

MAPS: *A Guide to Managing Adult Psychiatric Symptoms for Family Members and Friends*

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How does one “Manage Adult Psychiatric Symptoms (MAPS)?”

This educational packet is designed to give family members and close family friends a better understanding of how to support someone with a mental illness and how you can take care of themselves. The material here stresses the important role that family members and close family friends can play in the successful management of a mental health disorder.

Included in this packet you will find:

- Information on mental health diagnoses
- Tips on how to care for someone with a mental health problem
- Suggestions on how to care for yourself and your family
- Where and how to get help

VA Procedures for Sharing Information with Family and Friends:

To assist someone with the management of a mental illness family members and friends need to be able to communicate with the veteran’s provider. The best way to ensure that a provider can share information with a family member or friend is to obtain the veteran’s written authorization (or oral consent if you are attending a meeting at the clinic with the veteran). This will assure that the veteran and clinician have a shared understanding of the purpose of the information sharing as well as the information to be shared.

Different VAs may differ on procedures needed to share information with family and friends. Talk with providers to determine the steps you need to take at your veteran’s VA.

List the steps you need to take for information to be shared with you at your veteran’s VA:



What is Mental Illness and Can it be Managed?

- A mental health problem is similar to a physical health problem.
- Mental health problems can be managed successfully.
- Treatment for mental health problems is more successful when you have support from a family member or friend.
- Family members can be involved in treatment and can go to some of the Veteran's appointments with the Veteran's permission.
- Awareness of symptoms of mental health diagnoses is key to helping someone to manage a mental health problem. Mental health diagnoses can only be made by a healthcare provider.
- Ask providers about Evidence Based Practices for treating mental health disorder. Often a combination of treatments, medication and therapy, is needed in addition to support from family and friends. A veteran should see their provider when there is an increase in symptoms.

Common Mood Disorders

DISORDER	DEFINITION	SYMPTOMS	TREATMENT
Depression	A serious medical illness that negatively affects how you feel, the way you think, and how you act (APA, 2005).	<ul style="list-style-type: none"> • Sadness • Loss of interest in things • Changes in sleep or appetite • Feeling tired, restlessness, or irritable • Feelings of worthlessness or guilt • Difficulty thinking and making decisions • Thoughts of death or suicide 	<ol style="list-style-type: none"> 1. Antidepressant medications 2. Individual or group therapy 3. Combination of both <p>Most people experience relief with treatment.</p>
Bipolar Disorder (Manic-Depression)	A brain disorder that causes dramatic changes in a person's mood, energy, and ability to function (APA, 2005).	<p>Manic Phase</p> <ul style="list-style-type: none"> • Extreme happiness • Sudden extreme irritability or rage • Grandiose illusions • Unrealistic beliefs in their abilities (i.e., not able to get hurt) • Excessively risky behaviors • Uncontrollable racing thoughts or rapid speech • Less need for sleep <p>Depressive Phase</p> <ul style="list-style-type: none"> • May experience symptoms as listed above for depression 	<ol style="list-style-type: none"> 1. Medication 2. Therapy 3. Combinations of both <p>Continuous long-term treatment is recommended since bipolar disorder is a recurrent illness.</p>

Common Anxiety Disorders

DISORDER	DEFINITION
Generalized Anxiety Disorder (GAD)	Chronic worry (six months or longer) without a cause or more than is necessary given the situation.
Post-Traumatic Stress Disorder (PTSD)	Symptoms that can occur after an individual has experienced, witnessed, or participated in a traumatic event (e.g., war, sexual abuse, accident).

SYMPTOMS	TREATMENT
<ul style="list-style-type: none"> • Restlessness • Sleep problems • Headaches • Muscle tension • Trembling 	<ol style="list-style-type: none"> 1. Cognitive behavioral therapy 2. Relaxation techniques 3. Biofeedback 4. Medication
<ul style="list-style-type: none"> • Avoidance of situations that remind them of the event • Constantly relive the event • Shut down emotionally • Recurring nightmares • Exaggerated startle reactions • Difficulty concentrating • Sleep problems 	<ol style="list-style-type: none"> 1. Cognitive behavioral therapy 2. Relaxation techniques 3. Support from family & friends 4. Medications

Other Types of Mental Illness

DISORDER	DEFINITION	SYMPTOMS	TREATMENT
Dementia	An umbrella term used for a number of brain disorders involving memory, thinking, & communication problems.	<ul style="list-style-type: none"> • Problems with memory, attention, language, and problem solving • Disorientation in time, place, and person 	<ol style="list-style-type: none"> 1. Medication 2. Caregiver support services
Schizophrenia	A mental illness that makes it difficult for a person to think clearly, distinguish reality from fantasy, manage their feelings, make decisions, and relate with others (NAMI, 2007).	<p>Positive or "Psychotic"</p> <ul style="list-style-type: none"> • Delusions • Hallucinations <p>Disorganized</p> <ul style="list-style-type: none"> • Confused thinking, speech, and unusual behavior • Emotional flatness or lack of expression • An inability to start and follow through with activities • Speech that is brief and lacks content • A lack of pleasure or interest in life 	<ol style="list-style-type: none"> 1. Medication 2. Psychosocial rehabilitation 3. Often involves hospitalization at some point 4. Family education
Substance Use Disorders	Problems with alcohol, drugs (street or prescription), or a combination of alcohol and drugs (poly substance abuse or dependence).	<ul style="list-style-type: none"> • Failure to fulfill major role obligations • Physically dangerous to self and /or others • Legal problems • Persistent or recurrent social or interpersonal problems 	<ol style="list-style-type: none"> 1. Cognitive-behavioral therapy 2. Medications 3. Individual and Group therapy 4. 12-step programs (e.g., Alcoholics Anonymous)

Warning Signals:

How to Tell if Someone with a Mental Illness is Getting Worse

Warning signals are signs that occur before symptoms get worse. It is important for you to be watchful and talk with the person to identify specific warning signals that have occurred in the past. Once you can spot the warning signals, coping strategies can be used to prevent symptoms from getting worse or requiring hospitalization.

Examples of warning signs are changes in mood, withdrawing from activities, changes in how the person relates to others, altered thinking, or unusual behavior. Symptoms also may worsen in certain situations, so it is important to know what situations cause an increase in symptoms.

Please list the warning signals that lead to an increase in symptoms:

Please list the situations that caused an increase in symptoms:



Preparing for a VA Appointment

How I think my family member is doing day to day

Veteran's name:

Form completed by:

Relationship to veteran:

Date: _____

Specific concerns I have about my family member:

1. _____

2. _____

3. _____

Current sleeping habits (number of hours/night, naps): _____

Current use of alcohol or other drugs: _____

Overall, I think my family member's current mental health is: (circle one)

Please list any major family or life events that could be affecting his/her mental health:

Daily activities: _____

My impression of the veteran's pattern of taking medications (Is he/she taking them as prescribed?)

- Better than usual
- About normal for him/her in the past 2 years
- A little worse than usual
- The worst he/she has been in the past 2 years

Questions I have for the provider:

1. _____

2. _____

Family Care Plan

Name: _____

Date: _____ Provider: _____

Family Member's Diagnosis: _____

Causes: _____

Symptoms: _____

Treatment Options: _____

Warning signs for preventing a crisis: _____

Treatment Plan: _____

Emergency Plan: _____

■ _____

TIME: _____

FAMILY APPOINTMENT DATE: _____

TIME: _____

Tips on Getting the Most From Psychiatric Medications

(Sherman, 2003)

Key Points:

Medication should be taken every-day and exactly as prescribed

Be patient! Many medications take 3-8 weeks to work

Medications should continue to be taken even after improvement

Medications should not be shared with others

Memory Tips:

Using a pillbox can be helpful

Take medications at the same time every day

Side Effects:

If there is any life-threatening reaction call 911 or go to the emergency room immediately

Many side effects improve the longer the medication is taken

Write down any side effects caused by medications

Providers need to be told about any side effects

If a provider has said the medication needs to be taken with food, please be sure to eat a few crackers to avoid an upset stomach

Drug Interactions:

Do not drink alcohol or use street drugs

Do not take over-the-counter medications without asking the provider first

Changes in caffeine and nicotine use can change a medication's effectiveness

Inform providers and pharmacists of any new medications including vitamins and food supplements

Final Hints:

Research has shown that a combination of medication and therapies provides the quickest and most lasting treatment for many conditions. Ask providers about other treatment options besides medication.

Finding the right medication takes patience and teamwork with providers. Sometimes the first medication may not be the best match. Open and regular communication with providers is very important!

Helping Your Family Member or Loved One: Do's and Don'ts

(S.A.F.E. Program; Sherman, 2000)

Topic	Helpful Do's	Helpful Don'ts
Communication	<ol style="list-style-type: none"> 1. Be respectful and calm 2. Stick to one topic at a time 3. Keep a positive attitude 4. Be honest with yourself and with your family member 5. Use humor (when appropriate) 6. Communicate openly and often with the providers 	<ol style="list-style-type: none"> 1. Don't tease your family member about their symptoms 2. Don't yell or shout at your family member 3. Don't argue with your family member about his/her symptoms (e.g., don't try to talk them out of their delusions or hallucinations) 4. Don't get stuck talking about the past – stay in the present
Dealing with the fact that your family member has a mental illness	<ol style="list-style-type: none"> 1. Get help from a qualified physician, therapist, etc. 2. Learn as much as possible regarding your loved one's diagnosis 	<ol style="list-style-type: none"> 1. Don't let the illness run your life 2. Don't try to be your family member's therapist

Topic	Helpful Do's	Helpful Don'ts
<p>Dealing with difficult behavior</p>	<ol style="list-style-type: none"> 1. Accept the fact that the person has a real illness 2. Set and discuss clear limits, rules, and expectations for the family member's behavior 3. Be consistent and predictable 4. Keep a log of the person's symptoms, responses to medications, hospitalizations, etc. 5. Pay attention to warning signs of possible relapse, worsening of symptoms, etc. 6. Give your family member space when it is asked for (as long as they are not dangerous to themselves or others). 	<ol style="list-style-type: none"> 1. Don't take the symptoms or illness personally 2. Don't tolerate abuse of any kind from your family member 3. Don't blame all of your family member's undesirable behaviors on the mental illness 4. Don't always interpret his/her emotional distance as reflective of something about your relationship

Taking Care of the Caregiver

Step I: Identify and be aware of your stress warning signals

Use the form below to help you identify your personal stress warning signs. When stressed, what symptoms do you experience? (Check all that apply)

PHYSICAL

- Headaches
- Indigestion
- Stomach aches
- Sweaty palms
- Trouble sleeping
- Dizziness
- Back pain
- Tight neck, shoulders
- Racing heart
- Tiredness
- Ringing in ears

EMOTIONAL

- Crying
- Nervousness, anxiety
- Boredom – no meaning to things
- Edginess – ready to explode
- Feeling powerless to change things
- Overwhelming sense of pressure

- Anger
- Loneliness
- Unhappiness for no reason
- Easily upset

SPIRITUAL

- Emptiness
- Loss of meaning
- Doubt
- Unforgiving
- Martyrdom
- Looking for magic
- Loss of direction
- Cynicism
- Apathy
- Needing to “prove” self

BEHAVIORAL

- Smoking more cigarettes
- Bossiness
- Compulsive gum chewing
- Attitude critical of others

- Grinding teeth at night
- Drinking more alcohol
- Eating more
- Inability to get things done

COGNITIVE

- Trouble thinking clearly
- Forgetfulness
- Lack of creativity
- Memory loss
- Inability to make decisions
- Thoughts of running away
- Constant worry
- Loss of sense of humor

RELATIONAL

- Isolation
- Intolerance
- Resentment
- Loneliness
- Lashing out
- Hiding
- Clamming up
- Lowered sex drive
- Nagging
- Distrust
- Lack of intimacy
- Using people
- Fewer contacts with friends

Taking Care of the Caregiver Cont'd.

Step II: Match coping strategies to your stress symptoms

Physical symptoms: Take a break, take care of your own health (checkups, proper nutrition, exercise, rest)

Spiritual symptoms: Spiritual counseling, daily devotionals, continue going to church

Cognitive symptoms: Get plenty of rest, ask others to help, use notes

Emotional symptoms: Give yourself permission to take care of yourself, individual counseling, support groups, rely on a close friend or family member to talk to, relaxing activities (breathing, yoga, walking)

Behavioral symptoms: Exercise, schedule pleasant events, talk to your doctor about quitting smoking/weight loss, plan ahead, prepare for emergencies

Relational symptoms: Take time out for yourself, do something with your family, be honest with yourself and others about what you need

Taking Care of Yourself	<ol style="list-style-type: none">1. Stay in contact with your support system2. Educate yourself about mental illness3. Talk to other people who are struggling with similar situations (such as the S.A.F.E. Program, meetings of NAMI, etc.)4. Remember you are not alone5. Take one minute at a time	<ol style="list-style-type: none">1. Don't isolate yourself from family or friends2. Don't feel sorry for yourself3. Don't ignore stress in yourself (seek help!)4. Don't turn down others assistance
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VA Mental Health Programs for Veterans

(Program names may differ across facilities)

Ambulatory Mental Health Clinic	<p>The mental health clinic provides a number of psychoeducational classes for veterans. Classes include anger management, anxiety/stress management, depression management, journey through loss, sleep management, and health adjustment skills.</p>
Biofeedback and Stress Management Program	<p>This program is designed to assist veterans in learning physical relaxation skills to reduce symptoms of stress such as anxiety, frustration, and anger. Any VAMC provider can make a referral through a consult request.</p>
Crisis Intervention Clinic	<p>Offers two types of treatment groups 1) The Crisis Intervention Group (for those who have an immediate stressor or crisis but otherwise function well) and 2) The Coping Group (for veterans coping with extended stressors who have been through the Crisis Group and need additional care). Referral made through the Ambulatory Mental Health Clinic.</p>
Day Treatment Center (DTC)	<p>The DTC is a specialized outpatient program providing a structured day treatment program for eligible veterans experiencing a wide range of behavioral, emotional, and stabilized physical problems. The program provides therapeutic assistance and support while allowing the veteran to live in the community. A detailed brochure is available on request.</p>
Geropsychology	<p>For veterans who are admitted to the extended care unit there is a geropsychologist who works with the extended care health care team. Services include mental health assessments specific to older individuals and family consultation services.</p>
Health Psychology Clinic	<p>Provides a wide range of services to promote quality of life for veterans undergoing medical procedures, including the psychological evaluations for organ transplant and other procedures, as required.</p>

Mental Health Intensive Care Management Program (MHICM)	MHICM is a community-based program whose goal is to help veterans with serious mental illness to cope more extensively with their illness and to live more successfully in the community. Veterans must meet certain criteria to be eligible and considered for intensive mental health and case management services.
Mental Health Primary Care Inpatient Unit	Serves veterans experiencing acute psychiatric problems (i.e. in danger of harming themselves or others or are too emotionally unstable to care for themselves). Evaluation made through the Ambulatory Mental Health Clinic (walk-in basis) or by presenting to the Emergency Room after hours or on weekends.
Home Based Primary Care	Provides health care in the home using a team of professionals, including a psychologist.
Neuropsychology Clinic	Provides assessment and treatment recommendations for veterans with possible brain impairment related to injury or disease. Open to any veteran regardless of service connection, but a referral from a VA provider is necessary.
Post Traumatic Stress Disorder (PTSD) Program	The PTSD program is an outpatient program for veterans who have been experiencing disturbing psychological symptoms as a result of having lived through some major event of a traumatic nature. The program may for a set number of weeks and then follow-up treatment continues for a period of time. A detailed handbook is available on request.
Operation Enduring Freedom (OEF) & Iraqi Freedom (OIF)	Information and support for Iraq & Afghanistan veterans and their families.
Stop Smoking Program	Class discusses the nicotine patch, gum, medication and Tips for Quitting.
Substance Abuse Treatment Center (SATC)	Provides evaluation of and treatment for alcohol and drug problems. Treatment involves educational classes, individual and group therapies, and medical psychiatric services. A detailed handbook on the program is available on request.
Community Residential Care (CRC)	Provides health care supervision to eligible veterans not able to live independently, who need supervision and supportive care but do not need hospital or nursing home care.
Homeless Services	Several programs meet the needs of homeless veterans: 1) Transitional Residence/Compensated Work Therapy, 2) Compensated Work Therapy, 3) Grant Per Diem, 4) Health Care for Homeless Veterans, and 5) Supportive Employment.

My Family Member's Personal VA Phone Directory

Primary Care Clinic:

Name of your Primary Care Provider:

Location of your Primary Care Clinic:

Phone Number of your Primary Care Clinic:

Hours of Operation:

Mental Health Clinic:

Name of your Mental Health Provider:

Location of your Mental Health Clinic:

Phone Number of your Mental Health Clinic:

Hours of Operation:

Specialty Clinic:

Name of your Specialty Clinic:

Location of your Specialty Care Doctor:

Phone Number of your Specialty Clinic:

Hours of Operation:

Specialty Clinic:

Name of your Specialty Clinic:

Location of your Specialty Care Doctor:

Phone Number of your Specialty Clinic:

Hours of Operation:

A treatment team is made up of people from a number of different health care disciplines.
My veteran's treatment team includes the following providers:

Primary Care Doctor:

Name: _____

Phone Number: _____

Nurse

Name: _____

Phone Number: _____

Psychologist

Name: _____

Phone Number: _____

Psychiatrist

Name: _____

Phone Number: _____

Social Worker

Name: _____

Phone Number: _____

Other Treatment Team Members:

Name: _____

Role: _____

Phone Number: _____

Name: _____

Role: _____

Phone Number: _____

Name: _____

Role: _____

Phone Number: _____

Name: _____

Role: _____

Phone Number: _____

Name: _____

Role: _____

Phone Number: _____

Contact Information for Various Sections of the Department of Veterans Affairs

VA Benefits

(Compensation & Pension)

1-800-827-1000

www.vba.gov/bln/21/

Board of Veteran's Appeals

202-565-5436

www.va.gov/vbs/bva/

Health Benefits

1-877-222-8387

www.va.gov/health

Education Benefits

1-888-442-4551

www.gibill.va.gov/

Life Insurance

1-800-669-8477

www.insurance.va.gov/index.htm

CHAMPVA

1-800-733-8387

www.va.gov/hac/

TRI CARE

1-800-444-5445

www.tricare.osd.mil/

Telecommunication

Device for the Deaf (TDD) 1-800-829-4833

VA Home Page

www.va.gov

VA Contact Information

www.va.gov/customer/conaff.asp/

VA Forms

www.va.gov/forms/

VA Home Loan Guaranties 1-888-232-2571
(Houston) www.homeloans.va.gov/