



A GUIDE THROUGH  
THE BIPOLAR BRAIN

# Conversation Guide for Adults

## Preparing to discuss mental health issues – Utilize sensitivity and openness

Mental health and issues relating to mental health can be sensitive topics that require special care. In leading or facilitating discussions on mental health issues in conjunction with or in relation to the film, the following guidelines can assist in developing a respectful and productive environment.

## Prepare participants – Establish ground rules with those participating before the film and the discussion takes place

Remind participants to:

- use respectful language — terms like crazy, mental, psycho, retard and so on, are not acceptable.
- emphasize “people first” language – avoid saying an individual “is bipolar,” and instead refer to the person as “living with” or “being diagnosed with” bipolar disorder.
- respect each individual’s privacy. That means respecting the confidentiality of people’s personal stories and not discussing them outside the group or without their permission.
- remember that the film showcases individuals representing their own perspective and experiences - others (including those in a group discussion) may have a very different experience.
- remind participants to think about the questions they pose carefully; should a question appear to be offensive to others or be questionable in nature, request that the question be posed after class.
- remember that staff (including you) will be available after the film and discussion to answer questions and discuss in a more private setting.
- be prepared for the emotional nature of some of what is discussed. Topics may evoke discomfort for some individuals, and may lead them to question their own functioning.
- avoid equating mental health disorders with criminality, incompetence, or lack of ability.



- consider the link between mental illness and suicide, and be sensitive to the heightened risk of suicide for those living with mental illness. The National Institute for Mental Health (NIMH), reports that 90 percent of people who die by suicide have depression or other mental disorders, including substance-abuse disorders, in conjunction with other mental disorders.
- maintain and expect respectful listening, privacy and confidentiality.

After the presentation, consider the discussion prompts and materials as appropriate for the audience. Additionally, make sure to distribute the resource list of local mental health services and supports to participants and to follow up with individuals who express concern, and consider sending those resources home.

## Discussion Questions - Adult

Talking about mental health issues and bipolar disorder presents a challenge because stigma and discrimination often prevent productive discussions about mental health. Talking about mental health and bipolar disorder is critical; however making sure we have those discussions responsibly is key. Many individuals viewing the film or discussing this topic may have misinformation or misconceptions about mental illnesses.

1. Individuals living with mental illness feel a stigma regarding their mental health and feel shame and embarrassment. After watching *Ride the Tiger* and seeing the stories of individuals living with bipolar disorder, what are some of the ways in which the stigma of mental illness can be problematic for those living with mental illness?
2. The film discusses the functions of the brain, and the complex causes of mental illnesses– the functioning of the brain is critical to health. What are some of the ways in which science and technology are used to learn more about mental health and improve the lives of individuals with psychiatric disorders? (e.g. school, work, family interactions, finances)
3. What role do you feel access to physical and mental health care plays in living with mental illness? How does our society both fail and succeed in helping those with mental illness live successful and healthy lives?
4. The stories of individuals living with bipolar disorder highlight how mental health impacts the quality of our lives - whether we are able to have healthy relationships, take care of ourselves, and be productive in work and leisure. Often we think only about medication in

treating illness. What are some of the things you noticed that the individuals in the film did in order to manage care and work toward improved health?

5. Many individuals in the film had challenges in getting a correct diagnosis for bipolar disorder. What are the factors that make diagnosing mental illness and health issues difficult? What is the impact of an individual being diagnosed incorrectly or in the delay of a correct diagnosis? How might we be supportive of a friend or family member while s/he is undergoing the process of diagnosis and treatment?
6. Many individuals have more than one diagnosis (e.g., depression and obsessive-compulsive disorder). The presence of more than one disorder is referred to as a “dual diagnosis.” Some individuals in the film had a diagnosis of bipolar disorder and substance abuse. What are some possible reasons that individuals with bipolar disorder could develop an addiction to drugs or alcohol? How might that interfere with medical treatment?
7. When watching the film, how did those individuals featured describe the support they received from friends, family members, and others in their lives? How might you support a friend or family member facing similar challenges?
8. Often individuals living with bipolar disorder engage in risky behavior especially during the manic phase of the disorder. Risky behaviors can involving sexual promiscuity, dangerous activities, and irresponsible financial spending, and can have long term negative consequences to personal growth, physical health, and relationship development. What are some of the ways in which friends and family members can be supportive of the individual without encouraging or supporting behaviors that may be harmful?
9. Staying healthy means taking care of your mental health as well as your physical health. What are some of the challenges and obstacles you might face to taking care of your mental health? (e.g. stress, time, demands of work and family) How might you overcome those challenges in order to care for your mental health? (e.g. physical exercise, meditation, hobbies)

## **Mental Health – Becoming informed**

### **What does it mean to be depressed?**

Everyone has good days and bad days, ups and downs. School, work, families, friendships, and relationships can be comforting but also confusing and frustrating at times. Life can be great one minute and awful the next; everyone feels overwhelmed sometimes. Everyday sadness can be caused by a loss or a major life change, such as the death of someone you care about, a break-up of a relationship, moving to a new neighborhood, changing jobs, or the divorce of your parents. Such reactions are normal! But if this unhappiness lasts for more than two weeks and starts to interfere with your life, work, schoolwork, relationships, physical health, or participation in normal activities (e.g. exercise, hobbies, socialization, personal care, etc.) it might be something more serious. Some other feelings and behavior that are important to notice include:

- sadness that will not go away
- anger or irritability
- changes in your appetite— eating more or eating less
- hard time sleeping or sleeping too much
- less energy; feeling exhausted or burned-out
- hard time making decisions
- guilt, feelings of worthlessness
- headache, upset stomach or other physical pain that does not seem to have a physical cause
- not able to enjoy things you once liked
- using alcohol or drugs
- thinking about hurting yourself or someone else
- thinking about dying or killing yourself.

## **If I have been depressed, down, or feeling any of these symptoms does that mean that I have depression or bipolar disorder?**

When people talk about feeling “depressed,” they might mean they are having a bad day, or they might be talking about clinical depression. The difference between having a bad day and clinical depression is:

- **how intense the mood is;** depression is more intense than a bad mood.
- **how long it lasts;** a bad mood is usually gone in a few days, but clinical depression lasts two weeks or longer.
- **how much it interferes with your life;** a bad mood does not keep you from going to work or spending time with family and friends. Depression can keep you from doing these things, and may even make it difficult to get out of bed, eat, or take care of yourself.

## **What should I do if I think that a friend or family member might have depression or is diagnosed as living with bipolar disorder?**

It is important to remember that everyone displays a range of moods and there are times that everyone gets down or depressed. We cannot make diagnoses, but we can encourage our friend or family member to tell someone trustworthy about what he or she is experiencing and to see a doctor as soon as possible. If you do not have a doctor, contact another trusted adult to connect with a health provider or [mentalhealth.gov](http://mentalhealth.gov) for resources.

- Express your concern and support
- Remind your friend or family member that help is available and that mental health is a part of overall health
- Ask questions, listen to ideas, and be responsive when the topic of mental health problems come up
- Reassure your friend or family member that you care about him or her.
- Contact a trusted friend, faith leader, or family member if you think something may be going on that is dangerous or harmful, or if someone is hurting him or herself or others.

## **How do you start talking about mental health or mental health issues? I don't want to interfere...**

Do you need help starting a conversation about mental health? Try leading with these questions and make sure to listen actively to your friend or family member's response. To listen actively means that you pay attention to the person speaking, ask questions that help you to understand, and avoid making statements that suggest you are judging the person speaking.

- I've been worried about you. Do you have someone to talk to?
- What else can I help you with?
- I am someone who cares and wants to listen. What do you want me to know about how you are feeling?
- Keep reminding the person that you are there to offer support. It can be helpful to say things like:
  - "I'm here for you and I care."
  - "I may not understand, but I am here to listen or find someone who can."
  - "You are an important person and you mean a lot to me."

## **What if I think I might have a mental health issue or illness?**

If you have, or believe you may have, mental health concerns, it can be helpful to talk about these issues with others. It can be frightening or embarrassing to reach out for help, but it is often the first step to helping you heal, grow, and recover.

**Build Your Support System:** Find a friend or professional you can confide in - a family member, friend, faith leader, health care provider or other trusted individual who gives good advice when you want and ask for it, and can assist you in taking action that will help.

**Get an Accurate Diagnosis and Treatment Plan:** Just as in all aspects of personal health, getting an accurate diagnosis is the first step in the treatment of mental health disorders including bipolar disorder treatment. Making the diagnosis of bipolar disorder can be challenging even for trained professionals, so it is best to see a psychiatrist with experience treating bipolar disorder rather than a family doctor or another type of physician. Your family doctor can give you a referral to a psychiatrist. Also, numerous community mental health organizations are ready and available to provide treatment and crisis intervention. Contact SAMHSA's National Helpline at 1-800-662-HELP or [www.SAMHSA.gov](http://www.SAMHSA.gov) for confidential treatment referral.

**Diagnosis:** A diagnostic exam for bipolar disorder generally consists of the following:

- **Psychological evaluation** – The doctor will conduct a complete psychiatric history. You will answer questions about your symptoms, the impact on your daily life, any treatment you have previously received, your physical health, medications and/or drug use, and family history.
- **Medical history and physical** – There are no lab tests for identifying bipolar disorder, but a doctor should conduct a medical history and physical exam in order to rule out other illnesses or medications that might be causing your symptoms.

In addition to taking your psychiatric and medical history, your doctor may talk to family members and friends about your moods and behaviors. Often, those close to you can give a more accurate and objective description of your symptoms.

**Treatment:** A comprehensive treatment plan for bipolar disorder aims to relieve symptoms, restore your ability to function better, improve problems the illness has caused at home, at work, in relationships, and reduce the likelihood of recurrence. A complete treatment plan involves:

- **Medication** – Medication is the cornerstone of bipolar disorder treatment. Taking a mood stabilizing medication can help minimize the highs and lows of bipolar disorder, keep symptoms under control, and make you feel more consistent emotionally.
- **Psychotherapy** – Therapy is essential for dealing with bipolar disorder and the problems it has caused in your life. Working with a therapist can help cope with difficult or uncomfortable feelings, repair your relationships, manage stress, and regulate your mood.
- **Education** – Managing symptoms and preventing complications begins with a thorough knowledge of your illness and understanding of how your body responds to the illness.
- **Lifestyle management** – By carefully regulating your lifestyle, you can keep symptoms and mood episodes to a minimum. This involves maintaining a regular sleep schedule, avoiding alcohol and drugs, eating well, following a consistent exercise program, minimizing stress, and taking medication as prescribed. Also it is important to realize and regularly access the things, people, and activities that bring you enjoyment, comfort, and peace. Seek those out!
- **Support** – Participating in a bipolar disorder support group gives you the opportunity to share your experiences and learn from others who know what you're going through. The support of friends and family is also invaluable. Reaching out to people who love you does not mean that you are a burden to others.

### **If someone confides in you regarding a mental health issue, what might you say or do?**

Let the person know you care and that there is no need to feel ashamed or guilty. Avoid telling him or her things like, “Snap out of it.” Instead highlight that behaviors and feelings can be a part of a mental illness and can be treated.

- Include the individual in activities realizing that he or she might not want to participate at first. If the answer is no, ask again later, or offer to stay in and spend time together.

If you are worried the person might be suicidal, ask, and offer to find help. A straightforward, caring question about suicide will not cause an individual to start having suicidal thoughts. If he or she is thinking of suicide, do not promise secrecy. Tell someone you trust immediately. Contact the National Suicide Prevention Lifeline 24/7 at 1-800-273-TALK, visit [suicidepreventionlifeline.org](http://suicidepreventionlifeline.org), or text “GO” to 741-741.

## **What if I am thinking about hurting myself or someone else? What if someone I know talks about suicide?**

**Get assistance right away. Help is available.**

The feelings that cause a person to think about suicide are caused by the person’s illness. Suicide is a *permanent* solution to a temporary problem. Feeling suicidal is not a character defect, and it does not mean that you are crazy, weak, or flawed. It only means that you have more pain than you can cope with right now. This pain seems overwhelming and permanent at the moment. According to the Centers for Disease Control and Prevention, suicide is the tenth leading cause of death among adults and 90% of those who die by suicide have experienced mental illness. Talking to a friend or family member about suicidal thoughts and feelings can be extremely difficult for anyone.

Warning signs of suicidal behavior require immediate action. Take them seriously to save a life.

- Talking about suicide or expressing thoughts about death
- Having the means to commit suicide (e.g., access to weapons, drugs, etc.)
- Withdrawing contact from others and shunning contact
- Mood swings
- Preoccupation with death, dying, or violent behavior
- Feelings of hopelessness and that life will not get better; death as a way out of the hopelessness
- Increased use of drugs or alcohol
- Changes in one’s routine, including eating or sleeping patterns
- Risky and self-destructive behaviors such as drug use or reckless behavior
- Giving away one’s belongings or getting one’s financial and personal affairs in order with no logical explanation
- Saying goodbye to loved ones, as if they will never be seen again
- Personality changes, severe anxiety, and agitation

Some things you can do if you or someone you know is thinking about suicide:

- Listen. Let the suicidal person unload despair, vent anger. No matter how negative the conversation seems, the fact that it exists is a positive sign.
- Be sympathetic, non-judgmental, patient, calm, and accepting. Your friend or family member is doing the right thing by talking about his/her feelings.
- Offer hope. Reassure the person that help is available and that the suicidal feelings are temporary. Let the person know that his or her life is important to you.
- Do not promise confidentiality or argue. Avoid saying things like "You have so much to live for," or "Your suicide will hurt your family."

If you are thinking about suicide:

- call for help or talk to someone you trust and explain how bad things are – do not keep feelings to yourself.
- avoid using alcohol and/or drugs.
- Consider making temporary changes to keep yourself safe while getting help. Leaving a location with weapons, drugs, alcohol, or other characteristics that could contribute to harming yourself may be a first step as you reach out to others for support.

Contact the National Suicide Prevention Lifeline 24/7 at 1-800-273-TALK, visit [suicidepreventionlifeline.org](http://suicidepreventionlifeline.org), or text "GO" to 741-741.