

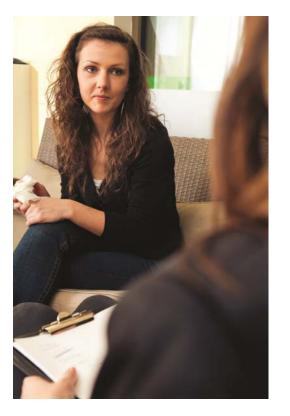
Mental Health Screening with Chemically Dependent and Brain Injured Clients

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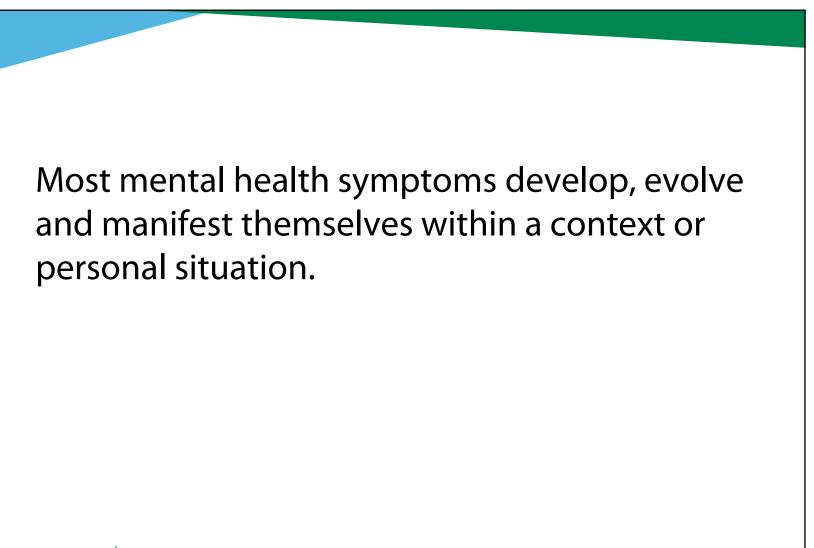


Mental Health Screening as a Process

- A way to conceptualize a client and their situation. A "snap shot."
- Goal: Achieve an "understanding" of the person and their behavior.









Pyschosocial History



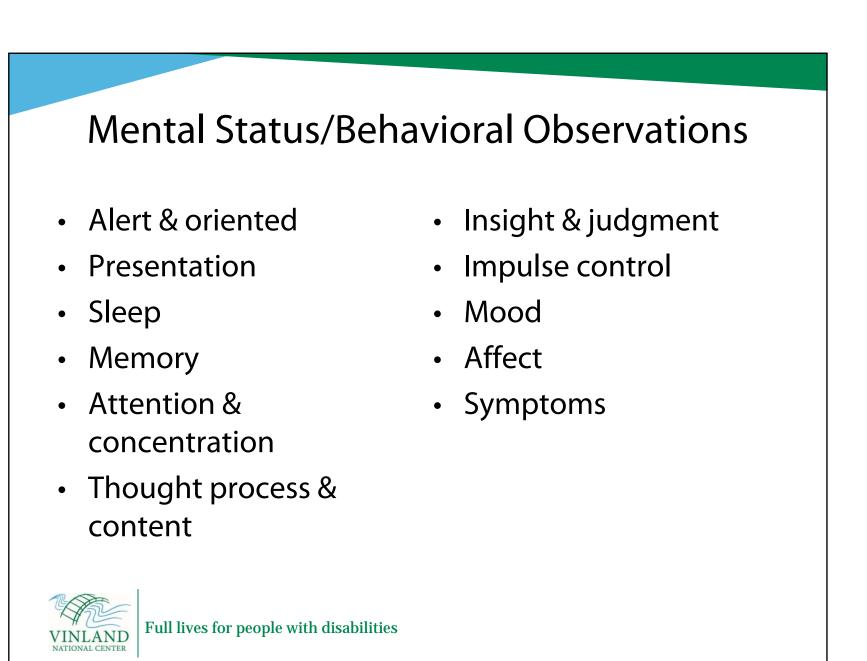
- Employment
- Education
- Military
- Family
- Current primary



Full lives for people with disabilities

relationship

- Legal
- Medical
- Substance use/ abuse/treatment history
- Mental health





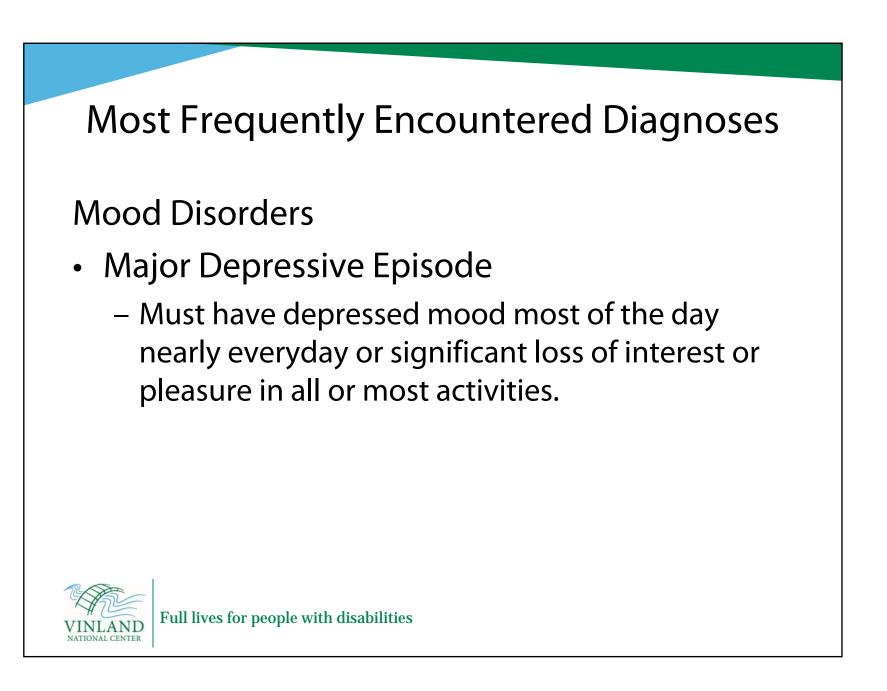
- We all have them.
 - Self-defeating beliefs and behaviors
- Coping strategies
- The diagnosis as a symptom cluster
- What we see are often psychological "states," not full disorders.

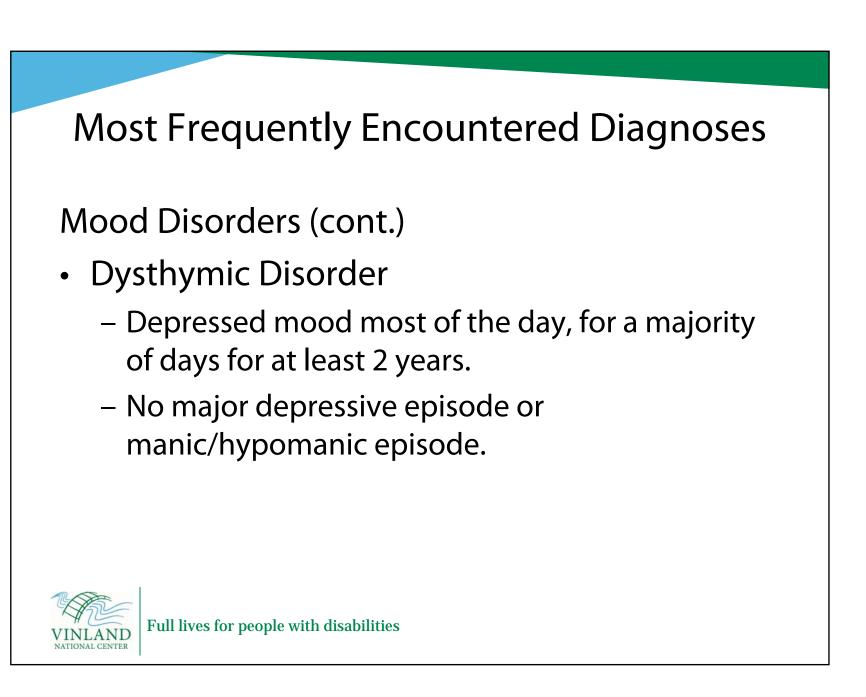


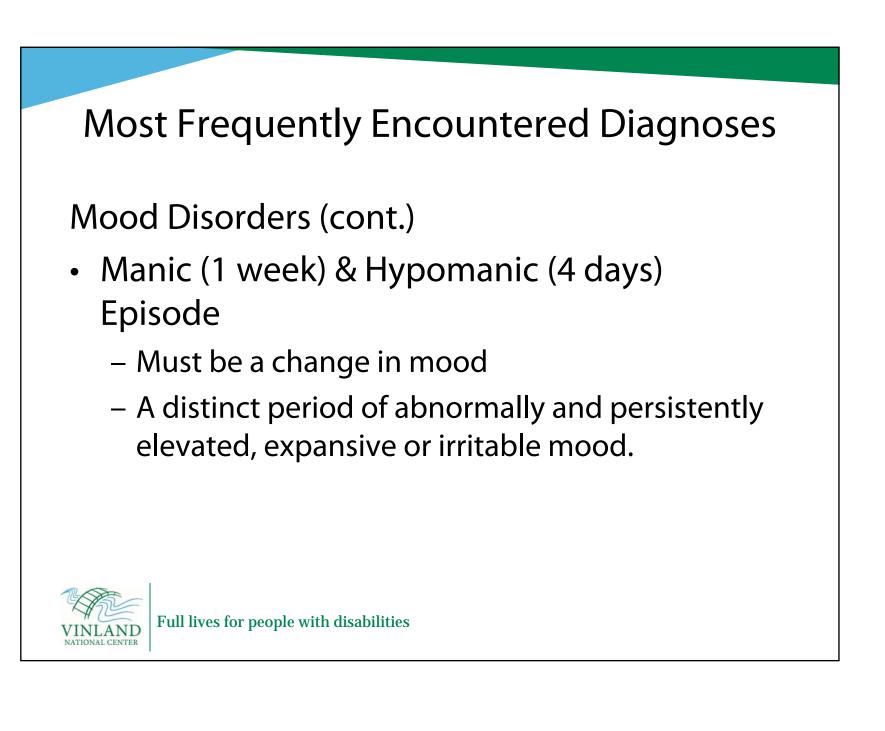
Psychological Symptoms (cont.)

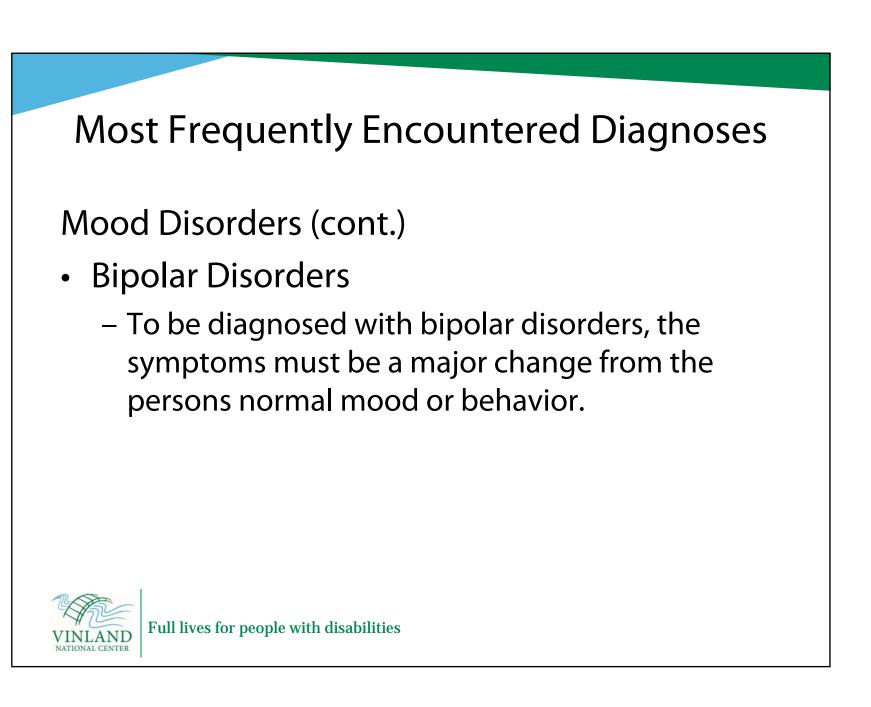
- DSM
 - The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
 - Symptoms not due to the direct psychological effects of a substance (drug abuse or medication) or a general medical condition (brain injury/concussion).

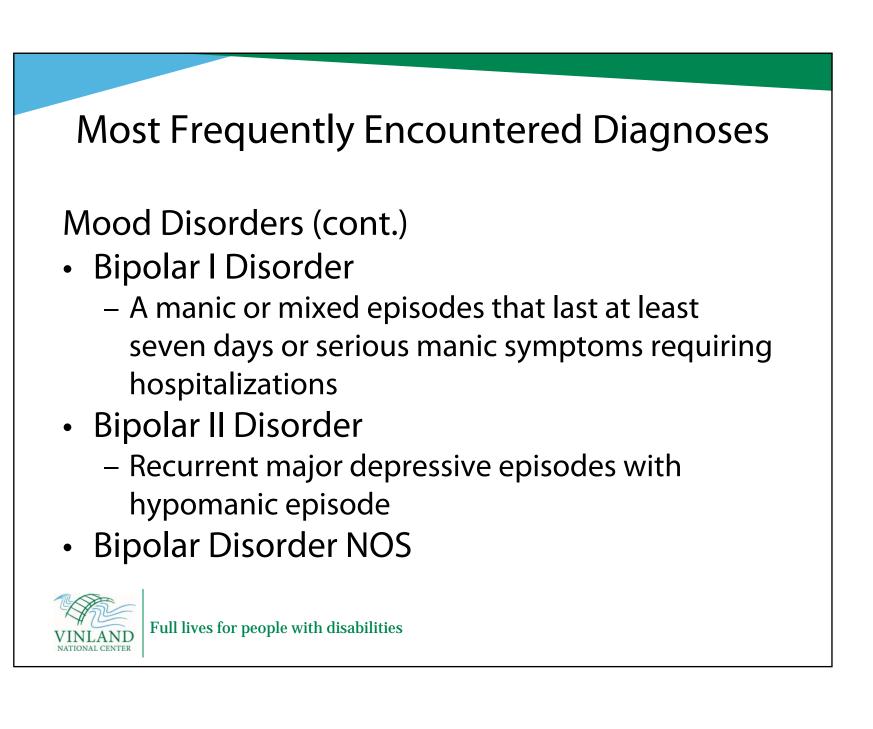












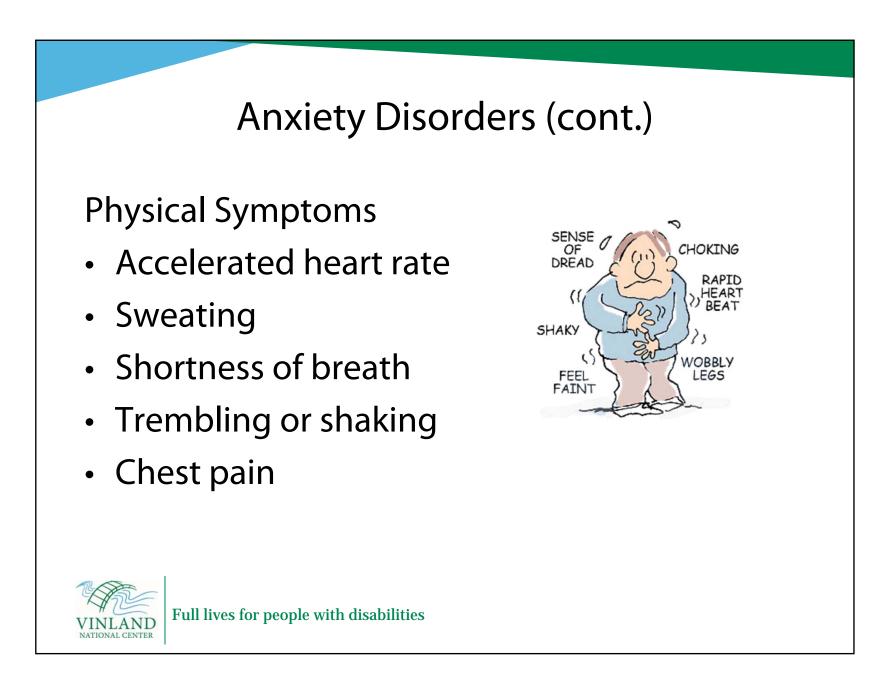
Anxiety Disorders

Psychological Symptoms

- Feelings of fear, panic, apprehension
- Restlessness
- Difficulties concentrating
- Feeling tense
- Excessive worry
- Irritability









6/26/2014



- Panic Disorder
 - Fear another panic attack and loss of control
- Social Phobia/Social Anxiety
 - Evaluation by others and possible embarassment
- Obsessive-Compulsive Disorder
 - Obsessive thoughts
 - Compulsive Behaviors



Anxiety Disorders (cont.)

- Post-traumatic Stress Disorder (PTSD)
 - Exposure to a traumatic event in which (both)
 - The event involved actual or threatened death, serious injury or threat to the physical integrity of self or others.
 - Persons response involved intense fear, helplessness or horror.
 - Persistent re-experiencing
 - Persistent avoidance
 - Persistent increased arousal





- Generalized Anxiety Disorder
 - Excessive worry and inability to control the worry
- Substance Induced Anxiety Disorder



Personality Disorder

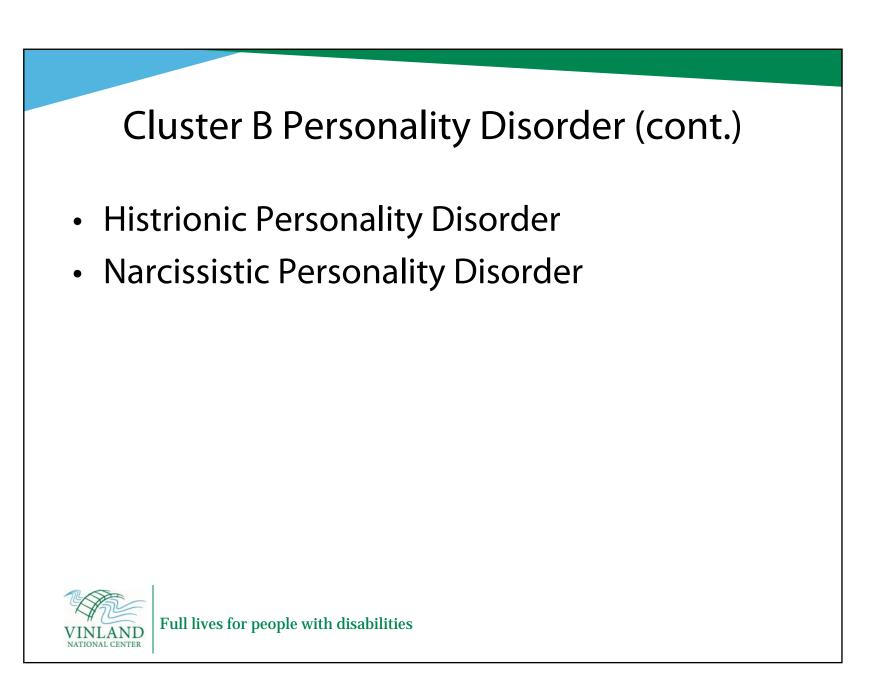
- An enduring pattern of inner experience and behavior that deviates markedly from the person's culture.
- Pattern is inflexible and pervasive across a broad range of situations.





- Antisocial Personality
 - Pervasive pattern of disregard for and violation of the rights of others since age 15.
- Borderline Personality
 - Pervasive pattern of instability of interpersonal relationships, identity, affects and marked impulsivity beginning in early adulthood.





Thought Disorders

- Schizophrenic
 - Delusions
 - Hallucinations
- Schizoaffective Disorder



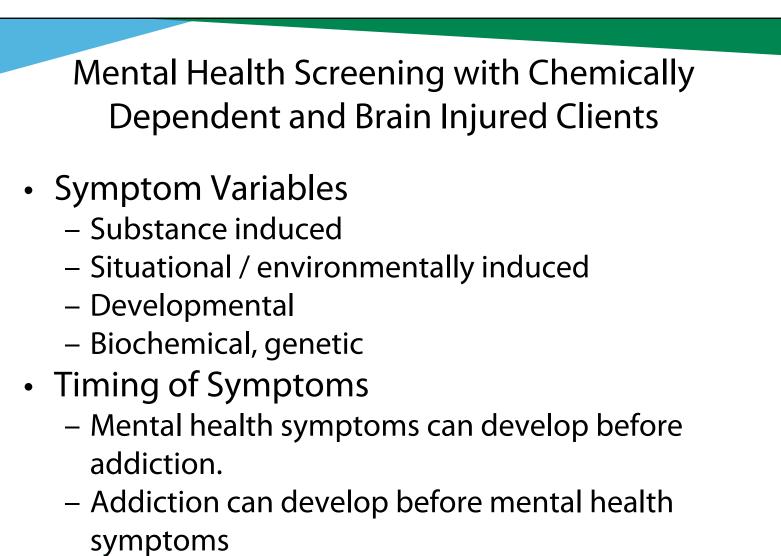


Neurocognitive Disorders

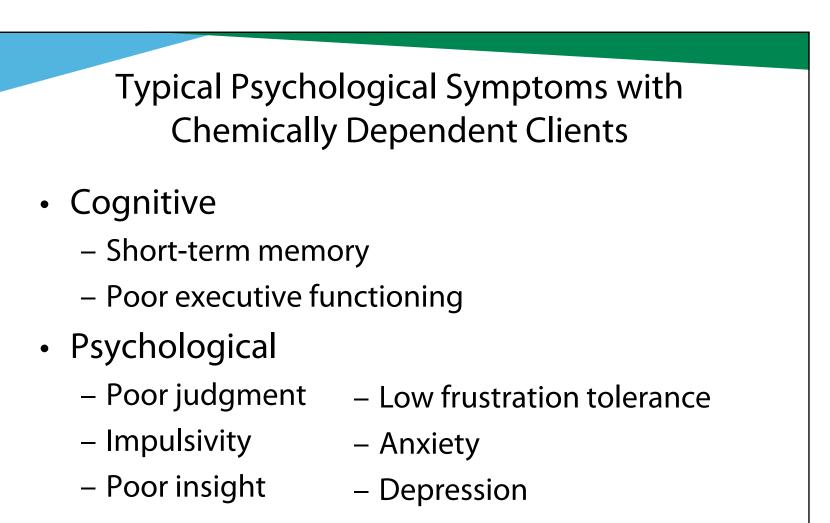
- Decline in cognitive functioning
- Major or minor
- Due to:
 - Substance abuse
 - Traumatic brain injury



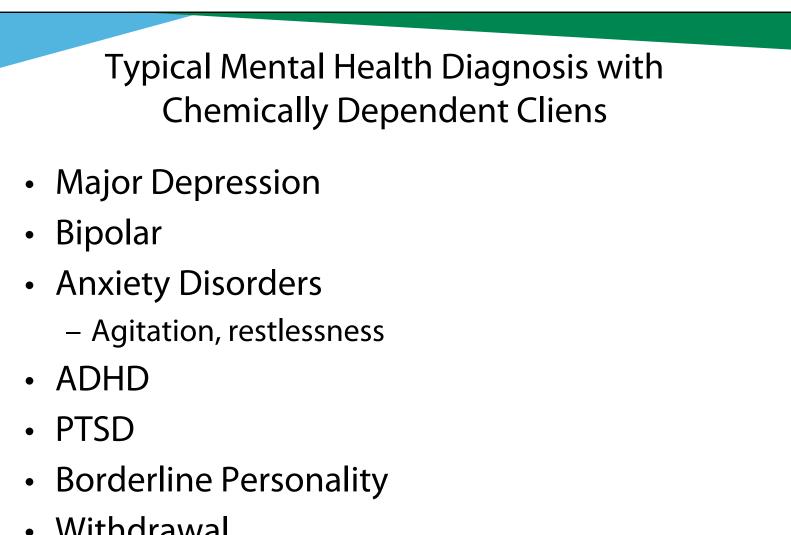












Withdrawal



Typical Psychological Symptoms in Clients with Head Injuries/TBI

- Cognitive
 - Memory
 - Executive functioning
 - Confusion
 - Abstract thinking
 - Loss cause & effect



Typical Psychological Symptoms in Clients with Head Injuries/TBI (cont.)

- Psychological
 - Depression and emotional swings
 - Anxiety irritability
 - Aggression
 - Immature behavior
 - Self-absorbed, limited empathy
 - Highly suspicious or guarded



Typical Mental Health Diagnosis with Brain Injured Clients

- Depression
- Bipolar
- Anxiety
- ADHD
- PTSD
- Antisocial (male) Borderline (female)
- Neurocognitive Disorder



Mania, ADHD, FAS Similarities & Differences

- Manic Symptoms
 - Expansive, elevated, or irritable mood
 - Grandiosity
 - Days without sleep
 - Flight of ideas, racing thoughts
 - Increased goal directed activity
 - Excessive involvement in pleasurable activity





Mania, ADHD, FAS Similarities & Differences (cont.)

- ADHD Symptoms
 - Inattentive
 - Hyperactive
 - Impulsivity
- ADHD typically lacks
 - Grandiosity
 - Flight of ideas
 - Days without sleep





Mania, ADHD, FAS Similarities & Differences (cont.)

- ADHD are distracted and lack follow through, but not expansive or obsessed with achievement or pleasure.
 - Risk takers/pleasure seekers.



Mania, ADHD, FAS Similarities & Differences (cont.)

- Manic typically lacks
 - Persistent symptoms of hyperactivity, restlessness, distractibility
- Fetal Alcohol Spectrum Disorder(FASD)
 - ADHD symptoms
 - No grandiosity, racing thoughts or days without sleep
 - Learning problems



