



RISKY
BUSINESS

MAY IS
MENTAL
HEALTH
MONTH 2017

FOREWORD

How do you know when you've gone *too far*?

That's a provocative question.

Life is a series of choices, and our lives are often defined by those we make – and others that are made for us.

More than sixty years ago, Mental Health America made a choice – that we would bring our fight for mental health out into the open by asking our public officials to declare May as Mental Health Month. We wanted to educate people that mental illnesses were as real as other physical illnesses, and that they could be treated effectively. And by acting early and effectively (Before Stage 4), we could prevent many of these illnesses from progressing, or even occurring in the first place.

This choice we made has been validated over the years. Millions now celebrate Mental Health Month, and millions more benefit from the materials Mental Health America, its affiliates, and its associates produce, and thousands of supporting agencies distribute.

Mental Health Month works not just because it is about what others can do for us, but what we can do for ourselves.

And where our mental health is concerned, that means making the choices we need to make to recognize and understand signs and symptoms of mental health concerns, and seeking help as soon as we need it.

That brings us to this year's Mental Health Month theme – Risky Business.

Take a look at our #mentalillnessfeelslike microsite (<http://www.mentalhealthamerica.net/feelslike>) that we developed for Mental Health Month last year. It will tell you something very important – that people experience symptoms of mental illnesses differently.

Sometimes people—especially young people—engage in potentially risky behaviors to manage, avoid, or cover up symptoms of a mental health problem. It is often hard to distinguish these behaviors from “normal growing up,” and, as a result, the people who care about people engaging in these struggles sometimes under-react, and other times over-react.

What Mental Health America is offering in 2017 are educational materials, tools, references, and more to help people decide – is this particular behavior a risky behavior for me or for someone I love? And if it is, what can I do about it before it harms me or someone else?

Some of this year's materials may make you just a little uncomfortable, because we'll be talking about some things that are often left unsaid. But “fighting in the open,” as inspired by our founder Clifford Beers, means speaking up early to educate people about risky behavior and its connection to mental illness—and doing so in a compassionate, judgment-free way.

For us, it's all about choosing to offer effective programs, services, and supports, long Before Stage 4.



Paul Gionfriddo
President & CEO



SUMMARY

By using the toolkit materials, you will help members of your community:

- Understand how certain seemingly common behaviors are risk factors for, or indicators of mental health or substance use disorders;
- Start talking about mental health B4Stage4;
- Assess their own mental health through use of MHA's screening tools; and
- Share their perceptions of when a behavior becomes risky, learn about the perceptions of others, and learn about accepted guidelines for when a behavior becomes indicative of a mental health or substance use disorder by taking the "What's Too Far" quiz.

This year's toolkit includes:

Media Materials

- Key Messages
- Sample Press Release
- Drop-In Article
- May is Mental Health Month Proclamation

Social Media and Web Components

- Sample Facebook and Twitter Posts
- Facebook Cover and Profile Images
- Twitter Header and Profile Images
- Additional Image for Sharing
- What's Too Far Quiz Call to Action Image
- Horizontal Banner Image
- Vertical Banner Image

Fact Sheets and Handouts

- Fact Sheet - Risky Business: Marijuana
- Fact Sheet - Risky Business: Prescription Drug Misuse
- Fact Sheet - Risky Business: Exercise
- Fact Sheet - Risky Business: Sex
- Fact Sheet - Risky Business: Compulsive Buying
- Fact Sheet - Risky Business: Internet Addiction
- May is Mental Health Month Wellness Tips Poster
- Worksheet: Filling the Void
- Worksheet: A Letter to Risky Business

QUESTIONS?

If you have further questions about Mental Health Month, please contact Danielle Fritze, Senior Director of Public Education and Visual Communications at dfritze@mentalhealthamerica.net.

OUTREACH IDEAS

THE “WHAT’S TOO FAR” QUIZ

In May, Mental Health America will launch a page on our website at www.mentalhealthamerica.net/whatstooofar with an interactive survey about risky behaviors. Think fun on the front-end (like a BuzzFeed-type quiz), and fact-finding on the back-end (we'll collect demographic data along with responses).

Our intention is to use this survey to collect data from individuals about their personal opinions on when certain behaviors become problematic, let them know how many other people have answered similarly, and provide them with information on accepted guidelines for when a behavior becomes indicative of a mental health or substance use disorder.

Results from the quiz will be used in future MHA activities and public education efforts, such as MHA's 2017 Annual Conference, *Sex, Drugs, and Rock & Roll*, and *Life on Campus* college education initiative.

We're asking everyone who uses this toolkit to post the link to the quiz on your organization's social media networks: Twitter, Pinterest, Instagram, Facebook, etc. to encourage participation and raise awareness of *Risky Business*, the theme of Mental Health Month. Make sure to use the *May is Mental Health Month* hashtags: #MHM2017, #RiskyBusiness, and #WhatsTooFar. Don't forget to tag Mental Health America's profile on the relevant social media channels using the account information below so we can see it!

 /mentalhealthamerica

 /mentalhealtham

 @mentalhealtham

 /mentalhealthamerica

 @mentalhealthamerica

OTHER IDEAS

Here are some other ideas to help you plan for outreach activities during the month of May:

- Ask your governor or mayor to declare May as Mental Health Month, using the sample proclamation that is part of the toolkit.
- Organize a community run or walk for mental health. Reach out to your local media for assistance in promoting the event. Email all of your partners, family members and friends, donors, and local officials inviting them to participate.
- Host a mental health screening or other educational event at a local venue (e.g., town hall, firehouse, church, mall or library). Have computers or tablets available for people to go to mhascreening.org. Make sure to have a printer so people can print their results.
- Plan a day at your state Capitol. Invite advocates, consumers, concerned citizens and community and business leaders to visit each policymaker to discuss your community's mental health needs.
- Host a meet-and-greet with local leaders in mental health and the community they serve at the local town square. Ask a consumer and local community leader to share why mental health is so important to them personally.
- If your community has a number of buildings with bell towers or a bell-ringing ensemble, ask them to ring their bells for mental health on May 1 or another day. Alert the public and the media in advance. Share toolkit materials with attendees.

LET US KNOW WHAT YOU'VE GOT PLANNED!

Tell us about your events so we can post them on MHA's Web Calendar, and help you get the word out. Contact Jessica Kennedy at jkennedy@mentalhealthamerica.net with the following information:

Name of Event
Date
Location
Brief Description
Registration/Sign-Up Instructions
Contact Person

LIKE OUR MATERIALS? WANT MORE?

Brochures on assorted topics and B4Stage4 merchandise are available through the Mental Health America store to supplement the information provided in the 2017 May is Mental Health Month toolkit.

Visit the Mental Health America store at squareup.com/store/mental-health-america.

Check out our exclusive t-shirt at www.booster.com/mentalhealthamerica.

***MHA Affiliates** – One of the benefits of being an affiliate is getting a discount on printed materials at the MHA store. Contact Valerie Sterns at vsterns@mentalhealthamerica.net for your discount code. There will also be extra May is Mental Health Month tools for you ("Affiliate Exclusives") on the Education and Outreach section of the Affiliate Only Site.

KEEP TRACK OF YOUR ACTIVITIES

We'll be reaching out via email in mid-June to ask about your outreach and impact. Please participate so that we can accurately track the collective impact of our *May is Mental Health Month 2017* and use this information to gain support for our 2018 efforts. Make sure to keep track of your impact by doing things like:

- Counting how many handouts you distribute;
- Tracking media hits and impressions;
- Keeping tally of likes, shares and retweets of your Mental Health Month posts on social media networks;
- If you do a screening event or health fair, keep count of how many people visit your booth and/or take a screen; and
- Conducting a pre/post survey to see how you've increased knowledge about mental health issues among those you reach. Set up a quick survey of up to 10 questions for free online using SurveyMonkey.com.



KEY MESSAGES

- Mental health is essential to everyone's overall health and well-being, and mental illnesses are common and treatable.
- People experience symptoms of mental illnesses differently—and some engage in potentially dangerous or risky behaviors to avoid or cover up symptoms of a potential mental health problem.
- Sometimes people—especially young people—struggling with mental health concerns develop habits and behaviors that increase the risk of developing or exacerbating mental illnesses, *or that could be signs of mental health problems themselves*.
- Activities like compulsive sex, recreational drug use, obsessive internet use, excessive spending, or disordered exercise patterns can all be behaviors that can disrupt someone's mental health and potentially lead them down a path towards crisis.
- It is important to understand early symptoms of mental illness and know when certain behaviors are potentially signs of something more.
- We need to speak up early and educate people about risky behavior and its connection to mental illness—and do so in a compassionate, judgement-free way.
- When we engage in prevention and early identification, we can help reduce the burden of mental illness by identifying symptoms and warning signs early—and provide effective treatment Before Stage 4.

Feel free to supplement these key messages with the assortment of statistics, quotes, and tips included in the fact sheets.

PRESS RELEASE

This May is Mental Health Month *Risky Business* Theme Highlights Importance of Knowing When Behaviors and Habits Can Be Unhealthy

Contact: [NAME, PHONE, EMAIL]

[CITY, STATE] (DATE)—When you or someone you love is dealing with a mental health concern, sometimes it's a lot to handle. It's important to remember that mental health is essential to everyone's overall health and well-being, and mental illnesses are common and treatable. Yet, people experience symptoms of mental illnesses differently—and some engage in potentially dangerous or risky behaviors to avoid or cover up symptoms of a potential mental health problem.

That is why this year's theme for *May is Mental Health Month—Risky Business*—is a call to educate ourselves and others about habits and behaviors that increase the risk of developing or exacerbating mental illnesses, *or could be signs of mental health problems themselves*. Activities like compulsive sex, recreational drug use, obsessive internet use, excessive spending, or disordered exercise patterns can all be behaviors that can disrupt someone's mental health and potentially lead them down a path towards crisis.

May is Mental Health Month was started 68 years ago by Mental Health America, to raise awareness about mental health conditions and the importance of good mental health for everyone. Last year, Mental Health Month materials were seen and used by 22.3 million people, with more than 8,500 entities downloading MHA's toolkit.

This *May is Mental Health Month*, we are encouraging people to educate themselves about behaviors and activities that could be harmful to recovery – and to speak up without shame using the hashtag *#riskybusiness* – so that others can learn if their behaviors are something to examine. Posting with our hashtag is a way to speak up, to educate without judgment, and to share your point of view or story with people who may be suffering—and help others figure out if they too are showing signs of a mental illness.

"It is important to understand early symptoms of mental illness and know when certain behaviors are potentially signs of something more," said [NAME] [TITLE] of [AFFILIATE]. "We need to speak up early and educate people about risky behavior and its connection to mental illness—and do so in a compassionate, judgement-free way."

MHA has developed a series of fact sheets (available at www.mentalhealthamerica.net/may) on specific behaviors and habits that may be a warning sign of something more, risk factors and signs of mental illness, and how and where to get help when needed. MHA has also created an interactive quiz at www.mentalhealthamerica.net/whatstoofar to learn from Americans when they think specific behaviors or habits go from being acceptable to unhealthy.

"Prevention, early identification and intervention, and integrated services work," concluded [NAME]. "When we engage in prevention and early identification, we can help reduce the burden of mental illness by identifying symptoms and warning signs early—and provide effective treatment *Before Stage 4*."

For more information on *May is Mental Health Month*, visit Mental Health America's website at www.mentalhealthamerica.net/may.

[BOILERPLATE]



DROP - IN ARTICLE

Would You Know When You've Gone Too Far?

Mental health is essential to everyone's overall health and well-being, and mental illnesses are common and treatable. But people experience symptoms of mental illnesses differently—and some engage in potentially dangerous or risky behaviors to avoid or cover up symptoms of a potential mental health problem.

Sometimes people—especially young people—struggling with mental health concerns develop habits and behaviors that increase the risk of developing or exacerbating mental illnesses, *or could be signs of mental health problems themselves*.

Activities like compulsive sex, recreational drug use, obsessive internet use, excessive spending, or disordered exercise patterns can all be behaviors that can disrupt someone's mental health and potentially lead them down a path towards crisis.

This May is Mental Health Month; [AFFILIATE NAME] is raising awareness of *Risky Business* (#riskybusiness). The campaign is meant to educate and inform individuals dealing with a mental health concern understand that some behaviors and habits can be detrimental to recovery—or even mask a deeper issue—but that seeking help is nothing to be ashamed of.

Take the interactive quiz at www.mentalhealthamerica.net/whatstoofar and tell us when you think behaviors or habits go from being acceptable to unhealthy.

[AFFILIATE] wants everyone to know that mental illnesses are real, that recovery is always the goal, and that even if you or someone you love are engaging in risky behavior, there is help. It is important to understand early symptoms of mental illness and know when certain behaviors are potentially signs of something more.

We need to speak up early and educate people about risky behavior and its connection to mental illness—and do so in a compassionate, judgement-free way.

When we engage in prevention and early identification, we can help reduce the burden of mental illness by identifying symptoms and warning signs early—and provide effective treatment *Before Stage 4*.

So, let's talk about what is and is not *risky business*. Let's understand where it's important to draw the line, so that we can address mental illness *B4Stage4*, and help others on the road to recovery. For more information, visit www.mentalhealthamerica.net/may.



PROCLAMATION

Encourage your local public officials to go on the record in support of mental health. Below, please find a sample proclamation that designates May as Mental Health Month. An official signing of a proclamation is a perfect occasion for a news event, photo opportunity or other activity.

Mental Health Month 2017

WHEREAS, mental health is essential to everyone's overall health and well-being; and

WHEREAS, mental illnesses are real and prevalent in our nation, and half of us will have a mental health diagnosis at some point in our lives; and

WHEREAS, all Americans experience times of difficulty and stress in their lives, and should feel comfortable in seeking help and support to manage these times; and

WHEREAS, engaging in prevention, early identification, and early intervention are as effective ways to reduce the burden of mental illnesses as they are to reduce the burden of other chronic conditions; and

WHEREAS, there is a strong body of research that identifies behavioral health risks and supports specific tools that all Americans can use to protect their health and well-being; and

WHEREAS, with effective treatment before Stage 4, all individuals with mental illnesses – even serious mental illnesses - can make progress toward recovery and lead full, productive lives; and

WHEREAS, jails and prisons have often become the default places of custodial care for even nonviolent people with serious mental illnesses; and

WHEREAS, each business, school, government agency, healthcare provider, organization and citizen has a responsibility to promote mental health and well-being for all.

THEREFORE, I [NAME OF PUBLIC OFFICIAL], do hereby proclaim May 2017 as Mental Health Month in [STATE OR COMMUNITY]. As the [TITLE OF LOCAL OFFICIAL], I also call upon the citizens, government agencies, public and private institutions, businesses and schools in [STATE OR COMMUNITY] to recommit our community to increasing awareness and understanding of mental health, the steps our citizens can take to protect their mental health, and the need for appropriate and accessible services for all people with mental illnesses at all stages, and especially before stage 4.



SAMPLE TWEETS

Below are a series of tweets to get you started with your Twitter outreach for May is Mental Health Month. Suggestions for types of images to accompany your tweets appear in [brackets].

Celebrate Mental Health Month! Download the toolkit and share to spread awareness bit.ly/MayMH #MHM2017 #riskybusiness [MHM2017 image]

Do you engage in #riskybusiness? How far is too far? Take the #WhatsTooFar quiz and tell us what you think bit.ly/WhatsTooFar #MHM2017

How much do you know about the effects of #marijuana on #mentalillness? Get the facts: bit.ly/MayMH #MHM2017 #riskybusiness [marijuana image]

Sex: let's talk about it. How do you know when it becomes risky? Learn more: bit.ly/MayMH #riskybusiness #MHM2017 [sex image]

It's Mental Health Month! Download this year's toolkit & share with others to spread awareness bit.ly/MayMH #MHM2017

Shopping can be fun, but too much can lead to problems. Are your shopping habits #risky? bit.ly/MayMH #riskybusiness #MHM2017 [shopping image]

Take the #WhatsTooFar quiz to learn more about #riskybehaviors & ties to #mentalhealth. bit.ly/WhatsTooFar #MHM2017 #riskybusiness

Did you know #riskybehaviors are linked to #mentalillness? Learn more from the #riskybusiness toolkit: bit.ly/MayMH #MHM2017 [MHM 2017 image]

Prescription drugs save lives, but they can also do harm. Learn about #drugabuse & other #riskybusiness: bit.ly/MayMH #MHM2017 [drug image]

Are you online too much? Yes, it's a thing, and can be a sign of a #mentalhealth issue: bit.ly/MayMH #riskybusiness #MHM2017 [internet image]

Other ideas:

- Tweet the tips from the poster each day.
- Share graphics from the toolkit.
- Use the hashtags: #MHM2017, #WhatsTooFar, and #RiskyBusiness.
- Retweet posts from @MentalHealthAm. We will be promoting additional original content for Mental Health Month throughout May!



SAMPLE FB POSTS

Join @Mentalhealthamerica during Mental Health Month in increasing awareness of risky behaviors and potential ties to mental health conditions. Download the complete toolkit, featuring facts sheets with infographics, social media images, and more from bit.ly/MayMH #riskybusiness #MHM2017

What does #riskybusiness have to do with #mentalhealth? Did you know that activities like compulsive #sex, recreational #druguse, obsessive internet use, excessive spending, or disordered exercise patterns can disrupt someone's mental health and potentially lead them down a path towards crisis? Download the #MHM2017 toolkit and learn more: bit.ly/MayMH

Why talk about #riskybusiness during Mental Health Month? It's important to educate ourselves and others about habits and behaviors that increase the risk of developing or exacerbating mental illnesses, or how these could be signs of mental health problems themselves. Learn more: bit.ly/MayMH

Recreational #druguse and #internetaddiction are hot topics, but did you know that these behaviors could also be early warning signs of a mental health problem? Learn about these and other risky behaviors with this year's #MHM2017 fact sheets: bit.ly/MayMH

Are you engaging in #riskybusiness? Where do you draw the line? Habits like disordered exercise patterns or excessive spending could be early symptoms and warnings signs of a mental health problem. Take the #WhatsTooFar quiz and tell us what you think. bit.ly/WhatsTooFar

People experience symptoms of mental illnesses differently—and some engage in potentially dangerous or #riskybehaviors to avoid or cover up symptoms of a potential mental health condition. Learn more about #riskybehaviors and download the #riskybusiness toolkit: bit.ly/MayMH

#B4Stage4 means identifying symptoms and warning signs early—and providing effective treatment Before Stage 4. Learn more! bit.ly/MayMH

We need to speak up early and educate people about risky behavior and its connection to mental illness—and do so in a compassionate, judgement-free way. Download the #MHM2017 toolkit: bit.ly/MayMH #nojudgement #riskybusiness

What's the limit? #WhatstooFar? Take the #WhatstooFar quiz and learn more about #riskybehaviors and their ties to #mentalhealth. bit.ly/WhatsTooFar #MHM2017 #riskybusiness

Did you know that there are links between engaging in #riskybehaviors and #mentalhealth problems? Download the #riskybusiness toolkit and learn more! bit.ly/MayMH #MHM2017

Other ideas:

- Post tips from the poster or fact sheets.
- Share graphics from the toolkit.
- Use the hashtags: #MHM2017, #WhatsTooFar, and #RiskyBusiness.
- Tag @MentalHealthAmerica in posts that you create.
- Follow us on Facebook and share the additional original content we will be posting for Mental Health Month throughout May!



IMAGES FOR SOCIAL

Download and save the images provided for use on your social media platforms or websites. All images can be downloaded by visiting www.mentalhealthamerica.net/mental-health-month-2017-toolkit-download, then right-clicking on the image and selecting "save image as."

What's Too Far Quiz
Call to Action (180 x 150 px)



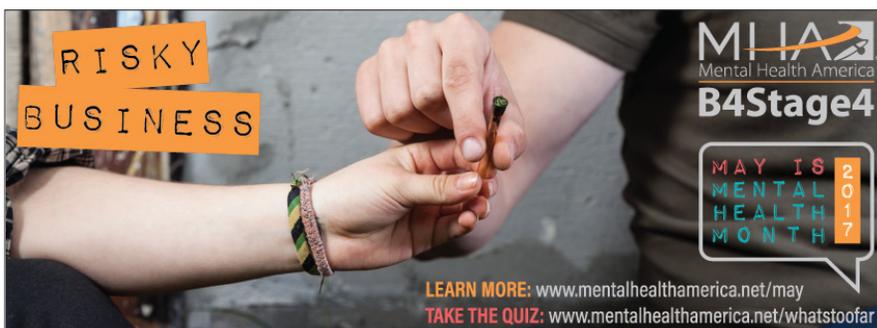
Facebook Profile (180 x180 px)
Twitter Profile (400 x 400 px)
Instagram Profile (110 x 110 px)



Horizontal Banner (600 x160 px)



Facebook Covers (851 x 315 px)
Twitter Headers (1500 x 500 px)



Vertical Banner (160 x 600 px)



Additional Image for Sharing (1200 x 630 px)



RISKY BUSINESS

MARIJUANA USE

With laws in many states allowing the use of marijuana under a variety of circumstances, it is important to understand how it can affect mental health and when its use becomes a serious problem.

AVAILABILITY IS INCREASING, ATTITUDES ARE CHANGING

20

states have legalized marijuana for medical use¹

8

states and the District of Columbia have legalized marijuana for medical AND recreational use²



57%

of American adults support the legalization of marijuana³



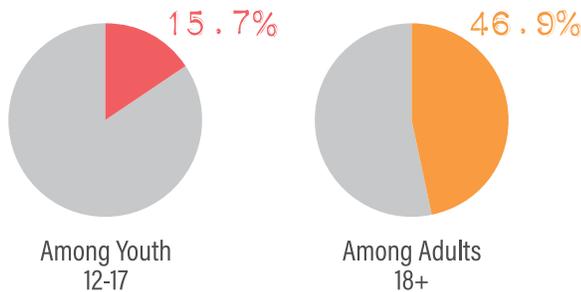
69%

of American adults believe alcohol is more harmful to health than marijuana⁴

MARIJUANA IS WIDELY USED

LIFETIME USE

of marijuana/cannabis⁵



WHEN DOES MARIJUANA USE BECOME A PROBLEM?

Marijuana use becomes a problem when it interferes with a person's ability to function in their personal and/or professional lives.

In the past year, have you:

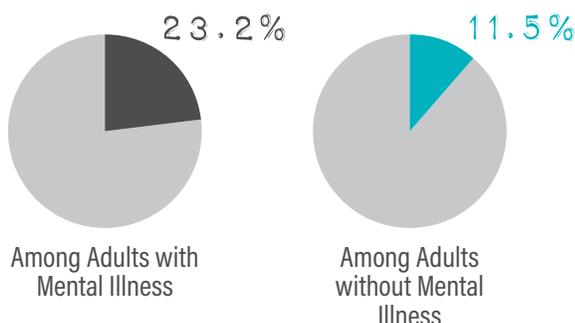
- Used marijuana in large amounts for longer than intended?
- Wanted to stop using marijuana, but weren't successful in attempts to quit?
- Spent a great deal of time getting, using, or recovering from marijuana?
- Had strong cravings or urges to use?
- Failed to perform work, school, or home duties because of marijuana?
- Continued use despite it causing problems with relationships?
- Stopped participating in activities you used to enjoy because of marijuana use?
- Used marijuana in physically dangerous situations (driving, etc.)?
- Continued using marijuana despite physical or mental health problems that it has caused or made worse?
- Developed a tolerance to marijuana (needed more to get the desired effect)?
- Felt withdrawal symptoms when you stopped using marijuana, possibly using again to relieve your discomfort?

If you have experienced two or more of the following signs in the past year, you may have Marijuana (cannabis) Use Disorder.⁷

USE IS HIGHER AMONG PEOPLE WITH MENTAL ILLNESS

PAST YEAR USE

of marijuana/cannabis⁶



Marijuana (cannabis) Use Disorder affects⁸:

3.4%

of youth ages 12-17

1.5%

of adults ages 18+

CAN MARIJUANA CAUSE MENTAL ILLNESSES?

More research is needed for a clear answer to this question. Here's what we do know:



Marijuana may increase the risk of developing psychotic disorders like schizophrenia. It can also worsen symptoms in people who already have psychosis.⁹



Marijuana use during adolescence can have lasting effects, including changes to the reward system in the brain and trouble with thinking and remembering.¹⁰



Marijuana use can cause symptoms of mental health problems like psychosis (hallucinations), anxiety (panic attacks), depression, and sleep disorders, but these symptoms generally fade after the effect of the drug has worn off.¹¹



People may get "too high" by using a strain of marijuana that is stronger than they thought it would be, by using too much, or by consuming it in different ways. Smoking marijuana usually takes effect quickly (a matter of minutes), while consuming edibles usually takes longer (a matter of hours) for an individual to feel the effects, and they may end up consuming too much because they "don't feel it" at first.¹²



Adults who have been diagnosed with marijuana (cannabis) use disorder have high rates of mental health disorders including anxiety, depression, PTSD, and ADHD.¹³ It is hard to know whether the marijuana use disorder or the mental health disorder appeared first, since many people use drugs to self-medicate.

CAN MARIJUANA TREAT MENTAL ILLNESSES?

Much of the research supporting the use of marijuana or cannabis as a treatment for mental illnesses is based on:



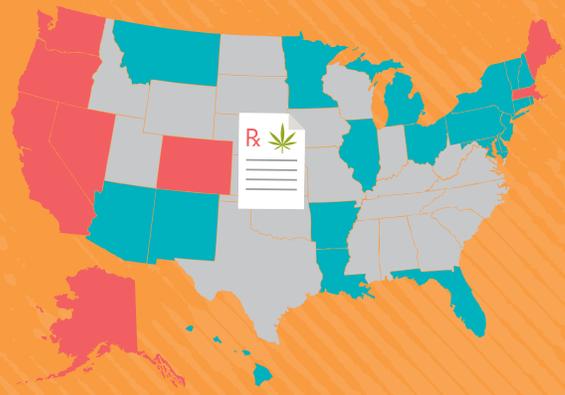
Anecdotal evidence
(personal accounts)

OR



Experiments using
different chemicals
from marijuana in rats

In some states that have legalized medical marijuana, it can be prescribed to reduce symptoms of Post-Traumatic Stress Disorder (PTSD) or stimulate appetite in people with anorexia. Depending on the state, doctors may also be able to prescribe marijuana for other mental health problems (like anxiety) at their discretion if traditional methods of treatment have not been successful.



TAKE CONTROL OF MARIJUANA USE

- ▶ Keep track of your marijuana use to see if you notice patterns.
- ▶ Be specific with yourself about how you would like to change your marijuana use (how often, when, where, etc.) and your reasons for making changes.
- ▶ Take a month-long break from marijuana. This enables your body to get rid of the drug, reduce tolerance, and get over the discomfort of withdrawal that some people feel when stopping.
- ▶ Identify what triggers the urge to use, and think about what you can do to manage those triggers.
- ▶ Avoid using marijuana before activities that require thinking and remembering, like school and work, or before an important or new challenge.
- ▶ Don't mix marijuana with alcohol or other drugs.
- ▶ Get immediate help if you are unable to control your use or if you have a medical emergency.

SOURCES

⁹ <http://norml.org/states>
¹⁰ <http://www.pewresearch.org/fact-tank/2015/04/14/6-facts-about-marijuana/>
¹¹ SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2014 and 2015.
¹² ¹³ American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Arlington, VA, American Psychiatric Association, 2013.

IF YOU NEED HELP



Take the substance use screen at mhascreening.org. Use the results to start a conversation with your health care provider.



Seek specialized treatment. You can find treatment providers for substance use problems using the online SAMHSA Treatment Locator at findtreatment.samhsa.gov or by calling the SAMHSA 24/7 Treatment Referral Line 1-800-662-HELP (4357).

TELL US WHAT YOU THINK ABOUT MARIJUANA USE.
TAKE THE "WHAT'S TOO FAR?" QUIZ
mentalhealthamerica.net/whatstoofar

/mentalhealthamerica
 @mentalhealtham
 @mentalhealthamerica
 /mentalhealtham
 /mentalhealthamerica
www.mentalhealthamerica.net

Mental Health America
B4Stage4

RISKY BUSINESS

PRESCRIPTION DRUG MISUSE

Prescription medications are an important part of treating many health issues and are used effectively by millions of people; however, when misused they become the problem instead of the solution. We'll look at some of the most commonly misused prescription drugs: opioid pain killers, tranquilizers (used for anxiety and muscle spasms), sedatives (used for sleep disorders), and stimulants (used for ADHD and obesity).

WHAT DO WE MEAN BY "MISUSE"?

Misuse is when a person uses a prescription drug that is not intended for them, or uses a prescription in a way that is different than how the doctor indicated (using larger amounts, taking it more often, or using it for longer than prescribed).

HOW MANY PEOPLE MISUSE PRESCRIPTION DRUGS?

7.1% of people aged 12 or older misused prescription drugs in the past year¹

PAST YEAR MISUSE

of prescription drugs²



12.5 MILLION people misused opioid pain relievers



6.1 MILLION people misused tranquilizers



5.3 MILLION people misused stimulants



1.5 MILLION people misused sedatives

MISUSE IS HIGHER AMONG PEOPLE WITH MENTAL ILLNESS

People with mental illnesses are



more likely to misuse prescription drugs³

HOW DOES MISUSING PRESCRIPTION DRUGS AFFECT MENTAL HEALTH?



Opioid pain relievers, tranquilizers, stimulants and sedatives all have the potential to lead to addiction.



Prescription drug misuse may cause people to experience symptoms of mental health disorders. These symptoms generally improve after a person stops using the drugs, but may take a month or more to go away completely.⁴



Drugs that slow down or calm people can cause symptoms of depression when misused. If a person goes into withdrawal from these drugs, they are likely to have anxiety.⁵



Drugs that act as stimulants can cause symptoms of psychotic and anxiety disorders when misused. If a person goes into withdrawal, they are likely to have symptoms of major depression.⁶



Opioid pain relievers, tranquilizers, stimulants and sedatives may all cause sleep and sexual troubles.⁷

WHY DO PEOPLE MISUSE PRESCRIPTION DRUGS?

People who misuse prescription drugs may be self-medicating to control symptoms of an existing (and possibly undiagnosed) physical or mental health disorder, or because they like the way the drugs affect them and think they are safe to use.

16% PARENTS



27% TEENS

believe that using prescription drugs to get high is safer than using street drugs⁸

CHECK YOURSELF

It is always dangerous to use prescription drugs that do not belong to you or in a way that is not prescribed. Use the checklist below to determine if you may have a serious problem with prescription drugs.

In the past year, have you:

- Used prescription drugs in large amounts or for longer than intended?
- Wanted to stop misusing prescription drugs, but were unsuccessful in your attempts to quit?
- Spent a great deal of time getting, using, or recovering from prescription drugs that you have been misusing?
- Had strong cravings or urges to misuse a prescription drug?
- Failed to perform work, school, or home duties because of misuse?
- Continued to misuse despite it causing problems with relationships?
- Stopped participating in activities you used to enjoy because of prescription drug misuse?
- Misused prescriptions in dangerous situations (driving, etc.)?
- Continued misusing prescription drugs despite physical or mental health problems that it has caused or made worse?
- Developed a tolerance (needed more to get the desired effect) to a prescription you were misusing?
- Felt withdrawal symptoms when you stop misusing prescriptions possibly using again to relieve your discomfort?

If you have experienced two or more of the following signs in the past year, you may have a prescription drug use disorder.⁹

WHAT CAN YOU DO ABOUT PRESCRIPTION DRUG MISUSE?



Use medications as directed.



Talk to your doctor about non-addictive options for treating the condition that you are being medicated for if you feel at risk for misusing your prescription. Also make sure to consult your healthcare provider before adjusting medication dosage.



Store medications in a safe place where they cannot be accessed by others who may want to use them inappropriately.



Call 911 or get immediate help if you or a loved one have a medical emergency related to prescription drugs.

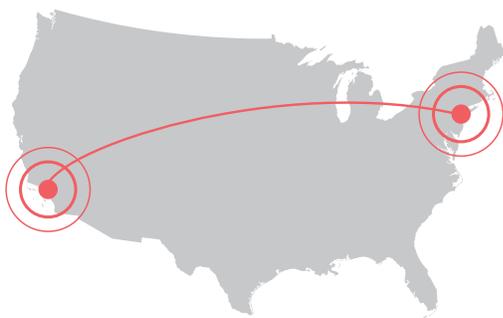


Properly dispose of expired or unused medications. Over half of people who misused prescription pain relievers got them from friends or relatives.¹³ Walgreens has over 600 safe medication disposal kiosks in 45 states. To locate a disposal kiosk, visit: bit.ly/kiosk2017. If there is not a kiosk located in your area, you may call the DEA's Registration Call Center at 1-800-882-9539 to find a collection receptacle for unused or unwanted prescription drugs.

PRESCRIPTION DRUG USE DISORDERS ARE COMMON

OVER 3.2 MILLION PEOPLE

met the criteria for a prescription drug use disorder in the past year.¹⁰



That's enough people to hold hands from New York to Los Angeles.¹¹ Less than half received treatment.¹²

IF YOU NEED HELP



Take the substance use screen at mhascreening.org. Use the results to start a conversation with your health care provider.



Seek specialized treatment. You can find treatment providers for substance use problems using the online SAMHSA Treatment Locator at findtreatment.samhsa.gov or by calling the SAMHSA 24/7 Treatment Referral Line 1-800-662-HELP (4357).

TELL US WHAT YOU THINK ABOUT PRESCRIPTION DRUG MISUSE. TAKE THE "WHAT'S TOO FAR?" QUIZ mentalhealthamerica.net/whatstoofar

SOURCES

^{10,11,12} SAMHSA, Prescription Drug Use and Misuse in the United States: Results from the 2015 National Survey on Drug Use and Health. <https://www.samhsa.gov/data/sites/default/files/NSDUH-FRR2-2015/NSDUH-FRR2-2015.htm>
¹³ SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2014 and 2015.
^{14,15,16} American Psychiatric Association, Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.
¹⁷ The Partnership Attitude Tracking Study: Teens and Parents 2012, The Partnership for Drug-Free Kids. www.drugfree.org/wp-content/uploads/2013/04/PATS-2012-FULL-REPORT2.pdf
¹⁸ <http://www.howmanyisthat.org/compare/bullying--holding-hands>

/mentalhealthamerica
 @mentalhealtham
 @mentalhealthamerica
 /mentalhealtham
 /mentalhealthamerica
www.mentalhealthamerica.net

Mental Health America
B4Stage4

RISKY BUSINESS

EXERCISE

It seems odd to talk about exercise as a risky activity, but when a person doesn't exercise enough or exercises too much, it has consequences for both physical and mental health.

NOT ENOUGH

When a person does not regularly exercise or does not meet the bare minimum recommendations for physical activity as outlined by the Centers for Disease Control and Prevention (CDC), it is called having a sedentary lifestyle.¹



TOO MUCH

When a person misses important social or professional obligations so they can workout; feels extremely sad or guilty when they don't exercise; doesn't give their body time to recover after an intense workout; or continues to exercise despite illness or injury, it is called compulsive exercise, or exercise addiction.³



80%

of adults DO NOT meet the guidelines for both aerobic and muscle-strengthening activities²

3%

of people meet the criteria for behavioral addiction to exercise⁴

WHAT IS THE RECOMMENDED AMOUNT OF EXERCISE?

The recommended amount of exercise for an adult includes aerobic activity and muscle strengthening activities.⁵

AEROBIC ACTIVITY

Aerobic activity must be done for at least 10 minutes at a time to have an impact.



The minimum total amount of aerobic activity that should be done in a week depends on the intensity of the exercise.

150-300
MINUTES
PER WEEK

Moderate-intensity aerobic activity (heart rate is raised, light sweating, should be able to talk but not sing)

OR

75-150
MINUTES
PER WEEK

Vigorous-intensity aerobic activity (heart rate is raised significantly, heavy sweating, can't say more than a few words at a time)

MUSCLE-STRENGTHENING



2 OR MORE
DAYS
PER WEEK

Muscle-strengthening activities that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms)



WHAT ARE THE HEALTH RISKS OF TOO MUCH OR NOT ENOUGH EXERCISE?

TOO MUCH⁹



Dehydration & fatigue



Increased injuries, cartilage damage & arthritis



Fractured bones & osteoporosis



Irregular periods & reproductive issues



Heart problems

NOT ENOUGH⁷



Colon & breast cancer



Obesity



Diabetes



Cognitive decline & depression



Heart attack & stroke

TAKE CONTROL OF COMPULSIVE EXERCISE

- ▶ Take days off from exercising or substitute your normal routine with less strenuous workouts.
- ▶ Remind yourself that a certain body type or weight will not automatically lead to happiness.
- ▶ Avoid negative self-talk like, "You're a lazy slob if you don't go to the gym," or, "Nobody will want to date you with a body like that."
- ▶ Make sure you are eating enough to fuel your body for exercise.
- ▶ Tell a trusted friend or family member about your struggles. Make plans to do something besides workout a couple of days each week.
- ▶ Know when to seek professional help.

SOURCES

15 <https://www.cdc.gov/physicalactivity/basics/adults>
 2 <https://www.fitness.gov/resource-center/facts-and-statistics>
 3,8 <https://www.allianceforeatingdisorders.com/portal/compulsive-over-exercise>
 4 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC320559>
 6 https://uhs.berkeley.edu/sites/default/files/bewell_compexr.pdf
 7 <http://www.nchpad.org/403/2216/Sedentary-Lifestyle-is-Dangerous-to-Your-Health>
 9 <https://doi.org/10.1002/ajhp.1001>

HOW IS EXERCISE RELATED TO MENTAL ILLNESS?

Sedentary lifestyle may be a symptom of depression or anxiety when coupled with withdrawal from activities that one used to enjoy or social isolation. Additionally, living a sedentary lifestyle increases a person's risk of developing depression.

When compulsive exercise is used as a way to "purge" calories that have been consumed, it can be a symptom of an eating disorder.⁸

Eating disorders often accompany exercise addiction. Approximately 39-48% of people who have an eating disorder also struggle with exercise addiction.⁹



GET MOVING

If you've been living a sedentary lifestyle and want to get started with an exercise program:

- ▶ Talk to your doctor to see if there are any special considerations you should take when exercising.
- ▶ Start slow and work up to harder activities.
- ▶ Find a friend to exercise with to keep you motivated and accountable.

IF YOU NEED HELP



Take a screen at mhascreening.org to determine if you are experiencing signs of an eating disorder or another underlying mental illness. Use the results to start a conversation with your health care provider.



Seek specialized treatment. You can find treatment providers using the online SAMHSA Treatment Locator at findtreatment.samhsa.gov or by calling the SAMHSA 24/7 Treatment Referral Line 1-800-662-HELP (4357).

TELL US WHAT YOU THINK ABOUT WORKOUT HABITS.
 TAKE THE "WHAT'S TOO FAR?" QUIZ
[mentalhealthamerica.net/whatstoofar](https://www.mentalhealthamerica.net/whatstoofar)

f /mentalhealthamerica
 t @mentalhealtham
 i @mentalhealthamerica
 p /mentalhealtham
 y /mentalhealthamerica

www.mentalhealthamerica.net/may

MHA
 Mental Health America
B4Stage4

RISKY BUSINESS

SEX

Sex is a completely natural and normal part of the human experience, and when practiced safely and with a respectful partner, it can have health benefits. For some people though, sex becomes an obsession and does more harm than good.

SEX IS BIG BUSINESS



Strip clubs are a

\$6 BILLION

industry in the United States.¹



30 PERCENT

of data sent over the internet is porn-related.²



In 2016, U.S. sales of male performance enhancing drugs generated over

\$2.6 BILLION³

SEX CAN ALSO BE RISKY BUSINESS

High-risk sexual behavior takes place when a person puts themselves at risk for negative consequences like catching a sexually transmitted infection or disease, or unplanned pregnancy.

Some high-risk sexual behaviors include:

- ▶ Unprotected sexual contact
- ▶ Multiple sexual partners
- ▶ Sex while under the influence of drugs or alcohol



In a study of college students,

LESS THAN HALF

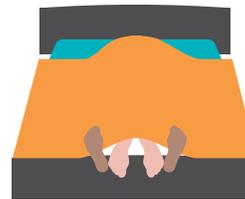
(46.6%) who engaged in oral, anal, or vaginal sex in their most recent hookup reported using a condom.⁴

While not everyone who engages in risky sex has issues with compulsive sexual behavior, many people with compulsive sexual behavior have high-risk sex.

WHAT IS COMPULSIVE SEX?

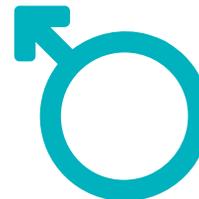
Compulsive sexual behavior is when a person has excessive or uncontrolled sexual behaviors or thoughts that may cause them distress and negatively affect their relationships and work. In some cases, compulsive sexual behaviors may also cause a person to have financial or legal troubles. Compulsive sexual behavior is also sometimes called nymphomania, hypersexuality, sex addiction, or excessive sexual desire.

Compulsive sexual behaviors are generally divided into two categories: those that are generally socially acceptable when not done compulsively (nonparaphilic behaviors), and those that are not (paraphilic behaviors). This information focuses on behaviors that are nonparaphilic, like masturbation, use of porn, and consensual sex which may be paid for or extramarital.



5 - 8%

of people have a compulsive sexual behavior.⁵



Compulsive sexual behaviors are more common in men.⁶

NOTE: The information being presented is not about those who commit sexual assault or other sex-related crimes.

HOW DOES COMPULSIVE SEX AFFECT MENTAL HEALTH?

- ▶ People may neglect responsibilities in pursuit of sexual gratification, causing feelings of guilt and shame.⁷
- ▶ Compulsive sexual behaviors like excessive porn watching or sex with prostitutes can create unhealthy or unrealistic expectations of what healthy sexual experiences should be like.⁸
- ▶ People who get sexually transmitted infections or diseases as a result of compulsive sexual activity may feel intense shame and decreased self-esteem.
- ▶ Feelings of betrayal and anger are common among people whose significant others have lied or kept secrets in order to satisfy their compulsive sexual behaviors.

HOW IS COMPULSIVE SEXUAL BEHAVIOR RELATED TO MENTAL ILLNESS?



Compulsive or hypersexual behaviors may be induced by manic episodes in people with bipolar disorder, substance abuse, medications, or tumors and injuries to the frontal lobe of the brain. Once a person receives treatment for these conditions, compulsive or hypersexual behaviors generally subside.⁹



Over 83% of people who identify as sex addicts have other addictions like alcohol or drug dependency, compulsive working behavior, or compulsive gambling.¹⁰



Thirty-eight percent of people who identify as sex addicts have some form of eating disorder.¹¹



One study found that 58% of people who struggled with compulsive sexual behaviors also had major depression at some point in their lives.¹²



People with compulsive sexual behaviors are at higher risk for attempting suicide.¹³

HOW IS COMPULSIVE SEXUAL BEHAVIOR TREATED?



Some professionals classify compulsive sexual behaviors as an obsessive-compulsive disorder, while others classify it as an impulse control disorder or addiction. Because compulsive sexual behaviors have different patterns and features from person to person, there is no one specific treatment for compulsive sexual behavior.¹⁵



Support groups modeled after 12-step programs are helpful in dealing with compulsive sexual behaviors. Sex Addicts Anonymous (saa-recovery.org), and Sexaholics Anonymous (sa.org) are some support groups that offer meetings across the United States.



Cognitive behavior therapy (CBT) and psychodynamic psychotherapy are the two most common forms of therapy used to treat compulsive sexual behaviors. Therapy may be provided one-on-one, in a group, or with a person's significant other.



Medications such as antidepressants, mood stabilizers, and treatments that target hormones may be used in addition to therapy to manage unwanted or intrusive sexual thoughts or urges.

CHECK YOURSELF

In the past 6 months, have you:

- Felt like your sexual fantasies, urges, and/or behaviors have caused you distress and impacted your ability to function?
- Wanted to stop or reduce your sexual fantasies, urges, and/or behaviors, but were unsuccessful in your attempts?
- Spent a great deal of time pursuing or engaging in sexual fantasies, urges, and/or behaviors?
- Turned to sexual fantasies, urges, and/or behaviors to deal with stress, or other feelings like depression, anxiety, or boredom?
- Continued to engage in sexual behavior despite the physical or emotional harm it has caused either you or those you care about?

If you checked most of the boxes above, you may be dealing with a sexual disorder and should seek professional help.¹⁴

IF YOU NEED HELP



Take a screen at mhascreening.org to determine if you are experiencing signs of an underlying mental illness. Use the results to start a conversation with your health care provider.



Seek specialized treatment. You can find treatment providers using the online SAMHSA Treatment Locator at findtreatment.samhsa.gov or by calling the SAMHSA 24/7 Treatment Referral Line 1-800-662-HELP (4357).

TELL US WHAT YOU THINK ABOUT SEXUAL BEHAVIOR.

TAKE THE "WHAT'S TOO FAR?" QUIZ

mentalhealthamerica.net/whatstoofar

SOURCES

¹ <https://www.bisworld.com/industry/strip-clubs.html>
² <https://www.extremetech.com/computing/123929-just-how-big-are-porn-sites/2>
³ <https://www.statista.com/statistics/626844/leading-drugs-going-generic-revenue>
⁴ Lewis, M., Grant, G., Blayney, J. A., Leshner, T. W., & Kline, J. R. (2011). Predictors of hooking up sexual behavior and emotional reactions among U.S. college students. Archives of Sexual Behavior, *https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3397976/*
⁵ Coleman, E., Raymond, N., McLean, A. (2003). Assessment and treatment of compulsive sexual behavior. *Min Med*, 86:42-7 AND Characteristics of 36 Subjects Reporting Compulsive Sexual Behavior Donald N. Black, M.D., Laura L.B. Karberg, M.D., Denise J. Flumerfelt, M.D., and Steven S. Schlosser, M.A.T. <http://66.199.228.237/boundary/34/characteristics.pdf>
⁶ Fong, T. (2006). Understanding and Managing Compulsive Sexual Behaviors. *Psychiatry (Edmont)*, Nov; 3(1): 51-58. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC294584/>
⁷ Weintraub, D., Potenza, M.N. Impulse control disorders in Parkinson's disease. *Curr Neurol Neurosci Rep*, 2005;6:302-6.
⁸ Carnes, P. (1999). The obsessive shadow: Profiles in sexual addiction. *Professional Counselor*, 13(1), 15-17, 49-41.
⁹ Raymond, N. C., Coleman, E. & Miner, M. H. (2003). Psychiatric comorbidity and compulsive/impulsive traits in compulsive sexual behavior. *Comprehensive Psychiatry*, 44(5), 370-380.
¹⁰ Kessler, R. C., Borges, G. & Walters, E. E. (1989). Prevalence of and risk factors for lifetime suicide attempts in the National Comorbidity Survey. *JAMA Psychiatry*, 46(7), 617-626.
¹¹ Kafka, H. P. (2010). Hypersexual disorder: A proposed diagnosis for DSM-V. *Archives of Sexual Behavior*, 39(2), 37-46.

RISKY BUSINESS

COMPULSIVE BUYING

Everybody shops. It's how we get necessities like food and clothing, and luxury items like cell phones and home decor. Now more than ever, it's easier to buy things with 24-hour online shopping, but when does shopping become compulsive buying?

AMERICANS SPEND A LOT OF MONEY SHOPPING

In 2016, Americans spent over

\$4.8 TRILLION

on retail purchases.¹



That's enough to cover the entire surface of the Earth in \$100 bills.

DO YOU HAVE A COMPULSIVE BUYING PROBLEM?

If you agree with most of the statements below, it may be time to seek help:⁵

- If I have money left in my paycheck, I have to spend it.
- Other people would judge me if they knew how much I spend.
- I buy things that I can't afford.
- I've overdrawn my bank account buying things that I didn't need.
- Buying things makes me feel better.
- I'm anxious on days that I don't go shopping.
- I pay the bare minimum on my credit card(s), but keep charging items.

FOR SOME PEOPLE, SHOPPING TURNS INTO COMPULSIVE BUYING

Compulsive buying is an uncontrollable desire to shop which results in spending large amounts of time and money on the activity. Generally a person who buys compulsively gets the urge to shop in response to negative emotions (not to be confused with occasional "retail therapy") and often has problems with relationships and finances as a result of their shopping behavior.²

5.8%

of Americans are affected by Compulsive Buying Disorder in their lifetime.³

HOW IS COMPULSIVE BUYING RELATED TO HOARDING?

People who compulsively buy may purchase so many items that it leads to hoarding. Sixty-one percent of people with hoarding problems meet the criteria for compulsive buying⁶; however, there are also key differences between compulsive buying and hoarding⁷.

COMPULSIVE BUYING

HOARDING

Process of shopping

FOCUS



The item being acquired

To elevate social status or relieve negative emotions

MOTIVATION



To collect items that have sentimental value or perceived usefulness

Little to none

ATTACHMENT



Strong emotional connection to items

Purchased items are either flaunted or hidden

VISIBILITY



Items are accumulated to the point where the functionality of a person's home is compromised

More common among women

GENDER



More common among men

4 STAGES OF COMPULSIVE BUYING⁴

1. ANTICIPATION

Thoughts and urges start. They may focus on an item or the act of shopping.

2. PREPARATION

Research and decision making take place. A person may look into sales or debate about where to go shopping.

3. SHOPPING

Shopping happens. The person gets a "high" while doing it.

4. SPENDING

Something, or many things, are purchased. The person is sad that the shopping experience is over and may be disappointed about how much they've spent afterwards.

HOW IS COMPULSIVE BUYING RELATED TO MENTAL ILLNESS?



People who have Compulsive Buying Disorder often meet the criteria for other mental illnesses as well, such as mood disorders, anxiety disorders, substance use disorders, eating disorders, ADHD, and a variety of impulse control disorders.⁹



Excessive spending can be a symptom of Borderline Personality Disorder.⁹



Spending sprees may occur during manic episodes of Bipolar Disorder; however, this is different from Compulsive Buying Disorder and spending sprees generally stop once a manic episode has ended.¹⁰



Compulsive buying is often driven by feelings of anxiety, depression or low self-esteem.¹¹

HOW IS COMPULSIVE BUYING TREATED?



Some professionals classify compulsive buying as an obsessive compulsive disorder, while others liken it to an impulse control disorder.¹² Therefore, there is no one specific treatment for compulsive buying.



Treatment for compulsive buying is determined by a provider after consulting with an individual.



Medication may be used to manage symptoms of underlying mental illnesses and control unwanted or intrusive thoughts around shopping.



Cognitive-behavioral therapy (CBT) is almost always incorporated into treatment for compulsive buying.



Support groups modeled after 12-step programs have been helpful in dealing with compulsive buying behaviors. Debtors Anonymous (debtorsanonymous.org) is one such support group and has meetings at locations across the country.



Other ways of addressing compulsive buying include self-help books and simplicity circles.¹³

TAKE CONTROL OF SPENDING

- ▶ Keep track of your spending to see if you notice patterns.
- ▶ Set a budget for how much you can spend on shopping. You may want to set weekly limits. Use cash for shopping purposes and keep your credit and debit cards at home when you go out.
- ▶ Identify what triggers the urge to shop or spend, and think about what you can do to manage those triggers.
- ▶ Do your best to avoid the urge to shop for unnecessary items before bills are due or immediately after getting paid.
- ▶ When you have money that is "burning a hole in your wallet," transfer it to a savings account or use it to pay off credit card balances.
- ▶ If you can't fight the urge to shop completely, channel it productively. Buy necessities like cleaning supplies or toiletries instead of clothing, electronics or other luxury items.

SOURCES

¹ https://www.census.gov/retail/mrts/www/data/pdf/ec_current.pdf
² Kallies S, Baltho J.V. (2008). Compulsive buying: A cognitive-behavioral model. *Clinical Psychology and Psychotherapy*, 16: 83-99.
³ Koran L.M., Faber R.J., Aboujaoude E., et al. (2006). "Estimated prevalence of compulsive buying in the United States". *Am J Psychiatry*, 163: 1806-1812.
⁴ Black D.W. (2007). "A review of compulsive buying disorder". *World Psychiatry*, 6(1): 14-16.
⁵ Adapted from: Faber R., O'Guinn T. (1992). "A Clinical Screener for Compulsive Buying". *Journal of Consumer Research*, 19: 459.
⁶ Frost R.D., Tolin D.F., Steketee, G. et al. (2009). "Excessive acquisition in hoarding". *Journal of Anxiety Disorders*, 23(5): 632-639.
⁷ Townsend BB, Silver NC (2015). "Compulsive Hoarding as a Function of Money Attitudes". *Journal of Psychology & Clinical Psychiatry* 4(4): 00228.
⁸ <http://store.samhsa.gov/shim/content/SMA14-4875/SMA14-4875.pdf>
⁹ <https://psychcentral.com/lib/spending-sprees-in-bipolar-disorder>
¹⁰ Khantzian EI (1997) The self-medication hypothesis of substance use disorders: A reconsideration and recent applications. *Harvard Review of Psychiatry*, 4: 231-244.
¹¹ Andrews C. Simplicity circles and the compulsive shopper. In: Benson A, editor. *I shop, therefore I am - compulsive buying and the search for self*. New York: Amason; 2000. pp. 484-494.

IF YOU NEED HELP



Take a screen at mhascreening.org to determine if you are experiencing signs of an underlying mental illness. Use the results to start a conversation with your health care provider.



Seek specialized treatment. You can find treatment providers using the online SAMHSA Treatment Locator at findtreatment.samhsa.gov or by calling the SAMHSA 24/7 Treatment Referral Line 1-800-662-HELP (4357).

TELL US WHAT YOU THINK ABOUT SPENDING HABITS.
 TAKE THE "WHAT'S TOO FAR?" QUIZ
mentalhealthamerica.net/whatstoofar

f /mentalhealthamerica
 @mentalhealtham
 @mentalhealthamerica
 /mentalhealtham
 /mentalhealthamerica
www.mentalhealthamerica.net

MHA
 Mental Health America
B4Stage4

RISKY BUSINESS

INTERNET ADDICTION

The Internet is a wild and wonderful place which has forever changed the way we live, learn, and work - but when a person can't find a balance between their time online and their time offline, it can mean problems for their mental health.

AMERICA IS ONLINE



88.5% of Americans are Internet users.¹



Yet less than 40% of the world has Internet access.²



40% of young adults (ages 18-24) use social media in the bathroom.³



An estimated 75% of Americans use a smart phone, tablet or mobile device to get online.⁴

FOR SOME PEOPLE, GOING ONLINE BECOMES AN ADDICTION

There is no one definition for internet addiction; however, it is generally agreed upon that people who are addicted to the Internet have trouble fulfilling personal and professional obligations because of their online activities, and their use of the Internet causes strain on relationships with family and friends. People who are addicted to the Internet often experience negative emotions or withdrawal symptoms when their Internet access is restricted.

Internet Addiction may also be called computer addiction, compulsive Internet use, Problematic Internet Use (PIU), Internet dependence, or pathological Internet use.⁵

Researchers estimate **6%** of people are addicted to the Internet.⁶

THERE ARE 5 TYPES OF INTERNET ADDICTION⁷

Cybersexual:
Cybersex and Internet porn



Net compulsions:
Online gambling, shopping, or stock trading.



Cyber-relationships:
Social media, online dating, and other virtual communication



Gaming:
Online game playing



Information:
Web surfing or database searches



WHY DO PEOPLE BECOME ADDICTED TO THE INTERNET?⁸

ACCESSIBILITY

Most Americans can get online easily and almost immediately, at any time of day or night.

CONTROL

People can go online when they want and without other people knowing, causing them to feel in control.

EXCITEMENT

Going online gives people a sort of "high." The suspense of bidding in online auctions, gambling, or playing games can be especially thrilling.

The combination of accessibility, control, and excitement make the addicted person want to continue going online.

HOW IS INTERNET ADDICTION RELATED TO MENTAL ILLNESS?⁹



Adolescents who struggle with Internet addiction often have other mental health problems like alcohol and substance use, depression, suicidal ideation, ADHD, phobias, schizophrenia, obsessive-compulsive disorder, and/or aggression.⁹

Adults who are addicted to the Internet are also likely to have depression, anxiety, alcohol problems, compulsive behaviors, sleep disorders, ADHD, anger issues, and/or dissociative experiences.¹⁰



There is debate about which comes first for people, Internet addiction or the co-occurring mental health problem.¹¹

HOW IS INTERNET ADDICTION TREATED?



Some professionals classify Internet addiction as an obsessive compulsive disorder, while others liken it to an impuls control disorder. Therefore, there is no one specific treatment for Internet addiction.¹²



Internet addiction treatment aims to create boundaries and balance around Internet use rather than eliminating it entirely. However, if there is a certain app, game, or site that seems to be the focus of the addiction, stopping its use may be part of treatment.¹³



Therapy is almost always incorporated into the treatment of Internet addiction. Cognitive-behavioral therapy (CBT) and group therapy are common.



Medication may be used to manage symptoms of underlying mental illness and control intrusive thoughts about going online.



Exercise may be incorporated into Internet addiction treatment to ease the effects of reduced dopamine in the brain resulting from restricted Internet use.¹⁴

CHECK YOURSELF

If you agree with most of the statements below, it may be time to seek help:¹⁵

- I think about being online almost constantly. If I'm not online, I'm thinking about the next time I can be or the last time that I was.
- I need to be online longer and longer each time before I feel satisfied.
- I have tried to control, reduce, or stop my Internet use, but haven't been able to do so successfully.
- I feel irritable or depressed when I try to reduce the amount of time I'm on the Internet or when I can't get online.
- The way I use the Internet has threatened a relationship with someone I care about, my job, or my school work.
- I lose track of time when I'm online.
- I sometimes lie to important people in my life about the amount of time I spend, or the types of activities I participate in on the Internet.
- Being online helps me to forget about my problems or improve my mood when I'm feeling sad, anxious, or lonely.

TAKE CONTROL OF INTERNET USE

- ▶ Take breaks. For example, try to take a 15 minute break for every 45 minutes of Internet use.
- ▶ Fill your free time activities that are physically intense or require a lot of concentration to distract you from thinking about going online.
- ▶ Don't bring your smart phone or tablet with you when you leave the house.
- ▶ Keep track of non-essential Internet use (use that isn't related to school or work) to see if you notice patterns. Do you go online when you are bored? Are you going online to relieve feelings of loneliness or depression?
- ▶ Make a list of things of things that you enjoy doing or need to get done that don't include the Internet. If you feel tempted to go online, choose an activity from your list instead.

IF YOU NEED HELP



Take a screen at mhascreening.org to determine if you are experiencing signs of an underlying mental illness. Use the results to start a conversation with your health care provider.



Seek specialized treatment. You can find treatment providers using the online SAMHSA Treatment Locator at findtreatment.samhsa.gov or by calling the SAMHSA 24/7 Treatment Referral Line 1-800-662-HELP (4357).

TELL US WHAT YOU THINK ABOUT SPENDING TIME ONLINE. TAKE THE "WHAT'S TOO FAR?" QUIZ mentalhealthamerica.net/whatstoofar

SOURCES

- ¹²<http://www.internetivestats.com/internet-users/us>
¹³Cheng C, Yee-Jam, LA. (2014). Internet Addiction Prevalence and Quality of (Real) Life: A Meta-Analysis of 31 Nations Across Seven World Regions. *Cyberpsychology, Behavior, and Social Networking*, 17(12), 752-760.
¹⁴<http://www.nielson.com/content/corporate/us/en/reports/2014/the-us-digital-consumer-report.html>
¹⁵<http://www.pewresearch.org/fact-tank/2015/12/08/one-third-of-americans-report-going-online-almost-constantly/>
¹⁶Cash H, Bae JI, Steel AH, and Winkler A. (2012). Internet Addiction: A Brief Summary of Research. *Current Psychiatry Reviews*, 8(8) 292-298. Accessed from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3480687/pdf/CPSR-8-292.pdf>
¹⁷Toung, K. (1999). "The research and controversy surrounding internet addiction". *Cyber Psychology and Behavior*, 2 (5): 381-383. <http://medindia.com/net-compulsion/>
¹⁸Kuss DJ, Griffiths MD, Karila L and Billieux J. (2014). Internet Addiction: A Systematic Review of Epidemiological Research for the Last Decade. *Current Pharmaceutical Design*, 20.
¹⁹Winkler A, et. al. (2012) Treatment of internet addiction: a meta-analysis. *Clinical Psychology Review*, 33(2): 317-329.
²⁰Wiersma RJ, Weymann M, Schaub T, Thiels R, Thomasse R. (2009). Pathological Internet use - epidemiology, diagnostics, co-occurring disorders and treatment. *Fortschritte Der Neurologie Psychiatrie (Review)*, 77(5): 263-71.
²¹Larjun Z. (2009) The applications of group mental therapy and sports exercise prescriptions in the intervention of internet addiction disorder. *Psychological Science (China)*, 32(3): 738-741.
²²Reard KW. (2005). Internet addiction: a review of current assessment techniques and potential assessment questions. *CyberPsychology & Behavior*, 8(1): 714.

- /mentalhealthamerica
 - @mentalhealtham
 - @mentalhealthamerica
 - /mentalhealtham
 - /mentalhealthamerica
- www.mentalhealthamerica.net



31 WAYS TO WORK ON YOUR WELLNESS

MAY IS
MENTAL
HEALTH
MONTH 2017

- 1 Track gratitude and achievement with a journal - include 3 things you were grateful for and 3 things you were able to accomplish each day.
- 2 Check up on your mental health. Take a screen at www.mhascreening.org. It's free, anonymous, and confidential.
- 3 Set up a summer get away. It could be camping with friends or a trip to the tropics. The act of planning a vacation and having something to look forward to can boost your overall happiness for up to 8 weeks!
- 4 Work your strengths. Do something you're good at to build self-confidence, then tackle a tougher task. You've got this!
- 5 Keep it cool for a good night's sleep. The optimal temperature for sleep is between 60° and 67°F.
- 6 "You don't have to see the whole staircase, just take the first step." -Martin Luther King Jr.
Think of something in your life you want to improve, and figure out what you can do to take a step in the right direction.
- 7 Experiment with a new recipe, write a poem, paint or try a Pinterest project. Creative expression and overall well-being are linked.
- 8 Show some love to someone in your life who you hold dear. Close, quality relationships are key for a happy, healthy life.
- 9 Boost brainpower by treating yourself to a couple pieces of dark chocolate every few days. The flavanoids, caffeine, and theobromine in chocolate are thought to work together to improve alertness and mental skills.
- 10 If you are living with a mental illness or in the recovery process, visit www.mentalhealthamerica.net/feelslike. Remember - you're not alone!
- 11 Sometimes, we don't need to add new activities to get more pleasure. We just need to soak up the joy in the ones we've already got. Trying to be optimistic doesn't mean ignoring the uglier sides of life. It just means focusing on the positive as much as possible.
- 12 Feeling anxious? Channel your inner child and do some coloring for about 20 minutes to help you clear your mind. Pick a design that's geometric and a little complicated for the best effect.
- 13 Take time to laugh. Hang out with a funny friend, watch a comedy or check out goofy videos online. Laughter helps reduce anxiety.
- 14 Go off the grid. Leave your smart phone at home for a day and disconnect from constant emails, alerts, and other interruptions. Spend time doing something fun with someone face-to-face.
- 15 Dance around while you do your housework. Not only will you get chores done, but dancing reduces levels of cortisol (the stress hormone), and increases endorphins (the body's "feel-good" chemicals).
- 16 Feeling tired? Go ahead and yawn. Studies suggest that yawning helps cool the brain and improves alertness and mental efficiency.
- 17 Relax in a warm bath once a week. Try adding Epsom salts to soothe aches and pains and help boost magnesium levels, which can be depleted by stress.
- 18 Has something been bothering you? Let it all out...on paper. Writing about upsetting experiences can reduce symptoms of depression.
- 19 Spend some time with a furry friend. Time with animals lowers the stress hormone - cortisol, and boosts oxytocin - which stimulates feelings of happiness. If you don't have a pet, hang out with a friend who does or volunteer at a shelter.
- 20 "What lies before us and what lies behind us are small matters compared to what lies within us. And when you bring what is within out into the world, miracles happen." - Henry David Thoreau
- 21 Be a tourist in your own town. Often times people only explore attractions on trips, but you may be surprised what cool things are in your own backyard.
- 22 Try prepping your meals or picking out your clothes for the work week. You'll save some time in the mornings and have a sense of control about the week ahead.
- 23 Work some omega-3 fatty acids into your diet—they are linked to decreased rates of depression and schizophrenia among their many benefits. Fish oil supplements work, but eating your omega-3s in foods like wild salmon, flaxseeds or walnuts also helps build healthy gut bacteria.
- 24 Practice forgiveness - even if it's just forgiving that person who cut you off during your commute. People who forgive have better mental health and report being more satisfied with their lives.
- 25 "What appear to be calamities are often the sources of fortune." - Disraeli
Try to find the silver lining in something kind of cruddy that happened recently.
- 26 Feeling stressed? Smile. It may not be the easiest thing to do, but smiling can help to lower your heart rate and calm you down.
- 27 Send a thank you note - not for a material item, but to let someone know why you appreciate them. Written expressions of gratitude are linked to increased happiness.
- 28 Do something with friends and family - have a cookout, go to a park, or play a game. People are 12 times more likely to feel happy on days that they spend 6-7 hours with friends or family.
- 29 Take 30 minutes to go for a walk in nature - it could be a stroll through a park, or a hike in the woods. Research shows that being in nature can increase energy levels, reduce depression and boost well-being.
- 30 Make sure to enjoy 15 minutes of sunshine, and apply sunscreen. Sunlight synthesizes Vitamin D, which experts believe is a mood elevator.
- 31 "Anyone who has never made a mistake has never tried anything new." -Albert Einstein
Try something outside of your comfort zone to make room for adventure and excitement in your life.

FILLING THE VOID

People use drugs or engage in risky behaviors because it helps them fill a void or meet a need that they're not getting somewhere else. The void often leaves people feeling very empty—and feeling empty is hard to cope with. Do you feel empty in a way that makes you want to turn to drugs or risky behaviors? Where does it come from—maybe an experience or physical health condition?

FEELINGS + EXPERIENCES

Fill this box with the feelings (emotional and physical) or experiences you have that make you want to turn to drugs or other risky behaviors. Make notes about where you think these feelings are coming from.



What is the relationship between the feelings and experiences above and the risky business below?

RISKY BUSINESS

Fill this box with the drugs or risky behaviors you engage in to deal with your feelings.

NEW LIFE...NEW BOX

How has using the drug or engaging in the risky behavior caused problems in your life?

Is that something you want to change? Write in "Yes" or "No" and explain why.

Fill this box with the things you want your new life to be filled with. These could be new relationships, new experiences or new skills. Ultimately, you will want to do things that REPLACE the risky behaviors you used to rely on. The best changes are healthy, but give you the same feelings that risky behaviors give you.

