Mental Health Month 2011
Affiliate Toolkit
DEAR COLLEAGUES,

For more than 50 years, Mental Health America and their hundreds of affiliates from around the country have led the observance of May is Mental Health Month by reaching millions of people through the media, local events and screenings. This unified effort includes educational messages about mental illness and substance use conditions and the importance of mental health. For 2011 Mental Health America will be using two brand “platforms” as themes rather than one specific May is Mental Health Month theme.

This toolkit features the theme Do More for 1 in 4, which is a call to action for Americans to help the 1 in 4 American adults in their lives who are living with a diagnosable, treatable mental health condition (this is a 2005 NIMH statistic). This theme can be used to highlight treatment and recovery programs.

Mental Health America will use both themes throughout 2011 during the membership campaign to recruit 20,000 new members to the MHA Membership Program. Approximately 50 percent of the revenue from that program will be credited towards affiliate’s dues and, once dues are fully offset, will be distributed directly to the affiliates.

Our MHA Affiliates are welcome to use either of the two platforms throughout the year as stand-alone themes or as supporting themes for specific treatment/recovery programs or wellness programs in their local areas.

This toolkit includes:

- Marketing materials
  - flyer
  - poster
- Media materials
  - Swiss cheese press release
  - Drop-In Articles
  - PSA scripts
- Advocacy materials
  - Sample Mayoral Proclamation
  - Letter to Legislators on Children’s Mental Health
- Frequently Asked Questions
  - For Affiliates
  - For general public
- Fact Sheets
  - ADHD in Adults
  - Anxiety Disorders
  - Bipolar Disorder
  - Depression
  - Supporting Someone Close to You
  - Getting Help

MHA Affiliates are welcome to use these materials as they see fit to supplement their May is Mental Health Month programs or other programs during 2011.
KEY MESSAGES

Mental health disorders are real, common and treatable, and together we can do more to help the 1 in 4 Americans who live with these disorders.

- An estimated 26.2 percent of Americans ages 18 and older — about one in four adults — suffer from a diagnosable mental health disorder in a given year. That is nearly 60 million people.
- Mental health disorders are the leading cause of disability in the U.S.

To combat stigma and encourage help seeking behavior, Mental Health America has developed the Do More for 1 in 4 campaign to provide people with the information they need to recognize a mental health disorder and how to find help.

- This campaign puts informative content about the most common mental health disorders, how to find treatment for them, and how family and friends can be supportive together in one place.
- All the information is free as a public service of Mental Health America.
- **Do More for 1 in 4** provides information on 5 different types of the most common mental health disorders that people can use to recognize symptoms in themselves or others. It also includes information about combat stress and co-occurring disorders.
- Living with and recovering from a mental health disorder can be difficult, but understanding and assistance from others can make it easier. **Do More for 1 in 4** also includes information on seeking the help of a mental health professional, and how to give support to someone close to you who is experiencing symptoms of a disorder.
- **Do More for 1 in 4** provides Americans with compelling information about just how common mental health disorders are and a call to action to help those who experience them.

May is Mental Health Month.

For over 50 years, the observance of this month has reached millions of Americans with important messages about mental health.

With a century of service to the nation, Mental Health America is the country's leading nonprofit dedicated to helping all people live mentally healthier lives. We represent a growing movement of Americans who promote mental wellness for the health and well-being of the nation; every day and in times of crisis.
FREQUENTLY ASKED QUESTIONS (FAQs)—For Affiliates

What is “Do More for 1in4”?
“Do More for 1in4” is a call to action for Americans to help the one in four American adults in their lives who are living with a diagnosable, treatable mental health condition (NIMH, 2005). This statistic, as well as many others, is discussed in Mental Health America’s 2011 Case Statement. This brand platform can be used to highlight treatment and/or recovery programs in various communities across the US.

What is the purpose of “Do More for 1in4”?
Many experts now believe America is facing a mental health crisis. Mental and substance use conditions are now among the most prevalent health disorders in the United States. Mental Health America is committed to advocating for, educating and providing mental wellness programs to all Americans. We believe that everyone must understand the importance of practicing wellness and seeking treatment when needed.

How do I use the “Do More for 1in4” toolkit?
Mental Health America is pleased to provide affiliates with a comprehensive toolkit for May is Mental Health Month. The toolkit, which is branded for the Do More theme, provides you with a number of marketing tools, media materials, and print publications. As Affiliates, you are welcome to use any of these materials as you see fit to supplement your Mental Health Month programs or other programs during 2011.

Why should I promote “Do More for 1in4”?
Mental Health America will use the Do More theme (along with “Live Well! It’s Essential to Your Potential”) throughout 2011 during the national membership campaign to recruit 20,000 new members to the MHA Membership Program. Approximately 50 percent of the revenue from that program will be credited towards affiliate’s dues and—once dues are fully offset—will be distributed directly to the affiliates. Affiliates are welcome to use either theme throughout the year as stand-alone themes or as supporting themes for specific treatment/recovery programs or wellness programs in their local areas.

Is there a cost to promote “Do More for 1in4”?
No. As an affiliate of Mental Health America, the “Do More for 1in4” toolkit is available for you to download for free as well.

(see next page)
FREQUENTLY ASKED QUESTIONS (FAQs)—For Affiliates
(continued)

How can I get my community to adopt and/or promote “Do More for 1 in 4”?
Have them picture a close friend, family member, or colleague who is struggling with depression, anxiety, substance abuse, or posttraumatic stress. The damaging impact of untreated mental health issues can be widespread. We believe those who need help should know how and where to find it, that they should be nurtured and sustained throughout their recovery, and that they should be educated and coached to learn to achieve permanent wellness through prevention. Use community events like movie screenings, book discussions, panels and art exhibitions to create awareness and motivate individuals to do more for their 1 in 4.

How do I use this to as a fundraising tool in my community?
Ideally, the “Do More for 1 in 4” theme should act as a general messaging framework to introduce the local community to the specific treatment and recovery programs your affiliate offers. By highlighting affiliate programs under the broad messaging of “Do More for 1 in 4”, you are illustrating how your affiliate is doing more and inviting each person who interacts with one of your affiliate programs to turn to you to do more for their “1 in 4.” Use this as the basis for asking them to join MHA for just $5 a month.

Is a computer required to get information about “Do More for 1 in 4”?
Yes, all of the toolkit materials are uploaded in the Affiliate Portal of the MHA national Website for easy access by any affiliate. Please contact the MHA Development Department with questions about the toolkit contents.
FREQUENTLY ASKED QUESTIONS (FAQs)—
For General Public

What is “Do More for 1in4”?
“Do More for 1in4” is a call to action for Americans to help the one in four American adults in their lives who are living with a diagnosable, treatable mental health condition (NIMH, 2005). This brand platform was developed by Mental Health America, the leading nonprofit in the nation dedicated to promoting mental health.

Who is Mental Health America?
Celebrating over 100 years of mental health advocacy, Mental Health America is the country’s leading nonprofit dedicated to helping all people live mentally healthier lives. With our more than 300 affiliates nationwide, we represent a growing movement of Americans who promote mental wellness for the health and well-being of the nation—every day and in times of crisis. You can find out more about Mental Health America by visiting our website at www.mentalhealthamerica.net.

What is the purpose of “Do More for 1in4”?
Many experts now believe America is facing a mental health crisis. Mental and substance use conditions are now among the most prevalent health disorders in the United States. Mental Health America is committed to advocating for, educating and providing mental wellness programs to all Americans. We believe that everyone must understand the importance of practicing wellness and seeking treatment when needed.

Why should I “Do More for 1in4”?
Picture a close friend, family member, or colleague who is struggling with depression, anxiety, substance abuse, or posttraumatic stress. The damaging impact of untreated mental health issues can be widespread. We believe those who need help should know how and where to find it, that they should be nurtured and sustained throughout their recovery, and that they should be educated and coached to learn to achieve permanent wellness through prevention.

Is there a cost for “Do More for 1in4”?
There is no cost for “Do More for 1 in 4.” All public education resources on the MHA Website are free of charge. However, “Do More for 1 in 4” is this year’s MHA call to action to support MHA by becoming a member of our movement. Supporters can become members for as little as $5 a month and this small monthly contribution will help sustain MHA and enable us to provide the knowledge and confidence you are seeking to do more for your “1 in 4.”

(see next page)
FREQUENTLY ASKED QUESTIONS (FAQs)—
For General Public
(continued)

How can I “Do More for 1in4”? 
Become a member of Mental Health America for just $5 a month by visiting www.mentalhealthamerica.net. This simple step can save your life, or the life of your 1 in 4. Join today!

How will being a member of Mental Health America benefit me?
Whether you are someone seeking to learn about your own treatable mental health issue, such as depression, anxiety, recovery from trauma, or a substance abuse issue, or whether you know a loved one, family members, friend, or colleague who needs help, MHA can empower you to act. By becoming a member of MHA, you will become an active member of a nationwide network of consumers who benefit from MHA support each and every day. Whether through the extensive educational materials available on our Website, connections through our online issue-specific communities, or periodic electronic action alerts and updates, membership in MHA will ensure you have the tools you need to significantly improve the quality of your life and the lives of those you care about.
ANNOUNCER V/O:
One in four adults has a diagnosable mental health condition like depression, anxiety, posttraumatic stress or substance abuse. Some aspects of our culture are “toxic,” and the health and lives of all Americans are at serious risk. Who’s your 1 in 4? Mental Health America believes that everyone must understand the importance of practicing whole wellness—wellness of mind, body, and spirit—and seeking treatment when needed. Become a member of Mental Health America for just $5 a month by visiting www.mentalhealthamerica.net. This simple step can save your life, or the life of your 1 in 4. Join today!
This message is brought to you as a public service of [Affiliate] and [this radio station].

ANNOUNCER V/O:
Picture a close friend, family member, or colleague who is struggling with depression, anxiety, substance abuse, or posttraumatic stress. The damaging impact of untreated mental health issues can be widespread. Who’s your 1 in 4? We believe those who need help should know how and where to find it, that they should be nurtured and sustained throughout their recovery, and that they should be educated and coached to learn to achieve permanent wellness through prevention. Become a member of Mental Health America for just $5 a month by visiting www.mentalhealthamerica.net. This simple step can save your life, or the life of your 1 in 4. Join today!
This message is brought to you as a public service of [Affiliate] and [this radio station].

ANNOUNCER V/O:
Many experts now believe America is facing a mental health crisis. Millions of Americans are only one life’s event away from needing help with a fully treatable mental health issue such as depression, anxiety, posttraumatic stress or substance abuse. Mental Health America is committed to advocating for, educating and providing mental wellness programs to all Americans. We need your support now! Become a member of Mental Health America for just $5 a month by visiting www.mentalhealthamerica.net. This simple step can save your life, or the life of your 1 in 4. Join today!
This message is brought to you as a public service of [Affiliate] and [this radio station].
SAMPLE PRESS RELEASE

FOR IMMEDIATE RELEASE: CONTACT:

May is Mental Health Month: Do More For 1 in 4
Mental Health, Substance Use Conditions Common, But Treatable;
Individuals Can Live Productive Lives

This May is Mental Health Month, [AFFILIATE] is calling on the community to help the 1 in 4 American adults who live with a diagnosable, treatable mental health condition and understand how important mental health is to overall health.

“We want people to know that while mental health and substance use conditions are common, they are extremely treatable and individuals go on to recover and lead full and productive lives,” said [NAME and TITLE OF MHA EXECUTIVE].

[NAME] said too many people who are living with a mental health condition never seek or receive help due to stigma, lack of information, cost, or lack of health care insurance coverage—as high as 50 percent.

“We want to change equation and help our families, friends and co-workers who may be reluctant to ask for help or don’t know where to find it.”

[INSERT PROGRAMS OF LOCAL AFFILIATE]

[INSERT PARAGRAPH ON PARITY: The passage of the federal mental health parity and addiction equity act also expands access to care for many people. That law, which applies to groups of more than 50 employees, doesn’t require coverage for mental health and substance use conditions. But if it does, that coverage must be on a par with coverage for other medical conditions. Higher deductibles, steeper co-pays and other restrictions are no longer allowed for mental health and substance abuse treatment.]

“We now recognize how essential mental health is to our overall health and well-being,” [NAME] said. “And we know how events and life changes can affect us. It could be a veteran struggling with the invisible wounds of war or someone coping with the stress of caregiving or divorce or losing a loved one. Sometimes, people are dealing with depression associated with a chronic disease such as diabetes, cancer or hypertension. And traumatic events like the BP oil spill can take a huge toll on mental health.”

[NAME] said there are tested tools available that can help every person face difficult times and challenges and improve their resiliency.

“We have incredible amount of knowledge about how to identify and even prevent mental health conditions, [he/she] said. “It’s important that we spread the word about it.”
Mental Health Month was created more than 50 years by [AFFILIATE’S] national organization, Mental Health America, to raise awareness about mental health conditions and the importance of mental wellness for all.

[Description of local MHA affiliate]

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May is Mental Health Month: Do More For 1 in 4

1 in 4: That’s how many adult Americans live with a diagnosable mental health condition.

While mental health and substance conditions are common, they are extremely treatable and individuals go on to recover and lead full and productive lives.

This May is Mental Health Month, [AFFILIATE] is spreading the word about mental health and how important it is to overall health.

Mental Health Month was created more than 50 years ago by [AFFILIATE’S] national organization, Mental Health America, to raise awareness about mental health conditions and the importance of mental wellness for all.

One sad fact is that many people living with a mental health condition—as high as 50 percent—never seek or receive help due to stigma, lack of information, cost or lack of health insurance coverage. Many people may be reluctant to ask for help or don’t know where to find it.

But there are many community and national resources that can help people find support and treatment.

The passage of the federal mental health parity and addiction equity act also expands access to care. That law, which applies to groups of more than 50 employees, doesn’t require coverage for mental health and substance use conditions. But if it does, that coverage must be on a par with coverage for other medical conditions. Higher deductibles, steeper co-pays and other restrictions are no longer allowed for mental health and substance abuse treatment.

It’s important that more people have access to treatment and services because there is a great deal of knowledge about how to identify and even prevent mental health conditions. And there are tested tools available that can help every person face difficult times and challenges and improve their resiliency.

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Encourage your local public officials to go on the record in support of mental health. Below, please find a sample proclamation that designates May as Mental Health Month. An official signing of a proclamation is a perfect occasion for a news event, photo opportunity or other activity.

**SAMPLE PROCLAMATION**

**Mental Health Month 2011**  
“Do More for 1in4”  
“Live Well! It’s Essential for Your Potential”

WHEREAS, mental health is essential to everyone’s overall health and well-being; and

WHEREAS, all Americans experience times of difficulty and stress in their lives; and

WHEREAS, prevention is an effective way to reduce the burden of mental health conditions; and

WHEREAS, there is a strong body of research that supports specific tools that all Americans can use to better handle challenges, and protect their health and well-being; and

WHEREAS, mental health conditions are real and prevalent in our nation; and

WHEREAS, with effective treatment, those individuals with mental health conditions can recover and lead full, productive lives; and

WHEREAS, each business, school, government agency, healthcare provider, organization and citizen shares the burden of mental health problems and has a responsibility to promote mental wellness and support prevention efforts.

THEREFORE, I [NAME OF PUBLIC OFFICIAL], do hereby proclaim May 2011 as Mental Health Month in [STATE OR COMMUNITY]. As the [TITLE OF LOCAL OFFICIAL], I also call upon the citizens, government agencies, public and private institutions, businesses and schools in [STATE OR COMMUNITY] to recommit our community to increasing awareness and understanding of mental health, the steps our citizens can take to protect their mental health, and the need for appropriate and accessible services for all people with mental health conditions.
Dear [REPRESENTATIVE/SENATOR] [LAST NAME]:

The recent tragedy in Tucson reminds us all of the importance of protecting state funding for the prevention, identification and effective treatment of mental illness in children and youth. While we may never know the whole story, signs point to untreated mental illness as a potentially significant factor. As a legislator, you have the opportunity to protect mental health spending and to make the early identification of mental illness and effective treatment services a priority in the 2012 budget.

Mental illness is real, treatable and impacts approximately 20 percent of our nation’s youth. Yet, the majority do not receive treatment. When left untreated, these disorders can lead to tragic consequences, including the loss of critical developmental years, school drop-out, involvement with law enforcement and suicide.

The good news is that when we identify and treat mental illness early, we can improve outcomes and help our youth lead productive lives. We ask our state legislators to safeguard our youth by taking the following six steps:

1. Preserve mental health budgets that provide needed mental health services and supports for children, their families and communities;
2. Require state Medicaid officials to follow the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) provisions of the federal law;
3. Require schools to become well-informed about the early warning signs of mental illness;
4. Ensure that schools have adequate resources to provide and link students with effective mental health services and supports;
5. Require systems that serve children, youth and young adults to provide an appropriate array of effective mental health services and supports; and
6. Ensure that families understand how to access these services.

We understand that STATE is facing unprecedented budget challenges, but as the events in Tucson remind us, children with mental illness cannot wait for better budget years. Service cuts devastate our children and families and threaten the health and well-being of our communities. Funds must be available for the prevention, identification and treatment of mental illness in children and youth.

We stand ready to work with you to become part of the solution.

Sincerely,

[NAME]
[CITY], [STATE]

Part of a national coalition of parents, educators and mental health professionals united to ensure the mental health and well-being of our nation’s children and adolescents.

American Academy of Child and Adolescent Psychiatry (AACAP)
American School Counselor Association (ASCA)
Child and Adolescent Bipolar Foundation (CABF)
Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)
Mental Health America (MHA)
National Alliance on Mental Illness (NAMI)
Which of these Americans is living with a mental health condition?

Did you know that 1 in 4 adults struggle with a treatable mental health condition each year? That’s almost 60 million people!

Who is your 1in4? Do you know a family member, friend, veteran, or colleague quietly struggling with depression, ADHD, posttraumatic stress disorder (PTSD), substance abuse, or some other mental health issue? We can help you help them!

Mental Health America is the nation’s largest and oldest community-based network dedicated to helping each of us achieve true wellness—wellness of mind, body, and spirit—because there is no health without mental health!

Show your support on the national and local level—join Mental Health America today for just $5 a month at www.MentalHealthAmerica.net
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Does Your 1 in 4 Have AD/HD?

While the condition is most often associated with children, Attention Deficit Hyperactivity Disorder (ADHD) can continue into adulthood for many individuals; and there are some adults who may not even know that they have the disorder. Adults who are living with the condition, and especially those who are undiagnosed and untreated, may be experiencing a number of problems, some of which stem directly from the disorder and others that are the result of associated adjustment patterns.

Symptoms of an adult with ADHD may include:

- Distractibility
- Disorganization
- Forgetfulness
- Procrastination
- Chronic lateness
- Chronic boredom
- Anxiety
- Depression
- Low self-esteem
- Mood swings
- Employment problems
- Restlessness
- Substance abuse or addictions
- Relationship problems

The symptoms of ADHD can be variable and situational, or constant. Some people with ADHD can concentrate if they are interested or excited, while others have difficulty concentrating under any circumstances. Some avidly seek stimulation, while others avoid it. Some become oppositional, ill-behaved and, later, antisocial; others may become ardent people-pleasers. Some are outgoing, and others, withdrawn.

What Causes ADHD?

The exact cause or causes of ADHD are not conclusively known. Scientific evidence suggests that in many cases the disorder is genetically transmitted and is caused by an imbalance or deficiency in certain chemicals that regulate the efficiency with which the brain controls behavior.

Some studies suggest a potential link to environmental factors, dietary factors such as food additives or sugar, and inner-ear problems or “visual motor” difficulties as causes of ADHD.

The Diagnosis of ADHD in Adults

A multi-factored evaluation of an individual is important in the diagnosis of ADHD. Diagnostic assessment of adults should be made by a licensed mental health professional and the assessment should look for the presence of lifelong patterns of behavior that indicate underlying attention and impulse problems.

ADHD with hyperactivity is characterized by symptoms of inattention, impulsivity and hyperactivity which have an onset before age seven, which persist for at least six months, and which are not due primarily to other psychiatric disorders or environmental circumstance, such as reaction to family stresses.

The primary characteristic of ADHD without hyperactivity is significant inattentiveness. Studies of children with this diagnosis indicate that they show more signs of anxiety and learning problems, and qualitatively different inattention.

do more for 1 in 4
Why Identify ADHD In Adults?

Identification of adults who have ADHD and appropriate management of their educational, personal and social development improves their chances for a successful outcome. Effective intervention can improve self-esteem, work performance, skills and educational achievement.

A proper diagnosis of ADHD can help an adult put his or her difficulties into perspective. These individuals have often developed low self-esteem and negative perceptions of themselves as a result of cumulative academic, social and vocational failures.

After Diagnosis

The methods of treatment supported by professionals may include a combination of education for the adult and his or her family and close friends, educational/employment accommodations, medication, and psychotherapy. Appropriate treatment is determined according to the severity of an individual’s disorder and the type and number of associated problems.

Some tips that adults with ADHD have found useful include:

- **Use internal structure** like date books, lists, notes to oneself, color coding, routines, reminders and files.

- **Choose “good addictions,”** for example, select exercise or other healthy activities for a regular structured “blow-out” time.

- **Set up a rewarding environment** by designing projects, tasks, etc. to minimize or eliminate frustration. Break large tasks into smaller ones; prioritize.

- **Use “time-outs”** to calm down and regain perspective when upset, overwhelmed or angry. Walk away from a situation if needed.

- **Use humor.** It’s useful if partners and colleagues are constantly providing an aggressive push to help one stay on track as long as it’s done with humor and sensitivity. Learn to view symptoms of ADHD with humor and to joke with close friends and relatives about symptoms such as getting lost, forgetfulness, etc.

- **Become educated and an educator.** Read books. Talk to professionals. Talk to other adults who have ADHD. Let people who matter know about personal strengths and weaknesses related to ADHD. Be an advocate.

Other Resources

**Children and Adults with Attention Deficit Disorders (CHADD)**  
Phone Number: (301) 306-7070  
Toll-Free Number: (800) 233-4050  
Website URL: www.chadd.org

**National Institute of Mental Health**  
Phone Number: (301) 443-4513  
Toll Free Number: 1-866-615-6464  
Website URL: www.nimh.nih.gov
Does Your 1 in 4 Have an Anxiety Disorder?

Most people experience feelings of anxiety before an important event such as a big exam, business presentation or first date. Anxiety disorders, however, are illnesses that cause people to feel frightened, distressed and uneasy for no apparent reason. Left untreated, these disorders can dramatically reduce productivity and significantly diminish an individual’s quality of life.

How Common Are Anxiety Disorders?

Anxiety disorders are among the most common mental illnesses in America; more than 40 million people are affected by these debilitating illnesses each year.

What Are the Different Kinds of Anxiety Disorders?

**Panic Disorder**
Characterized by panic attacks, which are sudden feelings of terror that strike repeatedly and without warning. Physical symptoms include chest pain, heart palpitations, shortness of breath, dizziness, abdominal discomfort, feelings of unreality, and fear of dying.

**Obsessive-Compulsive Disorder**
Repeated, intrusive and unwanted thoughts or rituals that seem impossible to control.

**Post-Traumatic Stress Disorder**
Persistent symptoms that occur after experiencing a traumatic event such as war, rape, child abuse, natural disasters, or being taken hostage. Nightmares, flashbacks, numbing of emotions, depression, and feeling angry, irritable, distracted and being easily startled are common.

**Phobia**
Extreme, disabling and irrational fear of something that really poses little or no actual danger; the fear leads to avoidance of objects or situations and can cause people to limit their lives.

**Generalized Anxiety Disorder**
Chronic, exaggerated worry about everyday routine life events and activities, lasting at least six months; almost always anticipating the worst even though there is little reason to expect it. Often accompanied by physical symptoms, such as fatigue, trembling, muscle tension, headache, or nausea.
What Are the Treatments for Anxiety Disorders?

Treatments have been largely developed through research conducted by research institutions. They are extremely effective and often combine medication or specific types of psychotherapy.

More medications are available than ever before to effectively treat anxiety disorders. These include antidepressants or benzodiazepines. If one medication is not effective, others can be tried. The most effective form of psychotherapy used to treat anxiety disorders is cognitive-behavioral therapy. Cognitive-behavioral therapy teaches patients to understand their thinking patterns so they can react differently to the situations that cause them anxiety.

Is it Possible for Anxiety Disorders to Coexist with Other Physical or Mental Disorders?

It is common for an anxiety disorder to accompany another anxiety disorder, including such illnesses as substance abuse. Anxiety disorders can also coexist with physical disorders. In such instances, these disorders will also need to be treated. Before undergoing any treatment, it is important to have a thorough medical exam to rule out other possible causes.

Other Resources

For help finding treatment, support groups, medication information, prescription assistance, our local Mental Health America affiliate offices, etc. we encourage you to use the resources found in the Frequently Asked Questions and Answers (FAQs) section of our website at www.mentalhealthamerica.net/go/information/faqs. Our FAQs are set up to help you link directly to the treatment, support groups, medication information, sections of the following websites and to many additional resources. If you or someone you know is in crisis, please call your local crisis center or 1-800-273-TALK (8255) to reach a 24 hour crisis center.

Anxiety Disorders Association of America
(240) 485-1001
www.adaa.org

Freedom From Fear
888-442-2022
www.freedomfromfear.org

Obsessive-Compulsive Foundation
(203) 401-2070
www.ocfoundation.org

National Institute of Mental Health
866-615-6464
www.nimh.nih.gov

PTSD-Specific Resources

Sidran Institute
888-825-8249
www.sidran.org

Military PTSD Information
www.mentalhealthamerica.net/reunions/resources.cfm

Witness Justice
800-4WJ-HELP
www.witnessjustice.org/index.cfm

National Center for Victims of Crime (NCVC)
(202) 467-8700
www.ncvc.org

SAMHSA National Center for Trauma-Informed Care
http://mentalhealth.samhsa.gov/nctic/trauma.asp

Survivors Art Foundation
www.survivorsartfoundation.org

The content of this fact sheet was adapted from material published by the National Institute of Mental Health and the Mayo Clinic.
Bipolar disorder, also known as manic depression, is an illness involving one or more episodes of serious mania and depression. The illness causes a person's mood to swing from excessively "high" and/or irritable to sad and hopeless, with periods of a normal mood in between.

Bipolar disorder typically begins in adolescence or early adulthood and continues throughout life. It is often not recognized as an illness and people who have it may suffer needlessly for years. Bipolar disorder can be extremely distressing and disruptive for those who have this disease, their spouses, family members, friends and employers. Although there is no known cure, bipolar disorder is treatable, and recovery is possible. Individuals with bipolar disorder have successful relationships and meaningful jobs. The combination of medications and psychotherapy helps the vast majority of people return to productive, fulfilling lives.

What causes bipolar disorder?

Although a specific genetic link to bipolar disorder has not been found, studies show that children with a parent or sibling diagnosed with bipolar disorder are four to six times more likely to develop the illness. It is also possible that people may inherit a tendency to develop the illness, which can then be triggered by environmental factors such as distressing life events.

The presence of bipolar disorder indicates a biochemical imbalance which alters a person's moods. This imbalance is thought to be caused by irregular hormone production or to a problem with certain chemicals in the brain, called neurotransmitters, which act as messengers to our nerve cells.

What are the symptoms of bipolar disorder?

Bipolar disorder is often difficult to recognize and diagnose. It causes a person to have a high level of energy, unrealistically expansive thoughts or ideas, and impulsive or reckless behavior; these intense emotional states are also referred to as "mood episodes." These symptoms may feel good to a person, which may lead to denial that there is a problem.

Another reason bipolar disorder is difficult to diagnose is that its symptoms may appear to be part of another illness or attributed to other problems such as substance abuse, poor school performance, or trouble in the workplace.

**Symptoms of Mania or Manic Episode (which can last up to three months if untreated):**

- Excessive energy, activity, restlessness, racing thoughts and rapid talking.
- Denial that anything is wrong.
- Extreme "high" or euphoric feelings—a person may feel "on top of the world."
- Easily irritated or distracted.
- Decreased need for sleep.
- Unrealistic beliefs in one's ability and powers—a person may experience feelings of exaggerated confidence or unwarranted optimism.
- Uncharacteristically poor judgment.
- Sustained period of behavior that is different from usual.
- Abuse of drugs, particularly cocaine, alcohol or sleeping medications.
- Provocative, intrusive, or aggressive behavior—a person may become enraged or paranoid if his or her grand ideas are stopped or excessive social plans are refused.
- Behaving impulsively and taking part in a lot of pleasurable, high-risk behaviors, such as spending sprees, impulsive sex, and impulsive business investments.
Symptoms of Depression or Depressive Episode—Some people experience periods of normal mood and behavior following a manic phase, however, the depressive phase will eventually appear. Symptoms of depression include:

- Persistent sad, anxious, or empty mood.
- Sleeping too much or too little, middle-of-the-night or early morning waking.
- Reduced appetite and weight loss or increased appetite and weight gain.
- Loss of interest or pleasure in activities, including sex.
- Irritability or restlessness.
- Difficulty concentrating, remembering or making decisions.
- Fatigue or loss of energy
- Persistent physical symptoms that don’t respond to treatment (such as chronic pain or digestive disorders).
- Feeling guilty, hopeless or worthless.
- Thoughts of death or suicide, including suicide attempts.

Treatment

Though there is no cure, treatment of bipolar disorder is critical for recovery. A combination of medication, professional help and support from family, friends and peers help individuals with bipolar disorder stabilize their emotions and behavior. It is suggested that those with bipolar disorder receive guidance, education and support from a mental health professional to help deal with personal relationships, maintain a healthy self-image and ensure compliance with his or her treatment.

Support and self-help groups are also an invaluable resource for learning coping skills, feeling acceptance and avoiding social isolation. Friends and family should join a support group to better understand the illness so that they can continue to offer encouragement and support to their loves ones.

Take These Steps to Get Help for Bipolar Disorder

1. **Call a doctor** if you suspect that you have bipolar disorder. Call your family doctor if you feel more comfortable starting with him or her. Explain your moods, how quickly they change and how often they occur. Your doctor can help you find someone experienced in treating bipolar disorder.

2. **Meet with a mental health professional.** Just as you would see a cardiologist if you found out you had a heart problem, you need to see someone who specializes in mental health for bipolar disorder.

3. **Keep all appointments.** Some days you may not feel like going to the doctor or therapist, but it is important that you keep all of your appointments. Ask a friend to go along if you don’t feel like going alone.

4. **Take your medicines the right way.** Take your medications faithfully (even if you’re feeling fine). Make sure you follow the directions on the bottle and take all the doses. If you have any questions, contact your doctor.

5. **Take care of your health.** Get enough sleep; set regular times to go to bed and wake up. Irregular sleep may set off your mood swings. Take a walk or exercise every day. Eat healthy foods. Avoid using drugs or alcohol.

6. **Try to reduce stress** in your life as much as possible. Learn to manage the stressful things in your life. Also, learn to spot the signs of an upcoming mood change, so you can act on it quickly.

Other Resources

**Depression and Bipolar Support Alliance (DBSA)**
Phone Number: (312) 642-0049
Toll-Free Number: 800-826-3632
Website URL: www.dbsalliance.org

**National Institute of Mental Health**
Phone Number: (301) 443-4513
Toll Free Number: 866-615-6464
Website URL: www.nimh.nih.gov

**International Foundation for Research and Education on Depression (iFred)**
Phone: 800-239-1265
Website URL: http://www.ifred.org/
Does Your 1 in 4 Have Depression?

Clinical Depression is a real, common and treatable mental health condition.

Basic Facts about Clinical Depression

- Clinical depression is one of the most common mental illnesses, affecting more than 19 million Americans each year.[1] This includes major depressive disorder, manic depression and dysthymia, a milder, longer-lasting form of depression.

- Depression causes people to lose pleasure from daily life, can complicate other medical conditions, and can even be serious enough to lead to suicide.

- Depression can occur to anyone, at any age, and to people of any race or ethnic group. Depression is never a “normal” part of life, no matter what your age, gender or health situation.

- Unfortunately, although about 70% of individuals with depression have a full remission of the disorder with effective treatment, fewer than half of those suffering from this illness seek treatment.[2] Too many people resist treatment because they believe depression isn’t serious, that they can treat it themselves or that it is a personal weakness rather than a serious medical illness.

Treatments for Clinical Depression

Clinical depression is very treatable, with more than 80% of those who seek treatment showing improvement.[3] The most commonly used treatments are antidepressant medication, psychotherapy or a combination of the two. The choice of treatment depends on the pattern, severity, persistence of depressive symptoms and the history of the illness. As with many illnesses, early treatment is more effective and helps prevent the likelihood of serious recurrences. Depression must be treated by a physician or qualified mental health professional.
Symptoms of Clinical Depression

- Persistent sad, anxious or “empty” mood
- Sleeping too much or too little, middle of the night or early morning waking
- Reduced appetite and weight loss, or increased appetite and weight gain
- Loss of pleasure and interest in activities once enjoyed, including sex
- Restlessness, irritability
- Persistent physical symptoms that do not respond to treatment (such as chronic pain or digestive disorders)
- Difficulty concentrating, remembering or making decisions
- Fatigue or loss of energy
- Feeling guilty, hopeless or worthless
- Thoughts of suicide or death

If you have five or more of these symptoms for two weeks or more, you could have clinical depression and should see your doctor or a qualified mental health professional for help.

Causes of Clinical Depression

Many things can contribute to clinical depression. For some people, a number of factors seem to be involved, while for others a single factor can cause the illness. Oftentimes, people become depressed for no apparent reason.

Biological - People with depression typically have too little or too much of certain brain chemicals, called “neurotransmitters.” Changes in these brain chemicals may cause or contribute to clinical depression.

Cognitive - People with negative thinking patterns and low self-esteem are more likely to develop clinical depression.

Gender - Women experience clinical depression at a rate that is nearly twice that of men. While the reasons for this are still unclear, they may include the hormonal changes women go through during menstruation, pregnancy, childbirth and menopause. Other reasons may include the stress caused by the multiple responsibilities that women have.

Co-occurrence - Clinical depression is more likely to occur along with certain illnesses, such as heart disease, cancer, Parkinson’s disease, diabetes, Alzheimer’s disease and hormonal disorders.

Medications - Side effects of some medications can bring about depression.

Genetic - A family history of clinical depression increases the risk for developing the illness.

Situational - Difficult life events, including divorce, financial problems or the death of a loved one can contribute to clinical depression.

References

Getting Help for Your 1 in 4

Some people find it really hard to say what they want and don’t want from their treatment. But over the years, more and more people with mental health conditions realize it’s their right to speak up. In fact, some people call themselves mental health “consumers” to show that they can choose what services to purchase and where.

Where to Go for Help

Where you go for help will depend on who has the problem (an adult or child) and the nature of the problem and/or symptoms. Often, the best place to start is your local mental health organization. Visit our “Affiliate Finder” at www.mentalhealthamerica.net/go/searchMHA to search for a local affiliate.

First Steps to Finding Help

• You can get referrals from your family doctor, clergy or local Mental Health America office (which also may provide mental health care services) and crisis centers. Consider getting a few names, so you can interview more than one person before choosing.

• Your insurance company can provide a list of providers who are in your plan.

• Eligible veterans can get care through the U.S. Department of Veterans Affairs. For more information, go to www.va.gov/health or call 1-877-222-8387.

• You can find affordable mental health services through the Substance Abuse and Mental Health Services Administration. Visit http://mentalhealth.samhsa.gov/databases/ or call 1-877-726-4727.

• Your local health department’s mental health division or community mental health center provides free or low-cost treatment and services on a sliding scale. These services are state funded and are obligated to first serve individuals who meet “priority population criteria” as defined by the state Mental Health Department.

• Your company’s employee assistance program (EAP) can issue a referral to a provider. Reach out to your Human Resources office to get more information about your company’s EAP.

• Medicare offers a list of participating doctors on its website, www.medicare.gov. (Click on “Find a Doctor”).

• Providers who accept Medicaid may be listed by your state Medicaid office, which you can find by using the map at www.namd.org.

Which Mental Health Professional Is Right For Me?

Psychiatrist is a medical doctor with special training in the diagnosis and treatment of mental and emotional illnesses. Like other doctors, psychiatrists are qualified to prescribe medication. A Child/Adolescent Psychiatrist has special training in the diagnosis and treatment of emotional and behavioral problems in children.

Psychologist has a doctoral degree in psychology, two years of supervised professional experience, including a year long internship from an approved internship and is trained to make diagnoses and provide individual and group therapy.

Clinical Social Worker is a counselor with a master’s degree in social work trained to make diagnoses and provide individual and group counseling.

Licensed Professional Counselor is a counselor with a master’s degree in psychology, counseling or a related field trained to diagnose and provide individual and group counseling.

Mental Health Counselor is a counselor with a master’s degree and several years of supervised clinical work experience trained to diagnose and provide individual and group counseling.

Certified Alcohol and Drug Abuse Counselor is a counselor with specific clinical training in alcohol and drug abuse trained to diagnose and provide individual and group counseling.

Marital and Family Therapist is a counselor with a master’s degree, with special education and training in marital and family therapy trained to diagnose and provide individual and group counseling.

Pastoral Counselor is a member of clergy with training in clinical pastoral education trained to diagnose and provide individual and group counseling.
You Called a Mental Health Professional...Now What Do You Do?

Spend a few minutes talking with him or her on the phone, ask about their approach to working with patients, their philosophy, whether or not they have a specialty or concentration. If you feel comfortable talking to the counselor or doctor, the next step is to make an appointment.

On your first visit, the therapist or doctor will want to get to know you and why you called him or her. The therapist will want to know—what you think the problem is; about your life; what you do; where you live and with whom you live. It is also common to be asked about your family and friends. This information helps the professional to assess your situation and develop a plan for treatment.

The following are a few common types of therapy:

- **Cognitive-behavioral therapy (CBT)** has two main aspects. The cognitive part works to develop helpful beliefs about your life. The behavioral side helps you learn to take healthier actions.

- **Interpersonal therapy** focuses largely on improving relationships and helping a person express emotions in healthy ways.

- **Family therapy** helps family members communicate, handle conflicts and solve problems better.

- **Psychodynamic therapy** helps people develop a better understanding about their unconscious emotions and motivations that can affect their thoughts and actions.

- **Art therapy** can include using music, dance, drawing and other art forms to help express emotions and promote healing.

- **Psychoeducation** helps people understand mental health conditions and ways to promote recovery.

As you progress through the therapeutic process, you should begin to feel gradual relief from your distress, to develop self assurance and have a greater ability to make decisions and increased comfort in your relationship with others. Therapy may be painful and uncomfortable at times but episodes of discomfort occur during the most successful therapy sessions. Mental health treatment should help you cope with your feelings more effectively.

What about Self-Help/Support Groups?

Peer support can be an important addition to the help you receive from professional mental health providers. Many people find self-help support groups a valuable resource. These groups, led by a layperson, are designed to bring together people with similar mental health or substance abuse conditions. People with mental health conditions—who often refer to themselves as mental health consumers—have organized other types of peer supports, including drop-in centers, warm-lines and training courses in wellness and recovery.

Other Resources

For help finding treatment, support groups, medication information, prescription assistance, our local Mental Health America affiliate offices, etc. we encourage you to use the resources found in the Frequently Asked Questions and Answers (FAQs) section of our website at www.mentalhealthamerica.net/go/information/faqs.

Our FAQs are set up to help you link directly to the treatment, support groups, medication information, sections of the following websites and to many additional resources. If you or someone you know is in crisis, please call your local crisis center or 1-800-273-TALK (8255) to reach a 24 hour crisis center.

Mental Health America
2000 N. Beauregard Street, 6th Floor
Alexandria, VA 22311
(703) 684-7722
www.mentalhealthamerica.net
How to Support Your 1 in 4

Supporting Someone Close to You

If you have a family member or friend who has been diagnosed with a serious mental illness, you are probably wondering what you can do to help. Although new forms of therapy, medications and community services have enabled many individuals to lead full, independent lives, support from family, friends and peers remains an essential element in the recovery process.

There are many ways you can help someone with a mental illness navigate the treatment system and work towards recovery. As in any relationship, emotional and practical support is always needed. Occasionally, family and friends participate in someone’s recovery by offering transportation, financial and housing assistance. Whatever form it takes, your support, compassion and respect matter.

Knowing when and how to give support can be difficult to figure out, however. Though you may want to protect your family member or friend, remember that learning to manage one’s own affairs, pursue goals and become independent are important aspects of an individual’s recovery from mental illness.

Medication Issues

Many individuals with mental illness take some type of medication to help control their symptoms. For those with a serious mental illness, such as schizophrenia or bipolar disorder, this may involve taking antipsychotic medications. Although antipsychotic treatments have improved over the past 10 years, they still can cause side effects that lead to other problems that can make your friend or family member feel even worse. As a result, they may stop taking their medication.

Individuals with serious mental illness may not feel comfortable discussing their symptoms, feelings or medication side effects with family members and friends. However, a key element in recovery is productive, two-way communication between patient and doctor – what Mental Health America calls a Dialogue for Recovery. A Dialogue for Recovery that is based on mutual respect with a team of health care professionals can make a big difference in helping your family member or friend to recover.
Support Strategies

Here are some tips for supporting someone close to you:

• Educate yourself about the diagnosis, illness symptoms and side effects from antipsychotic treatments and other medications. Local Mental Health America affiliates, public libraries and the Internet are good resources to learn about mental illnesses and treatment options.

• Recognize that your family member or friend may be scared and confused after receiving a diagnosis. Though some people are relieved to receive a diagnosis and actively seek treatment, it may feel devastating to others and bring on stressful feelings.

• Listen carefully to your family member or friend and express your understanding back to him or her. Recognize the feelings he or she is experiencing and don’t discount them, even if you believe them to be symptoms of the illness.

• Encourage your family member or friend to become an active member with his or her treatment team to gain knowledge about what treatments and services will help in his or her recovery.

• Recognize that it may take time for your family member or friend to find the proper medications and dosages that work.

• Understand that recovery from mental illness isn’t simply a matter of “just staying on one’s medications.” Self-esteem, social support and a feeling of contributing to society are also essential elements in the recovery process.

• Encourage your family member or friend to speak immediately to his or her healthcare provider about any problems related to medications. Your support in encouraging an ongoing Dialogue for Recovery can benefit your loved one’s recovery.

• Obtain the Antipsychotic Side Effects Checklist (ASC) and help your family member or friend fill it out. Only do so, however, if they have indicated that your help is desired. Encourage them to bring it to the next doctor’s appointment. A copy of the checklist is available in the Dialogue for Recovery section of MHA’s Web site.

• Offer to accompany your family member or friend to medical and other appointments and, if he or she wants you to, discuss medication and side effects with the doctor and the treatment team of social workers, counselors, nurses or other professionals.

• Always respect the individual’s need for and right to privacy. A person with a mental illness has the same right to be treated with dignity and respect as any other person.

For more information and useful tips, check out the “Mental Illness and the Family” series at www.mentalhealthamerica.net/go/supporting-family-and-friends.

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