HOW TO SUPPORT YOUR PEERS WITH STIGMATIZED MENTAL ILLNESS



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LAND ACKNOWLEDGEMENT

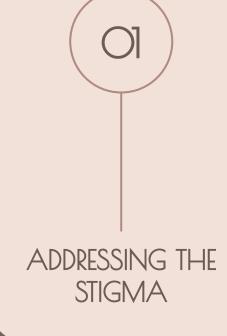
We would like to respectfully acknowledge that UBC Vancouver and AMS Peer Support are on the traditional, unceded, and ancestral land of the x^wməθk^wəẏəm (Musqueam) peoples.

CONTENT WARNING

This presentation will discuss topics of mental health, substance use, and suicide.

Please prioritize your wellbeing and take care of yourself however you see fit.

OUTLINE









WHAT IS STIGMA?

What is it, where does it come from, and why is it damaging?

WHAT IS STIGMA?

According the the Mayo Clinic, "stigma is when someone views you in a negative way because you have a distinguishing characteristic or personal trait that's thought to be, or actually is, a disadvantage."

LEVELS OF STIGMA



housing insecurity

Studies in various Canadian cities indicate that between 23% and 67% of people experiencing homelessness report having a mental illness

income

Canadians in the lowest income group are 3 to 4 times more likely than those in the highest income group to report poor to fair mental health.

Indigenous identity

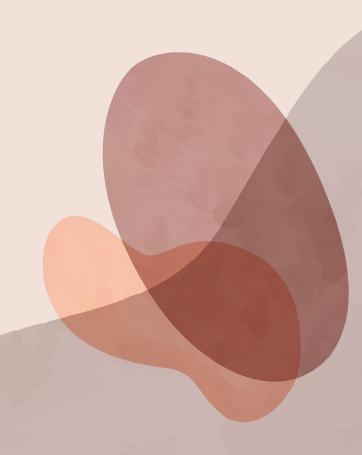
First Nations youth die by suicide about 5 to 6 times more often than non-Indigenous youth. Suicide rates for Inuit youth are among the highest in the world, at 11 times the national average

WHERE DOES STIGMA COME FROM?

Some sources of stigma:

- The media
- Unsafe language
- A lack of understanding

Fundamentally, stigma is rooted in a lack of understanding or fear of the unknown





BE MINDFUL OF YOUR LANGUAGE

UNSAFE

"That class is traumatizing"

"This movie is depressing"

"You're so organized, so OCD"

"He's such a psycho"

SAFER

"That class is so challenging. I'm having a tough time"

"This movie makes me feel sad"

"You're so organized"

"I don't really understand him"

O2 BREAKING THE STIGMA



ASPECTS OF DE-STIGMATIZATION

EDUCATION o

Learn about different disorders and symptoms

COPING

Learn different coping strategies or support methods

→ IMPACTS

Learn how these symptoms can affect people with the disorder

→ EDUCATE

Share accurate information and a sense of understanding

UNDERSTANDING THE SYMPTOMS



SPEAK OPENLY

Talk about mental health openly and honestly. Breaking the stigma starts with open dialogue and assuming best intentions.



KEEP LEARNING

It's important to continue your education and foster a deeper understanding of symptoms and why they occur.

O3 PROVIDING SUPPORT

To the best of our ability.

LET'S TALK ABOUT "DIAGNOSIS"

The good, the bad, the ugly.

COMMON DEPRESSIVE SYMPTOMS



LOW MOOD

Prolonged sadness or low mood



SLEEP CHANGES

Sleeping too much or too little



ANHEDONIA

Loss of interest or pleasure



WEIGHT CHANGES

Unintentional gain or loss of weight



GUILTY FEELINGS

Feelings of worthlessness or guilt



SUICIDAL IDEATION

Thoughts or plans of suicide

A WAY TO HELP SOMEONE WITH DEPRESSIVE SYMPTOMS

Focus on **reconnection** to:

- People
 - Friends, family, professional support
- Hobbies and passions
- Beliefs and values
- Hope for the future

COMMON ANXIOUS SYMPTOMS



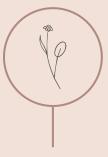
FATIGUE

Restlessness, changes in sleep, general fatigue



TENSION

Unexplained muscle tension or "high-strung" feeling



IRRITABILITY

Short-temper, changes in mood, irritability



DIFFICULTY
CONCENTRATING
Tuning-out or feeling
unable to concentrate

PANIC DISORDERS SYMPTOMATOLOGY



BREATHING CHANGES

Hyperventilation, trembling, or shallow breathing



CONFUSION

Unsure of surroundings, feeling out of control or a sense of danger



PHYSICAL PAIN

Headaches, unexplained pain, or tightness in chest/throat



CATASTROPHIZING

Sudden fear of death or what is felt is the worst possible event coming

HOW TO HELP SOMEONE WITH ANXIOUS SYMPTOMS



FOCUS ON THE PRESENT

Keep them in the moment



BE A VOICE OF REASON

Try to encourage a focus on things within their control



MAKE A SCHEDULE

To-do lists and achievable schedules can help manage everyday stressors



AFFIRM THEM

Affirm their feelings as well as their ability to cope

HOW TO HELP SOMEONE EXPERIENCING PANIC



TRY NOT TO PANIC

They received the energy that you provide



BE PATIENT

Do your best to stay patient, gentle, and calm



DEEP BREATHING

Encourage deep breaths into the stomach



DON'T TOUCH

Ask for consent before touching them



TALK THEM THROUGH IT

Describe the situation

"Hey, you're in your room and I think you're having a panic attack right now, but you're safe and it's going to be okay."

Try grounding

"What day is it? Do you remember what you did today? Try naming all of the colours you can see."

Aftercare

"Do you need anything? Do you want some water? We can stay here as long as you need. I'll be right here."

COMMON SUBSTANCE USE AND RELATED SYMPTOMS



IMPROPER USE

Using higher quantities or longer than intended



UNABLE TO MANAGE USE

Unable to cut down or stop using despite efforts to do so



CONTINUING USE

Even when it has negative effects on other aspects of life



WITHDRAWAL SYMPTOMS

Symptoms relieved by more substance

HOW TO HELP SOMEONE WITH SUBSTANCE USE



SKIP THE LECTURE

Meet them where they're at. The choice to enter recovery is theirs to make, not yours.



BE THERE

Express your support for them regardless of their relationship with substances



EXPLAIN OPTIONS

Ask if they want to look at different resources for substance use related disorders

QUESTIONS OR OFFERS?

KEEP IN TOUCH

Contact Us!

Location: NEST 3125

Website: ams.ubc.ca/peersupport

Social: @ams_student_services

Email: ps.outreach@ams.ubc.ca

