



Grade 9 Sample Lesson Plan: Ending the Silence on Mental Illness

SOLs

- Determine how to help a friend exhibiting signs of depression, anxiety, disordered eating, or other self-harming behavior.
- Promote community health promotion and/or disease prevention projects.
- Identify school and community mental health resources.

Objectives/Goals

- Students will know how to help a friend exhibiting signs/symptoms of mental illness.
- Students will advocate for reducing stigma about mental illness, utilize the proper words to get help, and identify school/community/national mental health resources.

Materials

- Ending the Silence on Mental Illness ppt
- Finding the Words -ppt
- Student Support template
- Know the Signs Poster
- Ending the Silence on Mental Illness Video Project ppt
- Ending the Silence on Mental Illness Video Project Rubric
- Ending the Silence Video Planning Doc
- Device(s) to film & edit 60 second video project
- White screen and projector or large monitor with computer

Procedure

[Lesson: 90 mins + Video Project: 2-3 hrs +Watching Videos 1 hr]

Steps:	Action:	Suggestions:
Step 1: Prepare	At the end of class prior to the Mental Health Lesson, explain to the students you will be discussing mental illness. Allow students to stay after class to chat with you in case they feel uncomfortable participating in the forthcoming lesson.	Notify the psychology/counseling team you will be discussing suicide prevention prior to the lesson.
Step 2: Present	Present Ending the Silence on Mental Illness ppt (slides link can also be given to students to view at their own pace as there are links on several slides they should click on and read; teacher can also do this during presentation.)	(60 min+ lesson) Decide how much class time you have for mental health reading. There are 6 articles in the slides. How many mental health articles do you want your students to read from kidshealth.org? Example: You might have the students choose 2-3 articles to read through.
Step 3: Introduce	Present and discuss: Finding the Words ppt Student Support template Ending the Silence on Mental Illness Video Project ppt	Finding the Words Slides: 25 min+ lesson Student Support (Green Doc): 10 mins+ Ending the Silence on Mental Illness Video Project Slides 10-15 mins+
Step 4: Display	Know the Signs Poster	(5 mins)
Step 5: Introduce	Display and discuss Ending the Silence on	(2 classes periods +) ● Review Rubric

Filming Project	Mental Illness Video Project-ppt <ul style="list-style-type: none"> Ending the Silence on Mental Illness Video Project Rubric 	<ul style="list-style-type: none"> One class period to write script and start filming One class period to film and edit
Step 6: Assign Groups and Roles, Students Begin Filming	Students can work in groups of 3-4 for the film. Roles: <ul style="list-style-type: none"> Producer & Editor Main Character Supporting Character Print and pass out Ending the Silence Video Project planning doc to groups.	
Step 7: Assess Films	Teacher will review the videos and give students feedback on how to improve the videos. <ul style="list-style-type: none"> Ending the Silence on Mental Illness Video Project Rubric 	Allow students time to edit based on constructive suggestions.
Step 8: Movie Day	Plan a day to celebrate the videos.	Ideas: <ul style="list-style-type: none"> Share videos in class as a celebration. Share top videos on school website or on school video announcements Showcase videos during mental health week

Assessment Idea

Ending the Silence on Mental Illness Video Project Rubric

References

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Handout

The next page includes a handout for the lesson. The handout is designed for print use only.

Student Support

Name
School Psychologist
Room #

Name
School Counselor
Room #

Name
School Counselor
Room #

GET THE SUPPORT YOU NEED TO GET THROUGH EACH DAY.

National Suicide Prevention Hotline	1-800-273-TALK (8255)
National Suicide Hotline	1-800-784-2433
National Alliance on Mental Illness Warm Line	1-800-950-NAMI (6264)
National Council on Alcoholism & Drug Dependence, Inc	1-800-NCA-CALL or 800-622-2255
National Sexual Assault Hotline	1-800 656-HOPE or 800-656-4673
National Runaway Safeline	1 800-RUNAWAY or 800-786-2929
National Human Trafficking Hotline	1-888- 373-7888
TREVOR Lifeline: LGBTQ youth-focus	1-866-488-7386

For More Help Dial 2-1-1

Pain Isn't Always Obvious

A.C.T on the Facts

- *Withdrawal
- *Changes in Sleep
- *Reckless Behavior
- *Personality Change
- *Neglect Physical Appearance
- *Physical Pain
- *Substance Abuse
- *Loss of Interest
- *Sudden Mood Changes
- *Giving Away Belongings

1



Acknowledge: Start the Conversation

"I have noticed you have been sad lately?"

2

Care: Listen, Express, Concern & Reassure



"I can imagine how tough this must be for you."



3 Care: Create a Safety Plan



"Is there someone we can call if you have thoughts of hurting yourself?"

Do you have any weapons or drugs available at your house?

4 Tell: Get Help

- **If they are going to hurt themselves right there "Call 911"**
- **Find a Trusted Adult who can Find Professional Help**
- **Suicide Prevention Hotline Number 1-800-273-8255**

POSITIVE COPING SKILLS

Talking

- Talking with a parent or other family member
- Talking with a trusted staff member at school
- Calling a friend
- Calling a crisis line or helpline

Writing

- Writing in a journal or diary
- Writing with a stream of consciousness (writing all things you are feeling without stopping to think about what you're writing)
- Write poetry
- Writing a song (or lyrics to your favorite song)
- Writing a letter to a friend
- Writing a story

Exercise

- Go for a run
- Go for a walk
- Go skateboarding or rollerblading
- Do push-ups, sit-ups, pull-ups or jumping jacks
- Play a sport
- Try yoga
- Lift weights
- Hit a punching bag
- Go for a bike ride
- Go swimming
- Download a fitness app

Artistic Expression

- Sing
- Dance
- Draw or paint a picture
- Sculpt an object (using play-doh)
- Make a collage that shows how you feel
- Play a musical instrument
- Create music on an app or program
- Taking pictures of nature, friends, family of you

Relaxation

- Deep breathing
- Try a meditation app
- Listening to music
- Watching tv
- Laying in the sun
- Counting to ten backwards
- Taking a bath or shower
- Gripping a 'stress ball'
- Reading an inspirational book magazine or comic book

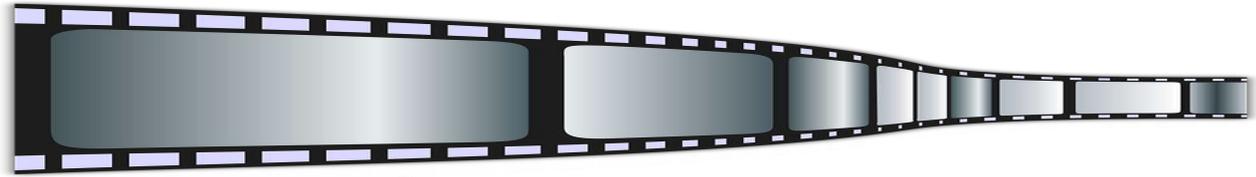
Miscellaneous

- Walking your dog
- Playing a board game
- Playing video games or go online
- Cooking
- Cleaning
- Yelling into the wind

Ending the Silence on Mental Illness Video Planning Doc

Roles:

- Producer & Editor Played by:
- Main Character Played by:
- Supporting Character Played by:
- _____ Played by:



Scene:	Scene:	Scene:
Scene:	Scene:	Scene:



Rubric Checklist:

- Health Enhancing Position- Extremely clear, health- enhancing Position
- Includes Signs/Symptoms of Mental Illness**
 - Credible and reliable facts on signs and symptoms on the mental illness you choose to speak out for (CDC, NAMI, YRBS Data)
- Dialogue in the script is positive. Shows friends/peers/adults showing concern and reaching out for help.
- Reduces Stigma of Mental Illness:
 - WALLS: Watch your language, Ask questions, Learn more, Listen to experiences, Speak out
 - Provides at least one school/local (hotline, website or phone #)
 - Provides at least one national (hotline, website, phone #)

Things that will disqualify the video project:

Video portrays death, portrayal of suicide death, includes weapons/drugs, language that stigmatizes a person living with mental illness, inappropriate language like crazy, psycho, those people without explicitly communicating to the audience that this language is unacceptable.

Teacher Approval:

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Anxiety Disorders

What Is Anxiety?

Liam had always looked out for his younger brother Sam. But whenever Sam took the late bus after soccer practice, Liam worried about him so much he couldn't concentrate on his homework. Liam watched the clock, worrying and imagining the worst — picturing bus accidents and fearing, for no particular reason, that Sam might be injured or dead. Only when Sam arrived home safe could Liam finally relax.

It's completely normal to worry when things get hectic and complicated. But if worries become overwhelming, you may feel that they're running your life. If you spend an excessive amount of time feeling worried or nervous, or you have difficulty sleeping because of your anxiety, pay attention to your thoughts and feelings. They may be symptoms of an anxiety problem or disorder.

Anxiety is a natural human reaction that involves mind and body. It serves an important basic survival function: Anxiety is an alarm system that is activated whenever a person perceives danger or threat.

When the body and mind react to danger or threat, a person feels physical sensations of anxiety — things like a faster heartbeat and breathing, tense muscles, sweaty palms, a queasy stomach, and trembling hands or legs. These sensations are part of the body's fight-flight response. They are caused by a rush of adrenaline and other chemicals that prepare the body to make a quick getaway from danger. They can be mild or extreme.

The fight-flight response happens instantly when a person senses a threat. It takes a few seconds longer for the thinking part of the brain (the **cortex**) to process the situation and evaluate whether the threat is real, and if so, how to handle it. If the cortex sends the all-clear signal, the fight-flight response is deactivated and the nervous system can relax.

If the mind reasons that a threat might last, feelings of anxiety might linger, keeping the person alert. Physical sensations such as rapid, shallow breathing; a pounding heart; tense muscles; and sweaty palms might continue, too.

Normal Anxiety

Everyone experiences feelings of anxiety from time to time. Anxiety can be described as a sense of uneasiness, nervousness, worry, fear, or dread of what's about to happen or what might happen. While fear is the emotion we feel in the presence of threat, anxiety is a sense of anticipated danger, trouble, or threat.

Feelings of anxiety can be mild or intense (or anywhere in between), depending on the person and the situation. Mild anxiety can feel like a sense of uneasiness or nervousness. More intense anxiety can feel like fear, dread, or panic. Worrying and feelings of tension and stress are forms of anxiety. So are stage fright and the shyness that can come with meeting new people.

It's natural for new, unfamiliar, or challenging situations to prompt feelings of anxiety or nervousness. Facing an important test, a big date, or a major class presentation can trigger normal anxiety. Although these situations don't actually threaten a person's safety, they can cause someone to feel "threatened" by potential embarrassment, worry about making a mistake, fitting in, stumbling over words, being accepted or rejected, or losing pride. Physical sensations — such as a pounding heart, sweaty hands, or a nervous stomach — can be part of normal anxiety, too.

Because anxiety makes a person alert, focused, and ready to head off potential problems, a little anxiety can help us do our best in situations that involve performance. But anxiety that's too strong can interfere with doing our best. Too much anxiety can cause people to feel overwhelmed, tongue-tied, or unable to do what they need to do.

Anxiety Disorders

Anxiety disorders are mental health conditions that involve excessive amounts of anxiety, fear, nervousness, worry, or dread. Anxiety that is too constant or too intense can cause a person to feel preoccupied, distracted, tense, and always on alert.

Anxiety disorders are among the most common mental health conditions. They affect people of all ages — adults, children, and teens. There are many different types of anxiety disorders, with different symptoms. They all have one

thing in common, though: Anxiety occurs too often, is too strong, is out of proportion to the present situation, and affects a person's daily life and happiness.

Symptoms of an anxiety disorder can come on suddenly, or they can build gradually and linger until a person begins to realize that something is wrong. Sometimes anxiety creates a sense of doom and foreboding that seems to come out of nowhere. It's common for those with an anxiety disorder to not know what's causing the emotions, worries, and sensations they have.

Different anxiety disorders are named to reflect their specific symptoms.

- **Generalized anxiety.** With this common anxiety disorder, a person worries excessively about many things. Someone with generalized anxiety may worry excessively about school, the health or safety of family members, and the future. They may always think of the worst that could happen.

Along with the worry and dread, people with generalized anxiety have physical symptoms, such as chest pain, headache, tiredness, tight muscles, stomachaches, or vomiting. Generalized anxiety can lead a person to miss school or avoid social activities. With generalized anxiety, worries can feel like a burden, making life feel overwhelming or out of control.

- **Obsessive compulsive disorder (OCD).** For a person with OCD, anxiety takes the form of obsessions (bad thoughts) and compulsions (actions that try to relieve anxiety).
- **Phobias.** These are intense fears of specific situations or things that are not actually dangerous, such as heights, dogs, or flying in an airplane. Phobias usually cause people to avoid the things they are afraid of.
- **Social phobia (social anxiety).** This intense anxiety is triggered by social situations or speaking in front of others. An extreme form called **selective mutism** causes some kids and teens to be too fearful to talk at all in certain situations.
- **Panic attacks.** These episodes of anxiety can occur for no apparent reason. With a panic attack, a person has sudden and intense physical symptoms that can include a pounding heart, shortness of breath, dizziness, numbness, or tingling feelings caused by overactivity of the body's normal fear response. **Agoraphobia** is an intense fear of panic attacks that causes a person to avoid going anywhere a panic attack could possibly occur.
- **Posttraumatic stress disorder (PTSD).** This type of anxiety disorder results from a traumatic or terrifying past experience. Symptoms include flashbacks, nightmares, or constant fear after the fact.

How Anxiety Disorders Affect People

For people dealing with anxiety disorders, symptoms can feel strange and confusing at first. For some, the physical sensations can be strong and upsetting. For others, feelings of doom or fear that can happen for no apparent reason can make them feel scared, unprotected, and on guard. Constant worries can make a person feel overwhelmed by every little thing. All this can affect someone's concentration, confidence, sleep, appetite, and outlook.

People with anxiety disorders might avoid talking about their worries, thinking that others might not understand. They may fear being unfairly judged, or considered weak or scared. Although anxiety disorders are common, people who have them may feel misunderstood or alone.

Some people with anxiety disorders might blame themselves. They may feel embarrassed or ashamed, or mistakenly think that anxiety is a weakness or a personal failing. Anxiety can keep people from going places or doing things they enjoy.

The good news is, doctors today understand anxiety disorders better than ever before and, with treatment, a person can feel better.

What Causes Anxiety Disorders?

Experts don't know exactly what causes anxiety disorders. Several things seem to play a role, including genetics, brain biochemistry, an overactive fight-flight response, stressful life circumstances, and learned behavior.

Someone with a family member who has an anxiety disorder has a greater chance of developing one, too. This may be related to genes that can affect brain chemistry and the regulation of chemicals called neurotransmitters. But not everyone with a family member who has an anxiety disorder will develop problems with anxiety.

Things that happen in a person's life can also set the stage for anxiety disorders. Frightening traumatic events that can lead to PTSD are a good example.

Growing up in a family where others are fearful or anxious can "teach" a child to view the world as a dangerous place. Likewise, someone who grows up in an environment that is actually dangerous (if there is violence in the

family or community, for example) may learn to be fearful or expect the worst.

Although everyone experiences normal anxiety in certain situations, most people — even those who experience traumatic situations — don't develop anxiety disorders. And people who develop anxiety disorders can get relief with proper treatment and care. They can learn ways to manage anxiety and to feel more relaxed and at peace.

How Are Anxiety Disorders Treated?

Anxiety disorders can be treated by mental health professionals, or therapists. A therapist can look at the symptoms someone is dealing with, diagnose the specific anxiety disorder, and create a plan to help the person get relief.

A particular type of talk therapy called cognitive-behavior therapy (CBT) is often used. In CBT, a person learns new ways to think and act in situations that can cause anxiety, and to manage and deal with stress. The therapist provides support and guidance and teaches new coping skills, such as relaxation techniques or breathing exercises. Sometimes, but not always, medication is used as part of the treatment for anxiety.

What to Do

Getting the problem treated can help a person feel like himself or herself again — relaxed and ready for the good things in life. Someone who might be dealing with an anxiety disorder should:

- **Tell a parent or other adult about physical sensations, worries, or fears.** Because anxiety disorders don't go away unless they are treated, it's important to tell someone who can help. If a parent doesn't seem to understand right away, talk to a school counselor, religious leader, or other trusted adult.
- **Get a checkup.** See a doctor to make sure there are no physical conditions that could be causing symptoms.
- **Work with a mental health professional.** Ask a doctor, nurse, or school counselor for a referral to someone who treats anxiety problems. Finding out what's causing the symptoms can be a great relief.
- **Get regular exercise, good nutrition, and sleep.** These provide your body and brain with the right fuel and time to recharge.

Try to stay patient and positive. It can take time to feel better, and courage to face fears. But letting go of worry allows space for more happiness and fun.

Reviewed by: D'Arcy Lyness, PhD

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Depression

Regular Sadness vs. Depression

It's natural to feel sad, down, or discouraged at times. We all feel these human emotions, they're reactions to the hassles and hurdles of life.

We may feel sad over an argument with a friend, a breakup, or a best friend moving out of town. We might be disappointed about doing poorly on a test or discouraged if our team can't break its losing streak. The death of someone close can lead to a specific kind of sadness — grief.

Most of the time, people manage to deal with these feelings and get past them with a little time and care.

Depression is more than occasionally feeling blue, sad, or down in the dumps, though. **Depression is a strong mood involving sadness, discouragement, despair, or hopelessness that lasts for weeks, months, or even longer.**



Depression affects more than a person's mood. It affects thinking, too. It interferes with the ability to notice or enjoy the good things in life. Depression drains the energy, motivation, and concentration a person needs for normal activities.

Signs of Depression

Here are some of the things people notice with depression:

alienated.

Any or all of these negative emotions can be part of a depressed mood if they go on for weeks or more.

- **Negative thinking.** People with depression get stuck in negative thinking. This can make people focus on problems and faults. It can make things seem bleaker than they really are. Negative thinking can make a person believe things will never get better, that problems are too big to solve, that nothing can fix the situation, or that nothing matters.

Negative thinking can be self-critical, too. People may believe they are worthless and unlovable — even though that's not true. That can lead people with depression to think about harming themselves or about ending their own life. Negative thinking can block our ability to see solutions or realize that a problem is actually temporary.

- **Low energy and motivation.** People with depression may feel tired, drained, or exhausted. They might move more slowly or take longer to do things. It can feel as if everything requires more effort. People who feel this way might have trouble motivating themselves to do or care about anything.
- **Poor concentration.** Depression can make it hard to concentrate and focus. It might be hard to do schoolwork, pay attention in class, remember lessons, or stay focused on what others say.
- **Physical problems.** Some people with depression have an upset stomach or loss of appetite. Some might gain or lose weight. People might notice headaches and sleeping problems when they're depressed.

- **Social withdrawing.** People with depression may pull away from friends and family or from activities they once enjoyed. This usually makes them feel more lonely and isolated — and can make negative thinking worse.

Depression Can Go Unrecognized

People with depression may not realize they are depressed. Because self-critical thinking is part of depression, some people might mistakenly think of themselves as a failure, a bad student, a quitter, a slacker, a loser, or a bad person.

Because depression can affect how a person acts, it might be misunderstood as a bad attitude. Other people may think the person isn't trying or not putting in any effort. For example, a negative or irritable mood can cause someone to act more argumentative, disagreeable, or angry. That can make the person seem difficult to get along with or cause others to keep their distance. Low motivation, low energy, difficulty concentrating, and thoughts of "why bother?" can lead someone to skip classes or school.

Some people with depression have other problems as well. These can intensify feelings of worthlessness or inner pain. For example, people who cut themselves or who have eating disorders or who go through extreme mood changes may have unrecognized depression.

When depression is recognized and treated, it often clears the way for other problems to get treated, too.

What Helps Depression Get Better?

Depression can get better with the right attention and care — sometimes more easily than a person thinks. **But if it's not treated, things can stay bad or get worse.** That's why people who are depressed shouldn't wait and hope it will go away on its own.

If you think you might be depressed, talk to a parent or other adult about getting the right help. The right help can mean doing all of these things:

Get a Medical Checkup

A doctor can check for any health conditions that might cause symptoms of depression. For example, hypothyroidism can cause a depressed mood, low energy, and tiredness. Mono can make a person feel tired and depressed.

Talk to a Counselor

Having meetings with a counselor or therapist is called talk therapy. Talk therapy can help people overcome depression. Talk therapy works by helping people to:

- understand their emotions, put feelings into words, and feel understood and supported
- build the confidence to deal with life's struggles
- work out problems they face
- change negative thinking patterns that are part of depression
- increase self-esteem and become more self-accepting
- increase their positive emotions and feel happier

Overcoming depression might include talk therapy, medication, or both. A therapist might also recommend daily exercise, exposure to daylight, or better ways of eating. A therapist might teach relaxation skills to help someone get a good night's sleep.

Get Support

Many people find that it helps to open up to parents or other adults they trust. Simply saying something like, "I've been feeling really down lately and I think I'm depressed" can be a good way to begin the discussion.

If a parent or family member can't help, turn to your school counselor, school nurse, or a helpline.

Let friends and other people who care about you offer their support. They can:

- listen and talk, showing that they understand what you're feeling
- remind you that things can get better, and that they are there for you through the downs and ups
- help you see the things that are already good about your life, even when it's hard for you to notice
- keep you company and do enjoyable or relaxing things with you
- give you honest compliments and help you find things to laugh or smile about

Help Yourself

Try these simple actions. They can have a powerful effect on mood and help with depression:

- eat healthy foods
- get the right amount of sleep
- walk, play, or do something else to get exercise every day
- take time to relax
- take time to notice the good things about life, no matter how small

Focusing on positive emotions and being with positive people can help, too. Do yoga, dance, and find creative self-expression through art, music, or journaling. Daily exercise, meditation, daylight, and positive emotions all can affect the brain's activity in ways that restore mood and well-being.

Depression can be treated if you take the right steps:

- Do what you can to care for yourself.
- See a doctor or counselor.
- Don't wait for depression to just go away.

Reviewed by: D'Arcy Lyness, PhD

Date reviewed: August 2016

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Obsessive-Compulsive Disorder (OCD)

What Happens in OCD?

OCD causes the brain to create repetitive worries and fears. These worries, fears and "bad thoughts" can pop up in the brain and might be hard to get rid of.

People who have OCD feel they can't stop thinking about worries like these:

- someone might get sick, hurt, or die
- things might be germey or dirty
- something isn't straight, even, or exactly right
- something is lucky or unlucky, bad or good, safe or harmful
- bad thoughts might come true

OCD also can cause people to feel they have to do behaviors to feel safe from worries and fears. For example, someone with OCD might feel like they **have to**:

- wash and clean too much
- erase, rewrite, or re-do things
- repeat a word, phrase, or a question more often than necessary
- check and re-check if something is closed or locked
- touch, tap, or step in an unusual way
- put things in just the right order

These behaviors are called **rituals**. People with OCD may repeat rituals over and over. Doing a ritual temporarily interrupts the bad thoughts.

The brain learns that doing a ritual brings relief. Pretty soon, people with OCD do a ritual automatically. They may feel like they can't stop. But doing rituals causes OCD to continue.

The name OCD is short for obsessive-compulsive disorder. "Disorder" is a medical way of saying that something in the body isn't working properly. "Obsessive" is the unwanted thoughts and worries. "Compulsive" is a medical word used to describe the behaviors that people feel they must do to fix the worries.

What Causes OCD?

OCD happens because of a problem in the brain's message system. The problem causes worry and fear messages to form by mistake. It also causes the strong feeling of *having* to do a ritual to make things safe.

Scientists don't yet know what causes this problem to happen. OCD tends to run in families. People may get OCD because it's in their genes or they might have had an infection. There may be differences in the brain that cause OCD to start. OCD is *not* caused by anything a person (or parent) did.

What's it Like for People With OCD?

Teens with OCD might have it for a while before a parent or doctor realizes it. They may know that their worries and rituals don't make sense. They may want to stop, but feel they can't.

OCD worries and rituals can multiply and begin taking more time and energy. This makes it hard to concentrate, do schoolwork, or enjoy fun and friends. OCD can leave people feeling stressed, tired, and sad.

People who have OCD don't have to go through it alone. The best thing to do is tell a parent or other adult so you can go to a doctor.

How Is OCD Diagnosed and Treated?

To diagnose OCD, doctors who know the signs of OCD will ask questions and talk about what's happening. They also will do a health checkup.

If a doctor decides that you have OCD, it can be a relief to know what's causing the trouble. Now you can move forward and learn how to overcome it.

OCD can get better with therapy. Doctors sometimes also give medicines to treat OCD. But not everyone needs medicine to get well.

Therapists and doctors use a talk-and-do therapy for OCD. During this treatment, you will learn more about OCD and how it works. You will learn that doing rituals keeps OCD going strong and not doing rituals weakens OCD. You will learn and practice ways to face fears and ignore worry messages caused by OCD. You will learn to resist doing rituals.

You'll spend time talking and practicing your new skills. This can take time — how long depends on the person. But learning and practicing these skills stops the cycle of OCD and allows the brain's message system to work better again.

How Can Parents Help?

If you're going through OCD, parents or other adults can be a big part of helping you get better.

Your therapist can teach your parent the best ways to help you through OCD. Family members can help you practice the things you learn in therapy, like dealing with fears and rituals. They can help you with schoolwork if you have trouble getting it done. They can talk with your teacher if you need extra help while you're going through OCD.

Parents and adults in your life can be there to give you love and support. They can take your mind off OCD by doing fun or relaxing things with you. And they can remind you that OCD can get better with time, practice, and patience.

Reviewed by: Shirin Hasan, MD

Date reviewed: November 2017

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Posttraumatic Stress Disorder

A couple of months ago, a guy who'd been harassing and threatening Jake for a while pulled a gun on him as he was walking home. Luckily, the police arrived and no one was hurt, but soon after that Jake started feeling jittery and easily irritated, he had trouble sleeping and concentrating, and he couldn't stop thinking about it, even when he was trying to do something else. He even had nightmares about it.

The things Jake was going through are normal after a traumatic event. They usually run their course and go away within a few days or weeks. But for Jake and other people with posttraumatic stress disorder (PTSD), things are different. When someone has PTSD, the symptoms of stress are intense and last for longer than a month.

What Is PTSD?

Posttraumatic stress disorder is a set of symptoms — feeling jittery, sleeping problems, trouble concentrating — that someone develops after they experience something harmful, terrifying, or upsetting.

Any kind of extreme stress can lead to PTSD. It often develops after a direct experience in which someone is seriously injured or threatened with injury or death. It also can happen to people who witness stressful events or learn about an unexpected or violent death or injury to a family member or close friend.

In some cases, PTSD can develop after repeated or extreme exposure to traumatic events. This can be the case with people such as policemen, firemen, and EMTs.

What Causes PTSD?

When you're in a stressful or dangerous situation, your body responds by producing hormones and chemicals as part of the "fight-or-flight" reaction (so named because that's exactly what the body is preparing itself to do — to either fight off the danger or run from it). Usually, when the danger is over, the body goes back to normal.

But when someone has PTSD, his or her stress response system doesn't switch off as it should.

Traumatic events that can cause PTSD include:

- violent assaults, including rape
- fire
- physical or sexual abuse
- acts of violence (such as school or neighborhood shootings)
- natural or man-made disasters
- car accidents
- military combat (this form of PTSD is sometimes called "shell shock")
- witnessing another person go through these kinds of traumatic events
- being diagnosed with a life-threatening illness

Symptoms of PTSD

Symptoms of PTSD usually develop within the first month after the trauma, but in some cases don't start until months or even years later. Symptoms can go on for years or they can go away and then come back if another event brings up memories of the trauma. In fact, anniversaries of the event can cause a flood of emotions and unpleasant memories.

Someone with PTSD might have some or all of these symptoms:

- **Reliving the traumatic event.** People with PTSD might have nightmares, flashbacks, or disturbing mental images about the trauma.
- **Avoiding reminders of the trauma.** People with PTSD may avoid people, places, or activities that remind them of the stressful event. They also may avoid talking about what happened, even to a therapist or counselor.
- **Emotional numbness.** Many people with PTSD feel numb or detached. They may view the world more negatively or feel like they can't trust anything. Scientists and doctors think this might be because the body

makes too much of certain hormones in the brain that numb the senses during stress.

- **Anxiety.** People with PTSD may be easily startled, on edge, jumpy, irritable, or tense. This may be due to high levels of stress hormones in the body. Difficulty concentrating and trouble sleeping can be part of this hyper-alert, anxious state.

Who Gets PTSD?

People of any age — kids, teens, and adults — can develop PTSD. But not everyone who experiences a serious trauma develops it. In fact, most people do not. Many recover from life-threatening traumas without developing PTSD. This ability to cope and bounce back is called resilience.

Researchers have found that certain things can affect people's resilience. Everything from someone's belief in his or her ability to overcome problems to the types of hormones a person's body produces may play a role in coping with extreme stress. Someone who can cope better is more resilient and likely to recover quickly, while someone who is less resilient may be more likely to develop PTSD.

The circumstances of a traumatic event also can affect someone's reaction. National disasters like the terrorist attacks of 9/11 or a major hurricane or tornado can make many people feel anxious, even if they weren't directly affected. In some cases, seeing images of those events on TV or the Internet can lead to symptoms much like PTSD.

How Is PTSD Treated?

Usually, PTSD doesn't just go away on its own. Without treatment, symptoms can last for months or years, or they may come and go in waves. Getting treatment and support can make all the difference. Mental health professionals (such as psychologists, psychiatrists, and counselors) who specialize in treating anxiety problems often have experience working with people who have PTSD.

Therapy for PTSD involves meeting a therapist and then, at your own pace, gradually talking about what happened. Therapy should feel like a safe environment and should help you learn strategies and skills to help with difficult feelings, such as anxiety, fear, or panic.

Strategies therapists recommend include relaxation techniques that can help adjust your stress response, group therapies, and support groups. In some cases, medications can help reduce symptoms of anxiety, panic, or depression.

Healing From Trauma

Sometimes people with PTSD avoid seeking professional help because they're afraid that talking about what happened will bring back memories or feelings that are too painful, or they might worry that it means they're "crazy."

But getting help is actually the sane and healthy thing to do. A therapist can help someone deal with feelings of guilt, shame, anger, or frustration and discover inner strengths that can make the person feel better.

Talking to a trained professional in a safe environment at your own pace often leads to long-term healing. Working through the memories and worries can help reduce symptoms like nightmares and flashbacks. It also can help people avoid potentially harmful behaviors and emotions, like drug use or extreme anger.

So how do you find the right therapist or counselor for you? The best way is to ask a parent, doctor, or adult you trust for help. People who are close to you know you well and understand your needs. (Having a support system of family and friends can really help in recovering from PTSD.) A doctor or school counselor also might be able to help you find a mental health professional who specializes in anxiety problems. And lots of resources are available to help locate therapists in your area.

PTSD is treatable. In the process of healing from trauma, some people discover strengths they didn't know they had or find a support network they didn't know was there. Others find that treatment helps them develop new insights into life and how to cope with other problems.

Reviewed by: Michelle J. New, PhD
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Bipolar Disorder

What Is Bipolar Disorder?

Bipolar disorders are one of several medical conditions called depressive disorders. Depressive disorders affect the way a person's brain functions.

Depressive disorders are widespread. In the United States alone, it's estimated that more than 17.4 million adults have a depressive disorder each year. That works out to about 1 out of every 7 people, so there's a good chance that you or someone you know is dealing with a depressive disorder.

Bipolar disorder goes by many names: manic depression, manic-depressive disorder, manic-depressive illness, bipolar mood disorder, and bipolar affective disorder are medical terms for the same condition.

Bipolar disorder is classified into four different types:

1. Bipolar I
2. Bipolar II
3. Cyclothymic Disorder
4. Bipolar Disorder Not Otherwise Specified

Mental health experts separate the condition into these four types because the symptoms of bipolar disorder show up differently in different people. When doctors know what type someone has, they can tailor treatment to that person's specific needs.

How Does It Affect People?

Bipolar disorder affects both men and women. For many people, the first symptoms show up in their early twenties. However, research has shown that the first episode of bipolar disorder is occurring earlier: It often shows up in adolescence, and even children can have the disorder.

Recent research suggests that kids and teens with bipolar disorder don't always have the same behavioral patterns that adults with bipolar disorder do. For example, kids who have bipolar disorder may experience particularly rapid mood changes and may have some of the other mood-related symptoms listed below, such as irritability and high levels of anxiety. But they may not show other symptoms that are more commonly seen in adults.

Because brain function is involved, the ways people with bipolar disorder think, act, and feel are all affected. This can make it especially difficult for other people to understand their condition. It can be incredibly frustrating if other people act as though someone with bipolar disorder should just "snap out of it," as if a person who is sick can become well simply by wanting to.

Bipolar disorder isn't a sign of weakness or a character flaw; it's a serious medical condition that requires treatment, just like any other condition.

What Are the Signs and Symptoms?

A person with bipolar disorder will go through episodes of **mania** (highs) and at other times experience episodes of **depression** (lows). These aren't the normal periods of happiness and sadness that everyone experiences from time to time. Instead, the episodes are intense or severe mood swings, like a pendulum that keeps arcing higher and higher.

Symptoms of mania include:

- racing speech and thoughts
- increased energy
- decreased need for sleep
- elevated mood and exaggerated optimism
- increased physical and mental activity
- excessive irritability, aggressive behavior, and impatience
- poor judgment

- reckless behavior, like excessive spending, making rash decisions, and erratic driving
- difficulty concentrating
- inflated sense of self-importance

Symptoms of depression include:

- loss of interest in usual activities
- prolonged sad or irritable mood
- loss of energy or fatigue
- feelings of guilt or worthlessness
- sleeping too much or inability to sleep
- drop in grades and inability to concentrate
- inability to experience pleasure
- appetite loss or overeating
- anger, worry, and anxiety
- thoughts of death or suicide

In adults, episodes of mania or depression usually last for weeks or months, although they can be shorter in length. In children and adolescents, though, these episodes can be much shorter, and a kid or teen can even go back and forth between mania and depression throughout the day.

Episodes of mania or depression may happen irregularly and follow an unpredictable pattern or they may be linked, with a manic episode always following a period of depression, or vice versa. Sometimes episodes have a seasonal pattern. Mania in the spring, for example, may be followed by depression in the winter.

Between episodes, someone with bipolar disorder usually returns to normal (or near-normal) functioning. For some people, though, there is little or no "break period" between their cycles. These mood swing cycles can change slowly or rapidly, with rapid cycling between mania and depression being much more common in women, children, and adolescents.

Some people with bipolar disorder turn to alcohol and drugs because they feel temporarily better when they're high. But using alcohol and drugs can have disastrous results for people with bipolar disorder. Substance abuse can actually make the symptoms worse, as well as making the condition hard for doctors to diagnose.

What Causes Bipolar Disorder?

Doctors and scientists don't know the exact cause of bipolar disorder, but they think that biochemical, genetic, and environmental factors may all be involved. It's believed this condition is caused by imbalances in certain brain chemicals called **neurotransmitters**. If the neurotransmitters aren't in balance, the brain's mood-regulating system won't work the way it should.

Genes also play a role. If a close relative has bipolar disorder, a person's risk of developing the condition is higher. This doesn't mean, though, that if you have a relative with bipolar disorder you will automatically develop it! Even in studies involving identical twins raised in the same home, one twin sometimes had bipolar disorder whereas the other did not. Researchers are now working on identifying the gene or genes involved in bipolar disorder.

Environmental factors may play a role in bipolar disorder. For some teens, stresses such as a death in the family, their parents' divorce, or other traumatic events could trigger a first episode of mania or depression. Sometimes, going through the changes of puberty can set off an episode. In girls, symptoms can be tied to their monthly menstrual cycle.

How Is Bipolar Disorder Diagnosed?

Most people with bipolar disorder can be helped — but a psychiatrist or psychologist must first diagnose the disorder. Sadly, many people with the condition are never diagnosed or are not diagnosed properly. Without proper diagnosis and treatment, the disorder can become worse. Some teens with undiagnosed bipolar disorder can end up in a psychiatric hospital or residential treatment center, in the juvenile justice system, abusing drugs, or committing suicide.

Because children and teens with bipolar disorder do not usually show the same patterns of behavior as adults who have the condition, a mental health professional will observe a teen's behavior carefully before making a diagnosis. This includes getting a complete history of the person's past and present experiences. Family members and friends can also provide helpful insights into the person's behavior. The doctor may also want a teen to have a medical exam to rule out other conditions.

Diagnosing bipolar disorder can be difficult. As yet, there aren't any laboratory tests like a brain scan or blood test that will diagnose it. In teens, bipolar disorder can sometimes be mistaken for illnesses like schizophrenia and

posttraumatic stress disorder, attention deficit hyperactivity disorder (ADHD), and other depressive disorders. That's why a complete, detailed history is so important.

How Do Doctors Treat It?

Although there's no cure for bipolar disorder, treatment can help stabilize moods and help the person manage and control symptoms. Like other teens with long-lasting medical conditions (such as asthma, diabetes, or epilepsy), teens with bipolar disorder need to work closely with their doctors and other medical professionals to treat it.

This team of medical professionals, together with the teen and family, develop what is called a **treatment plan**. Teens with bipolar disorder will probably receive medication, such as a mood stabilizer, from a psychiatrist or other medical doctor. A psychologist or other type of counselor will provide counseling or psychotherapy for the teen and his or her family. Doctors will watch the symptoms closely and offer additional treatment advice if necessary.

Living With Bipolar Disorder

Teens normally face ups and downs with school, family, work, and friends. Dealing with bipolar disorder at the same time is a very difficult challenge. One 16-year-old reader who was diagnosed with bipolar disorder at 14 wrote to us about the experience:

"I had mood swings that were the worst anyone could have ever seen. My poor parents thought I hated them, but really I was sick and didn't even realize it. But now I am on medications for my disorder and I live a pretty normal life. My family and friends support me, and they, along with my therapist, have helped me get to the point where I am today. I just want other teens to know that even though it is hard at times to be bipolar, things will get better."

If you've been diagnosed with bipolar disorder, taking your medications as prescribed, reporting any changes in how you feel or function, and participating in therapy will be key to living a successful life. In addition to treatment, making a few lifestyle changes, such as reducing stress, eating well, and getting enough sleep and exercise can help someone who is living with the condition. And many teens find it helps to join a support network such as a local support group for people with bipolar disorder.

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Binge Eating Disorder

Walker's room is his oasis. It's where he listens to music, does his homework, plays online games, and chats with friends. It looks like a typical bedroom — except for what's under the bed. That's where Walker keeps his secret stash of snacks and tosses the empty candy wrappers, chip bags, and cookie boxes.

Walker has just eaten a large packet of cookies and a family-sized bag of chips — and he hasn't even finished his homework yet. He's searching for more chips to eat while he does his math. He hates that he's overweight, but he can't seem to stop binge eating. In the back of his mind, he knows that in an hour or so he's going to feel guilty and disgusted with himself, but right now it feels like he just can't stop himself.

Understanding Binge Eating

If you gorged on chocolate during Halloween or ate so much pumpkin pie at Thanksgiving that you felt uncomfortable, you know what it feels like to overeat. It's not unusual to overeat from time to time. Most people do.

During our teens, the body demands extra nutrients to support growth of muscle and bone. So if you go through phases where you feel like eating more sometimes, that's usually why.

But binge eating is different from typical appetite increases or overeating during the holidays. People with a binge eating problem regularly eat much more food than they need. They often eat quickly, eat when they are stressed or upset (instead of just when they are hungry), and do other things while they eat (like watch TV or do homework). They don't stop eating when they're full.

People who binge eat are usually overweight because they take in so many more calories than their bodies can use. As a result, they may feel bad about themselves, feel that they lack self-control, and be unhappy about their weight, shape or body image.

Binge eating involves more than just eating a lot. People with this problem don't want to be overweight. They wish they could be slim and healthy. Many times people who binge eat feel misunderstood. It's not as easy as others might think to just stop eating. With bingeing, a person feels out of control and powerless to stop eating while doing it. That's why binge eating is also called compulsive overeating.

Emotions often play a role. People with a binge eating problem may overeat when they feel stressed, upset, hurt, or angry. Many find it comforting and soothing to eat. But after a binge, people might feel guilty and sad about the out-of-control eating.

Binge eating is often a mixed-up way of dealing with or avoiding difficult emotions. Usually, people who binge eat aren't aware of what's driving them to overeat.

Why Do Some People Binge Eat?

Most experts believe that it takes a combination of things to develop an eating disorder — including a person's genes, emotions, and behaviors (such as eating patterns) learned during childhood.

Some people may be more prone to overeating for biological reasons. For example, the hypothalamus (the part of the brain that controls appetite) may fail to send proper messages about hunger and fullness. And serotonin, a normal brain chemical that affects mood and some compulsive behaviors, may also play a role in binge eating.

In most cases, the unhealthy overeating habits that develop into binge eating start during childhood. These habits might be a result of eating behaviors learned in the family.

It's normal to associate food with nurturing and love, but sometimes food is used too much as a way to soothe or comfort. When this is the case, kids may grow up with a habit of overeating to soothe themselves when they feel pressured. They do this because they may not have learned other ways to deal with stress.

Some kids may grow up believing that unhappy or upsetting feelings should be suppressed and may use food to quiet these emotions. Some people feel that the amount they eat is the only thing they have control over when life seems difficult or traumatic.