughts or Intentions

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## depression

“The pain grew and grew and I began to experience suicidal thoughts. I realized that life for me was at a desperate impasse. I thought of the garage as a place where I might sit in the car and inhale carbon monoxide. I’d look at the rafters in the attic and think of them as places where I might hang myself. I looked at sharp objects as being implements for my wrist.”

# Risk Factors Related to Suicidal Thoughts or Intentions

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Sampling of key risk factors for suicide:

- Making or changing a will
- Giving away prized possessions
- Putting personal or financial matters in order
- Conveying a sense of hopelessness about the future
- Threat or loss of primary therapist
- Rejection by family or significant other or even staff

*(Horsfall et al, 2001)*

# Borderline Personality Disorder: Symptoms

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- ✓ Frantic efforts to avoid real or imagined abandonment
- ✓ Unstable moods and impulse control problems
- ✓ Rage that leads to self harm or harming others
- ✓ Propensity for dangerous behaviors
- ✓ Propensity to find chaotic relationships wherever person lives or works
- ✓ Pervasive lack of hope, self worth, or insight

(APA, 2000)

# Post-traumatic Stress Disorder

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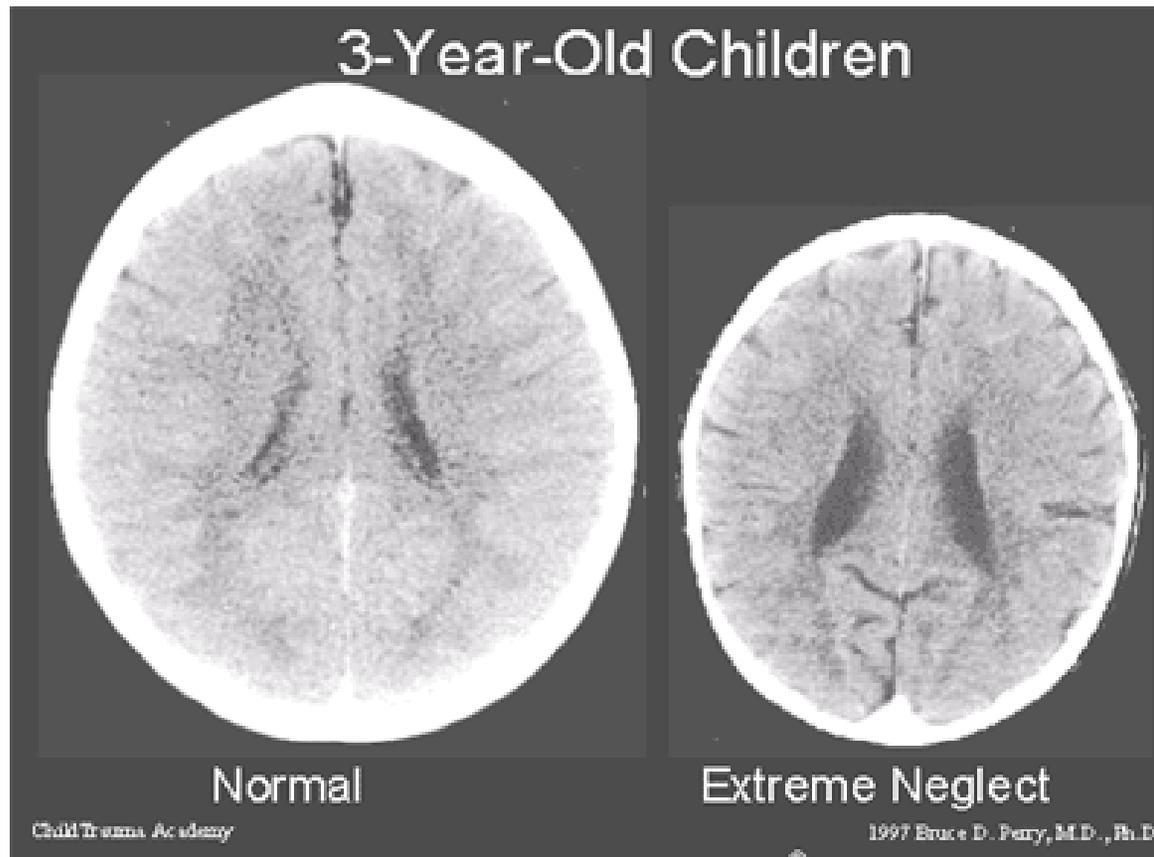
The DSM IV-TR (2000), defines PTSD as a disorder that follows exposure to a traumatic life event or events that involves a personal experience of actual or threatened death or serious injury, similar threat to another person, or learning about a violent death, harm, or threat to a significant other

*(APA, 2000)*

# Effects of Trauma on the Brain

([www.ChildTrauma.org](http://www.ChildTrauma.org))

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# PTSD and the Iraq War



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86% of soldiers reported knowing someone who was seriously injured or killed there

77% reported shooting at the enemy

One in five Iraq veterans return home seriously impaired by PTSD

(Hoge, C.W, et al., 2004)

# One Soldier's Experience



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*“I have PTSD. I know when I got it — the night I killed an 8 year old girl. Her family was trying to cross a checkpoint... we ended up shooting all of them ... It was a family of 6. The only one that survived was a 13-month-old and her mother. And the worst part about it all was when I went to see what I'd shot at, there was an 8 year old girl there. I tried my best to bring her back to life, but there was no use.”*

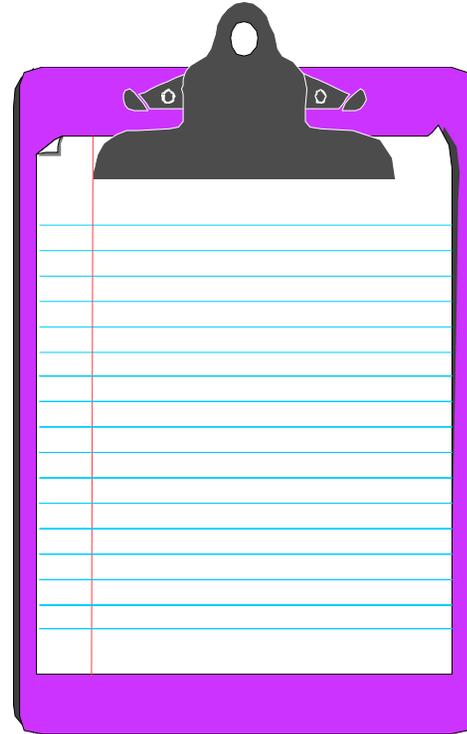
(Michael Gross Retrieved on August 29, 2007 at:

<http://www.stevepavlina.com/blog/2007/07/stories-from-soldiers-in-iraq/>)

# Exercise Activity

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- ✓ Partner
- ✓ Brainstorm
- ✓ Reactions to Trauma
- ✓ Response



# Some Common Reactions to Trauma

(Gilbert, 2002)

Physical Reactions	Mental Reactions	Emotional Reactions	Behavioral Reactions
<p>Nervous energy, jitters, muscle tension, Upset stomach, Rapid Heart Rate, Dizziness, Lack of energy, fatigue, Teeth grinding</p>	<p>Changes in the way you think about yourself Changes in way you think about the world Changes in the way you think about other people Heightened awareness of your surrounding (hyper vigilance) Lessened awareness, disconnection from yourself (dissociation) Difficulty concentrating Poor attention or memory problems Difficulty making decision Intrusive images</p>	<p>Fear, inability to feel safe Sadness, grief, depression Guilt Anger, irritability Numbness, lack of feelings Inability to enjoy anything Loss of trust Loss of self-esteem Feeling helpless Emotional distance from others Intense or extreme feelings Feeling chronically empty Blunted, then extreme feelings</p>	<p>Becoming withdrawn or isolated from others Easily startled Avoiding places or situations Becoming confrontational and aggressive Change in eating habits Loss or gain in weight Restlessness Increase or decrease in sexual activity Self-injury Learned helplessness Addictive behaviors</p>

# Trauma and Recovery

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If I could say anything to all  
the staff in the world it would be this:  
Forget everything you were taught  
in school and be prepared to listen...  
Don't criticize and think it's a lie.  
Just listen and ask questions and be kind.  
Just take time to listen...

*(Interview with adult trauma survivor (C.D.), 2005)*



# The Stress Vulnerability Model

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*Biological vulnerability* refers to people that are born with, or acquire very early, a tendency to develop a problem in a medical area

*Stress (environmental and/or psycho-social stressors)* also seems to play an important factor in contributing to the development of mental conditions

(CMHS EBP Toolkits, 2003; USDHHS, 1999)

# Stress-Vulnerability and Recovery

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For me it's been vital to be aware of when I am under stress. Because of my illness, I'm extra sensitive to stress. It has also been vital for me to take the lead role in my treatment, since I believe that I know best what is going on inside my head. *(David L.)*

Reduce biological vulnerability

Cope with life stressors more effectively

Learn to manage your illness

Develop your own recovery plan

*(CMHS EBP Toolkits, 2003)*

# Well-Being and Recovery

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***Mental Health:*** A state of well-being in which individuals function well in society and are generally satisfied with their lives

*(Keefe, 1998)*

***Recovery:*** Journey of healing and transformation enabling a person with a mental illness to live a meaningful life in the community of his or her choice while striving to achieve his or her potential

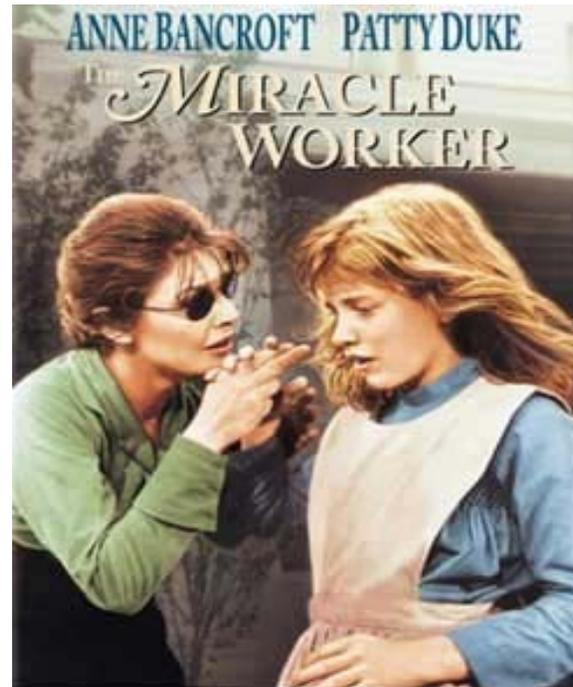
*(National Consensus Statement on Recovery, 2005)*

# Recovery, Hope and Optimism

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*“My recovery from manic depression has been an evolution, not a sudden miracle”*

- Patty Duke



# Optional Video

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**Mental Illness: It's Not What You Think- (29 minutes)**

