adolescence is an exciting time of life. There is so much to do, so much to explore, so much to learn. All of this can be at times exhilarating, challenging, scary, painful or whatever. There will be successes and there will be failures. There will be times that we look back on and say “I wish I had not done or said that” and there will be times that we look back on and say “I see that doing or saying that was the right thing to do”.

We can look at this time of life as an opportunity for emotional, social and thinking growth and see many positives. Unfortunately, in my opinion, there is a social tendency to think about the adolescent years in negative terms. And, I for one am getting a little bit tired of hearing these kinds of negative stories. Where are the positive stories?

This does not mean teens don’t have their struggles. Nor does it mean that the social, personal, educational challenges faced by teens aren’t also faced by adults! Everyone has their challenges. Part of growing through the teen years is learning how to successfully overcome life’s challenges.

Woven into these joys and sorrows of adolescence is the reality that some of the most concerning illnesses arise during that time. They include such things as: Depression; Panic Disorder; Schizophrenia; etc. Drug misuse and even drug abuse are other challenges that arise. Unrecognized and untreated they can have negative impacts during teenager-hood and for adulthood to come.

The good news is, we have lots of effective and positive ways to help teens and families who are facing the challenges of mental disorders. This does not mean that the usual ups and downs of teen life will go away.

These Magazines will help you and your families learn about some of the most common medical illnesses of adolescence – mental disorders. I hope that this will help you and your family better understand what these are, how to identify them and what you and your family can do to help.
Available on Amazon.com and the Apple iBookStore. The App is free for download at the Apple App Store & online: teenmentalhealth.org/resources/entries/transitions
A mental disorder is what happens when your brain gets used to not working the way it’s supposed to.
Mental health refers to the health of your brain. It’s what is going on inside your head. Your mental health affects every aspect of your life, including your school performance, your physical health, your feelings, your self-esteem, and your relationships with other people. Having good mental health makes it easier for you to cope with stress and live your life the way you want to live it. Looking after your mental health is really important.

Many people experience mental health problems as teenagers. Mental health problems are when your brain is having difficulty working as well as it should. Usually, this happens when you are in a difficult situation, like if your parents are going through a divorce or someone you love dies. When this happens, you may need some extra help from a trusted adult (like a family member, a teacher, or a neighbour) or a counselor. Sometimes, however, our brains can work differently than usual for no apparent reason, causing us problems. For example, they can make us feel sad all the time or feel anxious when there is no real danger. When this happens, it is considered a mental disorder.

A mental disorder is what happens when your brain gets used to not working the way it’s supposed to. We get stuck in a pattern of feeling really down, or really anxious, or really distracted. Sometimes these patterns can even change the way our brain works. Just like how mental health affects all aspects of your life, so do mental disorders. Having a mental disorder can make it harder for you to do well in school, to get along with your friends and family, and to stay physically healthy. It makes it difficult to live your life the way you would like. Some people with mental disorders may end up using drugs and alcohol to cope, and other people may hurt themselves or think suicide is the answer.

Seek help as soon as you notice a problem. There are lots of people who can help you. Early treatment of mental disorders not only helps you right away, but the help you get can last your whole life.
how the brain works

In order to understand how the brain changes when someone has a mental disorder, we need to know how it usually works. The brain has 6 different but completely linked functions:

1. **Thinking**
   Your brain is in charge of how you store and process information, whether it’s figuring out a math problem, remembering to pack your lunch, concentrating during class, or planning what you are going to do this weekend.

2. **Feeling**
   Your brain also controls how you feel at any given point in time and how you express those feelings to other people.

3. **Perceiving/Sensing**
   Your brain is responsible for paying attention to what is going on around you. It does this by interpreting information from your senses - sight, smell, sound, taste, and touch. You see with your brain, not with your eyes!

4. **Physical**
   Your brain controls how your body moves and reacts – from obvious things, like being able to move your hands, to things you don’t even think about, like breathing or digesting your food.

5. **Behaving**
   Your brain controls how you interact with the people around you and your environment. It’s your brain that tells you what to do or say in different situations.

6. **Signaling**
   Your brain also plays an important role in protecting you from danger. It keeps track of the information from your senses in order to alert you that you may be in trouble, like if you touch a hot stove and you immediately pull your hand away. Your brain is what stopped you from being badly burned!

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To learn more about the teenage brain, check out: [teenmentalhealth.org/understanding-mental-health/the-teen-brain](http://teenmentalhealth.org/understanding-mental-health/the-teen-brain) and [youtu.be/EGdlpaWi3rc](http://youtu.be/EGdlpaWi3rc)
When a person has a mental disorder, one or more of these brain functions are not working properly. And because these brain functions are all interconnected, when one function isn’t working properly, the other brain functions will also be affected. In the case of OCD, the brain’s thinking mechanisms are not working the way they should. This makes people feel like they’re in danger, even when they are perfectly safe! Obsessive-Compulsive Disorder (OCD) happens when people have intrusive thoughts that cause anxiety (obsessions) or they feel the need to do certain behaviours over and over in order to feel less anxious (compulsions). Most people have both obsessions and compulsions but some just have one or the other.
what is Obsessive-Compulsive Disorder (OCD)?
Sometimes we have thoughts that we just can’t get rid of – usually if something makes us excited or nervous, or when a song or phrase gets “stuck” in our brain. That’s totally normal. Usually these thoughts will fade away after some time or after the event that caused the emotion is over.

Obsessive-Compulsive Disorder (OCD) is more than a thought stuck in your head. OCD is a mental disorder in which people have recurring, persistent unwanted thoughts or images (i.e., obsessions) that cause them intense anxiety. They know that the obsessions do not make sense, and do not want to have them, but can’t stop them. For some people their obsessions make them think that something really bad will happen if they don’t perform certain rituals. Compulsions are ritual-like actions, repeated over and over, that the feel they have to. In other words, obsessions are like an unwanted itch that can’t be ignored, but can be accompanied by an urge to scratch. Compulsions are like scratching. And, like an itch, one scratch won’t make it go away! But because someone with OCD feels they have to do something it doesn’t mean that’s what they do. Compulsions are performed excessively and have very little to do with what they are believed to prevent. It would be like having an itch on your arm and either scratching it raw (excessive) or scratching your leg instead.
For someone with OCD, these obsessions and compulsions aren’t just a passing phase. The excessive amount of time consumed by these obsessive thoughts and compulsive actions interferes with the person’s ability to live his or her life. They might miss a lot of school or work because they’re so busy performing compulsions, like repeatedly checking to make sure they locked the front door or washing their hands every few minutes. They also feel distressed or upset by what they are experiencing. Sometimes people with OCD think they are going crazy or are ashamed of their symptoms, making them afraid to tell anyone about what they are going through. In short, OCD can end up making life not much fun!
OCD is not caused by gender or culture, is equally common in males and females and appears at similar rates in different cultures around the world. About 1 – 2 percent of Canadians will have OCD in their lifetime. For boys, OCD often starts in late childhood or early adolescence, whereas for girls, it usually starts a bit later in life. The start of OCD is often gradual and symptoms may come and go over time, often getting worse during times of stress.

The causes of OCD are complex and include genetic and environmental factors. For some people, OCD may begin after a bacterial infection.

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what exactly are obsessions & compulsions

Obsessions are unwanted ideas, thoughts, images, feelings, or impulses that keep coming into your mind in spite of what you do to keep them away. Most adults recognize these thoughts are irrational, inappropriate or just don’t make sense, but the younger you are, the harder that can be to figure out. Examples of common obsessions:

1. **Contamination**
   Obsession about being in contact with germs (e.g., by shaking hands, touching a doorknob/keyboard, etc.), leading to intense anxiety about disease/death resulting from those germs.

2. **Doubts**
   Obsession about whether or not some action was performed (e.g., door was locked, oven turned off, etc.), leading to intense anxiety about the disastrous consequences if the action wasn’t done (e.g., house burgled, house catches fire and someone will die, etc.).

3. **Order**
   Obsession about having things in a particular order, leading to intense anxiety about devastating and usually unrelated outcomes (e.g., your grandmother will die, the school will burn down, you will fail your exam, etc.) when things are moved, are not placed in a specific way, or are generally disordered.

4. **Violence**
   Obsession about impulses to commit a violent, aggressive, or horrible action (e.g., to hurt someone, to swear loudly in class, etc.), leading to intense anxiety about what would happen if this impulse can not be controlled and you were to follow through on the impulse.

Check out this video on OCD: youtu.be/ua9zr16jC1M
Compulsions are persistent, repetitive behaviours or actions that may be created to reduce anxiety or prevent some kind of imagined catastrophic outcome. They often are completely unrelated to the content of the obsession. Performing these compulsive acts can take considerable time and energy and gets in the way of the person’s ability to live a normal life. Examples of common compulsions:

1. **Washing**
   Repeatedly washing or cleaning, often of the hands. This compulsion is often related to contamination obsessions.

2. **Ordering**
   Repeatedly putting things in a particular order or requiring that things have a certain symmetry. This compulsion is often related to obsessions about order and control.

3. **Asking for reassurance**
   Repeatedly asking others for reassurance that everything is okay. This compulsion often accompanies obsessions about doubts.

4. **Repeating actions**
   Repeatedly engaging in a specific behaviour in order to counteract the obsession. For example, a person who has obsessions about doing something inappropriate in school may tap their desk repeatedly in an attempt to prevent the obsession from happening.

5. **Counting**
   Repeatedly counting things to reduce anxiety, including floor tiles, cars in the parking lot, or numbers in general. This compulsion may be related to obsessions about violence or other horrific thoughts. The individual may believe that if they count all of the items or count to a predetermined number for every thought, it will negate the chance of the obsession coming true.

6. **Checking**
   Repeatedly checking to make sure a task was performed, such as locking the door or turning off the oven. This compulsion is often related to obsessions about doubts.

This is not a complete list of obsessions and compulsions, as many others may exist and some may be unique to the person with OCD. Someone with OCD may have many different kinds of obsessions and many different types of compulsions. Sometimes the person’s obsessions and compulsions change over time.
Obsessive-Compulsive Disorder is treatable! Cognitive Behavioral Therapy (CBT) and medication used together provide the best results.

1 **Cognitive Behavior Therapy (CBT)**

CBT is a type of talking therapy that has a few different techniques that are helpful for treating OCD, including psychoeducation, cognitive restructuring, exposure, and response prevention. These work by helping your brain control your obsessive thoughts, compulsive behaviours, and anxiety.

- **Psychoeducation** involves teaching you about OCD and how it affects your life. By understanding more about the disorder, it’s easier for you to recognize when the OCD is taking over and understand how you can better manage it.

- **Cognitive Restructuring** is basically a fancy way to say “change the way you think.” If you change the way you think about the situations that cause you anxiety (i.e., your obsessions), your emotions about that situation (i.e., your anxiety) and your behaviour in the situation (i.e., your compulsions) may also change. This is something that takes practice but can really make a difference.

- **Exposure** is exactly what it sounds like: exposure to situations that cause you anxiety. This is combined with something called Response Prevention. Basically, your therapist works with you to help you face your obsessions without giving in to your compulsions. Your therapist will work with you to slowly build up your confidence and comfort level and will also help you to build tools to cope with the situations – you don’t have to do it on your own! This way, you learn new ways to fight your obsessions and compulsions in a supportive environment.

2 **Medication:**

Medication can help your brain function better. There are a number of different medications that your doctor might choose to prescribe. Medicines known as Serotonin Specific Reuptake Inhibitors (SSRIs) are the most commonly used.

3 **What else can help:**

- Having a good support network of friends and family.
- Following the Mental Wellness tips on page 18!

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To help make sure you get the best treatment for you, check out:

- [teenmentalhealth.org/resources/entries/med-ed-booklet](http://teenmentalhealth.org/resources/entries/med-ed-booklet)
For someone with Obsessive-Compulsive Disorder, having a good support system of trusted people is really important.

1. understand the challenges that having a mental disorder creates for you
2. notice when you’re not acting/feeling like yourself
3. be there for you when you need them
4. help you cope when you’re having a rough time
5. hang out with you.
6. listen to you when you need someone to talk to
7. give you honest and helpful advice when you need it
8. remind you that you’re not alone
9. encourage you to help you face your obsessions without giving in to your compulsions
tips to help increase overall mental health:

1. **Structure your day.** Give yourself something to do, even if you start small. Having some structure in your day can make a big difference in how you feel. Start with basic daily activities like showering, walking the dog, or making lunch. Keeping a daily diary or schedule can be a big help in keeping your mood stable and preventing you from feeling overwhelmed, especially if you’re a visual person. Check out [teenmentalhealth.org/resources/entries/taking-charge-of-your-health](http://teenmentalhealth.org/resources/entries/taking-charge-of-your-health), a daily dairy that can help you get started. This is available as an App on the Apple App Store as well.

2. **Build healthy relationships.** It’s important to have a good support network of people you trust.

3. **Sleep.** Getting 8-9 hours of sleep each night will help you feel better the next day.

4. **Daily relaxation time.** If you feel anxious, try a relaxation technique, like Box Breathing or Hand Relaxation (see page 19). Whenever possible, try to calm yourself down without leaving the situation. If you start thinking of leaving to calm down as an escape, it can make your anxiety worse!

5. **Eat healthy.** Eating a balanced diet gives your body the fuel it needs to help combat stress. Try not to skip meals and go easy on the junk food.

6. **Limit caffeine.** Caffeine can make your heart race, which can make you feel worse.

7. **Go outside.** Staying inside all the time can be really draining. Getting outside and enjoying the sun and fresh air can help you feel better.

8. **Stay away from alcohol and drugs.** Although you may feel better in the short-term, alcohol and drugs will not solve your problems. They’ll only give you a false sense of confidence and may make your problems worse in the long run.

9. **Exercise.** Daily physical activity improves your health and mood, and helps you get rid of stress.

10. **Talk.** Talk to the people in your support network about your feelings and concerns. Sharing your feelings with someone else can feel like a weight is lifted off your chest.

11. **Stop thinking so much.** Recognize when your obsessions kick in and try not to let yourself get caught up in the obsession-compulsion loop. This will get easier once you’ve started CBT.

12. **Be realistic.** Your OCD is going to make you think that if you don’t perform your compulsions, something terrible will happen. Remember that this is your OCD/obsessions talking and it’s very unlikely (and in some cases, not possible!) that anything really bad is going to happen as a result of your inaction (or actions).

If these tips don’t help, do NOT get discouraged. Just like learning to play the piano or driving a car, some of these skills require practice and patience. For more help, talk to your school counselor or visit your family doctor. Your family doctor will be able to help you find the treatment that works best for you and can recommend places for you to go if you need more help.
Box Breathing can help your heart rate return to normal, which helps you to relax. Here’s how you do it: If possible, sit and close your eyes. If not, just focus on your breathing.

**Step 1:** Inhale your breath (preferably through your nose) for 4 seconds.

**Step 2:** Hold your breath for 4 more seconds. You’re not trying to deprive yourself of air; you’re just giving the air a few seconds to fill your lungs.

**Step 3:** Exhale slowly through your mouth for 4 seconds.

**Step 4:** Pause for 4 seconds (without speaking) before breathing in again.

Repeat this process as many times as you can. Even 30 seconds of deep breathing will help you feel more relaxed and in control.

Hand Relaxation helps to get rid of the tense feelings in your body. Here’s how you do it: Clench the muscles in your left hand (make a fist) really tightly for 5 seconds. Then, let go gradually (for about 15 seconds), breathing slowly and concentrating on the feeling in your hand. Then, repeat using your right hand.
Thought Stopping is a technique you can use to help reduce your unwanted thoughts or obsessions. It may seem a bit silly and it takes some practice but with regular use (and help from a trained professional), it can make a big difference in how often you’re bothered by these thoughts. Here’s how you do it: Every time you start to think about your obsession – say “STOP!” and imagine a big red stop sign in your mind. Then, try to think about something else. This will take practice but you can do it! If your mind drifts back to your negative/obsessive thoughts, do it again. Once you get the hang of stopping your negative/obsessive thoughts that way, you can say “STOP” a little quieter but still imagine the stop sign. Then move on to whispering the word “STOP” and imagine the stop sign. When that is easier, think the word “STOP” and imagine the stop sign. Finally, when that becomes automatic, just picture the STOP sign. Eventually, you may be able to stop these thoughts automatically, before they spiral out of control. It’s best to work on only one thought at a time and start with a thought that doesn’t cause you as much anxiety as others do.

With practice, you can get really good at doing Box Breathing, Hand Relaxation, and Thought Stopping techniques. You can do Box Breathing, Hand Relaxation and silent Thought Stopping just about anywhere, without anyone else knowing - on the bus, in class, even when you’re hanging out with your friends.
If you have Obsessive-Compulsive Disorder, you may overhear insensitive comments about you and feel like you are being judged by other people. Remember that these people don’t understand what OCD is. Although it may be hard, try not to take their comments personally. They don’t realize that OCD is a medical condition that requires treatment, just like cancer or high blood pressure. Having OCD does not make you weak and does not make you less of a person than anyone else.

What is stigma?

Stigma is a “polite” word for discrimination. It’s a negative attitude people have about something they don’t understand that can result in physical, mental, and emotional harm. When someone has a stigmatizing attitude, it means there is something wrong with their attitude - not with you. People make hurtful and judgmental comments and assumptions about people suffering from mental illness because they don’t understand that mental disorders are just another kind of medical disorder. You wouldn’t expect someone in a wheelchair to be able to climb stairs just because someone said “snap out of it!” This is just as true for mental disorders, like OCD.

The best way to fight stigma is to help people better understand mental disorders.
helping someone coping with OCD

If someone you care about has Obsessive-Compulsive Disorder, the best and most important thing you can do is provide support without encouraging him or her to engage in compulsive behaviour. In order to support someone else, you also need to look after yourself.
For more on Obsessive-Compulsive Disorder (OCD) and other mental health problems, check out teenmentalhealth.org

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1 Educate yourself
Understanding what OCD is and how it affects the person you care about will help you to be a less frustrated and more supportive friend.

2 Listen
When you listen to and acknowledge your friend’s feelings, it sends your friend the message that you care. Knowing that you have people who care about you is an important part of recovering from a mental disorder.

3 Be patient
Sometimes it can be frustrating when your friend seems worried about things that you don’t think are a big deal or when your plans don’t work out because your friend has to do something over and over. Take a deep breath and remember that OCD is making your friend feel this way. He/she can’t just “snap out of it.” Getting impatient will only make the situation worse. Stay positive and be patient. Encourage your friend to seek help and be supportive of their struggle.

4 Don’t blame yourself
It is not your fault that your friend has OCD. Many different factors, including his/her genetic background, environment, and life experiences are involved. No one can “make” another person have OCD.

5 Be aware of suicide risk
If your friend talks about death or suicide, don’t ignore it or keep it a secret. Talk to a responsible adult whom your friend also trusts (e.g., parent, teacher, coach, counselor). Let your friend know that you care about him/her and his/her life. If your friend is talking about suicide, you must take it seriously.

6 Don’t try to change your friend
You don’t have to solve all of your friend’s problems or turn him/her into a different kind of person. Just be present and supportive.

7 Encourage your friend to seek help
Having a friend he/she can trust, like you, is so important. But someone trying to cope with a mental disorder also needs treatment. Encourage your friend to see a doctor or school counselor to get the help he/she needs. Even if the problems don’t seem that bad yet, seeking help early can prevent problems from getting worse.

8 Be positive
Positive moods can be contagious! It’s really easy for someone with a mental disorder to focus only on the negative aspects of his/her life. Sharing your positive mood may help your friend see things from a different perspective.

9 Put yourself first
On an airplane, they tell you to always put your oxygen mask on first in an emergency before you assist someone else. You’ll be no help to anyone if you’re passed out. The same goes for helping your friend. If you burn yourself out by always putting him or her first, you won’t be able to help anyone. It’s absolutely okay (and so important) to take time away to take care of yourself.

10 Have fun together
Your friend needs someone who can have fun, relax, and laugh with him/her. These are all important parts of your friend’s mental health (and yours!).
help

These are places you can find more information about Obsessive-Compulsive Disorder and get help:

A Family Doctor
Talk to your family doctor about your concerns. Your doctor can help you decide on the best treatment plan for you and refer you to a good psychologist, counselor, and/or support group.

B Health Boards
Many communities have a health board with information on different support groups and other resources. They are often located in community centres, malls, and grocery stores.

C School Counselor or Nurse
Your school counselor or nurse may have helpful resources for you, including books, pamphlets, and contacts in the community.

D Library
Check your local community or school library for books to help you understand more about OCD and how to cope.

E Internet
The Internet has loads of information about mental illness; just know that not all of it is accurate. In fact, the information on some websites is more wrong than right.

F Kids help phone
The Kids Help Phone has counselors who answer phone calls and online questions from young people 24/7. You can reach them at 1-800-668-6868 or at www.kidshelpphone.ca

G Phonebook
The yellow pages have lists of local support groups, counselors, and youth health centres, some of which may be helpful for you.

H Emergency
If you are feeling suicidal or are in crisis, go to your local hospital’s emergency room immediately.

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Teens Mental Health www.teenmentalhealth.org
Kelty Mental Health Resource Centre www.keltymentalhealth.ca
Mind Your Mind www.mindyourmind.ca
National Institute of Mental Health www.nimh.nih.gov
Canadian Mental Health Association www.cmha.ca
Centre for Addiction and Mental Health www.camh.ca
Beyond OCD www.beyondocd.org
Mental Health Foundation www.mentalhealth.org.uk
The Canadian Institute for Obsessive Compulsive Disorders www.ictoc.org
International OCD Foundation www.ocfoundation.org
imTEEN
Taking charge of your health

ASSESSMENT
CHECKLIST
CALENDAR
VISUAL REPORTS

Available on the
App Store
Support yourself and your family members in better understanding mental disorders and how to deal with them. If you have a mental disorder, are supporting a family member with one or are interested in how you can support a friend and their family, the Family Pack can help.
the full picture!