

BE THE DIFFERENCE FOR SOMEONE WITH A MENTAL HEALTH CHALLENGE

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OBJECTIVES

- Describe the value of training to understand the realities of living with mental illness.
- Discuss the need for increased compassion for the vulnerabilities people face when seeking care.
- Describe your critical role in the individual and family's journey towards recovery.



WHAT IS MENTAL HEALTH

- Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.

~World Health Organization



US ADULTS WITH A MENTAL DISORDER IN ANY ONE YEAR

Type of Mental Disorder	% Adults
Anxiety disorder	18.1
Major depressive disorder	6.8
Substance use disorder	8.1
Bipolar disorder	2.8
Eating disorders	5-10
Schizophrenia	0.3 - 0.7
Any mental disorder	18.5

Only 41% of people with a mental illness use mental health services in any given year

Source: National Council for Behavioral Health - Mental Health First Aid USA



THE IMPACT

- “Disability” refers to the amount of disruption a health problem causes to a person’s ability to:
 - Work or study
 - Carry out activities of daily living
 - Engage in meaningful or satisfying relationship
- Mental illness can be more disabling than many chronic physical illnesses
 - Disability from moderate depression is similar to the impact from relapsing multiple sclerosis or severe asthma



BY THE NUMBERS

- 10.2 million people in US have co-occurring addiction and mental illness
- Only 41-43% of people suffering from a mental health disorder receive treatment in a given year
 - Time from 1st symptom to treatment: 10 years
- Total financial cost of mental illness in the US reached an estimated \$467 billion in 2012

<https://www.nimh.nih.gov/health/statistics/index.shtml>



WHAT IS MENTAL HEALTH FIRST AID?

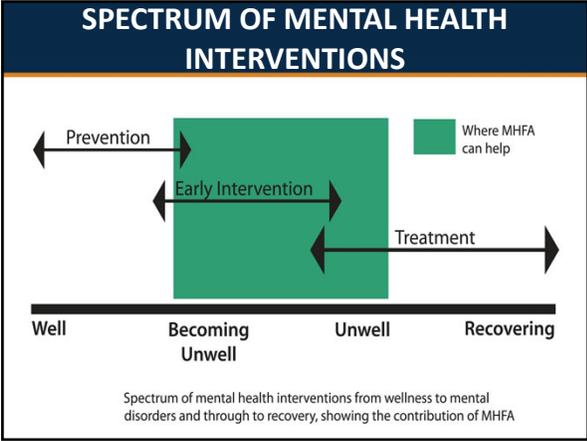
Mental Health First Aid is the help offered to a person developing a mental health problem or experiencing a mental health crisis. The first aid is given until appropriate treatment and support are received or until the crisis resolves.

-National Council for Behavioral Health

- Not a substitute for medical care, diagnosis, or treatment

www.mentalhealthfirstaid.org





MENTAL HEALTH FIRST AID: THE "ALGEE" ACTION PLAN

- **A**ssess for risk of suicide or harm
- **L**isten nonjudgmentally
- **G**ive reassurance and information
- **E**ncourage appropriate professional help
- **E**ncourage self-help and other support strategies



SUICIDE: COMMON CRISIS WITH DEPRESSION AND ANXIETY

- Suicide risk assessment
 - Gender, age, use of alcohol or other substances, less social support
 - Previous attempt, organized plan
- Warning signs of suicide
 - Talking, writing, or posting on social media about death, dying, or suicide
 - Acting recklessly or engaging in risky activities
 - Withdrawing from family, friends, society



SUICIDE: QUESTIONS TO ASK

- Ask directly whether the person is suicidal:
 - “Are you having thoughts of suicide?”
 - “Are you thinking about killing yourself?”

If “yes” to either above, then...

- Ask whether the person has a plan:
 - “Have you decided how you are going to kill yourself?”
 - “Have you decided when you would do it?”
 - “Have you collected the things you need to carry out your plan?”



RESOURCES

- National Suicide Prevention Line
 - Call 1-800-273-TALK (8255)
 - Text “HELP” to 741741
- Other Resources:
 - Trevor Project/LGBTQ - call 1-866-488-7386
 - Trans LifeLine - call 1-877-565-8860
 - Iowa Crisis Chat – call/text 1-855-325-4296
- Iowa Poison Control Center
 - Call 1-800-222-1222



MENTAL HEALTH STIGMA

- Social Stigma
 - Prejudicial attitudes and discriminating behavior directed towards those with mental health programs
- Perceived
 - Internalized self perceptions of discrimination

What are some common terms or labels given to those individuals with a mental health illness?



BREAKING THE CYCLE

- Critically reflect on the types of information you choose to disseminate (e.g., email alert) to ensure that you are doing so responsibly
 - Does the message contain information that is grounded in research and/or evidence-based? If not, what is the basis for the claims?
- Perform a “language audit” of existing materials for language that may be stigmatizing, then replace with more inclusive language



PSYCHOSIS

- Psychosis is a condition in which a person has lost some contact with reality
- The person may have severe disturbances in thinking, emotion, and behavior
- Disorders in which psychosis may occur
 - Schizophrenia
 - Bipolar disorder
 - Drug-induced psychosis



PSYCHOSIS - EXERCISE

- Scenario
- Roles to play
 - Person w/o auditory hallucinations
 - Person w/ auditory hallucinations
 - The voice



PSYCHOSIS - EXERCISE

- Why are you talking to him (her)?
- Don't trust him.
- Isn't he (she) looking at you funny?
- Why would he (she) want to talk with you?
- Do you think you can trust him (her)?
- You can't trust him (her). You can't trust anyone.



PSYCHOSIS - EXERCISE

- How did it feel as...
 - The person without auditory hallucinations?
 - The person with auditory hallucinations?
 - The voice?



**MENTAL HEALTH FIRST AID:
THE "ALGEE" ACTION PLAN**

- Assess for risk of suicide or harm
- Listen nonjudgmentally
- Give reassurance and information
- Encourage appropriate professional help
- Encourage self-help and other support strategies



WHAT IS STRESS

- Stress is a physical, mental, or emotional factor that causes bodily or mental tension
- Distress is extreme anxiety, sorrow, or pain
 - Can be short- or long-term, feels unpleasant, considered outside of our coping ability, decreases performance, may lead to mental and physical problems

• <https://www.medicinenet.com/script/main/art.asp?articlekey=20184>



WHAT IS BURNOUT

- Syndrome of:
 - Emotional exhaustion
 - Measures feelings of being emotionally overextended and exhausted by one's work
 - Depersonalization
 - Measures an unfeeling and impersonal response toward patients
 - Low personal accomplishment
 - Measures feelings of competence and successful achievement in one's work

Maslach, C., S.E. Jackson, et al. (1996). Maslach Burnout Inventory Manual. Palo Alto, CA, Consulting Psychologists Press.



MEDICATION ERRORS

- Mistakes, slips, and lapses cause 13-25% of errors due to stress, fatigue, distractions, and multitasking
- Nurses, pharmacists, and pharmacy technicians are interrupted as often as once every two minutes
- Risk of an error increases 12.7% with each interruption
- Risk of a harmful medication error doubles when nurses are interrupted 4 times and triples when interrupted 6 times during one administration

Das BP et al. Medical errors challenges for the health professionals: need for Pharmacovigilance to prevent. *JNMA* 2006; 45: 73-78.
 Nichols P et al. Learning from error: Identifying contributory causes of medication errors in an Australian hospital. *MJA* 2006; 188: 279-279.
<https://www.ismp.org/newsletters/acute-care/showarticle.aspx?id=37>



STRATEGIES TO ALLEVIATE BURNOUT IN HEALTHCARE PROFESSIONALS

Risk Factor	Strategy to Alleviate Risk
Workload	Permitting time at the workplace to recover from a stressful event
Control	Clearly defined roles and expectations from organizational leadership
Reward	Identify suitable rewards to recognize achievements, provide opportunities to teach or mentor trainees
Community	Promote participation in professional organizations
Fairness	Transparency in decision-making
Values	Align personal expectations with organizational goals
Job-person incongruity	Evaluate and align job responsibilities with personal and professional expectations

MITIGATING STRESS

- Self-Care Techniques**
 - Monitor personal stress indicators (stress, eating, agitation)
 - Decompress with healthy activities
 - Speak with trusted people, maintain social connections
 - Record three good experiences from the day, plan for good experiences the next day

- Resiliency Competencies**
 - Awareness
 - Notice the right information
 - Regulation
 - Of self and others' stress reactions and emotions
 - Leadership
 - Toward meaningful personal and team actions



OTHER RESOURCES

- **SAMHSA-HRSA**
 - SBIRT: Screening, Brief Intervention, and Referral to Treatment
- **Iowa Department of Public Health**
 - Your Life Iowa
- **National Alliance on Mental Illness (NAMI)**
 - Provider Education
- **National Academy of Medicine (NAM)**
 - Action Collaborative on Clinician Well-Being and Resilience: Knowledge Hub



RESOURCES FOR THE PROFESSION

- **National Academy of Medicine (NAM)**
 - Action Collaborative on Clinician Well-Being and Resilience: Knowledge Hub
- **Iowa Monitoring Program for Pharmacy Professionals (IMP3)**
 - Call 1-515-725-2253; Email IMP3@iowa.gov
 - Peer assistance program for impaired pharmacy professionals
- **APhA Institute on Substance Use Disorders**
 - May 29 – June 2, 2019 in Salt Lake City



QUESTIONS

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