NEUROSCIENCE TREATMENT TEAM PARTNERS

Team**Solutions**

Understanding Your Illness

TeamSolutions Workbook 3 Understanding Your Illness

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Content Objectives:

After completing this workbook, participants will be familiar with:

- 1. Common symptoms of schizophrenia and bipolar disorder.
- 2. Reasons why people may have symptoms.3. Common feelings about dealing with a difficult illness.
- 4. Things people can do to promote recovery.5. Signs and symptoms of a relapse.
- 6. How to use symptom monitoring tools to reduce the risk of relapse.

Treatment Plan Objectives:

- 1. Participants will gain knowledge during each session as evidenced by improving at least 25% from pre- to post-Topic Assessment.
- 2. Participants will choose and use knowledge and skills as evidenced by selecting and attaining one personal practice goal per session.
- 3. Participants will demonstrate skill acquisition as evidenced by correctly completing a monitoring form and/or by role-playing at least one coping skill after completing the workbook.

Family Friendly Session - good for use in family/friend sessions or groups



Session 1 - Identifying the Changes

Identifying the Changes

Facilitator Notes

Main Learning Points:

This is the first session. Every session except this one will begin with a review of the Main Learning Points from the last session.

Tips for this Session

- 1. As this is the first session in this workbook, you may have people who do not know each other. In that case, take the time for introductions, starting with yourself.
- 2. Consider using the "telephone game" as a group activity to illustrate changes in perception. Set up two lines and have each line play the telephone game where a message is whispered into the ear of the first person to pass on to the next person in line. When the message gets to the end of the line, have each end person restate the message. Talk about how the message changes depending how each person hears and processes the message. Point out the common misperceptions.
- 3. You may want to write on the board or a flipchart the dictionary definitions of some words that the participants will be reading and seeing.
- 4. If you use the suggestion for topic introduction, you may want to have paper and a pencil or pen for each person on their chair or desk.

Potential Problem for this Session

When psychiatric symptoms first emerge, it is often difficult, and sometimes impossible, for the person who is experiencing the symptoms to recognize and understand what is happening. The individual usually attempts to make sense of the changes that are occurring within a framework that they know and understand.

Possible Responses

- 1. Express compassion for their courage in facing their challenges.
- 2. Reinforce that they will be able to learn about their
- 3. Reassure that, together, you will explore the facts and consider different explanations.

General Tip

Don't forget to smile—in this important first session and in every session. If participants see that you are pleased to be here, any anxiety they have may be alleviated a bit sooner. Let the participants be able to tell by looking at you that you are pleased to be together and that the following sessions will be a good experience for everyone.

TeamSolutions Workbook 3 Understanding Your Illness

Session 1 - Identifying the Changes

Suggestion for Topic Introduction and Relevance to Participants

(Have a photograph of an object, such as a flower or a piece of fruit. Use a cover sheet so that the photograph can't be seen unless you show it. Ask each person to come to the front as his or her name is called to look at the photograph, and, without saying anything, return to his or her seat and sit quietly. After everyone has seen the photo...)

"Please write what you saw in the photo. When you finish, fold your paper in half and I'll pick it up. Then please sit quietly, without talking."

(When everyone is done)

"Let's look at what you saw."

(Flip through their responses and summarize them. Most people will write just one word, for example: "Flower." A few may be very precise, writing something similar to, "A pink carnation in a clear glass vase that's sitting on a yellow tablecloth.")

"Did everyone see the same thing? No. we didn't. Some people saw only a flower. Others also saw colors. Some people saw the vase and the tablecloth in addition to the flower. Everyone saw the exact same photo. Any ideas on why there were differences in what we saw?"

(Listen, encourage, and reply to responses.)

"Today we are going to start understanding those differences in people's perceptionshow things register differently in our brains. This matters because how we perceive something has a lot to do with how we communicate and function. The title of this session is 'Identifying the Changes.' How might a session about this be helpful?"

"Let's answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key 1. D 2. C 3. A 4. C

T - topic introduction

R - relevance to participant

I - identify objectives

M – materials for session
M – motivate to use





Session 1 - Identifying the Changes

Topic



Mark one: ☐ Pre ☐ Post Your Score:
Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question.
Name:
Date:
1. Which of the following is correct?
A. Everyone's brain should work perfectly.B. Everyone can control how their brain works.C. People who have a mental illness are always ill.D. Everyone's brain makes mistakes sometimes.
2. People who see the world differently: A. Always know they are ill. B. Never know they are ill. C. Are often uncomfortable and confused at first. D. Must change all their future goals and plans.
3. Everyone perceives things a little differently. A. True B. False
 4. When a person experiences major changes in how they perceive the world: A. They need to be in a hospital. B. They must take medicine. C. They might benefit by talking with someone they trust about the changes. D. They should keep it to themselves because it will eventually go away.

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Session 1 - Identifying the Changes

To



	Strongly Disagree	□ Disagree	☐ Neither Agree Nor Disagree	☐ Agree	Strongly Agree	Unsur
6. Th	is informati	on is importar	nt for me to know			
	Strongly Disagree	□ Disagree	□ Neither A Nor Disag		ree	Strongl Agree
		session, ans	wer these questic	ns before	turning in	
this	paper:					
7. Th	is session h	nelped me.				
	Strongly Disagree	Disagree	□ Neither A Nor Disag		ree	Strongl Agree
8. W	hat I liked at	oout this sess	ion:			
	w this sess	ion could have	e been better for	me:		
9. Ho						
9. Ho						

Session 1 - Identifying the Change

Identifying the Changes

Objectives for this Session

- 1. Identify a simple description of how the brain functions.
- 2. Understand that no one's brain works perfectly.

What in the World!

How does anybody make sense of the world we live in? The simplest answer is, "Through the five senses. We see, hear, taste, touch, and smell what's going on around us. That is how we know what's going on in our world."

But does everyone perceive (meaning "to experience the world using the five senses") things the same way?

all group of people us. Does each of them

Main Learning Point #1

For example, a small group of people are waiting for a bus. Does each of them see the bus exactly the same when it

pulls up to the curb? Does the man who's wearing glasses see the bus the same as the woman who has great eyesight? Does the woman with a bad cold and stopped-up nose smell the bus exhaust fumes the same as the person next to her who doesn't have a cold? Does the young mother whose baby is crying notice as many things as someone who is not distracted?

To make this even more complicated, everyone who is watching the bus arrive is filtering it through their personal views of the world and their memories. Suppose we hear the brakes on the bus hiss when it pulls up to the curb. A man who works as an auto mechanic might hear this sound and think that the brakes sound like they are in good working order. On the other hand, a small child might get very scared when they hear the hissing sound.

We all see the world a little differently depending on the experiences we have had in our lives and our perceptions of what is going on around us. Certain qualities that we're born with can also affect how we see the world.

The brain is the organ that brings together our five senses, perceptions and memories. These make up our individual awareness and understanding of what's going on in the world. Although we do not fully understand exactly how the brain works, we do have a basic understanding of how our thoughts, feelings, and views tend to guide our daily lives.

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Session 1 - Identifying the Change

Use Your Head! (Your Brain, Actually.)

We use our brain to understand our world and to help us make decisions every day. We usually do this with our brain getting information from the world through our basic senses of seeing, hearing, touching, smelling, and tasting. Once this information enters the brain, we use more than 100 billion brain cells called neurons, along with brain chemicals called neurortansmitters, to process the information to help us understand our world. Even though all of us have similar feelings and often share similar experiences in life, no two brains see the world exactly the same.

To illustrate how we can hear and understand things differently, let's do an exercise. Form two lines. The first person in each line will be handed a written statement which is to be whispered into the ear of the next person in line. The second person will then whisper the statement to the third person in line, who will, in turn, whisper it into the fourth person's ear, and so on. When passing the information along, the statement can only be said one time. When the message gets to the last person, he or she will tell the group what he or she heard and write it on the board. Finally, the original statement will be written on the board. We will talk about how the message was changed as it was passed along.

Main Learning Point #2

No brain works perfectly.



Session 1 - Identifying the Changes

No Brain Works Perfectly

The exercise we did is just one example of how we get information and how our brains may interpret it. Given that the brain uses more than 100 trillion connections for carrying messages, it is easy to understand that no brain works perfectly all the time.

When our brain misinterprets the surroundings over and over, we may become uncomfortable and even confused about what is going on around us. We may have to work even harder to understand things that other people who do not have a mental illness might understand very easily. Our perceptions may be very different from what we have experienced in the past.

To help understand these changes, it is important to figure out when you first noticed something different. Maybe it was:

- A different thought.
- A different or strange feeling.
- · A big mood change.
- · An unusual reaction.
- Anxiety or discomfort in being someplace or being around others.
- An experience with one of your five senses that you never had before, like hearing, seeing, or smelling things you didn't understand.

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Session 1 - Identifying the Changes

No Brain Works Perfectly

(continued)

To help you identify and recognize when these changes might have occurred, fill out the "Identifying the Changes" exercise. Keep in mind that since everyone sees the world differently, there are no right or wrong answers to the statements below and on the next page.



10

Identifying the Changes Exercise:				
I first noticed	something being different on	(When)		
I was at	(Where it happened)	when it happened.		
I remember I f	elt			
	(What experienced	that was different)		
I thought	(Seeking an answer)	ght be a reason for the way I felt.		

When Different Perceptions Get Uncomfortable

Differences can make life more interesting!

Sharing how we feel with people we trust can help us recognize and identify individual perception changes that are causing problems.

Main Learning Point #3

Being open with people we trust can help us if we are having changes in perceptions.





Session 1 - Identifying the Changes

Review & Moving Forward



		earning points of this session are:
Move	Forw	ard – Choose a Personal Practice Option
It's in	nporta	nt to practice new knowledge and skills. What will you do between e next session? Please choose one option from the list below:
	□1.	STUDY. I am going to reread my handout at least once.
	□ 2.	SHARE. I will share my handout with someone in my support system. I will ask to read it and talk with me about when I first noticed changes in my perceptions.
	□ 3.	GAIN INSIGHT. I will talk to (insert name of someone you trust who knows you well) and ask him or her if he or she noticed any changes in my behavior recently.
	□ 4.	OTHER:
Take	an "E	xtra Step Forward" (optional)
	□ 5.	WRITE. I will write about changes that have become problems for me. I will figure out what I might do to fix these problems.
		me left before the end of the session, you might talk about your actice goals. How will you <i>remember</i> and <i>complete</i> your goal by the

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Session 2 - Understanding the Changes

2

Understanding the Changes

Facilitator Notes

Main Learning Points from last session: *Identifying Changes*

- 1. People perceive and experience the world differently.
- 2. No brain works perfectly.
- 3. Being open with people we trust can help us if we are having changes in perceptions.

Review Personal Practice Options from last session.

Remembe

It is important to acknowledge and discuss participant's successes, progress, and challenges.

Tips for this Session

This session is to let individuals know that everyone's brain can misinterpret the world in which we live—and that, at times, our emotions and perceptions can become distorted and cause us problems in life.

This session may be one of the first "reality checks" people have to talk with people they trust and confirm their emotions and perceptions. This section ends by setting up the use of mental health professionals in helping to assess if the perception problems are psychiatrically significant enough to be defined as symptoms.

During this session, validate the normal fears everyone has when our minds misunderstand something. Reassure the group that there are effective methods to help us when our brains are not working at their best.

After completing the ""Self-Evaluation of Barriers to Seeking Treatment," talk about it together. You may want to ask, "Which one of these barriers do you think got the most checks today?" Acknowledge their fears and concerns.

General Tips

Offer unconditional positive support to all participants. Validate everyone's experiences as real to them. Allow for differences. Explain the fact that we are all different is a good thing.



Lilly

Session 2 - Understanding the Changes

Suggestion for Topic Introduction and Relevance to Participants

- "When you were in school, did you ever study for a test, thinking you knew the material well, but when you took the test, you didn't do very well?"
- "What were the conditions in your life when that happened to you? Was there anything else going on during that testing period that could have influenced your thinking?"
- "I'm thinking about things like test anxiety, studying for multiple tests, being sick, having trouble with a relationship, lack of sleep, or hunger. All these things can influence us! And our brain can work at different levels."
- "This session will look at understanding the problem of intense emotional reactions. We will also consider how to correct problems that result from these."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. B 2. A 3. D 4. D

T - topic introduction

R - relevance to participant

M - materials for session M - motivate to use

Lilly

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Session 2 - Understanding the Changes

Review of Session 1: Identifying Changes



Main Learning Points of Session 1

What were the main learning points of Session 1? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. People perceive and experience the w_	d differently.
2. No bn works perfectly.	
3. Being open with people we t	_t can help us if we are having

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

changes in perceptions.

	Yes. How did it go?
2.	No. What got in the way of completing your practice?
	If you still plan to complete your practice, when will you do it?

□ 3. I didn't choose a personal practice option.



	TeamSolutions Workbook 3 Understanding Your Illness Session 2 – Understanding the Changes
Topic	Assessment
	Mark one: Pre Post Your Score: + out of Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question. Name:
	Date:
	 It is always easy to know if our brain is working correctly. A. True B. False If my emotions seem to be more intense than usual and I have trouble doin my usual activities, I can: A. Talk to someone I trust. B. Ignore it and wait until it goes away. C. Explode and let my emotions take over. D. Have a couple of alcoholic drinks.
	 3. If I talk to a mental health professional: A. I will be locked up. B. He or she would not understand. C. I will lose it. D. I will have taken the first step in getting better.
	 4. Talking to a mental health professional means: A. I must be crazy. B. I had to have been thinking of suicide. C. I will never reach my life goals. D. I'm simply trying to get better. 5. I am confident I can cope with strong emotional reactions.
	Strongly Disagree Neither Agree Agree Strongly Unsur

A- 1	6. This informatio	n is important fo	r me to know.		
	Strongly Disagree	☐ Disagree	Neither Agree Nor Disagree	☐ Agree	□ Strongly Agree
	At the end of the sthis paper:	session, answer	these questions be	efore turning	in
	7. This session he	elped me.			
	Strongly Disagree	□ Disagree	□ Neither Agree Nor Disagree	□ Agree	□ Strongly Agree
	8. What I liked abo	out this session:			
	O Haw this session	مرا المارية مرا	h		
	9. How this sessio	on could have be	en better for me: _		

Session 2 - Understanding the Change

Understanding the Changes

Objectives for this Session

- Identify 1 way strong emotional reactions can interfere with reaching your goals.
- Recognize 2 ways others may be able to help you recognize and define emotional problems.

Changes that Challenge.

There are times when life events are difficult to deal with. Life can change quickly. Sometimes the reasons for change and trouble in our lives are obvious, like when we lose a loved one. Other times, we may not understand why we are having trouble. During these times, we often know something is wrong, but we aren't sure why. Our emotions may be so strong that we get scared that we can't control them. During these periods of intense emotions, our view of the world can be affected. We may find it hard to understand what is going on.

There are times you may have strong emotions. This could be intense fear, anger, anxiety, depression, extreme happiness, or even love for someone. Sometimes, you may not fully understand why these emotions are so strong. The emotion may have started out from something that happened to you, but your response was almost too strong, even uncomfortable. You may not understand why you can't seem to get rid of the strong emotions.

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Session 2 - Understanding the Change

The Brain and Emotions

The brain is the organ you use to help you understand your world and your emotional reactions to it.

When you have strong emotions coming from your brain, it can be very hard to understand what is causing you to be upset. Strong emotions affect the brain's ability to understand and solve the

Main Learning Point #1

Your brain processes your emotions.

situation. During these strong emotions, your brain may not work well. You may end up being very confused.

Main Learning Point #2

Intense emotions can reduce your ability to cope and function.

Taking Action

When your thoughts and emotions start to interfere with daily life and prevent you from getting things done, you may need to take some action. The first step to take is to talk about what you're thinking with someone you trust. This can be a friend, family member, or mental health professional.

By sharing your thoughts with someone you trust, you can get feedback that may help you. Sometimes this feedback is all you need and you may feel better. Other times, the trusted one can let you know that you might benefit from seeing a mental health professional (like your treatment team members and your prescriber).

Main Learning Point #3

It is helpful to share your thoughts with someone you trust.





Session 2 - Understanding the Changes

The Brain and Emotions

(continued)

The goal of a mental health professional is to help you identify the problem that's getting in your way of reaching your life goals. Although it may be hard at first to speak with a professional, many people could benefit from talking to a professional at some time during their life. Mental health professionals are trained to help you find the answers you need. Talking to a professional is often the first major step you can take to solve your problems. Just as the person with high blood pressure needs someone to check their blood pressure frequently, someone who has intense thoughts and emotions can be helped by a mental health professional.

Main Learning Point #4

Talking with a professional means you are trying to make your life better.

Self-Evaluation of Barriers to Seeking Treatment.

Although anyone could benefit from mental health treatment, many people do not get treatment when they need to for a number of reasons. Check the reasons you might not want to talk with a professional.



1	Stigma or	fear of b	eing treat	ed differently	by others

☐ 2. Hospitalization or being locked up.

☐ 3. General fear of what may be discovered.

☐ 4. Being over-medicated.

□ 5. Being labeled as "mentally ill."

☐ 6. Cost of treatment.

☐ 7. People finding out.

■ 8. It will make it worse.

9. Other

Lilly

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Session 2 – Understanding the Changes

Review & Moving Forward



The main learning points of this session are:
1
2
3
4
Move Forward – Choose a Personal Practice Option
It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:
☐ 1. STUDY. I am going to reread my handout at least once.
☐ 2. SHARE. I will share my handout with someone in my support system. I will ask to read it and talk with me about understanding emotional changes.
☐ 3. GAIN INSIGHT. I will ask about what he or she remembers about the last time I was upset.
☐ 4. OTHER:
Take an "Extra Step Forward" (optional)
☐ 5. WRITE. I am going to write down my memories of the thoughts I had when I was emotionally upset

Session 3 - When Personal Changes may be Symptoms

When Personal Changes may be Symptoms

Facilitator Notes

Main Learning Points from last session: Understanding the Changes

- 1. Your brain processes your emotions.
- 2. Intense emotions can reduce your ability to cope and function.
- 3. It is helpful to share your thoughts with someone you trust.
- 4. Talking with a professional means you are trying to make your life better.

Review Personal Practice Options from last session.

Tips for this Session

This session will help the participant become familiar with the personal symptoms of his or her mental illness.

General Tips

Provide support, hope, and reassurance that the identification of one's own symptoms is valuable for the person to learn in order to get back on track with their life goals. Inform participants that everyone is unique and no two people have the exact same symptoms.

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Session 3 - When Personal Changes may be Symptoms

Suggestion for Topic Introduction and Relevance to Participants

"Medical science has discovered that having a mental illness is often due to physical changes that happen in the brain. The Surgeon General made the statement in 1999 that linked mental illnesses to physical illnesses. Certain areas of the brain are known to be involved with psychiatric symptoms. Most people who are diagnosed with a mental illness can be effectively treated once their particular symptoms are targeted."

"This is important background information for you to know as we talk about today's topic, 'When Personal Changes May Be Symptoms.' How do you think knowing more about this would benefit you?"

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. A 2. D 3. C 4. D

T - topic introduction

R - relevance to participant

M – materials for session
M – motivate to use





Session 3 - When Personal Changes may be Symptoms

Review of Session 2: Understanding the Changes



Main Learning Points of Session 2

What were the main learning points of Session 2? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Your bn processes your emotions.
2. Intense es can reduce your ability to cope and function.
3. It is helpful to share your thoughts with someone you tt.
4. Talking with a professional means you are trying to make your le better.
Personal Practice Option Review: What personal practice option(s) did you choose?
Did you complete your personal practice yet?
☐ 1. Yes. How did it go?
☐ 2. No. What got in the way of completing your practice?
If you still plan to complete your practice, when will you do it? ☐ 3. I didn't choose a personal practice option.

	T		V 19			
	TeamSolutions Workboo		-			
Topic	Assessme	ent				
	Mark one: Pre	tion carefully ver before ma	arking one.			Score: _ out of 4
	Name:		1			
	Date:					
	1. Mental illnesse in the brain.	s are someti	mes due to physi	ical bioche	emical proce	sses
	A. True	B. False				
	2. Having a menta	al illness me	ans:			
	B. I did sor C. There is	nething wron no treatmen	lisability benefits, a ng to get it. t, cure, or hope. anage it so it doesi			ife goals.
	3. Talking about n	ny symptom	s with a mental h	ealth profe	essional will	:
		ne symptoms th of us learn	to get worse. if I have sympton	ns of ment	al illness.	
	4. If I admit to have	ing an illnes	ss:			
	B. I will no C. I should	tell everyone	id of me. e person I always he who knows me. egs to reduce the es		y life.	
	5. I am confident	l understand	I how an emotion	al change	may be a sy	mptom.
	Strongly Disagree	Disagree	□ Neither Agree Nor Disagree	□ Agree	Strongly Agree	Unsure

	Assessme		r me to know.		
	Strongly Disagree	☐ Disagree	□ Neither Agree Nor Disagree	Agree	Strongly Agree
	At the <u>end</u> of the s this paper:	session, answer	these questions be	efore turning	in
7	7. This session he	lped me.			
	Strongly Disagree	☐ Disagree	□ Neither Agree Nor Disagree	Agree	Strongly Agree
ŧ	8. What I liked abo	out this session:			
	- How this cossis	yn could have be	on botter for me		
,	9. How this sessio	on could have be	en better for me: _		
!	9. How this sessio	on could have be	en better for me: _		
9	9. How this sessic	on could have be	en better for me: _		
9	9. How this sessio	on could have be	en better for me: _		
,	9. How this session	on could have be	en better for me: _		
\$	9. How this sessic	on could have be	en better for me: _		
\$	9. How this session	on could have be	en better for me: _		
•	9. How this session	on could have be	en better for me: _		

Session 3 - When Personal Changes may be Symptoms

When Personal Changes may be Symptoms

Objectives for this Session

- 1. Identify that some thoughts and feelings that cause problems for you may be symptoms of your illness.
- 2. Identify 1 cause of mental illness (brain chemical imbalance).
- 3. Understand that developing a mental illness is not something you caused.

Are Symptoms Present?

One of the first steps in helping yourself get better is to figure out whether problems or symptoms are bothering you. Some symptoms may seem like normal reactions—such as being nervous or sad. Other kinds of reactions may seem more unusual. People don't like to talk about them much. For example, seeing strange things or believing things that no one else believes.

No matter what types of symptoms you may have, it's important to take an honest look at what they are. That's because symptoms may cause other problems in your life without you realizing it.

You can take a big step in getting the right type of treatment by talking about the exact experiences and problems you had in the past, or may be having now, with a mental health professional.



Fill in the blank: A mental health professional that I find helpful to talk to is

Main Learning Point #1

Sharing your thoughts, feelings, and experiences with a mental health professional can help you identify whether you have symptoms.

Session 3 - When Personal Changes may be Symptoms

Some Symptoms Require Medication

If your prescriber thinks your problems may be due to a biochemical imbalance or misfiring (messages not getting where they need to) in your brain, you may be given a medicine to balance the thinking process. Unfortunately, because we are all different, it may take a while to find the best medicine for your specific symptoms. It is important to remember that if the first medication doesn't work, it is not anyone's fault. It just takes time to match the right medicine with the problem.

Main Learning Point #2

It may take time and several different medicines to find the right one.

As symptoms go away, you can focus more on your goals

As symptoms start going away, most people are happier and enjoy life a lot more. This doesn't mean that if symptoms get better, problems will suddenly go away. Rather, when symptoms get better, people can pay more attention to their goals. Energy can be put into other things that are important, like school, work, or relationships. If a person figures out what symptoms are causing the problem, he or she can look for ways to reduce or manage them.



Fill in the blank: My most important goal is

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Session 3 - When Personal Changes may be Symptoms

Who Is To Blame?

After some of the symptoms are identified, it's normal to wonder where they came from. A common thought is that you must have done something wrong (such as abusing substances) to cause the problems. However, most mental illnesses are not the result of anything you have done. It is true that the use of alcohol and other substances can make symptoms worse, but it has not been proven that their use actually causes any of the illnesses. In other words, it is no one's fault to have symptoms. No one caused it, and **no one is to blame**.

Main Learning Point #3

Developing a mental illness is no one's fault.



Circle the best answer: I [do / do not] blame someone for the problems I've been having.



Session 3 - When Personal Changes may be Symptoms

Do I Have Symptoms?

In the next few sessions, we will look more closely at the symptoms of mental illness. We will complete several checklists to help you decide if you are having symptoms.

If you identify symptoms, you may consider whether you have an illness. You will want to talk about this with your prescriber.

It is normal for people who have a mental illness to wish that they did not have it. At times, the symptoms may even go away for short periods, and the diagnosed person may think, "I must be cured because I don't have any symptoms right now." Much like people who have high blood pressure and don't have a high reading all the time, people with mental illness will not have symptoms all the time.

It is wise to get all of the facts so you can get relief from your problems. Even if you and your prescriber decide symptoms are present, symptoms can be treated successfully. TeamSolutions Workbook 3 Understanding Your Illness

Session 3 - When Personal Changes may be Symptoms

Review & Moving Forward



The main le	earning points of this session are	:
1		
2		

Move Forward - Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

□ 1. STUDY. I am going to reread my handout at least once.

	2 2 ,	
□ 2.	SHARE. I will share my handout with someone is	n my support
	system. I will asktalk with me about it.	to read it and
□ 3.	DISCUSS. I will talk toany problems I'm having and why I think they are	about

Take an "Extra Step Forward" (optional)

☐ 4. OTHER:

ask his or her opinion.

□ 5. WRITE. I am going to write down what I understand about why I have been having problems lately.

Session 4 - Acceptance

Acceptance Facilitator Notes

Main Learning Points from last session: When Personal Changes May Be Symptoms

- 1. Sharing your thoughts, feelings, and experiences with a mental health professional can help you identify whether you have symptoms.
- 2. It may take time and several different medications to find the right one.
- 3. Developing a mental illness is no one's fault.

Review Personal Practice Options from last session.



This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

Materials Needed to Accompany Participant Handout: Discovering Things about Yourself

Tip for this Session

This is a powerful session with important insights that need to be processed. Discussion should not be cut short. It is okay to take two meetings if necessary to fully cover this topic.

TeamSolutions Workbook 3 Understanding Your Illness

Session 4 - Acceptance

Suggestion for Topic Introduction and Relevance to Participants

""How many of you grew up with brothers or sisters?"

(Listen to their responses. Some participants may want to tell you how many siblings they have. This is part of engaging participants in the process, so take the time.)

"Did your brothers and sisters sometimes bother you? Did you ever have to make changes because of them, such as sharing a bedroom? Did they ever change the television channel to watch one of their shows, and you couldn't watch yours?"

"I know a person who wanted to watch cartoons every day after school, but she had an older brother and sister who wanted to watch the teenage dance show. "American Bandstand." She always thought it was unfair that she couldn't watch cartoons, but there were two of them so she was outnumbered. Finally she realized she kind of liked watching her siblings dance, and she eventually started dancing with them every day."

"At the beginning, she was annoyed because she felt forced to watch the dance show. She thought it was unfair. Over time, though, she learned that the show wasn't so bad, and she learned how she could have fun with it herself. It turned out that the change wasn't so bad after all."

"Today, we are going to talk about acceptance. It is normal to feel resistant to a diagnosis of mental illness when it is first made. However, you can begin to understand that you can cope with, and even manage, the illness. This is called 'acceptance,' and once you accept the illness, you can begin to work toward your recovery."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key 1. A 2. D 3. A 4. C

T - topic introduction

R - relevance to participant

I - identify objectives

M – materials for session
M – motivate to use



Session 4 - Acceptance

Review of Session 3: When Personal Changes May Be Symptoms



	, , , , , , , , , , , , , , , , , , ,
)	Main Learning Points of Session 3 What were the main learning points of Session 3? If you did not attend the last session, you may guess, and also write the answers as people say them:
	Sharing your thoughts, fs, and experiences with a mental health professional can help you identify whether you have symptoms.
	2. It may take time and several different ms to find the right one.
	3. Developing a m1 illness is no one's fault.
	Personal Practice Option Review: What personal practice option(s) did you choose?
	Did you complete your personal practice yet?
	☐ 1. Yes. How did it go?
	☐ 2. No. What got in the way of completing your practice?
	If you still plan to complete your practice, when will you do it?
	☐ 3. I didn't choose a personal practice option.

	Session 4 – Acceptance
Topic	Assessment
	Mark one: Pre Post Your Score: + out of 4 Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question. Name: Date: 1. Early acceptance of having a mental illness may cause mixed emotions. A. True B. False 2. Total Acceptance of a disorder is when: A. A cure happens. B. A person takes medicines as directed. C. A person gives up.
	 D. A person takes care of his or her mental and physical health to the best of his or her ability. 3. Admitting that you have a psychiatric illness is one of the first steps toward recovery. A. True B. False 4. The main part of acceptance of a mental illness is:
	A. Admitting that it is your fault that you became ill. B. Realizing you could have done something to prevent the illness. C. Becoming active in working to manage the illness. D. Developing a strong mind to overcome the symptoms. 5. I am confident I have accepted my illness.
	Strongly Disagree Neither Agree Agree Strongly Unsure Disagree Nor Disagree Agree

Strongly			_	_
Disagree	Disagree	☐ Neither Agree Nor Disagree	☐ Agree	□ Strong! Agree
At the <u>end</u> of the s his paper:	session, answer	these questions be	efore turning	in
7. This session he	lped me.			
Strongly Disagree	□ Disagree	□ Neither Agree Nor Disagree	☐ Agree	Strongl Agree
3. What I liked abo	out this session:			
). How this session	n could have be	en better for me: _		
	this paper: 7. This session he Strongly Disagree 3. What I liked abo	this paper: 7. This session helped me. Strongly Disagree Disagree 3. What I liked about this session:	this paper: 7. This session helped me. Strongly Disagree Neither Agree Nor Disagree Nor Disagree 3. What I liked about this session:	7. This session helped me. Strongly Disagree Neither Agree Agree Disagree Nor Disagree

Session 4 - Acceptance

Acceptance

Objectives for this Session

- 1. Identify 1 way acceptance is an action step towards getting better.
- 2. Understand that accepting a mental illness is a process that takes time.

Throughout life, we all face times when we have to cope with things we don't want to deal with. The most common response to learning that we may have a serious health problem is to ask for a second opinion. It is normal to hope that the diagnosis is wrong. Once we admit something is wrong, however, we can begin to find out what can be done to make things better. This stage is called "early acceptance."

People move into acceptance shortly after the "admittance stage." Admitting to yourself that something is not right is important and is often the first step towards the recovery process. The real progress towards recovery begins in the acceptance stage.

Being uncomfortable is understandable. In the early acceptance stage, you usually do not feel comfortable. You have to deal with something you have never experienced before and that you have little knowledge about. To top it off, the organ that you need to

Main Learning Point #1

Acceptance is taking the first steps to achieve your life goals. It is the opposite of giving up!

understand your situation—your brain—is what is not working correctly. Try not to be too fearful. Many individuals have been where you are now and have found answers and solutions to the problems. By gaining knowledge and understanding of your mental illness, you can develop the skills necessary to manage your illness and get back on the road to recovery.

Main Learning Point #2

Acceptance may be uncomfortable at first.

Session 4 - Acceptance

Michael's Story

Sometimes it helps to look at things from someone else's point of view so that you can learn more about yourself. The story you are about to read includes actual events that happened; however, the names have been changed to keep it confidential. This story explains how Michael, a college student, started having problems and how those problems affected his life over a one-year period. As you read about what happened to him, think about some of the experiences you've had in your own life. Think of ways you were able to overcome some of the problems you have had. After reading "Michael's Story," you'll be asked to talk about and list your ideas on things Michael could have done to manage his problems and improve his life.

Part I: Introduction

Michael, a college junior who was majoring in history, usually got A's and B's in his classes. Over the past year, his grades slipped, and he dropped two courses to avoid failing grades. Michael took a summer job as a waiter in a local restaurant, and he usually went out with his friends after work.

Halfway through the summer, Michael and another waiter got into an argument. The argument got worse and turned into a fist fight. Michael was stronger than the other waiter and pushed him against the counter. The waiter hit his head and passed out. In anger, Michael slammed his fist against a window. Glass broke around him, and people in the restaurant started running toward the door. The police arrived and Michael went with them to the police station.

What's Your Opinion?



What are some things Michael could have done when he noticed his grades slipping?

List some ways that Michael might have avoided getting into a fist fight with the other waiter:

Lilly

TeamSolutions Workbook 3 Understanding Your Illness

Session 4 - Acceptance

Michael's Story

(continued)



Describe some ways Michael may be able to avoid arguments like this one in the future:

Acceptance Takes Time

Keep in mind that you will have an emotional reaction to being told that you have a mental illness. It takes time to come to acceptance. Many life skills are developed over time. For example, think about watching babies when they first learn how to walk. It's difficult! They fall and they fall, but what else? They keep getting up and trying again. We all did it! Learning how to balance and take steps took time, effort, and people in our life who coached and helped us.

No child has been able to just get up and walk without first learning and then practicing. Give yourself time to adjust to this new change in your life. Small steps will get you to your goals.

Main Learning Point #3

Acceptance of a mental illness is a process that takes time.

Having to learn the skills needed to deal with a mental illness is like learning to walk. Hopefully, by working with your treatment team "coaches" and using the information in this set of workbooks, you will learn helpful steps in your recovery. Don't worry if it seems to be taking a lot of time, and if others seem to be doing better than you in finding their answers. Just as everyone learns to walk at different rates, everyone develops skills in managing their mental illnesses at their own pace. No two people have exactly the same illness. We must all take our own learning steps at our own pace.

Session 4 - Acceptance



ne <i>main l</i>	earning points of this session are:
1	
2	
3	
love Forw	vard – Choose a Personal Practice Option
	ant to practice new knowledge and skills. What will you do between ne next session? Please choose one option from the list below:
□1.	STUDY. I am going to reread my handout at least once.
□ 2.	SHARE. I will share my handout with someone in my support system. I will ask to read it and talk with me about where they think I am with accepting my illness.
□ 3.	READ. I will reread Michael's Story and find two similarities to my situation.
□ 4.	OTHER:
Take an "E	ixtra Step Forward" (optional)
□ 5.	DISCOVERY. I will complete the <i>Discovering Things about Yourself</i> handout and bring it to the next session.
	ime left before the end of the session, you might talk about nal practice goals. How will you <i>remember</i> and <i>complete</i> your goals session?

TeamSolutions Workbook 3 Understanding Your Illness

Session 4 - Acceptance

Discovering Things About Yourself



You read *Michael's Story* and came up with ways Michael might be able to manage his symptoms and problems. You may be able to use some of these ideas to manage the difficulties you're having and improve your own life. Answer each of the questions in this section. Use the new ideas you discussed or listed from Michael's Story to help you answer the questions.

What could you have done to stay in control?			
-	u do to avoid situations in the future that may cause you to lose any ideas you may have talked about after Michael's Story.)		
Why is it imp	ortant to keep your stress at a comfortable level?		
What are sor	ne of the things you can do to keep your stress at a level?		
What are you	r thoughts about taking medicine for your symptoms?		



Session 5 - Symptoms are Important to Diagnosis and Recovery



Symptoms are Important to Diagnosis and Recovery **Facilitator Notes**

Main Learning Points from last session: Acceptance

- 1. Acceptance is taking the first steps to achieve your life goals. It is the opposite
- 2. Acceptance may be uncomfortable at first.
- 3. Acceptance of a mental illness is a process that takes time.

Review Personal Practice Options from last session.

You can refer to the "Facilitator's Delivery Checklist" when using Team Solutions materials as a reminder of important facilitator tips.

Tips for this Session

- 1. Think of this session as moving from "disarming" the participant's (Session 1 – 4) resistance to having an illness to "arming" him or her with specific knowledge and skills that allow him or her to be in charge and learn ways to manage the illness.
- 2. If you use the topic introduction listed on the next page, you will want to draw on the board or a flip chart, if possible. If you are unable to do that, you may want to draw each piece of the diagram on separate pieces of paper and put them on the wall when you get to that point of the introduction.
- 3. When you have written answers on the participant handout, remember to take time to review them as a class for an interactive exercise.

There are three small things you can do to make your sessions supportive events for participants to look

- First, miss people who aren't there. Follow up and let them know you missed them. Send a get well card if he or she is sick.
- · Second, celebrate birthdays and any other personal milestones. Announce at the beginning of class it is a participant's birthday. Give him or her a card and, if feasible, a small gift.
- Third, wear bright colors on days you have groups or family sessions. Bright colors can give everyone a little lift.

TeamSolutions Workbook 3 Understanding Your Illness

Session 5 - Symptoms are Important to Diagnosis and Recovery

Suggestion for Topic Introduction and Relevance to Participants

"When a person is sick and decides he or she needs to go to the doctor or a clinic, what is he or she hoping for?"

(Examples of some possible replies include, "The person wants to feel better," "The person wants the doctor to recognize what's wrong," and "The person wants the doctor to fix him.")

"What's that called?"

(Help them get to the word "diagnosis.")

"And how does the medical person figure out what the diagnosis is?"

(Look for the answer, "Symptoms." Establish this chain of events and write it on the board, a flip chart or papers to hang on the wall.)

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key 1. B 2. A 3. B 4. B

Diagnosis

"The person wants relief. He or she wants the medical person to look him or her over (see symptoms), decide what's wrong (give diagnosis), and treat the illness to make it better. This is great! You have just covered a lot of important things that we will be studying in this workbook."

"Today we will talk about symptoms."

T - topic introduction

R - relevance to participant

I - identify objectives

M – materials for session
M – motivate to use





Session 5 - Symptoms are Important to Diagnosis and Recovery

Review of Session 4: Acceptance



Main Learning Points of Session 4

What were the main learning points of Session 4? If you did not attend the last session, you may guess, and also write the answers as people say them:

e is taking the fire	st steps to achieve your life
ceptance may be u	e at first.
ceptance of a mental i	_s is a process that takes time.
actice Option Review: nal practice option(s) did you choose?	
nplete your personal practice yet?	
Yes. How did it go?	
No. What got in the way of completi	ng your practice?
If you still plan to complete your prac	ctice, when will you do it?
I didn't choose a personal practice	option.
	Is. It is the opposite of giving up. eptance may be u eptance of a mental i actice Option Review: tal practice option(s) did you choose? plete your personal practice yet? Yes. How did it go? No. What got in the way of completi

Assessm	ent				
Directions: 1. Read each ques 2. Read every ans 3. Mark only one	tion carefully.	rking one.			ur Score: out of 4
B. Sign of C. Test to	an illness. determine an				
2. One example of	of a prescribe	r is a Nurse Pr	actitione	r.	
A. True	B. False				
3. A mental illnes A. True	ss is not a phy B. False	/sical disease.			
4. Only a doctor	can monitor s	symptoms.			
A. True	B. False				
5. I am confident	I know what	my symptoms	are.		
Strongly Disagree	Disagree	Neither Agree Nor Disagree	□ Agre	e Strongly Agree	Unsure
6. This information	on is importa	nt for me to kn	ow.		
Strongly Disagree	□ Disagree			□ Agree	Strongly Agree
	Directions: 1. Read each ques 2. Read every ans 3. Mark only one Name: Date: 1. Symptom mea A. Name o B. Sign of C. Test to D. An illno 2. One example o A. True 4. Only a doctor A. True 5. I am confident Strongly Disagree 6. This information	1. Read each question carefully. 2. Read every answer before ma 3. Mark only one answer to each Name: Date: 1. Symptom means: A. Name of an illness. B. Sign of an illness. C. Test to determine an D. An illness is definitely. 2. One example of a prescribe A. True B. False 3. A mental illness is not a phy A. True B. False 4. Only a doctor can monitor s A. True B. False 5. I am confident I know what Strongly Disagree 6. This information is important Strongly Disagree	Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question. Name: Date: 1. Symptom means: A. Name of an illness. B. Sign of an illness. C. Test to determine an illness. D. An illness is definitely present. 2. One example of a prescriber is a Nurse Proceeding A. True B. False 3. A mental illness is not a physical disease. A. True B. False 4. Only a doctor can monitor symptoms. A. True B. False 5. I am confident I know what my symptoms Strongly Disagree Nor Disagree 6. This information is important for me to know the policy of the poli	Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question. Name: Date: 1. Symptom means: A. Name of an illness. B. Sign of an illness. C. Test to determine an illness. D. An illness is definitely present. 2. One example of a prescriber is a Nurse Practitioner. A. True B. False 3. A mental illness is not a physical disease. A. True B. False 4. Only a doctor can monitor symptoms. A. True B. False 5. I am confident I know what my symptoms are. Strongly Disagree Neither Agree Nor Disagree 6. This information is important for me to know.	Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question. Name: Date: 1. Symptom means: A. Name of an illness. B. Sign of an illness. C. Test to determine an illness. D. An illness is definitely present. 2. One example of a prescriber is a Nurse Practitioner. A. True B. False 3. A mental illness is not a physical disease. A. True B. False 4. Only a doctor can monitor symptoms. A. True B. False 5. I am confident I know what my symptoms are. Strongly Disagree Neither Agree Agree Strongly Disagree 6. This information is important for me to know.

TeamSolutions Workbook 3 Understanding Your Illness Session 5 - Symptoms are Important to Diagnosis and Recovery **Topic Assessment** At the end of the session, answer these questions before turning in 7. This session helped me. Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree 8. What I liked about this session: 9. How this session could have been better for me: _ 45 Lilly

TeamSolutions Workbook 3 Understanding Your Illness

Session 5 - Symptoms are Important to Diagnosis and Recovery

Symptoms Are Important to Diagnosis and Recovery

Objectives for this Session

- 1. Identify what is a "symptom."
- 2. Understand the role of a prescriber.
- 3. Recognize that a mental illness is a brain disease.

What is a symptom?

The dictionary defines "symptom" as a condition of an illness that can be used to determine if an illness is present. A symptom is a sign of illness—especially when it causes a person to notice changes in their normal function, sensations, or appearance.

Main Learning Point #1

A symptom is a sign that an illness is present.

Why are symptoms important?

Symptoms play a very important role in any illness, regardless of the part of the body that is affected. Symptoms let you know that something is not right by causing discomfort. They can also make it harder for you to do the things you would normally do. Symptoms may cause you to seek relief by going to a clinic, a doctor, or another trained medical person (such as a nurse practitioner) who can prescribe medicine. Someone who is qualified to prescribe medicine, including a doctor, is called a prescriber. The prescriber carefully looks at all of the symptoms, together with any other important information, and makes a diagnosis. In other words, the prescriber identifies the illness.

Session 5 - Symptoms are Important to Diagnosis and Recovery

Why are symptoms important?

(continued)



An illness that I have been diagnosed with and treated for is

The symptoms that led me to go to a prescriber were

Symptoms are, by far, the most important clues for making a correct diagnosis. Your prescriber will work with you to identify the symptoms and evaluate them. The following information about the symptoms is important:

- 1. The type of symptoms you're having.
- 2. How severe the symptoms are.
- 3. How long you have had these symptoms.
- 4. What your life was like before these symptoms appeared.
- 5. How old you were when the symptoms first appeared.
- 6. If you have ever taken medicine to treat similar symptoms.
- 7. If you did take medicine:
 - a. Did the symptoms improve?
 - b. If the symptoms improved, how soon after treatment started did you start feeling better?
 - c. Did any of your symptoms go away?

Main Learning Point #2

Symptoms are necessary to make a correct diagnosis.

Lilly

In addition to symptoms, the prescriber will also consider other important factors such as your family history of illness and lab test results.

TeamSolutions Workbook 3 Understanding Your Illness

Session 5 - Symptoms are Important to Diagnosis and Recovery

Why are symptoms important?

(continued)

When someone has a mental illness, the part of the body with a problem is the brain. The brain is an organ, just like the heart, lungs, liver, and kidneys. Any organ can become diseased.

Main Learning Point #3

A mental illness is a brain disease.



List any three organs in the human body. Beside each organ, list a disease that that organ can have:

	ORGAN	DISEASE
1		
2		
3		

Trained medical professionals are skilled at recognizing symptoms, but a person with a mental illness can also learn how to recognize symptoms. This is called "symptom monitoring." Symptom monitoring is a recovery tool. It can help you control illness by helping you respond to early warning symptoms of a relapse.

Main Learning Point #4

Monitoring symptoms is an important recovery tool.



Do you know someone who uses symptom monitoring to stay well?

☐ Yes ☐ No

If yes, what medical condition does the person have? Circle one:

Asthma High blood pressure Substance abuse Diabetes
Other:

48

Session 5 - Symptoms are Important to Diagnosis and Recovery

Reviev



he <i>main l</i>	earning points of this session are:
1	
2	
3	
4	
ove Forw	vard – Choose a Personal Practice Option
	ant to practice new knowledge and skills. What will you do between e next session? Please choose one option from the list below:
□1.	STUDY. I am going to reread my handout at least once.
□ 2.	SHARE. I will share my handout with someone in my support system. I will ask to read it and talk with me about it.
□ 3.	LEARN. I will know the name of my prescriber by the next session and let the facilitator know who it is.
□ 4.	OTHER:
ke an "E	xtra Step Forward" (optional)
□ 5.	ASK. The next time I meet with my prescriber, I will talk with him or her and decide one or two symptoms I should watch for. I will tell my treatment team if the symptoms start to happen.
our persor	ime left before the end of the session, you might talk about nal practice goals. How will you remember and complete your goals session?

TeamSolutions Workbook 3 Understanding Your Illness

Session 6 - Symptoms Checklist (Part 1)



Symptoms Checklist (Part 1)

Facilitator Notes

Main Learning Points from last session: Symptoms Are Important to Diagnosis and Recovery

- 1. A symptom is a sign that an i<u>llnes</u>s is present.
- 2. Symptoms are essential for making a correct diagnosis.
- 3. A mental illness is a brain illness.
- 4. Monitoring symptoms is an important recovery tool.

Review Personal Practice Options from last session.

Remember

It is important to acknowledge and discuss participant's successes, progress, and challenges.



This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

Tips for this Session

- 1. Do three things throughout this session.
- a. First, walk around and offer support as they fill out the checklist.
- b. Second, as each item is read, be sure it is understood before moving to the next symptom.
- c. Third, at the end of each list of symptoms, pause for discussion before moving on to the next category of symptoms.
- 2. Explain to participants that they probably will not have every type of symptom mentioned in this session.



Session 6 - Symptoms Checklist (Part 1)

Suggestion for Topic Introduction and Relevance to Participants

"In the last session we learned the importance of symptoms and how we use them to decide what the correct diagnosis is. What's even more helpful is for you to talk to your prescriber and treatment team about your own symptoms. You need to be a part of that discussion when you go in for medical care."

"When you go for your appointment, do you tell your prescriber about how you are doing with your symptoms? Do you tell him or her which symptoms have cleared up, which are getting worse, what (if any) new symptoms you have, and which symptoms bother you the most? Does your prescriber ask you questions about your symptoms to check how you are doing? Raise your hand if you talk about these types of things at your appointments."

"Would it be helpful for you to be able to discuss your symptoms like this with your prescriber?"

"In this session and the next one, you will learn how to come up with your own checklist of symptoms."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. B 2. C 3. A 4. B

T - topic introduction

R - relevance to participant

M - materials for session M - motivate to use

Lilly

TeamSolutions Workbook 3 Understanding Your Illness

Session 6 - Symptoms Checklist (Part 1)

Review of Session 5: Symptoms Are Important to Diagnosis and Recovery



Main Learning Points of Session 5

What were the main learning points of Session 5? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. A symptom is a sign that an is is present.
2. Symptoms are essential for making a correct ds.
3. A mental illness is a bn illness.
4. Mg symptoms is an important recovery tool.
Personal Practice Option Review: What personal practice option(s) did you choose?
Did you complete your personal practice yet?
☐ 1. Yes. How did it go?
\square 2. No. What got in the way of completing your practice?
If you still plan to complete your practice, when will you do it?
☐ 3. I didn't choose a personal practice option.

	Session 6 – Symptoms Ch	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Topic	Assessm	ent				
	Mark one: Properties. Directions: 1. Read each quest 2. Read every ans	stion carefully	arking one.			Score: out of 4
	3. Mark only one		cii questioii.			
	Name:					
	Date:					
	B. Can he C. Happer	lp you get be	trained profession tter treatment. time treatment be			
	2. An example of	f a negative s	symptom is:			
	B. Blamin C. Not ha		•	noney I spe	nd.	
	3. Cognitive sym	ptoms appe	ar when the brain	can't prod	ess informa	tion well.
	A. True	B. False				
			ign of improveme	ent.		
	A. True	B. False				
	5. I am confident	I know how	to recognize whe	n I have s	ymptoms.	
	☐ Strongly Disagree	☐ Disagree	☐ Neither Agree Nor Disagree	☐ Agree	Strongly Agree	Unsure

	6. This information	n is important fo	r me to know.		
	☐ Strongly Disagree	□ Disagree	□ Neither Agree Nor Disagree	□ Agree	□ Strongl Agree
	At the <u>end</u> of the s his paper:	session, answer	these questions be	efore turning	in
7	7. This session he	elped me.			
	Strongly Disagree	□ Disagree	□ Neither Agree Nor Disagree	☐ Agree	Strongl Agree
8	3. What I liked abo	out this session:			
Ç). How this session	on could have be	en better for me: _		

Session 6 - Symptoms Checklist (Part 1)

Symptoms Checklist (Part 1)

Objectives for this Session

- Identify any positive symptoms that you have (if you have positive symptoms).
- 2. Identify any negative symptoms that you have (if you have negative symptoms).
- 3. Recognize any cognitive symptoms that you have (if you have cognitive symptoms).

Identifying Personal Symptoms

There are several types of symptoms that are possible signs of mental illness—positive symptoms, negative symptoms, cognitive symptoms, and mood symptoms (depression, mania, and mixed mania).

During this session and the next session, you will look at a checklist of each of these types of symptoms and check off any that you have had in the past six weeks. This checklist will help to identify your symptoms.

There are a many reasons you should identify symptoms:

- It will help you recognize the symptom as a sign of an illness that can be treated, which makes the symptom not so frightening. This can give you hope.
- 2. It will help your treatment team to be more helpful because you are better able to talk about your symptoms.
- 3. It will help you track how you are doing. This may help you prevent a relapse and help you move forward in your recovery.

Main Learning Point #1

Identifying and talking about symptoms with your treatment team leads to better treatment.

TeamSolutions Workbook 3 Understanding Your Illness

Session 6 - Symptoms Checklist (Part 1)

Symptoms Checklist (Part 1)

(continued)

It is not uncommon, in both schizophrenia and bipolar disorder, for some other types of symptoms to appear later. It is a good idea to save this checklist to refer to in the future. Updating your symptoms list is something you may want to do every so often.

Symptom Checklist:

Instructions: Put a check in the box beside any symptom you have had during the past six weeks.



Positive Symptoms are "add on symptoms" that are not present when the brain is working right.

Over-stimulated Senses

- \square 1. Certain colors bother me—they seem too bright or intense.
- □ 2. There are too many noises and sounds—I can't focus on what I want to hear.
- □ 3. Noises are louder than usual sometimes.
- ☐ 4. Lights really bother me—they are too bright.
- ☐ 5. Other: _____

Hallucinations

- ☐ 1. I see ghost-like figures.
- \square 2. What I see in the mirror is not me.
- \square 3. I hear a voice that no one else can hear.
- 4. I hear two voices talking about me.
- ☐ 5. A voice (not my own) tells me to do things.
- ☐ 6. My food or drink tastes as if it has been poisoned.
- \square 7. I smell sweet odors.
- □ 8. It feels like something is crawling on my skin.
- □ 9. Other:





Session 6 - Symptoms Checklist (Part 1)

Symptoms Checklist (Part 1)

(continued)



Overly Suspicious

Г	٦ 1	1	T	have	many	fears	about	heino	harmed	or	killed

- \square 2. I think people are plotting against me.
- \square 3. I believe someone is watching me.
- \square 4. I think someone is trying to poison me.
- \square 5. I think people are following me.
- ☐ 6. I believe messages are being sent about me.
- ☐ 7. I believe someone is playing tricks on me.
- □ 8. I think people are talking about me or making fun of me.
- \square 9. My neighbors are bothering me.
- ☐ 10. I believe somebody goes through my things and moves them.
- □ 11. Other: _____

Main Learning Point #2

Positive symptoms are "add on symptoms" that are not present when the brain is working right.



Negative Symptoms are missing behaviors and abilities that are present when the brain is working right.

- \square 1. Often, it is hard to relate to other people.
- □ 2. Usually, I would rather be alone than with other people.
- □ 3. I do not feel like planning or beginning any tasks.
- ☐ 4. Often, I feel like staying in bed all day.
- □ 5. I do not feel like washing myself, combing my hair, or getting dressed.
- ☐ 6. I hardly ever want to talk with others.
- \square 7. It is so hard to figure out what to do first.
- \square 8. Few things make me happy.
- \square 9. People have told me I do not show emotion in my face or voice.
- □ 10. I do not want to do anything.
- □ 11. Other: _

TeamSolutions Workbook 3 Understanding Your Illness

Session 6 - Symptoms Checklist (Part 1)

Symptoms Checklist (Part 1)

(continued)



Having Difficulty Talking to Others

- ☐ 1. I think it is hard to start a conversation because I do not have anything to say.
- \square 2. It is hard to express my thoughts.
- □ 3. I can't understand people when they speak.
- ☐ 4. People sometimes do not understand what I am saying.
- □ 5. Other:

Main Learning Point #3

Negative symptoms are missing behaviors and abilities that are present when the brain is working right.

Cognitive Symptoms happen when the brain is not able to process information well.



Trouble Concentrating

- \square 1. It is hard to pay attention for long periods of time.
- \square 2. At times, I have too many thoughts.
- \square 3. My thoughts are sometimes jumbled or confused.
- \square 4. I have so many ideas that I jump from one to another quickly.
- □ 5. At times, I have trouble reading books or following movies.
- \square 6. It is sometimes hard to focus on what people are saying to me.
- □ 7. At times, it is hard getting my thoughts together.
- ☐ 8. I can't hear well over background noises.
- □ 9. Sometimes I lose my train of thought.
- □ 10. I have problems with my memory.
- ☐ 11. Other: _

Main Learning Point #4

Cognitive symptoms happen when the brain is not able to process information well.





Session 6 - Symptoms Checklist (Part 1)



The main learning points of this session are:
1
2
3
4
Move Forward – Choose a Personal Practice Option
It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:
☐ 1. STUDY. I am going to reread my handout at least once.
☐ 2. SHARE. I will share my handout with someone in my support system. I will ask
□ 3. PLAN. I will ask to help me plar a way we can work together to track my symptoms.
□ 4. OTHER:

TeamSolutions Workbook 3 Understanding Your Illness

Session 7 - Symptoms Checklist (Part 2)

Symptoms Checklist (Part 2) Facilitator Notes

Main Learning Points from last session: Symptoms Checklist (Part 1)

- 1. Identifying and talking about symptoms with your treatment team leads to
- 2. Positive symptoms are "add-on symptoms" that are not present when the brain is
- 3. Negative symptoms are missing behaviors and abilities that are present when the brain is working right.
- 4. Cognitive symptoms happen when the brain is not able to process information well.

Review Personal Practice Options from last session.



This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

Tip for this Session

1. This is Part 2 of the "Symptoms Checklist." As participants continue to complete the checklist, be available to offer assistance if desired. Remind participants they will probably not have every type of symptom mentioned.

Encourage participants to identify personal examples of the main learning points. Talk about it. If we don't, we may be on totally different wavelengths. By talking about what the participants understand about the lesson, you can determine if the participants understand the material. Discussion allows you to know whether to explain more or to move on because the participants have adequate comprehension.



Session 7 - Symptoms Checklist (Part 2)

Suggestion for Topic Introduction and Relevance to Participants

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"Last time we met, we began making a personal symptom checklist. Why would someone want to do that? What are the benefits?"

(Compile a list of their responses on the board or a flip chart, if you have one. If not, talk about this topic and encourage everyone to participate.)

"It sounds like there are many good reasons to work on a personal symptom checklist. Today we will complete the lists."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. C 2. B 3. A 4. D

T - topic introduction

R - relevance to participant

M - materials for session M - motivate to use

Lilly

TeamSolutions Workbook 3 Understanding Your Illness

Session 7 - Symptoms Checklist (Part 2)

Review of Session 6: Symptoms Checklist (Part 1)



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Main Learning Points of Session 6

What were the main learning points of Session 6? If you did not attend the last session, you may guess, and also write the answers as people say them:

- 1. Identifying and talking about s____ ____s with your treatment team leads to better treatment.
- 2. Positive symptoms are "a_____on symptoms" that are not present when the brain is working right.
- 3. Negative symptoms are m_____g behaviors and abilities that are present when the brain is working right.
- 4. Cognitive symptoms happen when the b_____n is not able to process information well.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

No. What got in the way of completing your practice?	
If you still plan to complete your practice, when will you do	it?

□ 3. I didn't choose a personal practice option.

	TeamSolutions Workbook 3 Understanding Your Illness Session 7 – Symptoms Checklist (Part 2)
Topic	c Assessment
	Mark one: ☐ Pre ☐ Post Your Score: + out of 4 Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question.
	Name:
	Date:
	 A. I think people are plotting against me. B. I am confused. C. Not being able to control how much money I spend. D. Not being able to stop crying. 2. Manic symptoms, but not depressed symptoms, are outside the normal range of moods. A. True B. False 3. In mixed mania, symptoms of depression are present at the same time with symptoms of mania. A. True B. False
	4. Which of the symptoms listed below is a depressed symptom?
	 A. There are too many noises and sounds—I can't focus on what I want to her B. The radio is broadcasting my thoughts. C. I am being watched and followed. D. I can't stop crying.
	5. I am confident I can learn to manage my symptoms.
	Strongly Disagree Neither Agree Agree Strongly Unsure Disagree Nor Disagree Agree

	6. This informatio	n is important fo	r me to know.	П	
	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongl Agree
	At the <u>end</u> of the s this paper:	session, answer	these questions be	efore turning	in
-	7. This session he	elped me.			
	Strongly Disagree	□ Disagree	☐ Neither Agree Nor Disagree	☐ Agree	Strongl
8	8. What I liked abo	out this session:			
9	9. How this session	on could have be	en better for me: _		

Session 7 - Symptoms Checklist (Part 2)

Symptoms Checklist (Part 2)

Objectives for this Session

- Identify depressed symptoms that you have (if you have depressed symptoms).
- 2. Identify manic symptoms that you have (if you have manic symptoms).
- 3. Recognize mixed manic symptoms that you have (if you have mixed manic symptoms).

Symptom Checklist:

Instructions: Put a check in the box beside any symptom you have had during the past six weeks.



Symptoms of Depression appear when a person's "mood thermostat" is broken, allowing moods to go below the standard range of moods.

- □ 1. My life is no longer good, and I don't think it will ever be good again.
- \square 2. I used to have hobbies but I gave them up.
- \square 3. I don't have the energy to leave my house.
- ☐ 4. I can't follow the plots of TV programs that I used to enjoy.
- ☐ 5. I can't enjoy reading like I used to because I just can't focus now.
- \square 6. I can't stop crying.
- ☐ 7. Food is not good or important—I forget to eat.
- □ 8. My sex drive is reduced.
- \square 9. I am no good to anyone. The world would be better off without me.
- □ 10. I wish I could sleep and be rested but I just toss and turn.
- ☐ 11. I sleep too much and can't get out of bed.
- ☐ 12. I wish I were dead.
- ☐ 13. I do not want to interact with other people and I quit calling my friends.
- ☐ 14. Other:

Main Learning Point #1

Symptoms of depression appear when your "mood thermostat" allows moods to go below the standard range of moods.

TeamSolutions Workbook 3 Understanding Your Illness

Session 7 - Symptoms Checklist (Part 2)

Symptoms Checklist (Part 2)

(continued)



Symptoms of Mania appear when a person's "mood thermostat" is broken, allowing moods to go above the standard range of moods.

1.	I have	too	much	energy

- ☐ 2. I keep having all these really great ideas.
- \square 3. It is fun and powerful to drive fast.
- ☐ 4. Who needs sleep—not me.
- \square 5. I can't focus on anything.
- ☐ 6. Other people can't keep up with me—they get on my nerves.
- ☐ 7. My thoughts are racing through my head so fast I can't keep up with them.
- □ 8. I feel very sexy now—I don't want to miss anything good in life.
- \square 9. I am too much of a man or woman for just one person.
- ☐ 10. It takes money to make money and I am going to spend and be rich.
- ☐ 11. Who worries about bills coming due—not me.
- ☐ 12. I have a lot to say and you should listen and benefit.
- □ 13. I have my rights and I will stand up for them.
- ☐ 14. I am applying for more credit cards because mine are at their limit.
- □ 15. Other: _____

Main Learning Point #2

Symptoms of mania appear when your "mood thermostat" allows moods to go above the standard range of moods.





Session 7 - Symptoms Checklist (Part 2)

Symptoms Checklist (Part 2)

(continued)



Symptoms of Mixed Mania appear when a person's "mood thermostat" is broken, allowing moods to go above and below the standard range of moods at the same time. People who have a mixed manic episode may have several symptoms of depression and several symptoms of mania together. The person often has a depressed mood as well as the signs of a manic episode.

 1. I am sad and hopeless but it doesn't matter because I have so much energy.
2. I wish I were dead.
□ 3. I can't focus on anything.
☐ 4. I am not getting much sleep at night and I am tired, but my body seems to have the energy to go all day.
☐ 5. My sex drive is really high.
☐ 6. My thoughts are racing through my head so fast I can't keep up with them.
☐ 7. I'm irritable and grouchy.
☐ 8. People around me tell me I talk too much.
□ 9. Other:

Main Learning Point #3

Symptoms of mixed mania appear when your "mood thermostat" allows moods to go above and below the standard range of moods at the same time. TeamSolutions Workbook 3 Understanding Your Illness

Session 7 - Symptoms Checklist (Part 2)

Recording My Symptoms



Look at all of the boxes you've marked on both checklists (Sessions 6 & 7) and answer the following questions:

Whic	h symptoms have bothered you the most over the past month?
	1
	2
	3
	4
Whic	h symptoms never seem to go away?
	1
	2
	3
	4
Whic	h symptoms have gotten better over the past month?
	1
	2
	3
	4
Wha	makes these symptoms better or worse?
	1
	2
	3
	4

Lilly

Session 7 - Symptoms Checklist (Part 2)

Review & Moving Forward



The main learning points of this session are:
1
2
3
Move Forward – Choose a Personal Practice Option
It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:
☐ 1. STUDY. I am going to reread my handout at least once.
☐ 2. SHARE. I will share my handout with someone in my support system. I will ask to read it and talk with me about it.
☐ 3. PLAN. I will ask to help me plan a way we can work together to monitor for symptoms.
□ 4. OTHER:
Take an "Extra Step Forward" (optional)
☐ 5. DISCUSS. I will discuss the checklist from sessions 6 and 7 with a family member or friend so they will have a better understanding of my symptoms.

TeamSolutions Workbook 3 Understanding Your Illness

Session 8 - Reasons for Symptoms in Mental Illness

8

Reasons for Symptoms in Mental Illness

Facilitator Notes

Main Learning Points from last session: Symptoms Checklist (Part 2)

- Symptoms of depression appear when your "mood thermostat" allows moods to go below the standard range of moods.
- 2. Symptoms of mania appear when your "mood thermostat" allows moods to go above the standard range of moods.
- 3. Symptoms of mixed mania appear when your "mood thermostat" allows moods to go above and below the standard range of moods at the same time.

Review Personal Practice Options from last session.

Tips for this Session

- 1. This is a lengthy session with complex information. You know the participants, so draw from your experience and knowledge as how to best use these materials. It is empowering for participants to have knowledge about the scientific basis of their illness, even if they do not remember it in great detail. You may want to make this a two-session review for greater retention.
- 2. You may want to draw diagrams on the board to illustrate each section. For example, for the first diagram, "What Brain Chemicals Are Supposed to Do," draw a profile of a head (see diagram in this session). Draw in arrows for:
 - a. Receive (point-down, line up back of eyes, from center top of head).
 - b. Process (draw dotted lines for neural pathways between first point and frontal cortex area over eyebrows).
 - c. Make decisions (arrow to frontal cortex area over eyebrows).
- 3. Ask for examples of symptoms that arise from each "connection problem." To encourage examples, give situations such as, "If he is walking down a busy sidewalk and this type of brain chemical imbalance effect is happening, what might he he experiencing?"

General Tip

Trash Can Quality Indicator. Check the "quality indicators" for your program to see how it's received. Some obvious examples are pre- to post-session Topic Assessment score changes, number of referrals, participant feedback, etc. Don't forget the trash can—it's an excellent quality indicator. If participant handouts are thrown away as participants leave the room, it's an indication they weren't engaged. It should also tell you something if diplomas and/or reinforcers are also thrown away. Watch for signs of disengagement and modify your sessions accordingly. Accepting and using feedback helps you grow professionally.



Session 8 - Reasons for Symptoms in Mental Illness

Suggestion for Topic Introduction and Relevance to Participants

"Have any of you ever tried to repair a car? Raise your hands if you have."

"I see a few of you have. Well, from what I understand about auto repair, it is helpful to know how everything connects to make the motor work right. It is great when you can work with someone who knows how to make car repairs and can teach you what might be wrong. So there are two things we need to know to fix a motor:

- 1. How it is connected when it works right.
- 2. What is happening when it doesn't work right."

(You may want to write these two points on the board.)

"Does that make sense to everybody?"

"This is also a way to understand illness in the brain. To understand what might not be working right in a mental illness, we need to know how things are connected when it works right. We also need to know what is happening in our brains when they don't work right."

"Todav we will talk about reasons for symptoms in psychiatric illness."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. B 2. C 3. B 4. B

T - topic introduction

R - relevance to participant

M - materials for session M - motivate to use

Lilly

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TeamSolutions Workbook 3 Understanding Your Illness

Session 8 - Reasons for Symptoms in Mental Illness

Review of Session 7: Symptoms Checklist (Part 2)



Main Learning Points of Session 7

What were the main learning points of Session 7? If you did not attend the last session, you may guess, and also write the answers as people say them:

- ____n appear when your "mood 1. Symptoms of d_____ thermostat" allows moods to go below the standard range of moods.
- 2. Symptoms of m_____ ____a appear when your "mood thermostat" allows moods to go above the standard range of moods.
- 3. Symptoms of mixed mania appear when your "mood _t" allows moods to go above and below the standard range of moods at the same time.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet? ☐ 1. Yes. How did it go? _

If you still plan to complete your practice, when will you do it?

□ 3. I didn't choose a personal practice option.

	TeamSolutions Workbook 3 Understanding Your Illness Session 8 – Reasons for Symptoms in Mental Illness	
	Session 6 Reasons for Symptoms in Filena Liness	
pic	c Assessment	
P		
		Your Score: + out of
A)	Directions:	+ Out or
	1. Read each question carefully.	
	2. Read every answer before marking one.	
	3. Mark only one answer to each question.	
	Name:	
	Date:	
	 When medicine is taken the right way, schizophrenia and bipo can be cured. 	olar disorder
	can be cured.	
	A True R Feles	
	A. True B. False	
	A. True B. False 2. The brain cannot normally process the information it receives	s:
		s:
	2. The brain cannot normally process the information it receivesA. If the person is given medicine.B. If an outside force is influencing the brain.	
	2. The brain cannot normally process the information it receives A. If the person is given medicine. B. If an outside force is influencing the brain. C. If the person is sick due to schizophrenia or bipolar disorder.	
	2. The brain cannot normally process the information it receivesA. If the person is given medicine.B. If an outside force is influencing the brain.	
	2. The brain cannot normally process the information it receives A. If the person is given medicine. B. If an outside force is influencing the brain. C. If the person is sick due to schizophrenia or bipolar disorder.	der.
	 2. The brain cannot normally process the information it receives A. If the person is given medicine. B. If an outside force is influencing the brain. C. If the person is sick due to schizophrenia or bipolar disor D. If interference is too great. 	der.
	 2. The brain cannot normally process the information it receives A. If the person is given medicine. B. If an outside force is influencing the brain. C. If the person is sick due to schizophrenia or bipolar disor D. If interference is too great. 3. After psychiatric medicine improves symptoms, medicine car 	der. n be stopped.
	 2. The brain cannot normally process the information it receives A. If the person is given medicine. B. If an outside force is influencing the brain. C. If the person is sick due to schizophrenia or bipolar disor D. If interference is too great. 3. After psychiatric medicine improves symptoms, medicine car A. True B. False 	der. n be stopped.
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	 The brain cannot normally process the information it receives A. If the person is given medicine. B. If an outside force is influencing the brain. C. If the person is sick due to schizophrenia or bipolar disor D. If interference is too great. After psychiatric medicine improves symptoms, medicine car A. True B. False Schizophrenia happens to approximately 3 out of 100 people. 	der. n be stopped.
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	 The brain cannot normally process the information it receives A. If the person is given medicine. B. If an outside force is influencing the brain. C. If the person is sick due to schizophrenia or bipolar disor D. If interference is too great. After psychiatric medicine improves symptoms, medicine car A. True B. False Schizophrenia happens to approximately 3 out of 100 people.	der. n be stopped. . ngly Unsur
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	 The brain cannot normally process the information it receives A. If the person is given medicine. B. If an outside force is influencing the brain. C. If the person is sick due to schizophrenia or bipolar disor D. If interference is too great. After psychiatric medicine improves symptoms, medicine car A. True B. False Schizophrenia happens to approximately 3 out of 100 people. A. True B. False I am confident I can learn to manage my symptoms. Strongly Disagree Neither Agree Agree Stron Nor Disagree Agree Agree 	der. n be stopped. . ngly Unsur

	TeamSolutions Workboo Session 8 – Reasons for Sy	ok 3 Understanding You mptoms in Mental Illnes			
Tonio	1 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3				
Topic	Assessme	ent			
	At the <u>end</u> of the this paper:	session, answer	these questions be	efore turning	in
	7. This session h	elped me.			
	Strongly	☐ Disagree	□ Neither Agree	☐ Agree	Strongly
	Disagree		Nor Disagree		Agree
	8. What I liked ab	out this session:			
	-				
	9. How this sessi	on could have be	en better for me: _		

Session 8 - Reasons for Symptoms in Mental Illness

Reasons for Symptoms in Mental Illness

Objectives for this Session

- 1. Identify 3 ways brain chemicals carry messages in the brain.
- 2. Identify how medicine might correct brain chemical imbalance and improve your symptoms.

The symptom checklist covers symptoms of schizophrenia and bipolar disorder. There are many theories as to why people may have these symptoms. One explanation is that these symptoms occur when the chemicals in the brain get out of balance. About one out of every 100 adults is diagnosed as having schizophrenia and about three out of every 100 adults are diagnosed as having bipolar disorder. It is not fully known why this happens to some people and not to others.

Main Learning Point #1

One reason why people develop symptoms is because brain chemistry gets out of balance. TeamSolutions Workbook 3 Understanding Your Illness

Session 8 - Reasons for Symptoms in Mental Illness

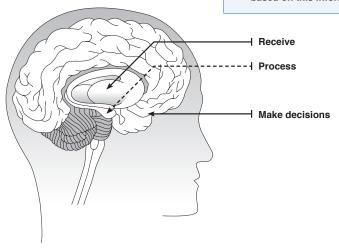
What Brain Chemicals Are Supposed to Do

The brain is a complicated and complex network of nerve cells. These nerve cells "talk" with each other by electrical impulses and chemical signals. The chemicals in the brain help to:

- 1. **Receive** the right information from the world around you.
- 2. **Process** or make sense of the information (pair it with memories).
- Make decisions and decide what to do based on the information that's received and processed. The front of the brain helps to guide you in new situations and make future plans.

Main Learning Point #2

The three steps in brain chemical communication include: receive information, process information and make decisions based on this information.



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Session 8 - Reasons for Symptoms in Mental Illness

What Brain Chemicals Are Supposed to Do

(continued)

The Way The Brain Receives Information

Schizophrenia and bipolar disorder affect the way the brain receives information in these ways:

1. Too much information can overload the brain.

Sometimes your senses (sight, smell, hearing, taste, and touch) become sensitive, or easily bothered by the world around you. Lights may seem too bright. Background noises may be too loud. You may find it hard to focus on one task because you are distracted by other things going on around you. The brain may have trouble sorting out what you see and hear. When your senses are overloaded like this, messages to your brain are often jumbled and confusing.

2. Information that the brain receives may not be accurate.

Any one (or more) of your senses can "play tricks" on you. When this happens, you might hear, see, taste, touch, or smell something that others do not experience. This is called a "hallucination." The brain may not be receiving accurate information.

3. The brain may store information incorrectly.

Usually, when your brain puts a new experience into its memory bank, it tries to file the experience with other similar experiences. This makes it easier for your brain to "pull up" a memory when you need it. Sometimes the brain may receive new information but store it in the wrong file. This may cause you to have trouble remembering experiences when you want to. You may also respond with a wrong emotion, such as laughing at sad news.

TeamSolutions Workbook 3 Understanding Your Illness

Session 8 - Reasons for Symptoms in Mental Illness

What Brain Chemicals Are Supposed to Do

(continued)

The Way the Brain *Processes* Information

Schizophrenia or bipolar disorder may affect the way the brain understands information in these ways:

1. The brain may process information too slowly or too quickly.

When this happens, your brain may be flooded with information. It can be overworked and overloaded. Response time may slow down because there is just too much information to think about. It may take longer to learn a new skill than before you became ill. Or, you may be processing information at such a fast rate that you lose focus, jump from topic to topic, have poor judgment, or may not be able to make good decisions.

2. The brain may not have all of the information it needs to understand the message.

This may cause your brain to receive only bits and pieces of information—like pieces of a puzzle. When this happens, you may have to struggle to fit those pieces together so the message makes sense. Or, you may act impulsively because you do not have the patience to wait and get all of the facts and information you need to make a decision.

3. Your brain comes to the wrong conclusions.

Using incomplete messages can lead to illogical or incorrect conclusions—resulting in false beliefs, such as delusions.

4. The mood messages may not fit the situation.

Brain chemicals that carry mood messages can't accurately fit the mood to the situation because they are out of balance—either too high or too low. This may cause you to have severe or sudden changes in mood, such as being happy, sad, or irritable, without understanding why.





Session 8 - Reasons for Symptoms in Mental Illness

What Brain Chemicals Are Supposed to Do (continued)

Making Decisions Can Be Difficult

Some people who are ill find it very difficult to make decisions. And sometimes the decisions they make may not be in their best interest. But these might be the best decisions they can make at the time based on the information they have received and processed.

Main Learning Point #3

An ill brain may not be able to receive or process information correctly.

The good news is that medicine may help improve the way most people receive and understand information. Over time, making decisions may become easier as thoughts become clearer, moods may become more stable, skills may improve, and confidence may increase.

One of the best ways to relieve symptoms is to take medicine that will help adjust this chemical imbalance. The longer medicine is taken the way it is prescribed, the better the chances are that the symptoms will improve.

Schizophrenia and bipolar disorder are illnesses that do not have a cure. Just because these illnesses cannot be cured does not mean a person can't have a full and meaningful life.

More medicines and treatments for mental illnesses continue to be discovered. Medicine can help you manage symptoms. If you stop taking your medicine, your symptoms are more likely to return in the near future. That's why it is important to take medicine, the way it is prescribed every day, even if you are getting better and the symptoms have gone away.

Main Learning Point #4

If medicine is stopped, the brain chemistry gets back out of balance and symptoms usually return.

TeamSolutions Workbook 3 Understanding Your Illness

Session 8 - Reasons for Symptoms in Mental Illness

Review & Moving Forward



The main lear	ning points of this session are:
1	
2	
3	
4	
Move Forward	- Choose a Personal Practice Option
	to practice new knowledge and skills. What will you do between ext session? Please choose one option from the list below:
□1. ST	TUDY. I am going to reread my handout at least once.
sys	IARE. I will share my handout with someone in my support stem. I will ask to read it and k with me about the way my brain works.
my	RITE. I will think about and write down some of the ways I think by brain processes information. (Refer back to <i>The Way the Brain ceives Information</i> section of the handout.)
□ 4. 01	THER:
Take an "Extra	a Step Forward" (optional)
ho	REATE. I will make a poster with a diagram to teach others about w the healthy brain works (called the "3 steps of brain chemical mmunication"). I will also add a message to the poster (for example, alance is Healthy").

Making the Diagnosis

Facilitator Notes

Main Learning Points from last session: Reasons for Symptoms in Mental Illness

- 1. One reason why people develop symptoms is because brain chemistry gets
- 2. The three steps in brain chemical communication include: receive information. process information and make decisions based on this information.
- 3. An ill brain may not be able to receive or process information correctly.
- 4. If medicine is stopped, the brain chemistry gets back out of balance and symptoms usually return.

Review Personal Practice Options from last session.

Materials Needed for Topic Introduction: Puzzle piece templates.

Tips for this Session

- 1. Consider using visual aids with this session to introduce today's topic. Get sturdy poster board and cut it into a ten large jigsaw puzzle pieces (a template is included). Label the pieces as follows:
 - a. "Symptoms: Using Checklist"
 - b. "Symptoms: How Long?"
 - c. "Symptoms: How Severe?"
 - d. "Symptoms: Triggers?"
 - e. "How Quickly Symptoms Clear Up"
 - f. "How Completely Symptoms Clear Up"
 - g. "Age Symptoms First Appear"
 - h. "Others in Family Have Mental Illness?"
 - i. "Rule Out Other Illness-Causing Symptoms"
 - j. "Symptoms from Alcohol or Street Drugs?"

Give each participant one or two pieces of the puzzle. Together, you will put the pieces together during class to solve the puzzle of how a diagnosis 2. Another aid that may be helpful in explaining how prescribers make a diagnosis is a copy of the DSM. You can show the sections on schizophrenia and bipolar disorder, and pass the book around so the participants can hold it and flip through it.

TeamSolutions Workbook 3 Understanding Your Illness

Suggestion for Topic Introduction and Relevance to Participants

"Let me see a show of hands of who wants to get a correct diagnosis from your prescriber."

"I thought so! Everyone wants his or her diagnosis to be correct. Why is that important?"

(After a few responses, introduce today's topic.)

"Do vou know how a diagnosis is made?"

(NOTE: If you use the jigsaw puzzle, you may want to hand out the puzzle pieces and put the puzzle together on a table or on the floor, saying, "Let's do something fun." After the puzzle is together, have people read the pieces out loud.)

"All of the information we see here are pieces to the puzzle that your prescriber puts together to come up with a correct diagnosis. Did you know there were so many pieces to put together?"

"Today we will talk about how a diagnosis is made."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key 1. A 2. A 3. B 4. A



T - topic introduction

R - relevance to participant

I - identify objectives

M – materials for session
M – motivate to use





Session 9 - Making the Diagnosis

Review of Session 8: Reasons for Symptoms in Mental Illness



Main Learning Points of Session 8

What were the main learning points of Session 8? If you did not attend the last session, you may guess, and also write the answers as people say them:

☐ 3. I didn't choose a personal practice option.

	TeamSolutions Workbo	ok 3 Understandin	g Your Illness				
	Session 9 - Making the D		5				
Tonio	A						
Горіс	Assessmo	ent					
	Mark one: □ Pre	Post				Score:	
	Directions:				+	_ out of 4	
	 Read each ques Read every ansy 						
	3. Mark only one						
	Name:						
	Date:						
	1. A factor to con	sider when n	naking a diagnosi	is is:			
	A. Lab test		laking a alagnoo	.0.0.			
	O	and weight.					
	C. Highest D. Occupa	educational l	evel earned.				
	1		anosed with echi	zonhrenia	or hinolar d	isorder may	
	Symptoms for a person diagnosed with schizophrenia or bipolar disorder may change over time.						
	A. True	B. False					
	The Diagnostic and Statistical Manual of Mental Disorders (DSM) gives guidelines to family members for making diagnoses.						
	A. True	B. False	is for making dia	igiloses.			
	4. Effects of alco	hol and illega	al drugs can imita	ite the sym	nptoms of m	ental illness.	
	A. True	B. False	· ·	•	•		
	5. I am confident	I can help my	y prescriber get t	he informa	ation needed	I to diagnose	
	me correctly.						
	☐ Strongly	☐ Disagree	☐ Neither Agree	☐ Agree	☐ Strongly	☐ Unsure	
	Disagree	Disagree	Nor Disagree	rigice	Agree	Offsuic	

	Session 9 – Making the E				
lopic	6. This information		r me to know.		
	Strongly Disagree	□ Disagree	□ Neither Agree Nor Disagree	□ Agree	Strongly Agree
	At the end of the this paper:	session, answer	these questions be	efore turning	in
	7. This session h	elped me.			
	Strongly Disagree	□ Disagree	☐ Neither Agree Nor Disagree	☐ Agree	Strongly Agree
	8. What I liked ab	out this session:			
	9. How this sessi	on could have be	en better for me: _		

Session 9 - Making the Diagnosis

Making the Diagnosis

Objectives for this Session

- 1. Name 3 things a prescriber must consider when making a diagnosis.
- 2. Identify 1 reason why it is important to regularly monitor symptoms and talk about them with your prescriber.

How Mental Illness Is Diagnosed

A prescriber has to consider several things when making a diagnosis.

1. Symptoms

Symptoms are the most important thing for making a correct diagnosis. You and your prescriber can identify and talk about all the symptoms you are having. A symptom checklist is a helpful tool in this discussion.

Additional information about symptoms is also needed, such as:

- 1. How long have the symptoms been a problem?
- 2. How severe are the symptoms?
- 3. What triggers the symptoms, or makes them worse?
- 4. How well and how soon do these symptoms respond to medicine?

A single symptom does not lead to a diagnosis. It takes several symptoms that are present for a significant length of time.

2. Other Factors

Looking at all of the symptoms makes up only part of the diagnosis. Other factors include:

A. Results from a Physical Examination and Medical History

Other medical conditions that might be causing the symptoms must be ruled out.

B. Your Family History

These illnesses sometimes seem to run in families. You may have a relative who has schizophrenia or bipolar disorder. One known fact is that these illnesses are not caused by problems the family members may have in getting along with each other.

Making the Diagnosis

(continued)

C. Your Age When Your Symptoms First Appeared

Most people with schizophrenia start having symptoms when they are in their teens or in their early 20's. Bipolar disorder usually, but not always, appears in young adulthood.

D. Lab Tests

Your prescriber may use blood tests and brain scans to rule out other possible causes for your symptoms. Medical conditions that could result in the same symptoms need to be considered (for example, low thyroid has many of the same symptoms as depression).

Tests to identify alcohol or street drugs are also used because these substances can cause symptoms that resemble schizophrenia and/or mania or can make symptoms of these illnesses worse. Your prescriber may need to check for the presence of drugs or alcohol as a possible cause for your symptoms.

Main Learning Point #1

An accurate diagnosis is made by considering many things.

Main Learning Point #2

Avoid alcohol and illegal drugsthey make symptoms worse.

TeamSolutions Workbook 3 Understanding Your Illness

Session 9 - Making the Diagnosis

Making the Diagnosis

(continued)

Guidelines for Diagnosing

Prescribers use the Diagnostic and Statistical Manual of Mental Disorders (DSM) as their guide when making a psychiatric diagnosis. The DSM is routinely updated with new editions. The DSM

describes all mental illnesses, with a list of symptoms and criteria for each diagnosis. Because prescribers use the DSM, it makes it much more likely that you would get the same diagnosis no matter where you receive treatment.

Main Learning Point #3

The Diagnostic and Statistical Manual of Mental Disorders (DSM) is the quideline for making a diagnosis.

Changes in Diagnosis and Symptoms May Happen

A diagnosis is sometimes hard to make and can change over time if symptoms

change. Your prescriber and you will want to talk about symptoms regularly in order to provide you with the best possible treatment.

Main Learning Point #4

Diagnosis and symptoms may change over time, so continue to monitor your symptoms.



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My diagnosis is:

Circle your answers:

I (agree / disagree) that this diagnosis is correct.

I (have / have not) had another psychiatric diagnosis in the past. If you have, what was it?

Another person in my family (has been / has not been) diagnosed as having a mental illness. If so, who is it and what diagnosis did he or she receive?

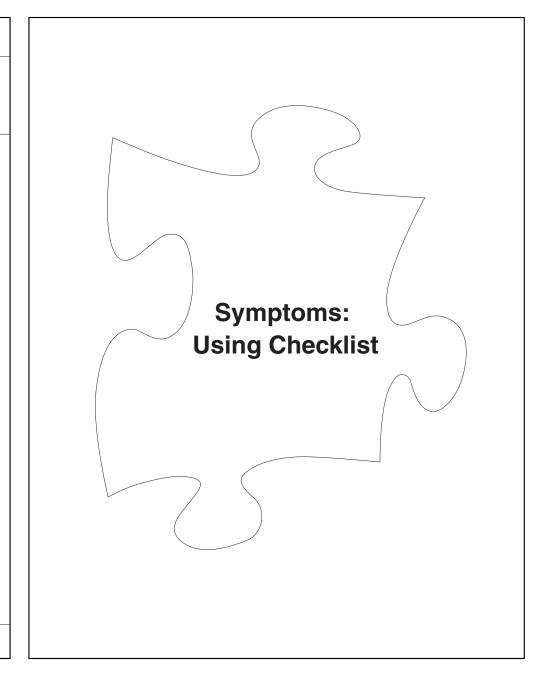


Session 9 - Making the Diagnosis

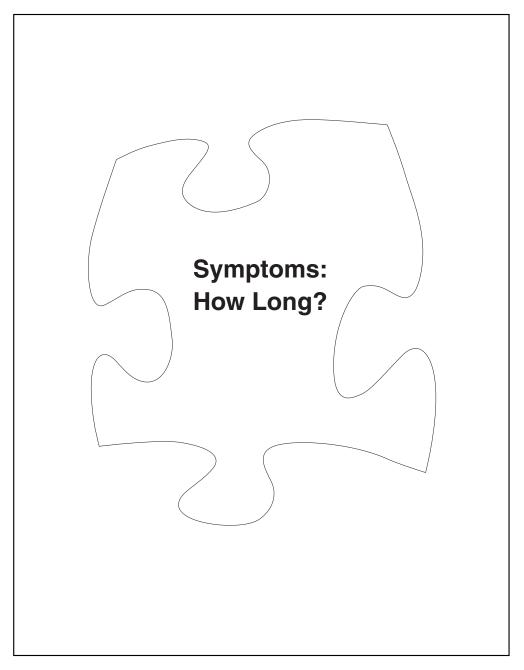
Review & Moving Forward

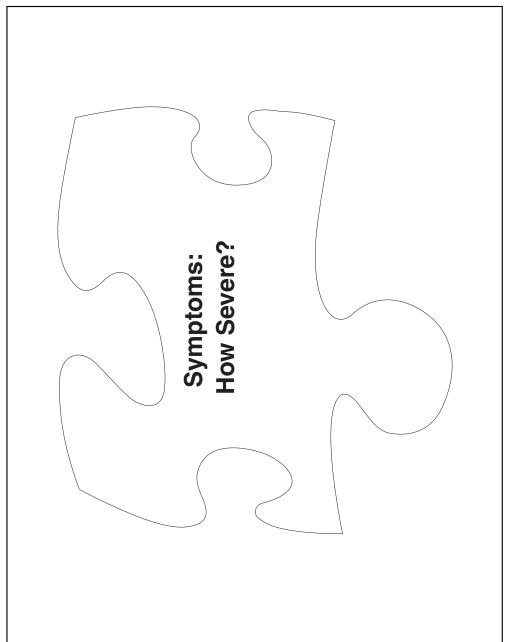


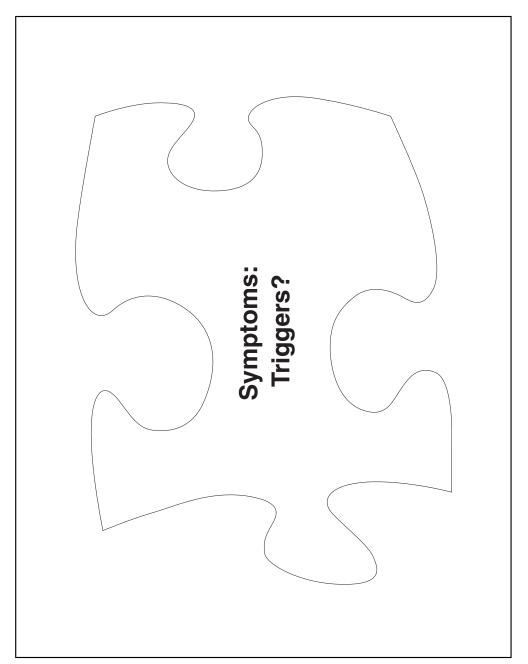
2	
3	
4	
Move Forw	vard—Choose a Personal Practice Option
	ant to practice new knowledge and skills. What will you do between the next session? Please choose one option from the list below:
□1.	STUDY. I am going to reread my handout at least once.
□ 2.	SHARE. I will share my handout with someone in my support system. I will ask to read it an talk with me about my diagnosis.
□ 3.	ACT. I will take my symptom checklist (from sessions 6 and 7) wi me to my next appointment to share with my prescriber.
□ 4.	OTHER:
Take an "E	xtra Step Forward" (optional)
□ 5.	WRITE. I am going to write down my thoughts about my diagnosis and my symptoms. I may share it with or bring it to the next session.
Motivation	1 to Practice. How will practicing help you?

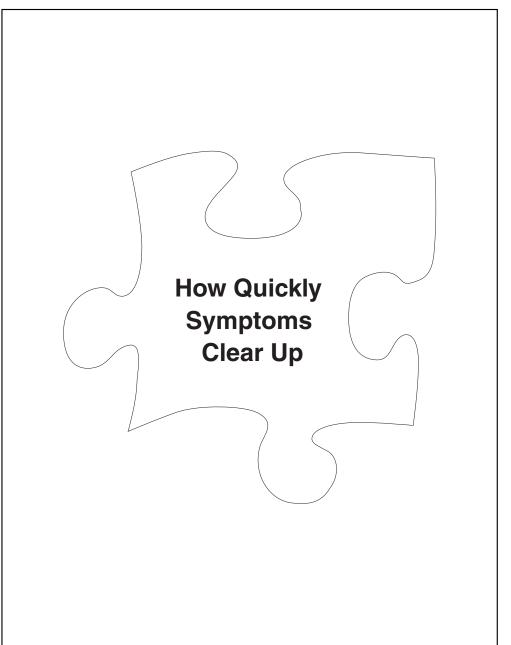


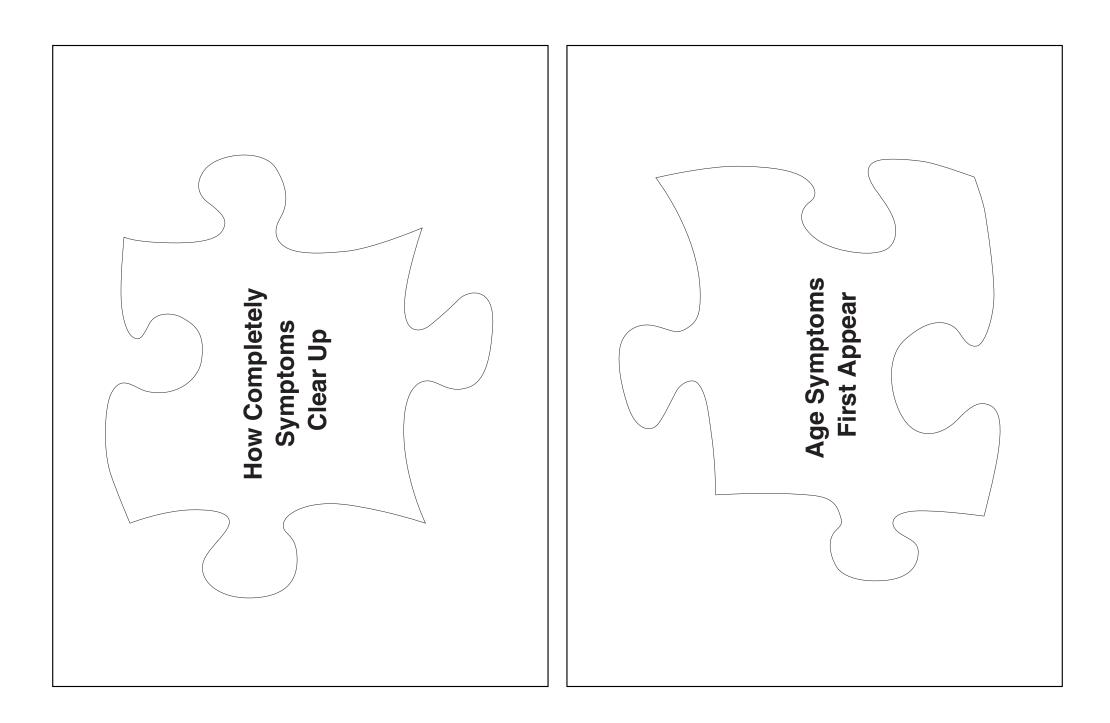


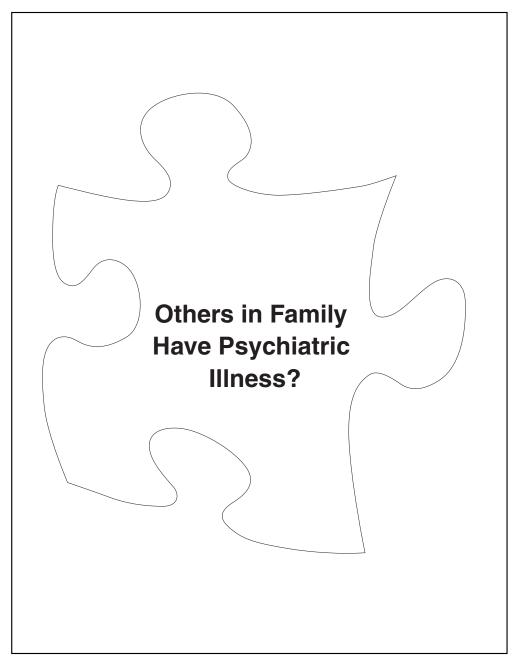


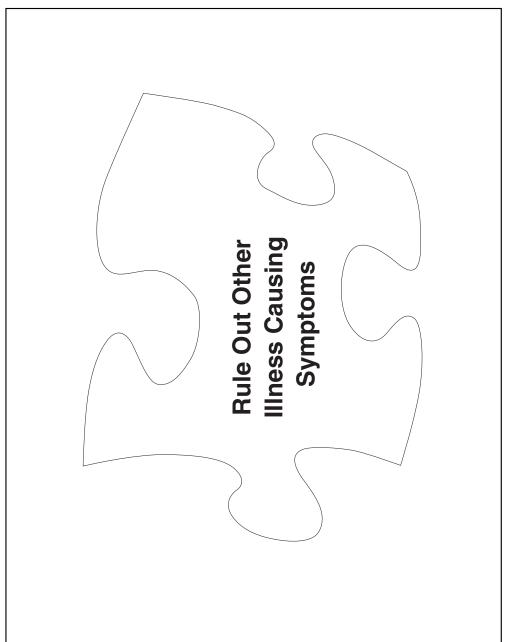


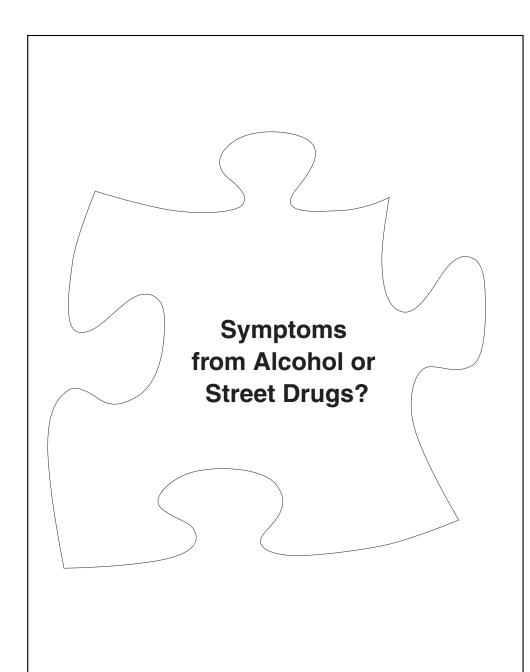












Session 10 - Mental Illness: Test Your Knowledge

Sess

Mental Illness: Test Your Knowledge

Facilitator Notes

Main Learning Points from last session: Making the Diagnosis

- 1. An accurate diagnosis is made by considering many things.
- 2. Avoid alcohol and illegal drugs—they make symptoms worse.
- 3. The *Diagnostic and Statistical Manual of Mental Disorders* (DSM) is the guideline for making a diagnosis.
- 4. Diagnosis and symptoms may change over time, so continue to monitor your symptoms.

Review Personal Practice Options from last session.

Tips for this Session

For this session, divide the group into two teams (one way to do this is to count off, with odd numbers on one team and even numbers on the other. If you can locate a karaoke machine, borrow it, but this will still be an enjoyable session without one.)

Make this session into a "quiz show" where team members can consult with each other before answering into the microphone. Encourage them to follow answers by applause or groans. You or another participant can be Master of Ceremonies to give the points and say, "Right!" or, "Sorry, that's incorrect." If possible, award the winning team prizes and give the second place team small consolation prizes.

Potential Problems for this Session

One of the participants does not want to participate.

Possible Responses

- 1. Encourage but don't require participation.
- If the participant won't budge, ask him or her to be the audience and to applaud when a team makes a correct response.
- 3. As long as he or she is not disruptive, keep him or her as part of the group.



Session 10 - Mental Illness: Test Your Knowledge

Suggestion for Topic Introduction and Relevance to Participants

"Have you ever been hurt by a lie? Raise your hands if you have."

"Unfortunately, people can be hurt by following "old wives' tales" that seem to make sense but are wrong. Just to give you an example, an infection control nurse had to treat a man who was using petroleum jelly to lubricate condoms. He thought he was being safe, but the petroleum jelly made holes in his condom, and he caught a sexually transmitted disease. It is so much better and safer to know the facts, and not believe myths or rumors."

"Are there any myths about mental illness? I see some heads nodding. I am here to tell you that there sure are some myths out there. Today we will talk about some truths and some myths about mental illness. We are going to do it in a fun way by playing a game to see if we can figure out what's truth and what's myth."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. B 2. B 3. B 4. B

T - topic introduction

R - relevance to participant

M - materials for session M - motivate to use

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TeamSolutions Workbook 3 Understanding Your Illness

Session 10 - Mental Illness: Test Your Knowledge

Review of Session 9: Making the Diagnosis



Main Learning Points of Session 9

What were the main learning points of Session 9? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. An	accurate d	s is made by	considering many things.	
2. Avo	oid a1	and illegal drugs—	-they make symptoms worse.	
3. The guid	e <i>Diagnostic and Stati</i> deline for making a d	stical Manual of Me	ental Disorders (DSM) is the _s.	
	ignosis and symptom monitor your sympton		e over time, so continue	9
	actice Option Review nal practice option(s)			
Did you com	nplete your personal p	oractice yet?		
□ 1.	Yes. How did it go?			_
				_
□ 2.	No. What got in the	way of completing	your practice?	
	If you still plan to co	mplete your practic	e, when will you do it?	_
□ 3.	I didn't choose a pe	rsonal practice opt	tion.	_

	Session 10 – Mental Illness: Test Your Knowledge
Topic	Assessment
	Mark one: □ Pre □ Post Your Score: + out of 4 Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question.
	Name:
	Date:
	Medicine alone is all I need to get better. A. True B. False
	2. My mental illness was caused by family conflicts during my childhood.
	A. True B. False
	3. Schizophrenia means "split personality."
	A. True B. False
	4. People with schizophrenia or bipolar disorder are always disabled and unabto live on their own.
	A. True B. False
	5. I am confident I know the difference between myths and the truth about my illness.
	Strongly Disagree Neither Agree Agree Strongly Unsure Disagree Nor Disagree Agree
	6. This information is important for me to know.
	Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree

Topic As	sessme	ent			
Att			these questions be	efore turning	in
7. T	his session he	elped me.			
	Strongly Disagree	☐ Disagree	☐ Neither Agree Nor Disagree	☐ Agree	Strongly Agree
8. V	Vhat I liked abo	out this session:			
0.1	low this sassic	on could have be	oon better for me		
9. F	low this sessio	on could have be	een better for me: _		
9. H	low this sessic	on could have be	een better for me: $_{-}$		
9. F	low this sessic	on could have be	een better for me: _		
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9. F	low this session	on could have be	een better for me: _		
9. F	dow this session	on could have be	een better for me: _		
9. F	low this session	on could have be	een better for me: _		
9. F	low this session	on could have be	een better for me: _		
9. F	How this session	on could have be	een better for me: _		

Session 10 - Mental Illness: Test Your Knowledge

Mental Illness: Test Your Knowledge

Objectives for this Session

- 1. Identify 2 myths about mental illness.
- 2. Identify 2 important truths about mental illness.

How Much Do You Know About Your Illness?

The more you know about your illness, the more you'll be able to help yourself. Let's read each statement below and decide if it is true or false.

- 1. True or False: Schizophrenia means "split personality."
- 2. True or False: Schizophrenia and bipolar disorder are not real illnesses.
- **3. True or False:** People with schizophrenia or bipolar disorder are always sick and are unable to live on their own.
- **4. True or False:** With continued treatment with medicine, many of my symptoms can be managed.
- **5. True or False:** Medicine alone is all I need to get better.
- **6. True or False:** I can stop my medicine when my symptoms get better or go away.
- 7. True or False: My illness was caused by family problems when I was a kid.
- **8. True or False:** People who have schizophrenia or bipolar disorder are not very smart.
- **9. True or False:** It is important to tell my prescriber and treatment team if I think my symptoms may be getting worse or if I notice new symptoms.
- **10. True or False:** Recovery is different for each person, and happens at each person's own pace.

TeamSolutions Workbook 3 Understanding Your Illness

Session 10 - Mental Illness: Test Your Knowledge

How Much Do You Know about Your Illness?

(continued)

Answers:

- 1. False. The term schizophrenia does not mean split personality. "Schizo-" means split and "-phrenia" refers to the mind. In schizophrenia, the brain has difficulties processing information. Messages from one part of your brain may not be sent to another part of your brain. Or, messages may be sent, but not completely. When this happens, you may be confused because you are getting only pieces of information, not the entire message.
- 2. False. Schizophrenia and bipolar disorder are real illnesses. These are medical conditions with symptoms and physical differences in the brain. People with either of these diagnoses need medical help to get better.

Main Learning Point #1

Schizophrenia and bipolar disorder are medical illnesses of the brain.

3. False. With treatment, many people who have these diagnoses are able to go back to school or get a job. However, it may take longer to complete a school or training program than it would if the illness were not present.

Main Learning Point #2

With treatment, there is hope for recovery.

4. True. Although there is currently no cure, many symptoms can be improved or managed if you keep taking your medicine as prescribed. Medication does more than just help relieve symptoms. It helps alter chemicals in the brain where an imbalance may be responsible for symptoms.



Session 10 - Mental Illness: Test Your Knowledge

Mental Illness: Test Your Knowledge

(continued)

Answers:

5. False. While medicine is often a basic part of your treatment, medicine alone is not enough to move you toward recovery. Most people with schizophrenia or bipolar disorder find that additional therapies, such as increasing coping skills and learning new job skills, help them in their journey of recovery.

Main Learning Point #3

Medicine is a basic part of

treatment, but other therapies are

also important for recovery.

Main Learning Point #4

To stop taking medicine as

prescribed greatly increases the chance of a relapse.

- **6. False.** It is very important to take your medicine the right way every day, even when symptoms go away. If you miss doses or stop taking it, symptoms are likely to return in a few days or weeks.
- 7. False. Schizophrenia and bipolar disorder are medical health problems just like asthma, diabetes, and high blood pressure. They are not caused by family problems but by physical causes such as a chemical imbalance.
- 8. False. Like other illnesses, schizophrenia and bipolar disorder occur in all types of people, regardless of how smart they are. However, poor contr

of how smart they are. However, poor control of symptoms or multiple recurrence may not allow a person to function as well as he or she did before the illness began.

- **9. True.** If new symptoms start or old symptoms get worse, your prescriber may want to adjust your treatment. It is important to tell your prescriber and treatment team about any possible symptoms.
- **10. True.** Recovery is different for each person. And each person recovers at his or her own pace.

TeamSolutions Workbook 3 Understanding Your Illness

Session 10 - Mental Illness: Test Your Knowledge

Review & Moving Forward



The main lea	rning points of this session are:
1	
2	
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	d—Choose a Personal Practice Option
	to practice new knowledge and skills. What will you do between next session? Please choose one option from the list below:
□1. S	TUDY. I am going to reread my handout at least once.
S	HARE. I will share my handout with someone in my support system. I will ask to read it and ake the quiz with me.
□ 3. V	VRITE. I am going to write down my thoughts about my illness and ecovery. I will talk to about it.
□4. C	OTHER:
Take an "Ext	ra Step Forward" (optional)
	PREATE. I will make a poster to teach others about one of the myths r truths I did not know before today.

Feelings

Facilitator Notes

Main Learning Points from last session: Mental Illness - Test Your Knowledge

- 1. Schizophrenia and bipolar disorder are medical illnesses of the brain.
- 2. With treatment, there is hope for recovery.
- 3. Medicine is a basic part of treatment, but other therapies are also important for recovery.
- 4. To stop taking medicine as prescribed greatly increases the chance of a relapse.

Review Personal Practice Options from last session.



This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

Tips for this Session

Pace is very important in presenting this session because it is on a topic that will generate discussion. If your class is for one hour, but some of the time is taken up by arrivals and return escort, plan how much time you have to spend covering each of the six

- 1. Review of last session.
- 2. Optional pre-Topic Assessment.
- 3. Topic introduction.
- 4. Four pages of new material.
- 5. Concluding Review and Personal Practice Goals.
- 6. Optional post-Topic Assessment.

Plan the allocation of time in advance, writing times in the margin of your facilitator materials. Don't say, "Six minutes each," because some will routinely be faster. Others, such as page 4 of the Participant Handout in this session, may need more time to allow for thinking about what to write and for discussion. Plan a reasonable time frame in advance and follow it. Keep moving on to the next topic so that everything will get covered. Know that it is okay not to exhaust a topic before moving on—it is much better to leave the participants still animated and engaged with the topic and for them to continue addressing the topic in their Personal Practice Options.

TeamSolutions Workbook 3 Understanding Your Illness

Suggestion for Topic Introduction and Relevance to Participants

"Do your emotions matter in how you respond to something important?"

"Let me give you an example of what I'm talking about. Suppose your dearly loved grandmother dies of cancer. Before the funeral, people keep telling you that she's better off now, that she no longer has pain. Does knowing that keep you from grieving your loss? Do your feelings matter?"

(Encourage responses. After several responses, summarize.)

"It sounds like you recognize that feelings are definitely important. It sounds like the person losing his or her grandmother has a loss, and there is a need to grieve the loss,"

"Today we will talk about feelings you may have in response to having an illness."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key 1. C 2. A 3. B 4. A

T - topic introduction

R - relevance to participant

I - identify objectives

M – materials for session
M – motivate to use







Session 11 - Feelings

Review of Session 10: Mental Illness – Test Your Knowledge



101

Main Learning Points of Session 10
What were the main learning points of Session 10? If you did not attend the last session, you may guess, and also write the answers as people say them:

Bipolar disorder and schizophrenia are medical is of the brain.
2. With tt, there is hope for recovery.
3. Medicine is a basic part of treatment, but other ts are also important for recovery.
4. To stop taking medicine as pd greatly increases the chance of a relapse.
Personal Practice Option Review: What personal practice option(s) did you choose?
Did you complete your personal practice yet?
☐ 1. Yes. How did it go?
☐ 2. No. What got in the way of completing your practice?
If you still plan to complete your practice, when will you do it?
☐ 3. I didn't choose a personal practice option.

	Session 11 – Feelings					
Topic	Assessme	ent				
	Mark one: □ Pre Directions: 1. Read each ques 2. Read every anso 3. Mark only one Name: □	tion carefully wer before m answer to ea	arking one.			Score: out of 4
	A. Taking	medicine. comfort wit	serious illness is	:		
	A. Lonelin B. Staying C. Family i D. The syst	ess, isolation out of jails a interference. tem of care.	ems of having a m , and broken relati nd hospitals. elp yourself get b	onships.	ss are:	
	A. True 4. Since you had no shame abou		bout having your	illness, yo	u should ha	ve
	A. True	B. False				
	5. I am confident	I understan	d my feelings abo	ut having	a mental illn	ess.
	Strongly Disagree	Disagree	Neither Agree Nor Disagree	□ Agree	Strongly Agree	Unsure

TeamSolutions Workbook 3 Understanding Your Illness **Topic Assessment** 6. This information is important for me to know. П Disagree Strongly Neither Agree Agree Strongly Disagree Nor Disagree Agree At the end of the session, answer these questions before turning in this paper: 7. This session helped me. Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree 8. What I liked about this session: 9. How this session could have been better for me: _ 103 Lilly

TeamSolutions Workbook 3 Understanding Your Illness

Session 11 - Feelings

Feelings

Objectives for this Session

- 1. Identify 1 of the feelings you had when you were diagnosed with your illness.
- 2. Identify 2 stages of adjustment to having a serious illness.

Coping With a Difficult Illness

When bad things happen to people, they often experience a series of emotions. This happens in serious medical conditions, for example, when someone is diagnosed with cancer or learns that they need heart surgery. These emotions are perfectly normal. You may have some of these emotions because of your illness.

Recognizing Your Feelings

Having a mental illness can cause problems that are more upsetting than the symptoms of the illness itself. Loneliness, isolation, and broken relationships are some of the biggest problems. People with a psychiatric disorder may be embarrassed about having a potentially disabling condition. Many find that their symptoms get worse when they are with other people, so they choose to be alone much of the time.

Many people are disappointed or even angry if they can't do the things they used to do. Going back to school, getting a job, or having a steady relationship are more difficult when someone has symptoms of mental illness that are not controlled.

Main Learning Point #1

Being lonely, isolated, and having broken relationships are some of the biggest problems in mental illness.

An important step in managing your illness is to recognize the way you feel. Once you can recognize your feelings, you will be in a better position to learn to cope with them.

Describe the feelings you have had since you were diagnosed with a mental illness.



Session 11 - Feelings

No Fault, No Shame, and No Blame

Many people don't understand that a mental illness is a medical illness. They wonder why it happened to them. They are frustrated and even ashamed that they can't keep up with the plans they had before they became ill. Sometimes, they blame themselves (or others) for the illness.

Recent research has shown that physical events happen to some people before birth that might make a person more likely to develop schizophrenia or bipolar disorder. These physical events are sometimes changes that happen because of genes and other physical traits that are passed down from relatives. When this happens, the physical events are called genetic, meaning they were inherited. It is important to remember that this means that people do not get these illnesses because of family problems. A person does not get schizophrenia or bipolar disorder because of anything that happened to him or her or because there were problems in the family.

Say Aloud Together: "Just like people who get cancer, I had no choice in getting my illness. And it's not my fault that I have this illness."

You had no choice or control over your illness so it is not your fault. No one should blame you for the illness when you have no choice in having it. You should not be ashamed of a medical condition and there is nothing to be embarrassed about. This is a "no choice, no fault, no shame, no blame" medical condition. However, it is not a "no responsibility" situation.

What you are responsible for is your recovery. This is wonderful for you! What this means is that you have more control over your future than you may realize. You are the leader of your own life, and you can make choices to help you live the best life that you can.

Main Learning Point #2

You are not to blame for having an illness, but you are responsible for your recovery and being in control of your life. TeamSolutions Workbook 3 Understanding Your Illness

Session 11 - Feelings

Rating Your Feelings:

Listed below are some of the painful feelings people have described as they have tried to adjust to having a mental illness. How are you feeling at this time?

Instructions: Rate your feelings on a scale of 1 (doesn't bother you) to 5 (bothers you the most).



	Doesn't bother me		No feelings about it		Bothers me a lot
Embarrassed	1	2	3	4	5
Guilty	1	2	3	4	5
Angry	1	2	3	4	5
Feel like it's my fault	1	2	3	4	5
Afraid	1	2	3	4	5
Ashamed	1	2	3	4	5
Lonely	1	2	3	4	5



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Think about the following questions. You can write your thoughts after each question.

These feelings bother me the most

Those foolings sould the thousand
Have I variably bondle my feelings.
How I usually handle my feelings:
These are some of the ways I react to my feelings:



Reacting to Your Feelings

People who have a serious illness tend to go through a series of emotional reactions. At first, you may not believe you have an illness. "How can this happen to me? It's not possible."

It is common to doubt your diagnosis at first. You may even deny that you have an illness and miss an opportunity to get better by not starting treatment early. When your symptoms do not get better, you eventually realize that you really do have an illness that has changed your life.

Some people feel victimized by their diagnosis and may react by giving up. "I have this illness and there's nothing I can do about it." They feel defeated and believe they can't do very much to help themselves.

Many people are discouraged or even angry. They look for a reason why this has happened to them. They may blame themselves or others. These are all normal reactions that most people facing serious illnesses seem to go through.

But being trapped by these emotions can make progress difficult. The negative emotions may occupy your thoughts and can use up a lot of energy. A good way to get better is to start working on ways to manage the illness. Use your energy to focus on how you can best recover.

Main Learning Point #3

The stages of adjustment to serious illness are denial, anger. depression, grief, and acceptance.



Instructions: Circle any of the stages of adjustment to serious illness that you have experienced:

Denial Anger Depression Grief	Acceptance
-------------------------------	------------

Main Learning Point #4

You can be bitter or get better-the choice is yours. Use your energy to focus on getting better.

TeamSolutions Workbook 3 Understanding Your Illness

Session 11 - Feelings

Review & Moving Forward



The main learn	ing points of this session are:
1	
2	
3	
4	
Move Forward	-Choose a Personal Practice Option
	o practice new knowledge and skills. What will you do between xt session? Please choose one option from the list below:
□1. ST	UDY. I am going to reread my handout at least once.
sys	ARE. I will share my handout with someone in my support tem. I will askto read it l talk with me about my feelings.
	T. I will ask my treatment team to make an appointment for me alk about my feelings with a therapist.
☐ 4. OT	HER:
Take an "Extra	Step Forward" (optional)
jou Acc	RITE. I am going to write about my emotions at each stage of my rney through this illness: Denial, Anger, Depression, Grief, and ceptance. I will think about what I've learned from my experiences. asy bring it to the next session.



Session 12 - Reducing Risk of Relapse

Reducing Risk of Relapse

Facilitator Notes

Main Learning Points from last session: Feelings

- 1. Being lonely, isolated, and having broken relationships are some of the biggest problems
- 2. You are not to blame for having an illness, but you are responsible for getting better and being in control of your life.
- 3. The stages of adjustment to serious illness are denial, anger, depression, grief, and acceptance.
- 4. You can be bitter or get better—the choice is yours. Use your energy to focus on getting better.

Review Personal Practice Options from last session.

Remember

You can refer to the two-sided laminated "Facilitator's Delivery Checklist" when using Team Solutions materials as a reminder of important facilitator tips.

Tips for this Session

- 1. This is a session that benefits from having a cofacilitator who has gone through a relapse and who is committed to routinely monitoring his or her symptoms. If such a person is not available, you may want to show a small segment of a video or DVD that features someone who has a mental illness talking about how he or she reduces or manages the illness. A dramatic reading from a selected portion of a published first-person account will also make this class more relevant to the participants if a live role model isn't available.
- 2. Consider using the "Fortune Cookie" exercise (we have included in the back of this session). You may want to cut the two lists into individual items and have participants draw one to read. Reading lists aloud is a good technique, as it engages participants in the session. You could also ask participants to discuss each list item, processing the item through their own experiences.

TeamSolutions Workbook 3 Understanding Your Illness

Session 12 - Reducing Risk of Relapse

Suggestion for Topic Introduction and Relevance to Participants

"Is there anyone here who wants to get sick again and have to be hospitalized, raise your hand."

"I am glad no one raised a hand. You choose recovery—you want to be well and stay well! That's wonderful. One more question. Raise your hand if you have a plan in place that will help you prevent a relapse."

(If no one raises a hand, acknowledge that.)

"Raise your hand if you want to have a plan to stay well and to reduce the chances of relapse or getting sick again."

(Encourage and acknowledge responses. If someone indicates they have a plan, then say,)

"Good! I am counting on you to participate in today's session because our topic is about preventing a relapse. During this session, you will each develop a plan to reduce the risk of a relapse."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. B 2. A 3. A 4. A

T - topic introduction

R - relevance to participant

I - identify objectives

M – materials for session
M – motivate to use





Session 12 - Reducing Risk of Relapse

Review of Session 11: Feelings



Main Learning Points of Session 11

What were the main learning points of Session 11? If you did not attend the last session, you may guess, and also write the answers as people say them:

Being lonely, isolated, and having broken rsome of the biggest problems in mental illness.	s are
You are not to blame for having an illness, but you are r for getting better and being in control of your life.	e

3. The stages	s of adjustment to serious illness are d_	l, anger
	, grief, and acceptance.	, 8

4. You can be bitter or get b_____r—the choice is yours. Use your energy to focus on getting better.

Personal	Practice	Option	Review
i Ci Soliui	1 Idolioc	Option	I IC VIC VV

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

1. Yes. How did it go?

2. No. What got in the way of completing your practice?
If you still plan to complete your practice, when will you do

□ 3. I didn't choose a personal practice option.

Session 12 - Reducing Risk of Relapse **Topic Assessment** Mark one: □ Pre □ Post Your Score: + ____ out of 4 Directions: 1. Read each question carefully. 2. Read every answer before marking one. 3. Mark only one answer to each question. Name: _____ Date: ____ 1. Setting up a "buddy system" to check in with a close friend to let him or her know how you are doing: A. Will prevent a relapse. B. Will help you reduce the risk of a relapse. C. Has no effect on whether you get sick again. D. May trigger a relapse. 2. One of the "four safeguards" to use to prevent a relapse is managing stress. B. False A. True 3. A symptom that doesn't go away is a residual symptom. B. False A. True 4. If a residual symptom gets worse, it is a warning sign that you may be relapsing. A. True B. False 5. I am confident I can recognize and reduce my risk of a relapse. П П П Strongly Disagree Neither Agree Agree Strongly Unsure Disagree Nor Disagree Agree 6. This information is important for me to know. Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree

Lilly

TeamSolutions Workbook 3 Understanding Your Illness

TeamSolutions Workbook 3 Understanding Your Illness Session 12 - Reducing Risk of Relapse **Topic Assessment** At the end of the session, answer these questions before turning in 7. This session helped me. Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree 8. What I liked about this session: 9. How this session could have been better for me:

TeamSolutions Workbook 3 Understanding Your Illness

Session 12 - Reducing Risk of Relapse

Reducing Risk of Relapse

Objectives for this Session

- 1.Identify 2 of your residual symptoms.
- 2. Identify 3 early warning symptoms you are likely to have if you are in danger of relapse.

The Danger of a Relapse

Many people begin to feel better after a few weeks of treatment. But even if you are getting better, a relapse (return of symptoms) can happen. People who have a relapse may have to go to the hospital for treatment.

However, there are ways to reduce the risk of a relapse and avoid having to go to the hospital:

- 1. Be aware of your symptoms.
- 2. Keep track of your symptoms daily.
- 3. Have a "buddy system." Let someone close to you know how you are doing, especially if you're not feeling well.
- 4. If your symptoms get worse, or new ones appear, call your prescriber or treatment team right away.
- 5. Try not to make several changes in your life at one time—too much stress can cause you to get sick again.
- 6. Take your medicine every day. Missing doses or stopping medicine can upset your body's chemical balance and cause a relapse. Talk to your prescriber or treatment team nurse about what to do if you miss a dose.
- 7. Stay away from alcohol and street drugs. They can trigger a relapse by upsetting the chemical balance in your brain and interacting with medicine.

Main Learning Point #1

Monitor symptoms to reduce the risk of a relapse.

Session 12 - Reducing Risk of Relapse

Keeping Track of Symptoms

Even when people with psychiatric conditions are better, they may have some symptoms that do not completely go away. These symptoms are called "residual symptoms." Some residual symptoms are very bothersome, while others may just be annoying. They may not get better or worse for a long time and they seem to stay the same.

Go back and look at the symptoms you listed in Session 7's section "Which symptoms never seem to go away?" These are your residual symptoms.



Instructions: List those and any other residual symptoms you think you may have:

If these symptoms bother you, discuss them with your prescriber or a treatment team member. There may be ways to manage some of them. The goal is always to keep working to reduce how many symptoms you have and how much they bother you.

Main Learning Point #2

Symptoms that don't go away are residual symptoms.

TeamSolutions Workbook 3 Understanding Your Illness

Session 12 - Reducing Risk of Relapse

Early Warning Symptoms

New symptoms that appear suddenly or residual symptoms that get worse, warn that a relapse may be near. Most people describe early warning symptoms or signs as, "Changes you notice when you first start to relapse." Some of these changes may include:

- 1. Having trouble sleeping at night.
- 2. Having trouble focusing—watching a TV show might be more tiring than usual or you might have trouble focusing on things.
- 3. Changes in your energy level—either speeding up or slowing down.
- 4. Forgetting things more often than usual.
- 5. Being nervous or worried all the time.
- 6. Hearing voices or seeing images that no one else hears or sees (hallucinations).
- 7. Being afraid of people, places, or things that you used to enjoy.
- Having thoughts that people are talking about you, laughing at you, or sending messages about you.
- 9. Withdrawing from others or staying in your room a lot.
- 10. Suddenly having the impulse to spend money or start new projects.

Main Learning Point #3

Early warning signs are changes that let you know you may be relapsing.



Session 12 - Reducing Risk of Relapse

Early Warning Symptoms

(continued)

If you are not sure what your early warning signs are, talk to your prescriber, treatment team, family members, or friends who know you well. If you have ever had a relapse, think about the signs and symptoms you had when you first started to get sick again.



Describe personal early warning signs on the lines below:	
	_

Watching for early warning signs is the best way to catch a relapse before you get too sick and have to be hospitalized.

One way to keep track of early warning signs is to write them on a calendar on the day they happened. Also, it's good to write down if the symptom has gotten worse since the last time you noted it. That way, you can show your prescriber or treatment team when the symptoms first started bothering you and if they have gotten worse over time. There are also symptom tracker sheets available to monitor symptoms. We will learn how to use these in our next session.

Watching for Early Warning Signs Can Help Prevent Relapse

Check your symptoms at the same time daily, as part of your routine. As you continue to improve, you and your treatment team may decide that you only need to do this every week or once a month. Call your prescriber or treatment team immediately if you notice early warning signs.

Main Learning Point #4

Call your prescriber or someone on your treatment team immediately if you notice early warning signs. TeamSolutions Workbook 3 Understanding Your Illness

Session 12 - Reducing Risk of Relapse

Review & Moving Forward



1	
2	
3	
4	
Move Forw	rard—Choose a Personal Practice Option
	ant to practice new knowledge and skills. What will you do between e next session? Please choose one option from the list below:
□1.	STUDY. I am going to reread my handout at least once.
□ 2.	SHARE. I will share my handout with someone in my support system. I will ask
□3.	LIST and DISCUSS. I will continue to recall my residual symptoms and early warning symptoms, and will add them to the list. I will talk to to see what residual symptoms he or she may have noticed.
□ 4.	OTHER:
Гаке an "Е	xtra Step Forward" (optional)
□5.	STUDY. I will read the firsthand stories of other people recovering from a mental illness. I will pay attention to any "common themes" of how they manage to stay well.
Motivation	to Practice. How will practicing help you?

Lilly

Session 12 - Reducing Risk of Relapse

Ways to reduce the risk of a relapse:

- 1. Be aware of your symptoms.
- 2. Keep track of your symptoms daily.
- 3. Have a "buddy system." Let someone close to you know how you are doing, especially if you're not feeling well.
- 4. If your symptoms get worse, or new ones appear, call your prescriber or treatment team right away.
- Try not to make several changes in your life at one time—too much stress can lead to a relapse.
- **6. Take your medicine every day.** Missing doses or stopping medicine can upset your body's chemical balance and cause a relapse. Talk to your prescriber or treatment team nurse about what to do if you miss a dose.
- 7. Stay away from alcohol and street drugs. They can trigger a relapse by upsetting the chemical balance in your brain and interacting with medicine.

TeamSolutions Workbook 3 Understanding Your Illness

Session 12 - Reducing Risk of Relapse

Some Early Warning Signs:

- 1. Having trouble sleeping at night.
- 2. Having trouble focusing—watching a TV show might be more tiring than usual, or you might have trouble concentrating.
- 3. Changes in your energy level—either speeding up or slowing down.
- 4. Forgetting things more often than usual.
- 5. Being nervous or worried all the time.
- Hearing voices or seeing images that no one else hears or sees (hallucinations).
- 7. Being afraid of people, places, or things that you used to enjoy.
- 8. Having thoughts that people are talking about you, laughing at you, or sending messages about you.
- 9. Withdrawing from others or staying in your room a lot.
- 10. Suddenly having the impulse to spend money or start new projects.



Session 13 - Symptom Monitoring Tools

Symptom Monitoring Tools

Facilitator Notes

Main Learning Points from last session: Reducing Risk of Relapse

- 1. Monitor symptoms to reduce the risk of a relapse.
- 2. Symptoms that don't go away are residual symptoms.
- 3. Early warning signs are changes that let you know you may be having a relapse.
- 4. Call your prescriber or someone on your treatment team immediately if you notice early

Review Personal Practice Options from last session.

Materials Needed to Accompany Participant Handout

Symptom Tracker.

Tip for this Session

For most group sessions, breaking into small groups of three or four to be led by you and co-facilitators works best.

Examples are a great way to explain difficult concepts. When using examples, be sure to make them relevant to the everyday lives of the participants in your group—in their treatment settings and also in the communities in which they live.

TeamSolutions Workbook 3 Understanding Your Illness

Session 13 - Symptom Monitoring Tools

Suggestion for Topic Introduction and Relevance to Participants

"Don't you wish mental illness could be as easy to check as a fever is—just use a thermometer!"

(Wait for responses. It's possible that one of the participants already uses a tool to monitor his or her symptoms. You might hear someone say something like, "I use a symptom tracker or diary." Acknowledge any responses. If no participant introduces symptom monitoring tools, do so yourself, using something similar to the following statement.)

"Today we will talk about symptom monitoring tools. Do you think this might be helpful to you?"

"Let's review the main points from our last session before we start."

Topic Assessment Answer Key

There is no pre- or post-Topic Assessment for this session although there are opinion questions and scales.

T - topic introduction

R - relevance to participant

I - identify objectives

M – materials for session
M – motivate to use





Session 13 - Symptom Monitoring Tools

Review of Session 12: Reducing Risk of Relapse



Main Learning Points of Session 12
What were the main learning points of Session 12? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Mr sympto	oms to reduce the risk of a relaps	e.
2. Symptoms that don't go away ar	e r1 symptoms.	
3. Early wg sign be having a relapse.	ns are changes that let you know	you may
 Call your prescriber or someone immediately if you notice early v 		team
Personal Practice Option Review: What personal practice option(s) did you	ı choose?	
Did you complete your personal practice	yet?	
☐ 1. Yes. How did it go?		
□ 2. No. What got in the way of o	1 07 1	
	your practice, when will you do i	.t:
☐ 3. I didn't choose a personal p	practice option.	

Strongly Disagree Neither Agree Agree Strongly Agree 2. This information is important for me to know.		Session 13 – Symptom M	• • • • • • • • • • • • • • • • • • • •				
This session does not have a pre- or post-Topic Assessment test. It is a session for demonstrating symptom monitoring tools. 1. I am confident I know how to use a symptom tracker to help monitor my symptoms.	opic	Assessm	ent				
It is a session for demonstrating symptom monitoring tools. 1. I am confident I know how to use a symptom tracker to help monitor my symptoms.		Mark one: □ Pro	e 🗆 Post				
my symptoms. Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree 2. This information is important for me to know. Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree A							
Strongly Disagree Neither Agree Agree Strongly Agree 2. This information is important for me to know.				o use a symptom	n tracker to l	nelp monit	or
Strongly Disagree Neither Agree Agree St Disagree Nor Disagree Agree St This session helped me. 3. This session helped me. Strongly Disagree Neither Agree Agree St Disagree Nor Disagree Agree Agre		Strongly	_	Neither Agree	_	Strongly	Unsur
Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree Strongly Disagree Neither Agree Agree Strongly Disagree Nor Disagree Agree		2. This information	on is importar	nt for me to know	<i>i</i> .		
this paper: 3. This session helped me. Strongly Disagree Neither Agree Agree St Disagree Nor Disagree Agree Agre		Strongly	_	Neither A	Agree Agr	ee	Strongl Agree
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		Strongly	_	Neither A	Agree Agr	ee	Strongly Agree
		4. What I liked at	out this sess	ion:			
E. Harristella and January and January have been better for man							
5. How this session could have been better for me:		5. How this sess	ion could hav	e been better for	me:		

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Session 13 - Symptom Monitoring Tools

Symptom Monitoring Tools

Objectives for this Session

- 1. Identify 3 benefits of symptom monitoring.
- 2. Practice how to use a symptom tracker.

Monitoring Symptoms

Today you will learn how to use two tools that are available to monitor psychiatric symptoms.

The Basics of Monitoring Symptoms:

- 1. I will check my symptoms every day, at the same time each day, as part of my routine.
- 2. When I see symptoms increasing or notice early warning symptoms, I will call my prescriber, someone on my treatment team, or a family member and tell them. If I am using a "buddy system," I will also tell my buddy.
- I will take my symptom monitoring tool with me when I have an appointment with my prescriber or my treatment team so we can look at it together.
- 4. I will save my completed symptom monitoring forms. This lets me and my treatment team look for illness cycles and look to see if there are patterns when I have symptoms (For example: winter depression).

Main Learning Point #1

A symptom monitoring tool can be used daily as part of your routine.

TeamSolutions Workbook 3 Understanding Your Illness

Session 13 - Symptom Monitoring Tools

Advantages of Monitoring Symptoms

Many people in recovery say that using a symptom monitoring tool is one of the most valuable ways they have found to take charge of their illness. This type of tool can help them as they work to stay well. Here are some things people in recovery have said:

- **Person 1:** "When there is a medication change, symptom monitoring lets me know if my new medicine or my new dosage is working."
- **Person 2:** "I got better very slowly. Because I was monitoring my symptoms, I was able to actually see myself make progress over time."
- **Person 3:** "Symptom monitoring picks up any early signs of a relapse. It lets me get medical attention immediately and have the best chance to nip a relapse in the bud."

Main Learning Point #2

Symptom monitoring can help you learn if your medicine is working.

For the rest of this session, let's look at a symptom tracker, which is a tool you may want to use.





Session 13 - Symptom Monitoring Tools

	learning points of this session are:
It's import	ward—Choose a Personal Practice Option ant to practice new knowledge and skills. What will you do between ne next session? Please choose one option from the list below:
	STUDY. I am going to reread my handout at least once. SHARE. I will share my handout with someone in my support system. I will ask
	a symptom tracker. USE. I will start using the symptom tracker
□ 4	. OTHER:

Symptom Tracker

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	oN N																														
Hours I slept last night (please write down any problems you have with your sleep)																															
Comments			1	1	1	1	1					-	-	-	-	-	-														

Week 4 Weight:______Blood Pressure:_

Week 3 Weight:
Blood Pressure:

Weight:_____Blood Pressure:__

Week 2

Week 1

Blood Pressure:

Identify the top three or four symptoms that you will monitor daily until your next meeting with your clinician. Please take a baseline weight, blood pressure, waist circumference, and BMI at the beginning of the month and then monitor weight weekly. Please bring this sheet back with you for your first follow-up meeting so you can talk about it with your treatment team members.

Possible symptoms for daily monitoring by client: These are only suggestions. There may be other symptoms that you want to monitor.

- I hear voices or noises and I don't know where
- I see things no one else seems to see.
 Things sound or smell wrong.
 I feel afraid.
 - they come from.

 I think people are watching me or following me.
- I don't want to do anything.
- My mood is extremely happy or elevated. I think about hurting myself.
 - · I get easily irritated or annoyed.

I feel hopeless.

I feel nervous or anxious.

I feel sad or unhappy.

My thoughts move so fast I cannot keep up with them.

People tell me I talk too fast or too much.

My sex drive is very high, higher than normal.

- I feel tired all the time. I don't need to sleep.
- My sex drive is very low, lower than normal.
- I can't understand what people are saying to me.
 I can't keep my mind on anything.
 I don't know how to plan for things.
- I have trouble remembering things.
 I have trouble learning things.
- I can't sleep.I don't enjoy anything.I don't brush my teeth.

I don't shower.I don't have anything to say to people.

Symptom Tracker	cker											Syr	npto	Š	Symptom Severity: No symptom = 0		% %	ymp	tom	0 =		-	Mild = 1 Moderate = 2	2 =	Se	Severe = 3	က
Symptom		Day) S																								l
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as prescribed	2		7	>																							
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Used drugs or alcohol	Yes		>	> >	>			>	>			*	7														
	2	7				>	1			1	Ś	\	2	>	7												
Hours I slept last night (please write down any problems you have with your sleep)		v	w	7	7	~	10	0	۲	^	N	90	00	0	5347762677788767												
Comments I don't sleep well if I think someone is waterhing no	nt o	3	3	3	3	2	1/2	H	1	i,	1	A	ş	1	Je J	.3	3	2	7	. }	7	1	-]

Blood Pressure: Weight:_ Week 4 Blood Pressure: Weight<u>.</u> Week 3 Blood Pressure: Weight:_ Week 2 Blood Pressure: 143/90 Waist Circumference: 193 Weight:__ Week 1

Session 14 - What to Expect

What to Expect **Facilitator Notes**

Main Learning Points from last session: Symptom Monitoring Tools

- 1. A symptom monitoring tool can be used daily as part of your routine.
- 2. Symptom monitoring can help you learn if your medicine is working.

Review Personal Practice Options from last session.

This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

Tips for this Session

1. Make it clear in today's session, the last session of this workbook, that participants have the opportunity to continue to work on and maintain recovery as they leave this group. They have learned good information, and they have achieved an accomplishment by completing this workbook. Today's one-page session is a summary of the workbook. Cover the summary session in the usual manner, then move into a significant completion event. Ask participants if they would like to say a few words when they receive their certificates of achievement. You may want to ask a special guest to say a few words about the participant's achievement. Be creative and make the session unique.

2. The relationship between you and the participants has become important to everyone over the past weeks. End this workbook with good closure and good memories. If possible, give each graduate a graduation gift from you that is something meaningful and encouraging. At the end of this session is a bookmark that you could offer as a small gift if you want.

TeamSolutions Workbook 3 Understanding Your Illness

Session 14 - What to Expect

Facilitator Notes

(continued)

General Note

If you are interested in an outcomes measurement for this workbook, you may want to consider using the Short-Form-12 Health Survey (John E. Ware, Jr., 1994, revised 1998), the Quality of Life Index by Dr. W. O. Spitzer, 1980, or the COOP Chart for Primary Care Practices (Eugene C. Nelson, 1987).

The Short-Form-12 Health Survey (John E. Ware, Jr., 1994, revised 1998) is an abbreviated version of the Short-Form-36 Health Survey. This survey has 7 questions (using Likert scales from 1-5) regarding the person's views about their own health in the last four weeks. It addresses general health and how health affects the person's physical activities and daily activities. It also addresses emotional issues and feelings and whether either physical or emotional health has interfered with social activities. The Short-Form correlates extremely well with the longer, 36-item health survey and offers a good way to gauge physical and emotional health. Cultural differences can create potential challenges in regards to the interpretation of questions and, ultimately, answers. A heightened awareness by clinicians can increase the reliability of results.

The Quality of Life Index, by Dr. W. O. Spitzer, has both a 5 topic self-rating scale and a 5 topic

clinician scale, which allows clinicians to compare their impressions to a client's perception. The dimensions measured are Activity, Daily Living, Health, Support, and Outlook. The clinician version measures from 0 - 2 with 0 indicating lower quality and 2 indicating higher quality of life. This instrument has been used in many studies and is considered a reliable and valid tool

The COOP scales (The Dartmouth/Northern New England Primary Care Cooperative Information Project) was developed to create a system to measure health status in physicians' offices. One of the basic tenets of the charts is that the functioning of the person as a whole is more important than that of separate organ systems. You may have seen some of the graphic charts (e.g., the "face" charts to measure feelings). Other graphic charts measure daily activity levels, social activities, physical fitness, change in health, overall health, social support, and quality of life. These charts are widely used in studies and are found to have good reliability and high validity. They are rated as useful by high numbers of office staff

The editors believe these scales fit the content of this workbook well. These and other health measures can be found in McDowell, (2006).

Suggestion for Topic Introduction and Relevance to Participants

"If you could do something that would help a friend, would you do it? We will assume that what you would need to do would not be too difficult."

(Encourage responses.)

"If you would do something good to help a friend, would you do something good for yourself? Do you treat yourself as good as you treat your friends?"

"Let's think about that! If you aren't good to yourself, maybe it's time you started."

"Today we will talk about what you can do to keep working on your recovery—lifestyle choices that can help you stay on your journey of recovery."

"Let's review the main points from our last session before we start."

Topic Assessment Answer Key There is no pre- or post-Topic Assessment for this session.

T - topic introduction

R - relevance to participant

I – identify objectivesM – materials for sessionM – motivate to use

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Session 14 - What to Expect

Review of Session 13: Symptom Monitoring Tools



Main Learning Points of Session 13

What were the main learning points of Session 13? If you did not attend the last session, you may guess, and also write the answers as people say them:

- 1. A symptom m_____g tool can be used daily as part of your routine.
- Symptom monitoring can help you learn if your m______
 is working.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

□ 1. Yes. How did it go? ______

□ 2.	No. What got in the way of completing your practice?
	If you still plan to complete your practice, when will you do it?

☐ 3. I didn't choose a personal practice option.

Mark one: □Pre				+	Score: out of
There is not a pre The emphasis to				sion.	
1. I am confident	l know what t	o expect in the f	uture and	managing n	ny illness
Strongly Disagree	☐ Disagree	Neither Agree Nor Disagree	□ Agree	Strongly Agree	Unsure
2. This information	on is importan	nt for me to know	v.		
Strongly Disagree	☐ Disagree	□ Neither A Nor Disa] gree	Strongly Agree
At the <u>end</u> of the this paper:	session, ansv	wer these questi	ons befor	e turning in	
3. This session h	elped me.				
Strongly Disagree	☐ Disagree	□ Neither A Nor Disa] gree	Strongly Agree
4. What I liked ab	out this sessi	ion:			

TeamSolutions Workbook 3 Understanding Your Illness

Lilly

Session 14 - What to Expect

What to Expect

Objectives for this Session

1. Identify 4 lifestyle choices to help you stay in recovery.

What Can I Expect in the Future?

Most people want to know how their illness will affect their lives. "Will I ever get back to normal?" is a question they often ask their treatment team. No one can predict what will happen to you. Schizophrenia and bipolar disorder are ongoing mental illnesses that get better but currently cannot be cured. Most people who have schizophrenia or bipolar disorder will have to work at controlling their illness. It is very much the same way that people who have diabetes, asthma, or high blood pressure need to work at controlling their illnesses.

Frequent relapses can make your illness worse and make it harder for you to stay well. It is best for you to do everything you can to prevent a relapse. These six steps will help you:

- 1. Take your medicine regularly.
- 2. Have regular appointments to see your prescriber, who is your partner in treatment.
- 3. Keep track of your symptoms.
- 4. If symptoms get worse, tell your prescriber or treatment team immediately.
- Live a balanced life that has enough sleep and rest, enough exercise, healthy eating, social networks, friends, fun, and good stress management.
- 6. Don't use alcohol or illegal drugs.

As you continue with your treatment, your focus is recovery. Schizophrenia and bipolar disorder are medical illnesses that can be treated. There is no cure for these illnesses at this time. But for most people, symptoms can be managed. And you can get back to being healthy—a new level of healthy.

Main Learning Point #1

I am committed to managing my illness and getting on with my life.

Main Learning Point #2

What I do in my life affects my recovery and how well I stay.

Lilly

TeamSolutions Workbook 3 Understanding Your Illness

Session 14 - What to Expect

Review & Moving Forward



The main learning points of this sessio	n are:
1	

Move Forward-Choose a Personal Practice Option

It's important to practice new knowledge and skills. Although this is the last session in this workbook, you may still want to practice this important subject. Please choose one option from the list below:

1. STUDY. I am going to reread my handout at least once.
□ 2. SHARE. I will share my handout with someone in my support system. I will ask
□3. LIST. I will write the list of six things to do to prevent a relapse and post this list on my refrigerator, inside my room, or somewhere else where I will see it every day.
☐ 4. OTHER:

Take an "Extra Step Forward" (optional)

□ 5. REMEMBER and WRITE. I will write my story about my past relapses, and how they got me off track and made it harder for me to reach my goals. I will write what I learned and I will share that information with a member of my treatment team.

Celebrate your accomplishments by doing something safe and fun today with someone you care about.



He lost his job in 1832. He was defeated for the legislature in 1832. He failed in business in 1833. He was elected to the legislature in 1834, but he lost his fiancée to death in 1835. He had a break-down in 1836. There were no hospitals then and no treatment. He was defeated for speaker in 1836. Then he was defeated for his bid for Congress in 1843. He was elected to Congress in 1846, but then lost the nomination bid for Congress in 1848. He was rejected for land officer in 1849. He was defeated for Senate in 1854. He lost the nomination for the Vice-Presidency in 1856, and was again defeated for the Senate in 1858. But in 1860, he was elected President of the United States. They did not call him "mentally ill," they called him "Mr. President." ... Abraham Lincoln's life illustrates persistence and faith... it is the story of a person whose sense of purpose helped him to overcome many obstacles in his way.

Cited by Edward G. Francell, Jr. at www.mentalhealth.com



Certificate of Achievement Understanding Your Illness for completion of Team Solutions is presented to

Date

References

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Bellenir, K. (2005). *Mental Health Disorders Sourcebook* (3rd ed.). Detroit: Omnigraphics.

Bipolar disorder guide. Retrieved November 11, 2007, from www.webmd.com/bipolar-disorder/guide/default.htm

Burgess, W. (2006) The Bipolar Handbook: Real-Life Questions with Up-to-Date Answers. New York: Penguin Group.

Hyde, A. (1982). Living with Schizophrenia. Chicago: Contemporary Books.

Long, P. Internet Mental Health. Retrieved 11/11/07, from http://www.mentalhealth.com.

McDowell, (2006). Measuring health: A guide to rating scales and questionnaires, 3rd Edition. Oxford, NY; Oxford University Press.

Miklowitz, D. (2002). The Bipolar Disorder Survival Guide: What You and Your Family Need to Know. New York: Guilford Press.

Miller, R & Mason, S. (2002). Diagnosis Schizophrenia: A Comprehensive Resource for Patients, Families, and Helping Professionals. New York: Columbia University Press.

Mondimore, F.M. (1999). Bipolar Disorder: A Guide for Patients and Families. Baltimore: Johns Hopkins Press.

Noll, R. (2000). The Encyclopedia of Schizophrenia and Other Psychotic Disorders (2nd ed.). New York: Facts on File, Inc.

Schizophrenia guide. Retrieved November 11, 2007, from www.webmd.com/schizophrenia/guide/default.htm

Torrey, E F & Knable, M. (2002). Surviving Manic Depression: A Manual on Bipolar Disorder for Patients, Families and Providers. New York: Basic Books.

Torrey, F. (2001). Surviving Schizophrenia: A Manual for Families, Consumers, and Providers (4th ed.). New York: HarperCollins Publishers, Inc.

Walsh, M.(1985). Schizophrenia: Straight Talk for Family and Friends. New York: William Morrow & Co, Inc.

Waltz, M.(2002). Adult Bipolar Disorders: Understanding Your Diagnosis and Getting Help. Sebastopol, CA: O'Reilly & Associates.

Weinberger, D R. (1995) Research on Schizophrenia and Schizoaffective Disorder, National Alliance for the Mentally III 15th Annual Convention. Washington, D.C.

Weinberger, D.R., (1986). The Pathogenesis of Schizophrenia: A Neurodevelopmental Theory. H.A. Nasrallah and D.R. Weinberger (Eds.), In *The Neurology of Schizophrenia*, (pp. 397–406). Amsterdam: Elsiever.

