What is NAMI?

National Alliance on Mental Illness
What does NAMI do?

Educational support and advocacy awareness.
WHY is this important?

• **Anyone** can be affected by a mental health condition

• **Suicide** is the 2nd leading cause of death in the U.S. in people 15-24 years old

• **Recovery** is possible
What are mental health conditions?

- Mental health conditions **ARE:**
  - Medical illnesses that change how people think, feel and act
  - Something common and treatable

- Mental health conditions **ARE NOT:**
  - Anyone’s fault or something to be ashamed of
  - The end – you can achieve goals
1 in 5 **ADULTS** in the U.S. experience a mental health condition in any given year and 1 in 5 **YOUTH** (aged 13-18) have experienced a mental health condition at some point in their life.

Nearly 60% of **ADULTS** and 50% of **YOUTH** (aged 8-15) with a mental health condition don't receive treatment.

**STIGMA** is a major reason people don't seek help.
stigma

/stiːɡmə/
noun

1. a mark of disgrace associated with a particular circumstance, quality, or person.
   "the stigma of mental disorder"
   synonyms: shame, disgrace, dishonor, ignominy, opprobrium, humiliation, (bad)
   reputation
   "the stigma of bankruptcy"
The Rock Slide
DISTRESSING CHANGES caused by symptoms of a mental health condition
FEELINGS Reported by Family Members as REACTIONS to a Loved One’s Mental Health Condition

DENIAL
FRUSTRATION
SORROW
ANGER
RAGE

DISRUPTION OF FAMILY RELATIONSHIPS
APPREHENSION ABOUT THE FAMILY
DEPRESSION
DIFFICULTY ACCEPTING THE CONDITION

CONFUSION
ISOLATION
GUILT
EXHAUSTION OF SPIRIT & RESOURCES

GRIEF
FEAR
SLEEPLESSNESS
SHAME

GRIEF
FRI
SHAME
Catastrophic Stressor

- Is generally an unanticipated event
- There is little time to prepare for it
- One has little previous experience and few sources of guidance
- It has a huge emotional impact
- Involves threat or danger to self or others
The Diagnosis DILEMMA
Anxiety Disorders

FEAR
- Panic Attack
- Social Phobia
- Sweating
- Dizziness
- Agoraphobia

HYPERVENTILATION
- Anxiety
- Racing Heartbeat
- Nausea
Depressive Disorders

- Indecisiveness
- Changes in Sleep
- Guilt
- SADNESS
- Fatigue
- Suicidal thoughts
- Distress
- Hopelessness
- Isolation
Bipolar Disorder

- Impulsive
- Grandiose Ideas
- Elated Mood
- Sadness
- Mania
- Racing Thoughts
- Pressured Speech
- Sleeplessness
- Agitated
Obsessive-Compulsive Disorder

Compulsions
Obsessions
GERM PHOBIA
REPETITIVE ACTS
COUNTING
CHECKING

FEAR
Intrusive Thoughts Or Impulses
Post-traumatic Stress Disorder (PTSD)

- On Edge
- Emotional Numbness
- Nightmares
- Intrusive Images or Thoughts
- Hyper vigilant
- Angry Outbursts
Schizophrenia

- Disorganized thinking
- Hallucinations
- Delusions
- Flat emotional response
- Bizarre behaviors
- Withdrawing
Borderline Personality Disorder

- Cutting
- Feelings of Emptiness
- Suicidal Thoughts
- Dangerously Impulsive Behavior
- Anxiety
- Distorted Thinking
- Fear of Abandonment
Signs of Psychosis

Delusions
SUSPICIOUS Personal Withdrawal
Hallucinations
Lack of Paranoia
Trouble Concentrating
Hygiene
Dual Diagnosis

Supporting a Habit

ALCOHOL

ABUSE

ANXIETY

Meth

OPIATES

Heroin

Sudden Behavior Changes

MARIJUANA

Withdrawal
What we have to get across, is how it is that people get mental illness. Nobody is to blame. This is not a mental weakness. These are diseases just like any other neurobiological disorders. They just happen to affect complex behaviors.

Dr. Steven Hyman, former Director of the National Institute of Mental Health (NIMH)
WHY do people change so drastically when they become psychotic?

What are they actually experiencing?
Empathy
Basic Communication GUIDELINES

- Use short, clear, direct sentences
- Keep the content simple
- Do what you can to keep the stimulation level as low as possible
- If your loved one appears withdrawn and uncommunicative, back off for a while
- Assume that much of what you say may not be heard the first time
- Be pleasant and firm
- Communications form our boundaries with others; make sure your boundaries are sturdy and clear
• I am speaking in a very specific, direct manner
• I am at the center of the communication
• I take complete responsibility for my feelings and opinions
• I don’t waiver
• I say what I mean

Example: “I don’t like it when there’s smoking in the house.”
When we move away from I-Statements with our loved one, we tend to:

• Feel defensive
• Blame and become judgmental
• Make assumptions about the other person’s motives
• Generalize a specific problem to other situations and accusations begin to snowball
• Vent our negative feelings
1. Acknowledge the reality of your loved one’s lived experience—that is, what is real and true to them (rather than to you)

2. Focus your response on what someone having this experience must be feeling (rather than what you are feeling)

3. Communicate that you understand what your loved one believes and how he or she feels
TREATMENT Overview
NAMI's Approach

- Mental health conditions are no one's fault
- Catastrophic stressors
- Bio-Psycho-Social Model
- Collaborative care
Disclaimers

- We don’t have any magical remedy or secret cure for mental health conditions

- We’re not suggesting any specific treatment for you or for your loved one
Seeking Treatment

• What options are available?
• Where do you start?
• Where do you go?
• Who do you talk with?
• What do you ask?
The most effective treatment usually involves a combination of:

- **Psychotherapy** - to address the psychological
- **Medication** - to address the biological
TREATMENT Providers

- Counselor, clinician, therapist
- Clinical social worker
- Psychologist
- Psychiatrist
- Psychiatric nurse practitioner
MEDICATIONS & How They Work
Side effects of medication
Have **You** Experienced These Normal Reactions to Taking Prescribed Drugs?
Individualized treatment
Universal

**WARNING SIGNS of Relapse**

- Having trouble sleeping
- A change in activity levels; feeling lots of energy or no energy at all
- Having trouble concentrating
- Feeling nervous, tense, depressed or suddenly grandiose
- Thinking that one is being laughed at or talked about
HOW can we sort out myths from facts?

WHAT about the times when a loved one is violent or suicidal?
MYTH VS FACT
What should YOU do?

Take warning signs seriously, take action IMMEDIATELY

- Ask the question
- Don’t leave them alone
- Call a suicide crisis line
- Go to an emergency room or call 911
- Don’t keep suicide warning signs a secret
SELF-CARE for family members
BURNOUT is not just for professionals

- Emotional and physical exhaustion
- Emotional stress
- Absenteeism; decline in performance
- Increased escape behaviors
- Lowered self-regard
Using your diaphragm
Self-Care
Classes
Presentations
Support Groups
Remember
nami.org

Support NAMI and help end the stigma of mental illness.

Support NAMI to help millions of Americans who face mental illness every day.

Join thousands of Americans dedicated to improving the lives of people with mental illness.

DONATE NOW

CALL THE NAMI HELPLINE
800-950-6264

GOT A QUESTION?
CONTACT US
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