A Toolkit for Educating About Psychosis

Target Audience: Schools, Mental Health and Medical Professionals, Youth and Community





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Fact Sheet

Severe mental illness in adolescents and young adults

The challenge

While the causes of severe mental illness are still not perfectly understood, the scale of the problem – for adolescents and young adults, their families and friends, communities, and society at large – is increasingly clear.

- Approximately 2.5 percent of youth and young adults in America will develop schizophrenia or a severe, psychotic mood disorder, with most cases developing after age 12.
- 75 percent of people who have schizophrenia go on to develop a disability.
- Less than 20 percent of people suffering from schizophrenia are gainfully employed.
- An estimated 12 to 15 percent of people who suffer from a psychotic illness complete suicide, and as many as 75 percent of youths with psychotic level symptoms make an attempt.

For adolescents and young adults suffering from a severe mental illness, the impact can include:

- Lower academic achievement or dropping out of school.
- Behavior problems.
- Substance abuse.
- Reduced job opportunities and/or difficulty performing job tasks.
- Impaired relationships with friends, family, and co-workers.
- Isolation from friends and the broader community.
- An ongoing need for intensive care and frequent hospitalization.

Beyond these challenges, many adolescents and young adults who develop a serious mental illness end up trapped in a cycle that robs their ability to attain a good quality of life, denies them the tools to cope with their illness and places additional burdens on the family and community to provide what care it can.

What can be done:

Funded by the Robert Wood Johnson Foundation, the Early Detection and Intervention for the Prevention of Psychosis Program (EDIPPP) was a research initiative that demonstrated the evidence needed to better meet the mental health needs of adolescents and young adults at risk for severe mental illness.

EDIPPP promoted implementation of effective early detection and intervention methods to minimize the negative impacts of severe mental illness on our adolescents and young adults.





What Is Mental Illness?

Often friends and family are the first to notice symptoms of someone in the early stages of a mental illness. Getting help early is the first step to stopping the progression of mental illness.

What is mental illness?

Mental illness refers to changes in brain functioning that interfere with the person's experience of their world: disrupting their thinking, feeling, moods and ability to relate to others. Psychosis is the most serious form of mental illness and may be prevented if detected early in the pre-illness phase.

What is the pre-illness phase?

The pre-illness phase is a stage before psychosis. This critical phase can be a period of days, weeks or years. Symptoms of psychosis may be quite obvious or hardly noticeable. Imagine how you feel before you get the flu. Often you just don't feel "right". You may sneeze once, feel more tired than usual or have a headache. In the same way, a person may have early symptoms of mental illness, and is "at risk" of getting sick but is not ill yet.

What is psychosis?

Psychotic illnesses include schizophrenia, bipolar disorder and major depression. A person who has a psychotic illness may have delusions, hallucinations, confused thinking and abnormal behavior. These symptoms profoundly affect a person's life. Getting help early can prevent a lifetime of pain and debilitation.

What causes psychosis?

Psychosis can happen to anyone, but it is most likely to happen to people for the first time between the ages of 12 and 25. It is due to changes in brain functioning, leading to a disruption of brain functioning. Some possible factors are:

- Physical illness (autoimmune, head injury, infection before birth)
- Genetic (predisposition in genes)
- Environmental (emotional trauma, social or family stress, early toxic exposure)

Psychosis is not caused by mistakes in parenting.

How common is psychosis?

About 3 percent of the population is at risk for psychosis, making the onset of psychosis more common than many severe, chronic diseases in youth, including Type I diabetes. However, early intervention is showing promising results.





What Are The Early Symptoms of Psychosis?

Some feelings or behaviors listed here might indicate a brief reaction to stressful events. On the other hand, these changes could be early symptoms of a developing mental illness. It is important that the person in question be assessed by a professional, especially if the symptoms last longer than a few weeks, the changes in the person's behavior are sudden, or seem very out of character or bizarre. Early symptoms or new experiences can occur on and off over time.

It is the combination of several symptoms (that are new and/or increasing over time) rather than any one symptom that puts a person at risk.

Feeling "something's not quite right"

- Feeling like your brain is just not working right
- Not able to do school work or one's usual job
- Heightened sensitivity to sights, sounds, smells or touch

Jumbled thoughts and confusion

- Trouble with focus and attention
- Fear that others are putting thoughts in your brain or reading your mind
- Forgetfulness and getting lost
- Bizarre preoccupations or obsessional thoughts
- Having the sense that the world, other people, and/or you aren't real at times

Experiencing fear for no good reason

- Worrying that others are thinking bad thoughts about you
- Thinking others wish to harm you or are watching and following you
- Feeling uneasy around people or suspicious of them

Hearing sounds/voices that are not there

- Feeling like your brain is playing tricks on you
- Intermittently hearing, seeing, smelling, and feeling things that others don't
- Somatic illusions

Declining interest in people, activities and selfcare

- Withdrawal from friends and family
- Loss of motivation and/or energy
- Dramatic changes in sleeping and/or eating habits
- Lack of interest in things you used to enjoy
- Not caring about your appearance

Having trouble communicating

- Losing track of conversations
- Difficulty speaking and/or understanding others
- Increased vagueness or focusing on small details in conversations
- Trouble with reading comprehension and writing

The following symptoms require immediate attention:

- Suicidal or homicidal thoughts •
- Dramatic change in sleep or appetite •
- Hearing voices commanding you to do certain things
- Believing without reason that others are plotting against you
 - Extreme unreasonable resentments or grudges
 - Severely disorganized communication •





Dispel The Myths

Common myths along with helpful facts that prove them wrong!

Myth: Teenagers don't suffer from "real" mental illnesses; they are just moody.

Fact: One in ten children and adolescents suffer from mental illness. Most severe mental illnesses start in the teenage years.

Myth: Talk about suicide is an idle threat that need not be taken seriously.

Fact: Ninety percent or more of all suicide victims have a mental illness and/or a substance abuse problem. For people ages 15-24, suicide is the third leading cause of death.

Myth: Mental health problems are really the result of poor parenting and lack of discipline in the home.

Fact: Mental illnesses are often inherited from one generation to another and generally have little or nothing to do with parenting. They can also be caused by problems during pregnancy or by head trauma.

Myth: Mental illnesses are not real and cannot be treated.

Fact: Mental disorders are diagnosed in the same way as asthma, diabetes and cancer. Treatments of mental illness are effective 60%-80% of the time. This rate meets or exceeds success rates for cutting edge treatment for heart disease.

Myth: We're good people. Mental illness doesn't happen to me and my family.

Fact: One in four Americans will suffer at some point from a mental health problem. These Americans are from ALL backgrounds. There is no way to predict who will develop a mental illness.

Myth: Depression (aka "the blues") is a normal part of life that can be overcome without seeking treatment.

Fact: Major depression is a real, treatable illness that affects 10% of adult Americans every year. It is the leading cause of disability for those between ages 15-44 in the United States.

Myth: Private health insurance routinely does not cover mental health services.

Fact: Well over 90% of companies with health insurance cover some mental health care.

Myth: Stay away from people with mental illness because they're violent.

Fact: Virtually every study shows that persons with mental disorders are no more violent than other Americans, assuming that they don't abuse alcohol or illegal drugs and are receiving treatment. More often, mentally ill people are victims of violence, stigma and discrimination.

Myth: There is no hope for people with mental illness.

Fact: Mental illnesses are successfully treated at a higher rate than many other chronic health conditions, particularly when treated early.

This list was compiled by The National Mental Health Awareness Campaign, an organization dedicated to reducing stigma associated with mental illnesses. Replacing wrong ideas with facts helps young people come out of the darkness of isolation into the light of treatment and wellness.





Early Intervention In Psychosis

Information for schools and communities

By getting help early, a person's chances greatly improve for staying in school, working, maintaining friendships and planning for the future.

How can I tell the difference between the early warning signs for psychosis and other mental health or developmental issues?

Early warning signs can appear as: laziness, forgetfulness, clinical depression or Attention Deficit Hyperactivity Disorder (ADHD). The "red flags" for psychosis are a combination of the following symptoms:

- Sensory sensitivity to light, sound and touch
- Decreased sense of smell
- Reduced concentration, attention and memory
- Difficulties understanding others and being understood in conversation
- Suspiciousness, paranoia or baseless fearfulness
- Subtle, very brief and infrequent illusions or hallucinations
- Odd ideas and behavior that are new and uncharacteristic
- Delusional thinking, but without conviction
- Progressive and marked deterioration in functioning at work or school
- Withdrawal from friends and even family members

A combination and worsening of these symptoms could preface the onset of psychosis. If a professional or parent observes some of these changes in a young person, we encourage them to contact a professional or local early intervention program.

What parts of the brain are affected in young people with prodromal psychosis?

The frontal lobes of the human brain are the area of higher order cognitive functions like judgement, planning, reasoning, organizing, maintaining a focus, and initiating action. During adolescence, maturation of the frontal lobes is incomplete. It is during this stage of development that frontal lobe impairment may become evident in a young person at risk of a major mental illness. This under-activity in the frontal lobes can contribute to a clinical picture of diminishing academic performance, trouble processing new information, disorganization and apathy or a lack of mental liveliness. A corresponding over-activity of the limbic system impacts primitive emotions and feelings and creates a sensory overload experience which can trigger psychosis.

How can Early Intervention Programs be helpful to schools?

Early Intervention Programs can offer a range of services to schools, including training to school staff on understanding psychosis and recognizing the early symptoms, consultation on how to work with a child who may be at risk and information about how and when to make a referral.





Preventing Severe Psychiatric Disorders

Information for medical professionals

The purpose of this information sheet is to facilitate your role in prevention and early intervention by providing information on the early warning signs, course of psychosis, and guidelines for making referrals.

It has been our consistent experience that pediatricians, family physicians, general practitioners and their office nursing staff are usually the professionals who identify the first signs early enough to allow us to prevent onset. Typically psychiatrists see these young people when psychotic illness is already well established, and prevention is impossible.

Changes in behavior, thoughts and emotions, such as:

- Feeling something's not quite right, without another explanation
- Heightened perceptual sensitivity to light, noise, touch, interpersonal distance
- Unusual perceptual experiences, fleeting apparitions, odd sounds, frank hallucinations
- Unusual fears and suspicions, avoidance of bodily harm, fear of assault (not social anxiety)
- Disorganized or digressive speech, jumbled thoughts and confusion, receptive and expressive aphasia
- Newly emerging, uncharacteristic, peculiar behavior or preoccupations, unpredictability, bizarre appearance
- Reduced emotional or social responsiveness, sadness, alogia, anergia, aphasia, memory difficulties
- Decreasing performance at school or work without another explanation or diagnosis
- Declining interest in people, activities and self-care
- Withdrawal from friends and family
- Decreased sense of smell

Some helpful questions to ask:

"Have your ears been playing tricks on you recently?"

"Are you finding yourself withdrawing from friends, activities and hobbies?"

"Are sounds getting louder or lights seeming brighter?"

"Does it feel like it's harder to concentrate or to express yourself, harder to filter out irrelevant and distracting stimuli in your environment?"

"Are you feeling that others may be staring at you, or having hostile thoughts about you for no particular reason?"

"Does it feel like your thoughts or actions are being controlled by others at times, or that you're getting messages from the environment that others may not perceive?"

"Do you sometimes feel that you are losing your mind?"

"Have other members of your family experienced these symptoms?"





Major Understandings About Mental Illness

Fact sheet for youths

Mental Illnesses are R.E.A.L.

RECOGNIZE that there is a problem

EDUCATE yourself about stigma and mental illness

ASK for help from a trusted adult

LEND a hand - offer support to a friend

You can make a difference!

What you should know

- Mental illness is a brain-based illness.
- Early intervention and treatment are important.
- People developing a mental illness require support.
- People with a mental illness can lead productive lives.
- The myths and stigma of mental illness are barriers to treatment.

Important reminders

- 1. Don't diagnose yourself or fellow students.
- 2. Be supportive of a friend who is having difficulties.
- 3. Contact a responsible adult (counselor, parent, teacher) when you feel something is wrong.
- 4. Don't wait the earlier treatment starts, the better the results.





Educators and Community

Talking points

Young people are naturally curious and have questions about mental illnesses. Understanding mental illnesses can be challenging for anyone. Myths, confusion, fear and misinformation about these illnesses cause anxiety, create stereotypes and reinforce stigma. During the past 50 years, great advances have been made in the areas of diagnosis and treatment of mental illnesses. Educators and community group leaders can help young people understand that these are brain-related conditions, like any other disease of the body, and that they can be treated.

In order to talk about mental illnesses, you must be knowledgeable and reasonably comfortable with the subject. This toolkit is intended to provide educators, community group leaders, parents and others with a basic understanding and answers to the following questions: What are mental illnesses? Who gets them? What causes them? What are early signs? How are diagnoses made? What treatments are available?

When explaining how mental illnesses affect a person, it is helpful to make a comparison to a physical illness. For example, many people get sick with a cold or the flu, but only a few get really sick with something serious like pneumonia. People who have a cold are usually able to do their normal activities; however, if they get pneumonia, they will have to take medicine and may have to go to the hospital.

Similarly, feelings of sadness, anxiety, worry, irritability or sleep problems are common for most people; however, when these feelings get very intense, last for a long period of time, gets progressively worse and begin to interfere with school, work and relationships, it may be a sign of a mental illness. Discuss how early screening and intervention have saved lives of cancer patients who might have died in an earlier era.

You should be aware of youths' needs, concerns, knowledge and experience with mental illnesses. When talking about mental illnesses, you should:

- communicate in a simple, straightforward manner
- communicate at a level that is appropriate to the age group and developmental level
- have the discussion when youth feel safe and comfortable
- listen and watch for reactions during the discussion
- slow down or back up if anyone becomes confused or looks upset
- be aware of students whose questions, comments or nonverbal behavior may indicate they need to talk further with you or someone else

Considering these points will help any young person be more relaxed and understand more of the conversation.

Middle school-aged youth typically ask more questions, especially about friends or family with emotional or behavioral problems. Their concerns and questions are usually very straightforward. "Why is that person talking to herself?" They may worry about their safety or the safety of their family and friends. It is important to answer their questions directly and honestly and to reassure them about their concerns and feelings.

Teenagers are generally capable of handling difficult topics and asking for more specific information. Teenagers often talk more openly with their friends and peers than with their parents. As a result, some teens may have already received misinformation about mental illnesses. Teenagers respond more positively to an open dialogue that includes give and take. As many educators have learned, they are not as open or responsive when a conversation feels one-sided or like a lecture.

Talking to children about mental illnesses can be an opportunity for adults to provide them with information, support and guidance. Learning about mental illnesses can lead to improved recognition, earlier treatment, greater understanding and compassion, as well as decreased stigma.





Educators and Community

Suggested activities

Interesting, engaging and effective classroom activities to educate students about the benefits of early detection and intervention of mental illness.

General

- Assign teams of students to research local or state facts and statistics about mental illness. They should also research and provide information on preventive or intervention services. Applying their findings, allow them to develop informational flyers, web pages, newsletters, public service announcements and/or commercials to promote awareness and prevention. Make sure the students' work is posted or distributed within the school and/or community.
- Have your students hang the posters in a visible area of the school, such as the student common area or the hallway near the main entrance.
- Assist your students in planning a dance for mental illness awareness. Select music that promotes understanding and respect, helping to fight the stigma facing the 1 in 5 youth with mental health problems.
- Plan a school-wide or community 'walk' with your students to honor those who have suffered or lost their lives or loved ones to mental illness or related causes (e.g. suicide). Students can use the walk to raise awareness.
- Help students to develop an anonymous school survey that will measure their peers' attitudes concerning mental illness. After administering the survey, compile the results and calculate the probability that a student in the school is at risk for mental illness. Present the findings to your school administration, school board or parent group.
- Discuss the role of citizens as activists and agents of change, particularly in the area of youth advocacy and mental illness prevention. As a class, identify an opportunity to influence change, such as volunteering or participating in a local event to show support for mental illness prevention.
- Research relevant laws in California and in other states. Write a letter to your senator expressing support for a specific issue related to the law and mental illness prevention.
- Have students review existing school policies concerning mental illness. Discuss whether additional policies are needed to help students who display early signs and symptoms. They may wish to put their thoughts into writing in the form of a proposal to the school administrator or school board.

Art

- Invite students to create imaginative art that represents one or more of the symptoms of mental illness or the importance of getting help early. Place them in a school location where they can be seen by other students and school personnel. Have the artists write a description to display with their artwork.
- Conduct a "Prevent Mental Illness" door-decorating contest. Divide the class into pairs or groups and assign each group a door in the school. To encourage student body awareness and participation, the student body can vote on their favorite door.
- Make a collage with pictures and words to illustrate the messages teens hear and see about mental illness in the media, music, from parents and peers to illustrate positive and negative views of mental illness.





Educators and Community

Suggested activities continued

Literature

- Encourage students to use mental illness prevention as a topic for local, state and national speech or essay competitions.
- Challenge your students to write an article or story about the positive benefits of early detection and intervention of mental illness for the school or community newspaper. Have the work judged by a panel of local journalists. Ask that the winning article be highlighted during the Mental Illness Awareness Week (October) or immediately after.
- Invite students to interview one or more older relatives or neighbors about mental illness beliefs in the past. They might tape-record the interview (with permission) and write a report about what they learned.
- Bring a representative into the classroom to talk about mental illness and discuss services specific to youth and their families. Your students could submit a short story and a list of services to the school or local newspaper.
- Ask your class to watch a TV program or movie (such as A Beautiful Mind) about a person suffering from mental illness. During the next class, have the students give a short description of the illness, the signs and symptoms displayed and how the people helped the individual get help. Then have the class discuss the influence TV and movies might have on their own ideas about mental illness.
- Assign students to research the historical timeline and social views of mental illness. Direct them to look at what occurred during those transitions. They should include information on legal statutes and close with their summary of the findings, including their own opinion. Have students present their papers and discuss their findings and opinions.

Drama or Theater

- Encourage students to use mental illness prevention as a topic for local, state and national drama competitions.
- Assist students to enact or role-play a mock mental illness incident, demonstrating the signs and symptoms, myths and facts and how to get help. Include the roles that friends, family members, teachers, bystanders and others may play in these situations. Include community groups in the enactment as appropriate. Follow-up with a discussion about what occurred. Discuss the obligation of all those involved, as well as school safety issues and strategies.
- Invite your students to create a dramatic scene in which they confront a friend who is showing early signs of mental illness.

Computer or Interactive

- Depending on skill level and software availability, have students develop an interactive game, quiz, video documentary, etc. dealing with mental illness awareness. (This can be done in anything from custom-animated PowerPoint to basic programming or authoring tools.) Consider setting the finished product up in the cafeteria as a kiosk and encourage students to "test" themselves to see how much they know about the topic.
- Have your students incorporate their skills into producing something to raise awareness about mental illness. Depending on their skill level, students could create materials that could be aired in the school television broadcast system or a web page that could be featured on the school's website.



