

**Module 3**

**Understanding Mental Disorders,  
Treatment, and Recovery**

# “Mental Disorders” - 1

- Many terms may be used, such as “mental illness”, “mental health problems” or “behavioral disorders.”
- Each disorder is different in each person.
- There is no “have it” or “don’t have it”.  
Mental health is a continuum or spectrum.
- Mental disorders vary from person to person and from time to time.

# “Mental Disorders” - 2

- Most persons with identified mental disorders respond positively to treatment.
- A person cannot “catch” a mental disorder from another person, although genetics do influence the development of some disorders.
- Parents with mental disorders do not necessarily “cause” disorders in their children.

# Impact of Mental Disorders

- *Thought processes, moods and emotions* are affected by mental disorders.
- Mental disorders are biologically based.
- What matters most is the life impact.
- Disorders can be more, or less, serious, and may change over time.
- Cause is less important than current impact.
- Violence is not associated with all disorders.

# The Recovery Model

- Persons with mental disorders can, on their own or with treatment, learn to function positively and effectively in the community.
- Early identification, appropriate assessment, effective care planning and appropriate treatment make a difference.
- Persons with mental disorders can successfully and safely raise their children into adulthood.

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**Signs and Symptoms of Mental  
Disorders in Adults**

# Types of Mental Disorders-1

- Affective disorders:
  - Anxiety disorders
  - Manic episodes
  - Depressive disorders
  - Panic disorders
  - Phobias
  - Post traumatic stress disorder

# Types of Mental Disorders-2

- Eating Disorders
- Obsessive-Compulsive Disorders
- Personality Disorders
- Delusional Disorders
- Psychoses
- Sexual and Gender Identity Disorders



# Mental Health Screening Form–III

- 18 “yes” or “no” questions.
- Minutes to complete.
- Self-administered or read to an adult.
- “Yes” = make a referral.
- Referral: To obtain further assessment  
Does not assume a disorder  
Qualified assessors

# MHSF-III – Questions - 1

- Q.1-4: Past MH services (or need for services)
- Q.5: Schizophrenia
- Q.6: Depressive disorders
- Q.7: Post-traumatic stress disorder
- Q.8: Debilitating phobias or fears
- Q.9: Explosive disorders
- Q.10: Delusional disorders

# MHSF-III – Questions - 2

- Q.11: Gender or sexual disorders
- Q.12: Eating disorders
- Q.13: Mania
- Q.14: Panic disorders [not phobias or fears (Q.8)]
- Q.15: Obsessive compulsive disorders
- Q.16: Pathological gambling
- Q.17: Learning disorders or MR

# **Module 3: Understanding Mental Disorders, Treatment, and Recovery:**

## **Model Interventions and Supports**

# Helping Models

- **Behavioral** – cause is secondary; primary goal to understand and change behaviors.
- **Biological** – treats the physical root cause.
- **Ecological** – cause and cure lie with the interaction between the person and their environment.
- **Interactive** – all other models may apply.
- **Psychoanalytic** – internal mental life and past experience drive a person's reality.

# Mental Health Treatment

- *Past:* Treatment in closed rooms with theoretical and experiential support.
- *Present:* Evidence-Based Practices (EBPs)  
EBP Resource Kits (SAMHSA/CMHS)
  - Illness management and recovery
  - Assertive Community Treatment
  - Family psychoeducation
  - Supported employment
  - Co-occurring Disorders: Integrated Dual Diagnosis Treatment

# Mental Health Interventions

- Medication
- Education
- Counseling or Therapy
- Care Management
- Respite Care
- Assertive Community Treatment (ACT) Teams
- Self-Help Groups
- Residential or Institutional Care

# “Resistance” to Treatment

People don't always follow recommendations:

- Treatment is the person's choice
- Reinforcement and support helps
- Treatments effect different people differently

Don't judge—Just find a different way.



# Impact of Trauma on Parents in Child Welfare

- Trauma increases risk for mental disorders.
- Parents learn to parent from their parents.
- Childhood trauma affects parenting.
- Child abuse *sometimes* crosses generations.

# Stress and Mental Disorders

- Always more than meets the eye.
- Effect of current and past events.
- Poverty and mental disorders.
- Individual experience of stress.
- Co-occurring disorders.
- Addressing stress improves care of children.

# Mental Disorders & Violence

- Less risk of violence in persons with mental disorders.
- Psychosis and unpredictable mood and/or behavior.
- Depression and suicide.
- Substance abuse and
- Suicide risk and antidepressants.

# **Module 3: Understanding Mental Disorders, Treatment, and Recovery**

## **Effects on Interpersonal Relationships and Family Dynamics**

# Context of Mental Disorders - 1

- Mental disorders: diseases of *mood*, *thought*, *emotion* or *perception*.
- Each disorder is different, and each person expresses a disorder uniquely.
- Context or environment affects the way a person expresses their disorder.
- Ask questions!

# Context of Mental Disorders - 2

Persons with mental disorders:

- May become isolated from informal support.
- May turn to negative sources of support.
- May not recognize their bad judgment.
- May not recognize any impact on their children.

# “Recovery Model”

## Premises

- #1 All individuals are unique with specific needs, goals, attitudes, and beliefs in recovery.
- #2 Persons in recovery share some similarities but follow their own pathways.
- #3 All persons get equal access to treatment and can participate in their own recovery.
- #4 Treatment funding should be used to support recovery-oriented approaches and services.

# Recovery Dimensions - 1

- Supportive Relationships
- Renewing Hope and Commitment
- Finding a Niche in the Community
- Redefining Self
- Incorporating Illness



# Recovery Dimensions - 2

- Overcoming Stigma
- Assuming Control
- Managing Symptoms
- Becoming an Empowered Citizen