

Insight Into Mental Health Disorders: *Digging Deeper with Your Customers for Better Outcomes*

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- Prompted by work with Legal Non-profit and participants in our child support caseload
- No formal training
- A mental health professional is not required to raise awareness



Have You Ever Wondered?

- Whether Mental Health Disorders (MHD) in our participants impacts our effectiveness on a case?
- Whether having tools for detection of, and strategies for assisting customers with MHD might improve case outcome?



Goals



- General working knowledge of MHD
- Reframe your thinking about difficult individuals: Do they have Mental Health Disorders?
- Self awareness and power dynamic
- General ideas for overcoming bias



A Brief History



- Ancient cultures – religious punishment or possession
- 5th Century BCE, non-religious treatments pioneered
- Middle Ages – back to religion and demons
- 1800's institutionalize living
- 1963 Community Mental Health Centers Act



What is a Mental Health Disorder?

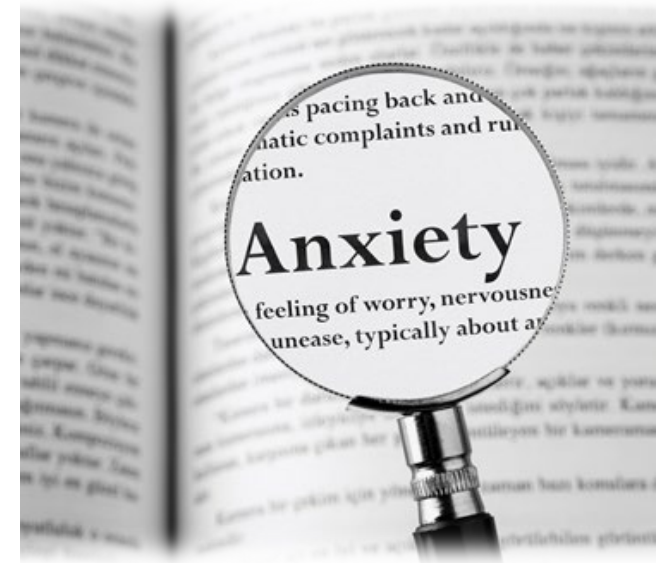


According to Mayo Clinic:

- A mental health illness is a disorder that affects your mood, thinking and behavior
- Concerns vs. Disorders
 - A MHD affects your ability to function in your daily life

Prevalence of MHD

- Half of all chronic MHD begins by age 14; Three quarters by age 24
- 18.1% of Americans live with anxiety disorders
- 6.9% of American live with major depression

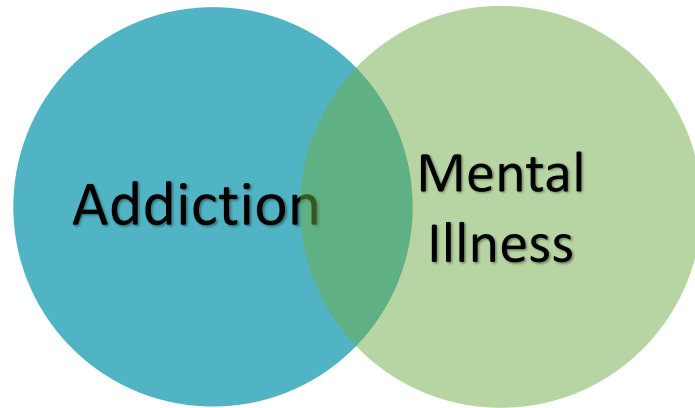


Prevalence of MHD

- 1 in 5 adults experience a MHD
- Nearly 1 in 25 (10 million) adults in the U.S. live with a serious MHD
- Not all agree with these statistics
 - Prof. Kessler of Harvard - 30%
 - SAMHSA – 18%
 - CDC – 25%



Consequences and Impact



10.2m adults co-occurring
MHD and addiction

26% of homeless adults in
shelters have serious MHD



Consequences and Impact



24% of state prisoners have a recent history of a MHD

Serious MHD costs the U.S. \$193 billion in lost earnings annually



Detection and Prevention

- MHD: Minimal early detection
 - Lacks Diagnostic Tools
- Early Detection = Early Prevention/Better Outcomes



Detection and Prevention

- Lack of Diagnostic Tools Arises from etiology of MHD
 - Factors include genetic, biological, and environmental
 - Can interact in ways not clearly understood
- Symptoms are primary means for diagnosis but can have multiple causes
- Treatment



Detection

- Symptoms are primary means for diagnosis.
- But symptoms can have multiple causes
- An imperfect analogy: Think of headache as a diagnosis. Now, ask what are the causes?



MH Generally: Detection/Prevention

Mental Health Disorder

- No early detection
- Lack of early detection equals lack of prevention
- Overly reliant on treatment

Heart Disease

- Early detection Include lipid profile, EKG, ECG
- Prevention is key
- Treatment is last resort as lifestyle changes can prevent episodes



Detection/Prevention

- Early Prevention = Better Treatment/Better Outcomes
 - Prevents progressive worsening and damage by singular event
- MHD has progressive and traumatic aspects
 - Plasticity: Ongoing Diminishment/Single Event



Detection/Prevention

- Despite challenges in finding reliable markers, research is actively seeking biomarkers and other means of early detection
- ***Challenge:*** Some MHD such as OCD have no known biomarkers which lend to early detection



So, why does this matter?



- Non-MHD Conditions that Impair Life
 - Can often be obvious to others
 - They are aware and communicate it to you
- Those with MHD?
 - May be undiagnosed
 - As it affects cognitive and communicative functions; may not communicate it to you



Denial or something more?

- *Anosognosia*: Lack of insight or awareness regarding one's own mental illness.
- Most common reason for treatment termination



Depression

- No pleasure or joy in life
- Lack of concentration
- Feelings of hopelessness
- Lack of or no self-esteem
- Sleep issues
- Lack of energy
- Food issues
- Physical Symptoms



Depression Risk Factors

- Abuse
- Medications
- *Conflict*
- *Death or a loss*
- Genetics
- Serious illness



What to Look For

- Anxiety Disorder/Bipolar/PTSD/BPD
- Episodes Produce Fight or Flight
 - Operating from amygdala
 - Prefrontal Cortex Shutoff
- Is the Participant Acting
 - Angry/Irritable/Unresponsive/Unreasonable





VIDEO GOES HERE

<https://www.youtube.com/watch?v=aHm3ZKzVP7w>













Threat Detection



Why is it Important?

- Important evolutionary function: protects from danger associated with external threat
- Those with Urbach-Wiethe Disease said to lack fear



Signs & Symptoms

Bipolar Disorder = Different Perspective

- Harder time distinguishing expression
- Higher rate of interpreting threat when threat is less clear
- See more threats: people untrustworthy, hard to get along with
- Decision making is affected during manic episodes



Signs & Symptoms

Those with Bipolar Disorder experienced “increased intensity with which emotions were perceived” which “may lead patients to interpret social cues erroneously and engage in dysfunctional behaviors and cognitive patterns”

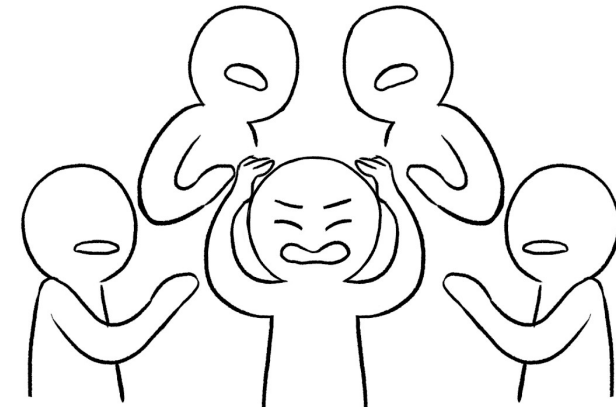
D Bronco, *et al.* Archives of Clinical Neuropsychology, Vol. 33, Issue 4 (June 2018), Oxford University Press



Signs & Symptoms

Bipolar Disorder

- Amygdala more active generally and in experiences showing faces
- Less connectivity with pre-frontal cortex (PFC)
- Increased cortisol





Post Traumatic Stress Disorder

- Post Traumatic Stress Disorder
 - Can last months or years
 - Onset can be delayed
- Symptoms
 - Easily irritated and angered
 - Feeling jumpy
 - Emotional numbness



Post Traumatic Stress Disorder

- Affects about 7.7 million American adults
- Can occur at any age
- Women are more likely to develop than men: 21% for woman for 8% for men (NIH)
- Often accompanied by depression, substance abuse or other anxiety disorders



PTSD and the Military

- 32.8% reported difficulty obtaining mental health care
- Nearly 68% report anxiety
- PTSD linked to Traumatic Brain Injury (TBI)
- Symptoms of TBI can overlap with PTSD
- Over 40% report TBI



Triggers

The Big 3

- Personal dispute
- Family Conflict
- Legal System
- System Conflict/Power Dynamic



System Conflict

“Conflict between service providers and consumers is a regular feature of human service delivery...when staff are compelled to serve large numbers of [customers] with inadequate resources. [Customers] believe their needs are not being met and staff, because of lack of resources, must deny services and use bureaucratic methods to justify such actions”

Oscar Grusky, Ph.D; Richard Adams, Ph.D



Power Dynamic

- Disparity in Power Leads to:
 - Person with Power attributes difficult person as having character flaw, defect, etc. (dehumanizing)
 - Person lacking power tends to see person with power simply as agent of authority (again dehumanizing)



The Power Dynamic

“To me, mentally ill people can’t act any way other than the way they’re acting until their mental illness is treated. So they actually don’t have a choice.”

Mark Goulston, MD

Author of “Talking to Crazy”



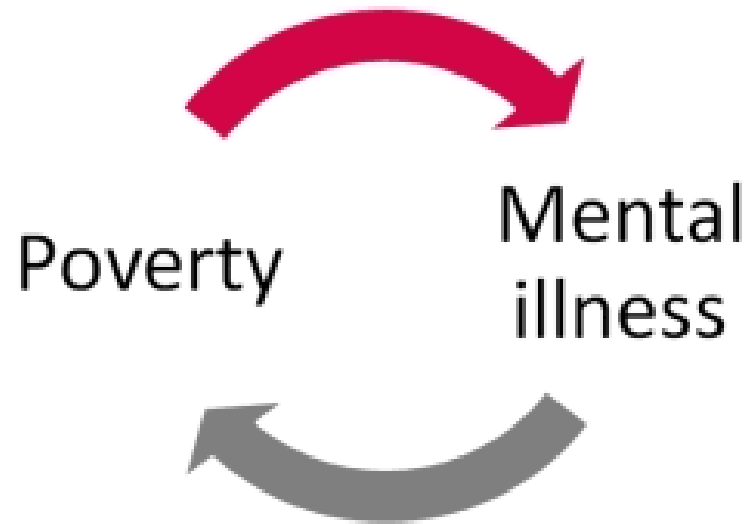
MHD and Poverty

- Poverty = 2 in 5 adults (Gilman et al, 2002)
- Serious MHD (SAMHSA, 2002)
 - < \$20k annually = 16.3%
 - > \$75k annually = 6.4%
- Poverty best predictor of increased MHD across all demographics (CDC, 2004)



MHD and Poverty

What about those in poverty
with major conflict?



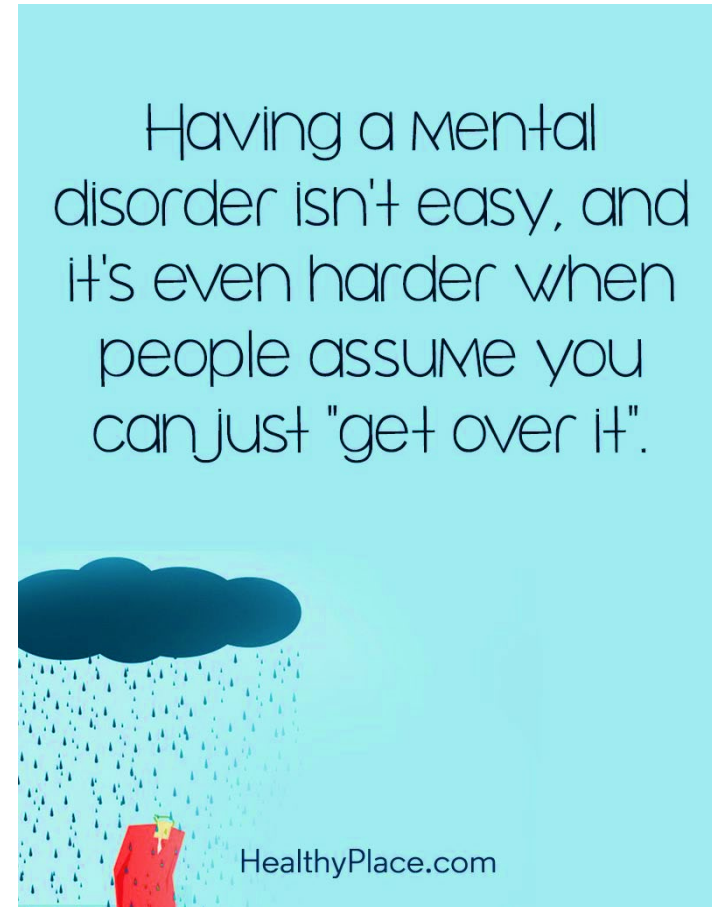
Subtle Signs of Stigma/Bias

- In the media – mentally ill people are often the villain and perceived to be violent
- Phrases – “lost her marbles”, “not playing with a full deck”
- Common assumptions – lazy, unstable, unintelligent, incapable



Subtle Signs of Stigma/Bias

- Verbal Innuendos – whispering or cringing
- Isolation – body language or ignoring
- Disrespect – “snap out of it”



Tips for Eliminating Bias

- Reframe perception- From *Cognitive Miser* to *Provider of Human Services*
- Challenge your *assumptions* and your *agenda*
- Let go of getting to outcome at the outset
- Do not internalize

Cure

Stigma.



Tips for Eliminating Bias

- Be mindful that our customer interactions take place in the realm of MHD triggers
- **LERN**
 - Listen
 - Empathize
 - Reflect
 - Negotiate



Tips for Eliminating Bias

- De-Escalate using LERN
- Watch your language
 - Not, “you should...”
 - Use collaborative language
 - Be sure to negotiate limitations and boundaries within context of this conversation.



Tips for Eliminating Bias

- Change it up
 - Take a break
 - Change environment
 - See if trusted person can help out
 - Draw pictures
 - Use analogies

Smile, Smile, Smile...



Can Smiling Help?

- Facial nerve is responsible for, well, facial expression
- Bilateral
 - Not only does it control muscles, it sends signals back to brain



Yes, it can!



- *Smiling*
 - We smile when happy
 - We become happy when we smile.
- Mirror Neurons
 - Cause us to copy or reflect behavior in others
 - Can cause positive mimicry.



Caring for Your Own Mental Health



- Making Connections
- Connecting with Other Humans
 - Increasingly socializing through means less likely to satiate need for human interaction
 - Social Media and smart phones cause a temporal dislocation, less satisfying interaction, less human contact, and of course reduced self esteem and distorted self image.



Social Media, Depression, Addiction

- 2012 study of 425 undergrads at state USU entitled “They are Happier and Having Better Lives than I am.”
- Found that Facebook users feel that others leading better lives.
- Is Facebook the new source of distorted self image?



Social Media, Depression, Addiction

- 2012 Study of 160 HS students found positive correlation between depressive symptoms and time spent on social media.
- Suggested further research of causality



Social Media, Depression, Addiction

- 2018 U of Penn Study Claims Causal Link
 - Social Media and Depression/Loneliness
 - Research Suggests 2 causes
 - Fear of Missing Out (FOMO)
 - Downward Social Comparison

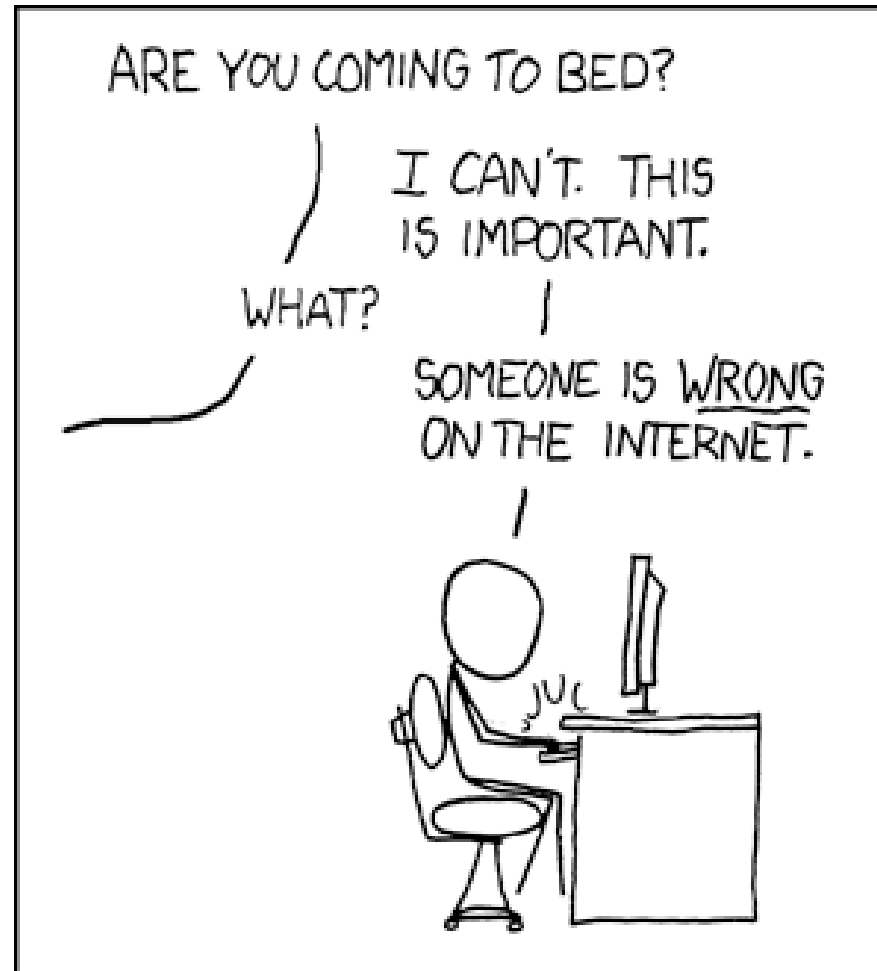


Social Media, Depression, Addiction

- Moderate behavioral addiction: If you have it around, you will use it more than necessary
- Criteria for behavioral Addiction (Aviel Goodman, M.D.)
 - Recurrent failure to resist impulses to engage in the behavior.
 - A feeling of lack of control while engaging the behavior
 - Important activities given up or reduced



Social Media, Depression, Addiction



Social Media, Depression, Addiction

- “An endless bombardment of news and gossip and images [that] has rendered us manic information addicts.” (Andrew Sullivan)
- Ask yourself
 - Is the information valuable?
 - Does it enrich your life?
 - Is it simply an amygdala hit, a dopamine hit?
 - What are you sacrificing in return?



The Antidote

Phone off, Friends On



Digging Deeper

- Awareness of triggers
- Meeting people where they are.
- Empathy, patience
 - Meeting people where they are
 - This is what *Customer Service* looks like



I'M NOT LAZY.
I'M JUST EXHAUSTED
FROM FIGHTING MY WAY
THROUGH EVERY
SINGLE DAY.
MIMI LOVE



HealthyPlace.com

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