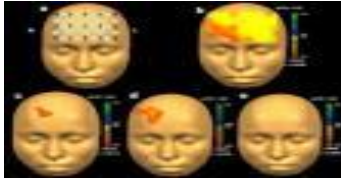


Understanding Mental Health Conditions



Richard Fisher, LCSW

Connecticut Department of Mental Health and Addiction Services

SAMHSA Working Definition of Recovery from mental disorders and substance use disorders 12/11

A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

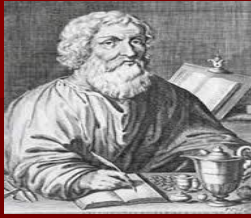
Major dimensions that support a life in recovery:

Health : overcoming or managing one's disease(s) as well as living in a physically and emotionally healthy way

Home: a stable and safe place to live

Purpose: meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society

Community : relationships and social networks that provide support, friendship, love, and hope.



“It is more important to know the patient who has the disease than the disease the patient has.”

Hippocrates

460 BC - 370 BC

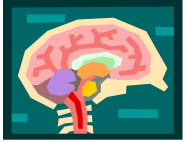
Conditions

Symptoms

Relationships and
Work



Biology/Symptom Severity



Recovery Capital
(Cloud and Grunfield)

Human Capital



Physical Capital



Social Capital



Bipolar Disorder



Major Depression



Schizoaffective Disorder



Anxiety Disorders



**Social Phobia, Specific
Phobias, Generalized
Anxiety Disorder, Panic
Disorder**



Obsessive-Compulsive Disorder



Post-Traumatic Stress Disorder





Autism Spectrum Disorders



Autism Spectrum Disorders Characterized By.....

- Severe social impairments
- Communication deficits
- Restricted interests
- Repetitive behavior
- Odd or clumsy motor behavior

Helping People Autism Spectrum Disorders

- Help to create structure, order and routine
- Tell what he/she should do, rather than what he should not do. State expected behavior, provide examples
- Teach social skills/ teach empathy as behavior, not to teach feelings
- Avoid asking why
- Allow time for person to process, use short sentences, limit number of instructions
- Be predictable, provide notice of change in routine
- Use rules, rewards, routines with instructions
- Don't force social interactions

Personality Disorders



Personality Disorders

- An enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual's culture and is manifested in at least two of the following areas:
 - Cognition
 - Affectivity
 - Interpersonal functioning
 - Impulse control

Odd or Eccentric Cluster

- **Paranoid:** People have hidden motives
- **Schizoid:** People are unrewarding
- **Schizotypal:** catastrophe can strike at any moment

Anxious or Fearful Cluster

- **Avoidant:** People will reject me
- **Dependent:** I need others
- **Obsessive-Compulsive:** I know what is best, people should try harder

Dramatic, Emotional or Erratic Cluster

- **Histrionic:** People are there to serve and admire me
- **Narcissistic:** I'm better, and deserve special rules

Borderline Personality Disorder



BPD

- Unstable relationships (intense and stormy)
- Impulsive behaviors
- Identity disturbance
- Suicidal, para-suicidal and self-injurious behaviors
- Emotional dysregulation
- Lapses in reality testing

DBT Skills

- Core Mindfulness
- Distress Tolerance
- Interpersonal Effectiveness
- Emotional Regulation

Borderline: I am empty; I am bad

Antisocial: I am entitled to break rules, others are wimps

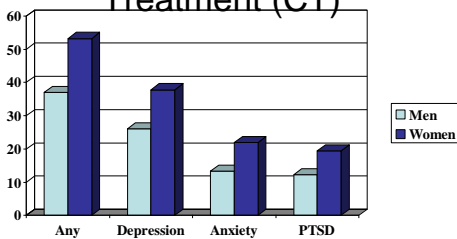
Antisocial Personality Disorder



Substance Use Disorders over the Lifespan

General Population	17%
Schizophrenia	47%
Bipolar	56%
Major Depression	27%
Severe Major Depression	47%
OCD	33%
Phobia	23%
Panic Disorder	36%

Prevalence of COD among Men and Women Entering Addiction Treatment (CT)



“Normal” Reactions to Serious Illnesses

- General stress response (fight, flight, fright)
- Grief, denial, impatience (lack of acceptance)
- Anger and striking out
- Depression, feeling hopeless, helpless and demoralized
- Preoccupation with self, disinterest in others
- Interruption in normal development

Stages of Recovery

- 1. Overwhelmed by
- 2. Struggling with
- 3. Living with
- 4. Living beyond



Boston University Center for Psychiatric Rehabilitation

Assessment Issues

- Self-medication of mental health condition
- Signs and symptoms may be related to substance use
- Co-occurring mental health and substance use disorder

Guidelines to Make Hypothesis

- What came first, MH symptoms or Substance Use Disorder
- Time relationships between symptoms
 - Substance-free periods, MH symptoms?
 - Substance use first, then MH symptoms? Did MH symptoms remit weeks or months after stopped using?

Person-Centered Model

- Person-driven
- Build on strengths
- Community integration focus
- Recovery focus
- Preventive



Traditional Model

- Provider-driven
- Deficit focused
- Acute care

- Symptom focus
- Reactive

Strengths Assessment

- Daily Routine: living situation, typical day, hobbies, chores, work, leisure time
- Educational and Work Activities
- Creative Outlets: Sports, hobbies, reading, writing, music, TV and movies, art, drama
- Relationships: Family, friends, significant others, who are your supporters
- Spiritual Supports/Self Help
- Health and wellness





Tasks

- Resolve environmental obstacles
- Mobilize natural supports
- Promote coping skills
- Symptom Reduction
- Build Recovery Capital
- Promote a context favorable to recovery
- Minimize risk
- Instill hope and motivation
- Facilitate meaningful roles
- Promote health and wellness
- Provide education
