

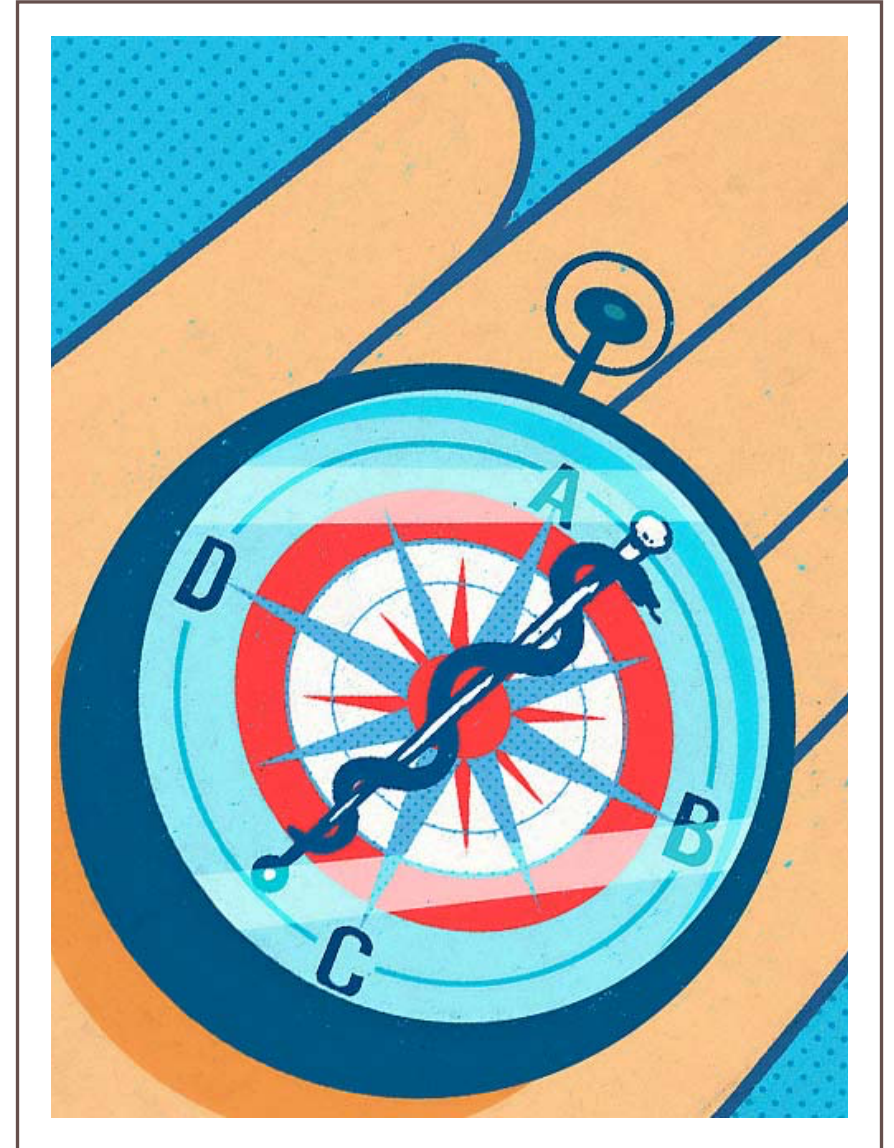
Navigating a Mental Health Crisis: Strategies for Preparing and Responding

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Purpose

- Discuss family questions and concerns regarding mental health crisis
- Provide strategies for responding to and coping with a crisis
- Review resources for support
- Address stigma related to mental health
- Discuss ideas about responses and support outside the family system



I. How to Approach Difficult Situations At Home

- **What types of difficult situations do you experience at home with your family member?**

Responses:

- Lack of motivation
- Lack of understanding
- Ranting for long-periods of time (doom and gloom, negative thinking)
- Lack of insight
- Experiences stress doing something new or unfamiliar
- Lack of emotional expression
- Change in routine
- Responding to delusions or hallucinations
- Anxiety
- Flip-flop on decisions or ambivalence
- Engaging in odd behaviors that could result in trouble (police, outside attention)

Categories:

- **1) Lack of engagement or withdrawn**
- **2) Hesitation to engage in new activities**
- **3) Idiosyncratic thinking or behavior**
- **4) Symptoms (anxiety, hallucinations, delusions)**

I. How to Approach Difficult Situations At Home

- **How do you approach these difficult situations?**

Responses:

- Not doing much – fear that trying to motivate would create relapse
- Patience
- Trying to keep a routine as best as possible
- Pursue distraction techniques / shift gears
- Taking time with family member to focus on them / listen
- Make suggestions versus telling family member what to do
- Structure activities that are outside and promote being involved in the community
- Acknowledge the difficulties or challenges
- Set boundaries or communication strategies ahead of time
- Being out in nature, taking walks, yoga, etc.
- Small successes – focus on the positive
- Establish realistic expectations

Categories:

- **1) Structure activities or distraction techniques**
- **2) Communication strategies and boundaries**
- **3) Get out or change of environment**

What is a Mental Health Crisis?

- The person cannot resolve a situation with the skills and resources available.
- The person's behaviors put them at risk of harming themselves or others.
- Without crisis responding or intervention, the person is likely to have significantly reduced levels of functioning (*e.g. placed in a more restrictive setting like the hospital or jail*)

Warning Signs or Relapsing Behaviors

- **What are your perceptions of risk or relapsing behaviors?**

- Responses:

- Lack of sleep or too much sleeping
 - Agitation (at night) or Irritability
 - Anger
 - Pacing or walking
 - Talking excessively
 - Expressing delusional thoughts
 - Decline in personal hygiene
 - Nightmares
 - Lack of concentration or decline in cognitive functioning
 - Extreme withdrawal / isolation
 - Anxiety and/or depression
 - Avoidance of daily activities
 - Not eating
 - Substance abuse (increased use)
 - Distrust or paranoia
 - Grandiosity

Warning Signs or Relapsing Behaviors

- **How do you separate those from normal changes in mood and behavior?**

Responses:

- Longer duration of symptoms
- Degree of change
- Routine changes and impacts functioning
- Check in with medical professionals
- Clinical information – best ways to disclose

- **How do you assess safety in your home?**

Responses:

- Medication is kept in a secure location
- Setting limits and boundaries (e.g. what is watched on TV, looked at online)
- Safeguard against negative online posting
- Hiding knives or sharp objects
- Establish power of attorney and living will

Signs of a Crisis

- Inability to cope with daily tasks
 - Hygiene, eating, sleep difficulties
- Rapid mood swings
- Increased energy or pacing
- Disorganized or delusional speech
- Suicidal ideation or behavior

1 in 5 adults:
43.8 million or 18.5%
experience mental illness
in a given year

*(National Institute of
Mental Health – NIMH)*

- Increased agitation
 - Verbal threats
 - Physical violence
 - Destroys property
 - Inappropriate language
- Abusive behavior
 - Hurts others
 - Self-injury
 - Drug/alcohol abuse

Signs of a Crisis

- May not recognize family/friends
- Has increasingly strange ideas, confused, may hear voices or have perceptual experiences
 - (e.g. ringing, buzzing, shapes, shadows, figures)
- Isolation from work, family, friends
- Less interested in usual activities
- Unexplained physical symptoms
- Facial expressions look different, headaches, stomach aches, complaints of not feeling well

Mental health crisis can look different for different people → Talk with your family member about what a crisis feels like or would be like for them.

Potential Causes & Triggers of Symptoms

- Genetics
 - Predisposition for mental health symptoms
- Biology
 - Hormones
 - Nutrition
 - Substance use
- Stressors
 - Major life changes
 - Daily stressors (*social, academic, occupational, financial*)
 - Trauma

Responding & Coping

- **What are your ideas about how to cope with or respond to someone in a crisis?**

Responses:

- Establishing a power of attorney or living will (approach by normalizing)
- Discuss suicidal ideation → separate hopelessness and active suicidal ideation
- Establish common language
- Collaborate with providers or crisis intervention services
- Knowing the options beforehand (e.g. emergency room, acute hospitalization, community emergency services)
- Peer support specialist

Guidelines for De-escalation

- Ask how you can help
- Use clear language
- Use “I” statements
- Present self as a calming influence
- Use non-threatening body language
 - No touching, shouting or sudden movements
- Focus on the “Here and Now”
- Provide validation/acceptance
- Use active listening skills
- Paraphrase concerns
- Focus on strengths
- Build hope – resolution is possible!
- Reduce distractions (ask others to leave, turn off TV, etc.)
- Do not personalize

Behaviors and Responses to Avoid

- Do not challenge delusional thinking
- Do not argue or threaten
- Avoid intense questioning
- Avoid sarcasm, laughing, or humor
- Announce actions beforehand
- Don't restrict the person's movement
- Try to be aware of what may worsen the person's fear and aggression



LEAP

- *First:*
 - Assess for risk of suicide or harm...
- *Then:*
 - **L**isten
 - **E**mpathize
 - **A**gree
 - **P**artner

Additional Ways to Help

- Do not leave the person alone.
 - Take a break from de-escalation if needed but try to remain in contact in some way.
- Mental health professionals always advocate seeking professional help for someone who has suicidal thoughts.
- Try to involve the person in the decision making about what to do, who should be told, and how to seek professional help.
- Use phrases that support feelings of **control** and **safety**:
 - “Would that be all right?”
 - “Do I have that right?”
 - “So, let me see if I got this. You are saying...”
 - “Would you mind if I...”
 - “I can see why you’d feel that way.”

II. Stigma & Misconceptions

- **What have you seen or heard that contributes to stigma or misconception in mental health (within the family, socially, in school or at work, in the media, etc.)?**

Responses:

- Schizophrenia correlated to violence
- Family members do not know what to say or don't understand
- Public lacks knowledge
- Fear of the unknown
- Labeling individuals as their diagnosis

- **What are some suggestions you may have to decrease stigma, either interpersonally or more broadly?**

Responses:

- Talk more about mental health
- Take the time to educate ourselves
- Common language or Recovery oriented language
- Community connections (e.g. Church, support groups)

Stigma

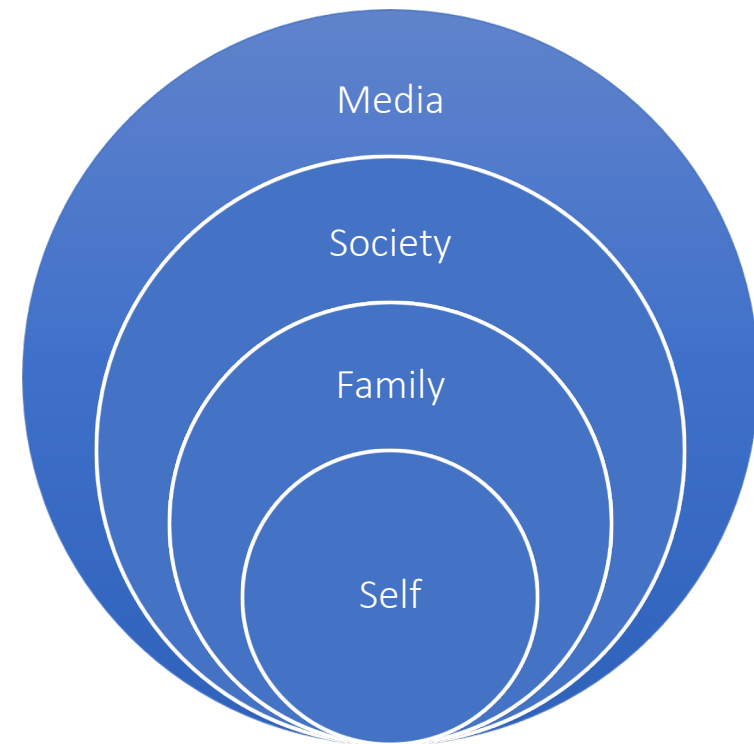
- Involves negative attitudes or discrimination against someone based on a distinguishing characteristic such as a mental illness, health condition, or disability. Stigmas can also be related to other characteristics including gender, sexuality, race, religion, and culture.
 - Public or social stigma (*news, social media, society*)
 - Self-perceived stigma (*internalized*)

Stigma evolves through...

- **Stereotypes:** *beliefs about people based on their membership in a particular group*
- **Prejudices:** *negative attitudes and emotions towards certain groups*
- **Discrimination:** *unfair treatment of people because of the group to which they belong*

Examples of Stigma & Psychosis

- **Stereotype:** People with psychosis can not function
- **Prejudice:** All people that have psychosis are incapable
- **Discrimination:** A business refuses to hire someone with a history of psychosis based on this belief



Misconceptions & Psychosis

- Diagnosis (i.e., schizophrenic = “split personality”)
- Symptoms (i.e., people with psychosis can't do normal things, people with psychosis are violent)
- Treatment options (i.e., there are no treatment options besides medication)
- Recovery (i.e., people cannot recover)

Stigma Preventing People from Reaching Out

- The stigma of mental illness has high costs for individuals with mental health challenges, their families, our communities, and globally.
- Contributing factors:
 - Concern with disclosure of psychiatric issues
 - Public misconception of risk/danger
 - Lack of understanding by family, friends, co-workers or others
 - Increased feelings of shame and self-doubt
 - Health insurance that doesn't adequately cover the mental health treatment
 - Poor quality of life, disability, and increased socioeconomic burden
 - Law enforcement responses

III. Reaching Out for Outside Help: How to decide

- Determine...
 - 1) Is the person in danger of hurting themselves, others, or property?
 - 2) Do you need emergency assistance?
 - 3) Do you have time to start with a phone call for guidance and support from a mental health professional?

Suggestion: Create a list, document, digital note, or anything that helps you easily access your support contacts or emergency crisis plan. Think of this as an “Emergency Toolkit”.

Reaching Out for Outside Help: Resources

- NAMI
 - [Mental Health Guide](#)
 - Pages 25 to 30 include templates for Portable treatment record, Medical history, Current medical information, Medication record, Crisis plan, and Relapse plan
 - [Additional resources for Family & Caregivers](#)
 - Support groups
 - NAMI Family-to-Family course, NAMI Connection group (virtual)
- Crisis intervention services in your area
 - [Crisis Intervention by PA County](#)
- Crisis Text Line - Text “HOME” to 741-741
- Philadelphia Crisis Line - (215) 685-6440 (24/7)
- DBHIDS 24-Hour Mental Health Delegate line - (215) 685-6440
- National Suicide Prevention Lifeline - 1-800-273-8255

When Calling 911 for a Mental Health Emergency

Remember to:

- ✓ Remain calm
- ✓ Explain that your loved one is having a mental health crisis and is not a criminal
- ✓ Ask for a Crisis Intervention Team (CIT) officer, if available

They will ask:

- ✓ Your name
- ✓ The person's name, age, description
- ✓ The person's current location
- ✓ Whether the person has access to a weapon

Information you may need to communicate:

- ✓ Mental health history, diagnosis(es)
- ✓ Medications, current/discontinued
- ✓ Suicide attempts, current threats
- ✓ Prior violence, current threats
- ✓ Drug use
- ✓ Contributing factors (i.e. current stressors)
- ✓ What has helped in the past
- ✓ Any delusions, hallucinations, loss of touch with reality

Tips for While You Wait for Help to Arrive

If you don't feel safe at any time, leave the location immediately.

If you feel safe staying with your loved one until help arrives:

- ✓ Announce all of your actions in advance
- ✓ Use short sentences
- ✓ Be comfortable with silence
- ✓ Allow your loved one to pace/move freely
- ✓ Offer options (for example "do you want the lights off?")
- ✓ Reduce stimulation from TV, bright lights, loud noises, etc.
- ✗ Don't disagree with the person's experience

Resources for Increasing Awareness

- National Mental Health Association (NMHA)
 - American Mental Health Fund (AMHF)
 - National Institute of Mental Health (NIMH)
 - National Alliance Mentally Ill (NAMI)
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- Strategies for increasing accurate portrayals of mental health:
 - Mental health advocates produce portrayals (i.e. *research, articles, community outreach*)
 - Encourage mental health consumers to provide personal stories (i.e. peer support specialists)
 - Positive reinforcement! Reward/recognize/acknowledge accurate portrayals

What else would be helpful for you?

- **Please share your thoughts and ideas about what would be helpful for you in a crisis.**
- Responses from those outside your family?
 - Law enforcement
 - Providers
 - Other friends or family
 - Types of support?
 - Other ideas?

Responses:

- Reach out to family for additional support > another relative to intervene
- Better or increased training within law enforcement (e.g. CIT officers)
- Advocacy within our families, communities, and government

Happy Holidays

We wish you all a
happy, healthy & safe holiday season!

For any additional questions or concerns please contact us at:

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