

CONSUMER WORKBOOK 2010

Welcome!

This is the beginning of your participation in the Life Goals Program. It's great that you've taken this step towards further improving your health!

What will we cover in these sessions?

- Wellness management and bipolar disorder
- Positive behavior change
- Working with your health care team as an active member
- Maintaining motivation and direction to wellness

What is the purpose of this workbook?

This workbook is for individuals who have bipolar (also called manic-depressive) disorder. The exercises take general information we will discuss within the sessions, and help you to apply the information to your own situation and lifestyle practice. The exercises and discussions are intended to assist you in living with, living around, and living in spite of the symptoms of this condition. You have the ability to live well with bipolar disorder, and manage the medical risk factors that we call "co-travelers." Our aim is to help you in discovering and managing your symptoms so that you can achieve what you want from life, with optimal health. Family members and concerned health care providers will also find valuable information and strategies here. We would like to acknowledge the work of Mark Bauer, M.D. and Linda McBride, M.S.N., and the Life Goals Program from which the material for this program has originated.

Contact Information

Personal II	nformation:		
Name			
Address			
Day/Work Phone			
Evening Phone			
Alternate phone			
Emerge	ency Contact	:	
Name			
Address			
Day/Work Phone			
Evening Phone			
Relationship			
Health Care F	Providers:		
Provide	er	Name	Phone Number
Primary Care Provid	der		
Psychiatrist			
Individual Therapist Mental Health Care			
Health Specialist			
My Life Goals S	Schedule:		
Day:			_
Time:			_
Location:			_
Follow-up call:			_

Current Medications*

Date	Mood Stabilizers	Dose	Instructions
Date	Antidepressants	Dose	Instructions
Date	Antipsychotics	Dose	Instructions
Date	Other Psychiatric Med.	Dose	Instructions
Date	Medical Medications	Dose	Instructions
Date	Over-The-Counter Medicine	Dose	Instructions

^{*} Update this form and add additional sheets as necessary to stay up-to-date and to provide an easy review of your recent medication history.



SESSION ONE:

Working Through Bipolar Disorder to Achieve Wellness

Today we will begin our 4 sessions. These sessions are not lectures. They are intended to be more like a workshop, so your participation is very much needed and encouraged to make this a valuable learning experience. Our focus today will be on getting comfortable with one another, ourselves, and the diagnosis "bipolar disorder." We will look at the basics of bipolar disorder and the various ways physical health can be impacted by bipolar disorder.

Focus Points:

- 1. Self-Management & Collaborative Care
- 2. Understanding Bipolar Disorder, Mood Monitoring, and Stigma
- 3. Impact of Core Values and Self-Efficacy on Healthy Habits
- 4. Bipolar Disorder and its Impact on Physical Health

Key concepts:

- ▶ Collaborative care A truly collaborative effort requires relationship building, which takes time. Acknowledging the expertise of both the health care providers and the individual, and what each can "bring to the table" involves mutual respect and preparation. To "collaborate" means both patient and provider actively participate in recognizing symptoms and share in making decisions about the patient's mental health treatment.
- ► Core values Your own personal principles that help you make sound, consistent decisions.
- ▶ Stigma -Stigma is rejection by other people because of a group you belong to rather than who you are as an individual; in turn, it can lead to a sense of shame about yourself, and often to hurt, depression, and anger. Self-stigma is a belief that you are weak or damaged because of your own condition, overcome this by focusing on your strengths, not your limitations. Stigma is prejudice, and the type of stigma that we are most concerned with here is prejudice against people with psychiatric symptoms.
- ▶ Unwanted co-travelers Can be both mental and physical. We will specifically address the physical aspects and their impact on your nutrition, exercise, sleep and bipolar diagnosis

Notes:

FOCUS POINT 1: Self-Management and Collaborative Care

What is self-management?

Self management is what you do every day, you decide what to eat, you decide whether to be physically active or not, you decide whether or not to take your medication, and you decide how to handle your stress. Everyone does self management, but the best self management can lead you to the best control of your bipolar disorder and the cardiovascular risks (unwanted co-travelers) that often accompany the disorder.

"Self-management requires both a positive mental attitude ... and positive actions that help you get on with living your life the way you want to. [It] includes knowing when to recognize the illness limitations and adjusting your way of life to accommodate them ... and living your life to the full. ... The more you live your life and achieve goals, no matter how big or small, that is active selfmanagement."

So how do you improve control of bipolar episodes and decrease cardiovascular risk?

- √ Know your symptoms, triggers, and reactions to manic or depressive episodes
- Have a plan of action to cope with stressors
- ✓ Choose healthy types of foods in moderate amounts
- ✓ Include walking or other types of physical activity in your daily routine
- ✓ Maintenance, adherence, and monitoring of your medications
- ✓ Working collaboratively as a member of your health care team

The Life Goals sessions will provide you with an awareness of how your bipolar disorder impacts your physical health, and will also provide you with the opportunity to work collaboratively to better manage bipolar disorder. Collaborative care involves a partnering between you, your health care providers (primary care physician, nurse, psychiatrist, mental health care provider), and your Health Specialist to meet challenges of everyday existence.

After attending the four group sessions, your Health Specialist will be following up with you on a monthly basis to assist you with maintaining focus to your goals. Your Health Specialist's role is to clarify and support your success with achieving the goals you have set here within the sessions, and will work as a link to connect all members of your health care team.

Essentials of a Collaborative Relationship

1. Clearly defined treatment goals

• The individual and provider are working together to achieve a common purpose and set realistic goals.

2. Effective communication

- The individual understands the meaning of what the provider is communicating.
- The provider understands the meaning of what the individual is communicating.
- The individual communicates his/her symptoms of mania and/or depression.
- The individual communicates problems with treatment side effects.

3. Complementary skills and division of responsibility

• The individual and provider recognize each other's knowledge, skill, and ability.

4. Mutual respect

• There is equality in the relationship, free from any discrimination or discounting.

Taking Medications

Many consumers are on multiple medications, so it is important to tell your doctor about <u>all</u> of the medications you are taking, including over-the-counter medications (vitamins, herbals. etc.).

Tips to help you with adherence and medication taking:

- Take your medications at the same time each day
- Use medication reminder systems (e.g., pill boxes)
- Keep diaries of medication side-effects, and timely refills
- Don't let yourself run out of medications. Be sure to refill your medications in time.

What to do BEFORE your appointment:

- 1. Be sure to bring with you a list of all of your medications, including over-the-counter medications.
- 2. Organize your thoughts and concerns using the visit prep form in this manual.
- 3. Make sure you have a list of lab tests and future appointments, and check whether you need to not eat before any lab tests.

FOCUS POINT 2: Understanding Bipolar Disorder, Mood Monitoring, and Stigma

- Symptoms in bipolar disorder come and go, but overall it tends to be a long-term condition. *This means it needs long-term and ongoing management*.
- There are biological components to bipolar disorder. *This means that medications are necessary in most cases.*
- Bipolar disorder cannot be completely explained by biological factors. *This means that psychological and social factors also need attention.*
- Good management can improve outcome. This includes both good treatment by your care provider and good self-management.
- Stigma may affect your ability to successfully manage your illness-if it is not acknowledged as a possible contributing factor.

Treating bipolar disorder involves a *collaborative* and *bio-psycho-social approach*.

A **collaborative approach** is a design that encourages interaction and cooperation between providers of mental health services, and the individuals they treat. This model suggests that all areas that impact a person's well-being are important and should be addressed.

A Bio-psycho-social approach includes:

- ✓ **Bio**logical factors that affect physical health like diet, exercise, and medications.
- ✓ Psychological factors that relate to the mind and may require counseling.
- ✓ **Social** factors that relate to the quality of interactions and relationships with others
- Collaboration between care providers and the individuals they treat generally improves health
 outcomes. Good collaboration requires recognizing that each partner has a specific—though
 different—role to play. Treatment will typically include working with a care provider who
 prescribes medications and using self-management skills to cope with the stress that comes with
 the condition as well as the stresses of everyday life.

Rating Your Moods: The Internal State Scale

Monitoring your moods can help you keep track of how you are feeling over time. It is sometimes difficult to recall how you felt 3 days ago, or even yesterday; measuring your moods can be a useful tool for yourself and your care providers as a cue for a possible manic or depressive episode.

To use the ISS, please begin by reading each of the following statements and filling in the circle that best corresponds to how you have been feeling over the past twenty-four hours. When you are finished rating each item, you will score your mood.

Internal States Scale—Short Version

(Source: Adapted from Glick, McBride, Bauer 2003)

1. Today I feel like a capable person.

Well-Being Items

0	1	2	3	4	5	6	7	8	9	10
0	Ο	0	0	Ο	0	Ο	0	Ο	0	0
Not a										Very much so
Rarel	У									Much of the time
2. T	oday I a	ctually	feel gr	eat insi	de.					
0	1	2	3	4	5	6	7	8	9	10
0	0	Ο	Ο	0	0	0	0	0	0	0
Not a										Very much so
Rarel	У									Much of the time
3. T	oday I f	eel ene	ergized.							
0	1	2	3	4	5	6	7	8	9	10
0	0	0	0	0	0	0	0	0	0	0
Not a										Very much so
Rarel	У									Much of the time

Activation Items

Rarely

1.	Today I fo	eel imp	ulsive.							
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	t at all rely									Very much so Much of the time
2.	Today my	y thoug	ghts are	going f	ast.					
	1 O t at all rely	2 O	3 O	4 O	5 O	6 O	7 O	8 O	9 O	10 O Very much so Much of the time
3.	Today I fo	eel ove	ractive	•						
	1 O t at all rely	2 O	3 O	4 O	5 O	6 O	7 O	8 O	9 O	10 O Very much so Much of the time
4.	Today I fe	eel "sp	ed up" i	inside.						
	1 O t at all rely	2 O	3 O	4 O	5 O	6 O	7 O	8 O	9 O	10 O Very much so Much of the time
5.	Today I fo	eel rest	tless.							
0 O No	1 O t at all	2 O	3 O	4 O	5 O	6 O	7 O	8 O	9 O	10 O Very much so

Much of the time

Now that you have finished rating each item, you are ready to score your mood by using the following table.

SCORING THE ISS: Using the Mood State Summary Table

Add scores from the 3 Well Being items and	Well Being Total Score =
write the total in the box to the right	
Add scores from the 5 Activation items and	Activation Total Score =
write the total in the box to the right	

- If Well Being total is less than 12.5 (<12.5), this shows that you are experiencing depressive symptoms.
- If Activation total is more than greater than 15.5 (>15.5), this shows that you are experiencing mania symptoms.
- If both of your totals fall into the depressive and mania symptoms, this shows that you are experiencing a mixed episode.

It is important to remember that everyone has bad days, therefore, a high or low score does not diagnose a mood episode, but rather *suggests* that one might be present. The ISS should be used as a tool to indicate a potential mood episode, as well as to track changes in your mood over time. A log is provided for you to record your daily ISS scores so that you can easily note your mood changes over the course of this week.

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		Scores						
	Well-Being		1	2	3	_	_	Total
Day 2		Scores						
De	Activation		1	2	3	4	5	Total
		Scores						
	Well-Being		1	2	3	_	_	Total
ω		Scores						
Day 3	Activation		1	2	3	4	5	Total
		Scores						
		Scores			_			
	Well-Being		1	2	3			Total
4	wen benig							1000
Day 4	A	Scores	L	_			_	Total
	Activation		1	2	3	4	5	Total
		Scores						
	Well-Being		1	2	3	_	_	Total
ıy 5		Scores						
Day	Activation		1	2	3	4	5	Total
		Scores						
	Well-Being		1	2	3	_		Total
9 /		Scores						
Дау 6	Activation		1	2	3	4	5	Total
		Scores						
		Scores						
	Well-Being		1	2	3			Total
7	J.C., Denig	6		_				. 5 (4)
Day 7	A attacks	Scores						Total
	Activation		1	2	3	4	5	Total
		Scores						

FOCUS POINT 3: Impact of Core Values and Self-Efficacy on Healthy Habits

► Choose **YOUR** Top **5** values from the ones listed below (in order from #1 to #5):

Values are the principles that guide one's actions in all aspects of life. We usually have an idea of what they are-but how often do we reflect on them and have them inspire us to action?

Add in any personal values of yours	not on this list.					
Responsibility : to do what I said I would do	Justice: to promote fairness and equality					
Forgiveness: to be forgiving of othersHope: to see what happens in life in a positive way	Love: to give and receive love Independence: to be able to meet my own needs					
Spirituality : to grow and mature spiritually	Friendship: to have close, supportive friends					
Growth: to keep changing and growing	Health : to be physically well					
Purpose: to have meaning and direction in my life	Wisdom : to have a mature understanding of life					
Family: to have a happy, loving family	Mental strength: to be mentally alert					
Helpfulness: to reach out to others	Pleasure: to have an enjoyable life					
Inner peace: to find a sense of quiet and calmness	Freedom: to have independence and free choice					
Recently, a health behavior did or did not (circle or	ne) reflect my values, when I					
Identify a healthy behavior you would like to impro	ove to better reflect your values:					

▶ Use this "reminder" of your values to guide you in setting goals and maintaining healthy behaviors.

FOCUS POINT 4: Bipolar Disorder and its Impact on Physical Health

- ► Let's take a "census" of the ways in which bipolar disorder has affected four key areas of physical health: **nutrition**, **exercise**, **tobacco use**, and **sleep**.
- ► Looking at each of these four areas of physical health on the worksheet below, write a number in the space after each area to indicate the degree to which you feel you need to work on it, again <u>using a scale of 0 to 3</u>:
 - 0 means you're where you should be and it doesn't need attention
 - 1 means it needs a bit of attention but is not a high priority
 - 2 means it needs attention and is a high priority
 - 3 means it's a really top priority, maybe even a higher priority than getting your bipolar symptoms under control.

Then, on the line after each response, briefly list the specific impact this health aspect has on your life and why you want to work on it.

Nutrition:
Impact on your life and why you want to work on this:
Exercise:
Impact on your life and why you want to work on this:
Tobacco:
Impact on your life and why you want to work on this:
Sleep:
Impact on your life and why you want to work on this:

To do at home:

Values and Actions Wellness Checklist

Think about your core values and how they relate to your health. Are there any positive actions or steps that you can take toward improving your health this week?

Stress : Am I too stressed? Do I have healthy ways to manage my stress?
Possible actions to take for improvement:
Sleep: Do I get enough sleep? Is it good sleep?
Possible actions to take for improvement:
Physical Activity : Do I walk when I have the chance? Do I take part in activities like household chores, gardening, etc. that keep me moving?
Possible actions to take for improvement:
Nutrition : Am I eating too much or too little? Do I eat the right types of food? Do I get enough water?
Possible actions to take for improvement:
Medications: Am I taking medications as prescribed?
Possible actions to take for improvement:



SESSION TWO:

Working Through Mania:

Overview, Symptom Identification, Management Plan

Today we will look at signs, symptoms, and responses (both good and bad) to a manic episode. Remember that the focus of our discussion is intended to help raise your awareness and to help you customize a plan for yourself in response to a manic episode.

Focus Points:

- 1. Working Through Mania
- 2. Identify Personal Triggers of (Hypo) Mania- Complete a list of Personal Triggers of a Manic Episode
- 3. Response to manic symptoms- Costs & Benefits Analysis
- 4. Develop a Personal Action Plan for (Hypo)Mania

Key concepts:

- ▶ Bio-psycho-social symptoms Understanding and treating bipolar disorder requires tuning in to biological, psychological, and social aspects—it is a bio-psycho-social condition. Typically, bipolar disorder is best treated with one or more medications plus some type of counseling, or psychotherapy, along with a collaborative approach.
- ▶ Mania profile This should represent *your* personal experience with mania, organized around your thoughts, feelings and behaviors.
- ➤ Triggers Recognizing warning signs and symptoms of a manic episode will help you in managing positive responses, by either avoiding or reducing those events or factors in your life.
- ➤ Cost benefit analysis All choices and responses have costs and benefits. A key step to making sure you're managing bipolar disorder in a way that supports your own life goals and values is to see how the way you deal with manic symptoms lines up with your goals and values.
- ► Hypomania A heightened sense of mood, not as high as the highs in bipolar I, but can subtly impact and impair judgment. Generally associated with a Bipolar II diagnosis, it is often overlooked, and sometimes results in a diagnosis of depression.

Notes:

Rating Your Moods: The Internal State Scale

Monitoring your moods can help you keep track of how you are feeling over time. It is sometimes difficult to recall how you felt 3 days ago, or even yesterday; measuring your moods can be a useful tool for yourself and your care providers as a cue for a possible manic or depressive episode.

It is important to understand your current mood, so again you will use the ISS to help you gain a general idea of your mood state today. Please begin by reading each of the following statements and filling in the circle that best corresponds to how you have been feeling over the past twenty-four hours. When you are finished rating each item, you will score your mood.

Internal States Scale—Short Version

(Source: Adapted from Glick, McBride, Bauer 2003)

Well-Being Items

1. 1	odayıt	ееі ііке	a capa	bie pers	son.					
0	1	2	3	4	5	6	7	8	9	10
0	0	0	0	0	0	0	0	0	0	0
Not a	at all								V	ery much so
Rarel	ly								Mud	ch of the time
2. T	oday I a	ectually	feel gr	eat insi	de.					
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Activation Items

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3. 1	Today I f	eel ove	eractive								
0 O Not Rare	1 O at all ly	2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so th of the time	e
4. 1	Гoday I f	eel "sp	ed up"	inside.							
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5. 1	Гoday I f	eel res	tless.								
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Now that you have finished rating each item, you are ready to score your mood by using the following table:

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	,	WEEK T\	MO					
		VEEKI						Tatal
	Well-Being		1	2	3	_	_	Total
Day 1		Scores						
Da	Activation		1	2	3	4	5	Total
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	Well-Being		1	2	3	_	_	Total
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Day 2	Activation	scores	1	2	3	4	5	Total
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		Scores						
	Well-Being		1	2	3	_	_	Total
7		Scores						
Day 7	Activation	200.00	1	2	3	4	5	Total
		6		_		-		2.3.
		Scores						

FOCUS POINT 1: Working through Mania

Personal Mania Symptom Profile

▶ Place a checkmark to the left of each symptom that you experience. To the right, identify how each symptom tends to present itself. Use the blank lines on the second page to write in symptoms that are not already included under the three categories.

Check Box for Symptom	Thoughts	Early Warning	Comes Quickly Without Warning	First Recognized by Others
	Difficulty with concentration and memory			
	More religious thoughts			
	Thoughts about having special abilities or powers Racing or sped up thoughts, like the rest of the world is in slow motion			
	Thoughts jump from one idea to another quickly			
	Paranoia or other concerns that people are plotting against you			
	Unreal concerns that you are worthless or evil			
	Hallucinations: Unreal voices or visions			
	Thoughts of suicide			
Check Box for Symptom	Feelings	Early Warning	Comes Quickly Without Warning	First Recognized by Others
	Feeling "high," completely optimistic, euphoric			
	Feeling depressed			
	More energy			
	Feeling impatient, irritable			
	Feeling unusually cheerful and happy			
	Feeling unusually confident or invulnerable			
	Know-it-all attitude			

Check Box for Symptom	Behaviors	Early Warning	Comes Quickly Without Warning	First Recognized by Others
	Speech loud, rapid, ranging			
	Less need for sleep			
	Overly sociable, giving more advice			
	More or less sex drive			
	Doing multiple projects, more than are practical			
	Spending money impulsively; shopping sprees			
	Involvement in dangerous or risky activities			
	Additional Symptoms	Early Warning	Comes Quickly Without Warning	First Recognized by Others

² Personal Mania Symptom Profile (Ex. 8.2). Adaped from Bauer, Kilbourne, Greenwald, et al. text, 2009

FOCUS POINT 2: Identify Personal Triggers of (Hypo) Mania Complete a list of Personal Triggers of a Manic Episode

A number of different circumstances are listed below. Please check the box of those which	have
triggered manic episodes for you. Fill in the blank spaces to describe your experiences.	
☐ Bad life events:	
☐ Good life events:	
☐ Change in medication (psychiatric or medical, prescription or over-the-counter):	
Which medications?	
☐ Physical illness (please list):	
☐ Drug or alcohol use:	
☐ Changes in smoking habits:	-
☐ Change in seasons:	-
Which ones in particular?	-
☐ Change in routine:	
	-

 $^{^{3}}$ The exercise on this page (Ex. 9.1) was adapted from Bauer, Kilbourne, Greenwald, et al. text, 2009

FOCUS POINT 3: Response to manic symptoms-Costs & Benefits Analysis

All choices are trade-offs, and all choices related to how you respond to mania or stress have **costs and benefits**. In this exercise we'll look at our own responses and weigh them against our values.

Step 1: Identify your responses to manic symptoms.

Honesty time: Give equal time to the "not so healthy" as well as the "healthy."

Step 2: What are the costs and the benefits of each?

Honesty time: Don't forget the upsides of the "not so healthy" responses as well as the downsides of the "healthy" responses.

Step 3: How does each of these responses work for or against your values and life goals?

Your Turn:

Response to Manic	Positive Effects	Negative Effects	Impact on my Life
Symptoms	(Upsides)	(Downsides)	Goals and Core Values
A "Healthy"		,	
Response:			
A "Not So Healthy"			
Response:			

Some examples of "healthy" and "not so healthy" responses to mania and stress:

- Compromise when possible
- Maintain sleep schedule
- Continue medication
- Call MD/nurse/therapist
- Not using alcohol or street drugs
- Maintain routine daily activities
- Retreat to a tranquil environment

- Participate in arguments
- More impulsive relationships and sexual activity
- Gambling, overspending with credit/debit
- Drop out of treatment
- Lots of projects (working, writing)
- Stop listening to people's feedback

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	The Costs and Benefits exercise of	on this nage	(Fx 11 1)) was adanted	from the Bauer	Kilhourne	Greenwald	et al t	text :	วกกร

FOCUS POINT 4: Develop a Personal Action Plan for (Hypo)Mania

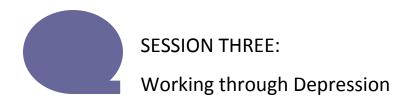
1.	Alert health care provider of early manic symptoms and stress that may lead to mania.
2.	Discuss medication changes for medical illness with health care provider.
3.	Get early assessment and treatment of physical illness.
4.	Avoid alcohol and drugs. (Note: Even increasing tobacco can undo the effects of prescribed medication.)
5.	Maintain daily routine.
6.	Minimize sleep loss.
7.	Contact support persons: or
8.	Know your personal coping responses. List specific things to do: • • • •
9.	Know your personal coping responses. List specific things <i>not</i> to do: • • • •

The *Action Plan* exercise (Ex. 15.4) was adapted from Bauer, Kilbourne, Greenwald, et al. text, 2009

Values and Actions Wellness Checklist

Think about your core values and how they relate to your health. Are there any positive actions or steps that you can take toward improving your health this week?

Stress : Am I too stressed? Do I have healthy ways to manage my stress?
Possible actions to take for improvement:
Sleep: Do I get enough sleep? Is it good sleep?
Possible actions to take for improvement:
Physical Activity : Do I walk when I have the chance? Do I take part in activities like household chores, gardening, etc. that keep me moving?
Possible actions to take for improvement:
Nutrition : Am I eating too much or too little? Do I eat the right types of food? Do I get enough water?
Possible actions to take for improvement:
Medications : Am I taking medications as prescribed?
Possible actions to take for improvement:



Today we will look at signs, symptoms, and responses (both good and bad) to a depressive episode. Keep in mind that we will direct our discussion so that you can begin to make a constructive plan for yourself in response to a depressive episode.

Focus Points:

- 1. Recognizing the Symptoms of Depression
- 2. Identifying Personal Triggers of Depression
- 3. Responding to Depressive Symptoms- Cost Benefit Analysis
- 4. Develop a Personal Action Plan for Depression

Key concepts:

- ► Experimental approach Planning a personal experiment, involves changing what you do-and observing what happens; to act like a "scientist" by generating many new ideas and approaches to tackling a question and observing your own actions.
- ▶ **Demoralization** To be subject to discouragement or depression.
- ► Mood lifters People, things, and places that have helped to lift your mood in the past. Revisit and utilize these in your action plan to cope with depressive episodes.

Notes:

Rating Your Moods: The Internal State Scale

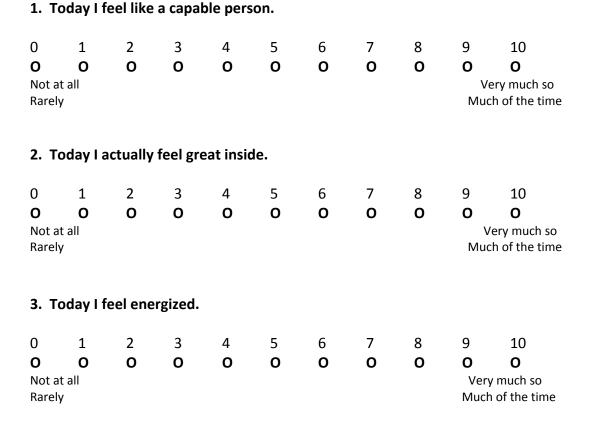
Monitoring your moods can help you keep track of how you are feeling over time. It is sometimes difficult to recall how you felt 3 days ago, or even yesterday; measuring your moods can be a useful tool for yourself and your care providers as a cue for a possible manic or depressive episode.

It is important to understand your current mood, so again you will use the ISS to help you gain a general idea of your mood state today. Please begin by reading each of the following statements and filling in the circle that best corresponds to how you have been feeling over the past twenty-four hours. When you are finished rating each item, you will score your mood.

Internal States Scale—Short Version

(Source: Adapted from Glick, McBride, Bauer 2003)

Well-Being Items



Activation Items

1. T	oday I f	eel imp	ulsive.							
0 O	1 O	2 O	3 O	4 O	5 O	6 O	7 O	8 O	9 O	10 O
Not a Rarel										Very much so th of the time
2. T	oday m	y thoug	ghts are	going f	ast.					
0 O Not a Rarel		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so ch of the time
3. Т	oday I f	eel ove	eractive							
0 O Not a Rarel		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so th of the time
4. T	oday I f	eel "sp	ed up" i	inside.						
0 O Not a Rarel		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so ch of the time
5. T	oday I f	eel rest	tless.							
0 O Not a Rarel		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so th of the time

Now that you have finished rating each item, you are ready to score your mood by using the following table:

SCORING THE ISS: Using the Mood State Summary Table

Add scores from the 3 Well Being items and	Well Being Total Score =
write the total in the box to the right	
Add scores from the 5 Activation items and	Activation Total Score =
write the total in the box to the right	

- If Well Being total is less than 12.5 (<12.5), this shows that you are experiencing depressive symptoms.</p>
- If Activation total is more than greater than 15.5 (>15.5), this shows that you are experiencing mania symptoms.
- If both of your totals fall into the depressive and mania symptoms, this shows that you are experiencing a mixed episode.

It is important to remember that everyone has bad days, therefore, a high or low score does not diagnose a mood episode, but rather *suggests* that one might be present. The ISS should be used as a tool to indicate a potential mood episode, as well as to track changes in your mood over time. A log is provided for you to record your daily ISS scores so that you can easily note your mood changes over the course of this week.

	V	VEEK TH	REI	E				
	Well-Being		1	2	3	_	_	Total
/1		Scores						
Day 1	Activation		1	2	3	4	5	Total
		Scores						
	Well-Being		1	2	3	_		Total
Day 2		Scores						
Da	Activation		1	2	3	4	5	Total
		Scores						
	Well-Being		1	2	3	_		Total
(3		Scores						
Day 3	Activation		1	2	3	4	5	Total
		Scores						
	Well-Being		1	2	3	_		Total
4		Scores						
Day 4	Activation		1	2	3	4	5	Total
		Scores						
		360,63						
	Well-Being		1	2	3	_	_	Total
2		Scores						
Day	Activation	300703	1	2	3	4	5	Total
		Scores						
		Scores						
	Well-Being		1	2	3	_		Total
9		Scores	_					
Дау б	Activation	Scores	1	2	3	4	5	Total
		Contract	_	_				. 5 (4)
		Scores						
	Well-Being		1	2	3	_		Total
7	···· o	Scores						
Day 7	Activation	Scores	1	2	3	4	5	Total
		Caarre	_	_		7		
		Scores		<u> </u>	<u> </u>			

FOCUS POINT 1: Recognizing the Symptoms of Depression

Personal Depression Profile

▶ Place a checkmark to the left of each symptom that you experience. To the right, identify how each symptom tends to present itself. Use the blank lines to write in symptoms that are not already included under the three categories.

Check Box for Symptom	Thoughts	Early Warning	Comes Quickly Without Warning	First Recognized by Others
	Difficulty with concentration and memory			
	Things are bad and not going to get better			
	Difficulty making decisions			
	Thoughts that others don't care when they really might			
	Frequent thoughts about dying or suicide			
	Paranoia: Concerns that people are plotting against you			
	Unreal concerns that you are worthless or evil			
	Hallucinations: Unreal voices or visions			
	Thoughts about problems depression caused in the past			
Check Box for Symptom	Feelings	Early Warning	Comes Quickly Without Warning	First Recognized by Others
	Feeling worthless			
	Feeling guilty without cause			
	Feeling sad without cause			
	Easily irritable			
	Not feeling good even though good things happen			
	Less energy			
	Changes in appetite			

Check Box for Symptom	Behaviors	Early Warning	Comes Quickly Without Warning	First Recognized by Others
	Restlessness and pacing			
	Trouble sleeping or sleeping too much			
	Trouble starting or finishing projects			
	Keeping away from people			
	Stopping work or usual activities			
	Fighting without good reason			
	Frequently crying for little or no reason			
	Preparing a suicide plan			
	Additional Symptoms	Early Warning	Comes Quickly Without Warning	First Recognized by Others

⁶ Personal Depression Symptom Profile (Ex. 16.2). Adaped from Bauer, Kilbourne, Greenwald, et al. text, 2009

FOCUS POINT 2: Identifying Personal Triggers of Depression

▶ A number of different circumstances are listed below. Please check the box of all which have

triggered depressive episodes for you. Fill in the blank spaces to describe your experiences.	
☐ Bad life events:	
☐ Good life events:	
☐ Change in medication (psychiatric or medical, prescription or over-the-counter):	
Which medications?	-
☐ Physical illness (please list):	
☐ Drug or alcohol use:	
☐ Changes in smoking habits:	
☐ Change in seasons:	
Which ones in particular?	
☐ Change in routine:	

⁷ The exercise on this page (Ex. 17.1) was adapted from Bauer, Kilbourne, Greenwald, et al. text, 2009

FOCUS POINT 3: Response to Depressive Symptoms-

All choices are trade-offs, and all choices related to how you respond to depressive symptoms and episodes have *costs and benefits*. In this exercise we'll look at our own responses and weigh them against our values.

Step 1: Identify your responses to depressive symptoms.

Honesty time: Give equal time to the "not so healthy" as well as the "healthy."

Step 2: What are the costs and the benefits of each?

Honesty time: Don't forget the upsides of the "not so healthy" responses as well as the downsides of the "healthy" responses.

Step 3: How does each of these responses work for, or against, your core values and life goals? *Your Turn*:

Response to	Positive Effects	Negative Effects	Impact on Life
Depressive	(Upsides)	(Downsides)	Goals and Core
Symptoms			Values
A "Healthy"			
Response:			
A "Not So Healthy"			
Response:			

Some examples of "healthy" and "not so healthy" responses to depression:

- Find recreation you enjoy
- Share family/work duties
- Stop activities and exercise
- Stop working
- Try to maintain daily routine
- Stop medications

- Get support from a trusted friend
- Pray
- Avoid friends
- Use alcohol and or drugs
- Make therapist/doctor appointment
- Plan suicide

⁸ The Costs and Benefits exercise on this page (Ex. 19.1) was adapted from the Bauer, Kilbourne, Greenwald, et al. text, 2009

FOCUS POINT 4: Develop a Personal Action Plan for Depression

1.	Alert health care provider of early depressive symptoms and stress that may lead to depression.
2.	Discuss medication changes for medical illness with health care provider.
3.	Get early assessment and treatment of physical illness.
4.	Avoid alcohol and drugs. (Note: Even increasing tobacco can undo the effects of prescribed medication.)
5.	Maintain daily routine.
6.	Minimize changes in sleep routine.
7.	Contact support persons: or
8.	Know your personal coping responses. List specific things to do:
	•
	•
	•
9.	Know your personal coping responses. List specific things <i>not</i> to do:
	•
	•
	•
10.	Suicide prevention:
	•
	•
y Th	a everying on this name was adapted from Rayer Kilhourne Greenwald, et al. text, 2000

Values and Actions Wellness Checklist

Think about your core values and how they relate to your health. Are there any positive actions or steps that you can take toward improving your health this week?

Stress : Am I too stressed? Do I have healthy ways to manage my stress?
Possible actions to take for improvement:
Sleep: Do I get enough sleep? Is it good sleep?
Possible actions to take for improvement:
Physical Activity : Do I walk when I have the chance? Do I take part in activities like household chores, gardening, etc. that keep me moving?
Possible actions to take for improvement:
Nutrition : Am I eating too much or too little? Do I eat the right types of food? Do I get enough water?
Possible actions to take for improvement:
Medications : Am I taking medications as prescribed?
Possible actions to take for improvement:



SESSION FOUR:

Working Toward Wellness:

Developing a Collaborative Care, Self-Management Plan

Today we will look at all we have learned, and we'll put together a plan of action to address living well with bipolar disorder. We will focus on how to manage a truly collaborative approach, involving our health care providers, working with them to manage wellness. We will pay particular attention to any issues or "roadblocks" that may trigger a relapse of our plan, and identify scenarios to prepare and meet challenges.

Focus Points:

- 1. Personal Wellness Change Plan
- 2. Building and Strengthening a Collaborative Relationship
- 3. Relapse Prevention- Community Resources

Key concepts:

- ► Collaborative care A truly collaborative effort requires building a relationship, which takes time. Acknowledging the expertise of both the health care providers and the individual, and what each can "bring to the table" involves mutual respect and preparation.
- ▶ Roadblocks These can be external or internal. *Internal* roadblocks, which are often the most challenging, are those aspects of ourselves that get in our way despite our good intentions.
- ► Co-traveler issues Can be both mental and physical. We will specifically address the physical aspects-and their impact on your nutrition, exercise, sleep and bipolar diagnosis.
- ► Relapse prevention Relapse refers to a breakdown in a person's attempt to maintain change with a behavior. To prevent the relapse, it is important to acknowledge and deal with any potential barriers/roadblocks to staying on course with the change.

Notes:

Rating Your Moods: The Internal State Scale

Monitoring your moods can help you keep track of how you are feeling over time. It is sometimes difficult to recall how you felt 3 days ago, or even yesterday; measuring your moods can be a useful tool for yourself and your care providers as a cue for a possible manic or depressive episode.

It is important to understand your current mood, so again you will use the ISS to help you gain a general idea of your mood state today. Please begin by reading each of the following statements and filling in the circle that best corresponds to how you have been feeling over the past twenty-four hours. When you are finished rating each item, you will score your mood.

Internal States Scale—Short Version

(Source: Adapted from Glick, McBride, Bauer 2003)

1. Today I feel like a capable person.

Well-Being Items

0 O Not at Rarely		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so ch of the time
2. To	oday I a	ctually	feel gr	eat insi	de.					
0 O Not at Rarely		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O Tery much so th of the time
3. To	oday I f	eel ene	rgized.							
0 O Not at Rarely		2 O	3 O	4 O	5 O	6 O	7 O	8 O	-	10 O much so of the time

Activation Items

1. T	oday I f	eel imp	ulsive.							
0 O	1 O	2 O	3 O	4 O	5 O	6 O	7 O	8 O	9 O	10 O
Not a									Mud	Very much so ch of the time
2. T	oday m	y thoug	ghts are	going f	ast.					
0 O Not a Rare		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so ch of the time
3. T	oday I f	eel ove	ractive							
O O Not a Rare		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so ch of the time
4. T	oday I f	eel "sp	ed up"	inside.						
0 O Not a Rare		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so ch of the time
5. T	oday I f	eel rest	tless.							
0 O Not a Rare		2 O	3 O	4 O	5 O	6 O	7 O	8 O		10 O ery much so ch of the time

Now that you have finished rating each item, you are ready to score your mood by using the following table:

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Add scores from the 5 Activation items and	Activation Total Score =
write the total in the box to the right	

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- If both of your totals fall into the depressive and mania symptoms, this shows that you are experiencing a mixed episode.

It is important to remember that everyone has bad days, therefore, a high or low score does not diagnose a mood episode, but rather *suggests* that one might be present. The ISS should be used as a tool to indicate a potential mood episode, as well as to track changes in your mood over time. A log is provided for you to record your daily ISS scores so that you can easily note your mood changes over the course of this week.

	V	VEEK FC	UF	2				
	Well-Being		1	2	3	_	_	Total
7		Scores						
Day 1	Activation	300.03	1	2	3	4	5	Total
		Scores						
		300763						
	Well-Being		1	2	3	_		Total
7		C						
Day 2	Activation	Scores	1	2	3	4	5	Total
-	Activation		_	_		_		Total
		Scores	,					
	Moll Daire		4	7	2			Total
	Well-Being		1	2	3	_	_	Total
Day 3		Scores						
٥	Activation		1	2	3	4	5	Total
		Scores						
	Well-Being		1	2	3	_	_	Total
Day 4		Scores						
Da	Activation		1	2	3	4	5	Total
		Scores						
	Well-Being		1	2	3	_	_	Total
7		Scores						
Day	Activation		1	2	3	4	5	Total
		Scores						
			ļ	J	L			
	Well-Being		1	2	3	_	_	Total
9		Scores						
Day 6	Activation	JUIES	1	2	3	4	5	Total
		Comme	_					
		Scores						
	Well-Being		1	2	3			Total
_	TTCII DCIIIS		_					Total
Day 7	Activeties	Scores						Total
	Activation		1	2	3	4	5	Total
		Scores						

Your Potential Roadblocks- Plan ahead!

Everyone has their own personal roadblocks—and some sense of how to deal with them. Review these examples of typical roadblocks people sometimes run into when making a plan, and use these strategies as needed to make your plan for good health a success from the start.

Roadblock	Strategies for Working On (or Around) Them
Hard to identify change goals because you've never done this before	Look at your values/wellness checklist. What is one thing—just one and no more—that would make this area of your life better (just one please!) Description:
Change goals too vague to know if you've reached them or not	 Pretend you're an imaginary friend of yourself, watching from a distance. How could you know if you had reached this goal?
Change goals that depend primarily on others	 Pretend the person or persons you're relying on do not cooperate or come through. Could you, at the end of the day, at least say, "Well, I tried my hardest and learned something from this. Now I need to move on to try something else"
Overly ambitious change goals	 Are you setting yourself up for success? Time for a self-check for manic symptoms? Is there someone who can give you some feedback?
Can't come up with a change goal due to demoralization or depression	 Try a personal cost-benefit analysis—what's the benefit of not doing anything to improve the situation? Time for a self-check for depression? Watch for irrational thinking even if you're not clinically depressed. Who can be a support for you both with feedback and, as we all need at times, some plain old cheerleading?
I've got a goal, now what?	 Where else in your life have you had to go step- by-step about a task? In the workshop? In the kitchen? In school? Use the wellness change plan worksheet to be your guide in putting together your plan.
Your Own Roadblocks	Strategies for Working On (or Around) Them

The exercise on this page was adapted from Bauer, Kilbourne, Greenwald, et al. text, 2009

FOCUS POINT 1: Personal Wellness Change Plan

Use this outline to assist you in making a positive change to improve your health:

The change I want to make (or continue making) is:
The reasons why I want to make this change are:
The reasons why I want to make this change are.
The steps I plan to take in making this change are:
The ways ather needs on help we are:
The ways other people can help me are:
I will know that my plan is working if:
The state of the s
Some things that could interfere (roadblocks) with my plan are:
What I will do if the plan ion't washing.
What I will do if the plan isn't working:

¹¹ The exercise on this page was adapted from Motivational Groups for Community Substance Abuse Programs

FOCUS POINT 2: Building and Strengthening a Collaborative Relationship

Providers Visit Preparation Form

1 = Not

satisfied at all

Complete these key areas for discussion to make the most of your visit:									
► Curre	ent medi	cation(s)	and dos	e(s):					
► Curre	ent medi	cation si	de effect	s:					
➤ Over	all mood	rating fo	or the las	t month					
1	2	3	4	5	6	7	8	9	10
1 = As have (felt								have e	As good as I ver felt, not ressed at all
► Satis	faction w	vith bene	efits or ar	ntidepres	ssant effe	ects of cu	ırrent m	edications	;
1	2	3	4	5	6	7	8	9	10
1 = Not satisfie	d at all							10 =	Completely satisfied
► Satis	action w	vith side	effects o	f current	medicat	tions			
1	2	3	4	5	6	7	8	9	10

10 = Completely

satisfied

► Questions you'd like answered at this visit:
► Major life goals:
► How the current treatment is helping or hindering progress towards these goals.
► The goals you want therapy to help with.
► What parts of therapy help you and what parts don't seem to help?
▶ Questions about what you can work on between visits.

Self-Help Resources

General Resources	
National Alliance for the Mentally III (NAMI)	National Mental Health Association (NMHA)
Colonial Place Three	1021 Prince Street
2107 Wilson Blvd. Suite 300	Alexandria, VA. 22314-2971
Arlington, VA. 22201	Phone (703) 684-7722
Phone (703) 524-7600	Information center (800) 969-NMHA
NAMI Helpline (800) 950-NAMI(6264)	E-mail: infoctr@nmha.oprg
Website www.nami.org	Website www.nmha.org
	
National Partnership for Workplace Mental Health	Gamian Europe
American Psychiatric Association	Website <u>www.gamian-europe.com</u>
1400 K St. NW	Gamian Europe promotes the understanding of
Washington, DC. 20005	mental illness and the treatments available.
e-mail: info@workplacementalhealth.org	
Website www.workplacementalhealth.org	
Mood Disorders	
Child and Adolescent Bipolar Foundation (CABF)	Depression and Bipolar Support Alliance (DBSA)
1187 Wilmette Avenue P.M.B.#331	formally known as:
Wilmette, IL. 60091	National Depressive and Manic-Depressive
Phone (847) 256-8525 or (847) 920-9498	Association (NDMDA)
Website www.bpkids.org	730 North Franklin Street, Suite 501
	Chicago, IL. 60610-7204
	Phone (800) 826-3632
	Website <u>www.ndmda.org</u>
Unwanted Co-Travelers	
Anxiety Disorders Association of America (ADAA)	National Eating Disorders Association
8730 Georgia Avenue Suite 600	603 Stewart Street, Suite 803
Silver Spring, MD. 20910	Seattle, WA 98101
Phone (240) 485-1001	Phone: 206-382-3587
Website <u>www.adaa.org</u>	Website: Nationaleating disorders.org
Alcoholics Anonymous	Cocaine Anonymous CAWSO
AA General Service Office	3740 Overland Avenue, Suite C
475 Riverside Drive	Los Angeles CA 90034
New York, NY 10015	PO Box 2000
Phone: 212-870-3400	Los Angeles, CA 90049-8000
Website: www.alcoholics-anonymous.org	Phone: 310-559-5833
	Website:www.ca.org
Recovery Resources Online	
Website: www.soberrecovery.com	
Suicide	
American Association of Suicidology	Suicide Prevention Action Network of USA (SPAN
4201 Connecticut Avenue, NW Suite 408	USA)
Washington, DC. 20008	5034 Odins Way
National Hopeline Network 1-800-SUICIDE	Marietta, GA. 3008
Phone (202) 237-2280	Phone (888) 649-1366
E-mail: info@suicidology.org	Website <u>www.spanusa.org</u>

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