

# GRANDPARENT



# Mental Health



## What is mental health?



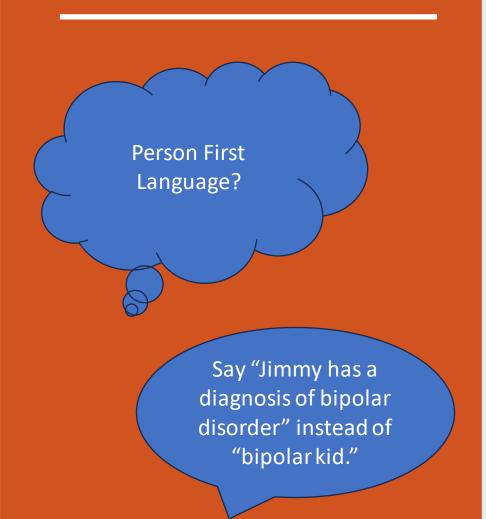
Adapted from: Erika's Lighthouse, 2004. *Everyone Has Mental Health,* Family Workbook Series on Mental Health & Depression (. https://www.erikaslighthouse.org/)



# Let's talk about it

- Mental health is about our feelings, thinking, emotions and moods.
- Mental health is important for a happy, healthy and productive life.
- Just like we brush our teeth everyday, we need to make sure our brains have the tools we need to be mentally healthy.
- Looking after our mental health is just as important as looking after our physical health.

## How do we talk about it?

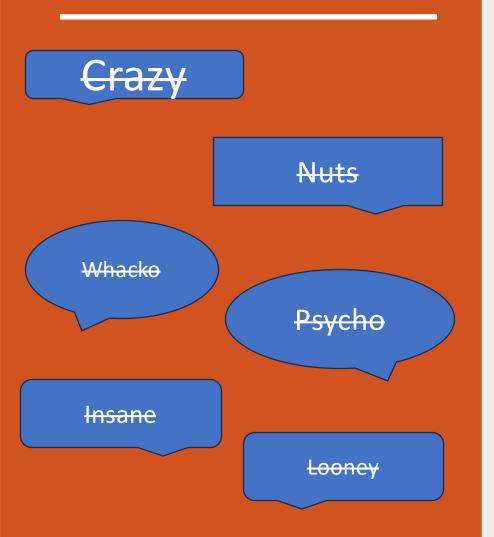


Reference: Substance Abuse and Mental Health Services Administration (SAMHSA). 2004. *School Materials for a Mental Health Friendly Classroom: Training Package.* Rockville, MD: Vanguard Communications, Inc., SAMHSA and the US Department of Health and Human Services.

# Be conscious of labels

- It is important to know how to talk about mental health.
- Be mindful regarding how terms are used.
- When addressing or talking to a child who is diagnosed with a mental health diagnosis, remember this is a part of them but does not define them.
- When discussing mental health use "person first language"

## How do we talk about it?



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# **Talking Terminology**

- Why does person first language matter?
  - This helps humanize the issue by placing the focus on the person living with a health condition
  - It helps to dispel generalizations, assumptions, and stereotypes
  - Using the diagnosis to label someone such as "Jimmy the bipolar kid" dehumanizes them and encourages avoidance and ostracization

# **Common diagnoses**

- Mood Disorders:
  - Major depressive disorder: involves a pervasive sense of sadness and/or loss of interest or pleasure in most activities.
  - **Dysthymic disorder**: involves a chronic disturbance of mood in which an student feels little satisfaction with activities of life most of the time.
  - Bipolar disorder: is a type of mood disorder characterized by recurrent episodes of depression and mania. These episodes involve extreme changes in mood, energy, and behavior.

#### **Anxiety Disorders** :

## Obsessive Compulsive Disorder

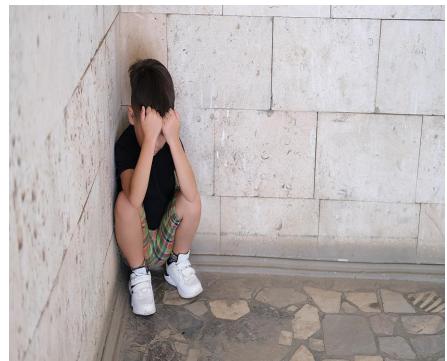
(OCD): Obsessive-compulsive disorder
(OCD) features a pattern of
unreasonable thoughts and fears
(obsessions) that lead you to do
repetitive behaviors (compulsions).
•Post-traumatic stress disorder
(PTSD): PTSD is anxiety that can occur
in response to a threatening event
that was witnessed or experienced.

Reference: Substance Abuse and Mental Health Services Administration (SAMHSA). 2004. School Materials for a Mental Health Friendly Classroom: Training Package. Rockville, MD: Vanguard Communications, Inc., SAMHSA and the US Department of Health and Human Services.

## **Common diagnoses**

#### Disruptive Behavior Disorders:

•Conduct disorder: Conduct disorder is a disruptive behavior disorder in which youth diagnosed with conduct disorder outwardly express their feelings about others through destructive behaviors that harm property, people, or animals. Oppositional Defiant Disorder: Oppositional defiant disorder (ODD) is often manifested as a pattern of disobedient, hostile, and defiant behavior directed toward authority figures.



Reference: Substance Abuse and Mental Health Services Administration (SAMHSA). 2004. School Materials for a Mental Health Friendly Classroom: Training Package. Rockville, MD: Vanguard Communications, Inc., SAMHSA and the US Department of Health and Human Services.

## **Common diagnoses**

#### Neurodevelopmental Disorders:

•Attention Deficit Hyperactivity Disorder (ADHD): ADHD is a disorder of developmentally inappropriate levels of inattention or hyperactivity-impulsivity that interfere with the functioning of a young child and his or her family. Although young children have higher levels of inattention, hyperactivity, and impulsivity than older children, some young children present with extremes of these patterns even at early ages.

•There are three main types of ADHD:

- Predominantly inattentive presentation.
- Predominantly

hyperactive/impulsive presentation

• Combined presentation



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## What gets in the way of mental health?



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#### Stress:

- Often, what stands in the way of good mental health is unmanaged stress.
   Stress is a normal part of life, it helps motivate us to get things done and do our best.
- BUT too much stress can cause problems for our bodies and our minds.
- Our children experience real stress usually caused by academics, family and social pressures.

## **Risk Factors for increased stress**



#### • Risk Factors for increased stress:

• Challenges that are out of our control that increase stress

Family

#### Academic



- Trauma or neglect
- Social rejection
- Health/mental illness
- Family conflict
- It Tragedy or loss
- Poverty
- Major transitions or change
- Learning disabilities

#### Social



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## What about trauma?



Reference: Child Welfare Committee, National Child Traumatic Stress Network. (2008). Child welfare trauma training toolkit: Comprehensive guide (2nd ed.). Los Angeles, CA & Durham, NC: National Center for Child Traumatic Stress.

#### • What is trauma and traumatic stress?:

- A dangerous event that threatens a person's life or well-being
- Traumatic events cause feelings of helplessness, confusion, and overwhelm the child's ability to cope
- Traumatic events may impact a child's:
  - Ability to trust others
  - Sense of personal safety
  - Effectiveness in navigating life changes

## Resilience



# What does it mean to be resilient?

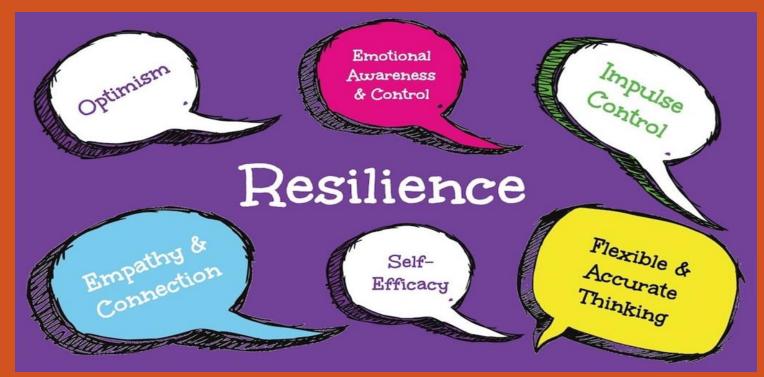
- Bouncing back from difficulties and challenges in life
- Managing feelings and stressful events without harming others or ourselves physically or emotionally
- Skill that we can teach and model to our children
- Overcoming obstacles is how a child grows strong. This is called Resilience - and it matters.

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## **Resiliency Skills**

- The key is balance, the more risk factors a child has, the more protective factors are needed to be resilient.
- The good news is there is a lot we can do to build protective factors to help our children become resilient



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## **Building Resilience**

- Teach them how to "reframe" a disappointing moment or experience. The goal is to acknowledge the disappointing thing and then turn it into something positive.
  - Example-Your child's baseball game gets canceled.
  - You can say "I know you were excited to play and it's disappointing that it was canceled because of the rain. Why don't we think of a different activity to do instead"?





## **Building Resilience**

• Embed choices into your child's day-to-day activities. This allows children to have a feeling of control and develops self-efficacy.





 Establish routines. Children thrive with predictability and routines provide predictability.



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## **Building Resilience**

- Allow your kids to express all emotions so that they feel comfortable asking for help in difficult times.
- Encourage a growth mindset
  - Children can become easily discouraged when something does not immediately go their way or they do not immediately excel at an activity.
  - There is power in the word "yet". When your child becomes discouraged that they "aren't good at something and never will be" you can say "You aren't good at algebra, yet. With more practice, you will get better".





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## **Protective Factors**



- Protective Factors are attributes which help reduce the likelihood of negative outcomes and improve resilience.
- They include:
  - Mastery of academic skills (math, reading, writing)
  - Following the rules for behavior at home, school, and public places
  - Ability to make and retain positive friendships
  - Consistent discipline that is language-based rather than physically based

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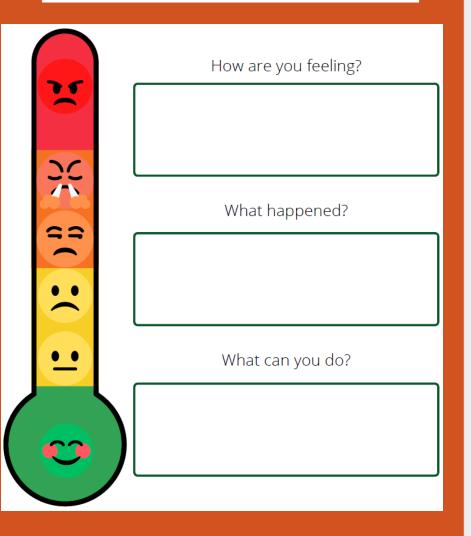
## **Protective Factors**

- When looking at the context for protective factors, the following must be considered:
  - Relationships and opportunities to be involved in both the classroom and broader school setting and recognized for the skills and contributions made are important
  - Relationships with youth need to be genuine, authentic, and ongoing
  - Opportunities to be involved and contribute must match the youth's actual skill set
  - To fail at an opportunity due to insufficient skill sets the youth up for discouragement, frustration, and disillusionment



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## **Feelings Thermometer**



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# **Identifying emotions**

- Instructions:
  - Print out thermometer
  - Sit with your child and talk about how they are feeling
  - Explore different situations and how they make them feel
  - The feeling thermometer is a tool that helps us measure the intensity of our emotions. As we climb in temperature, from green to yellow to red, our feelings become more uncomfortable
  - Use this tool to explore your child's emotions and talk about how to interrupt emotions that are escalating.

#### Listen to them and Trust your Instincts

- Children in Elementary School:
  - Feel big feelings that they cannot always recognize or verbalize
  - May get bullied.
  - Trust your gut instincts if you suspect there may be a problem or suspect your child is struggling, even if they can't express that to you - something may be out of balance and needs your attention.
- Children in Middle School:
  - Will start to pull towards their peers more and less their family
  - Their rapidly growing bodies may cause them more stress and anxiety
  - Will have hormone and mood changes
  - Watch for changes in behavior, thoughts, or emotions that interfere with or impact their day-to-day living and functioning



## Transitioning to adolescence

- Adolescents in High School:
  - Childhood and adolescent mental health struggles are common.
  - These struggles can be serious and hard to see; but can be treated.
  - There is hope and you are not alone.
- Warning signs of depression
  - Feeling sad or having a depressed mood
  - Loss of interest or pleasure in activities once enjoyed
  - Changes in appetite weight loss or gain unrelated to dieting





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#### Transitioning to adolescence

- The key is understand what is normal at different developmental stages and what is normal for a particular kid and their personality and temperament.
- Irritability Teens are good at making people not want to be around them.
- Self-defeating attitude Hearing them say things like "I'm not good enough, smart enough, good looking enough" etc.
- **Bizarre sleep patterns** More time in bed, less time sleeping (isolating).

## Who is at higher risk for depression & suicide?

- Between 15 20% of youth will experience at least one depressive episode before they reach adulthood.
- Before age 15, major depression occurs about as frequently in boys as girls; after age 15, twice as many girls experience it.
- Girls are more likely than boys to attempt suicide but attempts by boys more frequently result in death.



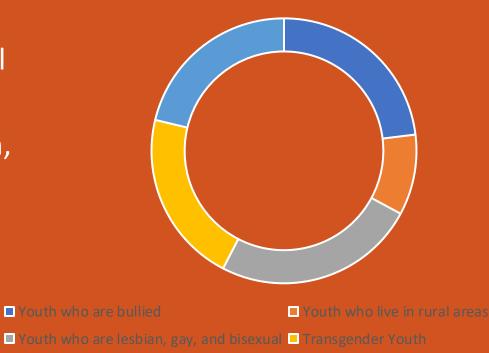
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## Who is at higher risk for depression & suicide?

- Youth who are Bullied
- Youth who live in rural areas
- Youth who are lesbian, gay and bisexual
- Transgender Youth
- Indigenous Youth

#### **Higher Risk of Suicide and Depression**



Indigenous Youth

Adapted from: Erika's Lighthouse, 2004. Everyone Has Mental Health, Family Workbook Series on Mental Health & Depression (. https://www.erikaslighthouse.org/)



\*Above overall youth suicide rate of 9%

• Talk to your child

- Ask how they are doing and show interest
- I notice\_\_\_\_\_
  - I care about you.
- It's not your fault you are having a hard time
- We will work together to find you some help.
- You deserve to feel better
- Do you feel like you want to someone else about your problem?

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#### • Foster a supportive environment

- Promote good mental health strategies
  - Healthy meals & nutrition
  - Practice mindfulness
  - Encourage physical activity/exercise
  - Try to ensure good sleep hygiene (no screens 30 minutes before bed, getting 8 hours of sleep a night)

"Just because they never listen, doesn't mean they aren't watching."

#### • Be a Trusted Adult

- Someone who is a good listener, offers advice, shows empathy, or won't make you feel silly for coming to them someone they feel a connection with.
- Listen and validate how hard it to confide in someone or to ask for help.
- And then, help the young person get the support they deserve.

#### Who is a trusted adult?



Religious Leader Coach/Instructor Mental Health Professional

> School Counselor Social Worker Teacher Coach

Parent Guardian Grandparent Family Member

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Parents and family members are usually the first to notice if a child has problems with emotions or behavior. Your observations with those of teachers and other caregivers may lead you to seek help for your child. If you suspect a problem or have questions, contact a mental health professional.

Talk to a mental health professional

- "I think there is a problem because \_
- "I heard my child say \_\_\_\_\_."
- "I saw my child do \_\_\_\_\_."
- "My child is feeling \_\_\_\_\_."
- "This is not my child's usual behavior."
- "I've seen this change in my child's behavior over the past (days/weeks)."

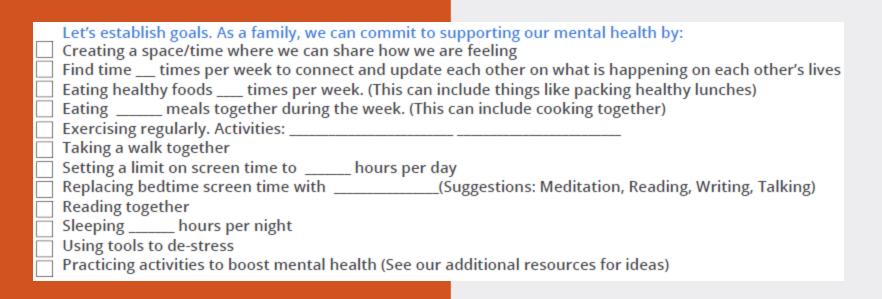
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## Make a Good Mental Health Plan

## Erika's Lighthouse Good Mental Health Plan

The World Health Organization (WHO) defines mental health as a "state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community". You can make a positive impact on the mental health of everyone in your household by fostering an environment that promotes well-being. Encourage mental wellness and reduce stress by involving the whole family in these activities.





## Make a Good Mental Health Plan

#### As a parent/caregiver, I can commit to:

- Communicating and sharing about highs and lows going on in my life (Things that happen at work, social life, family)
- Making sure I have healthy food choices
- Exercising \_\_\_\_\_times a week
- Sleeping \_\_\_\_\_ hours per night
- Limiting screen time to \_\_\_\_\_hours per day
- Practicing activities to release stress. For example meditation, a hobby, etc.
- Sharing with my family what I do to take care of my mental health

#### As a child and member of the family, I can commit to:

- Communicating and sharing about highs and lows going going on in my life (Things that happen in school, online, with friends, with family)
- Exercising \_\_\_\_\_ times per week by doing: \_\_\_\_\_
- Eating healthy foods
- Trying new healthy foods
- Practicing activities to release stress. For example meditation, a hobby, etc.
- Sleeping \_\_\_\_\_ hours per night



## **Conversation Guide: Tips for Parents**

- Don't be afraid to start a conversation anytime (in the car, during breakfast, after dinner, walking to the park)
- Practice these types of conversations often
- Listen more than you talk
- Don't be afraid to ask questions



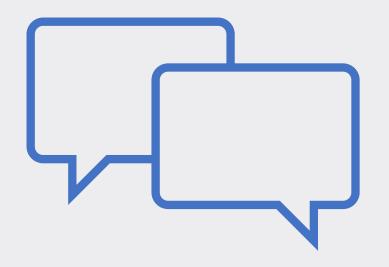
- Show love, support, and empathy
- Be ready to listen without judgement (the more judgement the less children will feel safe in the conversation)
- If the conversation develops further and you feel concerned, you can utilize Erika's Lighthouse "intervention language" resource to communicate

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## **Conversation Guide: Talking to a child at any age**

- What was the most special part of your day?
- What was the most difficult part of your day?
- What made you the happiest this week?
- What brought you feelings of worry?

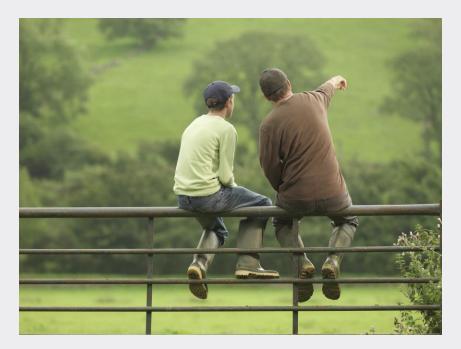


- How does your body feel today?
- What are things you recognize that make you feel better when you are sad/upset?
- What is your favorite part of being you?
- Can I help you with anything?
- What can I do to support you/make you feel better?
- Do you ever feel like you don't matter?
- What are you most proud of?



## **Conversation Guide: Addressing Teens**

- What makes you the most excited in your life right now?
- What is something causing you stress or anxiety?
- Tell me about your friends and what you enjoy most about them
- What do you see yourself doing in the future?



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- Do you have people you would feel comfortable reaching out to if you needed help?
- Have you ever thought about self-harm? (if yes) What led you there?
- Have you ever thought about suicide?
- Have any of your friends mentioned thinking about suicide?
- Do you need help with how you are feeling?

## Sharing information with family and caregivers

#### Choose the right time and place

- It is crucial that you respect your child's comfort level on when they are ready to talk to others
- Consider your child's preferences. Do they want to share the information or do they want you as a
- parent/caregiver to share it for them? You can say: "Hey everyone, can we all sit down together for a few minutes? We want to talk to you about something important"

#### Define the diagnosis

- You might need to have some additional educational resources for your family to understand your child's diagnosis
- You can say: "I've been diagnosed with depression. Depression is a common yet serious mental health disorder that affects how we feel, think, and act. It is treatable and can happen to anyone."

## 3

#### Describe what you are going through

- Describee your child's experience and how it has effected them, or have them share themselves
- You can say: "Depression can bring feelings of sadness and loss of interest in activities you once enjoyed. It can affect your ability to function at school or work. For example (child's name) has had a difficult time with (describe personal experiences here)"
- *"It's a feeling of sadness that will not go away. It can look like sleeping too much or not sleeping at all, not being able to, or wanting to join or enjoy activities."*

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## Sharing information with family and caregivers

#### Talk about treatment

- If comfortable, share what your child's treatment is so that they can understand what is happening in the home
- You can say: "I'm working with my doctor to find the best treatment plan for me. I'm currently (taking medication/seeing a therapist/doing self-care activities), and I'm hopeful that I'll be able to manage my symptoms."

#### Share how they can help in this process

- Let your family members know how they can support you. Be honest and clear about your needs and
- feelings. They might have suggestions or ideas, share your comfort in listening to their input
- You can say: "I would really appreciate your support during this time. It would mean a lot to me if you could (fill in your needs). I'm feeling (describe your feelings), but I'm hopeful that with your support, I can get through this."



## Sharing information with young siblings

#### Choose the right time and place

- It is crucial that you respect your child's comfort level on when they are ready to talk to their siblings
- Consider your child's preferences. Do they want to share the information or do they want you as a parent/caregiver to share it for them?
- Consider the language you will use with younger siblings. The goal is for them to understand as clearly as possible what is happening in their siblings' lives
- You can say: "Hey (sibling name) can we all sit down together for a few minutes? (Child's name) wants to
- talk to you about something important." "I've been feeling really overwhelmed and I wanted to share this with you. I'm struggling with my mental health and I know this might be a bit confusing or scary, but I think it's important that we talk about it so you can understand what's going on"

## 2

#### **Explain the diagnosis**

- Use simple and age-appropriate language
- You can say: "You have felt sad before, right? Normally, we find things to make us happy again. Like when we left the playground, you were crying, but then we went home to have cookies and you were smiling again. For some people, this feeling of being sad never goes away, and it's called depression" "I have been diagnosed with depression. This means that sometimes I feel very sad, anxious, or overwhelmed, and I might need some extra help and support to feel better."



## Sharing information with young siblings

#### Describe how you are feeling

- Use age-appropriate language that young children can relate to
- You can say: "Lots of people have depression. It feels like a dark rainy cloud is following you everywhere you go all the time. This is why your brother/sister sometimes may not want to talk, play, get out of their room, or seem upset"

#### Talk about treatment

- Talk about how you're getting help
- You can say: "Just like there are doctors for when you get hurt or sick with there are doctors that help with how we feel" "I'm working with a therapist and/or taking medication to help manage my mental health. I'm also doing things like exercising, eating healthy, and getting enough sleep to take care of myself

#### Share how they can be supportive

- Be open to questions and encourage siblings to talk about what they don't understand
- You can say: "If you have any questions or concerns, please feel free to ask me. I want you to know that this is not your fault, and you don't have to do anything special to make me feel better. Just being here for me is enough."



## Sharing information with older siblings

#### Choose the right time and place

- It is crucial that you respect your child's comfort level on when they are ready to talk to others
- Consider your child's preferences. Do they want to share the information or do they want you as a parent/caregiver to share it for them?

#### Define the diagnosis

- At this age, it is likely that your child has heard about mental health disorders
- You can say: "Depression is a mental health disorder that affects a person's mood, thinking, and behavior. It can happen to anyone, anywhere, and it's not the person's fault. There isn't one reason why people have depression. It does get better and there are treatments and support available"
- "It's a feeling of sadness that will not go away. It can look like sleeping too much or not sleeping at all, not being able to, or wanting to join or enjoy activities. I can also look like not eating enough or overeating. It feels like losing joy in something you used to enjoy and love"

#### Describe what you are going through

- Be honest and open about your symptoms and how they affect your daily life
- You can say: "It's been difficult to deal with depression, and I've been struggling with (describe your
- experience]" "Depression feels like you are not yourself. It feels like you are alone even when you are surrounded with people. It is a feeling you have every day. (Add other ways you feel you can describe your depression"

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## Sharing information with older siblings

#### Talk about treatment

- If comfortable, share what your child's treatment is so that they can understand what is happening in the home.
- You can say: "There are mental health professionals that help with depression. I'm working with a therapist and/or taking medication to help manage my mental health. I'm also doing things like exercising, eating healthy, and getting enough sleep to take care of myself"

#### Share how they can help

- Ask your siblings for their support in your journey towards recovery. Be specific about the type of support you need from them, whether it's emotional support, help with daily tasks, or simply being there to talk to when you need it.
- Be open to questions and encourage siblings to talk about what they don't understand
- You can say: "If you have any questions or concerns, please feel free to ask me. I want you to know that this is not your fault and your support means a lot to me

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## **Take Care of Yourself**

- Coping strategies
  - Do something you love
  - Take 10 deep breaths and walk into another room
  - Listen to music
  - Journaling
  - Practice other mindfulness activities

## You can't be available to your child if you don't take care of yourself.

- Self-care
  - Practice a healthy lifestyle
  - Practice coping skills
  - Access support
- Remember
  - Mental health is a balance: the ability to manage stress, and deal with our emotions appropriately
  - Small improvements in nutrition, sleep, exercise, and coping skills can help us better manage stress and achieve good mental health



### Resources

#### Individual and Family Therapy

Find individual and family counseling resources at 211

https://211eok.org/211oklahoma/



For a mental health crisis Call the suicide and crisis helpline:

988

### OSDH Grandparents Raising Grandchildren webpage:

Grandparents raising grandchildren support group

Sunbeam Family Services (405) 605-7090

https://sunbeamfamilyservices.org/grg/