

Mental Health Q&A

Q. Why do people cut? Who do so many kids cut? Why do people say cutting relieves?

A. People have many different reasons for why they cut. Similarly, there could be different things going on for each individual who decides to cut. More often, cutting is a way to ‘feel something’ for individuals who may be feeling ‘emotionally numb.’ For others, cutting may be a way to punish (self-harm) oneself for feeling guilty or bad about something. Some people who are experiencing some kind of emotional difficulty or ‘bad’ feeling (ex. Depression) may cut to displace or re-direct that pain. The idea here is that they don’t want to feel internal pain anymore so they create external pain. Cutting releases endorphins that can create a ‘relieving’ sensation. Therefore, when strong feelings and emotions are not able to be expressed in healthy ways, they build up and cutting may be a strategy to relieve this tension. The brain then makes a connection between this false sense of relief from bad feelings, which can lead to compulsive cutting.

Q. What do I do if I see someone with cuts on them? What do you do if we know someone who cuts but aren’t really friends with them?

A. If you are concerned about someone self-harming, the first step would be to try to talk to them. For many people who cut, the first step of telling someone can be extremely difficult. However, many cutters report that after they have been able to open up to someone about it, they feel better and are provided with a healthier sense of relief. Learning about self-injury yourself before talking to someone can help you better understand what they’re going through, and can make you more equipped to help. Always try to encourage the individual to get help. If the person doesn’t want to talk, and you are still concerned or believe the self-harming behavior is getting worse, then tell a responsible adult that you can trust (ex. Teacher, counselor, parents, etc.).

Q. Is it normal to cut myself? What provokes the thought of cutting if you haven’t seen others do it?

A. Cutting is a type of self-harming behavior that people resort to when they are unable to manage intense or ‘bad’ emotions. It is quite common for adolescents to engage in self-harming behavior in an attempt to cope. However, cutting is not a recommended coping strategy, as it only provides short-term relief for an underlying problem. It can also be dangerous, and can lead to compulsive cutting. People may want to try cutting because they have heard of other people doing it, or they may feel that they should punish themselves physically for feeling bad or guilty about something. They may also desire to re-direct emotional pain (don’t want to feel internal pain, so they hurt themselves externally). Still for others, they may try cutting because they feel ‘emotionally numb’ and want to feel ‘something.’

Q. How can you tell someone has a mental illness without asking and offending them? How do you know if you have a mental health problem? Is it possible to have symptoms of mental illness but not have it?

A. It can be quite difficult to distinguish between whether or not someone has a mental health illness or whether they are just going through a hard time and are experiencing mental health symptoms. It is common for some people to ‘self-diagnose’ or to diagnose others without really knowing for sure what that individual is experiencing. For example, if a family member or pet passes away, and someone is feeling depressed about it, it doesn’t necessarily mean they have ‘depression’ in the form of a mental

health illness. A general rule of thumb when determining if someone has a mental health illness, is if the problem has impacted their lives negatively for 6 months or longer (please note, this is a generalization and mental health illnesses can develop sooner in some individuals). Specially trained professionals refer to the Diagnostic and Statistical Manual of Mental Health Disorders – 4th Edition (DSM-IV) to help them make a proper diagnosis, and to determine treatment.

If you think someone may be struggling with a mental health illness, try talking to them in a gentle way about the *behavior* you've been observing, and ask them if they are okay and/or want to talk about it. Refrain from *diagnosing* them if possible and/or using terms like 'depression,' 'anxious,' 'bipolar,' etc. Instead, try using words like 'sad,' 'worried,' etc. For example, with someone who is acting 'depressed' you could try saying: 'Hey there. I've been noticing that you seem to be sad lately. Are you okay? Is there anything you would like to talk about?'

It is sometimes difficult for an individual to notice whether or not they may be experiencing a mental health problem. If you're concerned, consult a mental health worker or counselor. As mentioned before, someone may be experiencing symptoms of a mental health illness rather than a mental health illness itself. Regardless, if something is bothering you, it's always encouraged to talk to someone about it.

Q. I feel like I'm going to throw up in the morning and I can't eat breakfast. Why is that and how can I prevent it?

A. There could be different factors at play here. It could be that there is something physically wrong, and if this continues I would strongly encourage you to see a doctor. There could also be underlying factors such as stress or anxiety that are contributing. In order to prevent this from happening, you would have to talk to a doctor to determine what it is you are experiencing first. He/she could then recommend ways to manage and/or prevent it. If the doctor feels you are experiencing mental health symptoms, he/she may make a referral to a mental health worker or counselor. If you feel this morning sickness is directly related to mental health, talk to a counselor who can then work with you to figure out the root cause.

Q. Can you tell me why some people are so violent?

A. There are various reasons why some people are more violent than others. First of all, violence is in our human nature – human beings are naturally aggressive and violent to each other. In fact, unlike many other species, humans are the main predators of other humans.

Secondly, if violence is around us, we tend to become desensitized to it. For example, people who live in abusive homes (where abuse is either witnessed or received) may in turn be more violent than those in non-abusive homes.

What is most true about why some people are more violent than others however is the fact that violence emerges when several different factors are present. Violence emerges for many different reasons: influences of drugs and/or alcohol, impulsivity, hate, revenge, socio-economic status, feeling disconnected from others, and severe mental illnesses are some examples. The more of these factors that are present in one's life, the more likely they will be more violent than others.

Having said that, it is a myth that people with mental health issues are more violent than those without. In fact, research shows that people with mental illnesses are 2-4 times more likely to be victims of violence than any other group. When we say 'severe mental illness' we are referring to a very small group of people with mental illnesses – those with severe and sometimes untreated symptoms. This group may have an increased rate of violence that is usually provoked by feelings of being threatened or manipulated.

In sum, the presence of many different factors is the most reliable indicator of violence in an individual, regardless of whether or not they have a mental illness.

Q. What is depression?

A. Depression is a medical illness that causes a persistent feeling of sadness and loss of interest.

Q. What causes depression?

A. There are many causes of depression. Some people experience depression during a serious medical illness. Others may have depression with life changes such as a move or the death of a loved one. Still others have a family history of depression. However, when someone suffers with persistent feelings of sadness and loss of interest and they seek help they can often determine the cause together with their counsellor or therapist.

Q. What are some reasons people get depressed?

A. There are several factors that may increase the chance of depression. Some of them are:

Abuse. Past physical, sexual, or emotional abuse can cause depression later in life.

Certain medications. For example, some drugs used to treat high blood pressure, such as beta-blockers or reserpine, can increase your risk of depression.

Conflict. Depression may result from personal conflicts or disputes with family members or friends.

Death or a loss. Sadness or grief from the death or loss of a loved one, though natural, can also increase the risk of depression.

Genetics. A family history of depression may increase the risk. It's thought that depression is passed genetically from one generation to the next. The exact way this happens, though, is not known.

Major events. Even good events such as starting a new job, graduating, or getting married can lead to depression. So can moving, losing a job or income, getting divorced, or retiring.

Other personal problems. Problems such as social isolation due to other mental illnesses or being cast out of a family or social group can lead to depression.

Serious illnesses. Sometimes depression co-exists with a major illness or is a reaction to the illness.

Substance abuse. Nearly 30% of people with substance abuse problems also have major or clinical depression.

Q. What percent of people (in Canada) are depressed?

A. Statistics show that 11% of males and 16% of females will experience major depression in their lifetime. Statistics also show that at any one time between 5-10% of the population have depression.

Q. How does depression affect you? What are the symptoms of depression?

A. Depression can affect the way you think and behave and can have physical effects as well. Some of the signs you should be aware of are:

- Feelings of despair and hopelessness
- Detachment from life and the people around you
- Always feeling tired or having no energy
- Crying for no apparent reason
- Not being able to concentrate or make decisions
- Thoughts of suicide
- A loss of appetite or a change in sleep patterns
- Headaches or stomach upsets that occur frequently.

Q. How do you help a friend with depression?

A. The best way to support a friend with depression is to:

1. Listen-hear them without judgment
2. Be there-let them know you are there for them and understand that they are struggling
3. Be patient
4. Advise them to seek professional help
5. Talk to a counselor about your friend; outline your concerns and let them help you determine the next steps.

If you suspect a friend is depressed it's okay to ask. It's always okay to acknowledge things you notice; sometimes it can be a relief to know that someone sees that they are struggling.

Q. I'm depressed but I don't cut. Should I still get help?

A. Yes, you should always seek help when you are feeling low. It is often helpful to talk your situation through with a counselor or therapist. Being heard is important and telling someone about how you are feeling is a great first step on your journey to better health.

Q. What defines anxiety?

A. Anxiety is a natural human reaction that involves both the mind and body and serves as an important basic survival function. It is the 'alarm system' that is activated when a person perceives danger or a threat.

Once that danger is perceived the person gets physical sensations of anxiety like a faster heartbeat, faster breathing, tense muscles, sweaty palms, queasy stomach and trembling hands and legs. These physical sensations are the body getting ready to fight or flee from danger and are useful when the danger is real. When the brain can assess that there is not in fact any real threat then those sensations will go away.

It is normal to worry and feel anxious for all sorts of reasons and know that those sensations will come and go. It is when those worries become overwhelming and you feel like they are running your life that you may feel concerned. In other words, those physical sensations are not turning off because the brain is unable to assess that there is no real danger. It is like having a super sensitive smoke alarm in your brain. For example, you spend an excessive amount of time worrying and feeling nervous, you are losing a lot of sleep because of your anxious feelings, when you find it hard to think of anything else, that is when you may need to reach out and talk with a trusted adult and seek some professional help.

Q. Can anxiety be minor?

A. Yes. Anxiety sensations can be minor and in fact can help a person by making him/her more alert. For example a person might experience a sense of uneasiness or nervousness before a big exam or presentation.

Also, it is very normal to have minor feelings of anxiety for all sorts of reasons, like going to a party with people you don't know very well, starting a new sport, your parent is late getting home and you have not heard from them, you like someone and they walk by you in the hall.

Q. Can anxiety go away forever?

A. Not really and nor would we want it to. Again, remembering that anxiety is our body's alarm system and will help us in times of threat or danger. Also, a little bit of anxiety helps by making us more alert when we need it.

Q. What's the best way to relieve anxiety?

A. In general, keeping our bodies healthy overall will help in keeping anxiety at manageable levels. For example, getting regular exercise, eating healthy and getting enough sleep. If you are experiencing anxiety it can help to talk about your feelings with a trusted person, go for a walk, take a bath, listen to music. Again, if you are worried that the anxious and nervous feelings are taking over your life that is when to reach out for professional help.

Q. Can Seasonal Affective Disorder (SAD) be treated (besides light therapy)?

A. There are several ways SAD can be treated and light therapy is a common one. Other methods of treatment include talk therapy and medication. That route would need to be closely monitored by a doctor and/or psychologist because everyone is individual with different brain chemistry and would be affected differently by medication.

Also, as with any mental illness what can help is keeping healthy through good nutrition, regular exercise (especially outdoors) and enough sleep. As well, spending time with loved ones can be very beneficial.

Q. How many teens die (in Canada) each year with mental illness?

A. That is probably difficult to give a very accurate answer to. Statistics Canada reports that in the year

2009 (their latest stats) 479 males and females died from suicide that were between the ages of 15 -24. Not all suicides are reported so this statistic may be under the actual number.

It is important to note however, that a great majority of people who suffer with a mental illness do not take their life, however, it is estimated that about 90% of people who complete suicide suffer from a mental illness.

Q. Why do people feel so lonely?

A. Loneliness is a universal human emotion with no single cause. It is a state of mind causing people to feel empty, alone and unwanted.

There are many reasons a person may feel lonely. There could be a genetic component, a person could be physically isolated by where they live, or a person may have just moved, there could be a recent divorce or death or a person may have low self-esteem which may contribute to them feeling like they are not worthy of being liked.

Loneliness can have negative health effects on a person so it is important to seek support if you are feeling an overwhelming sense of loneliness. It can really help to try and develop quality relationships with other people who have similar interests. It may be scary but try and reach out.

Q. Are mental illnesses hereditary? And, why do mental illnesses occur?

A. The brain and the nervous system is so complex that it is impossible to identify one reason why mental illness occurs in a person.

There are many theories and some or all the reasons may contribute to why a person has a mental illness. Genetics or inherited traits can play a role, also living in a difficult family or social environment, as well trauma can impact how our brain responds to the environment and contribute to mental illness.

Q. What do people with bipolar think like? What is bipolar?

A. Bipolar is a mood disorder that causes people to feel intense, prolonged emotions that negatively affect their mental well being, physical health, relationships and behavior. In addition to feelings of depression, someone with bipolar disorder also has episodes of mania. Symptoms of mania may include extreme optimism, euphoria and feelings of grandeur; rapid racing thoughts and hyperactivity; a decreased need for sleep, increased irritability, impulsiveness, and possibly reckless behavior. We can all have brief episodes of “highs and lows”, but we generally do not experience extreme, extended swings in our emotions. If you suspect that you, or someone you know, has bipolar seek advice from a trusted adult or mental health professional in your community.

Q. Who can you talk to if you have mental health problems? What is the best way to find out if you have a mental disorder?

A. There are many people around you that can help you to find the help that you need. Here are just a few that should be able to help:

- A trusted adult – this could be a parent, an uncle/aunt, a friend of the family or any adult that you feel comfortable sharing this information with
- A teacher
- A counsellor – there are counsellors in the schools but also in the community that are free and easy to access. In Vernon there is North Okanagan Youth and Family Services Society, Family Resource Centre, and Child and Youth Mental Health
- A doctor
- A mental health professional – In Vernon this would be Child and Youth Mental Health or Interior Health (Mental Health/ Addictions).

Q. What is the most common thought for people with mental health problems?

A. The most common thought for people with mental health problems will depend on the mental health disorder being experienced. There are a wide range of mental health disorders that are classified into categories in a manual called the Diagnostic and Statistical Manual (DSM). It is here you can learn more about the various disorders and the thoughts that may be common within that disorder.

Q. How Do I get my mom to stop stressing about stuff?

A. Moms tend to worry and stress. It is this worry and stress that can be a result of them looking out for our safety. This ultimately shows their love and caring nature for your well being and the well being of others around you. If you feel that the stress is at levels that are unhealthy, and you are concerned for her well being, try sharing this with her and make clear that you are concerned about her health. If you are uncomfortable sharing your concern have someone you both know and trust communicate your concerns. Discuss strategies or seek professional services to help devise some strategies that may be able to help reduce her stress and increases her ability to cope with life’s stressful situations. Making her aware of your concern is important to making her aware of her reactions, and the impact that may be having on her health. In order to continue to being a good mom she needs to be looking after her own health as well, not just the health of the people around her.

Q. Does having a panic attack mean you have a mental disability? Or disorder?

A. The term “panic attack” is commonly misused and many people experiencing fear or nervous sensations report having a panic attack. This is a reaction of the nervous system that has developed for our survival and alerts us to situations that deserve our attention which can be a good thing. Here is a list of signs that you may be having a panic attack:

- I feel like something terrible is going to happen
- I’m having trouble catching my breath
- My heart is pounding
- My body/hands are shaking
- I’m breaking into a sweat

- I feel light headed and dizzy
- I have goose bumps or chills
- I feel tingling in my hands and feet
- I feel disconnected from reality
- I feel nausea

It is important to know that having a panic attack does not mean you have a panic disorder. One in three people will experience a panic attack in their lifetime and most will not develop a panic disorder. If you are having panic attacks that are coming unexpectedly and/or frequently – such as several a day, a week, or a month, share this with a trusted adult or a mental health professional in your community to find out more about what you might be experiencing.

Q. How do you tell somebody that you are gay?

A. Telling somebody that you are gay can be a scary thing. How will they react? What will they say? What will they do? The answers to these questions will depend on the individual you are telling. Attitudes are changing. Being gay, lesbian, bi-sexual, transgendered, and/or two spirited, has become more acceptable but it is reality that you may be faced with challenging people and situations when choosing to share this openly. It may be helpful to approach a trusted adult/counsellor/professional to discuss your options and choices, and prepare yourself for some of the reactions that may occur when sharing with others. Love yourself first. Anyone who is worthy of your friendship will accept you for who you are.

References:

www.kidshealth.org

www.ulifeline.org

www.psychology.about.com

www.teacher.scholastic.com

www.cmha.ca

There are lots of resources available for more information. Check out some of the ones listed below.

Anxiety BC www.anxietybc.com

kids health www.kidshealth.org

Kelty mental health www.keltymentalhealth.ca

Here to help www.heretohelp.bc.ca

Force Society www.forcesociety.com