

Strategies for Living

Promoting Your Own Health

MANAGING AND ENHANCING your mental health involves more than taking medication and limiting your exposure to stressful situations. Your beliefs, style of thinking, personal relationships, lifestyle habits, working environment and the culture you live in, are all important.

Family members and the public in general may not be informed or react with understanding to someone who is depressed. This attitude typically results from fear and ignorance. Some people may change their attitude after they learn more about your condition, while others may not. Having a trustworthy person to talk to about your frustration in dealing with the stigma of depression can help.

Mental health is an essential component of overall health. Considering your total physical, social, emotional, vocational, intellectual and spiritual functioning is important in enhancing your health. Each area overlaps and influences the others.

Improving your mental health involves looking at all these areas of functioning to determine if changes need to be made. This is true for people who have been diagnosed with depression as well as for their families and close friends.

Physical

Feeling good about yourself, as well as improving your ability to handle stress involves:

- eating nutritious foods;
- exercising regularly;
- learning to relax physically;
- getting enough sleep; and
- having regular medical check-ups.

Social

Giving and receiving support, feeling comfortable with others, and being able to trust the people around you improve your well-being. Actions to consider taking are:

- spending time with friends and family;
- making new friends;
- offering help to someone who needs it; and
- appreciating the people closest to you.

Emotional

You can feel good about yourself by accepting who you are and where you're at through:

- enjoying time by yourself;
- taking pride in your accomplishments;

☛ "Even though it meant a big cut in pay, moving to a more physical type of job made the difference between being depressed and feeling well."

☛ "One problem with having nothing to do is that you can't stop and rest."

- ☛ learning from your mistakes;
- ☛ not losing hope; or
- ☛ being kind to yourself.

Vocational

Everyone needs to feel productive. Enhancing your health and well-being means looking at the work you do and making adjustments if necessary. You might feel you need to:

- ☛ consider your career options;
- ☛ work around the yard or house;
- ☛ volunteer your time; or
- ☛ create something by building, painting, writing, knitting, etc.

Intellectual

Keep your mind active. Try:

- ☛ reading a book;
- ☛ seeing a movie;
- ☛ visiting a museum or an art exhibit; or
- ☛ learning something new.

Spiritual

You may need to find sources of inner strength and comfort that give you a sense of purpose in your life. This can be done by:

- ☛ nurturing your hope;
- ☛ living one day at a time and making the most of every day;
- ☛ using meditation or prayer to help the healing process; or
- ☛ keeping a journal or diary to record your thoughts, feelings and ideas.

The feelings I have are not just black. Depression and mental illness are "pure hell." Take it from me because I know. I've suffered for 23 years from clinical depression. There are others who have suffered longer and still some who have suffered a whole lifetime.

But it doesn't have to remain a living hell when there are professionals, such as doctors and nurses, who care. They can meet our needs and give us the tools, but we have to use them to our advantage. It is difficult pulling yourself up. But remember not to give up and you can rise above it. And you will feel great as a result.

Our therapy consists of antidepressants, injections, group therapy and shock treatments to name a few. But a sure way to understand and grow is to think and feel positive, take your medication faithfully, eat well-balanced meals, exercise regularly and learn about your mind and body.

If you feel like punching something around, try a batch of bread dough and no one gets hurt. You can be pleased with the results, not only with yourself, but with your environment.

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Hope Makes a Difference

When people talk about managing a mental health condition, words like "caring" and "coping" are often used. But many times, even though you know that others **care** and you know there are things you can do to **cope**, you still don't feel like moving ahead. In other words, sometimes it's difficult to **hope**.

Hope is much more than an intangible emotion where you wish, expect or wait for good things to happen. Hope is active; it means moving forward, confidently searching for meaning, having something to live for. The well-known psychiatrist Karl Menninger said, "Hope is an indispensable factor in psychiatric treatment."

When times are difficult, sustaining your hope can be a challenge, especially if your condition is chronic. We can learn about our own hope and be more conscious about keeping it through the tough times. Practising hope will enhance the things you do to cope and the caring that others give to you.

Hope is not a magic wand to make problems disappear. Practising hope takes effort. And, even if you believe you have lost your hope, it is possible to recover it.

Practising hope is not something that others can do for you, but they can be partners in strengthening your hope.

Hope is nourished as you:

- focus on possibilities more than limitations;
- maintain healthy relationships rather than staying isolated;

- give a place to your creative and intuitive parts; and
- practice the language of hope when talking to yourself and others.

Hope is the voice inside us that says "yes" to life. In doing so, we open ourselves to tolerating difficult times and doing what we can to make our lives positive. We also do these things with the confidence of knowing that more and more research supports the idea that hope makes a difference.

Some Albertans who have experienced the power of hope in their lives have joined together and formed the Hope Foundation. Its mission is to increase understanding of the role of hope in human life. As a result, people individually and in groups can use hope to enhance their quality of life, particularly in relation to health, learning and spirit.

For more information contact:

The Hope Foundation

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Edmonton, Alberta
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Information provided by The Hope Foundation.

Lifestyle Considerations

PEOPLE WHO ARE learning to live successfully with depression are making lifestyle changes. Here, in their own words, are some strategies they are using.

Exercise

"I try to exercise for at least 30 minutes at least three times a week. I've learned that physical exercise is a natural way of reducing the symptoms of depression, and it has a positive effect in elevating mood."

"I try to exercise both indoors and outdoors. If I don't have enough energy to 'work out,' I try to walk as much as possible."

"I use energy to get energy. I have trouble being motivated to exercise when I'm depressed. So I do things like lying on a mattress and kicking my legs and feet, or walking briskly through the house."

Sleep

"A sleep routine is important—having regular times for going to bed and waking up. Getting too much sleep can make me feel just as tired as getting too little."

"Look at the medications you take because they may change your sleeping patterns."

"Keep the time before you go to bed calm. Listen to relaxation tapes or do relaxation exercises. Avoid arguments and other kinds of stress."

"In the evening, I avoid drinking coffee, tea or other beverages containing caffeine. Try warm milk instead."

"I plan in advance what I will do if I can't sleep. For example I tell myself, 'If I'm not asleep in 45 minutes, I'll get up and do the ironing while I watch TV.'"

Drugs and Alcohol

"Ask your physician or pharmacist whether the medications you take are safe to mix with alcohol."

"Don't use drugs or alcohol to 'self-medicate'. I found that using alcohol as a way of getting to sleep or taking greater amounts of medications to increase their effects is dangerous."

"If you think you have a drug or alcohol dependency problem, get help. Talk with your mental health worker, contact Alberta Alcohol and Drug Abuse Commission (AADAC), call Alcoholics Anonymous or Narcotics Anonymous."

Employment

"Return to work when you feel ready. If in doubt, discuss this with your doctor or therapist."

"Think about returning to work gradually, for example, doing part-time work or volunteering."

"Know the stressors in your job and have a plan about how to ease them. Discussing potential problems with supportive co-workers or a supervisor can help."

"If you can't return to your job, consider other kinds of work that are more suitable for your abilities and energy level."

"Career counsellors are available to help you explore a new career."

"Look into retraining or specialized employment programs for people recovering from mental illness."

"Find sources of financial and emotional support to help you ease your way back into working."

"Find other ways of improving your self-esteem besides those related to a career."

Social Life

Friendships are very important. Being able to pick up the phone and call someone during down times has been a life saver.

"I'm shy, but volunteering helped me to meet new people and my life is fuller now."

"Talking to others helps me to get my mind off my troubles. It's like a mini-vacation."

Legal Considerations

YOU MAY NEED to be prepared for periods of disability, particularly if your depression is severe and recurrent. Making plans when you are well allows you to have more control over your future. Your planning should include family members, friends and other people who may be affected by your illness. You may also want to consult a lawyer to make legal provisions for the times when you are unable to make decisions for yourself.

Two types of legal arrangements are described below—the Enduring Power of Attorney and Trusteeship/Guardianship.

Enduring Power of Attorney

In 1991, the Alberta *Powers of Attorney Act* was passed. It allows people who are well now, but may become mentally unable to plan how they will be taken care of and how their property and financial affairs will be administered in that event.

An Enduring Power of Attorney authorizes an individual you choose to handle your personal affairs during a period of physical or mental disability. **The Enduring Power of Attorney can be structured in such a way that it will not come into effect unless you become mentally incapable of managing your own affairs.**

If you are considering this, you'll need to think about several things. The following questions can get you started.

- ❖ When is the best time for me to make these legal arrangements? (You must be considered capable of giving instructions to a lawyer.)
- ❖ Under what conditions should my Power of Attorney take effect?
- ❖ Under what conditions should my Power of Attorney no longer be in effect? In other words, what criteria will determine that I am able to handle my personal affairs again?

- ✦ How do I want my affairs managed if I become disabled? What kinds of decisions do I want made for me?
- ✦ What actions should be postponed? For example, you may want to specify the conditions under which you should be hospitalized.
- ✦ Who is the best person to handle my affairs? Who do I trust to make decisions that will be in my best interests?

Trusteeship and Guardianship

Alberta's *Dependent Adults Act* provides for the care of adults (over the age of 18) who are unable to take responsibility for themselves or for their financial affairs. The *Act* allows the appointment of a guardian and/or a trustee. A guardian is responsible for the "person" of dependent adults, not their estate. A trustee manages the dependent adult's estate and is not responsible for the person.

A person wanting to be appointed as a guardian and/or trustee, must make an application in court, supported by reports from a physician and/or psychologist. Based on the information provided, a judge will decide about trusteeship or guardianship and specify the conditions under which it will occur.

Notes

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Suicide Prevention

ANY ONE OF US may consider suicide as an escape during a time of personal crisis. Suicide need not claim as many lives as it does. There is help available and we all play a part helping suicidal persons get the help they need.

People with depression are especially vulnerable to suicide. Estimates are that more than 15 per cent of people with recurrent major depression eventually commit suicide, while many more attempt it. The end of a period of depression is the time of greatest risk for suicide because, as depression lifts, there is energy to carry out a suicide plan.

Be alert for the following signs.

Behaviours

- ✧ cancelling plans
- ✧ hoarding medications*
- ✧ a change in behaviour that is noticeable and sudden (this could be withdrawal or increased risk-taking)
- ✧ signs similar to those of depression, including eating and sleeping disturbances, low energy level, crying, isolating from others
- ✧ using more alcohol and/or drugs
- ✧ making final arrangements (e.g., making a will)*
- ✧ giving away possessions.

Verbal clues

- ✧ expressing feelings of helplessness and hopelessness
- ✧ hinting at doing away with themselves
- ✧ talking or joking about suicide
- ✧ expressing relief that it will all soon be over
- ✧ talking about a specific suicide plan, including the method, date, location*
- ✧ talking about having access to the means for killing oneself*
- ✧ writing a suicide note.*

** All of the signs listed are important, but those asterisked indicate that there is an urgent need for the person to be assessed by a mental health professional.*

What Can Family and Friends Do?

- ✧ Ask the person, "Are you thinking about suicide? Do you have a plan?"
- ✧ Listen without making value judgments. A depressed person often needs a supportive ear much more than being told what is wrong, or what to do.
- ✧ Believe what the person says and take all threats seriously.
- ✧ Never keep someone's suicidal feelings a secret. Share the responsibility with others who are trained to deal with suicide.
- ✧ Act immediately if you feel someone is at immediate risk for suicide. Encourage the person to seek help or call the crisis line, the police, emergency services or a hospital to ensure the person's safety.

Make Your Plan for Living

Plan for Life

Occupation: _____

Diagnosis: _____

I have episodes of depression. I have attempted suicide in the past. I stabilize my illness with medication and regularly attend a support group.

Doctor's/Therapist's name(s) and phone number(s): _____

If doctor/therapist is not available, I will call the following professionals or services :

If I start to think about suicide, I will contact these trusted friends and family members (in order of priority):

Name

Phone Number

1. _____

2. _____

3. _____

I know that I am becoming depressed when I experience the following warning signs:

If someone I cared about was considering suicide, this is what I would say to him/her:

Preferred hospital: _____ Health care #: _____

Activity Checklist

☐ Contact doctor/therapist

☐ _____

☐ Contact family or friends

☐ _____

☐ _____

☐ _____

Adapted from the brochure "Suicide and Depressive Illness," National Depressive and Manic-Depressive Association, Chicago, IL.

When Judicial Help is Needed

In Alberta, the *Mental Health Act* provides for the involuntary hospitalization of people who:

- are “suffering from mental disorder”;
- are considered to be a danger to themselves or others; and
- refuse to seek medical help.

In some emergency situations, judicial means are necessary to have a person hospitalized. Some ways of doing this are described below.

1. Contact the person’s physician or psychiatrist to have an admission certificate issued. Following are the relevant parts of the *Mental Health Act* to explain the purpose of the certificate and how it is used:

“When a physician examines a person and is of the opinion that the person is:

- a) suffering from mental disorder;*
- b) in a condition presenting or likely to present a danger to himself or others, and*
- c) unsuitable for admission to a facility other than as a formal patient*

he may, not later than 24 hours after the examination, issue an admission certificate in the prescribed form with respect to the person.” (Section 2(1), Mental Health Act)

“One admission certificate is sufficient authority:

- a) to apprehend the person named in the certificate and convey him to a facility and for any person to care*

for, observe, assess and detain and control the person named in the certificate during his apprehension for conveyance to a facility, and

- b) to care for, observe, examine, assess, treat, detain, and control the person named in the certificate for a period of 24 hours from the time when the person arrives at the facility.*

The authority to apprehend a person and convey him to a facility under section (1)(a) expires at the end of 72 hours from the time when the certificate is issued.” (Section 4(1)(2), Mental Health Act)

2. Contact the Family Court to obtain an order (warrant) for apprehension. This can be done by anyone who has reasonable and probable grounds to believe that a person is:

- a) “suffering from mental disorder, and*
- b) in a condition presenting or likely to present a danger to himself or others*

[This person] may bring information under oath to a provincial judge.

If the provincial judge is satisfied that:

- a) the person is in a condition presenting or likely to present a danger to self or others, and*
- b) an examination can be arranged in no other way,*

he may issue a warrant to apprehend that person for an examination.” (Section 10(1)(2), Mental Health Act)

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