



YOUTH
MENTAL HEALTH
TOOLKIT

Table Of Contents

Introduction

What is mental health?	4
Difference between mental health and mental illness	4
What is mental ill health/mental distress	4
What causes mental illness?	5
Mental illness in your family	5
Mental illnesses in young people	5
Can mental illness be prevented?	6
Diet, exercise and sleep	6
How are mental illnesses diagnosed?	7
Treatment	7

Mental health stigma and its negative impact

What is stigma?	9
What's the difference between stigma and discrimination?	9
Anti-stigma measures	10
What is Resilience?	11
It's OK not to feel OK, and it's absolutely OK to ask for help.	12

Types of Mental Illness

Introduction	14
Anxiety and Panic Disorders	15
What is an anxiety disorder?	15
Common signs of anxiety disorders in young people	17
Treatments for anxiety disorders	18
Mood disorders	19
Depression	19

Common signs of depression in young people	20
Self-harm and suicidal thinking	20
How is Depression Treated?	21
Bi-Polar Disorders	21
Common signs of bipolar disorder in young people	23
Diagnosis and treatment of bipolar disorders	25
Psychotic disorders	25
Psychosis	26
Common signs of psychosis in young people	28
Diagnosis and treatment of psychosis	28
Eating Disorders	29
Common signs of eating disorders in young people	30
Diagnosis and treatments for eating disorders	31
Attention Deficit Hyperactivity Disorder (ADHD)	32
Common signs of ADHD in young people	33
Diagnosis and treatment of ADHD	33
Personality Disorders	34
Addictions	35
Common signs of addictions in young people:	35
Diagnosis and treatment	36
Stress	37
Common signs of stress in young people	38
Diagnosis and treatment	39
A word on social media and its effects on mental health	40
Ask For Help	
CYCLE AGAINST SUICIDE	41

Introduction

Have faith in yourself

Introduction

Caring about and maintaining our mental health is as important as our physical health. Our minds, together with our bodies, make us who we are, and they both need to function well so we can be at our best.

In Ireland, mental health problems affect a lot of people either directly or indirectly through a friend or family member. And that includes young people too. One in three young people in Ireland will experience some form of mental health issue in any given year. Even among adults living with a mental health problem or mental illness, the first onset of their symptoms began when they were teenagers. This is why it is important that young people get a good understanding of mental health early in life, so they can help themselves and others if they face challenges to their mental health.

Cycle Against Suicide is a national awareness charity that strives to break down the barriers around mental health and works to increase awareness of the supports and treatments that are available to those affected by mental health problems. We have introduced an evidence-based Schools' Programme that educates students on mental health issues, helps build resilience and empowers them to become mental health champions for their peers. This toolkit is part of our efforts to support young people in taking care of their mental health and getting the help they need.

If you or someone you care about have a mental health issue, know that you are not alone. There are people and organisations that can provide the support you need. This toolkit is your first step to understanding what is going on and it provides you with a list of helpful resources so you can find that support.



What is mental health?

Mental health refers to a person's condition with regard to their psychological and emotional well-being. The state of your mental health determines how you handle stress, how you relate to other people and situations, as well as the choices you make. It affects how you think, how you feel, and how you act.



Difference between mental health and mental illness

While mental health refers to how a person is able to cope with the demands and stress of day to day living, mental illness refers to a range of psychological or behavioural symptoms that reduce an individual's capacity to cope with daily life.

What is mental ill health/mental distress

Mental illnesses are disorders of brain function. They have many causes and result from complex interactions between a person's genes, their environment and social factors. Having a mental illness is not a choice or a sign of weakness, and people from all different cultures and backgrounds can suffer from mental illnesses. Mental health problems can often be diagnosed clinically by healthcare professionals.

A mental illness makes the things you do in life hard, like work, school and socialising with other people. If you think you (or someone you know) might have a mental disorder, it is best to speak to a professional as soon as possible. You can do this in complete confidence.

What causes mental illness?

There is no particular way to develop a mental illness. For some people it develops due to stressful or traumatic events that triggers certain feelings and emotions, for others it is caused by a chemical imbalance in the brain. For still others, it could be caused by changes in the body which can affect how they feel or react. It is also possible to have no identifiable cause.

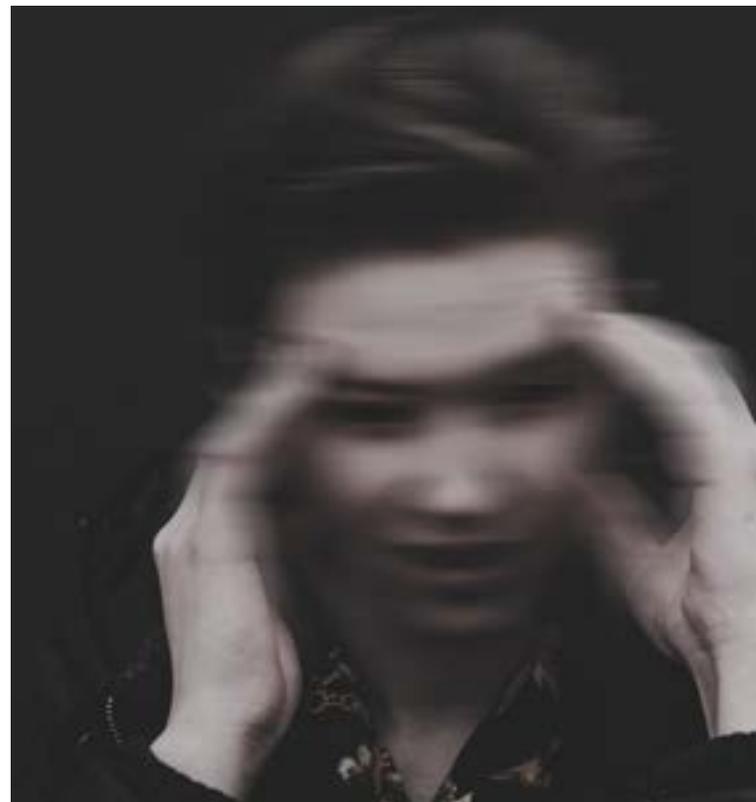
Mental illness in your family

One of the factors that affects a person's mental health is their genes. When a parent has certain mental illnesses, their children have a higher risk of developing mental illnesses than other children. When both parents are mentally ill, the chance is even greater that the child might become mentally ill. This is particularly true of conditions like an anxiety disorder, ADHD, schizophrenia, Bipolar Disorder, alcoholism or other drug abuse, or depression.

Mental illnesses in young people

Like adults, mental illnesses can affect kids and teens from all family types and cultural backgrounds. In Ireland, about one in ten children and young people suffer from one form of mental health problem or another, and these are often a direct response to what is happening in their lives. Kids and teens in certain situations, such as those with a family history of mental illness, can be at higher risk for mental illnesses.

Many mental illnesses show up before the age of 18, and so they impact on development, school performance and relationships. If they are not treated early, they can affect the person for the rest of their lives.



Can mental illness be prevented?

Mental illness can be prevented. Prevention efforts usually focus on addressing risk factors such as trauma that can cause children, youths and young adults to develop mental health problems. It can also be treated. Early identification and effective interventions are the keys to successfully treating the disorder. Mental illness should never be left untreated as this can lead to unnecessary suffering now and in the future.

There is a direct relationship between physical health and mental health, and the things that affect physical health can also greatly impact mental health. In particular, it is important to pay attention to diet, exercise and sleep.

Diet, exercise and sleep

Good habits in these three areas are very important and helpful for your mental health. While you may not need to be on a specific diet, you do need to ensure that you are eating healthily. Junk food, processed foods and foods high in sugar or fat should be avoided as much as possible. Recent studies suggest that eating junk food raises the risk of depression, which is one of the most common mental illnesses.

Similarly, exercise is one of the best weapons for protecting your mental health. Regular exercise releases feel-good hormones like endorphins and serotonin, which improve your mood and your emotional and physical well-being. Regular exercise helps reduce your stress levels and they make it easier for you to manage the symptoms of mental health conditions like depression and anxiety. When you can, exercise outdoors as sunshine also does your body good.



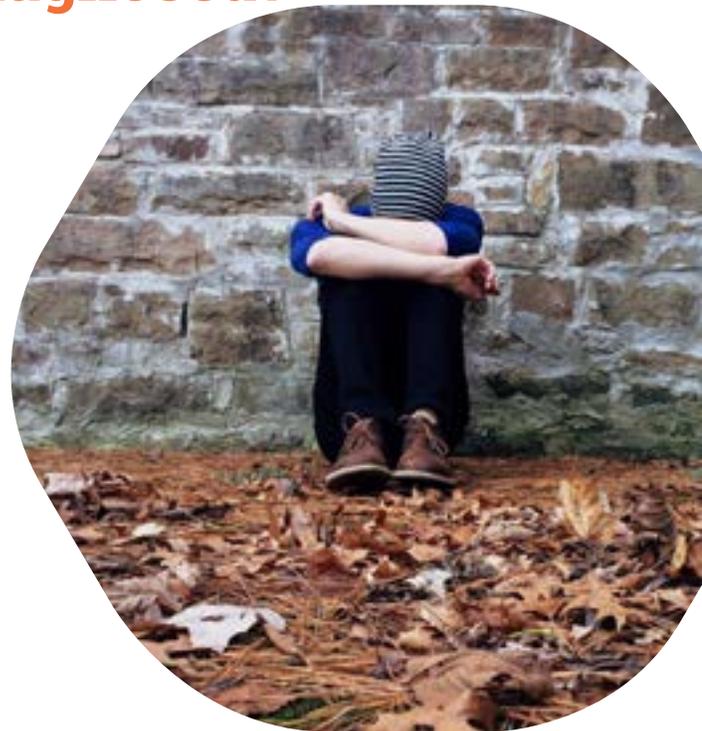
Introduction

Sleep is equally important in preventing mental illness. When you get plenty of rest, you are better able to cope with stress. Not enough sleep affects your ability to think clearly, and your feeling of well-being. Caffeine (which can be in soft/fizzy drinks) and alcohol can affect your ability to sleep and starring at screens just before bed can also make it difficult to sleep well or enjoy restful sleep. Minimising these will have a positive impact your mental health.

How are mental illnesses diagnosed?

Health professionals usually diagnose mental illness through a combination of:

- Taking medical history
- Doing a physical exam and possibly lab tests, and
- Conducting a psychological evaluation where you will be required to answer questions about your emotions, thoughts and behaviours.



Treatment

Mental health problems can be treated. There are various treatments available, depending on the mental illness and we will discuss some of these in the sections on specific mental disorders below. It is important to know that what works for one person may not work for another. Some treatments are more successful when combined with others, and some treatments may be more effective at different stages of the person's life than at other times. Experts say that a well-informed patient is probably the best judge of what treatment suits them best.

Mental health stigma and its negative impact

Love others just the way they are

What is stigma?

Stigma is a negative stereotype. It occurs when people are judged negatively because of a perceived 'flaw.' For many people with a mental illness, stigma is a reality and it can cause intense shame and fear. It acts as a barrier against treatment for many young people. In fact, people living with mental health disorders often say the stigma they encounter is worse than the illness itself.

The stigma associated with mental illness can take one of two forms:

- External or social stigma, which involves other peoples' prejudiced attitudes towards those with mental illness.
- Internal or self-perceived stigma, which involves how a person suffering with mental illness think of themselves or feel about themselves.

What's the difference between stigma and discrimination?

Stigma is not the same as discrimination. Stigma is the result of negative and prejudicial stereotypes, attitudes and behaviours that are expressed by people towards those living with a mental health problem or a mental illness. Discrimination on the other hand, is unfair treatment due to this negative stereotype, attitude and behaviour.

Stigma shows up in a variety of ways and consists of three elements—a lack of knowledge (ignorance), negative attitudes (prejudice), and disadvantage of those experiencing it (discrimination). Some of the most damaging examples of stigma are:



Mental health stigma and its negative impact

- The widely-held belief that mental illness is a sign of weakness
- That sufferers are somehow responsible for their predicament and
- That mentally ill people are violent and dangerous.

Anti-stigma measures

Research has shown that one of the best ways to break down mental health stigma is through a contact-based approach. That means an approach whereby people who have had mental health challenges share their experiences with people who have not. This approach breaks down misconceptions and stereotypes. The Activities Toolkit that accompanies this learning toolkit includes several activities and tools that can help prevent stigma and overcome its effects.

If you suspect that you or someone you care about is struggling with their mental health, talk to someone. It may help to talk to a friend or someone your own age at first, but a supportive and understanding adult is your best option for getting help.

Be gentle with yourself

What is Resilience?

Resilience can be defined as your ‘bouncebackability’ – your ability to recover after suffering a setback. It refers to your ability to handle life’s ups and downs in positive ways. Resilience, in other words, is being able to ‘bounce back’ after suffering a setback, disaster or tragedy such as the death of a loved one, parents’ divorce, an illness or other trauma.

People sometimes hold the mistaken belief that resilience means that you’re unaffected by the problems of life or that you go through life always with a smile on your face, even when faced with challenges. But that’s not resilience. Resilience doesn’t make problems go away or pretend the problem is not there. Rather, it helps one to see past the problems and still enjoy life and handle stress better.

Lack of resilience impacts a person negatively. When faced with challenges, such a person may:

- Feel overwhelmed
- Feel victimised
- Adopt unhealthy coping mechanisms, such as substance abuse
- Dwell on problems for long periods
- Be unable to move past the setback and achieve goals or do things they previously enjoyed.

Being resilient on the other hand, helps a person in many different ways. Such a person:

- Manages life’s pressures, challenges and stresses effectively
- Is better protected from various mental health conditions, such as depression and anxiety
- Can cope better if they have an existing mental health condition

Resilience

- Can adapt successfully to adversity
- Can bounce back after a major setback and carry on with fulfilling their life goals.

Resilience is important for your mental health as it can help you maintain your well-being in difficult circumstances. It can protect you from mental health problems like depression and anxiety and help offset factors that increase the risk of mental illness, such as being the victim of bullying.

Resilience is not a trait that some people just have and some don't. It can be learned by anyone. If you're not as resilient as you would like to be, there are ways you can build your resilience. One of the most important factors in developing resilience is accepting the fact that life has ups and downs and that you don't have to always feel good. There are sad days and stressful days. While it's tempting to try to bury those feelings and pretend everything is OK, that is not healthy for your mental health. Allow yourself to feel what you feel and don't be afraid to talk to someone about it.

Remember:

It's OK not to feel OK, and it's absolutely OK to ask for help.

Be patient with yourself and with others

PART II

Types of Mental Illness

Life is good, good things will happen

Introduction

Like physical illnesses, mental illnesses take various forms. In fact, there are almost 300 different conditions recognised as mental illnesses. People experience different types of mental illness in different ways, and the symptoms of each may vary from person to person, even when the diagnosis is the same for them.

If you, or someone you know, has a mental illness, there is good news: mental illnesses can be treated. In this section, you will learn about different types of mental illnesses and their treatment. You can also find helpful resources through your school library or organisations that work on mental health issues. Of course, you can also find information on the internet, but here is a word of caution: be careful to not attempt to diagnose yourself or someone else based on the information on the internet, as a lot of information out there is unverified and could be untrue. Relying on such information could be harmful. Speak to your parents, teachers or other adult who can guide you or provide more information to further your understanding of mental illness.

The most common categories of mental illnesses among young people are:

- Anxiety and panic disorders
- Mood disorders
- Psychotic disorders
- Eating disorders
- Attention Deficit Hyperactivity Disorder (ADHD)

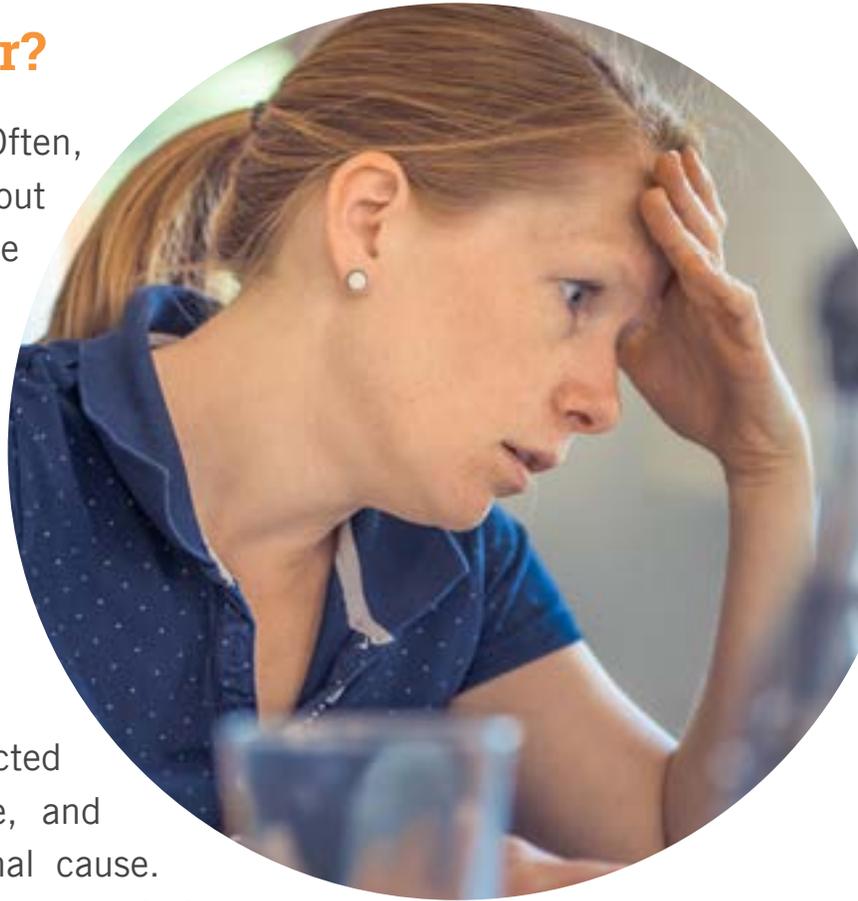
How you think determines everything.
You can change your mind



Anxiety and Panic Disorders

What is an anxiety disorder?

We all feel nervous or worried sometimes. Often, such feelings serve as warning signals about a particular issue and they can motivate us to take action to avoid a problem. Like adults, most teenagers also have periods of worry and anxiety in their lives, and these are usually connected to current events in their lives, such as exams or going to a new school etc. These worries and anxieties disappear once the stressful or worrying event has passed.



However, some people experience unexpected or unhelpful anxieties that are intense, and which occur without any current external cause.

Such anxiety can seriously impact their lives, including how they think, feel, and act, going on to cause difficulties with academic work, social interactions, sleep and family life. This kind of anxiety requires medical intervention and treatment.

Anxiety disorders are often ‘comorbid’ with depression. This means that a person suffers both conditions simultaneously and that they interact (a person has anxiety about their depression, or gets depressed about being anxious). Treatments for anxiety disorders can therefore be quite similar to those for depression. Anxiety disorders can also be present simultaneously with each other.

The most common anxiety disorders are:

1. Generalised Anxiety Disorder (GAD) is characterised by excessive worry and/or apprehension about a number of everyday events, activities or minor problems for more than six months. These feelings occur almost all the time and are not triggered

PART II – TYPES OF MENTAL ILLNESS

by any one specific issue. Rather, the worry seems to float in a more generalised way, from one topic to the next. The condition may be accompanied by physical symptoms like muscle tension and sleep problems.

- II. Panic Disorder is characterised by discrete and intense periods of anxiety that occur unexpectedly, without warning, and are not always linked to a specific place or situation. With panic disorder, there is often no warning, and therefore it is harder to predict when it may occur. The person has a feeling of sudden and intense fear that lasts for a short period of time, and also experiences physical symptoms like shortness of breath, rapid heartbeat, or nausea. People who experience panic disorder often find themselves trapped in a cycle of worry: they fear more panic attacks and may worry that something bad will happen as a result of the panic attack. Some people change their routine to avoid triggering more panic attacks.
- III. Obsessive Compulsive Disorder (OCD): Nowadays it is common for people to say things like “I’m a bit OCD” if they have a strong preference for things being neat and orderly. Often, the term is used jokingly, but the fact that you have preference for something does not really mean you suffer from OCD. Rather OCD is a condition in which a person experiences unwanted thoughts, images, or urges that cause anxiety (obsessions) or repeated actions meant to reduce that anxiety or make the distress feel better (compulsions). Obsessions or compulsions usually take a lot of time and cause a lot of distress.
- IV. Post-Traumatic Stress Disorder (PTSD) is an intense re-experiencing of a traumatic event through distressing recollections, dreams, and/or associations. Some examples of the cause of PTSD include serious accidents, witnessing or being the victim of violence, and being a victim or witness of abuse.
- V. Social Anxiety is the fear of social situations that involve interaction with other people and the fear of being negatively judged and evaluated by other people. It is a pervasive disorder and can cause anxiety and fear in most areas of a person’s life. Being shy or awkward does not necessarily mean that you suffer from social anxiety. Rather, the intensity of the fear and the extreme lengths that a person will go to avoid social interaction are what characterise social anxiety.

VI. Phobias. A phobia is an intense fear around a specific thing like an object, animal, or situation that is, in fact, relatively safe. Most of us are scared of something, but these feelings don't disrupt our lives. With phobias, the thought of facing the object or situation they fear often brings on a panic attack or severe anxiety. People who suffer from phobias change the way they live in order to avoid the feared object or situation. They are aware that their fear is irrational, but they still experience it. Phobias usually begin in adolescence or adulthood. They start suddenly and tend to be more persistent than childhood phobias. No one knows what causes them or why they persist in some people but disappear in others.

Common signs of anxiety disorders in young people

Some of the common signs of anxiety disorders in young people are:

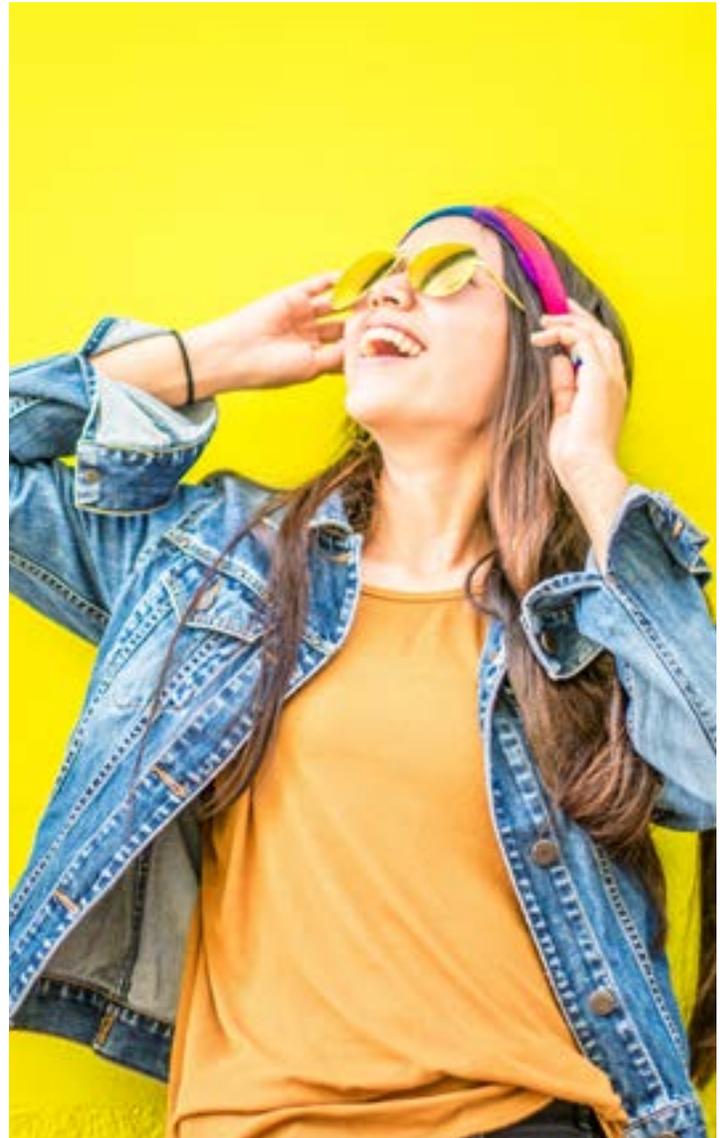
- Feeling constantly agitated, tense, restless or unable to stop or control worrying – the young person might seem unable to relax
- Seeming highly sensitive to criticism or extremely self-conscious or uncomfortable in social situations
- Always expecting the worst to happen or seeming to worry too much or in a way that is out of proportion to problems or situations
- Avoiding difficult or new situations, or having difficulty facing new challenges
- Being withdrawn or extremely shy, or avoiding social activities completely
- Feeling that s/he must do a particular action
- Having obsessive thoughts or images that they say they can't get out of their head

Right now you have the capacity
to do great things

Treatments for anxiety disorders

In general, the help of mental health practitioners should be sought when anxiety is having a significant detrimental effect on a person's ability to live a relatively normal life. It is important to maintain open communication about anxiety, as this can help to relieve the symptoms. Treatment can be initiated with a visit to the GP, who may refer you to a specialist.

Anxiety disorders can be treated with counselling, psychotherapy and cognitive behavioural therapy (CBT). These three are sometimes referred to as 'talking therapies.' Sometimes medication may be prescribed to deal with the most intense, short-term spells of anxiety (attacks). However, it is usually recommended that the use of these medications by adolescents should be restricted to the most severe kinds of anxiety and carefully monitored because of the dangers of dependence.



Keep going - keep growing

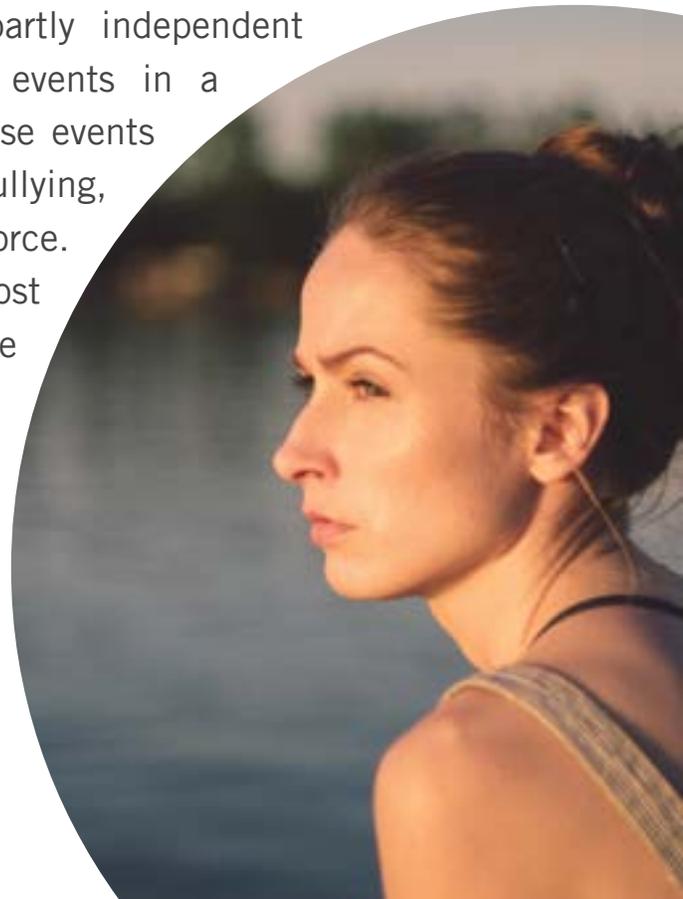
Mood disorders

Mood disorders are a group of mental illnesses that affect how you feel and think about yourself, other people and life in general. People with mood disorders find that their general emotional state or mood is distorted or inconsistent with their circumstances and interferes with their ability to function. They may be extremely sad, empty or irritable (depressed), or they may have periods of depression alternating with being excessively happy (mania). There are a few different types of mood disorders, and these include:

Depression

Depression is a mood disorder that shows up most often during the teenage years. It is a fairly common misconception that depression is an adult condition, but evidence shows that it's also quite common in children and teenagers. Even though it is common for people to say "I feel depressed", often what is being referred to is just sadness. Depression is not the sadness caused by life events such as bereavement or relationship problems, however severe this might be. Depression is a diagnosable disorder where a person's mood is 'down' over a long period of time (more than two weeks at a time) – even when the circumstances do not seem to justify it – and this affects their everyday life.

Even though the experience of depression is partly independent of changing day-to-day circumstances, negative events in a person's life can also trigger it. For teenagers, these events can include loss of a loved one, exam pressures, bullying, sex and sexuality, physical illness and parental divorce. Depression tends to run in families, so there is almost certainly a genetic component too. Depression can be mistaken for typical teenage 'moodiness', and vice versa, so if you or someone you know have been experiencing extended periods of sadness, it is important to speak to an adult and arrange a medical visit so that a conclusive diagnosis from a medical professional can be obtained. This will help them decide whether further intervention is necessary.



Common signs of depression in young people

While a GP or psychiatrist will use tools such as questionnaires covering the severity and duration of a range of symptoms to reach a diagnosis of depression, there are a number of signs that may give a general indication that a young person is depressed. This includes:

- Extreme moodiness and irritability
- Giving up interests and not finding new ones
- Losing interest in school and having trouble concentrating
- Becoming withdrawn and isolated
- Not looking after their personal hygiene
- Not eating enough or eating too much
- Oversleeping or not sleeping enough

Self-harm and suicidal thinking

Less common but more extreme symptoms of depression are self-harm and suicidal thinking (or 'suicidal ideation'). Self-harm sometimes occurs as a result of certain difficulties and can take many different forms. However, there are coping mechanisms that can help prevent this from occurring. This includes changing your surroundings, letting it all out by crying, listening to a play list, and writing a journal.

Suicidal thoughts may or may not lead to suicide attempts, but young people need to be taken seriously if they express thoughts like these. If you have a friend who is having difficulty or struggling with depression, you can help save their life by talking to them and listening to them. Ask how they are feeling. In cases of severe self-harm or suicidal thinking, the young person in question may need immediate medical attention. They should not be left alone under any circumstances.

It is important to note that adolescents with bi-polar disorders and those suffering from

psychosis are also at risk of self-harm and suicide, as well as those with no history of depression who are suffering difficult life circumstances. If you or someone you know are suffering from a severe form of depression – whether they have received a diagnosis or not – speak to someone who can help you.

How is Depression Treated?

GPs can make diagnoses of depression but may refer someone with depression – very likely in the case of children and adolescents – to a psychiatrist. The psychiatrist will decide on the best course of treatment.

Treatments for depression can include medications, counselling, psychotherapy, and cognitive behavioural therapy (CBT) - which involves working with the patient to systematically alter negative thought patterns and behaviours.

It is important to maintain open, non-judgmental communication when a diagnosis of depression is made. In terms of school attendance and academic performance, the best thing to do is to think of the condition of depression in the same terms as a chronic physical illness which could keep you from school. So on days when the person suffering from depression is unable to cope with school, they should ask to be excused.

Bi-Polar Disorders

Bi-polar disorders are mood disorders covering a range of conditions where the sufferer has episodes of moderate to severe depression followed by ‘manic’ (extremely high energy levels, excitement and risk taking) or ‘hypomanic’ (‘less than manic’) episodes (the condition was formerly known as manic depression). Bipolar disorder can cause a young person’s moods to change back and forth between extremely high moods, called mania, and extremely low moods, called depression. A young person is at higher risk for bipolar disorder if another family member has it. The disorder often starts in the teen years or early adulthood. It affects boys and girls equally, but girls tend to have more symptoms of depression.

PART II – TYPES OF MENTAL ILLNESS

The different types of bi-polar disorders are:

- I. Bipolar I Disorder – Distinguished by ‘true’ manic episodes that cause significant impairment of normal functioning. During severe manic episodes, some sufferers can have strange thoughts and beliefs which can approach the strength of the symptoms experienced in psychotic illnesses such as schizophrenia (see below). Periods of depression are usually, but not always, part of Bipolar I Disorder
- II. Bipolar II Disorder - Distinguished by episodes of major depression and hypomanic episodes, which are not as severe as the manic episodes in bipolar I disorder and do not have psychotic features.
- III. Cyclothemia – Distinguished by episodes of hypomania and depressive episodes that do not qualify as major depression.

The ‘mood swings’ experienced by those with bipolar disorders are much more intense and noticeable than the mood changes associated with a ‘normal adolescence’ and can modify a young person’s behaviour, thoughts and feelings drastically for a week or more. Sometimes, sufferers can experience ‘mixed’ episodes with both depressive and manic features. The episodes are accompanied by sleep disruption and sometimes by behaviour, ideas and speech which is considered inappropriate by society. The episodes can put an intense strain on family and other personal relationships and cause the sufferer to experience intense feelings of embarrassment and shame, as well as putting them into potentially dangerous situations and increasing the risk of substance abuse. As with psychosis (see below), physically violent behaviour is very rare, and people with bi-polar disorder are much more likely to be the victims of violence than the perpetrators.

Symptoms of bi-polar usually only start to show in late adolescence. However, there are forms of ‘early onset’ bi-polar disorder which can affect children and younger adolescents. Although manic (or hypomanic) and depressive episodes are naturally cyclical in bi-polar disorder, they can be triggered by events. Stress and over-stimulation can trigger manic episodes, and minimising this as far as possible will help those who suffer from the condition to manage symptoms. Depressive episodes can be triggered to negative life events, so young people with bi-polar disorder need to be monitored carefully when these events occur.

Common signs of bipolar disorder in young people

Teenagers with bipolar disorder often have abnormal mood swings. They shift between depression and mania. These episodes often last 1 or 2 weeks. But symptoms may be different for each teen.

Symptoms of depression may include:

- Lasting feelings of sadness
- Feelings of despair, helplessness, and guilt
- Low self-esteem
- Feelings of not being good enough
- Feelings of wanting to die
- Loss of interest in activities once enjoyed
- Trouble with relationships
- Sleep problems, such as insomnia
- Changes in appetite or weight
- Drop in energy
- Problems focusing or making choices
- Suicidal thoughts or attempts
- Frequent bodily complaints, such as headache, stomach-ache, or extreme tiredness (fatigue)
- Running away or threats of running away from home
- Sensitive to failure or rejection
- Feelings of anger, hostility, or aggression



PART II – TYPES OF MENTAL ILLNESS

Symptoms of mania may include:

- Overly inflated self-esteem
- Less need for rest and sleep
- Easily distracted
- Very irritable
- Often taking part in high-risk activities that may have harmful results, such as reckless driving, unprotected sex, or alcohol and drug abuse
- Very talkative, such as speaking quickly or changing topics a lot
- Very high or euphoric feelings, at times grandiose
- Severe, unpredictable mood changes, such as being abnormally happy or silly
- Heightened energy level
- Uncharacteristically poor judgment
- Seeing or hearing things that are not there (hallucinations) or believing things that are not true (delusions)

Open, honest communication can also help in managing symptoms. The embarrassment and shame that can accompany bi-polar disorder is very real, even though the person suffering from the condition are not fully aware of their actions during manic episodes. They may not wish people to know some of what has happened, and their privacy should be respected.

At school teachers can help students with bipolar disorders by employing:

- Flexibility to adapt assignments, curriculum and presentation style as needed
- Patience to ignore minor negative behaviours, encourage positive behaviours, and provide positive behavioural choices. Most important is the ability to stay calm and be a model of desired behaviour

PART II – TYPES OF MENTAL ILLNESS

- Good conflict management skills to resolve conflicts in a non-confrontational, non-combative, safe, and positive manner
- Receptivity to change and to working collaboratively with the child's parents and other professionals to best meet the needs of the child

Diagnosis and treatment of bipolar disorders

It can be hard to diagnose bipolar disorder because it may look like other health problems, such as depression. In order to be diagnosed with bipolar disorder however, the person must have both depressive and manic symptoms. Diagnosis usually involves a health practitioner asking about your health history and symptoms and doing a mental health evaluation.

Treatment will depend on the symptoms exhibited by the person with bipolar disorder. It also depends on their age, general health and how severe the condition is. Like depression and anxiety, a combination of medication and talking therapies can be useful in managing the symptoms of bipolar disorders. Treatment can often help a person with bipolar disorder get better. But it will take time.



Psychotic disorders

Psychotic disorders are severe mental disorders that cause abnormal thinking and perceptions. They include:

Challenge your negative beliefs

Psychosis

Broadly speaking, psychosis means a loss of contact with reality. It involves a disruption to a person's thoughts and perceptions that make it difficult for them to distinguish what is real and what isn't. Psychosis occurs in varying degrees. While some people may only experience mild impairments, others struggle with activities of daily living due to their symptoms. It is very rare for people with psychosis to perpetrate violence; they are much more likely to be the victims of violence. Psychosis itself is a symptom, not a condition in its own right, and can stem from a variety of conditions like:

- I. Schizophrenia is a condition that results in strange or bizarre thinking, perceptions (sight, sound), behaviours, and emotions. Most people who have schizophrenia hear and sometimes see things that are not there (hallucinations), often believe some things that are not true (delusions) and may think that some people are trying to harm them (paranoia). Schizophrenia can change you in many ways. It may make it harder for you to think clearly, manage how you feel, and deal with other people.

Teens with schizophrenia exhibit changes in their behaviour. The early symptoms of schizophrenia can sometimes look like those of other problems such as anxiety or depression, and can lead to bad grades, trouble sleeping, or irritability.

The person suffering from schizophrenia may also exhibit other symptoms like:

- Feeling like their brain is not working
- Feeling like their mind or eyes are playing tricks on them
- Seeing things and hearing voices that are not real
- Hearing knocking, tapping, clicking or their named being called
- Confused thoughts
- Vivid and bizarre thoughts and ideas
- Sudden and bizarre changes in emotions

PART II – TYPES OF MENTAL ILLNESS

- Peculiar behaviour that seem unusual
 - Increased sensitivity to light, sounds, smells or touch
 - Concept that people are “out to get them”
 - Fearfulness or suspicion that isn’t warranted
 - Withdrawal from others
 - Severe problems in making and keeping friends
 - Difficulty speaking, writing, focusing or managing simple tasks
- II. Psychotic disorders caused by substance abuse – substance use escalates from experimentation to a serious disorder much faster in adolescents than it does in adults. Teens with serious substance abuse problems may experience hallucinations or delusions in the context of their substance use.
- III. Paranoia is an unfounded belief that something bad is happening or going to happen. It involves intense anxious or fearful feelings and thoughts often related to persecution, threat, or conspiracy. Paranoia is a factor in many mental disorders but is most often present in psychotic disorders. Paranoia can become delusions, when irrational thoughts and beliefs become so fixed that nothing (including contrary evidence) can convince a person that what they think, or feel is not true. The symptoms of paranoia include intense and irrational mistrust or suspicion, which can bring on a sense of fear, anger, and betrayal. People suffering from paranoia often find it difficult to trust or forgive, and they exhibit a defensive attitude in response to imagined criticism and live in fear of being deceived or taken advantage.
- IV. Schizoaffective disorder – Schizoaffective disorder is a mental disorder in which a person experiences a combination of schizophrenia symptoms, such as hallucinations or delusions, and mood disorder symptoms, such as depression or mania.
- V. Psychotic disorder due to another medical condition – psychosis can sometimes stem from physical health conditions, like a brain tumour or head injury.

Common signs of psychosis in young people

Early warning signs of psychosis may be similar to the signs of depression or other mental illness. Signs to look out for include:

- A decline in self-care or personal hygiene
- Loss of interest in usual activities
- Spending a lot more time alone than usual
- Unusual movements
- Trouble thinking clearly or concentrating
- Cold, detached demeanour
- Inappropriate emotions or inability to express emotions
- Problems at school and difficulty maintaining relationships

Psychotic episodes are often a source of embarrassment and shame for young people. They may not wish people to know some of what has happened, and their privacy should be respected. Internet-based support groups with a high degree of anonymity are a good place for parents to talk more openly about their experiences.

Diagnosis and treatment of psychosis

Early diagnosis of psychosis improves long-term outcomes, but there is no biological test for psychosis itself. To increase the chances of early detection, psychiatrists recommend that if a young person shows the following symptoms, then the possibility of a psychotic disorder should be carefully considered:

- Becoming more socially withdrawn
- Performing worse for a sustained period at school or work, or
- Becoming more distressed or agitated yet unable to explain why

As with other mental illnesses, a combination of medication and therapy is more effective than either one of alone. As with bipolar disorders, the challenges for families living with these illnesses may mean that they will benefit from family therapy.

Eating Disorders

People sometimes think that eating disorders are a lifestyle choice or that a person is just unnecessarily preoccupied with food, body weight, and shape. In reality however, such preoccupation may be a sign of an eating disorder, which is actually a serious illness that can be fatal.

Eating problems are associated with severe disturbances in people's thoughts and emotions. They can start as a result of trauma or another mental health condition as well as wishing to achieve an unrealistic body image, making it difficult to nourish oneself properly. Eating disorders can be dangerous and can have serious health implications if body weight drops too low or rises too high. In many instances, they have caused death. Although eating disorders are most often associated with adolescent girls, the number of boys with eating disorders is rising steadily. Common eating disorders include anorexia nervosa and bulimia nervosa.

- I. Anorexia Nervosa is characterised by excessive worrying about body weight and the desire to eat less and less food. 'Feeling fat' despite being extremely thin, and inaccurately comparing bodyweight with other people's, are almost universal experiences for sufferers of anorexia. Exercising too much is also extremely common among young people with anorexia, though they may eventually lack the ability to do this as physical symptoms progress.
- II. Bulimia shares with anorexia the characteristics of obsession with body image and bodyweight, but rather than trying to minimise eating, those with bulimia will eat to excess and then use vomiting or laxatives to try to lose weight. This 'purging' can give a sense of control to young people who feel a lack of control over the rest of their lives. Bulimia has serious physical consequences such as damage to tooth enamel and brittle bones in long term cases.

Common signs of eating disorders in young people

Early warning signs common to a range of eating disorders include:

- Withdrawal from friends and family
- Avoidance of meals or situations where food may be present
- Preoccupation with weight, body size and shape, or specific aspects of appearance
- Consumption of laxatives, diuretics or diet pills
- Extreme fatigue, including dizziness and fainting

Early warning signs specific to bulimia include:

- Habitual trips to the bathroom immediately after eating
- Hoarding large amounts of food
- Concealing food containers and wrappers

Early warning signs specific to anorexia include:

- Constant adherence to increasingly strict diets, regardless of weight
- Significant weight loss in a short period of time
- Refusing offers of food



Diagnosis and treatments for eating disorders

As with other mental illnesses, the early intervention of mental health professionals is a critical early step in symptom management and recovery. This usually begins with an appointment with a GP, who will then refer your child to specialist eating disorder services.

The treatment for eating disorders will usually involve some kind of talking therapy, as well as the support of a qualified nutritionist who will help in the recovery from the physical symptoms of eating disorders and work with the young person to develop healthier eating habits.

Those with the most severe eating disorders may require a period of inpatient care at a hospital, where more intensive therapy and nutritional support is provided daily.

If you see signs of an eating disorder in a friend, talk to them about it. It is common for teenagers with eating disorders to become withdrawn and defensive, making it difficult to talk with them, especially if they still can't accept they have a problem. But talking about their condition is essential for their recovery, so keep trying. It might be difficult for them to express their feelings, so be patient and listen to what they're trying to say. Avoid talking about their appearance, even if it's meant as a compliment as this will make them more defensive. And if you recognise symptoms of an eating disorder in yourself, talk to someone urgently. Talking about it is the first step to healing.

Try not to focus too much on portion sizes, calories or the fat content of your meal. Enjoy your meal and try to make conversation with others during mealtimes. This can help distract from wanting to purge or over exercise.

Be aware that there is a range of professional help available, and say you'll support them through it. Suggest activities they could do that don't involve food, such as hobbies and days out with friends.

Show compassion for all people
- many are struggling

Attention Deficit Hyperactivity Disorder (ADHD)

Attention deficit hyperactivity disorder (ADHD) is a brain disorder marked by an ongoing pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development. This condition has three main consequences:

- Inattention, which means that a person wanders off task, lacks persistence, has difficulty sustaining focus, and is disorganised; and these problems are not due to defiance or lack of comprehension
- Hyperactivity, which means a person seems to move about constantly, including in situations in which it is not appropriate, or fidgets, taps, or talks excessively. In adults, it may be extreme restlessness or wearing others out with constant activity
- Impulsivity, which means a person takes hasty actions that occur in the moment without first thinking them through, or that they may have a high potential for harm. It could also mean a desire for immediate rewards or inability to delay gratification. An impulsive person may be socially intrusive and excessively interrupt others or make important decisions without considering the long-term consequences

Most children and teens with ADHD suffer from a form that combines inattention with hyperactivity/impulsivity. Such hyperactivity in young children often leads to an early diagnosis. The effect is that ADHD makes it very difficult for kids to focus their attention. A child with ADHD is also more impulsive and harder to settle down than other children.

However, a significant minority of young people with ADHD may be quiet and well behaved as young children while suffering only from the inattentive aspect of the condition, which can delay diagnosis into adolescence or even adulthood.

Common signs of ADHD in young people

- Inattentiveness
 - The main signs of inattentiveness are:
 - Having a short attention span and being easily distracted
 - Making careless mistakes – for example, in schoolwork
 - Appearing forgetful or losing things
 - Being unable to stick to tasks that are tedious or time-consuming
 - Appearing to be unable to listen to or carry out instructions
 - Constantly changing activity or task
 - Having difficulty organising tasks
- Hyperactivity and impulsiveness
 - The main signs of hyperactivity and impulsiveness are:
 - Being unable to sit still, especially in calm or quiet surroundings
 - Constantly fidgeting
 - Being unable to concentrate on tasks
 - Excessive physical movement
 - Excessive talking
 - Being unable to wait their turn
 - Acting without thinking
 - Interrupting conversations
 - Little or no sense of danger

Diagnosis and treatment of ADHD

A childhood diagnosis of ADHD usually occurs when teachers and parents notice that a child's problems with lack of focus and inability to focus on tasks are causing them difficulties, and they make an appointment with their GP who then refers the young

PART II – TYPES OF MENTAL ILLNESS

person to a specialist. For adolescents who were not diagnosed in childhood, parents and caregivers who are concerned about the behaviour of their teens are also usually seek the help of a GP who then refers them to a specialist.

After a diagnosis of ADHD, a teenager will benefit from strong structures and routines including housework, games and activities that promote concentration.

Personality Disorders

A personality disorder is a type of mental disorder in which a person has a rigid and unhealthy pattern of thinking, functioning and behaving. A person with a personality disorder has trouble perceiving and relating to situations and people. This causes significant problems and limitations in relationships, social activities, work and school.

In some cases, the person with a personality disorder may not realise that they have a condition because their way of thinking and behaving seems natural to them, and they may blame others for the challenges they face.

Personality disorders usually begin in the teenage years or early adulthood. There are currently 10 personality disorders recognised in psychiatry. Borderline personality disorder and antisocial personality disorder are the most frequently diagnosed personality disorders. Some of the symptoms include:

- Pervasive distrust and suspicion of others and their motives
- Unjustified belief that others are trying to harm or deceive you
- Perception of innocent remarks or nonthreatening situations as personal insults or attacks



Addictions

Addiction means a person has no control over whether he or she uses a drug or drinks. Although similar, there is a difference between addiction and substance abuse. Substance abuse means using an illegal substance or using a legal substance in the wrong way. Addiction usually begins as abuse or using illegal substances. Addiction can be physical, psychological, or both.

Common signs of addictions in young people:

Some of the signs that you or someone you know may have a drug or alcohol addiction include:

- Use of drugs or alcohol as a way to forget problems or to relax
- Needing to take more of the substance to get the same effect
- Feeling shaky or sick when trying to stop using the drug or alcohol
- Changes in sleeping habits
- Changes in eating habits, including weight loss or gain
- Withdrawal or keeping secrets from family and friends
- Loss of interest in activities that used to be important
- Problems with schoolwork, such as slipping grades or absences



PART II – TYPES OF MENTAL ILLNESS

- Changes in friendships, such as hanging out only with friends who use drugs
- Spending a lot of time figuring out how to get drugs
- Stealing or selling belongings to be able to afford drugs
- Failed attempts to stop taking drugs or drinking
- Anxiety, anger, or depression
- Mood swings

Most research on drug abuse and mental health has shown that the earlier a person starts abusing substances, the more likely it is that they will develop some form of mental health condition, such as psychosis, even years or decades after they first started. This may be because the human brain is still in forming and developing even in the early 20s, and exposing the brain to certain substances can influence that formation.

Diagnosis and treatment

While the signs of addiction can be clear, addiction itself can be difficult to diagnose and treat. That is because the first step to a diagnosis is for a person with an addiction or their family to acknowledge the addiction and want to be helped. If that willingness is there, then it becomes easier. The person with the addiction needs to visit a GP, who will ask questions and do a physical examination to assess overall health. This may include blood tests to determine if medical treatment is needed. Thereafter the GP will refer the person to an addiction or rehabilitation specialist.

There are numerous treatment programs tailored to help teens beat addictions. These include going to rehab, ongoing recovery and behavioural treatments. Behavioural therapy can help teens address psychological issues that lead to drinking or drug use. Behavioural therapy is hands-on for both teens and families. Teens learn skills to resist drug use and cope with triggers, or stressful situations and emotions that lead to cravings.

If you think that you or someone you care about is addicted to drugs or alcohol, the first step to recovery is recognising the problem. Find someone you trust to talk to. Many

PART II – TYPES OF MENTAL ILLNESS

people think they can beat the addiction on their own, but that rarely works. Professional help is usually required. It is not a sign of weakness to seek professional help from a trained professional.

Stress

Stress is a response to pressure or threat. It triggers a surge of a hormone called adrenaline that temporarily affects the nervous system. This usually shows up as increased heartbeat, breathing faster, sweaty palms and feeling of nervousness. The stress response is also called the fight-or-flight-response. It's an automatic response that prepares us to deal with danger.

Stress is quite common among teenagers, especially during the school year. While some level of stress is to be expected especially where there is a heavy workload or schedule, if it persists at high levels for a long time, it can cause damage to a person's mental health. Its effects include anxiety, depression, aggression, high blood pressure and a weakened immune system. In teens, stress can also lead to drug and/or alcohol use if the person affected has poor coping skills. When stress continues over a long period of time, it's known as chronic stress.

Some sources of stress for teens include:

- School demands and frustrations
- Negative thoughts or feelings about themselves
- Bullying or other issues with peers
- Starting to date or have sexual relationships
- Changes in the body
- Problems with friends and/or peers at school
- Unsafe living environment/neighbourhood
- Chronic illness or severe problems in the family



PART II – TYPES OF MENTAL ILLNESS

- Moving or changing schools
- Taking on too many activities or having too high expectations
- Family financial problems
- Major life changes, such as divorce or death in the family
- Financial problems at home
- Struggling with schoolwork or college applications

Common signs of stress in young people

When someone is stressed, you might notice these behaviours:

- Alcohol abuse
- Smoking a lot
- Constant gum chewing
- Grinding teeth
- Overeating or not eating
- Being very critical of other people
- Lots of time in front of the TV, computer, or video games
- Can't get things done
- Takes risks that can have negative consequences
- Sleeping too much or too little

Diagnosis and treatment

If you are feeling overly stressed, your GP may refer you for a consultation with a child and adolescent psychiatrist or other qualified mental health professional. You can benefit from learning stress management skills and techniques, that can help you begin to manage stress. The steps you can take to manage your stress levels include:

- Exercising regularly and eating well
- Getting enough sleep
- Talk positively to and about yourself
- Doing things that make you relax, for example, listening to music, writing or hanging out with friends. This will help you take a break from stressful situations
- Rehearsing and practicing situations which cause stress. For example, if public speaking frightens you, you can practice how to speak in crowds by joining a speaking club
- Avoiding too much caffeine which can increase feelings of anxiety and agitation
- Avoiding illegal drugs, alcohol, and tobacco
- Learning relaxation exercises like taking deep breaths
- Learning how to break big or tough tasks and assignments into smaller manageable chunks
- Building a network of friends who help you cope in a positive way

Worry less - Dream more

A word on social media and its effects on mental health

Social media is a great tool for staying connected with family and friends. However, high use of social media can have a negative impact on your mental health. Research has shown that there is a correlation between extreme use of social media and harmful effects on young people's well-being.

Very frequent use of social media damages the mental health of teens as heavy users of social media are more likely to experience cyber bullying, be exposed to inappropriate content like websites promoting self-harm, and to give out too much personal information to strangers. It also causes harm through sleep loss and reduced physical activity.

Many teens, especially girls, are prone to worry about what others might think of them and how they will respond when they see them next. This leads to anxiety and also affects social interactions and communication skills. These are just some of the reasons why parents try to limit your time on social media and it is good practice to learn self-regulation too.

So while social media has many good uses, it is also a good idea to limit how much time you spend on it.



Ask For Help

CYCLE AGAINST SUICIDE

Cycle Against Suicide is a national awareness charity that strives to break down the barriers around mental illness and works to increase awareness of the supports and treatments that are available to empower those affected. We have been at the forefront of building resilience in young people by providing evidence-based, youth focused programmes in schools and communities.

For further information on getting your school involved in our school programme, you can contact Cycle Against Suicide at info@cycleagainstsucide.com

For a full list of support agencies in your locality, please see:
<http://www.cycleagainstsucide.com/ask-for-help/>

HSE CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS)

The HSE Child and Adolescent Mental Health Services (CAMHS) is a specialist service for people under the age of 18 with mental health difficulties. These are difficulties that affect your thoughts, feelings and behaviours every day.

SAMARITANS

Samaritans provide fully confidential and non-judgemental emotional support 24 hours a day, every day by phone and email.

TEENLINE IRELAND

Teen-line Ireland provides a national non directive free phone and text service for teenagers. Call **1800 833 634** or text **Teen** to **50015** 8PM to 11PM 365 days a year.

IRISH SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN (ISPCC)

The Irish Society for the Prevention of Cruelty to Children (ISPCC) is Ireland's national child protection charity.

JIGSAW

Jigsaw provide support and information to make sure every young person in Ireland has somewhere to turn to and someone to talk to.

AWARE

Aware provides support, education and information services for those impacted by depression, bipolar disorder and other mood related conditions.

Support line: **1800 80 48 48**

PIETA HOUSE

Pieta House provide a free, confidential counselling service to people who are in suicidal distress and those who engage in self-harm.

BODYWHYS

Bodywhys provide information and support for people affected by eating disorders

MYMIND

MyMind provide fast and easy access to counselling and psychotherapy in Dublin, Cork, and Limerick, as well as online. Email hq@mymind.org.

LIFELINE

Lifeline is the Northern Ireland crisis response helpline service for people who are experiencing distress or despair. Tel: [0808 808 8000](tel:08088088000)

PIPS

PIPS provide counselling and complementary therapies, home visits, one to one sessions, and support groups in Northern Ireland. PIPS can also provide support for families who have been touched by suicide throughout Northern Ireland.

TURN2ME.ORG

Turn2me are an online mental health community providing peer and professional support to those in need. Remain anonymous, express yourself, and share your experiences without fear of recognition or judgement.

SEECHANGE

SeeChange are a national movement to change minds about mental health problems and end stigma, one conversation at a time. Email info@sechange.ie.

REACHOUT

Reachout is an online youth mental health service which supports those going through a tough time, providing reliable information and support on anything which could affect someone's mental health.

LGBT IRELAND

LGBT Ireland provide information and support options for Lesbian, Gay, Bisexual and Transgender people in Ireland.

Helpline: 01 6859280

BELONG TO

Support for Lesbian, Gay, Bisexual and Transgender people in Ireland.

Helpline: 01 6706223

SPUNOUT.IE

SpunOut.ie is Ireland's youth information website created by young people. It provides young people with information they need to live active, happy and healthy lives.

BARNARDOS CHILDREN'S BEREAVEMENT SERVICE

Offers support to young people in relation to bereavement.

Helpline: 01 4732110

SUICIDE OR SURVIVE

Suicide or Survive provide services and supports aimed at suicide prevention.

Tel: 1890 577 577

NATIONAL OFFICE FOR SUICIDE PREVENTION

National Office for Suicide Prevention supports implementation of Ireland's suicide prevention strategy and provides a national database of mental health services.

YOURMENTALHEALTH.IE

YourMentalHealth.ie is a place to learn about mental health in Ireland, and how to support yourself and the people you love.

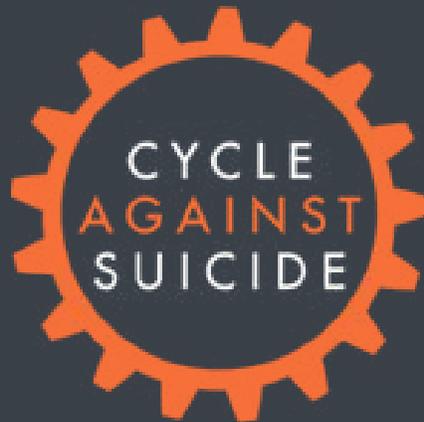
RAINBOWS IRELAND

Rainbows is a dedicated free service for children and young people. The Rainbows programme supports children and young people affected by loss because of bereavement, separation or divorce.

The service is available in local communities throughout Ireland.

Email: ask@rainbowsireland.com or Tel: **01 4734175**

It's OK not to feel OK, and
it's absolutely OK to ask
for help.



Cycle Against Suicide
www.cycleagainstsucide.com