MENTAL ILLNESS WITH GRACE

SESSION 2 – IMPACT OF MENTAL ILLNESS ON INDIVIDUAL AND FAMILIES

INTRODUCTION TO THE SERIES

- Review of Primary Objectives
- Awareness
- Acceptance
- Accompaniment
- Desired Outcome

INITIAL STEPS

• Establish a parish that will host the series of talks with approval of the pastor and staff. Invite surrounding parishes for active participation in organizing and publicizing the meetings. From the parishes seek a group of leaders that will help put the series together and form the team. Ideally clergy, lay leaders, people with mental illnesses, family members, and professionals will be part of the team. However, experience has proven that a few people with a passion for this ministry can build the ministry.

SMALL GROUP DISCUSSION

• Why are you here tonight?

• What would you like to learn?

WRAP-UP OF SMALL DISCUSSION GROUPS

• Summary responses to the questions.

INTRODUCTION

- Where are people with mental illnesses § Living at home § Living on their own § Working /
 unable to work full time § State and private facilities § Homeless § In prisons and jails Invite
 family member and a person with a mental illness to witness their experience •
- How has the above person's faith helped them?
- What are types of mental illnesses, medications, treatment, and issues that parishes need to be aware of?
- How from a professional perspective can parishioners be supportive to people with a mental illness and their families?

• A mental illness is a condition that affects a person's thinking, feeling, behavior or mood. These conditions deeply impact day-to-day living and may also affect the ability to relate to others. If you have — or think you might have — a mental illness, the first thing you must know is that **you are not alone**. Mental health conditions are far more common than you think, mainly because people don't like to, or are scared to, talk about them.

- Anxiety Disorders
- Everyone can experience anxiety, but when symptoms are overwhelming and constant often impacting everyday living it may be an anxiety disorder.
- Attention Deficit Hyperactivity Disorder (ADHD)
- ADHD is a developmental disorder defined by inattention (trouble staying on task, listening); disorganization (losing materials); and hyperactivity-impulsivity (fidgeting, difficulty staying seated or waiting).
- Bipolar Disorder
- Bipolar disorder causes dramatic shifts in a person's mood, energy and ability to think clearly.
 Individuals with this disorder experience extreme high and low moods, known as mania and depression. Some people can be symptom-free for many years between episodes.
- BPD is characterized by a pattern of instability in emotions (commonly referred to as dysregulation), interpersonal relationships and self-image. Individuals with BPD can also struggle with impulsivity and self-harm.

- Obsessive-Compulsive Disorder
- OCD involves persistent, intrusive thoughts (obsessions) and repetitive behaviors that a person feels driven to perform (compulsions) in response to those thoughts.
- Depression
- Depression involves recurrent, severe periods of clear-cut changes in mood, thought processes
 and motivation lasting for a minimum of two weeks. Changes in thought processes typically
 include negative thoughts and hopelessness. Depression also involves affects sleep/energy,
 appetite or weight.
- Dissociative Disorders
- Dissociative disorders, which are frequently associated with trauma, disrupt every area of psychological functioning: consciousness, memory, identity, emotion, motor control and behavior.
- Eating Disorders
- Eating disorders are characterized by the intentional changing of food consumption to the point where physical health or social behaviors are affected.

- Posttraumatic Stress Disorder
- PTSD involves a set of physiological and psychological responses. It can occur in people who have experienced or witnessed a traumatic event such as a natural disaster, a serious accident, a terrorist act, rape, war/combat or something similar.
- Psychosis
- Psychosis is characterized as disruptions to a person's thoughts and perceptions that make it difficult for them to recognize what is real and what isn't.
- Schizoaffective Disorder
- Schizoaffective disorder involves symptoms of schizophrenia, such as hallucinations or delusions, and symptoms of a mood disorder, such as depressive or manic episodes.
- Schizophrenia
- Schizophrenia interferes with a person's ability to think clearly, manage emotions, make decisions and relate
 to others. It also causes people to lose touch with reality, often in the form of hallucinations and delusions.

- Bipolar Disorder: Bipolar disorder causes dramatic shifts in a person's mood, energy and ability to think clearly. Individuals with this disorder experience extreme high and low moods, known as mania and depression. Some people can be symptom-free for many years between episodes.
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- Schizophrenia: Schizophrenia interferes with a person's ability to think clearly, manage emotions, make decisions and relate to others. It also causes people to lose touch with reality, often in the form of hallucinations and delusions.
- https://www.nami.org/About-Mental-Illness/Mental-Health-Conditions

EFFECTS OF MENTAL ILLNESS

- Anosognosia is when someone is unaware of their own mental illness or when they can't perceive their symptoms accurately.
- Autism is a complex developmental disorder that can cause problems with thinking, feeling, language and the ability to relate to others. Many individuals with autism also live with mental illness like anxiety or depression
- Suicidal thoughts often accompany mental illness. Not taking these kinds of thoughts seriously can have devastating outcomes. Suicide can be prevented.
- Self-harm is usually a sign that a person is having a tough time coping with their emotions. It's frequently "used" as a coping mechanism for unmanageable mental illness symptoms.
- Anxiety, depression and other mental health conditions are often accompanied by sleep disorders that should also be addressed in treatment.

EFFECTS OF MENTAL ILLNESS

- Living with a mental illness can be difficult, and some people may turn to smoking as a way to cope with symptoms or handle stressful life events.
- Substance use disorders the repeated misuse of alcohol and/or drugs often occur simultaneously in individuals with mental illness, usually to cope with overwhelming symptoms.
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WHAT ARE TYPES OF MENTAL ILLNESSES, MEDICATIONS, TREATMENT, AND ISSUES THAT PARISHES NEED TO BE AWARE OF?

- Psychiatric medications influence the brain chemicals that regulate emotions and thought patterns. They're usually more
 effective when combined with psychotherapy. In some cases, medicines can reduce symptoms so other methods of a
 treatment plan can be more effective. For example, a medication can ease symptoms of depression like loss of energy and
 lack of concentration, allowing an individual to engage more in talk therapy.
- However, predicting who will respond to what medication can be difficult because different medications may work better
 for one person than for another. <u>Doctors</u> usually review clinical records to see if evidence exists for recommending one
 medicine over another. They also consider family history and side effects when prescribing medication.
- Be persistent until you find the medication (or combination of medications) that works for you. A few psychiatric medications work quickly, and you will see improvements within days, but most work more slowly. You may need to take a medication for several weeks or months before you see improvement. If you feel as though a medication isn't working, or you're having side effects, consult with your provider to discuss possible adjustments. Many people won't experience side effects, or they will go away within a few weeks, but if they continue, changing medications or dosage will often help.

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- Treatment typically consists of pills or capsules, taken daily. Some can also be available as liquids, injections, patches or dissolvable tablets. People who have difficulty remembering to take medications daily or people with a history of stopping medication may have better results by taking medication as a shot at the doctor's office once or twice a month.
- Your provider will likely start at a low dose and slowly increase dosage to achieve a level that improves symptoms. Following your provider's instructions will reduce side effects and discomfort when possible. Understand the role medicines can play for key symptoms.
- When stopping a medication, work with your doctor to taper off properly. This allows brain chemicals to adjust to the change. Stopping medication suddenly can result in uncomfortable side effects.
- In some cases, psychiatric medication may be a short-term aid taken only for a few months. In others, medication may be long-term, or even lifelong. Some people are afraid that taking a medication will change their personality, but most find that medication allows them to take charge of their lives.

MEDICATIONS

- Psychiatric medications treat mental disorders like anxiety, depression, bipolar, or schizophrenia. With the help of medication, people with mental illness are able to avoid symptoms that interfere with daily life. Medications treat the symptoms of mental illness but are not a cure. People with mental illness should receive other therapies in connection with medication.
- Medications do more than help people feel better. They also prevent symptoms from coming back and reduce the chances of having to go the hospital. Some people may need to take these medications for their whole lives. Most medications can be taken safely for long periods of time.

MEDICATIONS

- Symptoms you currently have
- Age
- Sex or gender identity
- Allergies or problems you had with medications
- Other health conditions you have
- Other medications you take
- Medications you have tried and how these worked for you
- If anyone in your family is or has been on any medication that has helped symptoms you have
- How regularly you take your medication(s)
- Cost of medications and insurance
- If you are pregnant or plan to become pregnant

23 MEDICATION FREQUENTLY ASKED QUESTIONS

- Medication Frequently Asked Questions
- A friend of mine told me it's best to get all my prescriptions at one pharmacy instead of two or three. Is this true?
- Can I drink alcohol while taking antidepressants?
- How can I learn more about my medication's dosage and side effects?
- I am having trouble remembering to take my medications. Is there anything I can do to help me remember?
- I forgot to get new prescriptions the last time I went to my doctor, and I am out of refills on my old prescriptions. Now it's Saturday and I can't reach my doctor's office to call in new prescriptions for me? What should I do?
- I have been taking my antidepressant medication for a while now. I feel great. All of my symptoms seem to be gone. Is it okay for me to stop taking my medication?
- I have heard that there may be negative effects associated with stopping antidepressants. Is this true?

NAMI FAITHNET

 NAMI FaithNet is a network of NAMI members and friends dedicated to promoting caring faith communities and promoting the role of faith in recovery for individuals and families affected by mental illness. Visit <u>NAMI FaithNet</u> for more information on how you can promote the role of faith in recovery.

RESOURCES

- https://www.nami.org/About-Mental-Illness/Treatments/Mental-Health-Medications
- https://www.nami.org/About-Mental-Illness/Treatment/Mental-Health-Medications/Selecting-Medications

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• MENTAL ILLNESS WITH GRACE FIVE PART SERIES ON MENTAL ILLNESS AWARENESS – ACCEPTANCE- ACCOMPANIMENT CREATING A SAFE PLACE WHERE PEOPLE WILL FEEL COMFORTABLE IN SHARING THEIR STORY AND BE SUPPORTED IN THEIR SPIRITUAL JOURNEY Awareness:

The series will create mental illness awareness in parishes/deanery grouping of parishes through a series of presentations on mental health issues. One in 4 people deal with a mental illness in any given year and for 1 in 22 it will be serious and persistent. Everyone who experiences a mental illness has family and friends who often are in search of how to help their loved ones. Therefore, in any parish there is a high percentage of parishioners affected by these issues. It is recognized by many professionals in the mental health field that spirituality is a key component of recovery. (See the American Psychiatric Association booklet "Mental Health: A Guide for Faith Leaders.") Parish mental illness ministries can reduce stigma that causes isolation, while providing a sense of God's comfort and care that helps in the recovery process. (See California Bishops Statement "Hope and Healing" on role of Church.) Acceptance: The series will foster acceptance of people with mental illness and their families and reduce the stigma of these illnesses through education and factual information about mental health conditions. The series reinforces our Catholic core belief that everyone has dignity and everyone has value. Inclusion in our parishes is not only desirable, it is necessary for the parish to fully experience the image of God's kingdom. (See article "A Community of Faith is like a Stained Glass Window")

Accompaniment: The series provides models for journeying in faith with people with mental illness and families. It will demonstrate how a faith community can offer concrete support for people who often feel isolated and alone.