

SUPPORTING THE MENTAL HEALTH OF CLIENTS

OMSSA Mental Health
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QUICK AUDIENCE POLL

- What percentage of clients would you estimate have relapsed in either mental health, addictions, or both?
- 5-10%
- 20-45%
- 50-60%
- 75% or more



NO RESEARCH AS OF YET BUT...

- Personally observing anywhere between 50%-60% of clients have found themselves relapsing in either addictions or mental health or both.
- Attributed to the absence of protective buffers such as:
 - In person groups
 - Face-to-face counselling
 - Physical proximity to family, personal supports, peers, significant others
 - Feelings of isolation, disconnectedness, loneliness
 - Touch!
- Additional complications arising from “being alone inside their heads too much” ~ revisiting traumatic memories



WHAT ELSE IS MISSING?

- What was shared with you that clients experienced during quarantine and are currently experiencing with the ongoing restrictions?
 - Example: Immediacy of communication, face-to-face interaction, etc.



WHAT HAVE BEEN YOUR OWN STRUGGLES IN SUPPORTING CLIENTS?

- Feeling discouraged?
- Feeling defeated?
- Feeling helpless to do more?
- Feeling weighted down by limitations on resources?
- Loss of motivation?
- Feeling disconnected?
- Wanting to avoid clients?
- Over functioning or overworking to support clients?
- Tired of explaining why things are the way they are now?



ACKNOWLEDGMENTS

- COVID is not going away any time soon.
- We are going to face obstacles and barriers that we could not have anticipated.
- Policies will or have changed.
- Interactions with clients will change (ex. time limitations on home visits).
- Your own personal fears or anxieties around COVID.
- We are going to have to get creative.
- Let's begin...



WHAT ARE WE PREPARING FOR?

- The inevitable relapse for upwards of 60% of recovering addicts or alcoholics within 12 months who do not receive formal treatment.
- The shame, sadness, guilt, anger and defeat many people experience when trying to quit substances and experience a slip, lapse, or relapse.
- If a person relapses in their SUD, mental health relapse soon follows.
- The opposite is also true as those who relapse in mental health issues may also begin to self-medicate again.



ADDICTIONS TRIGGERS AND WARNING SIGNS

- Some common triggers include:
 - Negative emotions that stimulate drug seeking behavior (stress, anger, fear, frustration, guilt, anxiety, depression, loneliness)
 - Friends, locations or events that remind the addict of using
 - Exposure to drugs of abuse
 - Seeing or sensing an object of addiction (e.g. seeing a syringe or watching a beer commercial)
 - Social pressures to use
 - Positive emotional states (having fun and wanting to feel even better)
 - Using other substances (e.g. a recovering heroin addict who continues to drink alcohol is at a higher risk of relapse)



ADDITIONAL CONTRIBUTORS TO RELAPSE

- Certain situations can also make a relapse more likely. The loss of a loved one, conflict with others, a change in marital status, health problems, major financial changes and boredom are all circumstances that can lead to relapse. Some warning signs to advise your clients to be aware of include:
 - Overconfident attitude
 - Self-pitying attitude
 - Dishonesty
 - Hanging out with people from drug use days
 - Changes in personal hygiene, sleep or appetite
 - Sudden changes in routine and irresponsible behaviors (skipping school, work or appointments)



PROCESS OF RELAPSE

- There are three stages of relapse.
 - Emotional relapse
 - Mental relapse
 - Physical relapse



SIGNS OF EMOTIONAL RELAPSE

- Anxiety
- Intolerance
- Anger
- Defensiveness
- Mood swings
- Isolation
- Not asking for help
- Not going to meetings
- Poor eating habits
- Poor sleep habits



SIGNS OF MENTAL RELAPSE

- Thinking about old habits, old haunts or old people
- Glamorizing past use
- Lying
- Hanging out with old using friends
- Fantasizing about using
- Thinking about relapsing
- Planning drug use around other people's schedules



PHYSICAL SIGNS OF RELAPSE

- Driving to dealer's place.
- Driving to LCBO or Beer Store.
- Shaking, sweating, confusion, anxiety, restlessness, agitation, salivating, pacing, sleeplessness, loss of appetite.



WHAT ARE WE LOOKING AT?

- A "relapse" is when problematic symptoms return or worsen over time.
- Support a client in evaluating their own personal warning signs and create a plan to intervene.
- Ideally, this is completed before symptoms become a major problem and help lessen the effect of symptoms during stressful times.
- This is based on the principles of "self-management".



RELAPSE PREVENTION PLANNING IS NECESSARY

- When it comes to preventing relapse, there are three important parts to self-management:
 - identifying personal warning signs
 - creating plans and taking action
 - seeking outside help when it's needed
- The best time to do this is when a client is well.



RELAPSE WARNING SIGNS

- I doubt my ability to stay sober but keep this a secret.
- I'm afraid, but I deny it.
- I've decided I can be abstinent without recovery.
- I am overconfident in my recovery.
- I avoid talking about problems or my recovery.
- My life is out of balance. (I work too much or too little. I get too much exercise or very little or none. I overeat or don't eat enough.)



CONT'D

- I overreact to stressful situations.
- I am isolating physically or emotionally.
- I feel depressed or anxious.
- I am making unrealistic plans.
- I ruminate about the past.
- I never do anything to have fun.
- I can't relate to people in my recovery program.
- I am easily angered or irritated.



CONT'D

- I am blaming others for my problems or the past.
- I have a chaotic daily schedule.
- I lack structure in my days.
- I live with people who drink or use other drugs.
- I medicate with tranquilizers, alcohol, or other drugs.
- I lack energy and sleep excessively.
- I openly reject help from others.



CONT'D

- I resent the people closest to me.
- I am apathetic; I don't care what happens.
- I don't want to take responsibility; I expect others to take care of me.
- I think about drinking and drugging, or experience cravings, but don't share this in my recovery circles.
- I am experiencing a great deal of self-pity.
- I am consciously lying to others.



CONT'D

- I am experiencing anger and resentments that I keep to myself.
- I am hanging around drinking or using friends and “wet places.”
- I believe I could drink or drug again and control it this time.
- I think about seeing a doctor to get a prescription for mood altering drugs.
- I don't believe I'll ever have fun sober.
- I don't take positive action to improve my circumstances.



CONT'D

- I skip meetings and feel resentful if anyone mentions it to me.
- I unrealistically think I should be happy all the time.
- I drive by places where I used to buy liquor or drugs.
- I am still seeing the doctor who prescribed me my drugs.
- I haven't emptied my house of alcohol or other drugs.
- I don't talk to my sponsor, and I'm not working the Steps.
- I sit in the back of meetings and don't participate.



CONT'D

- I overreact emotionally.
- I act happy, as if everything is great, but I feel miserable.
- I am thinking I could use a different substance than my drug of choice, and I wouldn't have a problem.
- I feel like I am bouncing from one crisis to another.
- I think I'm more fun to be around when I'm drinking or high.
- I don't get to know anyone in recovery.
- I get to meetings late and leave early.



CONT'D

- I don't think I can date or be romantic without getting slightly buzzed.
- I don't believe I'll ever be able to rebuild my life.
- I feel hopeless.
- I am thinking about using tranquilizers or sleeping pills.
- I think I'm too young or too old for recovery.
- I have no confidence in myself.



AUDIENCE QUESTIONS

- Although these warning signs were created for addictions, how many of you saw similar warning signs for relapsing in mental health issues?
- Which of these stood out the most for you?



DISCUSSION TIME!

- What has been your current advice for helping clients navigate the current restrictions?
- What more do you feel you need to help your clients?
- What advice or suggestions can you offer your peers that have worked well for your clients?



IMPORTANT ELEMENTS TO CONSIDER

- Adding structure to the day.
 - Dividing the day into segments
 - “Making the day smaller”
 - Choosing one activity per segment of the day
 - Rewarding the small accomplishments
 - Eating habits, sleeping habits, getting a little bit of exercise
 - Incorporating creative elements
 - Finding meaning, purpose, setting goals, achievements



MENTAL HEALTH RELAPSE PREVENTION PLANNING

- Signs that show the client he/she/they are not feeling well
- At what point the client wants outside help: As soon as they notice warning signs? When they can no longer manage symptoms on their own?
- Where to go for help or who to contact in an emergency situation
- What treatments they would prefer
- A list of current medications and any other treatments (including alternative treatments)
- Contact information for health professional, the nearest emergency room, and contact information for the loved ones they want notified
- Client's action plan may also include practical steps that their loved ones agree to take.



WRAP-UP

- Unquestionably, we are supporting clients with pre-existing vulnerabilities in preventing further decline in their mental health conditions in times we could never have anticipated would happen in our lifetimes.
- This is going to challenge us all in our efforts to support our clients effectively.
- We are not alone and the power of many minds can alleviate the pressure of trying to manage these circumstances with our clients.
- Reach out to your colleagues. Reach out to neighbouring communities.
- Most importantly, take care of yourself as you tend to the needs of others.

THANK YOU!

I wish you all the very best and stay healthy!

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- Thank you all for your contributions today and for helping your fellow colleagues in supporting their clients. We are truly in this together and with the power of many minds, we can help our clients navigate these very trying and difficult times.