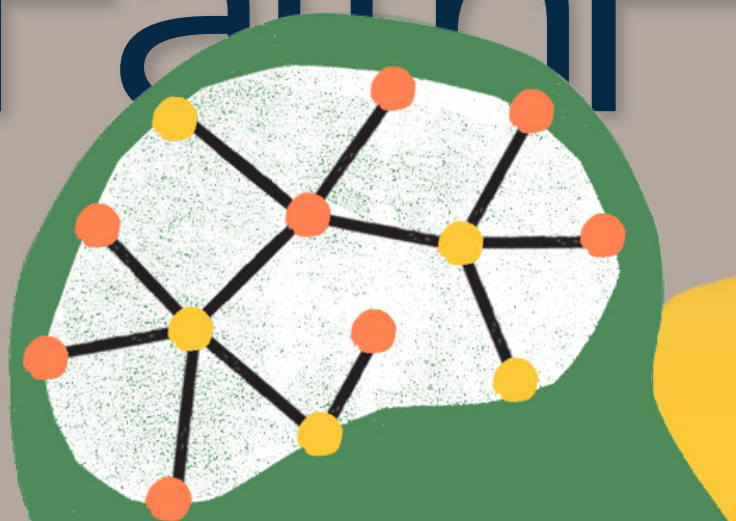


# FaithHealth

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## WHERE TO START: How to Help Someone You Care About with Mental Illness

BY MELANIE RASKIN

Twenty-something Olivia was feeling flat, off and drinking to feel better—drinking a lot. Lethargic, with memory loss, confusion and no desire to eat, her feelings of hopelessness spiraled into thoughts of self-destruction. She had been depressed for months before anyone realized it. Luckily, her family members figured it out in time. But then came the hard part: *What should they do about it?*

According to NAMI, National Association of Mental Illness, one in five adults in the United States experience mental illness; for one in 25, it's serious. Mental illness costs the nation billions of dollars annually in lost wages, health care expenses and disability. But the human cost to the person with mental illness—and their families and friends—can be devastating.

Bill Lindsey, executive director of NAMI South Carolina, said an important first step in getting loved ones the help they need is to remove the stigma—and that starts with attention and education.

"This is an equal-opportunity illness; it happens to everyone," he said. "It can be difficult to find the right clinician, therapist and medicines, but there is hope. When you hit that right combination of treatments, 85% of people with mental illness have good outcomes and live productive lives. Research and development for diseases of the brain trail a good bit behind work in heart disease and cancer. For some reason, we treat the most important organ in the body differently. We tell people with mood disorders to pick themselves up by the bootstraps, to get well on their own.

We never hear those words when someone goes to the ER with a heart attack. Sometimes, the brain needs help. That stigma's got to go."

He's right. Dealing with the mental illness of a loved one is hard enough without the judgment of society. And it's absolutely mind-boggling the first time you come face-to-face with it. Symptoms can range from dramatic personality changes, erratic behavior and hearing voices to substance abuse, difficulty with daily activities and an inability to get out of bed. It's hard to see someone you care about hurting.

It's even harder to realize you don't have the first clue what to do about it. How can you help? Who can you call? The following tips on how to navigate the mental health system can empower you to provide the support your loved one needs—immediately and for the long term.

*It can be difficult to find the right clinician, therapist and medicines, but there is hope.*

### Actions you take to support your family or friend with a mental illness:

**One** / Contact your doctor. Your family doctor may be able to recommend resources that can help. Mental health has an impact on overall health: A physical checkup is a vital part of the assessment. Remember, although health care providers can prescribe medication, they can't treat the root cause of the mental illness. For the best results, ask your health care provider to partner with a mental health specialist to design a treatment plan.

**Two** / Call your health insurance company. Ask for three referrals of mental health professionals in your area who accept your plan. Set up an appointment as soon as you can.

**Three** / Ask your friends. Most people have only a degree or two of separation from someone with mental illness. Talk to trusted loved ones to get recommendations for professional help.

**Four** / Call a mental health professional. Find a trustworthy, knowledgeable person trained in mental health care in your county's clinic, the neighborhood hospital, private practice, an inpatient facility, or the loved one's school or college. Set up an appointment as soon as possible, and ask to be placed on the cancellation wait list so you can get in more quickly.

**Five** / Consult your clergy. Clergy are often widely networked and may be able to suggest additional support. Some are trained to provide counseling that can be of help.

**Six** / Explore your state's mental health department. The North Carolina Department of Health and Human Services Mental Health Services and the South Carolina Department of Mental Health (contact information below) offer excellent resources for citizens.

**Seven** / Learn. This should probably be No. 1 on the list. Don't wait for a crisis; research the symptoms and behaviors you are seeing so you have a clear handle on what is going on, how to tackle it and whose support you'll need. Organizations such as NAMI have a wealth of resources, from support groups and mental health walk-in units to housing and community inclusion.

### What to do if the person you care about is suicidal:

**Eight** / Call the National Suicide Prevention Hotline at 1-800-273-8255. Suicide has moved to the second-leading cause of death for children age 10 to 18. Treat it seriously. Trained hotline counselors are available 24/7 to support your loved one in a crisis situation.

**Nine** / Call 911. If the person you care about has a plan to hurt herself or others, call for intervention. Ask for a

CIT (crisis intervention team) officer, if one is available. Calmly explain what the crisis is, so the police and EMTs have all the information they need to respond appropriately. They can transport your loved one to the hospital for evaluation or check on a person you suddenly can't reach.

**Ten** / As a last resort, you can take your loved one to the Emergency Department, particularly if they are incoherent, obviously distressed or seem to be a danger to themselves or others. Hospital EDs can be a direct link to both inpatient (long-term) and outpatient (short-term) treatment. Although ED physicians are not specialists in mental health care, they can help in an emergency situation, especially if someone you care about may be on the brink of hurting himself or others. Keep in mind, though, that ED visits are costly and often frightening to someone with an acute mental illness, so this isn't a first choice.

Remember, take a breath and take care of yourself, too. Of course, it's easier to take that breath if you know your loved one is getting the right support.

Virginia Rodillas, MS, CFLE, manager of NAMI North Carolina's Helpline, noted that diagnosing a mental illness isn't straightforward.

"It's not a blood test and can be unique and overlap with other diagnoses; early intervention and treatment are vital, and can deliver the best outcomes," she explained. "While what's happening can be confusing, act. The sooner you get your loved one with mental illness on the path to recovery, the faster and better that recovery may be."

The key takeaway? Everyone is unique: there is no cookie-cutter treatment. Therapy can include any combination of counseling, medication, social support and education. The most important thing you can do is learn as much as you can about mental health and take steps when needed.



THE ROAD TO RECOVERY:  
The Next Steps

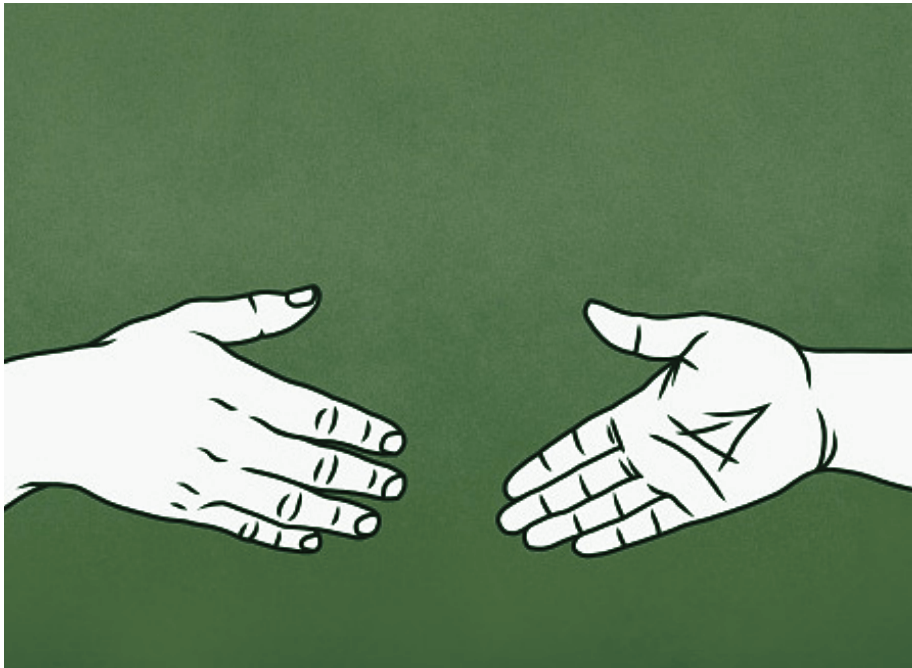
You’ve done your homework: You’ve researched your loved one’s mental illness and you’re finding support—from education to housing, advocacy to support groups. The person you care about is on the road to recovery. *Now what?*

According to Virginia Rodillas, MS, CFLE, and manager of National Alliance on Mental Illness North Carolina’s Helpline (NAMI NC), the next steps along the recovery journey are equally important—for both your loved one and for you.

“It is crucial that you are functioning at a level to be able to be supportive of and an advocate for your loved one,” she said. “Maintaining your own mental health is important. NAMI has resources for families, including evidence-based education classes that are very specialized. Many people are in the sandwich generation—they find themselves taking care of children and parents, plus handling daily life. Compound all that with a loved one experiencing mental illness, and it can be hard. Remember, make sure your needs are being met, too.”

The stress of caring for a loved one with mental illness can show up in different ways, according to NAMI: headaches, low energy, insomnia, stomach problems, aches and pains. There’s a reason that flight attendants advise airline passengers to put on their own oxygen masks first during an emergency: You have to be functioning at 100% before you can help others.

Luckily, there are plenty of self-care strategies that can keep you feeling strong:



- Learn as much as you can about your loved one’s condition. Knowledge is power. And not knowing what you don’t know can be terrifying.
- Exercise and stay active. Whether it’s taking an aerobics class or taking the stairs at work, daily exercise produces stress-busting hormones that boost overall health.
- Commit to healthy eating to fuel your body and stabilize your mood and energy.
- Prioritize the right amount of sleep: seven to nine hours a night. Never doubt the refreshing impact of a 15-minute power nap during a busy day.
- Don’t count on drugs or alcohol to relieve stress—they have the opposite effect.
- Maintain your social activities and network. Now more than ever, you need your girls’ night out, your church, and your pick-up basketball game.
- It’s OK to live your life, too. Pursue

- your hobbies, take a bubble bath, read a great book, binge-watch your favorite show.
- Be mindful of your own mental health: Focus on something positive each day, let go of the guilt if you’re having a bad day or feeling negative or resentful, ask for help when you need it ... and even when you don’t.
  - Remember, you are not alone. Millions of people in the U.S. are living with mental illness—both the person and their families and friends. You can do this.
- According to Rodillas, when you feel strong and supported, you can help the person in your life on a mental health journey feel strong and supported. These tips for walking that path together can help:
- Study up on the condition, so you know what to expect and have strategies for reacting and supporting your loved one.
  - Show interest in the treatment plan.

- Encourage your loved one to follow the plan.
- Strive to create an atmosphere of cooperation in the family.
- Listen to each other.
- Resume normal activities and routines.
- Keep everyone safe—your loved one and yourself.
- Prepare a crisis plan, just in case (psychiatric advance directive).
- Express your support out loud ... and often.

Rodillas feels the last tip is the most crucial. “Don’t give up,” she advised. “Yes, it can be hard, but there are resources that can help your loved one and you. Use those resources to stay healthy. And always remind your loved one you are with them and won’t ever give up.”

Resources to Learn More About Mental Illness and Mental Health

**NAMI NC:**  
www.naminc.org  
Helpline: 1-800-451-9682

**NAMI SC:**  
www.namisc.org  
Helpline: 1-800-788-5131

**NAMI National:**  
www.nami.org  
Helpline: 1-800-950-NAMI

**North Carolina Department of Health and Human Services Mental Health Services:**  
www.ncdhhs.gov/divisions/mhddsas

**South Carolina Department of Mental Health:**  
www.scdmh.net

BREAKING THROUGH THE  
WALLS OF STIGMA

“If only I’d known...” is the lament of family and friends of people with mental illness. Bill Lindsey, executive director of National Alliance on Mental Illness South Carolina (NAMI SC), believes eliminating the stigma around mental illness is a good first step to eliminating those words.

“Unfortunately, as big as NAMI is as an organization and as prevalent as mental illness is in the U.S., with one in five people affected by it, we still have so many who find us only because of a crisis,” he explained. “We need to get the word out on how well treatment can work. Eighty-five percent of people with mental illness go on to live productive lives, with the right treatments. It can be life-changing: the more we learn and share about mental illness, the faster we can remove the stigma.”

NAMI SC has been breaking through the walls of stigma over the last three years with a new education program for middle- and high-schoolers called Ending the Silence. The program exploded in South Carolina, with more than 45,000 students participating to date.

“The reason it’s growing so fast is because students want to know if they or their friends are having symptoms of mental illness or suicidal thoughts,” Lindsey said. “The sooner people can find out, the better off they can be. Today’s suicide rate is extremely high. Children may not tell a parent, teacher or doctor, but they will tell a friend. And if that friend knows what to look for

and how to help, we can turn this whole conversation around on the suicide rate of this age group.”

Suicide is the second-leading cause of death in children ages 10 to 18. Twenty-five percent of mental illness happens by age 14; 75% of it happens by age 22. Lindsey is passionate about breaking the silence.

“It’s unfathomable,” he pointed out. “We’re at about 128 suicides a day in the U.S. right now. Imagine if a jetliner went down every day with 128 people on board. The FAA would shut down that airline immediately and fix the problem. We’re not seeing the same front-page, front-line response, and we should be. This is a huge problem. We have the opportunity to do some good and make a difference. So we are.”

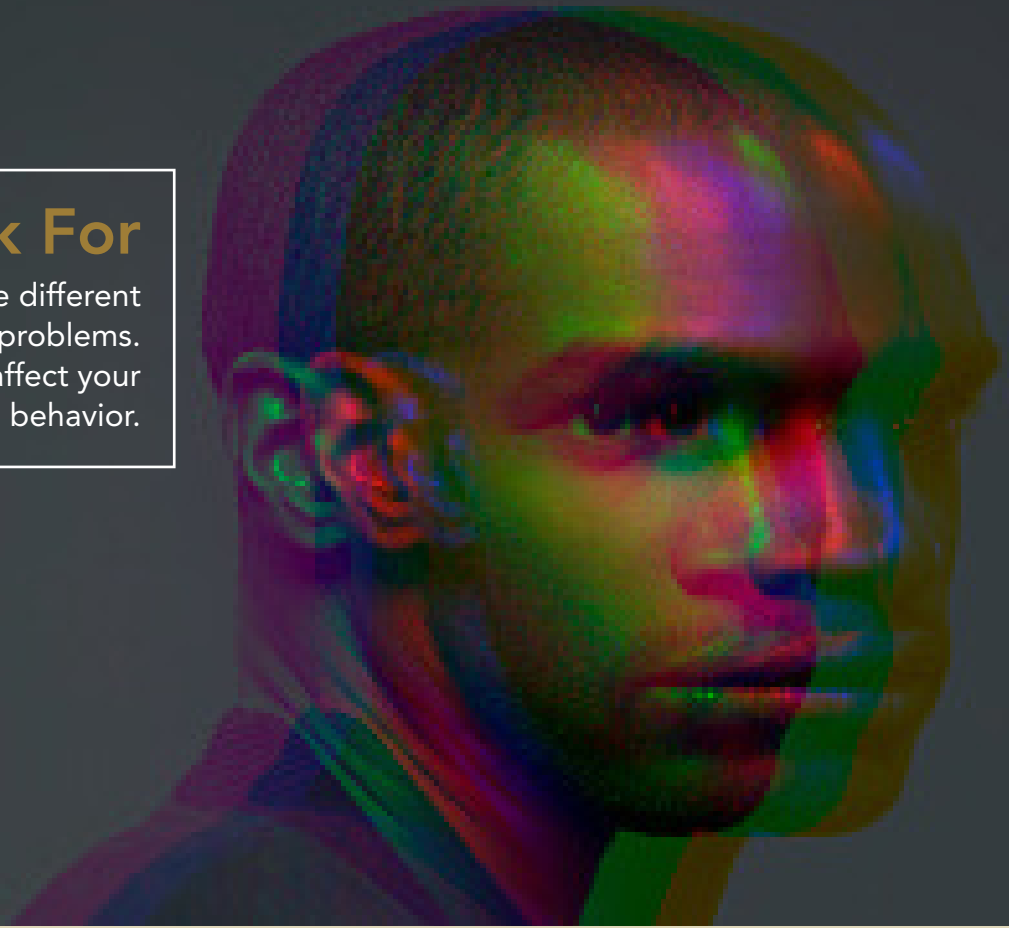
Many factors contribute to the silence about the complex problem of mental illness: the need for more good clinicians and support systems, access to the right medication properly prescribed by the right medical professional, housing and access to work. But Lindsey believes the more people who are willing to speak out, the closer we will come to ending the stigma and changing the story.

“Things don’t improve unless we are involved and advocate for it,” he stated. “As executive director of NAMI SC, I spend a lot of my time at our Statehouse lobbying for legislation that will help. And it’s working because this is not a political issue, it’s an equal-opportunity illness that affects everyone. There are so many stories to tell. We believe the more people who learn and share about mental illness, the more of a difference we can make.”



# What to Look For

People can experience different types of mental health problems. These problems can affect your thinking, mood and behavior.



## Anxiety Disorders

People with anxiety disorders respond to certain objects or situations with fear and dread. Anxiety disorders can include obsessive-compulsive disorder, panic disorders and phobias.

## Behavioral Disorders

Behavioral disorders involve a pattern of disruptive behaviors in children that last for at least six months and cause problems in school, at home and in social situations. Examples of behavioral disorders include attention deficit hyperactive disorder (ADHD), conduct disorder and oppositional-defiant disorder (ODD).

## Eating Disorders

Eating disorders involve extreme emotions, attitudes and behaviors involving weight and food. Eating disorders can include anorexia, bulimia and binge eating.

## Mental Health and Substance Use Disorders

Mental health problems and substance abuse disorders sometimes occur together.

## Mood Disorders

Mood disorders involve persistent feelings of sadness or periods of feeling overly happy, or fluctuating between extreme happiness and extreme sadness. Mood disorders can include depression, bipolar disorder, seasonal affective disorder (SAD) and self-harm.

## Obsessive-Compulsive Disorder

If you have OCD, you have repeated, upsetting thoughts called obsessions. You do the same thing over and over again to try to make the thoughts go away. Those repeated actions are called compulsions.

## Personality Disorders

People with personality disorders have extreme and inflexible personality traits that are distressing to the person and may cause problems in work, school or social relationships. Personality disorders can include antisocial personality disorder and borderline personality disorder.

## Psychotic Disorders

People with psychotic disorders experience a range of symptoms, including hallucinations and delusions. An example of a psychotic disorder is schizophrenia.

## Suicidal Behavior

Suicide causes immeasurable pain, suffering and loss to individuals, families and communities nationwide.

## Trauma and Stress-Related Disorders

Post-traumatic stress disorder (PTSD) can occur after living through or seeing a traumatic event, such as war, a hurricane, rape, physical abuse or a bad accident. PTSD makes you feel stressed and afraid after the danger is over.

From [MentalHealth.gov](https://www.MentalHealth.gov)