

# Church Leaders Mental Health 101

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### SIGNS + SYSTEM + SUPPORT

simple mental health insights & tools for every church

### "The Grace Alliance"





The Grace Alliance is a 501c(3) non-profit organization providing simple and innovative Christian mental health resources and programs for families and individuals experiencing mental health challenges and equipping the Body of Christ with active community support and leadership tools.

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www.MentalHealthGraceAlliance.org

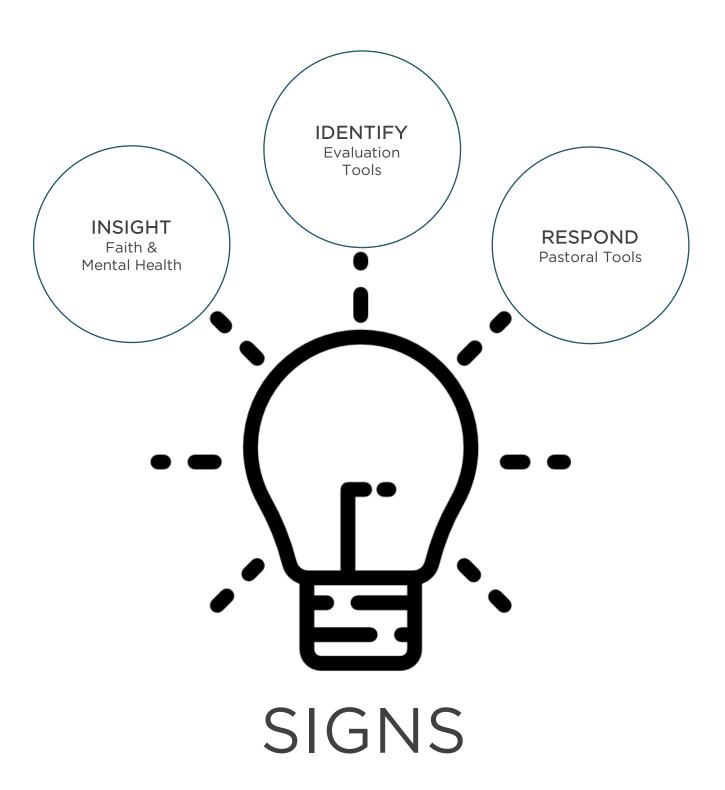
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## Church Leader's Mental Health 101

| SIGNS : INSIGHT to faith and mental health distre : IDENTIFY using simple evaluation tools : RESPOND with pastoral tools | 4<br>ss        |
|--|----------------|
| SYSTEM  : KNOW the mental health care system : BUILD partnership with professionals (r                                   | 19<br>eferral) |
| SUPPORT  : RESILIENCE for mental health recovery : GUIDE to community resources and supp                                 | 23<br>port     |
| STEP-BY-STEP PROCESS : Using the tools step by step  | <b>5</b> 29    |
| Appendix : The basic types of mental health disorde  | 31<br>rs       |







# Faith Experience with Depression and Anxiety (Anhedonia)

| <ul><li>[] Hopelessness</li><li>[] Negative thoughts</li><li>[] Obsessive &amp; fearful thoughts</li><li>[] Panic feeling</li><li>[] Irritable &amp; Sensitive</li></ul>   | [] Fatigue [] Impaired concentration [] Physical complaints [] Changes in lifestyle / behavior [] Isolation / Agoraphobia  |
|--|--|
| Disconnect  Inability to connect with God and others.  | • Unlovable & Unworthy<br>Wrestle with God's assurance, love, grace,<br>presence, and salvation (condemnation).  |
|  | Distant & Isolated  Difficulty relating to others (self-judging, comparison) and isolation (agoraphobia).  Difficulty relating to others (self-judging, comparison) and isolation (agoraphobia). |
| <ul> <li>[] Euphoria</li> <li>[] Grandiose Thoughts &amp; Delusional</li> <li>[] Irritability</li> <li>[] Unorganized &amp; scattered*</li> <li>[] Disrupted lifestyle*</li> <li>[] Impulsive &amp; over committed</li> <li>(including risky behaviors)</li> </ul> | [] Positive (psychosis):  Hallucinations, delusional thinking  [] Negative (psychosis):  Impaired thinking, flat emotions  [] Psychomotor (psychosis):  Impaired or agitated movement            |

#### Urgent Call to Ministry

Impulsive and urgent "calling" or "direction" for ministry / missions. Excitement for ministry can often change weekly or day-to-day.

### • Excessive Spiritual Disciplines

Obsessive focus on spiritual topics (e.g., judgment, spiritual warfare), reading the Bible, spiritual articles/books, listening to podcasts/videos, and/or spiritual disciplines.

#### Revelation & Judgment

Has "God" inspired insights (i.e., revelations) with strong "performance" or "work-based" interpretation and/or revelation of God's judgment on church for specific sins.

#### Demons & Spiritual Warfare

Hallucinations, delusions, and manic symptoms filtered as "demonic" and/or "spiritual warfare."

#### Extreme Religious Delusions

Extremes include, God "calling" them to live like an Old Testament prophet or personification of a particular Biblical person (e.g., Jesus). This may even include leaving Christianity for another religion or cult.

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### ★ Keep in Mind!

• Faith / life is being filtered through symptoms.

Brain disorder disorders life and faith.

• God sees a person, not reacting to a brain disorder / behavior.

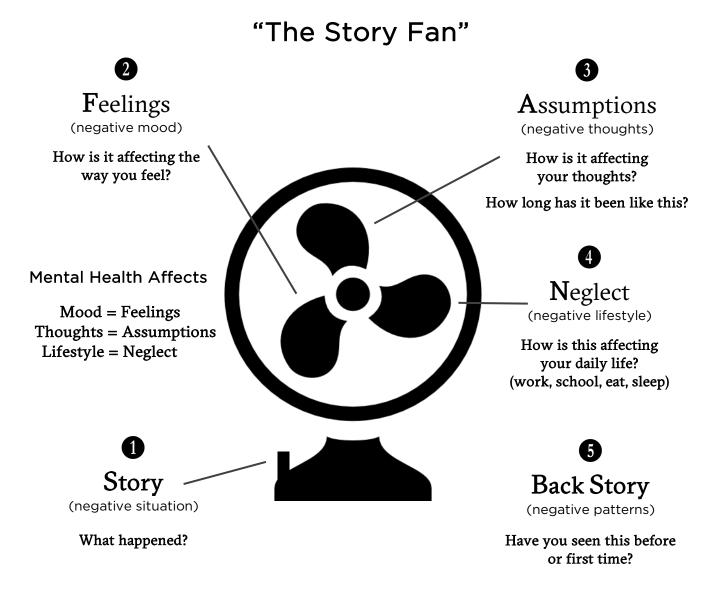
God understands the brain disorder and knows the deepest of hearts.

#### • A distant God is an illusion of pain!

God never abandons his own no matter their distress, challenge, illness, or even the highest moments of life. (Isaiah 55:15)!

Romans 8:37-39 Ephesians 3:17-19 Colossians 2:10 Colossians 1:27-29





# 1 Story (negative situation):

"What happened?"

- Work or school pressures.
- Relationship pressures (break-up, conflict).
- Trauma or abuse.
- Personal / Spiritual failures.

## 2 & 3 Feelings & Assumptions (negative mood & thoughts):

"How is it affecting the way you feel / think (yourself, others, God)?" "How long have you been feeling like this?"

- Ongoing mental/emotional feelings of distress and/or panic (no relief).
- Constant irritability, anger.
- Strange thoughts, unrealistic fears, judgments.
- Mania: constant euphoria, ongoing "revelation" from God.
- Spiritual: God is more command / demand or walking away from faith due to pain.

### 4 Neglect (negative lifestyle):

"How is it affecting your daily life?"

- Sleep: insomnia, over sleeping.
- Fatigue: loss of motivation, energy, and interests.
- Anxiousness: fearful, nervous, heart-racing and panic sensation.
- Isolation, avoiding crowds, over stimulated by school, work, or church events.
- Lifestyle: poor/lack of eating, missing work / school, and loss of hygiene care.
- Other strange body sensations or feelings (unsettled).
- Mania: constant euphoria and energy over volunteering.

### .....

### Back Story (negative patterns):

"Have you ever seen this pattern before or is this the first time?"

- Statistics reveal half of mental health challenges start by age 14, culminate by age 24.
- These patterns can by seasonal, same patterns to previous stressors (repetitive).





| Story (negative situation):  "What happened?"   |
|---|
| & <b>3</b> Feelings & Assumptions (negative mood & thoughts): "How is it affecting the way you feel / think (yourself, others, God)?" "How long have you been feeling like this?" |
| Neglect (negative lifestyle):  "How is it affecting your daily life?"   |
| Back Story (negative patterns):  "Have you ever seen this pattern before or is this the first time?"  |
|   |



The **K6** is used by the Center of Disease and Control (CDC) to identify mental health distress. The K6 is to be used with adults 18 and over.

The **FABS** is the **Fluet Adolescent Behavior Survey** to assess adolescent depression **ages 13-18**. The FABS is similar to the Beck Depression Inventory (BDI) in that it assesses levels of depression that the adolescent is experiencing. These scores were not empirically determined but have been derived by years of experience by Norm Fluet PsyD and several psychologists. This instrument has been administered to a number of adolescents in its development.

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# 1 Introducing the survey:

After you have a good understanding of their situation you can introduce this survey by asking:

"I can see this has been very challenging ...

I have a simple stress survey we can use to get a gauge of your stress level. Would you be interested in taking the survey?"

- **2** Using the survey:
  - 1. Have the individual fill out or go through together (ask questions with no emphasis)
  - 2. No scoring half points.
- 3 Review the score (if score is high):

"Your score is low / mild, however would you like to look at some helpful resources?

"Your score is high and I would recommend we look at getting better evaluation from the great Christian professionals we know and trust. **How do you feel about that?"** 

# **K6 Stress Evaluation**

Circle the number (0-4) that best describes how you have been feeling.

| NONE of the time    | <b>A LITTLE</b> of the time | <b>SOME</b> of the time | MOST o | of the time | <u>ALL</u>    | of the time |
|---------------------|-----------------------------|-------------------------|--------|-------------|---------------|-------------|
| 0                   | 1                           | 2                       | 3      | }           |               | 4           |
|                     |                             |                         |        |             |               |             |
|                     |                             |                         |        | •••••       | • • • • • • • |             |
|                     |                             |                         |        |             |               |             |
| During the past     | 30 days, how often          | did you feel?           |        |             |               |             |
|                     | -                           | -                       |        |             |               |             |
| 1) So sad that no   | thing could cheer yo        | u up? 0                 | 1      | 2           | 3             | 4           |
| 2) Nervous?         |                             | 0                       | 1      | 2           | 3             | 4           |
| 3) Restless or fide | gety?                       | 0                       | 1      | 2           | 3             | 4           |
| 4) Hopeless?        |                             | 0                       | 1      | 2           | 3             | 4           |
| 5) That everythin   | g was an effort?            | 0                       | 1      | 2           | 3             | 4           |
| 6) Worthless?       |                             | 0                       | 1      | 2           | 3             | 4           |
|                     |                             |                         |        |             |               |             |
|                     |                             |                         |        |             |               |             |
|                     |                             |                         | _      |             |               |             |
|                     |                             |                         | То     | tal:        | • • • • • •   |             |

### **FABS Student Stress Evaluation**

We really want to know how you're feeling. Please read each of the statements below carefully and decide how they apply to you. There are no right or wrong answers. It is important to be honest.

Circle the number (0-3) that best describes how you have been feeling over the last 2-3 weeks.

|     | <b>HARDLY</b> ever                  | <b>SOME</b> of the time   | MOST of the tim  | <u>ne</u> | ALL of | the tim                                 | <u>ne</u> |
|-----|-------------------------------------|---------------------------|------------------|-----------|--------|---|-----------|
|     | 0                                   | 1                         | 2                |           | 3      | 3                                       |           |
|     |                                     |                           |                  |           |        | • | ••••      |
| 1)  | I frequently feel bored.            |                           |                  | 0         | 1      | 2                                       | 3         |
| 2)  | I get angry with myself.            |                           |                  | 0         | 1      | 2                                       | 3         |
| 3)  | I have had more bad days than       | good.                     |                  | 0         | 1      | 2                                       | 3         |
| 4)  | I have a lot of bad moods.          |                           |                  | 0         | 1      | 2                                       | 3         |
| 5)  | I frequently feel tired.            |                           |                  | 0         | 1      | 2                                       | 3         |
| 6)  | I have feelings of sadness.         |                           |                  | 0         | 1      | 2                                       | 3         |
| 7)  | I frequently have an "I don't car   | re" attitude.             |                  | 0         | 1      | 2                                       | 3         |
| 8)  | I give up easily.                   |                           |                  | 0         | 1      | 2                                       | 3         |
| 9)  | I can't concentrate on my work      |                           |                  | 0         | 1      | 2                                       | 3         |
| 10) | I have a hard time having fun.      |                           |                  | 0         | 1      | 2                                       | 3         |
| 11) | I feel like I can't do anything rig | ht.                       |                  | 0         | 1      | 2                                       | 3         |
| 12) | I frequently have stomach and/      | or headaches.             |                  | 0         | 1      | 2                                       | 3         |
| 13) | I don't have confidence in myse     | elf.                      |                  | 0         | 1      | 2                                       | 3         |
| 14) | I wish I were dead.                 |                           |                  | 0         | 1      | 2                                       | 3         |
| 15) | I often express anger and then      | regret it.                |                  | 0         | 1      | 2                                       | 3         |
| 16) | I frequently find myself doing th   | nings I know will cause p | problems for me. | 0         | 1      | 2                                       | 3         |
| 17) | I have sleep problems.              |                           |                  | 0         | 1      | 2                                       | 3         |
| 18) | I frequently feel lonely.           |                           |                  | 0         | 1      | 2                                       | 3         |
| 19) | l cry.                              |                           |                  | 0         | 1      | 2                                       | 3         |
| 20) | I feel I can't handle life.         |                           |                  | 0         | 1      | 2                                       | 3         |

| Total |  |
|-------|--|
|       |  |

#### **K6 Stress Evaluation**

Cut-off Scores (range of possible scores 0-24)

| 0 - 2   | No distress             |
|---------|-------------------------|
| 3 - 5   | Mild distress level     |
| 6 - 10  | Moderate distress level |
| 11 - 24 | Serious distress level  |

#### O Scores over 6 - 10

Refer to counseling professionals for more evaluation and follow-up.

#### Scores 11 or higher

Refer to immediate professional evaluation, care and, if necessary, any assisted intervention.

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#### **FABS Student Stress Evaluation**

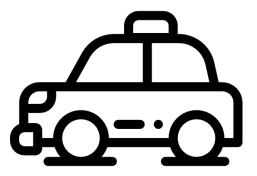
Cut-off Scores (range of possible scores 0-24)

| 1 - 13  | Normal adolescent ups and downs |
|---------|---------------------------------|
| 14 - 21 | Mild depression                 |
| 22 - 29 | Moderate depression             |
| 30 +    | Severe depression               |

- Adolescents who score 22 and above should be referred and evaluated more closely for depression and suicide potential. Particular attention should be paid to the adolescent's responses to questions 2, 11, 14, 16, 18, 20.
- Adolescents who score 30 and above should be referred immediately for more evaluation to determine the level of treatment indicated.



# **RESPOND: Pastoral Tools**



# "C A B" Comfort and Belonging

\*Empowering a positive association & secure attachment with God



Comfort (Safety)

Validate pain and reinforce SAFETY with God & Body (not sin-searching)

Matthew 11:28-30

John 6:35-37

John 1:14-16

John 8:1-11

Psalm 23

Ps. 139:17-18



Belonging (Security)

Validate connectedness and reinforce SECURITY with God & Body (not sin-isolating)

\_\_\_\_

Colossians 1:27;

Philippians 1:16; 2:12-13

Luke 15 (sheep, coin, son)

1 John 2:8

Psalm 139:23-24

## 🏶 extra tips on prayer 🏶

- **1 Empower faith:** Ask/invite for prayer, not impose faith. Jesus knew pain/needs, empowered faith by asking (Mark 5:34, 10:51; Luke 10:19).
- **2** Emotional Containment: Do not lay hands, it can be triggering (John 8:1-11).
- **3** Comfort focus vs. Breakthrough: Bruised reed / smoldering wick gentleness (Is. 43:2); Gentleness is a sign of and reaffirms God's nearness (Phil. 4:5).



# Tips to avoid increasing anxiety and communicating rejection and abandonment.

#### O DO NOT correct or discount

No matter how extreme, do not focus on correcting or discounting their thoughts and feelings. Negating causes defensiveness and increases anxiety.

#### O DO NOT reason it away

Try to not reason or logically convince them that their reality is off. The spiritual topics can be challenging, but never try to use scripture to prove your point or fix them.

#### DO NOT use ultimatums

Try to not use words that indicate punishment, judgment, or some course of retribution (e.g., "If you don't start praying then you're going to keep reaping this). Do not raise your voice to control the situation.

#### DO NOT be silent

If situations do become tense, try not to shut down and/or walk away in confusion (or anger). Okay to take a break, but return to the conversation in safe tones and accepting.



# Tip 1 "And" vs. "But"

- "I can see why you are having a hard time, BUT ..."
- ☑ "I can see why you are having a hard time AND ..."

# TIP 2 Cause/Effect vs. Labeling

- ☑ "I can see you are frustrated, depressed, anxious, distressed ..."
- ☑ "I can see you're having ... why you're having ... how this is making you feel ..."

# TIP 3 Simple vs. Clinical Language

- ☑ "I can see you're depressed, anxious, distressed, mentally impaired, ..."
- ☑ "I can see why you're having this difficult time, sadness, feeling anxious, feel confused, feel frustrated..."

# TIP 4 Normalize with empathy/compassion

☐ "I can see why you're having this difficult time and I would feel the same way ... I've had a similar experience with similar questions and/or experience ... it makes sense and right you feel this way.



# Communication Tool: Validate, Affirm, Reconcile



#### Validate: Active listening

Active listening is listening and accurately verbalizing their experience and emotions.

"I can see why this must be very frustrating, make you feel angry / sad / hurt / disappointed, etc."

"I can see how this must be .... and many others, including myself, have had similar experiences / questions / challenges."



# **Affirm:** Strength-based encouragement

Affirm the strength and qualities that reinforce positive attributes, qualities, and normalizing.

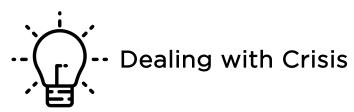
"I can see you are being very courageous and brave / persevering / sincere / faithful, etc."



# **Reconcile:** Restoring harmony and trusted community support

Responding to ensure safety and connectedness to a supportive community and helpful process or journey.

"We value you as a member of our church / group / community and together we are going to do the best we can to walk with you to provide the support and help you need."



#### Suicide Awareness & Prevention Training

Seek out additional training such as:

QPR (Question, Persuade, and Refer) www.qprinstitute.org.

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#### **BASIC TIPS FOR SUICIDE**



#### Listen

Pay attention to suicidal ideation.



#### Ask

"Are you thinking about ending your life ... do you have specific plans?"

Asking does not increase the chances, it can decrease.



Crisis hotline and/or area crisis intervention team CIT (follow church protocol).

1 (800) 273 - 8255 (in the U.S.)

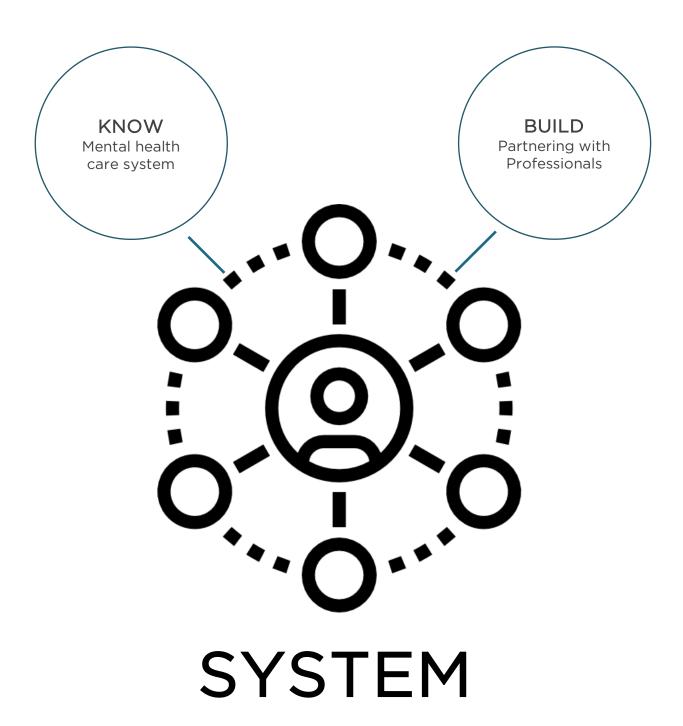
### Stay & Save!

Don't leave them alone, make the phone call with them, go with them to get care. Staying with them can save their life.

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#### Violent or Aggressive (rare cases)

Use the same process above and church protocol. Call your area CIT or if serious call proper authorities.





# KNOW: The Mental Health Care System



#### General Practitioner

Family doctor or General Practice doctor can often provide a general evaluation and referral to mental health professionals. They can prescribe helpful medication until a psychiatrist is found for full follow-up care.



#### **Psychiatrist**

This doctor is responsible for prescribing and monitoring the psychotropic medications prescribed. This doctor will NOT conduct any therapy or counseling; however, they tend to have a good referral to therapists / counselors.



#### Psychotherapist

Therapist with a clinical degree (Ph.D. or PsyD) to work with severe mental health and mental illness utilizing evidenced-based therapy such as, Cognitive Behavioral Therapy (CBT) and other specific practices/models.



#### Counselor

A Licensed Professional Counselor (LPC) or Licensed Marriage and Family Therapist (LMFT) and various counseling licenses. Great with interpersonal (relationships) and unresolved challenges. Some LPC's do not specialize in mental illness, however many do – inquire about their services.

## \* Intensive Outpatient Programs (IOP)

Psychotherapists and Counselors often work with IOPs. These are daily structured programs to help individuals in distress receive education and tools to aid in mental health recovery.

### \* Mental Health Coaching

Many local organizations / services provide quality peer support and mental health coaching.

Research reveals ongoing efficacy of peer coaching.



# KNOW: Mental Health Acute Care & Crisis



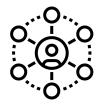
#### Psychiatric Hospital for Acute Care

Local psychiatric hospital for severe mental health needs generally lasting 2-5 days; but longer for severe cases. Admission requires the person to be in danger of harming themselves or others.



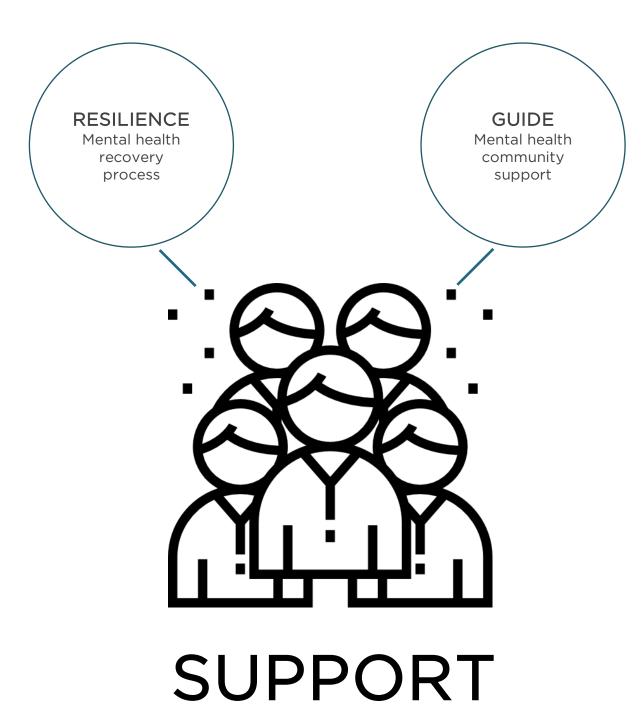
#### Crisis Intervention Team

Trained mental health deputies or teams that can be called upon for emergency situations (suicidal ideations and concerns). When calling 911, state the situation is mental health related and these teams will be notified along with police escort.



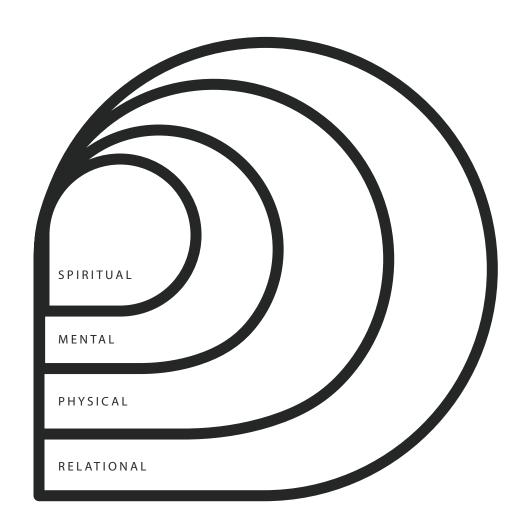
# BUILD: Partnering with Professionals

| General Practitioners: For overall evaluation, lab work, and initial medication if needed  |  |
|--|--|
| Psychiatrists: How long is their waiting list, would they partner to help in crisis interv   |  |
|  |  |
| Therapists & Counselors: Cognitive Behavioral Therapy, Dialectical Behavior Therapy therapist for OCD, anxiety, eating disorders, addiction, dual-diagnosis, etc.) |  |
| Mental Health Intensive Outpatient Programs (IOP) & Coaching:  |  |
| Crisis Intervention Teams & Resources: Who are key people / services to contact for  |  |
| Low-income mental health services:   |  |





# RESILIENCE: Understanding Mental Health Recovery / Resilience

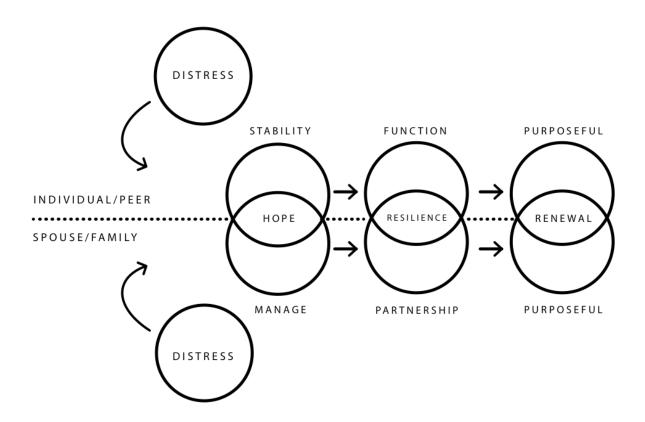


#### A Whole-Health Journey

Mental health restoration / recovery is a whole-health / holistic process. Learning to grow and thrive in every area of life – helps manage and reduce symptoms.

"Love the Lord God with all your heart and with all your soul and with all your strength and with all your mind; and love your neighbor as yourself."

Luke 10:27



#### STABILITY / MANAGE [HOPE]

PEER: Symptoms are challenging and life is difficult, but there is renewed strength and hope.

FAMILY: Life is still difficult and you are helping to manage life with more responsibility.

#### FUNCTION / PARTNERSHIP [RESILIENCE]

PEER: Symptoms are manageable, now have renewed strength and energy.

FAMILY: Your loved one can now manage on their own - you partner alongside, not managing.

#### PURPOSEFUL LIFE [RENEWAL]

PEER: No longer driven by symptoms, healthy relationships, and life has God-given purpose (resilient).

FAMILY:Life has new meaning with your loved ones, renewed life, resilient and God-given purpose.



### **GUIDE: Christian Mental Health Resources**





**Fresh Hope Groups** curriculum is designed for family and individual to be in the same group. Fresh Hope uses six tenets, principle building blocks for mental health wellness. Visit **www.FreshHope.us** for more info / costs.











**Living Grace\***: 16-week topical curriculum for individuals with mental health challenges.

**Family Grace:** 16-week topical curriculum for families and spouses.

Redefine Grace: 10-week topical curriculum for students with mental health challenges.

Thrive\*: Whole-health/Holistic guide for mental health wellness & recovery.

\*Published research reveals Living Grace / Thrive Reduces symptoms, aids mental health recovery, and renews personal faith.

FREE Grace Group training online - Workbooks at discounted prices (bulk)

FREE Grace Group support videos & live webinars (no membership or annual fees)

**FREE** e-Books with step-by-step guidance for individuals and families.







### GUIDE: Community Mental Health Support







And many other U.S. based advocacy and program-based organizations /groups.

(outside the U.S., research available community programs)

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#### U.S Based Christian Mental Health Resources

The Grace Alliance (www.MentalHealthGraceAlliance.org)

Hope and Healing Center and Institute (www.HopeAndHealingCenter.org)

Key Ministry (www.KeyMinistry.org)

Bright Tomorrows (www.BrightTomorrows.org)

Fresh Hope (www.FreshHope.us)

Focus on the Family: Thriving Pastor (http://www.thrivingpastor.com/MentalHealth/index-2.html)

#### **U.S. Based Community Resources**

National Alliance on Mental Illness (www.nami.org)

Depression and Bipolar Support Alliance (www.dbsalliance.org)

National Institute of Mental Health (www.nimh.nih.gov)

WebMD (www.webmd.com)

Psychology Today (www.PsychologyToday.com)

Psych Central (www.PsychCentral.com)

Child Mind Institute (www.ChildMind.org)

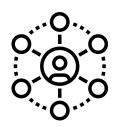


# GUIDE: Mental health community support

| Christian resources to have on hand & community small groups (Fresh Hope / Grace Alliance): |
|---|
|   |
|   |
|   |
|   |
|   |
|   |
| Local community support groups and education classes (NAMI, DBSA, Etc.):                    |
|   |
|   |
|   |
|   |



SIGNS
Identify & respond



**SYSTEM**Refer to professionals



**SUPPORT**Guide to support

# STEP-BY-STEP



#### **Identify Mental Health Distress**





Feelings & Assumptions How is it affecting your feelings and thoughts about yourself (others)?

How long has it been like this?



Neglect
How is this affecting
your daily life?

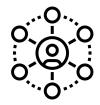
Back Story
Have you ever been like this before?



CAB: Use Comfort And Belonging responses | Validate, Affirm, Reconcile



Evaluate Stress Level (survey) K6 or FABS



Refer to Pros + Guide to Support Use CAB | VAR responses



#### Comfort & belonging | Validate, Affirm, Reconcile Examples

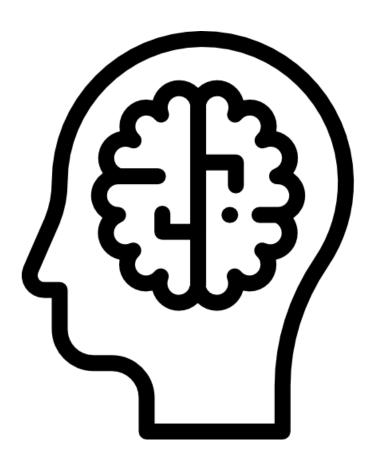
"I can see you're having a very difficult time and your score shows your stress is very high. I admire how you're handling this with so much faith. We value you and want to help as best we can."

#### Refer

"Would you be open to seeing a professional and friend of ours who loves Jesus and really understands this? She/He is a professional we trust and has seen great results.

#### Guide

"And would you be open to looking at some helpful resources we value that have great insight and tools ... as well some support we have in our church / community who are seeing great results?"



# **APPENDIX**

The basics types of mental health disorders

# Depression / Dysthymia

(persist more than two weeks)

| [] Hopelessness: constant sadness, hopeless lens, negative view of life  |
|--|
| [] Negative thoughts: low-self esteem, failure, guilt (not enough)   |
| [] Sensitive: interactions are internalized as rejection, failure, inferior  |
| [] <b>Fatigue:</b> low-energy, unmotivated, no desire for enjoyable activities, work/school  |
| [] Irritable: easily agitated or frustrated, on edge (difficult relationships)   |
| [] Impaired concentration: poor focus, unable to process information, memory   |
| [] Physical complaints: complains of headaches / stomach aches   |
| [] Change in lifestyle and behaviors: over/under eating, sleeping habits, poor coping choices  |
| [] Agoraphobia: isolation, avoid going to events, work, school   |
| Extreme symptoms also include:   |
| [] Positive, negative, psychomotor (psychosis)   |
| [] Psychomotor retardation (numbness, paralysis)   |
| [] Suicidal, self-harm   |
|  |
| Anxiety Disorders  |
| •  |
| Obsessive Compulsive Disorder, General Anxiety Disorder  |
| (GAD), Social, Phobic, and Panic Disorders   |
| [] OCD: obsessive uncontrollable negative thoughts result compulsive behaviors; often very   |
| apologetic for the way they are, fault-finding (hand washing, counting)  |
| [] GAD: ongoing worrying over life situations typically unfounded concerns   |
| $[] \begin{tabular}{ll} \bf PANIC: triggered to overwhelming fear/alert-panic attacks (fast breathing and shortness of the context of the cont$ |
| breath, chest pain, heart palpitations, dizzy, stomach ache)   |
| [] <b>SOCIAL:</b> Fear of public settings or negative reactions with groups or crowds (extreme   |
| embarrassment)   |
| [] PHOBIAS: Irrational fears of objects, animals, people, places, events (become agoraphobic)  |
| Extreme Symptoms can include:  |
| [] Complains of physical illness (constant); anxiety suppresses immune system  |
| [] Change in lifestyle (over/under eating, sleeping); Agoraphobia – isolation  |
| [] Psychomotor Agitation (fidgeting, pacing, restless)   |
|  |

# Bipolar Disorder

| Manic Symptoms (spectrum hypo-mania to serious mania)  |
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| [] <b>Euphoria:</b> overly joyful, life of the party, silly, talking/thinking rapidly  |
| [] Grandiose Thinking & Delusional: feel invincible, superior, and false sense of reality  |
| [] Irritability: on edge, easily agitated, easily frustrated, explosive anger  |
| [] Unorganized: unable to finish tasks, daily routines, schedule, and Hygiene  |
| [] Impulsive & over committed: involved in multiple activities, projects, over spending  |
| [] Impulsive behaviors: not all but, but can engage in thrill seeking opportunities (i.e. impulsive  |
| callings / ministry / prophetic focus) and/or negative sexual relationships and substance abuse  |
| [] Disrupted lifestyle: over-eating (unhealthy), minimal sleep but energetic   |
| [] Severe Mania: all above with delusions, psychosis, anosognosia.   |
| [] Bipolar 1 (severe lasting 1 week or more)   |
| [] Bipolar 2 (milder with hypo-mania and strong depression, ongoing mood swings; rapid cycling,  |
| seasonal affective)  |
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| Borderline Personality Disorder (BPD)  |
| Often confused with Bipolar disorder, BPD is continuous  |
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| [] <b>Sensitive:</b> reactive with anger, rage, panic, and intense feelings of abandonment.  |
| [] <b>Distorted Self-view:</b> low-self esteem, image, and reactive cutting (numb, feel) [] <b>Mood instability:</b> intense moods can last for few hours to days  |
| Codependent: due to emotional balance can end up in codependent (enabling) relationships   |
| and/or ongoing challenging relationships   |
| [] <b>Impulsive:</b> exhibit behaviors much like mania with euphoria (and anger), passionate   |
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| involvement in activities, over spending, and/or risky relationships, sex, substance abuse, and  |
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### **Eating Disorders**

[] Suicidal thoughts

Overall symptoms include negative self-views, shame/guilt related to food, and distance within relationships.

[] Anorexia: obsession with food and exercise, inability to maintain body weight
[] Binge Eating: rapid consumption of food unable to stop
[] Bulimia: over-eating followed by vomiting and/or laxatives, obsession with exercise to control weight

Extreme symptoms also include:
[] Depression

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| Personality | Disorders |  |
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BPD, Narcissistic, Schizophrenia

| [] Narcissistic PD: grandiose self-view, vision, success, and attention; seen as arrogant |
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| manipulative, demanding, and lacks empathy  |

[] **Paranoid PD / Paranoid Schizophrenia:** distrusting, suspicious of others, feels threatened and alert, unforgiving, argumentative, bursts of anger, sensitive to criticism, and detached within relationships; PS accompanied by hallucinations, delusions (conspiracy)

[] **Schizoaffective PD:** Bipolar disorder with full aspects of psychotic features (hallucinations, delusions)

[] **Schizotypal PD:** eccentric lifestyle (oddly dressed or speech), unusual beliefs and thinking (sci-fi, spiritual, offensive), and mannerisms (speech patterns, gestures), paranoia of others – trust and incorrect interpretations of others, flat affect, agoraphobia, hallucinations and delusional thinking