

FRIENDSHIPS COUNT

Eliminating the Stigma of Differences

Teachers Guide

Provided by:
Mental Health Connection of Tarrant County
Community Solutions of Fort Worth

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Eliminating the Stigma of Differences in the School

Note to teachers: For additional information or to provide feedback on this curriculum, please call Kay Barkin at 817-258-8094.

Teacher's Guide Day 1: The Stigma of Differences PowerPoint Slides 1-22

Slides 1-6

As soon as the students settle into their seats, begin the lesson by presenting the initial six slides from the PowerPoint presentation. Show each slide long enough for students to take it in. Note if anyone laughs, expresses discomfort or makes comments.

Each slide shows someone who may be considered different in some way:

- "Punk" boy
- African-American male and female
- "Geek" or "nerd"
- Hispanic male and female
- Girl in a wheelchair
- Muslim woman

Stop the presentation momentarily after the sixth slide, and explain you are starting a unit on recognizing and accepting differences in others.

Slide 7

Title Slide for unit: Eliminating the Stigma of Differences

Slide 8-9

Hand out the six sheets with photos at the top, and tell students to fill in the physical traits they see as well as their reactions to those physical traits. Have a few volunteers talk about their reactions and responses.

OR

Verbally ask the students about their reactions and elicit responses about those reactions. Mention any reactions you heard as you showed the slides before class started.

Ask for comments on the physical or emotional attributes found in the people your students like.

Slide 10

Point out that their comments show they judge others based on some standards they have developed over their lifetimes.

Develop a list of those standards, possibly including: overall look, clothing, hairdo and the way a person responds to others. Ask for additional ways the students judge others.

Before going to the next slide, ask students to define the word "stigma."

Slide 11

Present this dictionary definition of stigma and compare any ways in which the students' definitions differ from the dictionary's. Discuss the possible reasons for those differences.

Slide 12

Ask the students why they think people treat others as different. What is it that makes others "different?" Write various answers on the board.

Slide 13

Ask the students why some people who are different seem scary. Again, write the responses on the board.

Slide 14

Ask students if they are different in any way that others might notice. Without pressuring those who will be embarrassed, try to elicit some ideas on ways each person in the room is different from the "norm."

Slide 15

Now that students see the reasons for stigma, as well as the possibility that they might even be victims of stigma, ask them for ideas on ways to overcome that stigma. Write those ideas on the board.

Slide 16-17

Present other ways to end stigma as shown on these two slides. Recognize answers similar to those provided by the students. Acknowledge any appropriate student responses not listed on these slides.

Slide 18

Explain this is a picture of someone who was considered “nerdy” in school.

Slide 19

Tell the class the nerd in the previous picture is Bill Gates, founder of Microsoft, who is now one of the most successful men in the world. He was focused on computers from the age of 13, and would not have been part of the “popular” athlete crowd or someone who was always at the parties. But many people probably now wish they had been his friend.

Slide 20

Assignment:

Have your students look through any printed materials available, including magazines, newspapers and the Internet. Tell them to find a photograph or other artwork of someone who is different in some way. Be sure there is also an article with the picture.

Slide 21

Tell the students to write something about that person without reading the article. What makes the person different in their minds? What is their immediate reaction to that person?

Slide 22

Now have the students read the article illustrated by the photo or artwork and determine if their perception of the difference relates to the article. Ask them to decide whether their initial impressions were correct or incorrect. Then have them finish their papers with a section on whether they were correct with their first impression and why.

Homework: Have the students look for differences in other people and determine their reactions to those differences. They can write a paper or develop some other creative piece (montage, artwork, etc.) to illustrate what they learn. Suggest they find at least 3 people who are different in some way for this assignment.



Physical Traits

Reactions



Physical Traits



Reactions



Physical Traits

Reactions



Physical Traits



Reactions



Physical Traits

Reactions



Physical Traits

Reactions

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Teacher's Guide Day 2: Eating Disorders PowerPoint Slides 23-33

Slide 23

As soon as the students are settled, present this introductory slide and allow time for them to notice it.

Slide 24

Define eating disorders and point out they are forms of mental illness

Slide 25-27

Explain the causes of eating disorders. At slide 25, ask the students to participate in a discussion about the way peer pressure can lead to these disorders.

Slide 28

Explain the treatment for any of the eating disorders is therapy to address the underlying emotional issues. Emphasize that people can and do recover, going on to lead normal and healthy lives.

Slide 29

Explain there are three types of eating disorders. Most people don't realize compulsive overeating is just as much a disorder as anorexia or bulimia. All are the result of emotional problems. If asked, explain "Anorexia Nervosa" and "Bulimia Nervosa" are the scientific names for these disorders. However, people usually refer to them simply as anorexia and bulimia.

Slide 30

Provide a definition of anorexia. Point out that sometimes people see something in the mirror that does not match reality. They may see themselves as being "fat," while others see them as thin.

Slide 31

Provide a definition of bulimia. Reinforce the dangers of these eating disorders.

Before showing Slide 32, have students read pages 12 and 13 of "Teen Files" supplement.

Slide 32

Initiate a discussion about healthy eating, using the food pyramid from the federal government. Lead students in a discussion about ways they can meet the guidelines outlined by the pyramid. (Information on the new Food Pyramid from the FDA is included in this Teacher's Guide. More is available at www.MyPyramid.gov.)

Slide 33

Assignment:

Have the students look through print materials and/or the Internet to find something they think is beautiful. Encourage them to find something others might not find beautiful. Then lead a discussion on what the students found and the reasons they feel it is beautiful. Elicit responses from others. Use this discussion to stress that beauty comes in many shapes and sizes. There is no perfect body, and everyone has beauty within.



USDA Anatomy of MyPyramid

One size doesn't fit all

USDA's new MyPyramid symbolizes a personalized approach to healthy eating and physical activity. The symbol has been designed to be simple. It has been developed to remind consumers to make healthy food choices and to be active every day. The different parts of the symbol are described below.

Activity

Activity is represented by the steps and the person climbing them, as a reminder of the importance of daily physical activity.

Moderation

Moderation is represented by the narrowing of each food group from bottom to top. The wider base stands for foods with little or no solid fats or added sugars. These should be selected more often. The narrower top area stands for foods containing more added sugars and solid fats. The more active you are, the more of these foods can fit into your diet.

Personalization

Personalization is shown by the person on the steps, the slogan, and the URL. Find the kinds of amounts of food to eat each day at MyPyramid.gov

Proportionality

Proportionality is shown by the different widths of the food group bands. The widths suggest how much food a person should choose from each group. The widths are just a general guide, not exact proportions. Check the Web site for how much is right for you.

Variety

Variety is symbolized by the 6 color bands representing the 5 food groups of the Pyramid and oils. This illustrates that foods from all groups are needed each day for good health.

Gradual Improvement

Gradual improvement is encouraged by the slogan. It suggests that individuals can benefit from taking small steps to improve their diet and lifestyle each day.

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Teacher's Guide

Day 3: Introduction to Mental Illnesses and Stigma PowerPoint Slides 34-64

Slide 34

Introductory slide – can be up as students come into class and settle in.

Slide 35

Explain mental illness can happen to anyone, anywhere, anytime. According to a recent national study, nearly half of all people in the United States will experience a mental illness at some point in their lives. During any given year, one in four people experience a mental illness. In some cases, the illness is mild and does not require treatment. However, many people do require treatment, which is most successful when individuals have the support of family and friends.

Before going to next slide, ask students for a definition of "mental illness."

Slide 36

Share the definition of mental illness as used by professionals in the mental health field.

Slide 37

Explain how mental illness affects people.

Have students read page 3 in "A Guide to Understanding Mental Illness" before continuing.

Slide 38

Explain that a mental illness is actually a change or abnormality in the brain's chemistry. It is not a sign of bad character or a bad family. Instead, it is actually a medical problem that occurs in the brain instead of the body.

Slide 39

Ask students for their ideas on the causes of mental illness. Ask why they think the number of diagnosed mental illnesses has increased in the past two decades. Is there truly more mental illness, or is it better recognized and thus diagnosed more often?

Then discuss the various causes of mental illness that have been identified as shown on the slide.

Slide 40

Continue discussing the causes of mental illness, explaining that these illnesses sometimes seem to “run in the family.” Point out that street drugs and alcohol have been known to cause mental illness. Reinforce the idea in the slide that recent studies show marijuana use can double the risk of developing a mental illness, especially among youth. Possibly point out that some people think marijuana is a “harmless” drug, but the new evidence points out it can have a devastating impact on the brain.

Slide 41

Explain that anyone can develop a mental illness. It often is triggered by a major trauma or emotional upset, but research has not yet shown why, when two people who go through the same or similar traumas, one may develop a mental illness while the other does not. Research is underway to determine changes in the brain that occur when a mental illness develops, as well as ways in which the brains of people who develop mental illnesses are different from others who do not.

Slide 42

Students should understand that mental illnesses are not like heart attacks or strokes that seldom affect teens. Instead, research just released shows more than half of all those who have ongoing mental illnesses as adults developed their first symptoms before they were 14. Three-fourths started having symptoms by age 24. So it is very important for students to understand mental illnesses, their symptoms and their treatments.

Slide 43

Point out that adults with mental illness often remember early symptoms that developed as minor concerns. Extreme shyness can develop into anxiety disorders. Small fears can become phobias. However, be cautious not to alarm the students. Shyness and constant finger tapping, for example, do not necessarily mean someone will

develop a mental illness. A fear will not necessarily become a disabling phobia.

Slide 44

Tell students that, although adults remember early symptoms, the average wait to seek help is long.

Name the following three mental illnesses: major depression, Bipolar Disorder and Post-traumatic Stress Disorder. Ask students how long they think people have the symptoms of those diseases before asking for help.

Slide 45

Typically, people wait eight years after symptoms appear to seek help for major depression. Those with Bipolar Disorder often wait six or more years. And those with Post-traumatic Stress Disorder wait an average of 12 years to get help. Explain this means people are suffering with diseases for which they can get help.

Slide 46

Explain that once people do get help, they have a strong chance for recovery. The recovery rate for major depression is 65 to 70 percent and 80 percent for Bipolar Disorder. People with schizophrenia have a 60 percent chance of recovery.

Slide 47

Explain that the survival rate for all cancers is only 50 percent, while the survival rate for heart failure is just 30 percent. Compare that to the recovery rates for the mental illnesses mentioned in the previous slide.

Before moving to the next slide, ask the students what might cause people to delay seeking treatment.

Slide 48

Recognize those who got the right answers: lack of knowledge (they don't know they have a problem), lack of money or medical insurance, and stigma, which brings you back to the first lesson in the week on the stigma of differences (if you used the Day 1 module).

Slide 49

Point out that studies have shown early intervention leads to the most successful treatments.

Slide 50

Point out that, when it comes to mental illness, the definition of stigma often is expanded a bit, although this definition still can relate to all forms of stigma.

The definition: Negative attitudes and beliefs that lead to fear, rejection, avoidance and discrimination.

Slide 51

Because of the stigma and a lack of understanding, people often treat those with mental illness badly. Ask students if they can think of or if they have seen any reactions in addition to those listed on the slide. If anyone mentions name calling, ask for some of the names people use.

Slide 52

Use this slide to recognize the right answers about name calling, and add to them if necessary.

Slide 53

Explain that the stigma surrounding mental illness is real. In late 2004 year, Mental Health Connection of Tarrant County conducted a telephone survey to determine attitudes about mental illness. Nearly 30 percent said they think there is something about someone with a mental illness that makes them seem different from others.

Slide 54

Nearly half think anyone who has had a mental illness should not be allowed to run for any public office. And more than half blame the parents of those with major depression, saying it is caused by the way a person was raised.

Slide 55

Many people say major depression is caused by a lack of willpower – similar to staying on a diet.

Slide 56

Explain that, because they are often treated badly and because there are such negative attitudes, people of all ages often do not reach out for help.

Slide 57

Point out ways people respond to the actions that result from stigma. Ask if the students have ever had the feeling someone they know is behaving a certain way because there is something that might be

medically wrong with them. How have they reacted? Do they know anyone with another type of chronic disease such as diabetes or asthma? Have they ever known someone with these diseases to do something that might be dangerous to their health because they don't want people to think they're different.

Then point out that mental illness isn't a disease people can see. Instead, it results in behaviors that are different. Explain that people who feel the stigma often believe they are "weird," or "crazy," and that there is no hope for a happy future. This is especially true among teens because they worry so much about what others might think.

Slide 58

In part because teens often do not reach out for help, suicide has become the third leading cause of death among adolescents today. Accidental injury is the leading cause of death among adolescents, and homicides are the second leading cause.

Slide 59

Explain there is a good reason to fight stigma: so people will understand they are not strange. Instead, they can find help and the chances are good they will feel better.

Slide 60

Explain that a world free of stigma will make it comfortable for people of all ages to reach out for help...

Slide 61

...meaning more people can recover.

Slide 62

Point out that teens – as well as others – are more likely to reach out for help if they do not feel embarrassed, understand their symptoms and realize they can feel better. A lack of knowledge can be as great a barrier as stigma.

Explain that, for the next two days, the class will be discussing a variety of mental illnesses, especially those that are most likely to develop during adolescence. The hope is they will recognize symptoms in themselves and others, and make sure early intervention occurs.

Slide 63

Assignment:

People with a mental illness sometimes need to be in the hospital. Because of the stigma attached to mental illness, they are often embarrassed to be in that position, and worry as much about what their old friends and acquaintances will think as they do about getting better.

With that in mind, write a letter to a friend or acquaintance who has been hospitalized to help with recovery from a mental illness. Think about the things you should and should not say.

Slide 64

Ask students if they know someone who has a mental illness. Perhaps you can share a personal experience with them if they are reluctant to speak up. If it is a personal experience of yours, share how the person handled his or her mental illness. Ask for other examples. If there are none, ask the students how they would handle it if they, themselves, had a mental illness.

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Day 4: A Guide to Mental Illness Part 1 Impulse and Anxiety Disorders PowerPoint Slides 65-101

Slide 65

Introductory slide to a discussion about impulse disorders and anxiety disorders. *Have the class read through page 4 of "A Guide to Understanding Mental Illness."*

Slide 66

Explain there are many types of mental illnesses, just as there are many types of physical illnesses. The ones listed on this slide are the most common. Point out you will be defining each of these as the lesson progresses over the next two days.

Slide 67

Explain that there are many misconceptions about mental illnesses. Perhaps one of the most misunderstood is schizophrenia, which is a break with reality. People with schizophrenia often see and hear things that are not there. However, schizophrenia is NOT a "split personality" or "multiple personality disorder."

Slide 68

Review the definition of schizophrenia as presented on the slide.

Slide 69

Explain that some people associate mental illnesses such as schizophrenia with violence, primarily because the media focus on violent events. However, the vast majority of people with a mental illness, including schizophrenia, are not violent. In fact, people with mental illness may be more likely to become victims of violence than others.

Slide 70

The media also don't usually talk about the very effective medications now available for many mental illnesses, including schizophrenia. Individuals, even with such serious mental illnesses as schizophrenia,

can become fully functioning members of society when they take their medications as directed by a physician.

Slide 71

Explain you are now going to move into the types of mental illnesses more common among children and adolescents. Begin by initiating a discussion about Impulse Disorders, specifically Attention Deficit Hyperactivity Disorder. Ask if the students know anyone with ADHD.

Slide 72

This slide explains Attention Deficit Disorder. Point out that one of the symptoms is impulsivity; hence, its designation as an Impulse Disorder.

Slide 73

This slide explains the difference between ADD and ADHD, although the umbrella term for these impulse disorders is now ADHD.

Slide 74

Point out that ADHD is thought to be a biochemical imbalance in the brain that might be inherited.

Ask students how they might know if someone has ADHD.

Slides 75-76

Explain some of the symptoms. It is also important to state that ADHD is diagnosed only when these symptoms occur in all areas of someone's life – not just at school or just at home.

Slide 77

This slide is a quote from someone who has ADHD and may explain the way it affects a person.

Slide 78

ADHD is very controllable with current medications. There are several types of medications, so people who have negative side effects with one can try another.

If students ask how to determine whether someone has ADHD, tell them the person needs to be carefully evaluated by a team of physicians and psychiatrists.

Slide 79-80

Guide the students into a discussion of anxiety disorders. Explain there are many types of anxiety disorders. While showing the different types on the slide, point out you will be explaining each one as you go along.

Slide 81

Point out that every anxiety disorder involves overwhelming feelings of fear and anxiety that have no basis in fact. Also point out that, without treatment, these disorders can become very serious, sometimes preventing people from doing the things in life they need or want to do.

Slide 82

Symptoms of all anxiety disorders can include those shown on this slide. Ask the students to share times when they have been so nervous or worried that they have had these symptoms even though there was nothing else wrong with them. Explain that fear often causes these symptoms. The mental illness occurs when there is no logical reason for the fears and the fears become overwhelming.

Slide 83

Point out there are several types of anxiety disorders. The first is Generalized Anxiety Disorder. People with this problem constantly expect disaster to strike and worry about everyday things.

Slide 84

In addition to the symptoms for all anxieties, Generalized Anxiety Disorder can include those listed on this slide.

Slide 85

Some of your students may have heard of agoraphobia. A common misperception is that this disorder is a fear of the outdoors. In fact, it is a fear of being any place where people can't "escape" if they feel panicky. This often includes places everyone goes, and can make the lives of those who have agoraphobia very difficult if they cannot force themselves into these situations.

Slide 86

Many students have also heard of obsessive-compulsive disorder, in which an individual has repeating thoughts or obsessions that reflect exaggerated fear or worry. Ask students if they ever have any fears or worries that are compulsive. For example, does anyone make sure his or her room is clean before leaving it each time (could provoke

laughter)? What about washing their hands? Doing homework? Is there anything they might be overly concerned about?

Slide 87

Typical obsessions for people with OCD are contamination or germs, behaving inappropriately in a situation, and even concerns about becoming violent.

Slide 88

To deal with their concerns, people with OCD frequently develop repetitive compulsions such as constant hand-washing, repeating phrases and hoarding unusual items. They may arrange their food in a certain way on their plates. This becomes OCD only when these things are done beyond a normal level. It does not mean collecting typical items such as bottle tops, marbles, trading cards, dolls, etc. Instead, it means something truly unusual.

Slide 89

Phobias are another type of anxiety disorder, and most students have probably heard of one or more. Explain that people with phobias generally understand that their fears are baseless. However, sometimes their phobias begin to control their daily activities because they avoid all causes of the phobia. Some phobias are more serious than others.

Slide 90

There are many phobias people have. Among the most common are:

Arachnophobia, a fear of spiders, which once became the name of a movie about giant spiders.

Social phobia, which can include a fear of being in social situations. But it can also include a fear of public speaking. Some people even have a phobia about eating in public.

Aerophobia, a fear of flying. This can be serious if a business person must travel frequently but is unable to get on an airplane because of the phobia.

Slide 91

Claustrophobia, a fear of being trapped in a small or confined space. Some people have difficulty undergoing a medical test called an MRI because they must be placed in a small tube. Others cannot ride elevators because they feel trapped. Ask if the students can think of

other places that might cause someone with claustrophobia to feel uncomfortable. What about an astronaut's suit? A deep sea diving helmet?

Acrophobia, a fear of heights. Many people who are afraid of heights can avoid them; however, it can limit jobs and activities. For example, someone with acrophobia could not be a window washer on a skyscraper. This person might not even be able to work in a performing arts theater because the catwalk (walkway above the stage) is too high for comfort.

Emetophobia, a fear of vomit. This will probably cause some laughter, but ask if anyone has or knows someone who has emetophobia.

Slide 92

Carcinophobia, a fear of cancer. While no one wants cancer and everyone may have a fear of being diagnosed with it, some are so afraid that they avoid necessary tests that can catch a cancer early when it is treatable. This phobia can actually cost a life as a result.

Brontophobia, a fear of thunderstorms. You might want to ask when students stopped running into their parents' bedroom when they heard thunderstorms at night. Don't call on any who don't volunteer, however, since many students could still have this phobia and might be embarrassed. For these students, point out that some people have this fear all their lives.

Necrophobia, a fear of dead things. Some people cannot bear to be in contact with anything that is dead, including birds or animals.

Slide 93

Panic Disorder is another type of anxiety disorder. In this case, the individual has feelings of terror that strike without warning and with no reason. Because individuals cannot predict when the next attack will occur, they live in a state of worry and waiting.

Slide 94

In addition to the symptoms seen with all anxiety disorders, Panic Disorder can also produce trembling, tingling sensations and even a feeling of choking.

Slide 95

Individuals with Panic Disorder may also fear dying or losing control. They also might have a feeling that they are in a dream state or that nothing seems real.

Slide 96

Post-traumatic Stress Disorder, or PTSD, can be experienced by numerous individuals, including those who have witnessed rather than been victims of violence. Many times, people who saw parents or siblings being abused will suffer PTSD. The disorder can also occur after emotional and/or sexual abuse. People who have been in a war zone and those who have survived natural disasters can also experience PTSD.

Slide 97

Symptoms of PTSD can include anxiety or worry, depression, flashbacks to the event or events that triggered the disorder, and the same nightmares over and over.

Slide 98

People with PTSD may also try to avoid any reminders of the event. For example, they might turn off television shows that have plots similar to the experience that contributed to the PTSD. People with this disorder can also appear to be emotionally numb – without any display of feelings. This occurs especially with individuals who were once close, including family and friends.

Slide 99

Two treatments are often combined to help people deal with all of the anxiety disorders. These involve antidepressant medication and therapy, which will help individuals work through the issues causing the extreme worries and concerns.

Slide 100

Assignment: Begin by asking students to name something that scares them. After a brief classroom discussion, have the students write a paper about it. Ask them to really think through their fear – why does it scare them? Does it make sense to be afraid of it? Is it something that can or will harm them? For example, many people are afraid of all snakes, including those that cannot harm them. Why? While it makes sense to fear poisonous snakes, is it reasonable to fear harmless ones? Ask students to include a statement about whether they wish they were not afraid. Does it ever disrupt their lives – do they avoid doing anything to avoid what they fear?

Slide 101

After the students have written their papers, hold a classroom discussion about the various fears in the papers. Ask the students to discuss whether their fears are really phobias or reasonable fears. Why do they think their fears are reasonable or unreasonable?

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Days 5-6: A Guide to Mental Illnesses Part 2 PowerPoint Slides 102-134

NOTE: The final lesson covers a great deal of territory about depression, bipolar disorder and suicide. Based on classroom time and students' willingness to discuss the topics, this segment may take more than a single day.

Slide 102

Introductory slide to depression and Bipolar Disorder.

Slide 103

Introduce depression as a mental illness. Explain there are different levels of depression. Almost everyone feels down from time to time, and that is not a mental illness. However, when people experience sadness and hopelessness for more than two weeks, they may be suffering from severe or "clinical" depression.

Slide 104

Discuss the causes of depression. Explain that many people with severe or clinical depression have others in the family with depression as well. Difficult life events can and frequently do trigger depression, but some scientists think people may be predisposed to clinical depression through heredity. Certain medications can also cause depression, along with other illnesses. In severe cases, the brain's chemistry is affected in such a way that the individual cannot recover from the depression without help.

Have students read pages 6-7 of "Teen Files."

Slide 105

Many people have seen or heard about the symptoms of depression – hopelessness, changes in sleeping and eating patterns, etc. But many people don't realize that teens often have symptoms that are not as common in adults. For example, teens may have poor performance in school. While most adults become lethargic, teens can become very angry and experience uncontrollable rages as a result of their depression.

Slide 106

Discuss the additional symptoms in teens listed on this slide.

Slide 107

Discuss the additional symptoms on this slide as well.

Slide 108

Explain that there are very effective treatments for teens and everyone else experiencing a depression. There is no need to feel so down and hopeless – help is available. Typically, there are two types of treatment for depression: medication and therapy.

Slide 109

Not every type of therapy works for everyone, so several different types have been developed. Among them is psychotherapy, which may be the kind with which most people are familiar. In psychotherapy, individuals work with a therapist to explore painful events and feelings while learning coping skills so they can deal better with these and other experiences.

Slide 110

In cognitive-behavioral therapy, the individual and therapist work to change negative patterns of thinking and behaving. This type of therapy may be particularly helpful to individuals with anger management problems and other issues related to the way they approach life in both thought and behavior.

Slide 111

Interpersonal therapy and family therapy focus on improving relationships between the individual and others in his or her life. This may include home, school, work and other places where an individual spends time and interacts with others. In some cases, two or three types of therapy are combined to provide the best possible results. It is important to know that, if one type of therapy doesn't work, others might. No one needs to give up on feeling better. It may just take some time to find the right combination of therapies.

Slide 112

Medications called antidepressants are often used along with therapy to help improve the brain chemistry in individuals who are depressed. People with depression must remember that it does take a couple of weeks or more for antidepressants to have their full impact. There are many different types of antidepressants as well, so if one does not work, there are many others to try. The key for people with depression

is to understand there is hope for recovery – they need to find the right combination of therapy and medication.

Slide 113

Move into a discussion of Bipolar Disorder with a definition of the disease as shown in the slide.

Slide 114

The causes of Bipolar Disorder are similar to those for depression, including heredity, chemical imbalances in the brain and major life events that can trigger the disease.

Slide 115

With Bipolar Disorder, individuals move from one extreme to the other, sometimes with periods that seem normal in between. Bipolar Disorder has also been called manic-depression because of the mood swings. The mania can take many forms, including those listed on the slide.

Slide 116

Continue explaining the symptoms of mania. At some point, mention that people with Bipolar Disorder often like the manic stage because they feel powerful, don't need sleep and believe they get a lot done. They do not see the bad judgment or irritability that can make things difficult for those around them.

Slide 117

Additional symptoms can include unusual behavior or dress, and some people collect various unusual items while in the manic stage.

Slide 118

Sometimes people in the manic cycle of Bipolar Disorder have behavioral changes. They may stop caring about their grooming and/or become obsessed with writing. In some cases, people in the manic stage of Bipolar Disorder have delusions or false beliefs.

Slide 119

Individuals in the manic cycle may also begin abusing drugs or become overly aggressive. Not all of these symptoms have to be seen for someone to have Bipolar Disorder.

Slide 120

When people with Bipolar Disorder move into a depressed state, the symptoms are identical to those experienced by those with clinical depression as described earlier.

Slide 121

Bipolar Disorder can be very difficult to diagnose. As shown on the slide, people with the illness often receive misdiagnoses over a period of years. As a result, it can take eight to 10 years for the right diagnosis and treatment.

Slide 122

Treatment for Bipolar Disorder is three-fold. As with depression, therapy and medications can provide important support. But, because the behavior related to Bipolar Disorder can be difficult to understand, it is important that individuals with the illness have the support of their friends, families and peers. Remind students of the name calling that often occurs when someone has a mental illness. Yet, a person needs support much more than derision.

Slide 123

Begin a discussion of suicide, which is a major risk for individuals with clinical depression and Bipolar Disorder. Explain that suicide is the third leading cause of death for teens – just behind accidents of all kinds (not just automobile accidents) and violence. Yet, suicide is preventable.

Slide 124-125

Discuss the warning signs of suicide as presented on these slides with students.

Slide 126

Make a special note that it is NOT normal for a teen to talk about wanting to commit suicide.

Slide 127

Continue discussing the warning signs.

Slide 128

Let students know there are steps they can take to help a friend who may be thinking about suicide.

Slide 129

Describe the CARL line, a resource for people who are concerned about someone who may be in danger of committing suicide. The CARL line is fully confidential and free. Trained clinicians will help people determine whether someone really might be at risk for suicide and provide them with resources to help prevent that suicide. The number for the 24-hour CARL line is 1-877-778-CARL (2275).

There are many other excellent resources for discussions about suicide prevention with students. For more information on those resources, please call Kay Barkin at 817-258-8094.

Slide 130

Assignment: Have the students look through various resources to find someone who may have clinical depression or Bipolar Disorder. Remind them they cannot tell just by looking at someone – they need to look at that person’s actions. If they find people, discuss the behaviors that led them to that belief. Move into a discussion about ways the person they identified can get help. What can they do to encourage the individual to get help?

Possibly have the students role play a situation in which one is exhibiting signs of depression or Bipolar Disorder. Have a second student approach that first one and discuss the symptoms with him or her in a way that is compassionate but can lead to the person getting needed help and treatment.

Slide 131

Assignment: Discuss ways the students might recognize that a friend may be considering suicide. Then talk about ways the student can help the friend. What steps should be taken? How can the student convince the friend that help is available and treatment does work? Point out they can only try, and sometimes it doesn’t work. It’s not their fault. However, many times the talking and personal support do help.

Slide 132

Because of the stigma, some people believe asking for help for a mental illness is a sign of weakness. It means they cannot “pull themselves together” or “just move on and get over it.” Hold a classroom discussion on whether asking for help is, indeed, a weakness. What would make someone think it is? Why isn’t it?

Slide 133

Have the students find someone in the media who seems to need a word of encouragement. Have them write a letter of encouragement to that person.

Slide 134

Wrap-up Homework Assignment: Write a paper on the various types of differences discussed during this lesson. With each difference, write a paragraph about the stigma associated with it, the reason the stigma exists, and what can be done to overcome the stigma. What can the students do personally to help fight the stigma of differences?