

Pocket

***Your
Anxiety***

***A Layman's Guide for
Coping with
Anxiety and Depression***

James G. Linn

Pocket Your Anxiety

A Layman's Guide to
Coping with Anxiety and
Depression The Full Story

by James D. Livi

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This booklet is available from the author upon request at \$7.00 each. To contact the author please call (315) 458-6642 or email at jim.livi@mac.com.

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Note from the author: This is a rough draft of the final book.

1

Concrete Floor

Lying on the concrete floor wasn't where I expected to be. My friend Patrick looking down on me with a face of confusion and compassion, he didn't know what to say. All I could say, over and over again was, "I'm sorry, I'm sorry." That was a day in September of 2000.

After 10 years working in the printing industry, an opportunity came up. The company I worked for closed its in-plant print shop and asked me if I wanted to buy some of its equipment. Like many entrepreneurs, I was excited about starting my own business. A deal was struck between me and the corporation to buy a printing press, a paper cutter, folder, light table etc, and I had the funds to remodel a large room in the church I was attending. Patrick, an associate pastor/carpenter, volunteered to help me put up the walls to secure the business. There were plenty of days of designing, floor planning, hammering and great discussions with my friend. Another friend did all the electrical work and I was off and running, setting up each piece of equipment. This was a dream come true, one, that I hadn't really ever expected to come to pass.

After setting everything up it was time to open up for business. This was the beginning of a journey, one I wasn't prepared for, nor was my wife.



2

A Dream

When I bought the equipment it was assumed that all the customers I had been printing for previously at the print shop would come with it. I had an account with the corporation who sold the machinery to me, so there was good work there. But I was duped into thinking I was safe and secure with more work to come. Yes, there were a few customers, but the work was different and not as lucrative as expected. My capital was going straight to the many supplies needed and my own personal cost of living. Along with running the equipment, I had to get out and do sales.

Two years previous, I traveled throughout Rome and Syracuse, NY as an account representative for Mohawk Valley Printing. Cold calls and miles on the car was the daily drudge. It was a challenge because I didn't enjoy the "rejection". In sales, I suppose you have to have it in your blood to enjoy it. It was like having a job at minimum wage, then trying to build up some clientele to earn commission. It took toil on me. That is, my car and me. My blue Maverick, low to the ground and feeling a bit too old for this.

Deep inside, I was in the tension of being glad for this sales job, but hating it at the same time. Here comes another day of calls and persuasion. No training for this, so I was learning the curve the hard way. No mentoring, just, "hit the road and make it come in." Sales were key.

Truly a no-brainer, but not for me.

I brought my sales experience into my new company and just after a few days, I was agonizing through the reality that, "this was it." I wasn't just a pressman or designer anymore, but a salesman who had to sell himself.

Finances became real tight quickly and I needed to make a sale. A new quote opportunity came in and I was determined to get the work. So I called on a previous co-worker who was a print estimator. "Chuck, I have this job to bid for and want you to quote it for me," I explained with a bit of anxiety and hope. I had been quoting already, but this time I wanted to make sure it was a done deal... Chuck was the guy for this one.



Instead of feeling comfortable and confident, anxiety was building. It was unusual.

After receiving his quote, I still questioned myself and did an estimate anyway. Two days later I gathered strength, pulling myself into the car and headed directly to my customer to submit the bid. I can remember sitting in the graphic arts office with Steve. Being a friend of mine, he was always so gracious and easy to work with. Instead of feeling comfortable and confident, anxiety was building. It was unusual.

After Steve reviewed my bid, his eyes said it all, "Jim, I'm sorry, but another company has come in lower." Silence, sweat, thoughts of panic. I heard him with garbled hearing and sat stunned. I had my other bid in a folder. Now tainted with my anxious sweat, I went into panic mode. "Steve, I know this doesn't normally happen, but would you allow me to present another bid?" His face sunk and ever so politely declined. "I can't do that, but I'll tell you what the other company came in with. Maybe it will help you for the next one."

As I said, Steve was my friend, but this wasn't the friendship I was hoping for. I needed the work! I struggled with cussing him out and holding it back. Where was the next job to come from? I had no idea.

Walking out of their department that day was excruciating. No, it was totally miserable. I was dangling by a thread. Going back to the shop, I felt like a teenager going back to a class I hated.



3

Why Can't I Get Beyond This?

There was numbness and something else going on. At my new shop I went to the books to check all the numbers. Maybe I had enough to make it another week, but what then? The credit cards had been a lifesaver, but now, they were my enemy. The debt took on another face. It was screaming at me and I was shuttering. Exhaustion hit me in the throat and gut. Dryness, sweat, flashes of heat engulfed me. I need to end this day now and go home. It was only moments after I crumbled into the couch; I was out, really out.

The next day had new meaning. I was about to take this head on with new vigor... but the strength wasn't there. Sitting at my work desk, looking at the books again, thinking of making some calls... I was stalled. A daze came over me. A fog of sorts. Really, it's hard to explain. I started the day with some hope and then it drained out like water flows when you've just unplugged a sink. Where was I headed? Defeated, sad, miserable, angry, disappointed, exhausted. These were a few of the words that described my emotional and mental state

that day. I would sit at my desk and just stare at a to-do list. But no real strength would rise up. I had to call someone, a friend who could pull me out of this mess. But how deep was I?

His name is Bob B., a sole proprietor like myself. I had printed his business cards and we were also friends through church. Perhaps Bob could understand.

Bob was happy to come over to the shop the same day. I didn't know what to say really, other than try to explain my desperateness. Being an excellent listener, he allowed me to go on for an hour or so. It felt good to talk. Some of this feeling was being relieved, thank God. I could see Bob's eyes focused on me, somehow absorbing my pain. Bob then shared his stories of success and failure. I respected him and wanted to hear every detail. I also wanted to just be with someone, someone who understood.



Bob was a true friend, encouraging me, sharing everything positive he could think of. He wasn't the sort to tell me to pull myself out, but looked at my situation with some keen sense and compassion.

He was in the cleaning business and got some incredible contracts with banks, corporations and industrial companies. Bob knew how to price it just right. He was the salesman that I wish I could be.

At one point in his career, he started up an ice cream vending business. It was a dream of his and after some success with the cleaning contracts; he laid out a ton of money to get this business together. Unfortunately, that summer the rain destroyed the season and his debt came thrashing down. He explained how he had to go back to cleaning, win some new bids, and pay off the incredible debt. He was determined and managed to do it without losing his home. Hearing Bob go through his journey helped stir hope inside my bruised brain.

About 3 hours later Bob took off. I was better, but I was surprised that this good feeling leaked. And it didn't take long. The next day I had to ask Bob to come back again. Amazingly, he did. Bob was a true friend, encouraging me, sharing everything positive he could think of. He wasn't the sort to tell me to pull myself out, but looked at my situation with some keen sense and compassion. We related through business and faith and I needed that. I fed on it for 3 or 4 days as Bob would return and share more hope. I would rise up inside with a new vigor, start on a task, and then leak again. Why? Why can't I get beyond this?



4

What Are These For?

My wife, Deb, was trying to help me sort through my emotions. She hadn't seen me go through this kind of battle before. I was changing and she was getting scared. So she encouraged me to see the doctor. The nurse practitioner was good. She heard my story and wrote out anti-depressant scripts. "What are these for?" I asked. "You're under tremendous pressure and these will help pull you up some. We'll see how they help, but it will take some time before they truly begin working," she explained with concern on her face. I was puzzled. This was the first time I had heard about anti-depressant medication and I was about to take some.

With a glimmer of hope, I began the medication, hoping for something quick to happen, even though she said otherwise. I had a business to get back to, bills to pay and a life to live. "*This better work,*" I thought anxiously. I don't remember precisely, but in a day or two, I plummeted down further. The answer wasn't coming and I was hurling further downward. I could see severe worry written on Deb's face, which made me even more anxious. I made the call to the doctor's office and

tried my best to explain what I was going through. The nurse was puzzled and set up another appointment.



Envision a bee buzzing this way and that over your head and you're trying to swap it. Damn that bug!

She explained that this was beyond her and referred me to another doctor in the office. I felt like I was falling out of control. "I thought this medicine was supposed to pull me up!" I said, almost in a sob. He was a great listener and also did his best to educate me on the delicate balancing act these medicines touch on. "What are neurotransmitters?" I asked, getting more confused. "You mean my brain is getting short circuited somehow?" After about an hour, trying to listen, learn, and articulate what I was facing, I was more frustrated. My thoughts were buzzing everywhere and it was incredibly difficult to hold them back. Envision a bee buzzing this way and that over your head and you're trying to swap it. Damn that bug! I had to ask Dr L. to repeat over and over his explanations while I would cut in to share my further frustrations. *"This wasn't the way my brain worked before. I'm a businessman, a risk taker and this trip has to stop!"* I thought to myself.

With another set of scripts I set out to overcome whatever damage was inflicting me. The only thing though, I found I couldn't put a bandage on my brain. All this was new territory for Deb and I and with no band aides, no re-assurance, and

just more questions we gathered up pamphlets and headed back home. By now, home wasn't the haven I had enjoyed before. Where was I going to find peace again?



5

Puddle of Anxiety and Depression

Back to the shop and back to business. I was determined. I started the press and printed off some new business cards for myself so I could get out and perform the sales and marketing. On the rode I felt more sickened and fear was increasing each moment. Something fiery was lodging in my throat. "I can't do this. Not in this shape," I discovered. The drive back to the shop was filled with a deeper disappointment than I had believed possible.

Sitting at my desk, I strained to focus. Concentration was a thing of the past and I felt like I was losing it fast. Remember Patrick, my good friend and associate pastor at the church? He dropped in momentarily for a chat but saw me on the

floor. I was moaning and crying. He bent down to give me a tissue and just listened for a while. No words, just listening. When I could manage to say something, only "I'm sorry," would come out. This journey was unbearable and the disappointment I felt was tearing me in places I didn't know could be torn.

Patrick is about 6 inches taller than me and quite strong. I think he picked me up and helped me to a chair. But I can't recall much after that. He reached for the phone and called Deb to let her know what was happening. So she came down to drive me home. She was furious with the doctors and made some calls herself. They couldn't figure out why I was getting worse. After all, the medicine had been in my body for at least 3 weeks! Something should be improving. The combination of the doctors not knowing what to do and us in the fog threw us into territory beyond our comprehension. Like landing behind enemy lines without a clue which direction was safe to go, if you're not trained for it, I imagine fear strikes the heart and freezes up your reflexes.



Sleep was no longer a given, it was a gift.

Deb would return to her daily work routine while I stayed at home, trying to just sleep and not think about the mess. Hanging out in the living room, watching TV or reading with the hope that I would drift off to sleep was my goal for several days. Somehow, with the advise of my doctors, if I held on long enough, the meds would kick in and life would get better. I could return back to the business. Insomnia had

its own ideas though, making the illusion that time was slowing down. Sleep was no longer a given, it was a gift.

I returned to the doctor after another week hoping to bring good news. Dr L. was very curious why I wasn't improving. He had a way of trying to make me laugh. But that was getting harder and harder for him. Somehow I knew I was slipping way too far out of control and my doctor's concern was confirming it. He didn't have the answers and so where was I headed?

Deb and I talked about the business, realizing that it just wasn't going to work out. At least for right now. We didn't want to give up all hope. Our faith told us differently. God doesn't bring us into situations without answers to get out. An answer would come.

Deb was the main "hope bearer" by now. I was a puddle of depression and anxiety becoming more sleep deprived. So I "decided" to let Deb make all the decisions from here on out. It was just too hard for me. To run the printing business was a sham, so it was time to take a step of faith and look for work. I couldn't give up. Not an entrepreneur.

I made a call to a friend of mine who I worked with before. Remember Chuck? "I'm working at EMS now, and I can talk to my boss. Maybe something can open up," he said sounding puzzled by the sound of my voice and my explanation. It was still the year 2000 so the economy

was good and I was asked in for an interview. Incredibly, I was hired and came in to learn one of their printing presses the following week. Something concrete was happening here. A new opportunity to turn things around! I was so grateful. What was the next turn?

6



Overnight

My new boss intro'd me to the shop and the guy who would be training me. Inside both of my pockets were a pile of Tums. My throat had been burning up for the last few weeks and so I was prepared for this day. In the morning my trainer went through the basics of the press... "This is how this works... Have you run this before?... We store paper over here. The press won't work right unless you keep this part tied up like this." I was listening and my throat was burning, distracting me every moment taking Tums every 5 minutes without any relief. But I was pressing on. After trying to enjoy lunch we headed back to the press. He launched into more training, but my head was not working right. Fear was rising up, from my belly through my throat and obliterating my ability to capture what he was saying.

I was panicking inside with a realization that I couldn't learn from this guy. "I can't understand what I'm supposed to learn. This is an easy, dumb press and I can't keep up with him, "was going around in my mind over and over, like a drying machine throwing clothes around in a heated tumble. But it was my thoughts that were tumbling and I was scared. At the

end of the day, the boss came up to me and said, "Well, I hope you come back," with laughter in her voice. In my mind, I was finished there. No way am I coming back.

On the way home, I got lost! I actually didn't know where I was headed. I knew the Syracuse area, but my bearings were shot and I had to work as hard as I could to concentrate.

"Where should I go? Where is Deb? I don't think I can make it home. What's happening?" After pulling over and straining to make sense of the moment, I remembered where Deb was. It was like a gift of understanding hit me. Just enough to get me to her. Deb worked as a nanny, so I drove to the house.

"Deb, something is seriously wrong," I said, almost crying in her lap. I mumbled my way through what happened that day, telling her I can't go back. "I'm sorry, but it's like I can't think straight enough to even learn. I'm useless like this. I need more help," came out of my mouth with quivering lips. Deb held onto me, thinking and praying. She had to stop holding on and go take care of one of the children. I picked up my baby niece and held on to her. Somehow her warmth against my belly and chest brought comfort. I rocked and rocked and she enjoyed the moment. Ah, relief. Relief, from the most unsuspecting source, my baby niece.



I knew I was melting down and needed something and someone to stop it before I evaporated.

When Deb's boss came home, we all talked together and agreed for me to visit St Joe's CPEP unit. I knew about it from

visiting a friend there who had had an emotional melt down a year ago. I knew I was melting down and needed something and someone to stop it before I evaporated.

The waiting room was scary, because other people, out of their minds, were hanging out, waiting and waiting. A police officer was there to keep things under control, cause it seemed as if, at any moment, somebody would go off yelling, making demands and bothering everyone else. The stress was draining us all.

When a nurse told me to remove my shoelaces, it dawned on me that I was definitely entering a "controlled environment" and they didn't want me to have any tools to kill myself. I was thinking, "What is going to happen now? What is this new world am I getting into? It was my friend who needed help before, but now it's me in here. And Deb is on the outside looking in with her own anxiety."

Somehow, there was sanity within the insanity of the moment. Out of control, but in control by someone else. I didn't know these people, but I trusted this was the right direction. At least for now.

Staying over night in a small room, actually two or three nights brought a new reality to light. Yes, I'm in trouble. My brain isn't working. I can't seem to learn and I'm in a psych ward for help. From the world of owning and running my own business to humbled and numb. There wasn't much going on in my head that made sense, but a different and odd peace was lingering. This controlled environment stimulated peace within the chaos. Without a doubt I held onto that small peace. This had to be God.



7

Christmas Treatment

I spent two weeks on the psych floor after being first diagnosed with a bi-polar disorder. Then they changed it to major depression with anxiety. I came off all meds that I was on and started something new. It was another drug I had never heard of.

Friends from church started visiting me. Almost every day I had a visitor or a call from someone concerned about me. Deb was there night after night talking about my treatment plan, which I was confused about. My doctor was a big dude with a thick German accent and his office was always cold, so I would shiver during every session. We didn't connect well at all, but I was told he was an excellent doctor. So I kept trying to work with him as he told me about medicines and told me, in no uncertain terms, to stop trying to be a martyr. As I said, we didn't connect well, especially since he wasn't allowing Deb to visit with him. I spoke to a social worker that became my advocate and set up a family meeting between Deb, the doc, her and myself. In that meeting, Deb complained about my insomnia and asked if I was being helped. The response shocked her because he admitted they didn't have enough

information about this. I was becoming more sleep deprived and thus, any treatment seemed useless. The doctor did say he had a new medicine for me to try and would start me on it tomorrow. He gave me the name, but I was unfamiliar. I explained that I didn't want to take the same medicine my primary doctor was giving me. He assured me it was not the same.

That evening I was surprised to find out the new medicine had already been prescribed and was a generic version of the meds I was on previously. I knew that it wasn't working before so why would it work now? And I was so angry that the doctor had lied to me. In a moment of faith, I swallowed the pill, with lumps building up in my throat, thinking I knew I was headed for more trouble. Later I found out that the meds were interacting with an antihistamine making the depression more severe. Now that I was off the antihistamine, progress could be made.



The incredible relief I felt while listening to this ambient music was a true gift!

More experimental meds were tried to put me to sleep without success though. Two or three hours of rest were my existence. But after talking to other patients and their experience of wondering the floor without days of sleep, made me glad for the little I had. One day, Deb brought in a CD player with a sleep CD. The incredible relief I felt while listening to this ambient music was a true gift! I shared it with

some of the other patients as well. It was amazing to feel something fresh inside because I was able to help my new "friends."

Finally, one day, a new medicine, not meant for sleep, but having a side effect of sleepiness, was tried on me. It worked! And I was out for hours. My sleep pattern was coming back and I felt the renewal throughout my body. The acid reflux was still unbearable, but one of the nurses packed a glove with ice so I could go to sleep at night. (They didn't have any ice packs on the floor.) Imagine a frying pan hot off the stove held against your neck and you have the feeling.

My visiting friends saw me gradually change. It was so weird to hear their stories of experiencing seasons of depression too. It was like I had joined a new "family!" right within my own church. I even joked that we should have an anti-depressant vending machine in the church foyer. Lol.

All this was happening in December, so Christmas was arriving soon and Deb made the request for me to leave for the day to visit family. On Christmas Day, she arrived to find out that the doctor had not signed a release, infuriating her and demanding the staff to get a hold of him immediately. After waiting an hour or so, there was no response from the doctor, but Deb took me anyway! The staff fortunately didn't put up a fuss and I was on my way.

Being with family was completely un-nerving for me. I didn't want to be around them because they certainly couldn't understand what I was going through. I was in another world, still fearful and depressed. A part of me actually wanted to return to the hospital. It was only the second time I had been outside the building and the first time was scary. I didn't know

what to expect of myself. Between the cold weather, wearing shoes without laces, having no belt to hold up my pants, and all the meds my brain was trying to sort through, I was like a stunned animal trying to figure where was the way out.

One day, my doctor wasn't on the floor, so my appointment was switched to another psych doctor. This guy listened in a completely different manner. After a bit he asked me to retake an assessment that everyone completes when they first enter the psych ward. I moved slowly taking the paper gingerly, but this time I answered the questions with hope. The sleep had restored much of me and my brain was maneuvering its way out of the depression and anxiety. I wanted to go home.

The treatment was working! About an hour later the staff informed me that the doctor was releasing me from the floor and Deb was on her way to pick me up. Stunned and flushed, I was happy, shocked, and panicky about my German doctor. I knew he wanted me to stay two more weeks to try more drugs. Was he going to intervene? But Deb showed up even before I was finished packing. It was a dreamy state, going from living with "psychotic" friends to moving back home where there was no job or plan. Ever been on a carnival ride that totally throws off your balance and orientation? I was coming off that ride.



8

Coming Home

Coming home. I didn't know what to do with myself. My identity had been shifted and my entrepreneurial dreams were shattered. New doctor appointments were setup to follow-up on my progress. There was no insurance to cover all this and so we had to file with social services. (People can write books on their experiences with the social service system.) All this time Deb had been praying and asking God to help her do one thing... to ask the right questions. We were still blazing a new trail, one for us and another for our families. Eventually my focus and limited concentration was returning so I could spend a little bit of time each day on the social service filing process and think about what to do with the business. The company didn't have enough solid customers to be able to sell it as a business so each piece of equipment had to be sold off. I had plenty of bills, some of which my mom paid for, but money had to be made.

Each day I would have flash backs of my days in the ward. I was so glad to be out, out and away from the German doctor. Yes, I learned a lot, but this was now my beginning of a life of recovery. I was grateful for the nurses and staff that truly cared for me, who tried different things like Chamomile tea to

help me to relax and sleep. Those that walked by my side in the hallway and listened to my ramblings.



The nurse who used her ingenuity to make an ice pack with a doctor's glove will always be with me in my memory.

I was grateful for the one staffer I knew through church. Just knowing she was there on various shifts brought a bit of comfort and grounding to my feet. The nurse who used her ingenuity to make an ice pack with a doctor's glove will always be with me in my memory. These people, and even some of the patients have been inside my gaping hole of depression. I trusted them when I was vulnerable. Both Deb and I have a new perspective on life: it's all as if it were being held by a slim thread, which could break at any moment. Our compassion for others with mental illnesses became a gift from above. We feel and know the suffering to this day.



9

A Chaplain?

Suffering has taken on a new meaning due to the depression and anxiety. I had always tried to understand a scripture verse that said you could have joy in your trials. There wasn't any joy in my depression, but there has been joy in how that depression has changed my life and granted me the ability to serve a great segment of the world's population. In fact, the 'gift of depression' opened a door for me into a new vocation. That vocation started with a call from a friend of mine. James was a chaplain at a homeless organization. "What are you doing lately?", he asked. "Why don't you apply downtown to work at the Mission?" with a confidence in his voice that sounded as if he knew something I didn't. Work at the Mission? Volunteering at the Mission years earlier with a guitar strapped around my neck and a mic in my mouth was the limit of my exposure to men in dire need. Homeless men that were facing their own trials of addictions, mental illnesses, parole, disabilities and general hopelessness; these

were the men James thought I could help. What was he thinking?

There was something about my suffering that produced a compassion and sort of desire to reach out, even after being severely knocked down. Flashbacks were still a part of my daily life and I wasn't eager to stimulate them more by relating to men with the same issues, or rather worse, I thought. These two streams of thought bounced through my head while pondering the idea of working full time in an environment of hurting men.

In the interview I was applying for a front line Emergency Shelter job. I had absolutely no idea what it was about. It was a "step of faith" to even apply for this. During the interview, Elizabeth, the HR gal, talked about the Mission; it's purpose and many needs, then somehow turned it around in a split second. She said with a new hope in her eyes, looking up and down again, "You know, we have three new positions opening up. They are for supervisors and I can see here on your resume that you have had a lot of experience leading people." That experience was all voluntary and was in church settings. Where was she going with this? My expression must have twisted a bit with a grin of curiosity stirring in my peanut brain.



I spilled out answers that amazed me!

For the next hour Elizabeth drilled me with questions about addiction, asking for definitions, about mental health,

substance abuse asking for my knowledge on how it debilitates people and I spewed out answers that amazed me! She was drawing on my recent episode of the past several months that had just overhauled my life. All the research that taught me about my own predicament with lousy health arose to impress this HR lady. A turn of events took me from being a candidate for a low paying, hard working job to a higher paying, influential supervisory role all due to the emotional dirt and grime I had been covered in. It was all over me and it showed off as something impressive. "What a joke," I thought to myself. Pain, suffering, lost-ness, sorrow, medication mix-ups, and insomnia. They all came together to make me into an experienced person of interest. I got the job as a second shift leader over three departments: Adult Home for mentally ill, disabled and alcoholic men; a rehab for alcoholics who were primarily out on parole and a transitional living program for the men who were making progressive strides in recovery. Who was I to help these men? Who was I to supervise men and women who were already in the ditches for years serving a tough group of 200 men? This was a 24/7 operation and I was signed up for 3-11 pm hovering between three worlds. I worked there for 7 years. Two as a shift leader and 5 as a chaplain. All the while I had to keep up my coping skills to lead these men.



10

Breathing

Learning to cope through forms of anxiety and depression was a continual journey. I found I couldn't just read some articles or "how to" books and get it down to a science. This chapter will describe the mystery of finding "coping skills" and destroying "awfulizers."

First of all, "awfulizers" are beginning thoughts of anxiety that grow enormously out of proportion. They are something like out of a magic trick. For example, a magician guides your eyes to a hat and a beautiful scarf he's drawing out. The colors intrigue the audience; he pauses and then pulls more and pauses again to get your attention further. Where will it end up? The color stream keeps coming and coming out from a

mysterious hat. It seems so magical. How is he doing that? It gets longer and you think it will never end.

With "awfulizers" the color strand starts with a thought perhaps based on reality, then changes color into negative black. Its color changes again and deepens in intensity, all while tricking you that it won't end. The "awfulizers" are simple thoughts that get grossly exaggerated into profound negativity to the n'th degree. They trick you into thinking they won't stop and can't stop. The magician comes to the end of his lengthy scarf, but your thoughts seem to perilously drain your brain, progressively deepening you in misery.

"Awfulizers" are the "ticker tape" of the mind out of control!



The magician knew his trick would come to an end, however, the person with severe anxiety feels the merciless attack of "words upon words" moving with supersonic speed through their brain.

How did I learn to cope with this? The magician knew his trick would come to an end, however, the person with severe anxiety feels the merciless attack of "words upon words" moving with supersonic speeds through their brain. "Racing thoughts," some call them.

I had found that breathing exercises had an impact on their power and influence. The trick here was simple pauses. Yes, pauses deliberately brought on by breathing. Holding ones breath and counting to 5 or 10 put enough of a deterrent in the flow of thinking to slow down the "mood train." The train of

thought had to slow down to allow you to get off at a tranquil place.

I would have to remind myself to concentrate on breathing because it was easy to be distracted. For those who pray, it can be similar. In prayer, you can focus on a scripture and allow it to influence your feelings. Over time, less intense breathing was needed as my body learned awareness. What I mean is, I began to realize that the breathing really did work as a coping tool. With this tool in my pocket, I could "pocket my anxiety" quicker. Some therapies call this coping tool as mindfulness.

Along with breathing deeply, sitting down was very helpful. I can remember venturing out to the mall with my wife, strolling through crowds of people who could care less if they bumped you. The first time, after coming out of the hospital and the house, the mall was a major feat. Instead of enjoying the experience, I had to race to a place out of the way and make my own haven to take the deep breaths. In the mall, people are surrounding you, and you're maneuvering in and out like a herd. With my anxiety barometer rising, I raced to wherever my eyes saw something slightly promising. I just had to sit and, "Count and breath," I would remind myself with a hope that I wouldn't end up in a panic attack. Deb couldn't find me at first because I had vanished so quickly. Her blood pressure and adrenaline would rise once she realized I wasn't in eyesight. To see me cowering was heart-breaking. This wasn't the Jim she knew. Again, Deb would revisit her personal struggle of the journey. It was slow and agonizing with questions plaguing her mind, "How long will it take for Jim to come out of this?" I could see it on her face, but managed to not take on her burden. I was too self-



concerned. But I was learning. More coping skills were on their way.

11

On The Shelf

My primary doctor, Dr L., emphasized small mental breaks. It was a great accomplishment to concentrate fully on some home project for 15 minutes or so.

Cleaning the kitchen was normally a mindless effort, but now it took massive energy. I would worry about how much soap to use, too much, too little, would Deb get mad how the cleaning turned out? The mental breaks were needed after focusing 15 minutes. It was like putting my brain on the shelf momentarily to sag and do nothing. Just sit and allow myself space... emotional space with no expectations. Normally a person can take a break and enjoy some relaxation with a drink, snack and read the comics.



A

As a spelunker traverses a cave, I had to let the tension be explored.

My break had to be an emptying of tension that resided in deeper caverns of the mind. Like Howe Caverns, the trip into the bellows of the earth is embracing with a constant coolness and calmness. The further you walked, the deeper you slipped in. As a spelunker traverses a cave, I had to let the tension be explored. "Why was I sinking down? What in this moment brought on the anxiety?" I would question. Sometimes I could find the answer and make an adjustment, other times, I just needed the safe numbness of no thoughts.

A Casio alarm watch came in handy, which I would set every 15 minutes to ring. The consistency created sort of a memory switch to back off on whatever I was doing.

For me, the mean streak in anxiety took me into its tunnel over and over until it convinced me

there is no way out. Once I was convinced, I think that's when the depression gained its foothold. I found out years later that as depression swelled deeper I could experience a psychosis of hallucinations and delusions. I'll go into that later.

I've met many negative people who are anxious a lot. They seem to love to complain. Perhaps it's their coping skill for not going too deep into anxiety? When I was trying to overcome financial difficulties in my company, the onslaught of negativity was fierce. There wasn't anyone around complaining, I was doing all the complaining and worrying myself inside my head. I had influenced myself that there was no way out. With that seed planted and getting watered daily, the roots of anxiety were creating offshoots to another plant, of depression. I didn't know depression was growing because I was ignorant and numb. But could someone help me find the way of escape?



12

Mental Gift

Yes. There is always a way of escape. I just had to give you that good news. There has to be times of escape when you're experiencing the hollows of depression. Learning coping skills takes energy, but the rewards are tremendous. When you do escape you can see how your family time takes on new meaning. Instead of the dreariness of misery emanating with every breath, you eventually can smile, laugh, and joke around.

The character Charlie Brown groaned in agony every time Lucy pulled the football out from his foot. From one point of view, the cartoon gives us hope that some day he'd kick that ball. Shultz presented determination. That is what one develops after coping day-in day-out. You should know that depression and anxiety are not in ultimate control of your life. I realize it feels like it, without question, but there is a definite hope that you can recover.

I believe that anxiety and depression are not like a courtroom that determines your fate. What do I mean? There is brain chemistry that must be adjusted with medications. If you have been diagnosed with depression it means your brain is out of balance and can be brought back into balance. Hope for a new life can be restored. I can remember lying frozen in bed too frightened to take a shower just hoping the day would pass. As Deb would call for me to get up I'd pull up the sheets. Like daggers coming at me I would hear other voices tell me of all the problems that had to be taken care of. It would be hours before I could stagger from the bed.

When I finally went into the hospital for treatment, being in a controlled environment was helpful. I needed to know the

pressure was off for a time as it was a time to care for me. No bills, no phone calls and no mail.

After hospitalization, I truly believe, mental illness can tune up an individual. I was greatly

gifted with a measure of compassion as a result of mine.

There are "gifts" and new friends awaiting you. I put it this way; astronauts know that the

earth is beautiful, but taking the incredible trip into space and seeing it from a new perspective is breath taking. Before going into outer space, all their training included coping with forces against them, like gravity, hunger, lack of oxygen, sleeplessness, a mindset for isolation, etc. They persevered for the prize awaiting them. Then, in coming home, they each had an incredible experience to share with the entire world. They saw the earth from a very different angle. Those who are recovering from mental illness and are back in the community, they see and feel life in a new way that needs to be heard.

You can go through the bellows of terror and fear to gain fortitude (courage, bravery, endurance). And lasting fortitude can include degrees of depression and anxiety in one's life. Once you're through the unbearable, you have found your backbone to more than survive. It is truly a treasure not available to just anyone. It's unique and specially crafted. You understand it and continue to be molded by it. One could say it's divine in nature. Biblical characters are recorded with the victories attained after severe torture and persecution. They learned a new dependence outside themselves.



They are intellectually and emotionally skilled people who overcome severe mental challenges like depression, anxiety or perhaps even schizophrenia...

Anyone with a mental illness is a part of an elite group, a highly skilled group. They are intellectually and emotionally skilled people who overcome severe mental challenges like depression or anxiety or perhaps even schizophrenia; bi-polar disorders or any disorder listed in the "book of disorders." Facing mental health disorders includes deep thinking and emotional forces to win the daily challenges. Earlier I mentioned that I believe in escape as being a part. The rescue comes in many forms: faith, self-determination, meditation, journaling, talking, therapy, deliberate breathing and so much more. But the escape is to be recognized not as a breaking away, but a breaking into. If you are currently depressed or anxious, you can pocket it, and you can capture it for "a good." Your daily life can include new skills, new outlooks on people suffering and a better character including empathy. You will be a better person.

Quick story: I met a great mix of people as a result of my illness. College students, casual friends, "consumers" and media personnel through a project I joined through NAMI. At Time Warner, one could receive training for broadcasting at their downtown facility. Eight people had to come together to be trained as a team if they wanted to produce a cable show. I volunteered to not only learn a new skill in broadcasting, but

to get the word out about mental health and overcoming the unfortunate stigmas attached.

The role of producer fell to me and I learned to operate cameras, lighting, editing, sound design and teamwork that were extraordinary. We had the vision to create a mental health panel of consumers, professionals and family members who could speak into our world and the minds of the "non-elite." The good that came out of this was a phenomenal knowledge that disorders don't tear us down, but sharpen us and grow us into mature people who can articulate the realism and distortions of mental health. This experience impacted the group forever. I maintain contact with two of the people involved, one who leads with great influence in the Syracuse, NY area regarding mental health issues and another who is a wonderful musician.

My colleagues, though not all experiencing mental disorders, came into agreement that this group was very important and worthwhile to imprint the incapacitating world of depression and anxiety on listeners and inform them of the prevailing lives we now live.



13

New Muscles

It's important to say that all sorts of people who are molded and shifted by a mental disorder become extraordinary people. They serve in hospitals, nursing homes, homeless organizations, etc. Some have become board members, board presidents, and leaders and peer specialists as advocates in their community. They have great wisdom as a result of applying deep experiences that they've climbed out of.

The mountain climber fiercely conquers the incline and ascent with muscles they use specifically for this feat. Everyday walking won't prepare them for such a climb, but a person's journey into depression and anxiety presses on new emotional muscles and works them vigorously.

I can "love" today with new muscles, but it's not just because of that. My wonderful wife had her workout too! The name of this booklet is, "Pocket Your Anxiety," and it is about that, but there is more than one pocket. Deb's pocket was plenty filled. On many days, I'm sure it was overflowing with her own

coping. Her love and concern made her determined to grasp a new freedom for the both of us. It's definitely a joint journey.



I admire families that hold together while facing all the darkness of depression and anxiety.

I admire families that hold together while facing all the darkness of depression and anxiety. It could be anyone of us fighting. Our mind is fragile and yet it is so strong. My mind was being renewed and strengthened with hope and a gesture of God's kindness to return me as a better person. As far as I realize and understand, anyone who gains more compassion in their life, they have a new life flow or new chance about them. And it radiates goodness to others. They take more chances with those less fortunate. They see the "Lesser" of this world and join hands with them in conversation in beautiful moments of relief. My work at the homeless organization was made possible and effective due to the help of my illness.



14

Psychosis?

Our lives were tested once again when my medicines began metabolizing differently. A tolerance developed and life was turning upside down again. I thought I was in a good place in my recovery, however over a ten-year span on some of the same medications, my body was not accepting them any longer.

Holding down a job was too difficult because my focus and concentration was shutting down. Through the years, if I couldn't work at a regular job I would use my entertainment/education business as a back up, but now I couldn't perform.

I was taking the highest dosage allowed for my medication and still spiraling down. The coping mechanisms should be

working but not when the brain fog gets severely thick. My wife would ask me what is wrong and I would sit there without a word. Mindfulness at this point was not filled with peace, but straitjacket paralyzing. I was going deeper in both the anxiety and depression.

There were only short periods of time that Deb would leave the house since my fears were calling her to stay home. She knew I had to go to the hospital, but I was too frightened yet I knew that I must. It was a viscous tug of war in my mind as I experienced psychotic episodes including delusions and hallucinations yelling at me to end it. But I couldn't end my life because of my faith. Somehow even in the most striking psychoses I had something that kept me slightly sane.

One night I called my brothers on the phone asking them to forgive me. They were puzzled as they said there was nothing they had to forgive. But in my delusional mind I thought that going to the hospital meant we would have an enormous bill that could not be paid and the lawyers would come after us, then after my brothers and family. So in my reality, I was ruining all our lives! I don't think a psychotherapist could have brought me out – my brain was cruelly out of balance.

I agreed somehow to go to the hospital the next day experiencing a paranoia the whole time, until they shot me up with a medication that was supposed to calm me down. It actually brought me up and I was filled with an unexplainable joy. Deb was so shocked to see me talking with such animation she took a video of me.

The hospital was found wanting of a bed for me, as well as two other local facilities. So I was sent by ambulance an hour away to a psych ward I wasn't familiar with at all. For three

weeks I was coming in and out of paranoia, delusions, voices, not wanting to attend any groups or barely eating. The coping skills this booklet teaches are great, but the only thing that had any common sense was deliberate breathing since my mind was filled with stuff that wasn't me. I was seeing ants crawling all over the room telling me the floor was made of lava. I had to intentionally touch the floor to tell my brain that it was a lie. When a nurse came by to assist me I suppressed the hallucination for a moment because I didn't want to share how bad off I was. I couldn't ask for help for any good reason.



I was headed to a place I was unfamiliar with, plus, for the first time, a psychotic pill was part of my daily regiment.

Normally one would stay a week at this hospital with a medicine change, a few mental health classes and then you're on your way home. For me, after three weeks I felt like the staff couldn't and wouldn't help me. I was lost, thinking homelessness was the next step.

A complete med change occurred and then a transfer to another facility was determined. Again, I was headed to a place I was unfamiliar with, plus, for the first time, a psychotic pill was part of my daily regiment. A new anti-depressant, new anti-anxiety was not so bad to deal with, but the psych chemical meant I had gone deeper in this illness than ever before. How deep would I end up, lost in a mental system?



15

Caring People

One answer that seemed reasonable to Deb and the doctors was long-term help. After a few years of being capable of living my life I had to embrace a plan dooming me to months and months of living with other psychotic people. My mental muscles were not ready for this. And I was scared.

I started on one floor where the majority of patients were 10 to 15 years older than me. Being 53, I hated to think I was casted into a nursing home type of service. This was not me. Then another change came two weeks later to the upstairs floor where I heard that violence was taking place and you

couldn't hide in your room but had to attend classes. The paranoia kicked in fast.

What I couldn't realize, at the same time the chemistry change going on in my brain was tweaking my thoughts very gradually. Psychotherapy groups were places of loud sounds, people acting out their illness with repetitive words at high volume and people complaining and complaining without rational reason. I did not look forward to any of this.

As my brain was getting a fine-tuning I was able to relate to the staff and even fellow patients in a human fashion. Some of the classes started to make sense. I was grateful for the change. Card playing at meal times began, bringing a real life exchange between myself and those closest to me. I had found a new coping skill that would make a huge difference in the next 2 months.

My social worker was a huge supporter who managed to set me up with a therapist, that he called their secret weapon. She ran some of the groups, but to now have one on one time with someone who could make sense of my disastrous life was a Godsend. Before this relationship began I was using earplugs to shut out all the noise on the floor so I could at least have a little peace of mind. Dr. Cat agreed to see me once a week. An hour that would recharge me and give me hope while the brain was getting fixed.



The more my mind became clearer,
more hope was birthed.

I was not keen on various therapies like CBT or DBT. They seemed like simplistic teaching on how to think positive. Mental illness skewed my thinking so even if I was positive, it only lasted a moment. Dr. Cat utilized a different approach called ACT or Acceptance and Commitment Therapy. It was not only her intellectual approach but also her validation of me that began a sped up form of recovery. The more my mind became clearer, more hope was birthed. The psychotic symptoms had trickled down to almost null. Relief was coming to me through the meds, therapy and giving myself a chance for recovery.

I was feeling happy. What a complete change. To go from a lonely, afraid, paranoid man to a hopeful, happy and confident man was a miracle. To pocket my anxiety and depression was now in reach.



16

Outside

It's been a month now that I've been outpatient. Adapting to home life has been OK because before I left the center we made sure I was connected to services that would continue to give me structure and worthwhile activities. My doctor and therapist planted in me the idea of becoming a peer specialist

since they saw such joy and progress made in the therapy and drug treatment. I wanted to pass on to my fellow clients the hope that all things can work together for good.

Two of my buddies on the floor played cards with me daily, so Deb and I decided to continue this activity by visiting them weekly. We love our time of ice cream and Rummy 500. The connection has supported me in my recovery as I'm encouraging my friends and they're doing the same for me. I've realized that peer support is incredibly essential in breaking the loop of being discharged from a mental health facility, finding little to keep you going in your recovery and then ending back in the hospital. I'm sure there are statistics regarding this phenomenon, but what matters is people need real people assisting them outside the circuit. My vision is to create an organization that matches up patients, before they are discharged, with a peer that will guide them back into the outside world. This is key when the individual feels something is going wrong.



What will be my future?

Symptoms might be stirring up or they're lonely or anything that is frightening them that they could return to the hospital. Like in AA, people have sponsors they get in touch with. This organization will have peer specialists that can be called throughout the week and they'll get together for recovery activities.

One of my friends who is still in the psych center knows he ended up back in the hospital because the last hospital didn't have a "bridge" in place for him to go to. It wasn't long before he fell into the system again.

What will be my future? What structures will I put in place for people suffering with depression and other disorders that will fill the gap between the hospitals, institutions and the home? I have great hope.



17

Family Support

NAMI Family-to-Family is a free, 8-session educational program for family, significant others and friends of people with mental health conditions. It is a designated evidenced-based program. This means that research shows that the program significantly improves the coping and problem-solving abilities of the people closest to a person with a mental health condition.

NAMI Family-to-Family

A NAMI peer education program for family members of adults with mental illness.

Developed by Joyce Burland, Ph.D. © 1997

Sixth Edition Revision Coordinated by

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<https://www.nami.org/Support-Education/Mental-Health-Education/NAMI-Family-to-Family>

Worksheet 10: Crisis Preparation and Response from the Family To Family Class from NAMI

- Nowhere is it more important to maintain an empathetic mindset toward our loved ones than when they're experiencing an increase in symptoms that creates a crisis situation. It's rare that people suddenly lose total control of thoughts, feelings and behavior. Even if your loved one is overwhelmed by symptoms, your empathy and calm may comfort them.
- Family members or close friends may see signs like sleeplessness, ritualistic preoccupation with certain activities, suspiciousness or paranoia, unpredictable outbursts, etc.

Crisis Preparation & Response



- Separate the condition from the person you love, and view their behaviors, even the scary ones, from the perspective of protecting the person with the condition as well as the rest of the family. Don't take harsh,

critical comments personally.

- The goal during a crisis is to prevent things from getting worse and to provide immediate protection and support to the person experiencing the crisis.
- Addressing early warning signs can often prevent a serious crisis.
- Trust your intuition. If you're feeling frightened or panicked, the situation requires immediate action. Remember, your primary task is to help your loved one regain control, to keep everyone safe and to not escalate the situation.
- Remain calm. If you're alone, contact someone to join you until professional help arrives.

Worksheet 11: Guidelines to Help De-Escalate a Crisis

- **Don't threaten.** This may be interpreted as manipulation or bullying. Increased fear may lead to panic or violence.
- **Don't shout.** If the person with the symptoms of a mental health condition seems not to be listening, it isn't because he or she is hard of hearing. Other "voices," thoughts, anxieties or paranoia may be interfering or dominating.
- **Don't criticize.** The person may become upset and stop communicating which could make the situation worse.

- **Don't argue with other family members** over “best strategies” or who is to blame. This is not the time for accusations.
- **Don't aggravate or provoke your loved one** into acting out threats; the consequences could be tragic.
- **Don't stand over your loved one** if he or she is seated since this may be experienced as threatening. Instead, seat yourself. However, if a person with a mental health condition gets upset and stands up, consider standing up so that if you feel unsafe, you can quickly leave the room.
- **Avoid direct, continuous eye contact or touching your loved one.** Comply with requests that are reasonable and safe. This provides the person in crisis with an opportunity to feel some control in the situation.
- **Don't block the doorway.** Don't try to keep your relative in the room if they want to leave. If possible, stay calm. Research suggests that strong expressions of negative emotion may further destabilize people who are experiencing a mental health crisis.

Assistance with this section was provided by Al Horey, Western State Hospital, and Dr. Anand Pandya, MD, NAMI member

18

Should We Address Suicide?

“It is a permanent solution to a temporary emotion,” Ellen Ritz, RN Nami Board Member, Facilitator to many support groups and classes including Family To Family.

Suicide is painful to everyone. I had suicidal ideations many times. Does that mean I was going to actually kill myself? Did I have a plan to carry it out? Did I think how this would affect my family? Was I calling my family and saying goodbye in some sort of way without giving them a clue to my suicidal thoughts?

These questions are important and profound to the person who is experiencing all the traumas that have lead up to them. You may have thoughts these or felt the total despair. The immense pressure and fear or even total numbness can force you to follow through with a plan.

When I was in the hospital for the first time and thought of trying to throw myself out of the room window I was in so much pain and wanted out. Irrational thinking takes a seat and draws us into a sad state of mind. Wanting out makes total sense at the time. To be free of the weight, the psychosis, the inner forces making every moment like a deafening torture puts you into another world, another emotion that you're not used to coping with. All the cumulative damage that leads you

to suicide comes from lies in your soul. Why would I want to kill myself? What couldn't I face that makes suicide the only answer to my dilemma?

A sane person usually does not think this way. They have purpose in their immediate future. But my purpose became relief from pain. I didn't have a bandaid that could be placed upon my pain. Where in my heart and brain would it stick? Insomnia provoked even more of a desire to attack the inner turmoil.

Another time I was at home and Deb was out of town. I was brutally plagued with suicide. I didn't have any plan, just these super fast thoughts and emotions to end my life. From my perspective I was battling death demons who wanted me gone for good. In my faith, I did everything possible to avert it, but couldn't. One irrational thought after another flowed through my soul causing deeper and deeper despair. I was trying to figure out how to stop it by thinking, '*should I call the police?*' I did make a call. And that call was to Deb. I don't remember what I said to her, but I was freaking out and needed her immediately. She was an hour away and I needed her now!

Deb did race to me, but she also called our neighbors to see who was home and who could go to our home and just be with me til she arrived. She reached one neighbor, who studied as a nurse, and she knocked on the door. I don't remember if Deb told me if Betty was coming or not. Her sitting near me in the living room watching the TV with me allowed a sense of comfort. I talked to her, not about suicide, oh no, but about what was on the TV channel. Her presence created a sense of safety and relaxed me somewhat.

Deb arrived and while rushing around to get clothes for my emergency hospital visit she locked her keys in the house! Another situation! In the midst of this I somehow came up with a solution and climbed up on the back roof where the air conditioner was and forced it back into the house opening a

way for me to crawl in and ‘save’ the day. Where did that energy and sudden reasoning come from? I had a momentary purpose to solve Deb’s problem even though I was still suicidal.



Suicide is an emotional crisis. But the harsh reality of its existence can be averted. The entrance of

renewed purpose is essentially the key and the miracle. The overwhelming emotions are not in total control even though one thinks so.

Dr. Ken Duckworth, CMO of NAMI said. “It's important to recognize that this is a moment of tremendous pain when people make this decision and this does not have to be the entire future of your life.” He is so right!

If you're thinking about suicide... talk about it. Call the 988 hotline in your privacy. Get these thoughts out and hear yourself. Allow someone to listen and be *present* with you.

19

Deb's Side

Who is in your life that is your caretaker? Do you even have a caretaker that is concerned with your mental health? Is there a family member close by? Is there a friend you trust to help you? Is there someone you can share your pain with?

Caretakers are special people, especially if they're in your family. Deb has been my caretaker for years as I attempted recovery from the various symptoms experienced over 15 years. She took me to the hospital each time, sometimes with her sister accompanying us.

What about her side? What did she go through while I was suffering? Was I even concerned for her? Most of the time I'm sad to say, "no." Crisis mode after crisis made me so selfish and isolated. Deb had to draw me out to understand my condition and each time she comforted as best as she could. She was the one who did most of the problem-solving and communicating to those who could help.

Deb shared with me one time how she coped, "I just kept asking God



to help me ask the right questions to the doctors.” All this was new territory for us. My family was hours away and couldn’t assist. When we were interviewed at the psychiatric triage unit many of the questions were about my family... “Has anyone in your family had a mental illness?” I just thought about my grandfather who had schizophrenia. He rarely talked when mom brought him home to visit. He lived in a nursing home. I really didn't understand schizophrenia or any mental illness. Deb had no clue either, though her dad had some signs of depression, but he didn't talk about it.

How did Deb survive all my emotions and psychotic thinking that ranged from depression, severe anxiety into what they call psychosis with other features. What? What is that? Whatever it is, what do you do to calm it down? Deb was the one who helped me take the medications, who drove me to appointments, who visited me everyday at the hospital. She was and still is the rock. My foundation was broken and she was the new bedrock. Any who was going to care for her?

Who does the caretaker go to for support?

During some of my better days we went to church and looked for some comfort and prayer. I wish had a good report for this, but it was in a church setting that people really hurt her. Most didn’t understand what we were going through and didn’t know what to say. They looked at her suffering and said strange things that provoked Deb to anger. Some advised her to dump me because I was ruining her life. She once replied, “So you're telling me to dump Jim, leave him on his own so he would end up homeless and might even kill himself?” They didn't know how to handle her. This is bare bones. I stopped asking people, what do I do bc I couldn’t

trust their answers. I told God You need to lead me and guide cause I can't trust others.

So where did Deb go? She said, "God was my only secure footing." The back and forth of emotions threw her off many times. "I could only stand on God. He's the only one who truly understands." When people told her to leave me she had to take these comments to God. "I never had a peace to leave, so I never did."

Was I grateful for Deb's stand for me? Again, I wish I could say yes. But many times I didn't know what she was going through because she didn't want to further depress me.

During one therapist/psychiatric appointment Deb and I were together talking with the staff. These people said something that astounded us, it went something like this, "With all you two are going through, why have you stayed together? Why are you still married?" They had crossed a line pressing us in this manner. I know it may not sound so bad, but at the time, in the context of recovery, here they were judging our marriage! Deb and I both had to stand up to them. We choose to end the meeting and marched out angered at the gall.

Later on, I fired both of them. Deb had helped me to advocate. Imagine having to advocate for yourself with the people who claimed to be for your recovery and were doing the opposite.

When at social services they decided that we were going to get help, Deb started to cry and we asked her why, she said she was so relieved. The dam burst that was holding all the emotions back. We were going to get lasting hope. "I didn't

have to hold together any longer. I was sobbing,” she told me later. The disability was going to come through.

“I can remember on time, going to a bank... or a credit union.. and I had to close the account because Jim had gotten sick again and I needed the money. It was hard to get the words out to the teller and I was collapsing and crying. They were so concerned for me cause they saw I was having a real hard time. They were very kind and compassionate.”

One day I needed something from the safe and saw a letter from myself to Deb stating that I wasn't going to change my meds. Deb put it in the safe... it shared an apology that I



changed my meds without telling her. I remember Deb being very mad at me. Deb shared with me later, “I told you if you wanted to screw up with your meds then I was done. I was done being dragged into your crisis over and over again because you wouldn't listen to me or your doctor.” I

was so stubborn. It made sense to me to handle my own meds.

Stigma is so common. It's a lie from the enemy. Yeah, it is.

The enemy likes to take out happy people. Uh hmm. The devil wanted to ruin our future.

One time Deb asked family for \$90 to pay a bill and they sent it to me, then they later said, “After this you’re on your own.” I felt so abandoned.

One day I asked Deb, “Who was the most surprising... someone [who you talked to] about my mental health... that said something that made sense to them?” “Your mother, she shocked me. I told her about you always playing around with your meds and if I kept doing that I would send you home to your mom... and she said, “I wonder if that would have worked?” “You were stunned?” I asked Deb. “Yeah, because I knew she wanted you home. She always wanted you home. Mom’s always want their kids nearby.”

20

Relapse

Why does this happen? I remember having a great session with a therapist who was a christian man. He prayed over me in a particular way and when I was sitting there I had a vision. I could see Jesus standing over me with a jackhammer pounding away at the top of my head. I saw my skull was open and the jackhammer was going right into it. I heard Jesus say, “I’m pounding all these truths into you.” It was a remarkable moment in time.

A few days later I realized that all the weight of the depression had lifted and I felt so, so good! When I returned to another session with Paul, my therapist, I explained how good I was and said, "I think I just had a deliverance from the mental illness." He thought so too and was real happy for me. The joy came back and energy. In a few days I went to the unemployment office looking for work and landed a job in a printing company. It was astonishing that my mind was so clear. The job was possibly a temporary one because my wage was being paid by the county for 6 months through a program. While there I found out that the owner, who had hired me, hadn't consulted with the other employees who I was going to be working with and they were all against me. The boss, who was recently promoted from accountant to chief created the role on his own and put me in it. Everywhere I went people thought I was some kind of spy. Even my supervisor was against this new role. For the next 9 months I had to defend myself over and over. One person did their best to make me miserable complaining constantly to me and about me. It was an amazement to me that I had enough clarity of mind and guts to stand up for myself. Had I not gone through the deliverance I never would have made it the 9 months. The company was going down financially and I was one of the first people to get laid off.

After this period something happened to me. I really don't know, but it seemed like my metabolism changed and the medications weren't working as well and I relapsed. Back to the hospital again. Did I cause this? Was the stress of the job overwhelming and I didn't see how much it brought me down? Mental illness is so deceitful. Like it came through a back door, snuck up and pushed me off the cliff again. This

time around I experienced even a deeper depression. Psychosis took a grip and gave me hallucinations and delusions. I stayed in bed all day trying to push them away. The bizarreness screwed with my mind to such fear I had never experienced before.



How can a christian go through a deliverance and then later end up worse. The severity of the illness dipped so low that the hospital staff sent me out to a longer term treatment center at Hutchings. I describe some of this in chapter 14.

Deb thought that just part of me had actually received a deliverance, but another part hadn't and there was an open door for the demons to come back. In the bible it talks about it in The Gospel According to Matthew. "When an unclean spirit goes out of a man, he goes through dry places, seeking rest, and finds none. Then he says, 'I will return to my house from which I came.' And when he comes, he finds it empty, swept, and put in order.

Then he goes and takes with him seven other spirits more wicked than himself, and they enter and dwell there; and the last state of that man is worse than the first. So shall it also be with this wicked generation." (Matthew 12: 43-45)

Apparently I had not allowed Jesus to fully pond into my mind all the freedoms He had for me when He 'did the Jack Hammer thing.' The mental illness relapsed, or the symptoms came back and increased. The amount of treatment had to increase and be more intense this time around. The recovery was very gradual with different medications and the learning of better coping skills and a closer relationship with God.

If you've relapsed in your recovery, I think of it as part of one's recovery. It occurs in many people. For various reasons it can happen without our permission. Sometimes our body changes and thus the medications aren't as effective. You can't predict this! But if you've relapsed because of your own decisions, that is a sad time. Now you feel guilt and perhaps even more frustration from family and friends. It's time to press in for more



decisive treatment, more commitment and more support around you. Do your best to not relapse so you can progress with your life!

Pocket Your Anxiety Study Guide

Introduction

A small group of people, patients or families discuss what can be learned from Mr. Livi's experience. Each chapter will have a summary, questions to answers, deeper thoughts from Mr. Livi on the topic and various coping skills he utilized or learned later that can help in your journey. The first chapter of the study guide has more questions to help provoke discussion. You will see the (*) symbol by some of the coping skills, this designates that further explanations can be found in the latter part of the guide. May your group time be very encouraging, instilling hope in each individual.

Chapter One: Concrete Floor

Summary:

Mr. Livi writes about the beginning of his journey through anxiety and depression. It starts by opening a business.

When you are experiencing your own journey through a mental illness you probably didn't plan to start it. No one does and perhaps no person has control over when it starts.

Questions:

If you were to use a calendar, when did your journey begin (what year, month)?

Who was there with you when you realized you had a mental illness?

How old were you?

Deeper Thoughts:

What did you think about yourself when you found out you had a mental illness? Were you mad at yourself or comforted to know there was help for you? Or perhaps you were mad at someone else (doctor, police)? Did you blame it on your family? Were you able to eventually be open and accepting of the pain you were going through? How long did it take (if it has happened)?

Coping Skills:

When you first realized that something is wrong in your thinking and emotions, what did you do to help yourself?

1. Talked to a friend.
2. Talked to a family member.
3. Ate comfort food.
4. Talked to your doctor*
5. Went to the hospital*
6. Called a hotline*

Chapter Two: A Dream

Summary:

Mr. Livi writes about the beginnings of his dream to run a printing company. He had worked at several companies as a pressman, darkroom man, in bindery and on the road as a salesman. He hated the rejection that was felt in sales as he went from door to door.

He describes having two friends in the business, one was Chuck and the other Steve. Anxiety started to build when Mr. Livi put in his bid for a printing job. This was the kind of anxiety that grew into depression.

Questions:

Rejection is one way to create anxiety, especially if it happens over and over again. He needed the work to keep the business running or else something bad was going to happen.

Think of when your anxiety first began and try to describe what started it. What worried you so much?

How often did you experience anxiety and what was it like?

Describe the way your thoughts were working. Were they fast or slow? Were they uncontrollable sometimes?

Did you have any friends you could talk to about your anxiety?

Sometimes a person can have so much anxiety it creates another problem called depression. Which way did it happen for you? Was the depression first or everything all at once?

Deeper Thoughts:

Most people like to be peaceful and happy. They value those feelings so they feel strong about keeping them. For example, a person may believe that they should be behaving how God wants them to. The bible says not to be anxious about anything but to do something better like pray. Perhaps you

value prayer or some other activity that will keep you peaceful.

What behavior or belief do you have that may help with the anxiety or depression you're experiencing?

Coping Skills:

Because you have some level of faith... how did you activate it?

- 1. Prayed with a friend
- 2. Prayed with a christian counselor*
- 3. Prayed with a pastor or priest or lay person*
- 4. Prayed desperately on my own
- 5. Meditated on a scripture*
- 6. Journalled my feelings*
- 7. Something else

Notes: _____

Chapter Three: Why Can't I Get Beyond This?

Summary:

Mr. Livi writes about his friend Bob coming over to the printshop to help him with all the emotions he was experiencing.

Questions:

Do you have any friends you can talk to about your mental health? Do some people understand or totally not get you? Is it like this? Some people say they are your friends, but don't help you and others try real hard to uplift you?

Deeper Thoughts:

A brain fog* is something that many experience and don't know what is happening to them. Some think it will pass, but sometimes it doesn't, I wonder why. Depression and anxiety that cross the line of "normal" blues and fear can take over to the point you are debilitated by it and can not work. This is very difficult.

Coping Skills:

What can you do about a brain fog?

1. Take a nap, many naps
2. Ask your doctor to explain what you're experiencing
3. Try a medication for anxiety or depression*
4. Exercise to feel the endorphins*
5. What else?

Notes: _____

Mr. Livi finds himself at the doctors office trying to describe his emotions. What is a neurotransmitter? How can a brain be short circuited? How can I become normal again?

Questions:

What is the mental health system? Is it good for people? Are doctors really experienced enough to help people with a mental illness? Taking a medicine brings hope: true or false?

Deeper Thoughts:

Our brain is an amazing organ. It can think thoughts in split seconds and do it over and over again. It's amazingly sensitive as well. A neurotransmitter is just one small part that can help a person think keen smart thoughts. A brain fog is a mystery to us who are self-diagnosed with it. The "nerve-racking" attacks on our mind through us out of control, sometimes into a deep spiral that is no fun. We wouldn't wish it on anyone.

Coping Skills:

1. Journaling your experience so you can articulate it better at the doctor's office.
2. Educate* yourself on mental health medicines.
3. Learn breathing exercises* to calm yourself.
4. Take the medicine as prescribed on a consistent basis. This helps you and the doctor understand your body better.
5. Think about obtaining a therapist* or counselor* Talk Therapy* is helpful.
6. Cry* as much as you can, it's okay and it helps soothe your mind.

Summary:

Mr Livi finds himself getting deeper into depression, anxiety and now insomnia as well. Focus and concentrate were dwindling making his journey even worse. Mrs. Livi, Deb, was getting scared now because she had never seen Jim this way.

Questions:

When you were going about your life, whether school, work or both, and you were experiencing the heaviness of your emotions, how did you manage to keep going?

What was the breaking point when you realized when to back off off work or school or even spending time with friends?

Did you start to isolate more? When you faced the collapse of a dream, how did handle this?

Deeper Thoughts:

Depression and other mental illness zap your energy. Why is that? The brain is doing its best to handle a trauma and numbness, foginess can occur. Sometimes this is to protect you, especially if you are really young. A child doesn't know how to cope with trauma and all the deep seated emotions are hidden somewhere in their soul, not to be touched for some time. Later in life, with those hidden hurts still lingering, you still attempt to live your life, but something isn't quite working right. Another event can trigger the mental illness to rise up to the surface. This is scary.

Coping Skills:

1. Get as much sleep* as you can, especially when facing insomnia.*
2. Put your attention on activities you enjoy.

3. Stay away from negativity*, negative people, the violent shows on TV.
4. Talk further to your doctor about your journey after you've given the medicine the recommended time. The doctor may change the medicine at this time if your health is getting worse.
5. Make a positive/negative chart* to write your negative thoughts and emotions, then writing to opposite to combat the negativity.
6. Use the biblical principle of loosing* the bad stuff from your soul and bind* back to it the fruits of the Holy Spirit* in return.
7. Keep learning about mental illness and talk to others about it .
8. Find a support group* online or in-person.
9. Have some pizza* and ice cream!

Notes: _____

Chapter Six: Overnight

Summary:

Mr Livi tried to salvage the mess he was in by going to work for someone. There needed to be some income. He lands a job

at another printing company, only to find out that the anxiety and GERD was burning away his ability to learn. Forces of terror brought on desperate concern and new decisions for help. He ends up in a psych ward crisis center.

Questions:

Can a mental illness take complete control over a person? If so, what is that like? What are some “side effects” of medicines and mental illness, ie. GERD?

If you felt like you were out of control, who would you go to? Can family help you when you’re feeling really bad? Would you trust them to take you to a psychiatric hospital? If not, what would you do? Mr Livi found relief in a most unusual manner while rocking his niece close to himself. Where have you found relief?

Deeper Thoughts:

When a person feels outside their normal emotions something is happening in their soul, their brain and their body. The brain is perhaps dealing with chemistry that has changed. These changes can occur because of one’s environmental changes that are overwhelming. In the medical field, they believe that traumatic events can trigger a mental illness. It can manifest in any number of ways. Some believe there is a spiritual element to mental illness.

Coping Skills:

1. Dealing with panic*. Breathing exercises are helpful.
2. Count numbers out of order*. This refocuses your brain and can slow down anxiety.

Mr. Livi was living on a psych floor trying to recover, not knowing how all this support works. Being diagnosed, then re-diagnosed is unnerving. Friends visited him. The psych ward team wasn't communicating well. Mr. Livi felt he was lied to by his psychiatrist. Deb, his wife, helped bring back some sleep through a CD. Another doctor entered the treatment and things changed.

Questions:

Did you experience insomnia first, then your mental illness? Or was it different?

Have you been in a psychiatric hospital only to find out your illness got worse? How did you deal with that? How do you advocate for yourself? Were you visited while being a patient? What did you feel when you were first diagnosed? Did it help you or make you feel terrible about yourself?

Deeper Thoughts:

When you are admitted to a psychiatric treatment center, you can feel some peace. This can occur because you have entered a controlled environment that will help you. Developing a trustful relationship with your doctor is necessary for recovery. Having family members enter into your treatment plan can be helpful and even necessary for one's recovery. It doesn't always work that way though. Sleep is essential for recovery so your body and soul can receive refreshment. Insomnia halts recovery for some people.

Coping Skills:

1. Talk to your doctor about insomnia if you have it and try different medicines until you find one that metabolizes well.
2. Listen to calming music* to soothe your soul [thinking, emotions, decision making].
3. If you have GERD [reflux], take something to calm it down so it won't distract you from the recovery that deals with your thinking and emotions.
4. Try to cooperate with your treatment team*. When you can't, find at least one person who has compassion and understands and spend time with them. This can bring hope.
5. Learn to advocate for yourself*.
6. Ask for educational materials* from the nurse's station about your illness and the medications you're on.
7. Use your faith and ask for a spiritual person [a christian] to pray with you and for you. This will energize you. There are many studies on this activity to bring recovery quicker*.
8. Learn about NAMI* and all it's resources.
9. Learn about stigma*: self inflicted stigma, societal stigma and medical stigmas.
10. Give yourself space by not condemning yourself. End self criticism.
11. Allow a trusted person [spouse or friend] to make decisions for you to alleviate pressure.

Notes: _____

Chapter Eight: Coming Home

Summary:

Mr. Livi finally came home from a 2 1/2 week stint at the hospital and he was still ill. There were two major tasks still to handle: insurance coverage and selling his failed business. His mind wasn't as fried, but still needed help. Flashbacks occurred regularly of the hospital visit and his failure. However there were some good memories.

Questions:

When you had your first psychiatric hospital, what was it like to finally be discharged and come home? Maybe you didn't have a place to call home after your stay. How difficult was that? What did you expect to feel like when you got out? Did you experience flashbacks? Did you feel good about your progress?

Deeper Thoughts:

A psychiatric hospital visit can create a great turnaround, sometimes not. Perhaps your visit was traumatic for many different reasons. Our soul wants to recover desperately, unless you never thought you had a problem. When you have severe problems to handle after your visit, it is very important to follow through on a treatment plan. Consistency is critical for recovery to take. Life has changed forever... you've entered a new season of life and now you're in the mental health system in your community.

Coping Skills:

1. Make decisions to be consistent with your recovery plan.
2. Create your support network. Therapist. Psychiatrist. Support group.
3. Create a WRAP*.
4. Be accountable to someone close for following through on your recovery .
5. Define recovery for yourself* so you and others will understand.
6. Change any dietary needs* that will help your body's needs while in recovery.
7. Make small goals, not big ones*.
8. Learn to deal with fear and depression in general
9. Read faith inspired books* to uplift you.

Notes: _____

Chapter Nine: A Chaplain?

Summary:

Getting a job on the outside of hospital time was a surprise to Mr. Livi. A Human Resource person saw potential in him that he did not see himself.

Questions:

Can a mental illness turn into a gift to help others? What is the essence of helping others that so draws hurting people in? Can you see yourself having new capabilities now that you've experienced a mental health condition? Can you see yourself as an influencer for the good? What if you've been in the mental health system for years... do you still have potential? Look deep.

Deeper Thoughts:

There is about a quarter of the world's people experiencing mental illness, whether diagnoses or not. That could mean right in your own community you could find 25% or 1 in 4 people suffering with something in their brain. Each person has their own experience, but all have suffering and perhaps anger. These experience in turn create something that is good to believe in, that recovery is possible and those in recovery can definitely help others take a similar path.

Coping Skills:

1. Allow yourself to think of your potential even though you've faced horrible trauma.*
2. Allow some one to speak into your life the pros and cons of your mental illness.
3. Allow the faith side of you to believe for relief and good responses.*

Chapter Ten: Breathing

Summary:

Mr. and Mrs. Livi went to the mall, only to find an anxiety driven situation. He described the feeling of an awfulizers; thought that pounds your brain into negativity. Mr Livi uses a breathing technique learned in the hospital to bring the fears down from what could finally become a panic attack.

Questions:

Have you experienced ruminating thoughts plaguing you? What did you do “to” them to diminish them? Have you learn a few coping skills to help you in the community? Why is a panic attack called a panic attack? Why do people isolate instead of going out? What feelings hold you back from enjoying the world?

Deeper Thoughts:

A magician can trick you... and a panic attack can trick you.



JESSICA ROSENWORCEL

CHAIRWOMAN



FC

Coping Skills:

1. Write the awfulizers down in one column and the opposite in the other column. [see chapter five skills]
2. Meditate on the opposite and use it as ammunition against the negativity.
3. Explain your awfulizers to someone who can assist in creating the positive thinking.
4. Role play with another person thinking out loud with positive expressions.*
5. Participate in a support group that is positive and encouraging online and in person. [see chapter five resources]
6. Read positive books... read faith based books.
7. Give yourself permission to be frustrated with the process of thinking better, it takes time... you've been thinking bad for quite some time already.*
8. Take your pet out for a walk or cuddle them while thinking of the good feelings it brings. Thank your pet for the comfort they bring.
9. Find more breathing skills and try them out. *
10. Visualize yourself in a situation that would usually bring anxiety, then use the new breathing skill to see how effective it can be. Do the same in a real situation.*

Notes: _____

Chapter Eleven: On The Shelf

Summary:

Mr. Livi was living and re-living anxiety. His doctor recommended mental breaks in his day. It seemed that almost every fifteen minutes of concentration, if that, a time away from thought was needed. Anxiety plagued him while trying to run his business. Perhaps that path lead to the depression?

Questions:

How does your brain work when it is stressed? Can you slow your brain/thoughts down? Can writing your thoughts down help? When you have racing thoughts, do you take a medication immediately? How long does it take to help? Are you hooked on the medication or just using it for now until you have a coping skills to stop the negativity? Are you trying

various medications and/or diet to change your anxiety or depression?

Deeper Thoughts:

Some medical people say the brain has a neuroplasticity, meaning, it can change and adapt over time to stresses.

Adapting to the situation or event that might have caused the mental illness is highly possible. Trauma can be healed.

Without healing, negative emotions and thinking can last a lifetime. With therapy or spiritual healing a person can live a “normal” life where joy returns. The soul is powerful enough to gain inner peace even when badly damaged.

Coping Skills:

1. Capturing a thought ... write it down.
2. Change the thought ... write down the new thought.
3. Get around positive and happy people for one evening.*
4. Research how the brain works.*
5. Learn about different therapies and talk to your therapist, doctor or psychiatrist about them. [CBT, DBT, ACT, Behavior Therapy, IPT, Family Therapy, etc.]*
6. Make a plan on how to handle your mental illness [WRAP].*
7. Allow a trusted friend or relative to make decisions for you for a term, so you have space to feel relief.*

Notes: _____

degree or an athletic person like an olympian or perhaps a very successful business person. Are you part of a group that is known for overcoming the heavy stresses of mental illness? Are you finding yourself held back by people who continue in their negativity? Are you willing to say that depression, anxiety, bi-polar, psychosis are now opportunities for a new and different life?

Deeper Thoughts:

Becoming a “consumer” can feel like being a part of a helpless community. Or can be taken as one who ,yes, does consume medications, but only does it to overcome a season of life that is tragically taking you off the grid of life. Meeting other “consumers”, patients, journeyers, survivors in your life produces fortitude that no college class can teach you. No bible school class or sermon can teach you the character of overcoming and recovering. The journey of your life is critically yours. Taking responsibility for this journey is the ultimate in accountability.

Coping Skills:

1. Re-express your life goals as you feel better about yourself.*
2. Look for new people to be in your life.
3. Realize recovery can include set-backs or relapses.*
4. Allow the hardship of illness to soften your personal edges to become friendly and understanding.
5. Breath, read, meditate, review on your successes, no matter how incremental.*

Notes: _____

Chapter Thirteen: New Muscles

Summary:

Mr. Livi describes a unique muscle only mental health peers build. As the mountain climber develops their fitness, the mental health patient develops emotional muscles that will last a lifetime while the climber loses their physical muscles over time. He became aware of the life process that makes a person stronger and more apt to help others. In this world we need this process for the sake of those around us.

Questions:

Can you find your emotional muscles? What are they? How would you describe them? Can your life experience bring

about new vocations? Those that help us through our recovery also gain emotional muscles. Do you agree? They have their own set of circumstances too. Can you help another person increase their emotional muscles? How? Can a homeless person recover? Why doesn't a homeless or isolated person not recovery so well from a mental illness? Can you help a homeless person who is depressed and filled with anxiety about this future... or is that asking too much?

Deeper Thoughts:

To discover within yourself your determination is remarkable. People who find it use it to serve others better than those who don't have it. To discover compassion within your recovery is even more valuable. Compassion is a gift that few obtain because of how it is obtained. Crisis and traumas are a part of it. Broken families can even produce empathic individuals with unique perspectives to solve problems. One's faith can allow for much character building while in recovery because the higher hope allows for it versus wallowing in one's troubles.

Coping Skills:

1. Test your emotional muscles by helping someone on the psych floor.*
2. Try to be a good listener for another patient.*
3. Talk to another person about how to overcome a trial. This talking out loud helps you to figure some things out, unlike when you're just writing.*
4. Write a poem of hope.
5. Encourage someone in a support group setting.
6. Research what human service field you could be good at.*

7. Talk to a vocational specialist about your journey.*
8. Discuss your goals with a Therapist.*

Notes: _____

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5. Encourage someone in a support group setting.
6. Research what human service field you could be good at.
7. Talk to a vocational specialist about your journey.
8. Discuss your goals with a Therapist.

Notes: _____

Chapter Fourteen: Psychosis

Summary:

Mr. Livi journey took a bad turn and found himself in the hospital once again. This time it was an unfamiliar psychiatric ward that had few helps for him. An entire medication change had to occur. His feelings of being lost took him into a pit he never had experienced.

Questions:

Have you gone deeper into your mental health symptoms?
Are you finding yourself confused as to why? Can your body change resulting in a relapse? Have you changed anything in your life that brought on a worse mental health condition?
What do you do when life gets really bad?

Deeper Thoughts:

Psychosis is a mean tortuous condition for the mind and soul. Feeling life is a thread breaking down to a slender and under-strengthened line also breaks a spirit. Hope can seem out of reach like the next branch you're reaching for while climbing its tree. Falling into psychosis proclaims a life of death, confusion and fear. There is no life in psychosis, only confusion and excessively lengthy state of disbelief in everything but the fear itself. Dread takes over sometimes to overwhelm the soul and smash it brutally.

Coping Skills:

1. Accept there is an answer.
2. Hold onto an animal for comfort and unconditional love.
3. Eat your favorite food to bring realism into your life.*
4. Try different anti-psychotics as directed.*
5. Ask someone if what you're seeing, hearing or smelling is real or fake?*
6. Go to a crisis center.*
7. Tell yourself what you're seeing isn't real.*
8. When fearful that something is about to happen to you, ask for help.
9. Work on trusting a therapist with your psychotic episodes.
10. Write down your experiences of psychosis in a poem or diary.
11. Try to laugh at the hallucination. Tell it to leave you. Tell it to not come back.*
12. Listen to music loudly to drown out voices.*
13. Be honest with yourself.

Notes: _____



Chapter Fifteen: Caring People

Summary:

Mr Livi was transported to another hospital for long term care. He was frightened that he would end up in a nursing home type situation for years. The longer stay actually became a blessing because the support staff had time to reach

me. Simultaneously the medicine change helped remove psychotic symptoms. Relief was in reach.

Questions:

While you're hospitalized can you feel some relief? If you connect with some staff, does it feel like they genuinely care? When taking new medicines, it might be the 2nd, 3rd or 10th time that has happened. Do you still have hope? Can you be open to the staff and perhaps other patients to find something good?

Deeper Thoughts:

The idea of opening up to medical people can be frightening since you have to tell your story all over again. A longer term hospitalization can prove to be very effective since shorter stays can not accomplish deeper issues of mental health conditions. Various therapies, like CBT and DBT, can be helpful at first if you haven't learned how to deal with negative thinking or fears deep inside you. One's faith can supply some answers to your thought life.

Coping Skills:

1. Give yourself permission to isolate when allowed to by staff. Decrease the isolation over time.*
2. Give support groups a chance, whether just listening or participating.*
3. Try some CBT or DBT skills and decide which one fit your mind.
4. Ask for help regularly politely. The staff is willing to help, especially if they see you are not demanding.*

5. Educate yourself while you are in the hospital to understand the illness.*
6. Write down some of your questions and submit them to staff, that way you don't have to remember everything during an appointment.*
7. Try to focus on the good things happening to your brain and tell others.*
8. Be patient with all medicine changes knowing that one is going to help.
9. Cooperate with structure because you will need it once you get out.*

Notes: _____

Chapter Sixteen: Outside

Summary:

Mr. Livi was finally discharged after two and a half months of treatment. This may seem long to you or not at all. He found patients who had been there for years. The strategy of

creating an outpatient support system became his goal. Even more, he wanted to become a peer specialist himself at the recommendation of his social worker. He stated that he has great hope now.

Questions:

When you're told you're going to be discharged, do you feel ready or have been ready for some time? Do you have a plan to keep your recovery going once discharged? Have you thought about having a peer specialist in your life or even becoming one? What is it about encouraging another person that is good for the encourager? Do you know of some people who continually go in and out of the hospital? If so, why do you think that happens? Do you have hope for your future?

Deeper Thoughts:

Being a patient, whether in-patient or out-patient is a change of life that goes through many transitions. Your work life shifts to perhaps having no employment; your friends might change and your thought life must improve. Being open to and making decisions to create a support network for the rest of your life is a 100% definite, otherwise, if one crashes, who will uplift them? Giving back through volunteerism is powerfully profound in one's recovery. Having new purpose to help others engages your soul into new horizons of life.

Coping Skills:

1. Create your support network.
2. Keep in touch with your supportive people.*
3. Journal on your recovery so you can look back and see your improvements.*

4. Talk to others about your recovery. Articulating recovery is a key to defining it.
5. Volunteer in your local mental health system. I.e. NAMI chapter.*
6. Get employment in the mental health system.*
7. Receive prayer for ongoing growth in your body, soul and spirit.*
8. Tell your family how you're doing. Especially when you're well.*
9. Make ongoing plans for further progress in your overall health.*
10. Talk to God more often and build a relationship with Him!*

Notes: _____

Appendix: Coping Skills Extra Help!



In this chapter I will be referring to coping skills listed in previous chapters with more details. Over the years networking with therapists, NAMI support people, friends and in my relationship with the Holy Spirit

I've learned more about

myself and how to cope with various emotions and thoughts. I have always found that when I ask God to show me more on self-care, He is faithful to bring those answers either directly in the thoughts of my mind while praying or through other people, scriptures and articles I've read.

Proverbs 1:7 says, "The fear of the Lord is the beginning of knowledge.."

Note: Fearing the Lord is not defined as being afraid of God, as one might think in the English language, but being in awe of Him and learning all you can from Him. He created us and knows how to bring healing to our body and soul [emotions, thinking, will].

Psalm 23 talks about God being our comfort:

"Even though I walk through the valley of the shadow of death, I fear no evil; for Thou art with me; Thy rod and Thy staff, they comfort me."

The shepherd analogy brings to mind how they cared for their sheep. King David is the author, who was a shepherd in his youth.

The Bible can be a great resource for overcoming a mental illness.

So let's look at a few coping skills deeper.

Chapter One Skill Resources:

Talking to your doctor is one of the first actions you can take to find out if you're depressed or anxious in a manner that could become worse. Some may find out that you'll be diagnosed with more than one mental health issue, such as: schizophrenia, bipolar disorder, PTSD, panic attacks, OCD, GAD, personality disorder or even a eating disorder.

When I first went to my doctor, I was diagnosed with depression even though I was also experiencing severe anxiety over my failing business.

Your doctor might prescribe an anti-depressant or an anti-anxiety medication to see if it will make a difference. If you've never taken one, the doctor should explain how the medications work. The anti-depressant takes a lot longer to work than the anti-anxiety medicine since they hit on unique areas of the brain.

Check out <https://www.nimh.nih.gov/health/publications> for information on various "labels" of mental illness. Check out <https://www.nimh.nih.gov/health/find-help> for resources to get help.

I belong to NAMI. Which is the National Alliance on Mental Illness. NAMI is an organization with local chapter across our nation serving individuals and families of those suffering with

a mental illness. A local chapter has support groups and classes to learn about the illnesses.

Calling a hotline is now available for those feeling desperate, on the brink of suicide or just needing someone to talk to. Calling 911 used to be the go to number, but now the 988 number is the designated phone number to connect a person to a crisis counselor. An individual can also text 988 and chat online.

<https://988lifeline.org/> View the video below...

Going to the hospital is sometimes necessary when we are having symptoms of a mental illness even when we don't know it's a mental illness. If your community has a crisis triage center like Syracuse, NY has, this could be a better choice than the Emergency Room. What is a crisis triage? CPEP, or Comprehensive Psychiatric Emergency Program, admits people for a few hours or overnight for observation and can diagnose mental illnesses. The staff includes nurses and psychiatrists who prescribes medications to calm the effects of one's mood. They can admit a patient for further treatment onto a psychiatric floor of the hospital that allows for a longer stay, perhaps a week to three weeks or more. From there, a person can also be transferred to a longer treatment center for a month to several months.

[\[https://www.sjhsyr.org/location/st-josephs-health-hospital-comprehensive-psychiatric-emergency-program-cpep\]](https://www.sjhsyr.org/location/st-josephs-health-hospital-comprehensive-psychiatric-emergency-program-cpep)

My personal journey included several visits to psychiatric hospitals. The



last visit included a state hospital for 2 1/2 months of treatment, which was most valuable since it enabled me to take more time in recovery without the pressures of the outside world. I went from episodes of psychosis to feeling “normal” and confident of returning to the community.

Outpatient visits can also include follow up with one’s therapist and psychiatric doctor or nurse. Consistency will create an excellent recovery.

Going to a respite facility is also a way to bring relief of symptoms for a time in contrast to a psychiatric hospital. A respite is essentially an in-between home where a small group of individuals receive therapeutic and psychiatric assistance without being admitted into a hospital. You can feel at home in a small house with others overcoming similar illnesses. It can include support groups and the ability to go to appointments while working.

[Research “mental health respite home” online]



Chapter Two Skill Resources:

Praying with a *Christian counselor* or pastor as a coping skill is very helpful, especially for an individual who allows faith to be a part of their recovery. There are many studies that affirm the inclusion of faith. A person can go to their catholic priest or pastoral leader when it comes to christianity. There are also christian counselors available outside the church setting.

People of other faiths, ie. Hindu, etc., can try to talk to their spiritual leaders. I personally believe that a counselor who has studied biblical principles of the soul being restored is best. As a christian myself, I want someone who has experienced some element of mental illness themselves and has overcome it while studying the Bible stories and principles. I did once have a non-christian person help me greatly because they were able to share principles, though not directly from the scriptures, that were actually biblically based. I believe in some therapies, like CBT or DBT, that can help a



person because the action of taking control of negative thoughts is definitely biblically originated.

To find a christian or faith-based counselor, research just that. Ask in your faith setting as well. Or find a strong person of faith that has already had a great recovery from mental illness.

Mediating on scripture is essential to person of faith. The scripture I am referring to is the Holy Bible; the entire Bible. When an individual is seeking God for answers to their mental health, He helps guide us through verses, like in the Psalms and Proverbs. King David, the writer of many psalms, gave numerous examples of his mental anguish and how he called out to God for rescuing him time after time. One can find a story, a few verses or both and meditate on the plot and the messages that come to mind while pondering. A few ways I meditate on scripture is to memorize it so I can bring it to the forefront of my thinking and think it through. The thinking/pondering allows you to “chew the cud” like a cow and let it mull around. In this way you can find a way to apply the words to your current mood/thoughts.

Another form of meditating is writing out the scriptures exactly as it is written from the Bible and then rewrite it in a paraphrased manner so it comes from your heart in your own words. This process helps your mind to focus on its meaning personally. Also, taking the verse and create a pray out of it. An example is from Psalm 23, The Lord is my Shepherd psalm.

My Lord is my shepherd and He knows how to guide me through this really tough time. Lord, help me to lie down right now and make it feel relaxing so I can feel some relief today from this awful depression.

Lead me today beside the quiet waters of Your Spirit. Let me feel Your presence and wash me inside and out. Let me be still in my mind as I lie down. I need these racing thoughts to calm down and be still finally. Please do this for me.

You say that You can restore my soul. My soul is so heavy and burdened and I don't know what to do about it but come to You. So do a miracle and bring an end to the turmoil I'm experiencing.

I'm walking through the valley of the shadow of death today. It's awful. But You say I don't have to fear any evil coming against me. That is amazing. So, by faith, I give You all my fearful thoughts and feelings. They drag me down to a pit that is horrible. Come and pull me out right now. Bring Your comfort so I can rest.

I'm trusting You to deliver me from the anguish and terror I even experience. My mind seems out of control. I don't know how to stop this. Help.

You said, that even in the midst of my enemies, like all this negativity, You will anoint my head/mind with soothing oil and my cup of peacefulness with overflow. I need this today.



Goodness and lovingkindness seem so far away from me today, but You promised to have it follow me all the days of my life. I just need Your goodness and love to wrap around me today... just today, that's all I ask. I want to dwell in Your safe arms today, to lay down and rest. Let me awake then with all the heaviness lifted. Amen.

Journaling one's feelings can be very helpful. This is because the process of writing can bring a release of the worries. Once you write it down, then you can “put it away” for another time. Making a list of thoughts or moods one day will allow you to eventually see how you’ve progressed over time and that will bring hope to you. Journaling also helps you to articulate your experience. It can then be translated into a poem or song. It can also help for when you talk to your doctor about your feelings. You can give them the written document or let it guide you while sharing with them. Your physician needs to hear how you’re feeling because they can’t read your mind. Writing your questions during journaling is very helpful.

Chapter Three Skill Resources:

Taking medication for anxiety or depression is one of the main helps for those of us with mental illness(es). Your doctor might be the first one to prescribe an anti depressant or anti anxiety. Taking medications is a helper to mellow out your symptoms while you learn coping skills that become a life

long routine. Some doctors say you'll be on the medications for the rest of your life. I don't believe that to be true... depending on what your symptoms are. A doctor who keeps the door open to the lessening of medications brings hope for a full recovery. You can recover!

To research different medications is valuable information because you can then ask questions about each one from a pharmacist, doctor, psychiatrist or therapist. You don't have to believe everything they tell you. They are talking in general and don't know what experience you'll have while taking it.

Various websites can be excellent. Look for the name of the medication, then what it does, what the side effects are and what dosages are usually taken. Learning this information will allow you to discuss it thoroughly with your prescriber. If you're having one of the side effects listed, or not listed, then talk to your doctor right away. If they say to give it more time, then you decide what to do. I'm not saying to stop it immediately, unless the side effect is would send you to the ER. But talk further with your prescriber with more determination to state your case. They need to know what the medications are doing to you, because they are learning at the same time.



I've taken some medications that performed the opposite of what was stated. Sometimes that was a good thing and other times it was

so bad that I had to come off it asap. I've called a pharmacist when my prescriber wasn't available and received great advise on how to handle the agitation.

One time the anti depressant made me more depressed and the physician's assistant didn't know what to do, but to refer me to a more experienced doctor. Our bodies are all different and the pharmaceutical industry does not have a pill that fits everyone.

An anti-anxiety pill can do wonders for you so you can return to work and take it as needed. At the same time, you'll be able to live your life and learn how to overcome a panic attack or any mood that sends you into severe anxiousness.

To learn more about the chemical basis of mental illness and medication, research websites like:

<https://www.mayoclinic.org/diseases-conditions/depression/in-depth/antidepressants/art-20046273>



Exercising to feel endorphins is a great way to take care of emotions that usually send you downward. Getting the blood to flow and allowing the body to make endorphins brings on such good feelings, not only of accomplishment, but a simple high that is totally natural!

You can also increase your endorphins by eating some chocolate! <https://my.clevelandclinic.org/health/body/23040-endorphins>

A brain fog briefly described: One's mind is filled with confusion and lack of ability to think clearly or straight. The quickness to make decisions slows down tremendously creating a depressive or anxious mood.

Chapter Four Skill Resources:

Educating yourself on mental health conditions can be very helpful and bring hope. If you're already in a hospital for a mental illness, talk to the staff about your illness and the medicines they have you taking. Ask about how effective the medicines can be and how long it will take to help. You can ask the nurses to print out information on each medication.

Some psychiatric floors have educational packets on illnesses with a study guide and work sheets. Ask the staff for this. In my first hospital visit they had an excellent booklet that trained me to journal and learn coping mechanisms for the racing thoughts that plagued my mind.

I've found that you have to ask for this information. It won't be automatically given to you.

If you're not hospitalized, then ask your doctor for informational packets. You can research online for hours as well.

<https://www.nami.org/Home>

<https://www.mentalhealth.gov/>

<https://www.nimh.nih.gov/>

<https://www.counseling.org/knowledge-center/mental-health-resources>



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Breathing skills are excellent for calming one's stress. Many exercises and groups are available online to assist you. Breathing essentially refocuses your body and soul creating a calming sensation and perhaps avoiding a panic attack.

<https://www.healthline.com/health/breathing-exercises-for-anxiety#breath-focus>

YouTube has a ton of videos to train you:



Obtaining a therapist or counselor as you want to learn more about your illness and how to recover is key! Therapists/counselors can train you to talk about your symptoms, recognize how to overcome them and give you hope for a recovery. Finding a good one sometimes takes a lot of time and effort because they are in top demand across the globe. They are trained to be good listeners and have a slew of information. A therapist doesn't prescribe medication, but can do something even more helpful...teach you to prevent symptoms. If you can do this, then you can eventually lessen your medications.

A therapist might help you to overcome the stigma attached to your condition. A breakthrough in this area can change your life!

<https://www.nami.org/Your-Journey/Individuals-with-Mental-Illness/Finding-a-Mental-Health-Professional>

<https://www.goodtherapy.org/find-mental-health-counselors.html>

<https://www.psychologytoday.com/us/therapists/christian>

Talk Therapy is a general term for psychotherapy that includes a professionally trained person, ie. Psychologist, therapist, psychiatrist, etc. who gain the trust of their client and assists them in talking through their recovery journey. Many techniques are used. Some work for some people, others do not. The basic premise is to assist a person to adjust their thought life so they progress in peaceful, positive thinking and thus, better decisions and a better life.

Crying is under rated for mindfulness techniques. Crying helped me so much after I realized how it would relive some of the heaviness experience with anxiety and depression. I would even attempt to force a crying “session” so I could take off the weight and brain fog I had.

You might be saying, “I’m crying all the time for no reason!” I totally understand. This was my first thought when crying in fits of despair... why? It was after realizing that crying enables us to somehow relieve the inner turmoil for a period. You know when someone says, “I feel so much better now, now that I got that off my chest.” With crying, the same can be true.

It's thought, in the medical world, that crying releases toxic chemicals out our body and might create an endorphin, which helps people feel better. There is win-win here.

Chapter Five Skill Resources:

Getting sleep is so impactful to a mental health condition. So insomnia is such an enemy! When I was first diagnosed with a mental illness, even though I had insomnia, the doctor didn't give me a medicine for it, just an anti-depressant and said to take some Benadryl. Well, the Benadryl interacted with the anti-depressant and made my symptoms worse. That confused all of us.

Sleep is essential to a recovery. Definitely ask your physician for a sleep medication. If it happens to work, your body will thank you. During sleep you have a chance to refresh your body. It can regenerate necessary energy and bring self healing.

If you are on a psychiatric floor right now and trying to sleep, I feel for you. Sometimes that environment can increase insomnia. Many end up pacing the hallways for hours to just push time away. It's a horrible waiting game of hoping you will finally fall asleep while trying a new medication. Of course, there are various psychiatric medications for our symptoms that also "make us sleepy." But this doesn't always happen. It might do the opposite.

Various sleep medications can be found out: <https://www.drugs.com/mca/prescription-sleeping-pills-what-s-right-for-you>

I remember one hospitalization where the psychiatrist wasn't prescribing a sleep medication until my wife pushed for it. After a few different pills we found that klonopin was effective. After sleeping for 4-6 straight hours, I felt so good and my recovery started to progress from that rest!

Of course, some sleep medications are also marked to combat anxiety. They work very effectively and thus might become addictive. Some medicines can be excellent, however, do the research on how much and for how long it should be depended on. Coping skills for sleep should be learned at the same time so addiction does not occur.

<http://healthysleep.med.harvard.edu/healthy/getting/overcoming/tips>

Avoiding negativity is essential in a mental health recovery due to the opposition it causes. Negativity creates hopelessness. And the lack of hope manipulates our minds to think we aren't going to recover and even that we are out of control entirely. How do you overcome negativity? It's an age old question that has had many authors write about and spiritual leaders ponder.

Negativity in essence is a force of fear that comes in many forms. Those of us who have experienced panic attacks totally get it. The heartbeat pounding... the fears of not knowing what will happen to us...

So how to get away from negativity: negative TV, negative people, negative drugs, negative environments will all be discussed next.

A positive/negative chart is an exercise that I've used to help with negativity. Just take a piece of paper and draw a line down the center of it to make two wide columns. At the top of the left column write the heading Negative. On the other column write Positive. If you like, write a list of numbers down the left side.

Now, as you have a negative thought or emotion, write it on the left side. Keep it short. An example is: I feel totally lost today and don't know what to do. On the positive side you'll be thinking of the opposite of it. An example is: I am learning my way today and all is not lost.



The key is to say the new positive thought out loud. Why? Because there is a principle that words can bring life and death. So speak life out loud. As you say the life-filled words your soul will hear and eventually come into alignment. It takes time. Why? Because you may have been speaking the negative words out loud in conversations for a long time. If you want your feelings to come in line with new emotions, then this coping skill is powerful. Remember, it takes time and consistency to make this happen. Some call this process a “Renewal of the mind.” [Romans 12:1,2.]

If you're thinking this is CBT or DBT, then you're correct. Those therapies are very helpful. But this is a simplified version of them. Loosing and binding is another technique that I will now share on.

Loosing and binding is so powerful in the spirit realm to bring healing to one's soul. The soul, where all your emotions, thoughts and will are seated. One's soul gets damaged throughout a lifetime, but a soul can be healed. As mentioned earlier, it takes time for inner healing to take place. The inner healing of your soul where traumas infiltrate and cause fears to take hold can be soothed.

So what is loosing and binding? In the spirit, loosing is the vocal act of commanding hurtful emotions and thoughts to

leave your mind [your soul]. Then speak to have life-giving emotions and thoughts to replace them; to be bound to your soul. This is a biblical principle recorded in Matthew 16:19. The act of



loosing and binding must be a verbal act.

When you are experiencing a mood shift to depression in anyway, say out loud, "As an act of my will, I loose this depression from my soul. All the weariness, all the hopelessness, all the confusion, all the fears of not coming out of it and I bind back to my soul God's joy, peace, comfort, healthy and positive thinking, laughter and even excitement in my recovery." God is not the author of fear, depression,

anxiety and all those labels man comes up with. He is the author of life! Choose Life! Here's a YouTube song on it:



Finding a support group is an excellent activity that will usually help you in recovery. Online and in-person groups are available across the nation and globe because mental illness is a global pandemic. See <https://nami.org/Support-Education/Support-Groups> Nami offers not only support groups for peers, but for families and veterans. A support group will be a wonderful ingredient of your recovery because you'll learn that you are not alone. There are many people who understand your deep journey, even though you don't think so. I understand that my recovery is my own, and because I am human, it has many similarities to other's. Not until I attended a support group did I realize that. Without compassion from a peer, the reality of loneliness and hopelessness is very true. Don't allow yourself to push off other like minded people who do care. Zoom offers the ability to participate in groups with or without showing your face, talking or not talking so exploring a group is now easier than ever within your comfort zone.

In addition to support groups, I recommend becoming a facilitator. Nami offers free training! Their Connection group is excellent for peers and if you want to learn how to facilitate a group for families or veterans, they have that as well. See

<https://nami.org/Support-Education/Mental-Health-Education>

Chapter Six Skill Resources:

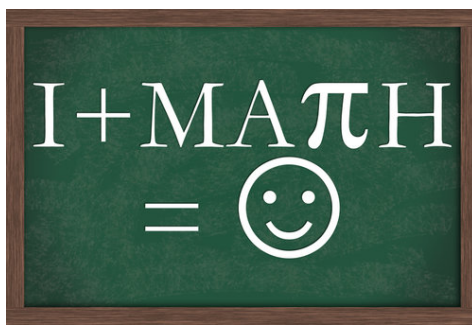
Panic attacks are horrible to experience. My first one was during my very first hospitalization. I didn't know what was happening to me as my heart pounded and pounded and anxiety thrust it's dirty head to my body and mind. I jumped out of bed early in the morning yelling out my room for help. No one was coming, which made it worse. The staff was on a shift change and just my fellow patients heard my pleas. Sweat was pouring down my back and chest. I felt vulnerable and completely embarrassed while shouting out. One patient yelled into the hallway for me too! Finally, staff came stating that someone will eventually come to help me. Did relief fill me? Oh no. Distress mounted because I didn't understand why I was reacting this way. I grabbed my pillow and hung on tight until a nurse arrived.

Panic attacks medically are described as in this article: <https://www.healthline.com/health/how-to-stop-a-panic-attack>

Panic's underlying root is fear and fear can be so disabling. I know from experience as my business failed financially. Panic hit me to the point I was dazed out and unable to think straight. Sitting at my desk at work with a to do task in front of me was agonizing. Brain fog mixed with fear destroys abilities to be productive. Depression takes over and wins it's ugly war.



When someone is experiencing a panic attack, you might be able to calm them by very softly speaking words like: “I’m here for you. I can help. Just listen to my voice and breath in and out. No one will harm you right now.” The individual needs a new sense of security because irrational fear and worries have taken over. Breathing is an excellent coping skill that brings down the heartbeat. In a panic attack one’s biology is affected, so your biology can also be tamed. CRM or Community Resiliency Model is a terrific skill modality offering several techniques to calm your body sensations. See <https://www.traumaresourceinstitute.com/crm/>



They also have an app called iChill that is excellent. It walks you through the techniques verbally. See <https://www.traumaresourceinstitute.com/ichill>

Counting numbers out of order refocuses your mind in a manner that re-engages your senses and thinking. Your mind or your brain has two hemispheres and they each work differently. One side has the emotions and the other has a logical approach to the world.. put very simply. So, during a panic attack or any anxiety, if you begin to imagine numbers or just count numbers in various unusual ways you begin to pull the emotions out of one hemisphere into another, thus, calming you down. See <https://www.healingsolutions.ca/2013/07/10/numbers-calms-anxiety/>

Chapter Seven Skill Resources:

Listening to calming music changes your mood just as listening to rock music moves your spirit to excitement or, in some cases to depression.

When I was on the psych floor the first time my brain was fried and couldn't resolve all the ruminating thoughts and emotions. Deb, my wife, brought me a CD player with a CD of ethereal sounds. I was amazed at the peace it created in my soul. So much so, I tried to pass it around to other patients. One gal did listen and it blessed her!

You can also listen to music loudly to drown out voices.

There are tons of YouTube videos online for meditative music and sounds. Why can music have such an effect? What I'm about to tell you may shock you or perhaps make sense.

In the kingdom of heaven, long ago, there was a major angel called Lucifer. It was his job to create worship for God Almighty. He had a team of angels to assist. He was given the ability to stand inside God and bring forth this worship. It was an amazing role for Lucifer, which he delighted in. God had placed inside Lucifer all the tools necessary to make music beyond any other angel.

A time came when Lucifer became selfish about his ability to create such music and in his being decided to lift himself up instead of God. Lucifer tempted his team of angels to follow him in taking over heaven and usurping God as the almighty one. As God saw the turmoil, He commanded the mighty angel Gabriel to throw him and his team out of heaven to the earth. Lucifer's name was changed to Satan and his fallen angels were called demons or unclean spirits [according to the Bible.]

Before Lucifer cast from heaven he had seen mankind inside of God. They were God's offspring not yet sent to earth. Lucifer knew that God planned to make man on earth and to have dominion over it, so, now in his fallen state, he planned to hinder God's plan for mankind and use all his schemes to draw them away from God. Since Satan still had skills to make music he decided to use it to contaminate and corrupt people. The power of music can therefore calm or inspire listeners when inspired by God, or it can be channeled by Satan in musicians to disrupt peace in man's souls.

Some of you may want to read about this in a bible. You can check it out in the Bible. [Isaiah 14:12-15; Revelations 12: 3-4; Colossians 2:15]

Learning to advocate for yourself is a powerful skill when you're trying to find out the best treatment. Doctors aren't know-it-alls and some are humble to share that. Therapists, nurses, and counselors can assist you in your journey, but sometimes they don't want to hear you out. Perhaps you want something that is outside the box for the medical profession. Perhaps you want a natural form of treatment instead of medications. Perhaps a dietary change seems better to you and you don't want to have powerful brain altering medicines tampering with your mind.



When you're already in treatment, whether inpatient or outpatient, you must be approving of it or it's not right

morally for you. Your health is your health, not someone else's. If you disagree with a caretaker's plan then it must be discussed.

So how should the discussion go? Do you complain and complain until you finally realize the provider isn't listening and won't listen? Do you talk to your family member and share your concerns? How 'bout just not going to your appointments!?

Hmmm. Complaining can be done well. Rather, it is a sharing of your concerns. What is hopeful is to write down your concerns while you're experiencing them so you're ready to talk about them later and not forget important details. You can role play with a family member your discussion prior to the appointment. This will help you think it through more thoroughly. You can write down a list of concerns in a bullet form so the doctor can read them while you are in the office.

That way they have to give their utmost attention to the document and not their feelings or opinions.

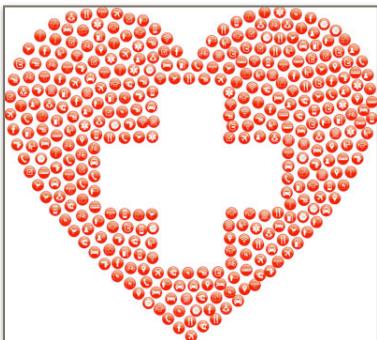
A good outcome of peaceful feeling is on track for that tells you all your recovery. Medications may be adjusted, therapy appointments may be shifted to a better schedule, or many important ingredients to your care.



have to give attention to the not their opinions. outcome of peaceful feeling is on track for Medications adjusted,

Many people have learned about peer specialists and their role in advocacy. What is this? A peer who is trained in recovery will assist each peer according to goals set out right from the beginning of treatment. The peer can relate to your concerns very well because they also have the lived experience and faced discouragement. The peer can also help you during an appointment with a doctor. When you're perhaps upset or can't articulate your concerns, the peer can take over momentarily and say, "What I think Jack is saying is they are feeling this way about their medications and that a change seems necessary. Jack is willing to discuss this right now, just give him a moment to gather himself." The doctor will be able to further understand the relationship Jack is longing for instead of him just complaining. Doctors hear complaining all the time and a buffer [the peer advocate] is a great help in the appointment.

Doing research on your recovery that includes **educational materials** is so helpful at times, unless it causes you to research just for side effects. That can cause more anxiety for you. When you do come realize side effects whether through an article or by experience, talk to the nurses on the floor. I'm saying that you can do this even while in the hospital. Just ask a nurse to print out information on your medications and anything else. They are there to assist your recovery and answer questions.



Learn about NAMI. I shared earlier that Nami is a great resource for support, not only for you but your entire family.

Families need to be educated as well when anyone is suffering from a mental illness. Just like other illnesses, it's good to find a group to support your understanding and emotional rollercoaster. If you're reading this and aren't a peer yourself, I admire your desire to understand. Nami will be great in bringing this whole health territory into a better place. You can feel that you and your family is not alone. There are even groups for teenagers going through mental health issues or just wanting to understand better.



I should mention that if a person has been admitted to a psychiatric hospital and has been diagnosed/

labeled with an LGBT word/condition [according some diagnostic manual], Nami has support groups for you as well. Their community faces tragedies daily and stigmas are rampart unfortunately. When a teen faces stigmas, it can fiercely trigger a mental illness of depression, anxiety or other diagnoses.

Asking some to pray with you is a great idea as a coping mechanism. Yes, there are many studies on how faith brings about hope and healing. Many people in psychiatric hospitals ask for prayer, especially when a chaplain is available. They may not pray exactly the way you do, but they can display compassion in a unique way.

I had a lady chaplain talk to me while I was admitted, It was healthy and helpful. When I was discharged I later contacted her and was able to be an asset to her and some of the patients

by playing my guitar and singing a song for them over their intranet link [over the hospital tv]. Months later I tried to become certified as a hospital chaplain. I would have loved that calling, but I didn't have the finances for it then.

There was another time my wife asked a pastor to visit me, but I was so anxious about it because I knew that other patients wouldn't like this. One patient that was having psychotic episodes used that prayer time against me and started mocking me and eventually attacked me in the hallway/office. You never what will happen on the floor. I appreciated the visit, but not the anxiety it caused me.

Studies on Prayer:

The study concluded that patients in the IP [intercessory prayer] group scored statistically lower in severity when it came to their medical needs. This suggests a correlation that prayer, even from remote strangers said without the patient's knowledge, could positively affect the outcome of their medical treatment. This is scientific proof that prayer works. Prayers in this study were said to the Judeo-Christian God, but people from all faiths report healing miracles. The faithful say they don't need science to prove what they already know to work, but studies like this help provide evidence for what is typically only a word-of-mouth claim for this form of remote healing. Have you ever experienced the healing power of prayer? <https://subtle.energy/a-scientific-study-of-prayer/>

<https://freespoke.com/search/web?>

[q=studies+on+prayer+helping+in+the+hospital+or+for+an+illness](https://freespoke.com/search/web?q=studies+on+prayer+helping+in+the+hospital+or+for+an+illness)



Stigma research/effect. I believe there are many types of stigmas in this world. We are human and sometimes we try to figure out why something is so different from one another, and when we can't, we create a stigma to label it. Somehow that makes us feel smarter?

In my opinion, stigmas in the mental health arena can be self inflicted, societal or even be medical stigmas. A self inflicted stigma is created by a person when they decide for themselves that having a mental illness or taking medications for a mental disorder makes themselves a lower version of themselves. What do I mean? There is the common thought/emotional process that we don't want to be taking mental health medication because it demeans us. "I can't tell someone I'm on Paxil or some drug cause they'll think I'm crazy." "What? what's wrong with you? They'll say." So we punish ourselves and defeat the purpose of recovery through medication. This is detrimental to people across the globe. I've found that African Americans have a terrible time with this stigma and many cultures have difficulty dealing with mental illness as it will demean their family in some way.

This is a tragedy because individuals may not obtain proper care as a result or if they are taking a good prescription they will go off the medication and thus spiral down, all based on opinions.

The societal stigma on mental health is revealed in the media and it's depiction based on imagined characters. Or it's portrayed in news stories as evil people who have done terrible acts, thus, they are dangerous to society. Is there a study that proves that? I think not for the most part.

In the medical field, a mental health stigma might come across as people who just can't make it in the community because they are a lesser version of a productive citizen. The Medicaid and Medicare system pushes for people to lean heavily on government support to the point of not re-entering their local community. Peers or "consumers" become lost in

health systems and feel like their life is solely based on attending one appointment after another. When they attend a group their identity is all based on their behavior and mental status... "how bad of a day it's been." Perhaps the medical field could look at peers as people

who may have a dietary problem or a thyroid issue or an iron deficiency, etc instead of immediately going to a pharmaceutical drug for the answers. People want dignity in



their lives, not mind altering drugs for everything. I don't knock drugs for a period, but not for a lifetime, as many psychiatrists believe is necessary.

Fight back on stigma in your own family, community and town through a Nami group if you want. Help educate people on the hazards of mental illness. Let people know it's very serious and there are a slew of resources to overcome it.

Sue Abderholden, Executive Director of NAMI Minnesota stated in a blog:

“...perhaps it's time to use the word “stigma” more sparingly, if at all. In reality, what people with mental illness are facing is not stigma, it's discrimination. The word ‘stigma’ doesn't truly reflect people's experiences with discrimination in housing, education, employment and health care. It's not stigma that has resulted in people boarding [waiting for days] in emergency rooms. It's not stigma that has resulted in public and private health insurance not covering needed mental health treatment and services. It's not stigma that has led to so many people with mental illness ending up in the criminal justice system. It's not stigma that causes so many people to be unemployed. It's discrimination.”

Chapter Eight Skill Resources:

Creating a WRAP is a document that will help not only yourself by trusted people in your life to assist when you have a crisis or relapse. WRAP stands for Wellness Recovery Action Plan. Here are the bullet points:

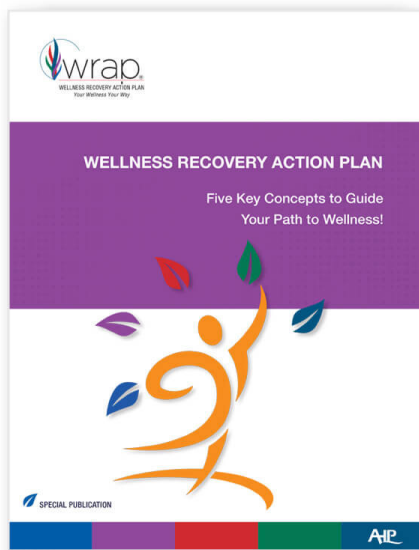
- Discover simple, safe, and effective tools to create and maintain wellness

- Develop a daily plan to stay on track with your life and wellness goals
- Identify what throws you off track and develop a plan to keep moving forward
- Gain support and stay in control even in a crisis
- Shape every aspect of your life the way you want it to be
- Gain freedom from troubling thoughts, behaviors, or patterns that repeat in your life
- Feel empowered in making decisions about your life
- Build a strong support network of people and resources to help you reach your goals

You'll find the website for it at: [https://](https://www.wellnessrecoveryactionplan.com/what-is-wrap/)

www.wellnessrecoveryactionplan.com/what-is-wrap/

As a peer specialist I learned about the WRAP. Actually before that I had made out a WRAP sometime during my hospital visits. It essentially helps you to figure out and document everything needed to keep you on track with your recovery plan, whether created by you and your treatment team or just you.



At <https://www.wellnessrecoveryactionplan.com/product/the-wellness-recovery-action-plan-five-key-concepts-to-guide-your-path-to-wellness/> you can download a free digital guide to create one.

Defining recovery for yourself helps you articulate and understand recovery in a manner that assists you to communicate your needs to a therapist, psychiatrist, psychologist, a family member or even a friend.

On the SAMHS website [substance abuse and mental health services administration], recovery comes in many forms, but defined in four primary dimensions as listed below:

- **Health:** overcoming or managing one’s disease(s) or symptoms, and making informed, healthy choices that support physical and emotional well-being
- **Home:** having a stable and safe place to live
- **Purpose:** conducting meaningful daily activities, such as a job, school volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society
- **Community:** having relationships and social networks that provide support, friendship, love, and hope

<https://www.samhsa.gov/find-help/recovery>

You can author your own version of recovery that includes details of the above guidelines. And when you do, share it with those close to you and your support network. When it is shared, people learn more about recovery and appreciate the effort it takes to accomplish. It actually becomes an educational tool to promote recovery.

Here is a sample:

Recovery means different things to different people based on his or her personal background, culture, values and community. Recovery is about choosing to live a fulfilling and rewarding life. While some people fully recover and no longer experience psychiatric symptoms, recovery is not about becoming problem free. Everyone has problems from time to time, yet when people have been labeled with mental illness, their problems are often defined as “symptoms,” rather than the normal ups and downs of life. A big part of recovery for many people is stepping away from the “mental patient,” “client,” or even “consumer” identity where we often find ourselves stuck.

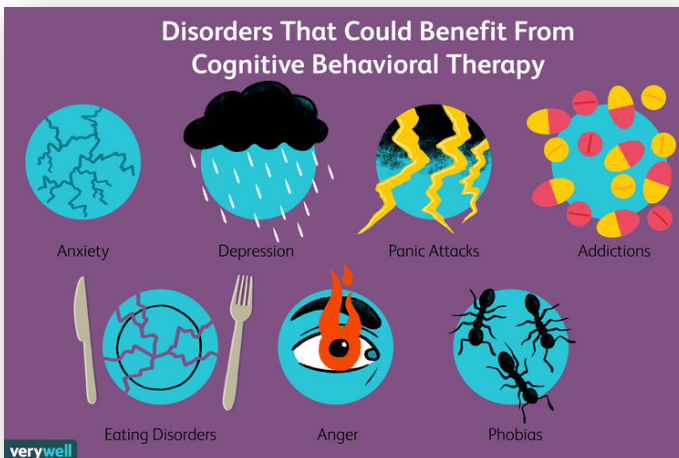
Recovery means I am a full participant in the community and am responsible for my own life.

Recovery means I no longer think of myself as being “mentally ill,” and instead think of myself as fulfilling roles such as a worker, parent, student, neighbor, friend, artist, tenant, lover, or citizen.

Recovery means I rely mostly on personal, family, community, and social supports from my culture or my peers rather than getting support solely from the mental health system.

Recovery means I am prepared to deal with the stresses in my life and view them as opportunities for growth.

Recovery means becoming so skilled and prepared regarding an “issue” that I no longer have to cope with it because it is no longer an



issue.

4 National Consensus Statement on Mental Health Recovery. (2006). Rockville, MD: Office of Consumer Affairs, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services. Available from: www.samhsa.org and the NEC website: www.power2u.org.

Here is my mental health story:

My diagnoses have changed over time. The two disorders that started my mental health condition were depression and acute anxiety, plus major insomnia. Over time the depressive symptoms were tamed, but there were relapses as well where the bipolar diagnosis came into being. Then after another hospitalization PTSD came on board and almost creating a schizophrenia disorder for me, however, I was out of the age bracket, so it wasn't medically determined, so they decided on psychosis with other features. Go figure. I was already taking anti-psychotic meds.

I've had times where I didn't want to wake up for the day. This depression made me feel totally useless and then the anxiety on top of it made me feel like I had lost the ability to learn! My skills in teaching vanished. I had a children's entertainment business that caved in completely. With further psychiatric appointments and visits to the psychiatric wards in four hospitals I went through several different types of medicines. The cocktail that worked didn't happen for 15 years. The bipolar diagnosis was the worst, especially when I had to withdraw from the medications.

The psychosis part brought back suicidal thinking. The hallucinations and delusions were much worse than a mania/downer version of bipolar. I saw and felt and smelt the pain of living in a very scary world. My wife was scared to death as well. She had never seen me like this. Depression is one thing, but when

you're behaving totally out of character, no one seems to understand you.

What is amazing is I did have some semblance of sanity for periods where I was able to return to work. One job was a recovery supervisor at a homeless agency for men. I was able to help these men because of my experiences. It became a gift on my job. Ironically though, I was fired due to my mental illness.



Therapists came and went, psychiatrists were fired and I learned what not to do for people with mental challenges. I gained compassion in a way I never could have. I became valuable again. One therapy that did work was ACT, which stands for Acceptance Commitment

Therapy. I learned

this when I had my last hospitalization in Hutchings Psychiatric Center in Upstate NY in Syracuse. The psychologist was understanding me in a way I wasn't before and the medications were finally working. This was a great combination. I developed my personal support system once I was discharged and found many new friends.

My faith in God was very tested in my journey. I questioned it many times and found out what I'm really made of. What a test! I came to realize how fragile life is and how strong it can become. I was on many meds, seeing many medical people, many therapists,

working and not working, losing joy in my life. It all got turned around according to a promise in the bible in Romans where it says, "God works all things together for good for those who love Him and are called according to His purposes." This miraculous activity of God became completely real to me. I'm stable now since I've been rescued out of the illness pit. I'm only on 2 pills now, I sleep well, my personality is joyful and confident, I help others through Nami's Connection group, my children's business is back and so I'm strong now.

Changing your diet can be a critical ingredient to recovery. Stress, anxiety, depression and other disorders can definitely have a biological root cause based on what you eat! So why do psychiatrist look at this before prescribing a drug? Don't know.

Sometimes symptoms of mental illness are the same as dietary or nutritional issues. I know of one person who was prescribed bipolar medications for years until she had an endocrinologist check her bloodwork and found that she had an over abundance of iron. The symptoms were so similar to a bipolar disorder that the first doctor went straight to a mental illness diagnosis. The other physician was able to guide her in activities that avoided lithium [normally for bipolar disorder] and onto a dietary plan that "cured" her symptoms. She went on to researching further and ultimately became a nutritionist/coach with her own business!

Fatigue, as noted by doctors, can taint a diagnosis because depression and other mental illness include it also. If your metabolism is off for various reasons, you can have it checked by your doctor and check off the signs and reasons for yours. It might not always be from a mental health root.

When I started fasting and creating vegetable smoothies for meals, I experienced a great boost in energy and other skin symptoms, like rashes, disappeared. My doctor said, “Whatever you’re doing, keep doing it!” Frozen fruit, vegetables, spirulina product, sometimes yogurts, honey, chocolate and other dairy products gave me a new vim and vinegar... a new zest for life. And this was while I was coming off a powerful anti-psychotic medication.

When setting goals it’s best to create small ones first. We know that anxiety and depression zap us of energy and if you write down big goals, you’ll automatically feel hopeless. So, as needed, write down goals and break them up into smaller steps. An example is this, walk a mile everyday. Turn this into, walk one block or around the corner for one week. Next week go two blocks, etc. These doable smaller goals make it possible physically and physically. Don’t put yourself out even before you get started!

Reading inspirational books like short stories have the great potential to uplift you for a few hours or even days. While I was hospitalized for a two and half month period I found a book by Dr. Ben Carson. He wrote about patriotic activities to help our country improve. When all the patients were guided to gather and go either upstairs or downstairs to attend a meal or a group session, we had to be herded like cows through the hallway and then wait sometimes for 15 minutes in foyers. I would pull out my book and read instead of just mulling and groaning during the limbo time. Other patients may have started to complain out loud or argue, I avoided all that by going into my own world reading a good book. Sometimes my focus and concentration wasn’t good enough to read long

passages, but it helped momentarily and kept me calm and not upset at the situation.

Faith based books can draw you into a world that includes hope and overcoming challenges. They may relate to your current circumstance of recovering in a hospital.

<https://inspire21.com/do-you-think-ill-ever-find-god/>



Chapter Nine Skill Resources:

How do you allow yourself to think of your potential even though you've faced horrible trauma?

This can be very difficult when you're in the midst of all the despair and sadness, but wait! Many of us that are suffering are also very creative people. There is a part of us that can still create even when our emotions are so torn and shredded. In fact, many have composed songs, written poetry or painted during these periods. It's like the brain, on the artistic side, is

not shut down during a mental illness. It can be hard to focus, but there is still energy to produce something that will feel like an accomplishment! So don't get bogged down.

So go ahead and write a poem, a short story, lyrics to a song, strum a guitar or finger some notes out on the piano. You might be surprised at what happens when you give it enough time. A different type of focus can occur.

Haven't you heard country music and all those bummed out lyrics? At some point the writer was writing from their despairing perspective.

Trauma normally norm our soul and hide their viscous memories deep inside us. But soul keeps living and yearning for hope and life. Trigger those soulish emotions and thoughts and turn them into something worth communicating. Journaling is one way it can get kick started.

I remember during a sorta bipolar stage of my life I couldn't easily write poems. I would be waiting for a pizza and sit down at the table and write something very clever. The surprise came at how easily it came off. Sometimes I would draw on a napkin and be delighted at the quality image of the salt and pepper shakers sitting in front of me. I would then give it away to the cashier!

How do you allow your faith help you believe for relief?

Mental health relief comes in many forms. One's faith can tap into the realm of the spirit where there is either torment or joy. Why not engage your spirit into God's realm where healing, relief and rewards come?

To step into the spirit realm is tricky or easy, depending how much you've practiced. What am I saying? There are two kinds of spirits, good and evil, clean and unclean, holy and demonic. Whichever one you open yourself up to will result in either very bad and confusing vibes or you will find a peace that surpasses even your understanding.

"He who keeps his mind on Thee is kept in perfect peace."
Isaiah 26:3

Who is Thee? The prophet Isaiah is referring to Almighty God, not an evil being. God is the source of love, peace and joy, so why not engage in His world?

<https://youtube.com/watch?>



Some will say, "I've tried that and it didn't work."

Hmmm. You tried what? Some meditation practice, some yoga, some chant? No. God wants relationship with His creation, mankind, each of us. So, to keep your mind

on God means you relate to Him, not a prayer, not a mantra, not some super spiritual saying like it's magic.

When you open yourself up in the spirit to anything at all out of curiosity or just plain desperation... watch out! You shouldn't do this because spirits from the demonic side will take advantage of you. They will disguise themselves or the temporary feelings they give you can appeal to your senses.

And like a drug, the initial result is a momentary relief, but you end up backward and perhaps worse off.

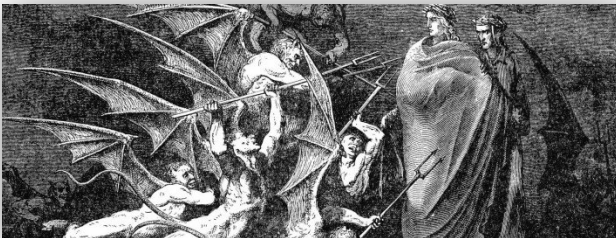
Am I talking about Satan? Yes and his servants, the devils, the demons, the unclean spirits. Since you can't see them doesn't mean they aren't there. In fact, their job is to make you think they aren't there or they are, but they look and feel good for a time.

Is mental illness caused by demons? Oh, the big question! I heard one doctor talk about the psychiatric floor in a hospital stating that all we are doing is medicating demons. Of course, he didn't say this while on the floor, but when I met him in church.

So demons can cause and can deepen mental illnesses. The bible refers to this in various scriptures: Mark 5:2-10; Luke 9:37-42.

So, use your faith to engage in God's world, not the other world. To simply start, ask Jesus Christ to reveal Himself to you and He'll take you from there. Read the Bible slowly asking God to help you understand and send people your way to help.

To know more, check out: <https://www.biblesprout.com/articles/hell/demons/>



Okay. Enough on the spirit realm.

Write a poem or short story on your progress or relapses.

Journaling can turn into more than talking about recovery and pain. It can lead you into places of release from the pressures and stress on mental turmoil. For a few moments write something down and then share it. Let someone read it and make a comment. It may start a very interesting conversation during a meal.

Sometimes in a group session people write a story to themselves. They project to their future and say what they're hoping you'll be feeling like or what you'll be eventually doing when all this is done with. Fold it up and put in an envelope for safe keeping on a day you come across it at the perfect time. This provides encouragement in the present and the future simultaneously. And you thought you could do something good anymore? Nonsense.

Research the internet or ask about vocations.

For many people who have suffered with a mental illness, they end up in the mental health field in one manner or another. Some become nurses, social workers, therapists and even a psychiatrist! I know of a person diagnosed with schizophrenia that eventually received his doctorate and became a wonderful psychiatrist and author. His articles have tremendous credibility because he lived the illness, or maintains his recovery and has progressed.

Becoming something easier is the general role of a Peer Specialist. Depending on what agency, insurance company or hospital you're applying to, it can be labeled as Peer Advocate, Mental Health Peer Specialist, Peer Bridger, Mentor, etc. Put into a search engine a few of these titles over

[indeed.com](#) and other job finders and see what is available. What most are expecting is that you are either currently certified in this field or are in the process of being trained and can continue to the training while on the job.

Where do you receive training and what does it cost? That varies from state to state. In New York State there is free



training at <https://www.academyofpeerservices.org/>
And certification occurs after you've completed the classes that are online and the time under a supervisor. <http://nypeerspecialist.org/>

The only costs involved are primarily after you're working sometime and need further training. Sometimes the employer provides all the costs because you're becoming valuable to them.

So a why a Peer Specialist? As a "peer" you have the "lived experience" employers are looking for. As long as you can communicate that experience in the office and non office environment with those wanting help, **YOU CAN BE A SUCCESS!**

I worked as a Peer Specialist for a few years and loved most of the job. I was able to help many young and old people gain back their dignity that was stolen by the mental health

conditions they were facing. They needed hope and I was able to impart it. So good!

Peer Specialist roles pay range is \$12.50 to \$20 an hour.

Peer Specialist

Circare ★★★★★ 18 reviews

Syracuse, NY 13204

\$15 - \$18 an hour - Full-time

⚡ Responded to 51-74% of applications in the past 30 days, typically within 6 days.

Apply now



Some roles are even done remotely. I prefer the in-person job experience.

Qualifications

- High school or equivalent (Required)
- Driver's License (Required)
- peer support to individuals w/substance use disorder: 1 year (Preferred)

Mental health conditions are no one's fault. Because of bias, prejudice and discrimination many families are wrongly blamed for their loved one's difficulties. Such blame is devastating. Psychiatrist Dr. Ken Terkelson has said, "The thought of having brought harm to a loved family member, intentionally or unintentionally, consciously or unconsciously, causes intolerable guilt." Difficult life experiences can aggravate mental illnesses, but no one creates a mental health condition in themselves or someone else.

Mental health conditions have biological aspects. We recognize that the bias surrounding these conditions and even the terms — like diagnosis, mental illness, brain disorder — add to the difficulties families face. Bias is often caused by misunderstanding — many people don't know that mental illnesses are biological conditions like other physical illnesses. We recognize that bias, prejudice and discrimination make families' experiences even more difficult. In this program, we refer to various mental illness diagnoses collectively as “mental health conditions.”

Mental health conditions share universal characteristics.

Rather than talking about specific diagnoses, we focus on the symptoms and challenges presented by the conditions — regardless of the diagnosis. This will be helpful for you since the diagnosis can change over time. Because many of the conditions have similar symptoms, and they all present challenges for our loved one and for us, we can learn from each other's experiences, regardless of what diagnosis our loved one may have.

Chapter Ten Skill Resources:

Role playing can be helpful in a small group. One person can be the patient and the other person role playing either a family member, doctor, etc. The objective is for the patient person to practice what they might say to another person and then get feedback. Why do this? When in recovery, either on a hospital floor or home, you are given the opportunity to express yourself. This is different from a regular support group because you can test out what you want to say to a family member that is not understanding you or the same with a physician.

When we're in the midst of recovery, many times our focus and concentration is very low and anxieties are high. It can make it very difficult to share or articulate what we really want to get across to someone. When in an office with a doctor we might forget some critical details of what is throwing us off.

I remember being in the hospital the very first time for mental illness. The doctor assigned to me was thought to have a good reputation by the staff. I found they had a low tolerance for my expressions. They even made it impossible for my wife to join me in conferences with him! Deb and I had to get my therapist involved for accountability. Even then, the doctor lied to me about a medication! My wife found out also that the staff wasn't finding a sleep solution for me. She was so frustrated with this doctor.

So when you have a safe-play role-play time that is confidential, it can help you speak out your mind and in the midst of this you'll perhaps find new ways to share what is really important to you, and even come up with new thoughts!

Giving yourself permission to have space. Mental health conditions don't usually start like switching on a light. There is an accumulation of events and stressors that bring it to the front of your life and soon you'll realize you need help.

And because of the accumulation, a whole slew of negativity has been hitting you day in and day out. So to think that you can suddenly start thinking positively is mostly non-realistic.

The renewal of a mind is a life-time process. It's taken a lifetime to think and talk negative, so why expect you can suddenly change. I realize we want to get rid of the negativity and racing thoughts that plague us, but giving yourself space and time for the renewal is kind and considerate. Over a recovery time you'll keep learning new techniques for renewal. Meditating, journaling, discussion, memorization are various ways to get there. CBT and DBT take advantage of this.

Learning breathing skills is so effective. A ton of exercise are available online and through books. Here are a few:

1. Breathe in through your nose for five seconds and hold for another five. Exhale for five seconds through your mouth.
2. Do the same but with separate nostrils.
3. Belly breathing includes breathing while your hands are on your belly and chest and making them rise and lower alternatively.
4. Breathing with the rhythm of a song.
5. A silly one called Lion's Breath.
6. Mindfulness Breathing is a general term for focused breathing when you make a sound with each exhale to keep your mind on a sound and offset the anxiety.

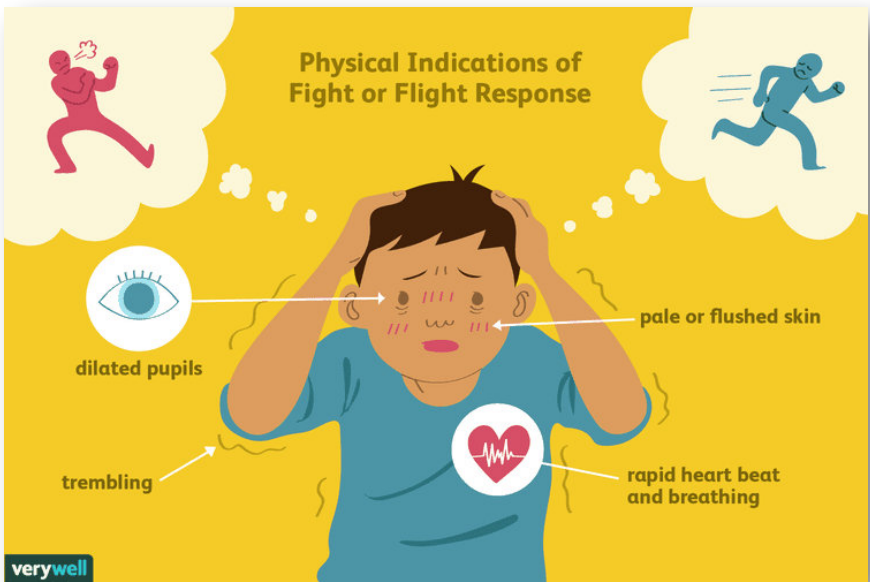
There are many versions, and the main purpose is to lower blood pressure and bring a release to negative thinking. When you focus your biology and something other than pain, your body can shift back to a peacefulness.

Faith based breathing exercises are good for those who want to focus on God while in recovery. God gave us the breath of life and you can breathe with thankful thoughts. This process

transforms the mind gradually. When practiced often the slowing of anxieties become easier and easier and quicker.

<https://www.verywellmind.com/abdominal-breathing-2584115>

Ever heard of fight or flight response? Nothing to do with flying or pilots! Ha. The body's biological responses are different for each person.



This response is triggered by the release of hormones that prepare your body to either stay and deal with a threat or to run away to safety.

The three stages of fight-or-flight are:

- The alarm stage: During this stage, the central nervous system is ramped up, preparing your body to fight or flee.
- The resistance stage: This is the stage in which the body attempts to normalize and recover from the initial elevated fight-or-flight response.
- The exhaustion stage: If the first two stages occur repeatedly over time, such as when under [chronic stress](#), this can cause the body to feel exhausted and begin to break down.

<https://www.verywellmind.com/what-is-the-fight-or-flight-response-2795194>

Fight or flight responses usually occur for realistic reasons like seeing someone in an accident and you go to help. Put simply, your body pushes blood to your brain and heartbeat and muscles so you're capable to help.

However if you are experiencing fight or flight frequently, it creates too much build up of cortisol which comes from your adrenal glands. Too much then effects your thinking... thus panic attacks are more liable to happen. Some call cortisol the stress hormone.

Visualization can be very effective for us as we reach for recovery day by day. If your treatment plan includes going shopping and you've found that anxiety occurs when around groups of people, visualization can be a great coping skill.

How does it work? Make yourself a goal of when you will go shopping, or any activity that creates anxiety, and plan gradual steps to overcome the anxieties. Instead of jumping right into shopping with just the hope you'll be okay, practice



going shopping in your imagination.

Make yourself comfortable and have a list of groceries in front of you. Now close your eyes and picture yourself driving, walking or taking the bus to the

store. Picture yourself every step of the way of entering, walking the aisles and making purchases. When you have a moment when anxiety starts to creep up, stop the visualization and use a mindful exercise like breathing to calm yourself. Once you are calmer, go back to visualizing. Repeat this process over and over until you have successfully gone shopping in your mind.

Visualization can now include the next step where you actually go the store and check your biological and mind processes. When you start to feel the anxiety you can do just what you did at home in practice, use a mindfulness skill. If it works, then proceed on your shopping. Check yourself little by little. At any point you can stop the shopping and go home.

If necessary, visualize again at home to get yourself more used to the skills that will recreate calmness within you.

There is an excellent phone app that you can take with you called, **iChill**. Included in this app is an actual person leading through mindful exercises so you don't have to do all the thinking yourself!

Chapter Eleven Skill Resources:

Get around positive and happy people. Why does this help during recovery? Joyful people are thinking and expressing happy thoughts and behaviors, thus their energy is positive. Those people are following the spirits of goodness and kindness and joy. They have practiced to think and behave opposite negativity. Why practice? Look at what are the resources they are using to keep their spirits up. What are they watching on TV? What are they talking about. How much are they enjoying another person and looking to their interests and not just their own. They have a goal to be joyful and selfless. Even a person suffering from depression and anxiety can do this. It might be momentary, but it only takes some internal effort to refocus and become aware of your thoughts and emotions.

You see, when you are feeling lousy in general, ask yourself the question, “What was I just thinking about, mulling over?” Your thinking will trigger your feelings and feelings can trigger more thoughts and thus a decision to give into the weariness of this thought life.

Negativity depresses and leaches energy out of our will, body and soul. It’s horrible.

If you are diagnosed with schizophrenia, the plan to get around positive people is tricky. Especially if paranoia is accompanying it.

I suffered paranoia, depression, insomnia and anxiety all simultaneously. I was completely drained. When on a psych

floor I recall a very short teaching from the staff on renewing your mind. When I was able to change my thinking from negative to positive through a memory, just for that moment I changed my emotions. They emphasized the repetitive practice so the accumulative effect will occur. I wasn't thrilled with the training, but did feel that split second relief. It worked. It just took a lot of energy and I didn't have energy then.

When you find yourself other people on a psych floor that are general a bit more talkative in a good way, their attitude and words will "rub off" on you little by little.

A principle is bad company corrupt good morals and the opposite is also true. Find good company and your way of life and change. Find someone who is talking the way you want to talk and strike conversation with them over meals and in support groups. Get out of a lounge room where the TV is blasting violence or have it changed. It sickened me when certain TV channels were played so much that just further distressed us. Yikes. When you're in recovery you need to be aware of your surroundings and change them as needed to promote your thinking. If you can't change the circumstances, then leave and try to read a book. A good uplifting book. Go back to your room and read educational materials.

Now I understand that there are times when our minds are fried and we don't have much of a capacity to do these things. I recall my three weeks in the Good Samaritan Psychiatric Hospital. I was experiencing massive hallucinations and delusions and could not do much for myself. I felt like I was totally out of control and so fearful that I couldn't find my way back to sanity! Praying didn't even help. My faith was

being challenged more than I had ever experienced and it was scary. Where are You God?

The people around me, including my roommate were fine people, but I was so lost. It was difficult to go for meals and especially take a shower. I was fearful of the cold water and the possibility of someone taking my clothes. I was getting dehydrated and continued to suffer.

My wife was visiting and had to go to bat for me with the staff to see what they were doing to bring me out of the deep despair and fear. She helped the staff to get me to a place where I accepted a shot of Haldol. I was so frightened to take it because I saw what it did to the homeless I used to serve at my job with the Rescue Mission. I screamed and used all my energy to not be shot with this “poison.” It was horrible.

So I explain this because I know it is sometimes very difficult to even get around positive people due to the disastrous emotions being experienced. I was afraid to talk to my nurse about the hallucinations because she would then use them against me. And lo and behold, that is what happened. At least in my momentary assessment.

To find positive people meant I had to be discharged and move to a whole new location. I had no energy to advocate for this, however my wife did. She saw I wasn't improving and I was worsening daily. Eventually I was transferred to Hutchings State Psychiatric Hospital in downtown Syracuse, NY. I was freaking out since I only knew of bad reports of this place.

In the long run, I found a new environment that led to the best treatment and my very last hospital stay! Only in hindsight can I say this. So don't give up when everything seems like an out of control mess and your faculties are totally shot. Keep praying and I believe your circumstances will change!

Ask for help to research mental illness, how the brain works. You can ask for help from the nursing staff to print out articles on different medications and treatments for your illness. Ask for educational materials and study guides to go through. This can put your mind on recovery from a new angle and may trigger some hope.

During my first hospitalization I was given a resource that taught me about renewing my mind that was so simply and so powerful. I was able to momentarily focus on my condition and become of coping techniques that stayed with me. Perhaps you can ask for books from your therapist or psychiatrist to read.

My psychologist, Dr Cat, made copies from a book titled "Noon Day Demon." I read chapters at a time and my wife read the same literature on her own time. We would come back together and discuss our understanding. What amazed us was the fact that we highlighted the same passages. That brought us hope because I knew Deb was on the same page as me and could really understand my fried brain more than I realized! To this day I have those copies.

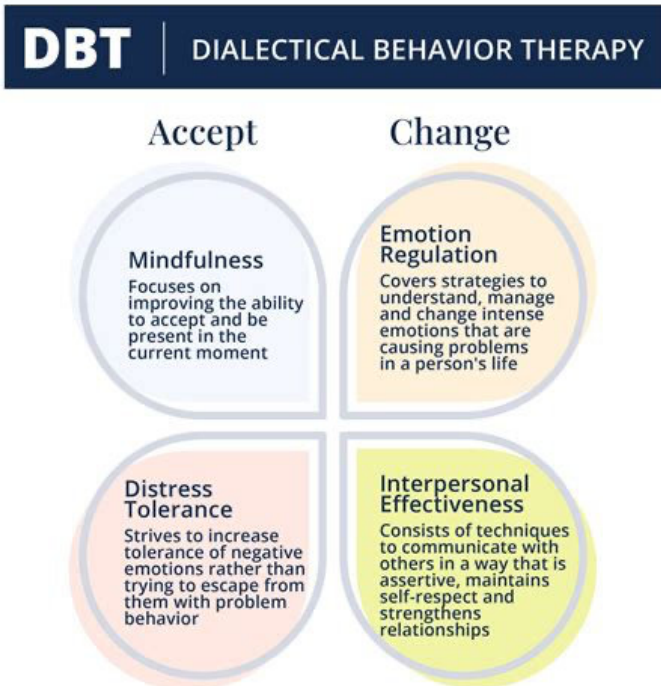
Educate yourself on various therapist such as CBT, DBT, ACT, Behavior Therapy, IPT, Family therapy and more.

Cognitive behavioral therapy focuses on changing the automatic negative thoughts that can contribute to and worsen our emotional difficulties, [depression](#), and [anxiety](#). These spontaneous negative thoughts also have a detrimental influence on our mood.

Through CBT, faulty thoughts are identified, challenged, and replaced with more objective, realistic thoughts.

<https://www.verywellmind.com/what-is-cognitive-behavior-therapy-2795747>

Essentially CBT helps a person to rethink what they are thinking through various exercises. One's awareness is necessary to be successful with this therapy and a willingness to work at it.



DBT is done in support groups, one on one with a therapists and phone coaching. It is similar to CBT but does deeper to help people with:

- Attention-deficit/hyperactivity disorder (ADHD)
- Bipolar disorder
- Borderline personality disorder (BPD)
- Eating disorders (such as anorexia nervosa, binge eating disorder, and bulimia nervosa)
- Generalized anxiety disorder (GAD)
- Major depressive disorder (including treatment-resistant major depression and chronic depression)
- Non-suicidal self-injury
- Obsessive-compulsive disorder (OCD)
- Post-traumatic stress disorder (PTSD)
- Substance use disorder
- Suicidal behavior

The six main points of DBT are to develop skills related to (1) accepting circumstances and making changes, (2) analyzing behaviors and learning healthier patterns of responding, (3) changing unhelpful, maladaptive, or negative thoughts, (4) developing collaboration skills, (5) learning new skills, and (6) receiving support.

<https://www.verywellmind.com/dialectical-behavior-therapy-1067402>

ACT or Acceptance and commitment therapy (ACT) is a type of psychotherapy that emphasizes acceptance as a way to deal with negative thoughts, feelings, symptoms, or circumstances. It also encourages increased commitment to healthy, constructive activities that uphold your values or goals.

Unlike cognitive behavioral therapy (CBT), the goal of ACT is not to reduce the frequency or severity of unpleasant internal experiences like upsetting cognitive distortions, emotions, or urges. Rather, the goal is to reduce your struggle to control or eliminate these experiences while simultaneously increasing your involvement in meaningful life activities (i.e., those activities that are consistent with your personal values).

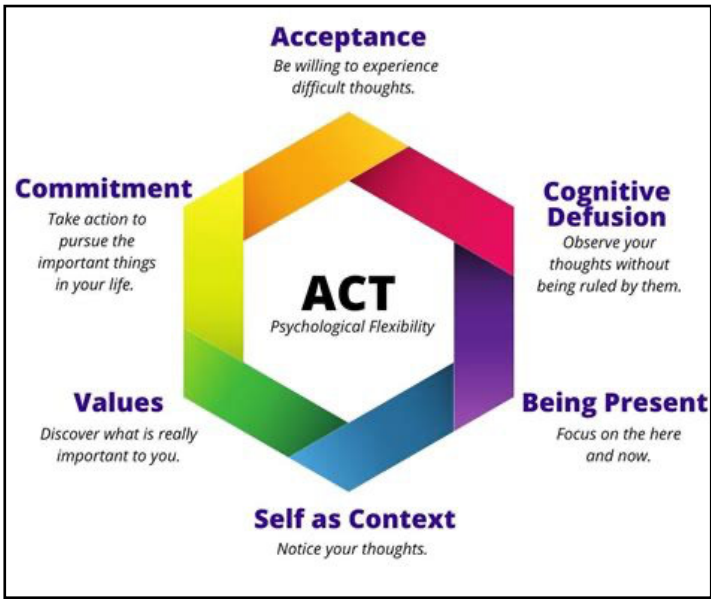
ACT is based on six components:

- **Acceptance:** This means allowing your inner thoughts and feelings to occur without trying to change them or ignore them. Acceptance is an active process.
- **Cognitive defusion:** Cognitive defusion is the process of separating yourself from your inner experiences. This allows you to see thoughts simply as thoughts, stripped of the importance that your mind adds to them.
- **Self as context:** This involves learning to see your thoughts about yourself as separate from your actions.
- **Being present:** ACT encourages you to stay mindful of your surroundings and learn to shift your attention away from internal thoughts and feelings.
- **Values:** These are the areas of your life that are important enough to you to motivate action.
- **Commitment:** This process involves changing your behavior based on principles covered in therapy.

The key within ACT is your therapist will also want to discuss your values and goals during therapy. This is another crucial part of treatment, as these values will inform your actions moving forward.

<https://www.verywellmind.com/acceptance-commitment-therapy-gad-1393175>

When I was in Hutchings for my 2 1/2 hospitalization my psychologist utilized ACT and I loved it because it took into consideration all my personal values unlike the other therapists which are pure mental exercises. Dr Cat, took time to understand my faith background and how their was extreme tension in it and how it dealt with mental illness. My faith was challenged, however this therapy helped me put it into practice in a new way that eventually lead to my successful recovery.



CBT and DBT are widely used by therapists in America. In eastern cultures there is a different perspective about emotions.

Emotions arise from context. Unlike Westerners, who view emotions as arising from within themselves, Easterners see emotions as emerging from the situation they're in. This means that moods can be changed by altering the context, in particular by aligning thoughts and behaviors with the expectations of their social groups. By distancing themselves from their emotions, Easterners are better at regulating them. Thus, negative experiences are less threatening because there's something you can do about them.

Westerners tend to ruminate about their negative emotions by thinking: "What's wrong with me?" In contrast, Easterners are more likely to think: "What's wrong with the situation?" Thus, while ruminating leads Westerners into a vicious cycle of negative thoughts about themselves, the same process leads Asians to seek solutions to their problems.

You aren't a captive of your culture. By learning how others view the world, you can selectively adopt worldviews to your benefit. When you're feeling blue, try taking a holistic perspective. Remind yourself that bad times eventually give way to good times. And keep in mind that your moods are telling you something about your current situation. Start focusing on how to change the situation, and you're well on your way to feeling much better about yourself.

<https://www.psychologytoday.com/ca/blog/talking-apes/201711/east-west-cultural-differences-in-depression>

De Vaus, J., Hornsey, M. J., Kuppens, P., & Bastian, B. (2017). Exploring the East-West divide in prevalence of affective disorder: A case for cultural differences in coping with negative emotion. *Personality and Social Psychology*

Review. Advance online publication. DOI:
10.1177/1088868317736222

Mental illness is common in the Middle East. But if an individual suffering from abuse, toxic environments or struggling with symptoms of mental illness, they are unlikely to report or seek help. This can be explained by the desire to protect family reputation and address issues privately. Indeed,



the extended family in Arab culture is at the core of social support, and it is the extended family's job to resolve abuse or domestic violence. In fact, family members could even be ostracized for seeking formal services — because

seeking help publicly is interpreted as an attempt to circumvent the family structure.

<https://nami.org/Blogs/NAMI-Blog/July-2022/Barriers-to-Mental-Health-The-Middle-Eastern-Experience>

If you have an eastern culture and are dealing with mental illness, this can be problematic in western society. Only therapists that are trained in your culture can assist you.

A culturally competent therapist will strive to understand complex issues such as oppression and micro-aggressions, and understand when their clients are being their most authentic selves — for example, when they use certain dialects or words that may not be considered Standard English.

Specifically, culturally competent therapists will strive to understand and address issues concerning race, sexuality, socioeconomic status, and gender in a client's life experience.

<https://psychcentral.com/pro/working-towards-cultural-competence-in-therapy#why-its-important>

Allowing a tested friend or relative to make decisions for you for a short term can be very helpful.

This was my case for a period. Anxiety and panic were taking over and when my wife would ask me about making choices, like in the shopping store, my mind would race to high anxiety that I couldn't make the right decision.

I couldn't open tuna cans without getting fearful. Pouring water out of a pitcher brought on such turmoil that I had to stop doing these things for a time. I would tell Deb that she had to make decisions for me for a while. This helped me back off the pressures, the seemingly small pressures of every day life.

When we went to the Mall one day I was on my way to a panic attack from the social phobia. Instead of pushing through I had to break out of the "people traffic" and sit in a corner trying to breath my way back to some calmness.

Decision making abilities are thrown terribly into another world that can be destructive for a time. Anxiety can cause irrational actions and perhaps dangerous situations.

The one decision to put off decision making can make a new pathway to recovery for a set time. Talk it through with your caretaker so you're on the same page.

Chapter Twelve Skill Resources:

What does it mean to re-express your life goals so you can feel better about yourself?

Who doesn't want to feel better about themselves? Bad days, good days, they are all coming from different perspectives. All depending on where your worldview was created. Growing up we make goals all the time, while in school, at home in places of worship, etc. We realize that when a mental health condition hits us, our goals are swiftly changed.

Mental illness puts a wrench into our life plans.

Employment may stop, friendships may end, family members may not understand you and you feel alone. So what do you do about your previous goals?



I had to shut down my business and sell all the equipment. A new vocation had to be found when I was up for it. But starting with a manual labor role was the best bet initially that allowed me to get back into something that brought in income and gave me some small sense of purpose. Recovery goals are much different from ordinary life goals before a break down.

Finding out what is important to you or your loved one may be difficult at first. Here are some example questions to get the conversation going:

- > What would you like to be different about your current situation?
- > What do you like about your life now?
- > What is your greatest achievement?
- > What do you miss about your life before recovery?
- > What makes you feel better, if only for a second?
- > What do you hope to be doing one year from now?

<https://www.mhanational.org/setting-goals-recovery>

Setting short term goals make sense because they are easier to accomplish and take less energy. Since recovery does not look the same for everyone, be flexible, taking day by day what you can do. Thinking about a future crisis is okay. Prepare yourself so you can prevent it.

Take a long term goals and shorten it. For example: wanting to change your vocation. This is huge and is usually done with much outside guidance. So take a goal and break it into very small steps like, research a new vocation online for 20 minutes today. Or make an appointment with an employment counselor.

For many of us, employment may not be in the picture because our recovery is an all consuming effort at the moment.

We are fortunate that disability income is possible here in America. After two years I made a new goal to volunteer somewhere. That volunteerism, after another two years, became a part time job that lasted for four years. I learned what stresses I could now handle as I went back to work. New coping strategies had to be used while working in an office and on the road. These stressors got too much and not only did I leave, but three other co-workers and the boss!

I had to go on disability for a time. It was difficult because I didn't want to be recognized as disabled. I recall at one appointment with a psychiatrist she labeled me as an invalid! Yikes. This a shot against one's identity.



I learned that I had to work in a whole different environment. It came down to working mostly remotely to eliminate all the office pressures. I find work and was able to restart my entertainment company Mega Bubble Man Productions. I was able to do most of my work from home and travel outside

from time to time. This has worked well for me over the last four years.

Realize recovery can include set-back or relapses.

This statement may not be agreeable with everyone. For those it doesn't, it means that they still have some perfectionism instilled in them.

To accept your limitations in recovery is wise. Sometimes there are some things that are out of your control. For instance, I had a relapse while at work because my prescription was last filled with a generic version of my antidepressant. Its make-up wasn't enough to carry me and so my body and mind suffered. My boss couldn't understand my illness and when I returned to work he asked if I had a succession plan in place for me. I was appalled. He was essentially saying that my mental illness was in the way of the department's success. He eventually created a new role for a person he promised a job to and then made them my boss. This individual was preciously interviewed by me and I decided he didn't have the skills. To then have him be my superior was devastating. I was fired by him a year later. Ugh.

Breath, read, meditate, review your successes no matter how incremental

To have this coping skill after the last one is tough. I did have success in my job, but mental illness was so stigmatized in the company culture that I was set up for failure. This happens to many of us after we are now diagnosed with a mental illness. We're taking pills to survive and we need new days off: those mental health days where the stresses are mounting and we know we need a break or we'll be broken again. No way!

To review your successes is a key in keeping hope fresh. So journalling your journey is a way to make this happen. Keep in touch with support group people. Keep in touch with your therapist. Awareness of little successes can be a major encouragement.

Chapter Thirteen Skill Resources:

Emotional muscles is a coined term I use for those who have suffered mentally and manage to cope through it, sometimes with and sometimes without medication. Like other muscles, when you use it, it stretches and is eventually strengthened with more use. During a mental illness we are hoping we are strengthened on the inside, the place where no bandaid can touch.

So how does a person strengthen emotions? First, the soul has to be willing. Where everything is moving, the mind, the will and all the decision making, each part has to be willing to learn and endure. Without the will and endurance suicidal ideation comes forth. Hopelessness takes a stake in your soul. I've been there a few times.

Which emotion do you want to grow while facing your mental health condition? Hopefulness? Joyfulness? Endurance? Compassion?

The first one is most likely hopefulness because without hope in your being you're knocked down and putting your energy totally into negative thinking and perhaps pity. The weight of this is so strong and sometimes so unbearable that you use its

energy to think out the plan of killing yourself. Relief is all you're looking for... a way out.

So HOPE should be your first emotion to exercise. I know you don't have much energy, but you will be so glad you attempted. Where will you find HOPE? Look to others who have found it. They learned where HOPE is and therefore have some capacity to share it. They can point you in the right direction. They've seen the LIGHT and know you'll want to feel the warm of it.

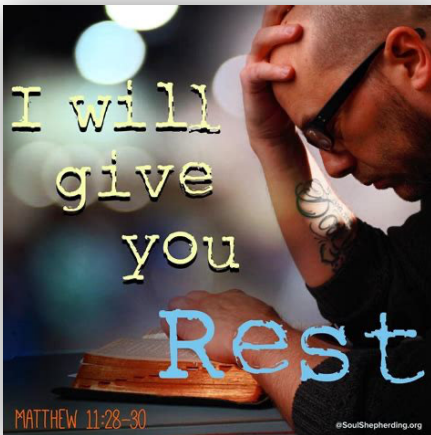
Read HOPEfilled stories. Listen to HOPEfilled people. Watch HOPEfilled movies. Go where HOPE is. For those who know who HOPE is, that is, in Jesus Christ, the HOPE of GLORY, they go to Him. But what if they've been with Him before and lost that hope? I've been like this and won't wish this on anyone. A faith that is tested is tested for a reason, to grow. A person who is filled with HOPE, a HOPEful person is a special person. They've met the intersection of despair and darkness and the small light speaking out to them to come. Jesus even said, "Come to Me all who are weary and heavy



laden and I will give you rest. Take my yoke upon you. Let me teach you, because I am humble and gentle at heart, and you will find rest for your souls. For my yoke is easy to bear, and the burden I give you is light.”

During a mental health experience such as depression and those similar, the weight is seemed to be mightier than you are able to handle. This “yoke” isn’t meant for you, but many try to bear it. Some try to work around it and keep being sunk into its mud day in and day out at work. The “yoke” brings with it a deadly stigma that lies to you saying, “don’t tell anyone what you’re going through. You’re tough, you can handle this, you’ll find a way out.” These lies are lies. Nothing is true about this. Yes, you may be tough, but how tough? You see, a mental health condition fights dirty from the inside out. Most people don’t have the capacity to overcome it without assistance. So why continue to carry the heavy “yoke?”

The next emotional muscle after HOPE is JOY! Yes! It is possible to experience even the slightest JOY during a mental break. I’ve talked and prayed with many people who start the conversation with tears and sobbing and after 15-20 minutes they are regaining HOPE and even a bit of laughter that truly comes from JOY! It’s a miracle and such a blessing to see someone be transformed. I just taught them how to connect with



Jesus who has a different yoke for them. It's not always automatic, it depends how deep in the mud they are. But HOPE and JOY have far reaching arms! I know, I've felt Jesus pull me out when I believe it wasn't possible.

JOY is amazing because it is transforming. You can always feel JOY when you're around a JOYfilled person. They are "happy" and have a certain optimistic outlook on life. Where did they get it from? I ask some of these people and various responses are, "I've always happy. I guess I got it from my parents! I really don't know, just glad I am." Some go straight to their faith that raises them from despair to HOPE and HOPE directs them to JOY. These people have an aura. Sometimes though, a happy person can be happy on the outside and then behind closed doors they are miserable. So "happiness" can be manufactured by self will, especially if you're a comedian. You might be gifted to bring joy to people, but may not experience it in a long lasting way. Why? I think it's because they haven't met the true source of JOY!

ENDURANCE is next to be learned. Emotional ENDURANCE is such a valuable emotion that can carry a person through almost any desperate situation. Endurance can also be termed as resilience. Many studies on resiliency are published because of its power to lift people out of horrible situations.

In a Tweet from the USMC Recruiting Marine Corps, they link ENDURANCE to this: *The Crucible is a 54-hour day and night test of endurance that challenges recruits both mentally and physically. During this event, they are tested to see how they will react and respond to conditions of stress and simulated combat.*



USMC Recruiting
@USMarineCorps
Official

The Crucible is a 54-hour day and night test of endurance that challenges recruits both mentally and physically. During this event, they are tested to see how they will react and respond to conditions of stress and simulated combat.



Recovery from a mental illness puts a person in combat mode moment to moment. We know the stress, the weight, the unbearableness of not knowing if we're going to make it. "Why can't I get out of this feeling?"

ENDURANCE is built in combat

according to the Marines. The soldier is tested how they will respond and react to simulated combat. We are tested in everyday life and find ourselves losing the battle. We aren't looking at blood and guts splattered, but our minds are splattered! And we can't find the glue, the cement, the band ache that puts it back together in some semblance of reality and sanity.

Where do you find **ENDURANCE**? I think you have to drill down deep for it. Resiliency doesn't happen over night. Trial after trial, medication after medication, doctor appointment after appointment, insurance objection after objection, rejection are rejection. When you feel like giving up and have no answers for the pain you're in, what do you reach for? I just want to say, the fact that you're still reaching out means

you have an element of ENDURANCE within you. The answer person who says, “This was supposed to help, but I don't know now. Perhaps ECT is your next step.” You are facing a new diagnosis called Treatment Resistant Depression. How 'bout that! They came up with a term to professionally say they don't know... you're an anomaly. Great! Even the doctors don't have a clue. I interviewed a geneticist who said psychiatry really doesn't have a clue. We're just on the edge of understanding how the brain works.

If there were a pill for ENDURANCE, it would be prescribed more than anti-depressants! This characteristic, this emotional stability is a gift from above. We see ourselves on the psych floors, in the support groups, those of us who have taken the imaginary “pill.” We continue to move forward... what other choice do we have! We have family, we have children, we have loved ones that we want to stay alive for. So ENDURANCE is found from within because you have a purpose to live. It may not be a clear purpose, but yet it's there. We go on because we just want to go on. ECT or not, electrode inducing anti-depressant stimulation or not, we'll try everything to live.



Lastly, COMPASSION! What a gift this is! This emotional capacity trumps everything. To love someone other than yourself even when you're hurting is precious. The mom

that's taking a mental health medication and continues to take care of all the chores, cooks the meals, work a part time job and even finish her school homework... wow. How do they do it? How do they handle their teenager who is also going

through emotional turmoil at school? COMPASSION for yourself and for others keeps the world going round. It's not money.

Sitting here and writing this I have one of my cats sitting by me. Sadie is such a joy because she loves me just as I am. I'm in my comfortable jammies and she's in her cozy zone purring and drawing warmth from me. Her love feels like COMPASSION. She knows when I have a bad day and makes a point to visit me in a special way, with a special kiss on my nose.

COMPASSION is an innate gift in animals. They want to trust and bring joy to us. They want to play and bring us joy. Oh, how I wish people wouldn't lose this capacity as they grow. A child naturally has innocent joy. As we grow we face one trial after another and our personality edges get roughened. Our attitude shifts and we become protective. Unfortunately we make vows to never be hurt again and shut off our soul to the world. We'll do what is required to pay the bills and have some fun from time to time, but the wall gets thicker and less able to be compassionate.



Language thunderstorm: Mental health embedded in Global Sickness

Now, I'm saying that the a mental illness takes this wall from on. It bull-dozes and busts down our barriers. Illness takes whatever strength we've had and can destroy it. Bam. Bam and again Bam!

Of course it hurts. We lose jobs, friends and so many joys in our life... how can COMPASSION come from this? I'll tell you. When you are HOPEful, when you've decided to be ENDURING and ever so incrementally JOYful, then you will have the capacity to be COMPASSIONATE. I say a lot of times, "I'm so glad I'm on the other side of this [my mental illness]" To have won some sense of overcoming despair, it grants the ability to pass it on. One hospitalization after another and we're still trudging on. I have life long friends from those times. We stay in touch to remind ourselves what we've overcome and the new life we now have! We want to share how we won the battle and continue to enjoy the newness of life we now live.

COMPASSION comes through our interactions now. We listen differently. We love differently. We share advice in a new way. We're broken but repaired. And being repaired feels so good. Some of us have gone on to do amazing things. Some of us are better, not quite what we want, but better. But in the meanwhile we understand the trials of others in a way that is revelatory. Yes, revelation of who we are and who we've become because of attaining recovery to an extent.

Aren't you amazed you're still living? You're still trying to beat this illness? You're still going to support groups and listening, learning and sharing. You have something to give!!

COMPASSION comes through you and you may not even know it. When you're talking with another person who is hurting, have you noticed the the way you react to their problem? Did you launch right into advise? Did you slam them for getting themselves into this jam? Hopefully not. Ha!

Emotional muscles are created in trials and combats. And with these muscles you are accompanied by new angels, the ones who have protected you from going over the edge. And you know you could have easily gone off the cliff many times. But you're here for a purpose. COMPASSION is one of them and it needs to be shared by you.

If you don't have it, I'm don't blame the soulish hurt you've been through or the toughness you've developed. But I injure you to look for it. When you're on the psych floor take time to listen to a fellow patient, don't say much, that's a start. Your very presence is a gift to them. They know you're in the same mess, yet you're here for them.

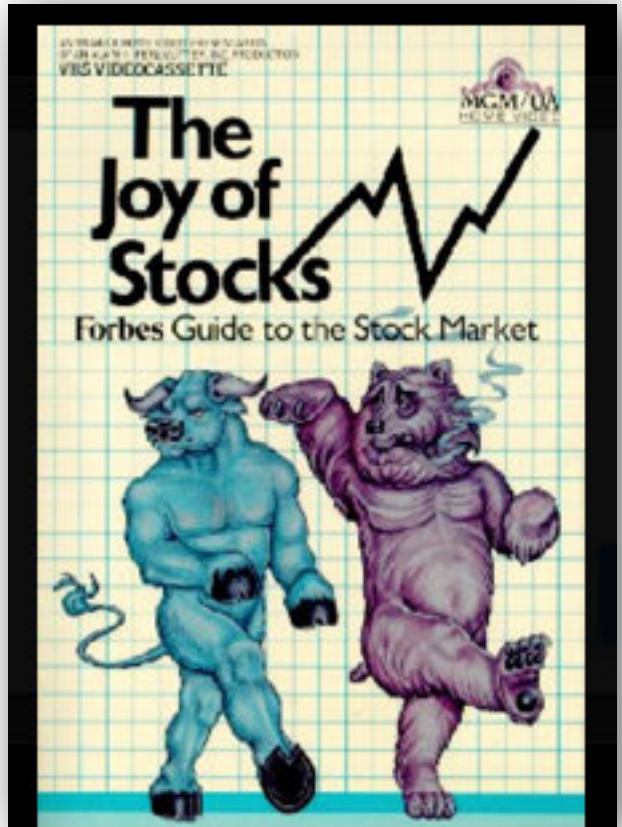
Talk to a vocational specialist about your journey when you're in the hospital or talking to your therapist. It's very possible that you'll have to change your vocation because the stress of your last employment is too much to go back to.

There are alternatives where your current skills can transfer to. When I first discharged I knew I couldn't face handling the pressures of my own business again. I need some manual labor that didn't require much mental ability. I know, it's humbling, but might be necessary to re-engage you back into the community. Some companies will understand your plight and take you back and some won't. The stigmas in the employment arena can be so hurtful. Many supervisors

haven't a clue how to help you. They don't know how to grant employment aids for people facing emotional issues. If you're facing a mental battle, how could you even take on the stress, they might be thinking. Some of this is true. So come to your senses and look realistically at what you can now handle.

This might mean you have to choose another vocation. It might not pay as much, but you might be happier and even help some people finally, instead of just filling the pockets of the business you used to work for. What is more important now in your life? Money, money, boats, vacations or simple joys.

I learned about working remotely and it changed my life. The pandemic brought this reality to many hard workers. They don't have to face car traffic any longer or the stress of the office. So why not you? Remote work has come into existence in this day and age and is will remain. Even the biggest of companies have remote roles. Can you still handle



the pressure of management, analyzing finances or maintaining large decision-making? It's possible from a remote location.

Some people have chosen to be re-educated in another area and gone onto things like the stock market, trading futures, etc. You can do this from the comfort of your home and make the necessary money to provide. I've done it from time to time. It's quite amazing how fast you can have gains in a market, especially when you learn how to make money whether the market goes up or down.

Reassessing your talents and abilities as you look at your future is so important during your recovery. Don't take on too much and try to figure it all out. No, just research and dream.

Chapter Fourteen Skill Resources:

Eat your favorite food to bring realism into your life.

This may seem silly to bring up, but for most of us, we've lost a ton of joy in our lives and need to experience it again. Comfort food can be one of those small things bridging the gap. I know that hospital food isn't the greatest, but sometimes you can get a burger or pizza. Even an ice-cream will help.

Ask the cafeteria staff about the menu. They usually ask you to fill out your choices a week in advance. I remember when I was first required to do, my mind was so fried I had panic over it. Making these decisions for the whole week seemed a far reach. Why couldn't the staff understand that? And if you didn't fill out the form, you received whatever and got stuck with it. When I found out that you could order something different I became somewhat excited and perplexed.

It makes no sense that your diet is filled with starchy foods at a hospital. We tend to gain weight and suffer from this side effect! I gained 30 lbs during one stay over two and a half months. Now I had a weight issue on top of my mental health problems. Go figure!

You can ask for a nutritionalist while at the hospital and hopefully they will connect.

Try different anti-psychotics as directed.

While in a serious recovery where they are prescribing you anti-psychotics, I know that it's a very difficult journey. Each med brings on different brain effects and side effects. You can go from paranoia to being totally numb. These medications are powerful. I have a friend who was on clozapine and was great. He was able to live life. But he went off it due to the stigmas. He had to fight for his life and was eventually placed on Haldol. This medicine calmed him down, but stole his joy. His personality was dragged down into just wanting to sleep.

How do you find the best drug when facing depression, psychosis and other serious issues? It's trial and error. Or it's ECT or some other alternative treatment. Most of the time we

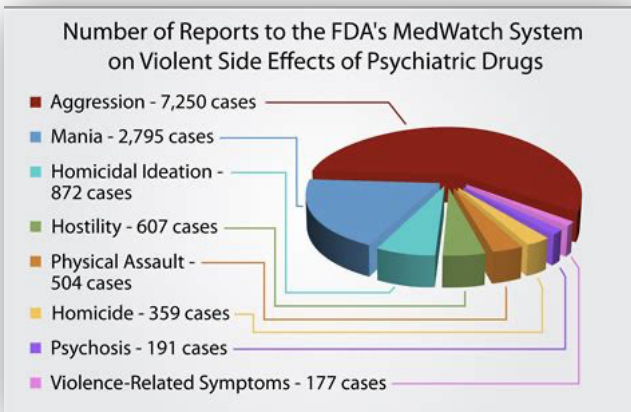
go through the broken mental health system that includes medications first. The front line meds, then second their then third tier. Clozapine is a third tier medication, meaning it's not the first one to be prescribed, when ultimately it might be the best one in the long term.

Wikipedia says: Clozapine is regarded as the gold-standard treatment when other medication has been insufficiently effective and its use is recommended by multiple international treatment guidelines, after resistance to earlier neuroleptic treatment is established.

So patience is the needed characteristic when dealing with psychosis, schizophrenia, schizo affective disorder and other diagnoses. However, patient can be difficult to come by when your life is draining away.

I had time when prescribed Seroquel. It set me off and created more panic and anxiety than I was experiencing prior! "What are the doctors thinking?" Some of us say. Well, they just don't know how we will metabolize the pill. We might even be allergic to it. Every drug comes with a grand list of side

effects that we're supposed to push off in light that they might lessen. So, wait a month and suffer through it? Yup.



I never took Seroquel again. I never took Haldol again. I did take resperdol though and that helped me. Why? I have no clue. The doctors don't know why either. They are just glad one choice worked. As we say, we're looking for the right cocktail of drugs that will restore our lives. Yikes.

I realize with any mental health drug, there is a long list of problems accompanying it. So why take them? I have to say that drugs can have a good temporary effect to calm down symptoms. And during this time one can learn all kinds of coping skills to tame the symptoms. I've met doctors who say you'll be on this medication for the rest of your life. This doesn't provide hope for that individual, but quite the opposite. So, that doctor is being harmful. Not good.

Even an anti-psychotic medication can be taken for a period of time until your mind comes back and the delusions lift. I've experienced this and delighted in titrating off them. As long as symptoms, severe symptoms do not come back and that you can cope with the lesser symptoms, then why not get off the drug?

I always recommend that you communicate with your treatment team when desiring to come off a medicine. Withdrawal effects are nasty and can cause a bad relapse.

Eat your favorite food to bring realism into your life.

What do I mean by this? When we're suffering day in and day out there has to be something good in between that will keep our sanity. Good tasting food can bring a temporary feeling that changes us for a short period of time. Our spirit and soul can be lifted up when our tastebuds are enjoying the moment.

I'm not saying gouging, of course. But having a treat now and then, all in moderation, can be okay. Your body can handle some sweets for a time. Just don't over do it. If you are already eating too many sweets and feel you need to lose some of the weight the medication brought on, I hear you. Try something simple like sugary fruits instead.

Ask someone if what you're seeing, hearing or smelling is real or fake.

If you have the awareness and can ask these questions, you're not insane. In fact, your ability to do so show your ability to differentiate between reality and the delusional world. I know it's frightening when you're in the midst of it, I've been there. Sometimes you don't want to share what's being experienced because you think others will call you crazy or nuts.

When you share your decisions or hallucinations, it can be therapeutic, depending on how the listener responds. I know you have to trust them while you're being so vulnerable. If they can't be trusted yet, I say don't share it. If your psychiatrist or therapist knows your meds and asks about hearing voices or seeing things, you should let them know what is happening. They will decide whether to change your medications based on the dosage. Sometimes delusions are the result of side effects and the lowering of the dose can remove them.

It's all so scary because what we see, hear and feel and taste is our reality in this physical realm. Even in the spirit realm, we can see frightening things or be uplifted by angels. If you do ask a family member the question about your reality, it can help them to understand and feel a part of your recovery. They'll need to be compassionate to do this.

Go to a crisis center or call a crisis line.

Many larger cities have a crisis center that is different a normal ER. In Syracuse we have CPEP or Comprehensive Psychiatric Emergency Program.

301 Prospect Ave Second Floor of the Emergency Department
Syracuse, New York 13203. 315 448 6555.

At a psychiatric crisis center, they are able to help individuals more quickly than an ER. They are mostly staff with mental health doctors, nurses, therapists and even police. Major hospitals with a CPEP-like facility can transfer a person to the hospital's psychiatric floor or to another hospital.

Some crisis centers are situated in a house so only a small group of people attend it over a short period, maybe two weeks or less. Berkana House is an example of this.

Berkana House is

an innovative crisis respite program that helps adults in need of mental health or substance abuse support to begin their recovery in a calm, peaceful, and supportive environment.



While staying at Berkana each person receives their own private room and access to the shared living spaces. More importantly, guests have 24/7 access to our certified peer specialists- specially trained employees who have completed their own mental health journey and learned to use those experiences to help others. *At Berkana, no one needs to worry about being judged;* our staff can truly empathize.

During their stay Berkana guests can choose to take advantage of the following supports:

- Around the clock peer support
- Connection to community resources and support groups for long term support
- Help building necessary recovery skills including conflict management, personal safety and healthy coping skills
- Referral to other AccessCNY mental health programs
- 24/7 warmline support from peer staff by calling (315) 437-3300 (*after discharge*)

Adults seeking mental health or substance abuse peer support services can call Berkana staff directly to begin the intake process and can stay at Berkana for up to seven continuous days.

<https://www.accesscny.org/services/berkana-crisis-respite-adults/>



<https://power2u.org/directory-of-peer-respites/>

Calling a hotline is now available for those feeling desperate, on the brink of suicide or just needing someone to talk to. Calling 911 used to be the go to number, but now the 988 number is the designated phone number to connect a person to a crisis counselor. An individual can also text 988 and chat online.

<https://988lifeline.org/>

Telling yourself what you're seeing isn't real.

I bring this up for those who are experiencing a form of psychosis as I did. Confusion, fear, anxiety, anger, frustration are some of the adjectives that describe it. Telling yourself that it isn't real is hard to do, mostly because it is "real" to you at the moment. But in order to help yourself cope you can say out loud: "I hate this!

You are not real to me. I see you [feel you, hear you] but I don't want you attacking me." This is not easy to do, but you are in fact in authority of what you're experiencing, especially if you understand your authority in Jesus as a christian. The battle is

real and fierce, but it can be won. I don't know how long the battle will be for you, but if you fight for yourself you can win. I know that some element of sanity has to accompany this kind of speaking out loud. If you have a spiritual person who understands the spiritual world, they can help you to make these commands.



I have a friend who would not do this because while they were off their medication for schizophrenia they welcomed the delusions to a degree. They believed they have a spirit guide that is enlightening them to do good things. This is when others can pray the same commands for them. This same friend finally made it through enough of the battle to now live in a long term mental health housing where they are

monitored. They are still on medications, but they've regained some of their sanity! He's a journey where, the very strong meds that calmed the delusions to an extent, will be modified to less powerful medications so he can have a clearer mind and better decision making.

Try to laugh at the hallucination.

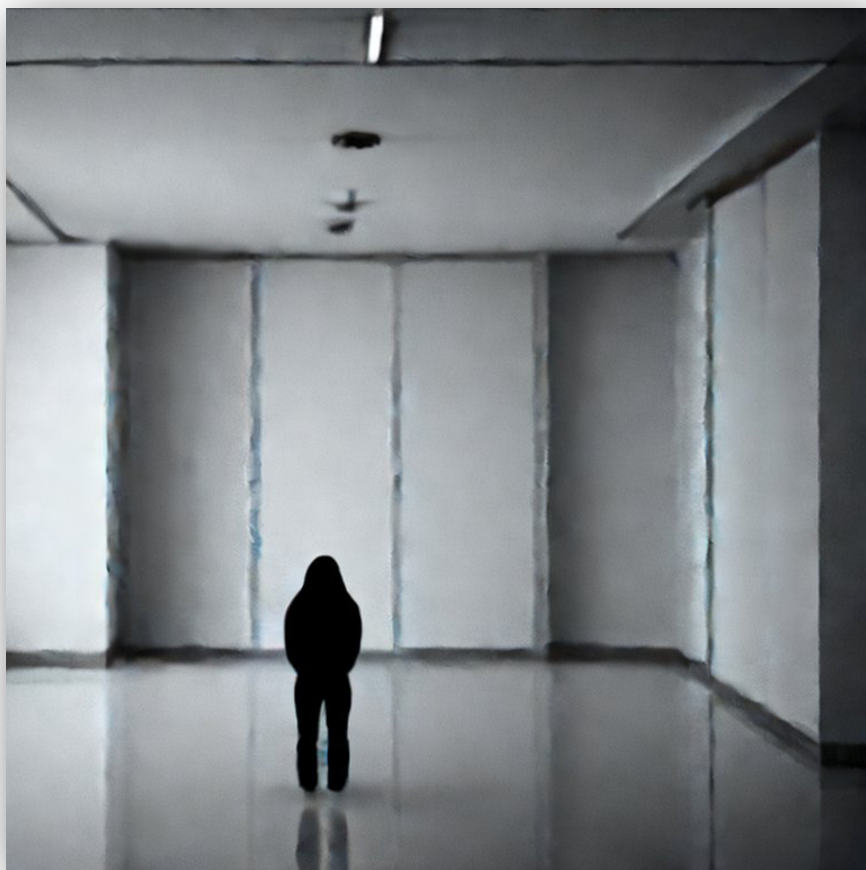
Hallucinations can sometimes makes sense to someone in psychosis. If that's you, could you ever think of laughing at it's absurdity? If you can, it can take the power away from it.

Chapter Fifteen Skill Resources:

Give yourself permission to isolate when allowed to by staff, but decrease the isolation over time.

Isolate? Yes. It can help at times when you're feeling overwhelmed and totally irritated with people. If you're in the hospital right now, I can understand your need to isolate. On some psych floor experiences I had terrible paranoia and wanted no one around me. Each hospital nursing staff handles this differently. Some policies force patients to participate in groups, while others allow flexibility.

Isolation, to some degree, is a coping skill, because the intensity of one's mental health causes everything to bring on triggers, no matter how small, or because your depression zaps all your energy and can't manage mingling with people. It's amazing the effort it takes to socialize when you're battling illness. Others won't understand unless they've faced it as well.



I've gone from the extremes of participating in no activities or even going to the cafeteria to being a part of everything, even outside ones, ie. Field trips to pet shelter, bowling, swimming.

When I say, decrease your isolation over time, I mean you should get to the place where you're at least attending a group without sharing, just listening. This participation stimulates some form of interactivity, which will be necessary for your recovery to continue.

While staying at a hospital, at least try to interact during meal times when you feel up to it. You'll find something so important, that you are not alone. This realization is a powerful stigma buster and comforter.

Writing down some of your questions and submit them to staff.

This another form of communication to the treatment around you that is most informing. It shows the staff how you're thinking about your recovery, your progress and other things, like your personality too. The written word is powerful and meaning to your nurse, doctor, therapist and others involved in your recovery. They will include it in their notes as needed and take your concerns, perhaps, even more seriously.

If you were to write a poem or draw a picture and submit it, these pieces convey a lot of information.

Try to focus on the good things happening to your mind and tell others.



During my first hospitalization I experienced short periods of relief. I couldn't understand how 1 pm to about 130 pm could be better than the rest of the day. I would feel the weight of the depression lift off and I felt normal briefly. It seemed miraculous and annoying at the same time

because I loved the feeling, but I hated that they didn't stay.

Perhaps you are experiencing momentary times of relief. Write about them and address this to your team. They might figure out why and how to expand them. It might have something to do with your metabolism and the type of medications you're taking. All these factor into your treatment.

Cooperate with the structure provided for you while in treatment.

I bring this up because a lack of cooperation can be detrimental to recovery. What can this look like? Missing appointments, arguing in a session, not taking medication at assigned times, missing out patient activities, etc.

If structure is complied with, it tends to expedite recovery. Consistency provides for better evaluations and better

decisions on further treatment. Also, following structure will help you when you're discharged and go home. The home environment can sometimes causes apathy and fear and loneliness. Structure at home can create the feeling and sense of accomplishment while you're caring for yourself. If

you have a caretaker, ie. Spouse, friend, they will appreciate the structure and your willingness to recovery.



It may sound strange that someone is not willing to recover, but this can occur when psychosis is involved. Recovery from psychosis can be a long, long journey. Remember, your family is involved in your recovery to some degree as well, especially if they providing transportation to appointments or assisting with food, etc.

After some time in recovery and attaining some semblance of clear thinking and returned joy and strength, you might be ready to volunteer somewhere. In a volunteer situation you'll have to comply with structure. So don't allow yourself to let hours and hours go by with no activities. You're hurting yourself in the long run. Of course, I understand when you're hurting so much that just getting out of bed is your best accomplishment. I couldn't do this for a period and felt terrible about myself. Hope still found a way to reach me. Thank God!

Chapter Sixteen Skill Resources:

Keep in touch with your supportive people.

We've talked about isolation, the pros and cons. When you finally find recovery is more in reach and you're feeling better, don't step back and relax, move forward by contacting those you've chosen to be a part of your team. They will want to hear any good news and sharing how you've had a good day helps you hear you say it out loud. There is a scriptural principle: Faith comes by hearing, by hearing the Word of God. One of the key universal element here is the speaking and listening action. It's one thing to think a good or bad thought, it's another to hear it out loud.

The audible sound of your voice has convincing powers to either pull you down or up. Another principle: The tongue has the power to kill or bring life. Yes, indeed.

Have you ever heard a motivational speaker and felt so good after the speech? And if you continue that event with talking and sharing with your friends what you learned and were motivated to do, it creates even more energy in your soul.

There once was a king called King David who faced dire circumstances. He and his warriors had gone out to battle only to find out that when they were returning home that an enemy had taken their wives and children. The entire group of men sobbed and turned against their leader King David.



They even conspired to kill their leader. The story goes on to explain how David knew the despair of his men and the horrible disaster of their families captivity. He did something that changed how he reacted. He “encouraged himself in the Lord.” He spoke out loud and possibly sang his trust in God and His ability to turn this around. King David used his audible voice and relationship with God to lift himself up. His soul and spirit needed to engage his heart in hope and strength. His strength came from his faith.

You can say things out loud to yourself like: “I am recovering. I am going to make it. I feel horrible right now, but I’m getting better. I have faith in my recovery.”

Volunteer in your local mental health system.

For those of you that need to get back into the work scene soon, but aren’t quite ready yet, it’s a humbling process. We know we’ve been a lot of trauma and we don’t desire for any stress to cause a relapse. This is why volunteerism is an excellent way to regain confidence.

Mental health conditions tear are our insides mentally, psychologically, spiritually, emotionally and even physically. So jumping back into the rat race is not smart for some of us.

Volunteerism can be daunting since we’re entering new territory. Where do you start and how much do you want to engage? These questions are so important because your activities will impact recovery. Many of us go into human services, like a pantry serving food or collecting it, talking to other peers in an agency like Catholic Charities or perhaps a library putting books back on the shelves.

Don’t be offended when a place does not accept you right from the start. I tried once to volunteer at a hospital, but one of their questions asked if I had a current mental health illness and marked me off immediately. Their reasoning? They don’t know or can’t predict how I would handle situations and can’t afford a scene or liability. I eventually was able to volunteer some time at a hospital under the supervision of the chaplain. I sang songs to the kids over the intranet!

Volunteerism gives you the opportunity to test your new strengths and coping skills. Remember, you have new emotional muscles now! Socializing takes on a new meaning at this stage of recovery because you're testing yourself moment by moment, whereas before you might have had no issues at all relating to people or taking orders or instruction. My ability to learn was seemingly destroyed by anxiety. I couldn't work under a supervisor for a long time. Your fatigue



level needs testing as well. How long can you handle the newness of structure and work and all the stresses that come with it? Even the nicest person might rub your wrong or you're not used to learning again.

There are many facets to volunteerism that will reveal your recovery

progress. The best part is the new purpose you feel. Of course, there might be some bad times and you just leave in disappointment or frustration that you're either not ready or the new role doesn't fit you. Give yourself space and patience. When in recovery you are constantly learning the new you.

Becoming a volunteer takes some courage and stamina. You're in a new environment. You're learning perhaps new skills, protocols and processes and new ways to communicate. Sometimes you might even find your communication skills need a lot of work this time around. A professional person who finds themselves breaking may feel

so humbled by volunteering. Or they may feel totally happy with the lack of stress, but facing new challenges with a new outlook.

I went from owning my own business to being disabled. Going from a directorship of an entire department to being stigmatized and fired blew me away. People can be mean and misunderstand you. If they have no recovery experience, then you may have to explain to them your limitations. If it doesn't work out, then don't push it, move on till you find the right fit.

The best part of volunteerism is... it could become your next job! You might find a whole new life and purpose as a result of your mental health! This is exciting when you embrace it. Your creativity might blossom in ways you never expected. Some make their ways into painting or music to express themselves and then go on to have great hobbies that turn into sources of income or success.

I lost my business and more than one business due to mental health. In the years passing though, the entertainment business came back and the joy was increased. I knew the depths of despair and now I know the newness of joy that is such a gift. Gratitude abounds in my life!

Let yourself experiment with a new purpose. Some go to God and ask, "What now?" If you're open, He'll lead your path and ready for great surprises!

Oh yes... you can volunteer at a local NAMI chapter where they have training to support peers trying to recover from some of the very things you lived through. Now you're able to encourage them. Training to lead a support group, office

work or even become a board member is all possible. If you're interested in sharing your success, NAMI is an excellent way to communicate it. www.nami.org



Receive continued prayer for ongoing growth in your body, soul and spirit.

The spiritual element of recovery should never be left out. Some people say, we are a spiritual being with a physical body and not the other way around. When people say, “You need your spirit lifted,” they are correct and they should go the next step, “Your soul needs weight lifted off it.”

Find a spiritual leader who you can go to regularly for spiritual maintenance.

Make ongoing plans for further progress in your overall health.



A treatment plan that is created upon discharge from a hospital or a new beginning with a therapist should include plans to improve every part of your life. Exercise, diet, spiritual devotion and ongoing mindful training to keep your mental capacity growing.

You Should Be An Active Participant In Your Care

“A good therapist will guide and support you on your mental health journey, but your progress will also depend on your investment in the process. Evidence-based practices (EBP) show that effective treatment comes from an equal energy investment between provider and client.

If you are complacent or unwilling to have a conversation, you can expect to experience a limited level of gains. Giving "lip service" or avoiding sessions can cause severe setbacks. Ideally, if your therapist observes any therapy-interfering behavior, they will flag the issue and try to get a general sense of your mental status from session to session.” Read the rest of the article by Max E. Guttman at:

<https://nami.org/Blogs/NAMI-Blog/January-2023/Finding-the-Right-Treatment-Fit>

Additional Coping Skill:

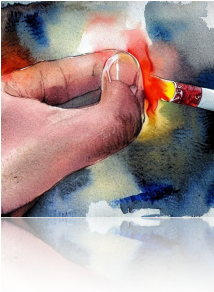
Smoking a cigarette can calm a disorder of the mind. The nicotine receptors in the brain receives it and brings some manner of relief.

Why are depression and smoking linked?

“Why?” is a difficult question to answer in this case, but one possibility



that adds some clarity is that nicotine has a well-documented antidepressant effect. Because it stimulates dopamine release, depressed patients often resort to smoking (or vaping) to mitigate the “adverse effects of stressful stimuli.” Depressed smokers have reported mood improvements that depression-free smokers don't experience after finishing a cigarette.



<https://www.acsh.org/news/2021/09/22/vaping-and-mental-health-does-nicotine-use-cause-teen-depression-15821>

Last coping skill:

Talk to God more often and build a relationship with Him.

Having a relationship with our Creator makes sense when you believe that He actually made you. However, just like any relationship, you have to work at it. Friendships only last when people stay in touch.

A prayer here or there isn't called a relationship. God isn't a candy ball machine - punch in a prayer and that's that. For any father to just order his children around or demand respect from them isn't going to have the relationship that means something to the child. We are God's children and He wants us to spend time with Him.



I realize, in the midst of a mental health crisis, prayers to God are heard by Him. I've found though, He may not answer your prayers the way you're expecting. For those who do establish their faith in God and really trust Him, they too can find themselves questioning God - "Where are You?" I certainly had those cries and thought I was going down for the count a few times. Suicidal ideation is not of God and He hurts when we're feeling this way. But why doesn't He take the pain and agony away? Actually, He will and sometimes it's immediate.

My faith journey inside the mental health journey was confusing and stretched me sorely. To feel your life is held together only by a very thin strand is frightening. To think that you be trusting God and simultaneously wanting to end it all - a serious paradox.

The few verses that held me together are:

2 Corinthians ³ *"Blessed be the God and Father of our Lord Jesus Christ, the Father of mercies and God of all comfort, ⁴ who comforts us in all our affliction so that we will be able to comfort those who are in any affliction with the comfort with which we **ourselves** are comforted by God. ⁵ For just as the **sufferings of Christ** are ours in abundance, so **also our comfort** is abundant through Christ. ⁶ But if we are afflicted, it is for your **comfort** and salvation; or if we are comforted, it is for your **comfort**, which is effective in the patient enduring of the same sufferings which **we also** suffer; ⁷ and our hope for you is firmly grounded, knowing that as you are sharers of our sufferings, so also you are sharers of our comfort."*
and

Romans 8 ²⁸ *"And we know that God causes **all things** to work together for good to those who love God, to those who*

*are called according to His purpose. ²⁹ For those whom He foreknew, He also predestined to become conformed to the image of His Son, so that He would be the firstborn among many brethren; ³⁰ and **these** whom He predestined, He also called; and **these** whom He called, He also justified; and **these** whom He justified, He also glorified.*

*³¹ What then shall we say to these things? If God is for us, who is against us? ³² He who did not spare His **own Son**, but delivered Him over **for us all**, how will He not also with Him freely give us **all things**? “*

They both speak of hope in God! I had to have hope in God because know one else knew the depths of my heart and pain.

God brought me around to the place, after many years, to bring comfort to others. I experienced, as you have experienced, terrible pain and suffering. It is not lost on God. Suffering, in the christian faith, has great purpose. The resulting gift of compassion brings healing to many. May you find peace and hope in God, the Son and the Holy Spirit!

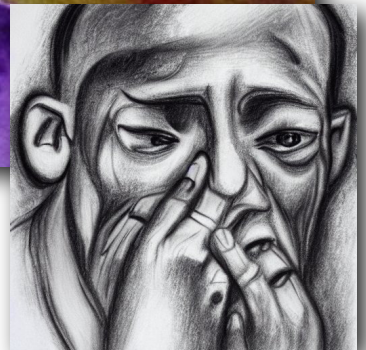


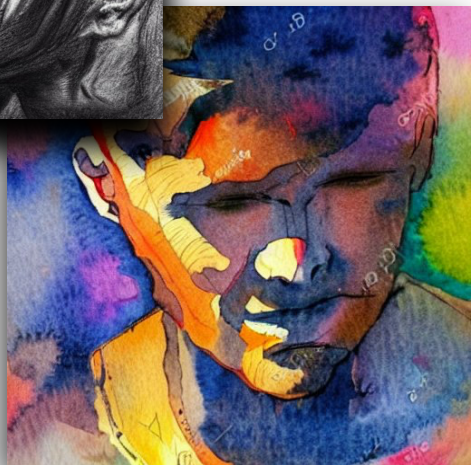
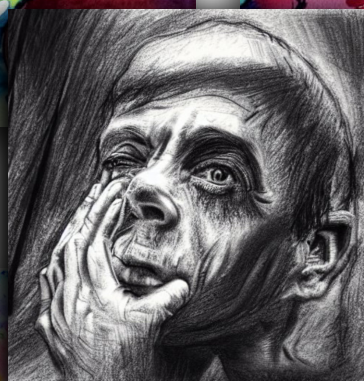
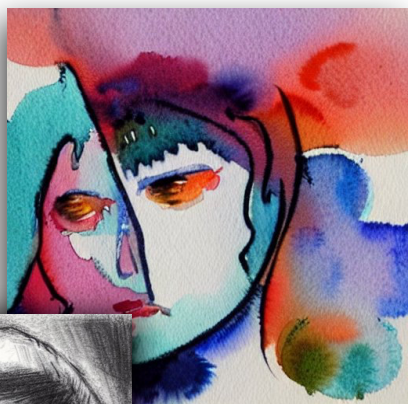
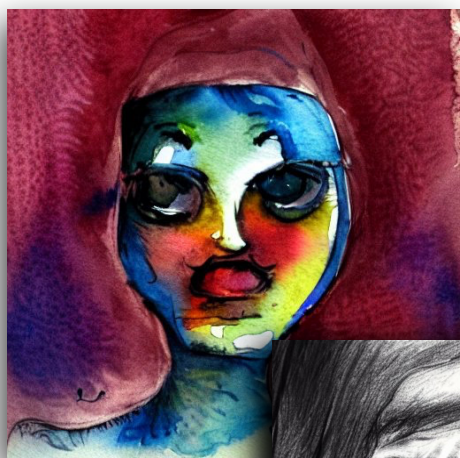


About the Author

Jim Livi's faith is the most intricate and necessary dynamic in his life. His wife Debbie would agree. Their journey together now brings hope to many. Jim is a board member of the national organization called NAMI, which stands for The National Alliance of Mental Illness. He facilitates support groups, speaks at conferences, schools and libraries. His other life is a Bubbleman, as he entertains and inspires children and their families with huge mega bubbles. You can view more at www.megabubbleman.com

The following images depict mental health conditions.





These photos show my life during and after recovery!

