

# Meeting Your Communities' Behavioral Health Needs

Delta Region Community Health Services Development: 2020 Virtual Summit September 16, 2020

# **Objectives**

- Learn about the mental health ecosystem and collaborative care
- Learn how to engage family members as partners in collaborative care
- Learn about no-cost peer support



## What is NAMI?





#### What does NAMI do?





#### What makes NAMI different?





# NAMI's Approach



- Mental health conditions are no one's fault
- Catastrophic stressors
- Bio-Psycho-Social Model
- Collaborative care



#### Collaborative Care

MENTAL HEALTH PROVIDERS

Direct Clinical Care Referral Source Information

PERSON IN RECOVERY (PIR) PEER SUPPORT

PIR Support PIR Empowerment

Partner

Teacher/ Mentor

Advocate

FAMILY PEER SUPPORT

Family Support
Family Education
Family Empowerment



## **STAGES** of Treatment Adherence

Lack of insight:
"I'm not ill"
(anosognosia)

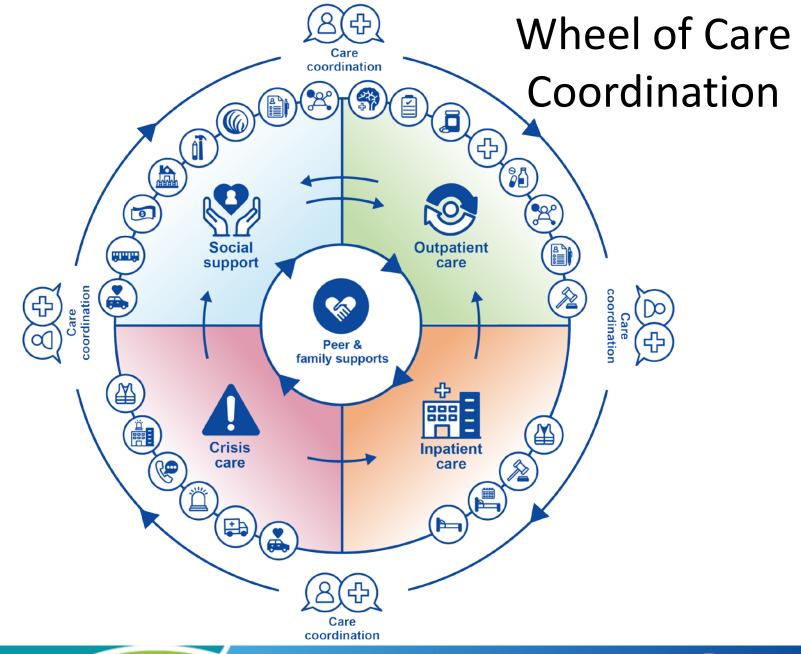
Protective denial: "I don't need treatment"

Missing the thrill of mania; would rather feel pain than be numb or bored

Wish to be seen as a person, not an illness; not wanting to be seen as broken

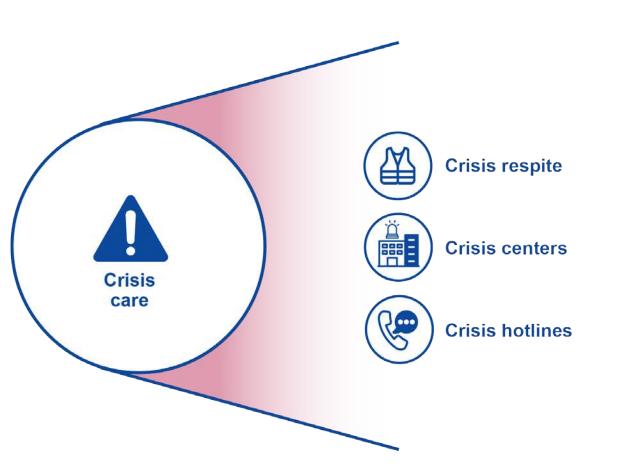
Reluctant or partial acceptance







#### **Crisis Care**





Mobile crisis teams



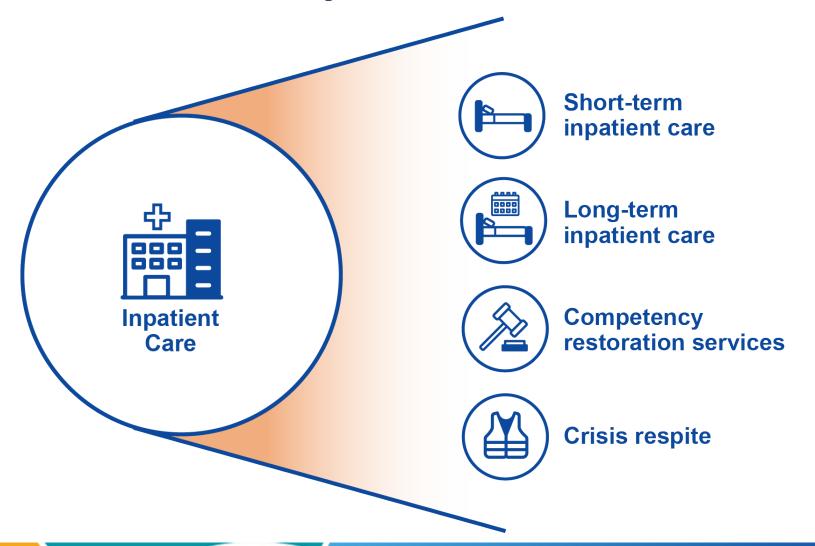
**Crisis transportation** 



**Mobile outreach** 

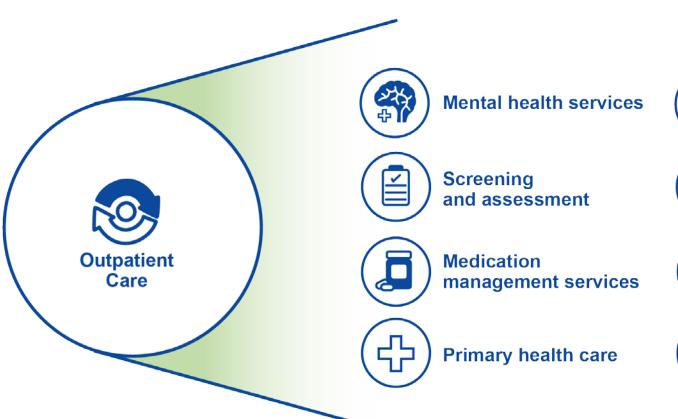


## **Inpatient Care**





## **Outpatient Care**





Treatment for co-occurring disorders



Intensive multidisciplinary programs



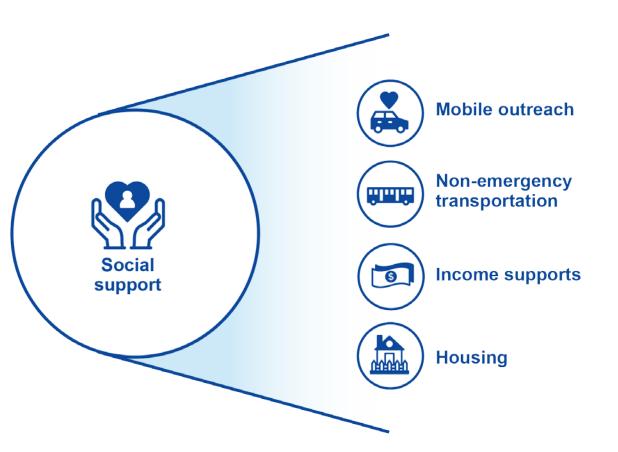
**Case management** 



Competency restoration services



## **Social Support**





NAMI education and support programming



Supported employment and education



Case management



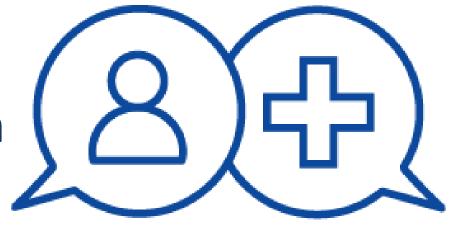
Intensive multidisciplinary programs





# Peer and Family Supports

**Care Coordination** 





# **SELF-CARE** for family members





#### FEELINGS Reported by Family Members as REACTIONS to a Loved One's Mental Health Condition





#### **STAGES** of Emotional Reaction



#### **DEALING WITH CATASTROPHIC EVENTS**

Crisis, chaos, shock, denial, hoping against hope



#### **LEARNING TO COPE**

Anger, guilt, resentment, recognition, grief



#### **MOVING INTO ADVOCACY**

Understanding, acceptance, advocacy, action



#### Important Points about the **STAGES**



- None of these stages are "wrong" or "bad"
- This process is ongoing for most of us it takes years to navigate
- Different family members are often at different places in the cycle
- This cyclical process is not about expectations
- With time, you will begin to recognize these stages and emotional reactions



# MISINTERPRETATIONS of Natural Reactions to Trauma

Natural trauma response people have	In family, response may be viewed as	In individual, response may be viewed as
Shut down	Withholding, cold	Uncommunicative
Angry	Demanding, unreasonable	Out of control
Dazed	Disinterested, aloof	Fragile
Worried	Enmeshed	Bothersome
Blaming others	Dysfunctional	Irresponsible
Withdraws	Something to hide	Lacks motivation
Cuts off contact	They're the real problem	Uncooperative



#### **SECONDARY TRAUMAS for Families**



- Families assume overwhelming responsibility
- Families feel confined
- Families remain uninformed
- Families are emotionally exhausted
- Families find inadequate support



# **Secondary Traumas for the** Person in RECOVERY



Making treatment decisions



Medication side effects



Self-harm



Co-occurring mental health condition and substance abuse



Criminalization



# BURNOUT is not just for professionals

 Emotional and physical exhaustion

Emotional stress

Absenteeism; decline in performance

Increased escape behaviors

Lowered self-regard



# Self-Care









## Setting LIMITS













#### **Basic Communication GUIDELINES**



- Use short, clear, direct sentences
- Keep the content simple
- Do what you can to keep the stimulation level as low as possible
- If your loved one appears withdrawn and uncommunicative, back off for a while
- Assume that much of what you say may not be heard the first time
- Be pleasant and firm
- Communications form our boundaries with others; make sure your boundaries are sturdy and clear



#### Statements

- I am speaking in a very specific, direct manner
- I am at the center of the communication
- I take complete responsibility for my feelings and opinions
- I don't waver
- I say what I mean

**Example:** "I don't like it when there's smoking in the house."





#### **YOU - Statements**

When we move away from I-Statements with our loved one, we tend to:

Feel defensive

Blame and become judgmental

Make assumptions about the other person's motives

 Generalize a specific problem to other situations and accusations begin to snowball

Vent our negative feelings



## Sustaining POSITIVE Outcomes

Improved coping

Reduced family stress

Increased knowledge

**Empowerment** 

Increased help-seeking behaviors

Improved problem solving skills

Changed attitudes toward mental health







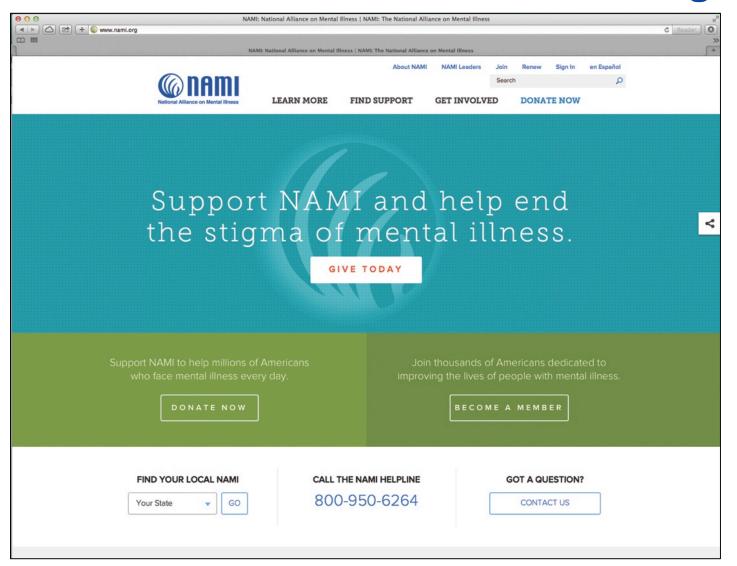
# **IMPACT** of NAMI Programs





#### What's NEXT?

#### www.nami.org





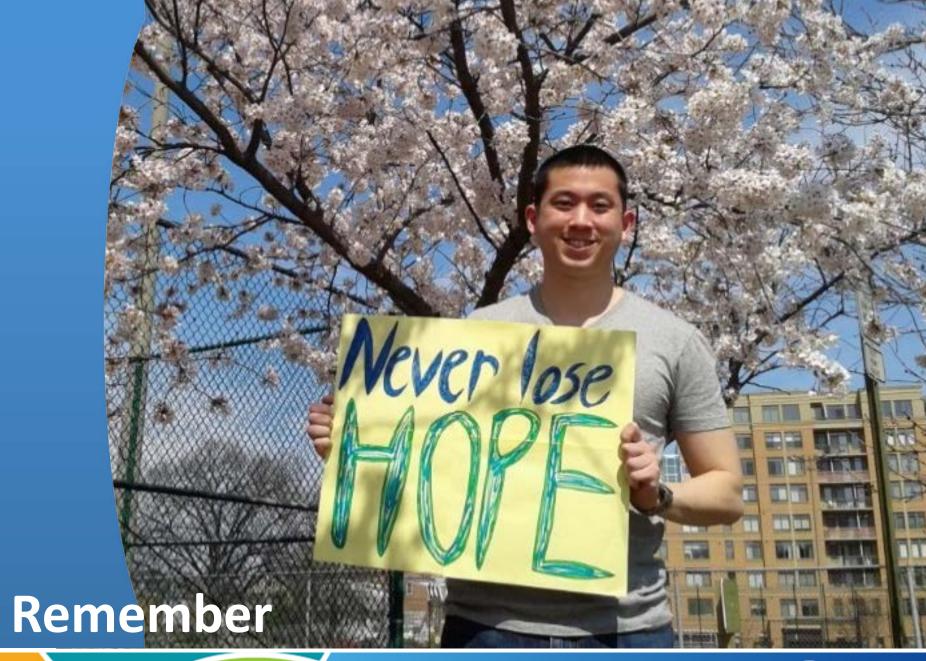
# CALL THE NAMI HELPLINE 800-950-NAMI

info@nami.org

M-F, 10 AM - 6 PM ET OR TEXT "NAMI" TO 741741









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