



Understanding Mental Illness

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Myths



Myth #1: Psychiatric disorders are not true medical illnesses like heart disease and diabetes. People who have a mental illness are just "crazy."

Fact: Brain disorders, like heart disease and diabetes, are legitimate medical illnesses. Research shows there are genetic and biological causes for psychiatric disorders, and they can be treated effectively.

Myths



- Myth #2: People with a severe mental illness, such as schizophrenia, are usually dangerous and violent.
- Fact: Statistics show that the incidence of violence in people who have a brain disorder is not much higher than it is in the general population. Those suffering from a psychosis such as schizophrenia are more often frightened, confused and despairing than violent.

Myths



Myth #3: Mental illness is the result of bad parenting.

Fact: Most experts agree that a genetic susceptibility, combined with other risk factors, leads to a psychiatric disorder. In other words, mental illnesses have a physical cause.

Myths



Myth #4: Depression results from a personality weakness or character flaw, and people who are depressed could just snap out of it if they tried hard enough.

Fact: Depression has nothing to do with being lazy or weak. It results from changes in brain chemistry or brain function, and medication and/or psychotherapy often help people to recover.

Myths



Myth #5: Schizophrenia means split personality, and there is no way to control it.

Fact: Schizophrenia is often confused with multiple personality disorder. Actually, schizophrenia is a brain disorder that robs people of their ability to think clearly and logically. People with schizophrenia have symptoms ranging from social withdrawal to hallucinations and delusions. Medication has helped many of these individuals to lead fulfilling, productive lives.

How can I Interact in a way that is helpful?



What am I observing?



- Face to Face:
 - Scene
 - Posturing
 - Affect
 - Appearance
- In Conversation:
 - Orientation x 4
 - Thought processes
 - Judgment
 - Insight

Helpful Interaction



- Set Limits
 - Set a time limit, no more than 5 minutes
- Establish Purpose
 - What is the purpose of your call, how can I help?
 - What is the most important thing you need me to know right now?
 - How can I help you with that concern right now?

Helpful Interaction



- Speak in a calm voice
- Make eye contact
- Ask simple, short questions
- Give one step requests/suggestions
- Keep focus on purpose of call/interaction
- Be transparent - Tell them what you are doing

Helpful Interaction



- Use key statements/reflections
 - “I want to hear what you have to say, but I can’t listen while you are yelling and I want to be able to listen to you”
 - Reflections convey “I am listening”
 - Start statements with key words like
 - “So...”
 - “Sounds like...”
 - “So you think/feel...”
 - “Seems like ...”
 - “Its like...”
 - “You feel...”

Non-Helpful Interaction



- “I know how you feel”
- Allow no decision making
- Intrude into personal space
- Give flippant responses (e.g. don't worry)
- Lack of respect
- Attempt to provide evidence that the thought/feeling is not valid

When is Referral Necessary?



- Threat of harm to self/others
- Has a mental illness
- Least restrictive level of treatment
- Can benefit from treatment