Mental Health AWARENESS

Staying Resilient

Taking care of one's mental health is important for everyone

Mental Health America recommends 10 tips for staying resilient — common sense activities that are practical, doable and can make a real difference in whether you will be able to roll with the inevitable punches that life throws.

CONNECT WITH OTHERS

Connections can help you with specific tasks, emotional support, providing perspective, giving advice and offering validation. Ways to form connections with others include enrolling in classes, joining clubs, volunteering and reaching out to others. Strengthen the relationships that you do have by scheduling time for them and doing what you can to enrich them. Consider joining a support group.

STAY POSITIVE

Cultivating optimism is good for both your mental and physical health. Stay optimistic by tracking your gratitude, writing about a positive future, looking for silver linings and avoiding negative thinking.

GET PHYSICALLY ACTIVE

Exercise is not only good for you physically, but can boost your mood by decreasing stress, reducing anxiety and offering a greater sense of well-being. The American Heart Association recom-



mends at least 30 minutes of moderate aerobic activity five days a week plus strength training twice a week.

HELP OTHERS

According to research, people who consistently help others experience less depression, better health and greater calm. Helping can range from volunteering for a charitable organization to calling a friend to smiling at a stranger in the street. Look for a way to volunteer that matches your interests and values.

GET ENOUGH SLEEP

People who don't get enough sleep suffer from higher anxiety, impaired memory and a greater risk of depression. Try setting a regular bedtime with a healthy sleep routine. Drink less caffeine, especially in the hours before you sleep. Give yourself an hour before your .

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bedtime to de-stress.

CREATE JOY AND SATISFACTION

Laughing can reduce pain and anxiety, and positive emotions can reduce stress hormones. Add humor to your life by reading joke books, collecting sayings that make you smile, listening to comedy podcasts or just finding things in your life to laugh about. Engage in leisure activities that you enjoy, especially if they involve spending time with others.

EAT WELL

Having a good diet can boost your energy, lessen the effects of stress and bolster mood-related body chemicals. Plan healthy foods, don't skip meals, snack well and don't over-diet. Limit alcohol and cut back on caffeine. There is some evidence that you can fight depression by eating foods rich in Vitamin B-12, folate and Omega-3 fatty acids.

TAKE CARE OF YOUR SPIRIT

Spirituality can contribute to your resiliency. It can take the form of participating in organized religion, meditating or connecting with your deeper self.

DEAL BETTER WITH HARD TIMES

Developing coping mechanisms can help you stay resilient. Some coping tools can include writing, problem-solving, shifting your thinking and getting support.

GET PROFESSIONAL HELP WHEN YOU NEED IT

One in four adults in the U.S. will have a mental health problem in any given year. Professionals can help whether you turn to your primary care doctor, a therapist or a crisis hot line. It may take a few tries to get the right match for the person who can most help you. Set goals and keep an open mind.

Borderline Personality Disorder

Understanding Borderline Personality Disorder (BPD) is critical for those who have it and those who live with them

BPD is a complex mental health condition that requires accurate and comprehensive information to promote understanding and support.

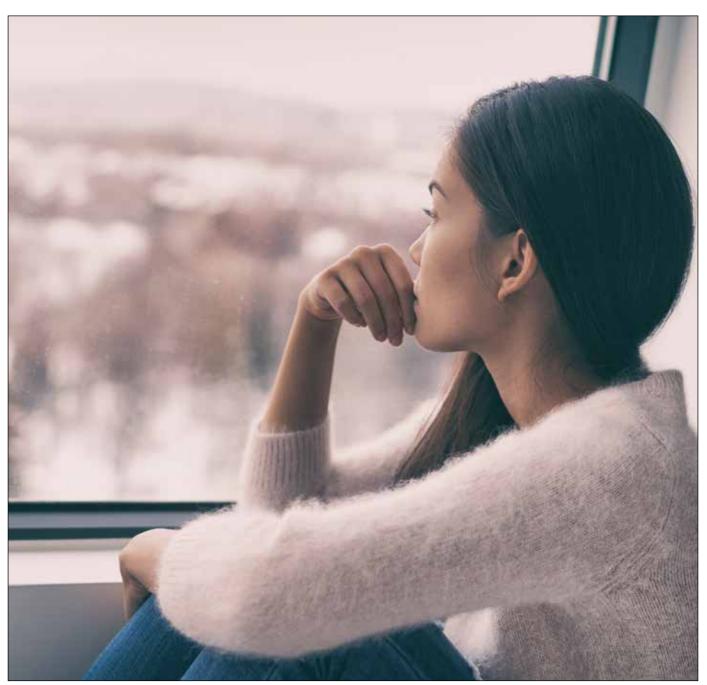
BPD makes it difficult for a person to regulate their emotions. This often gets expressed in impulsive behavior, negative self-image and difficulty in maintaining relationships with others. While it is a very serious diagnosis, it is possible to treat the condition and for a person who has it to control the symptoms.

It's not known for sure what causes BPD, but research indicates it might be a combination of genetic, biological (brain structure and function) and environmental factors. Contributing factors might include trauma, early life experiences and neglect.

SYMPTOMS

Of the many symptoms that characterize BPD, the American Psychiatric Association says in the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders that a person must have at least five symptoms to be diagnosed with BPD.

Symptoms can include intense mood swings, feelings



for others changing quickly from extreme closeness to extreme dislike, seeing everything as all good or all bad, acting impulsively or recklessly, beginning and ending relationships quickly, a pattern of intense and unstable relationships with others, a distorted and unstable self-image, self-harming behavior (such as cutting), recurring thoughts of suicidal behaviors or threats, intense and variable moods, chronic feelings of emptiness, anger issues and feelings of dissociation.

People with BPD are significantly more likely to self-harm or attempt suicide. If you or someone you know is in immediate distress or is thinking about hurting themselves, please call or text the 988 Suicide Crisis Hotline or chat at 988lifeline.org. You can also contact the Crisis Text Line by texting HELLO to 741741.

TREATMENTS

The National Institute of Mental Health stresses that it is important for people with BPD to get help from someone who is a licensed mental health professional and to stick with treatment. Those who do not stick with treatment are more likely to develop other chronic medical or mental illnesses.

Unlike many mental illnesses, BPD typically is not treated with medication unless there is a specific related symptom being treated. The primary treatment is psychotherapy. There are two types of therapy that have been specifically developed to treat BPD.

The first kind is dialectical behavior therapy, which was developed specifically for people with BPD. It uses mindfulness techniques and teaches skills that help people to control intense emotions, reduce self-destructive behaviors and improve relationships.

The second is cognitive behavioral therapy, which helps people identify and change core beliefs and behaviors that come from inaccurate perceptions of themselves and others. It helps to reduce self-harm and suicidal behaviors as well as treats mood swings and anxiety symptoms.

People with BPD also need to find a supportive environment with people who understand the challenges they are facing. It helps to have someone who is empathetic and non-judgmental who can provide validation and support for emotional issues and provide encouragement about seeking and continuing professional help. This environment can help a person manage their symptoms and improve their quality of life.

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Celebrities and Mental Health

Many celebrities use their fame to help increase mental health awareness

When drawing attention to the need for mental health care, celebrities are able to tap into their existing platform and spread the news about what can be done to help. They also often have the funds to form foundations and organizations that can provide resources and assistance.

The following are just a few of the celebrities who have dedicated their time to helping people heal from mental illness and addiction.

GLENN CLOSE: BRING CHANGE TO MIND

For Glenn Close, the issue was personal. She founded the nonprofit "Bring Change to Mind" after her sister, Jessie, was diagnosed with bipolar disorder and her nephew, Calen, with schizoaffective disorder.

The organization, which was created in 2010, encourages dialogue about mental health while raising awareness, understanding and empathy. It wants to end the stigma and discrimination surrounding mental illness by providing education and resources for those affected.

Their guiding principles are to start the conversation, amplify voices, be an ally, empower the future, support science and fight for human rights. Their website offers



many videos and an interactive talk tool to help people become more comfortable talking about mental illness. They have a student-led high school program and they partner with other organizations.

TARAJI P. HENSON: THE BORIS LAWRENCE HENSON FOUNDATION

Actress Taraji P. Henson created the Boris Lawrence

Henson Foundation in 2018, naming it after her late father who suffered from mental health challenges and was unable to access the resources or support that he needed.

The foundation improves mental health in Black communities through several actions, including building and amplifying culturally competent resources, programs and education. It strives to improve the access to mental health services in the Black community and make it more normal to use them. They recognize the stigma surrounding the acts of seeking help and support and are trying to eradicate it.

LADY GAGA: BORN THIS WAY

The foundation named after one of Lady Gaga's major hits

Celebrities can use their platforms to spread the news about mental health issues.

works with young people to bolster their mental health. In the past 10 years they've trained more than 80,000 people in mental first aid, certified 10,000 people with the "Be There Certificate" so they can help others, received 291 million acts of kindness pledges, funded more than 1,630 mental health-focused classroom projects and organized more than 200 service events.

They also conduct research as they blaze a trail toward building a kinder, braver world.

PRINCE HARRY AND MEGHAN MARKLE: ARCHEWELL FOUNDATION

Now residents of the United States, the Duke and Duchess of Sussex, Prince Harry and Meghan Markle, have created a foundation named after their son Archie. Archewell Foundation is the umbrella organization under which they perform their philanthropic work.

The three main pillars of focus are to build a better world online, restore trust in information and to uplift communities. Baked into all of that, according to their website is "the core belief that our collective wellbeing and mental health are paramount."

Gender Dysphoria

Some individuals struggle when their gender identity does not match their biological sex

Gender dysphoria is a complex and sensitive topic that affects many individuals. The mismatch they experience can cause significant distress and discomfort, affecting their social relationships, work and education.

The term "transgender" refers to a person whose sex assigned at birth does not match their gender identity. Some transgender people experience gender dysphoria. The Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5) classifies gender dysphoria as a mental health condition under the category of "conditions for further study." This is not an attempt to stigmatize or pathologize transgender individuals. Instead, it is an attempt to provide a framework for understanding and treating the distress and discomfort that many transgender individuals experience. Nor does it classify forms of gender expression or gender identity as a mental disorder.

The DSM-5 estimates that about .5% to 1% of adults experience gender dysphoria, though those numbers are sometimes questioned because of the stigma and discrimination attached to being transgender that keeps people from reporting the condition.



Gender dysphoria often begins in childhood, though some do not experience it until puberty or later, according to the American Psychiatric Association.

DIAGNOSIS

There are distinct criteria for diagnosing gender dysphoria in adolescents and adults versus diagnosing it in children.

For adolescents and adults, the unease between one's expressed gender and assigned gender must last at least two months and have such characteristics as a strong desire to be rid of one's sex characteristics, a strong desire for sex characteristics of a different gender, or a strong desire to be or be treated as an alternative gender. Those who have this condition also have significant distress or impairment in some form of every day life, whether at home, at work or in the community.

For children, the experience must also last at least six months, but they have to show six different criteria, starting with a strong desire to be a different gender or the insistence that one is the other gender. Other factors can include a

strong preference for cross-dressing or a resistance to wearing typical clothing of one's assigned gender, a strong preference for cross-gender roles when playing, a strong preference for toys typically associated with the other gender, a strong preference for playmates of the other gender, a rejection of typical gender-associated play, a strong dislike of one's sexual anatomy and a strong desire for the physical sex characteristics that match one's experienced gender.

TREATMENT The primary treatment for gender dysphoria is gender-affirming care, which includes hormone therapy, surgery and psychotherapy. These treatments aim to alleviate gender dysphoria and help transgender individuals live in a way that matches their gender identity.

Additional gender-affirming care and support can include social, legal and medical affirmation, though medical affirmation is not recommended for pre-puberty children. Social affirmation can include addressing a person by their correct pronouns and names. Legal affirmation involves changing ones name and gender markers on official governmental identification.

One of the biggest red flags that a transgender person will experience mental health difficulties is when their family and social circles reject their gender identity. It's why the APA recommends family and couples therapy to help create a supportive environment. There are also peer support groups that can help transgender people validate and share their experiences.

Other ways to help treat gender dysphoria include advocating for the rights of those who are transgender and providing safe spaces and resources that can alleviate their distress and promote their well-being.

Raising awareness and promoting understanding of gender dysphoria helps create a more inclusive and accepting society for all individuals regardless of their gender identity.

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MENTAL HEALTH AWARENESS | PLANNING FOR CARE

Psychiatric Health Directive

Just like medical advance directives, a psychiatric health directive can provide direction on how you would like to be cared for if you are in a mental health crisis and unable to make rational decisions.

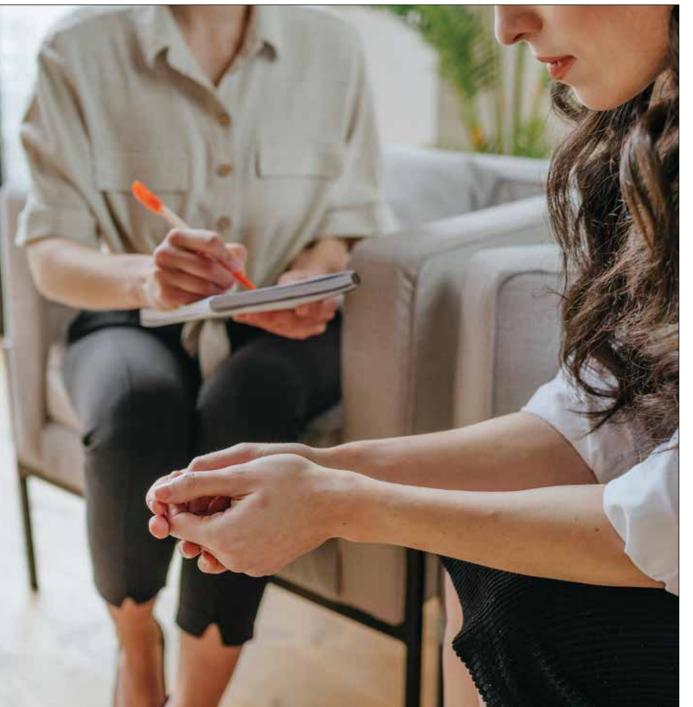
A psychiatric health directive is a form of power of attorney, a legal document you complete when you are well that explains your wishes regarding treatment and services. It specifies who is allowed to make decisions for you. The document lets healthcare providers and loved ones know what your preferences are for medication, therapy and hospitalization.

Individuals with psychiatric disorders sometimes experience periods of incapacity or involuntary hospitalization, during which they might not be able to make decisions about their treatment. By having an advance directive they can ensure their wishes are respected, though there are some limitations in certain jurisdictions.

CREATING A DIRECTIVE

The Mental Health America organization provides a fourstep process for creating a psychiatric health directive.

The first step is to decide what your wishes are and write



down how you want to be treated when you are having a mental health crisis or are hospitalized. Details include listing the people you want notified — and who you do not want notified, what happens to you during a crisis, what helps you recover after the crisis, where you would like to go if hospitalization is required, what alternatives to hospitalization you would like, which health care professionals you want involved in your care or to be consulted about your care, the types of medical treatments you do or do not want, how you want to be treated if hospitalized, medical conditions and allergies doctors should be aware of, people who are allowed to visit you and people to contact to help with bills, home or pet care and other items.

Review these questions with people who know you and are familiar with your mental health. Talk to family members, friends, case managers and health care professionals. They may have suggestions for you.

Step two is to find your health care agent, also known as a proxy or patient advocate. This is the person who will speak for you if the doctors declare you are unable to make rational decisions. Make sure this is someone who can be reached in an emergency, who you trust to make decisions for you and who is capable of making health care decisions for you even over your objections. If possible, and state law allows, name a back-up person.

The third step is to write the advance directive. Find out what your state requires and whether there is a specific form you need to fill out. The National Disability Rights Network can tell you what your state allows and requires. A state agency may be able to put you in touch with people who are trained to prepare an advance directive. Another useful site is the National Resource Center on Psychiatric Advance Directives.

The final step is to distribute copies of the psychiatric form to those who need it. Have a copy in your home and provide a copy to your agent and a trusted relative or friend. Other people who may need copies include your therapist or other health care providers, anyone named in the advance directive and the hospital where you want to be treated.

If your state has a repository for advance directives, file it there.

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Communication

It's easy to make assumptions about a person with mental illness.

Unfortunately, those assumptions are not always correct. Mental illness is individual and different people experience it differently.

Having conversations about mental illness is important. There are ways to move forward sensitively, productively and helpfully. Then there are things that are distinctly not helpful.

THINGS TO SAY

- "What can I do to help?"
- "Thank you for telling me."
- "You don't have to apologize."
- "You're not alone."
- "Let me know what you need."
- "You are important to me."
- "I love you."
- "I'm listening if you want to talk."
- "That sounds really difficult. How are you coping?"

THINGS TO DO

Perhaps one of the most challenging things is starting the conversation. Find a quiet time and place where you won't be distracted. Turn off your cell phone.

Listen with an open mind. Ask questions. Give the person an opportunity to discuss how they are experiencing the mental condition and how it affects their life. Be patient. It may be difficult for them to



have the conversation.

Encourage them to seek help. Find out what barriers might exist to them receiving help and what resources could help them overcome those barriers. Educate yourself about mental health conditions.

Talk about self care and what that might look like for

them. Offer to support them in pursuing that care. Help out with daily tasks. Some mental disorders make it challenging for a person to do even simple tasks. Commit to being there for them for the long run.

THINGS NOT TO SAY

Most people with mental ill-

ness have a long list of insensitive comments that have been made to them. Some things you should avoid saying include:

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- "It's all in your head."
- "Just pray about it."
- "Snap out of it."
- "Cheer up."
- "Everyone feels that way sometimes."

- "You just have to decide to feel differently."
- "Things could be worse others have it a lot harder."
- "But you're always laughing and smiling. You seem happy."
- "This too shall pass."
- "Have you tried yoga?"
- "We all feel crazy now and then."
- "It's all part of God's plan."
- "Suicide is so selfish."

THINGS NOT TO DO

Don't make a joke of a person's mental illness. While they may laugh about it, that is often a coping mechanism. If you do it, they may feel you are making fun of them or not taking their illness seriously. Avoid sarcasm.

Don't show hostility. If you criticize, blame or raise your voice, they are likely to shut down or shut you out. They might also take the criticism and turn it inward, making them at higher risk for selfharm.

Do not diagnose or question their medical decisions. You may think that they should be in therapy or taking medication, but they are the ones who have to come to that decision. While you want to encourage them to get help, don't do so in a way that is critical or undermines their decisions.

While it is difficult, don't take their actions personally. Remember that many mental health disorders cause irrational thinking. What they are doing usually isn't about you.

Recognizing Mental Illness

Most mental illnesses begin when a person is young

The American Psychiatric Association says half of all mental illnesses begin by age 14 while 75% begin by the time a person is 24. That coincides with what is typically a volatile time in a person's life. So how can you recognize the warning signs of mental illness and intervene to help a person?

First, keep in mind that one or two symptoms might be normal or temporary. However, several signs are a cause for concern. If you're able to identify early warning signs and take action, you or the person suffering from the disorder can get prompt treatment. According to APA, early intervention can both reduce the severity of an illness or even delay or prevent it completely.

If you or someone you know has several of these symptoms, consult a mental health professional:

- Extreme mood changes (from irritability and anger to euphoria).
- Sleep or appetite changes.
- Social withdrawal.
- Drop in functioning at school, work or in social activities.
- Problems concentrating, thinking or remembering.
- Increased sensitivity to physical stimulation (sight, hearing, smell, touch). • Apathy.
- Feeling disconnected.



- Illogical thinking.
- Nervousness.
- Unusual behavior.
- Increased absenteeism at work or school.
- Difficulties in relationships with others.
- Substance abuse.
- Multiple physical ailments without obvious causes.
- Difficulty perceiving reality.
- Changes in sex drive.

Gauging the severity of these symptoms is important. When they start interfering with normal life activity – if it keeps you from functioning then it is important to seek help from a mental health professional or even your primary care doctor.

Most importantly, if you or someone you know is having suicidal thoughts or thoughts of harming themselves or others, it is important to seek immediate attention.

WARNING SIGNS FOR CHILDREN

Some symptoms are specifically related to children. Children are still learning lan-

guage skills and how to communicate and may not be able to talk about how they feel or what they are thinking. That's why it is important to look at behaviors and behavior changes as a warning sign.

According to the National Alliance on Mental Illness, some symptoms in children can include:

- Changes in school performance.
- Excessive worry or anxiety.
- Hyperactive behavior.
- Frequent nightmares.
- Frequent disobedience or

aggression.

• Frequent temper tantrums.

TAKING ACTION

What can you do if you or someone you love is showing warning signs of mental illness? Research worldwide supports the fact that early intervention creates better outcomes and can prevent hospitalization and minimize symptoms. It's why it is important to pay attention to these red flags even if a person is not experiencing fullblown mental illness.

The first step is to seek an evaluation from a mental health or health care professional. Don't let Google diagnose you or someone you love. Rather, use the internet and reliable sources to learn about mental illness.

Seek out supportive counseling. Behavioral therapy can help provide coping strategies and ways to reduce stress and manage daily life.

Depending on the condition, seek out close monitoring for when you or your loved one might need more intensive care.

Mental health disorders present in different ways for different people which is why each individual needs to be carefully assessed and receive individual treatment. Some treatment options might include individual and family counseling, vocational and educational support, participation in support and problem-solving groups and medication.