

Discussion Guide

If you do not have AV access, you can use this discussion guide instead of the PowerPoint Presentation. For a more complete, scripted discussion guide please use the talking points provided in that presentation. In this guide, text in italic will provide tips for the presenter.

Introductions

Hello, my name is _____. We are here today to talk about mental illnesses. I am not an expert on the topic, but I do feel strongly about stopping the stigma surrounding them. I will do my best to answer any questions you may have and direct you to where you can receive more in-depth information on the topic.

Goal of today's discussion: To learn more about mental illnesses, and how to help you become more comfortable talking openly about them. We'll give some background about mental illnesses, discuss the stigma surrounding them, and what we can do to change attitudes and ultimately, people's lives.

The stigma

Let's take a moment to think about what a person experiencing a mental illness looks like. What image pops into your head?

- Tell me about the person: What are they wearing? How old are they? What are they doing?
- How do the media portray it?

Did you picture someone homeless? Disheveled, scary looking or in an institution? Unfortunately, these are common stereotypes surrounding mental illnesses. When we have negative images it makes it easier to make fun of people with mental illnesses, have less empathy and even discriminate against them.

The reality

The reality is that people of all age, races, genders, careers and socioeconomic backgrounds experience mental illnesses. For example, the following celebrities have experienced a mental illness:

- Catherine Zeta Jones, bipolar disorder
- Demi Lovato, bipolar disorder and an eating disorder
- Abe Lincoln, depression

Let's talk about it

Why do we have such negative images about mental illnesses? Let's take another look at the stigma: this time let's think about how we talk about mental illnesses. Remembering that this is an exercise about stereotypes and stigma, can anyone name any slang terms used to describe mental illnesses?

(Allow time for discussion, examples. Common slang terms: crazy, nuts, wacko, insane, psycho, etc.)

Now, let's take a look at the way we talk about other illnesses, like cancer. Can you name any slang terms for cancer?

(Allow time for thought.)

It's a little more difficult, isn't it? What makes these individuals different, when they are both biological in nature? The answer goes back to the stigma. It impacts how each of us think, talk – and even treat people experiencing a mental illness, whether we know it or not.

Why stigma matters

Stigma can be harmful. It often leads people to be ashamed of their or their family member's mental illness. And it causes most to wait an average of **10 years** before seeking treatment.

The impact of waiting to seek treatment can include a loss of employment and income. The highest dropout rates are among youth with a mental illness. People with an untreated mental illness end up in our criminal justice system. And last year more than 700 people died by suicide here in Minnesota.

It's ok to have a mental illness, many of us do.

It's upsetting that there are so many negative thoughts surrounding mental illnesses. Especially as we begin to learn more about it. For example, one in four people will experience a mental illness at some point in their life. About 1 in 10 people will experience a more serious mental illness, such as schizophrenia or bipolar disorder.

It's OK because it is a medical illness– not a character flaw

Mental illnesses disrupt a person's thinking, feelings, mood, ability to relate to others and daily functioning. They cannot be overcome through "will power" and are not related to a person's character or intelligence, because they are biological in nature.

Mental illnesses are biological conditions that can be treated, just like other illnesses such as diabetes.

Common mental illnesses and symptoms

- **Depression** – beyond feeling sad or blue. Symptoms last for more than two weeks and include, sad, or irritable mood; changes in appetite, sleep, energy, ability to concentrate and remember; lack of interest in usual activities; and a decreased ability to experience pleasure.
- **Bipolar Disorder** – in addition to the lows of depression, can include mania such as unpredictable behavior, grandiose ideas, spending sprees, decreased need for sleep, more talkative, racing thoughts, distractible, risk taking.
- **Schizophrenia** – hallucinations or delusions, emotional flatness, lack of expressiveness, inability to start and follow through with activities, difficulty with organizing tasks, memory.
- **Anxiety** - pounding heart, sweating, trembling, dizzy, short of breath, numbness, chills, difficulty concentrating, fatigue, irritable, edginess.

It's OK because it's treatable – life can get better

The best treatments for serious mental illnesses today are highly effective. In fact, more than 70 percent of peoples' symptoms are reduced and they feel better when following their treatment plans.

However, most people live with their symptoms an average of 10 years before seeking treatment, largely due to the stigma, and more than 60 percent of people don't receive treatment. The sooner people get treatment, the greater their chances of recovery.

And that is the focus of the Make It Ok campaign: Educate everyone about mental illnesses, stop the silence and Make It Ok.

Talking about mental illnesses can be hard. And although now you may know more about the stigma and mental illnesses you still may not feel comfortable breaching the subject. The rest of today's presentation is going to focus on that, and hopefully prepare you to have those conversations.

Tips for talking

Now let's discuss some general tips or talking to others about mental illnesses.

End the silence. If someone shares with you that they have a mental illness, they are opening up to you in a big way. Try to keep awkward silences at bay, and don't shy away from the subject. Ask questions, show concern. By talking openly about mental illnesses, it becomes easier to ask for help.

Be nice. It sounds very easy to do, but try to say the right things. Be open and caring and let that shine through. Your language and tone of voice are more important than you think.

Listen. The fact that you are there for your friend, family member or coworker can make a world of difference. As much as you can, try not to find and share a solution to the problem. Focus on asking open ended-questions and listening to what they need to tell you.

Keep in contact. Make sure they know that they can always get a hold of you if they need it, and be there for them. Check in with them from time to time, with a call, a text, an email, an offer to meet up.

Don't ignore it. Don't be afraid to ask about the well-being of someone if you think they may be hurting. It can be hard to take the first step, so make it easier for your friend and ask them how they are doing.

Offer to help your friend. Everyone is different, and has a different idea of what help may be beneficial to them. Either way, ask your friend what you can do to help them, and be open to their answer.

Keep the conversation moving. Don't feel like the only thing you need to talk to your friend about is their mental illness. They are still the same person, with the same likes and dislikes. You can talk about other things to keep silent lulls out of conversation, just make sure that they know you are completely open to revisiting this topic with them later.

What to say

Now that we have some “general rules” for talking about mental illnesses, let’s go over some of the things you can say. Can you think of any other things that would be helpful?

Allow time for discussion. Suggestions:

- “Thanks for opening up to me.”
- “Is there anything I can do to help?”
- “Relapse is a part of recovery, not the end of it.”
- “I’m sorry to hear that. It must be tough.”
- “I’m here for you when you need me.”
- “I can’t imagine what you’re going through.”
- “Can I drive you to an appointment?”
- “How are you feeling today?”

What NOT to say

Equally important, are the things NOT to say. Can you think of other things not to say? Why?

(Allow time for thought and discussion.)

Examples on what NOT to say:

- “It could be worse.”
- “Just deal with it.”
- “Snap out of it.”
- “Everyone feels that way sometimes.”
- “We’ve all been there.”
- “You’ve got to pull yourself together.”
- “Maybe try thinking happier thoughts.”

Try to avoid using derogatory phrases, like crazy, psycho, insane or nuts. These words actually help perpetuate the stigma – and it is amazing how much those words are used on a day-to-day basis.

Scenario 1

“You notice that your friend Jessica has seemed detached and disengaged during the past few months. She rarely comes to book club, and when she does she doesn’t say much. You’re concerned about her.”

You ask her when you're alone if she is okay and she says she's been really depressed lately. What do you say? "

(Split the room in half and have each group try one of the two examples. Have them pair up with someone next to them.)

Some examples of what to say:

- "I'm so sorry. I've noticed that you haven't been your usual self."
- "Have you talked to your doctor lately about how you have been feeling? Are you seeing someone?"
- "I care about you and I am concerned. I will do whatever I can to help."

Let your friend know that sometimes being there for a person means letting them decide when they are ready to talk or get help.

Scenario 2

"Your best friend from college comes over and says that he hasn't been feeling well lately. He says he has been diagnosed with anxiety, and sometimes it feels like his heart is pounding so hard he feels like he is having a heart attack. What do you say?"

In pairs, have one person tell the other about how they are feeling, and open up about their fears. Ask them how that conversation was for them: Easy? Hard? Awkward?

It can be very hard to open up about such a serious illness. **How can you, as a friend, make this conversation easier?**

Examples:

- Listen
- Don't judge, laugh, dismiss the conversation
- Keep your friend talking, don't rush. It was very hard for your friend to have this conversation with you.
- Offer to take them to a doctor or mental health professional

What can I do?

Mental illnesses touch all of us. If you are wondering what more you can do to help reduce the stigma and support your loved ones, here are a few options.

First, the biggest thing we can do is to start talking more openly about mental illnesses. When we do this, we realize that mental illnesses are more common and relatable than we think. We break down the

stereotypes and stigma surrounding mental illnesses. And more importantly, people experiencing mental illnesses will be treated with respect, acceptance and be more apt to get the care they need. Try sharing your story if you experience a mental illness, or if a loved one has.

Another great resource for mental illnesses, is NAMI (National Alliance on Mental Illness.) NAMI has education classes, support groups and a collection of resources to help you and your loved ones get the information and care you need. You can also help show your support for mental health awareness at their annual walk.

And lastly, we encourage you to take the Make It OK pledge. The pledge encourages people to stop the silence around mental illness- by taking the pledge you can share that message

(You can also pass out Pledge Cards and “OK” stickers at this time. Encourage attendees to post these in a visible place to help spark the conversation.)

Find out more

If you would like more information about what we have talked about today, visit MakeltOK.org. And if you are looking for more detailed and specific information about mental illnesses, visit NAMIhelps.org. NAMI offers more information and resources as advocates for those experiencing mental illnesses.