

Emmaus Programme: The Mad and the Sad

Introduction

Teaching is recognised to be a demanding and stressful profession. Those in positions of senior leadership are often under immense stress, and it is not unusual for stress to lead to distress, and to occasionally to mental health problems.

In accompanying headteachers and those in senior positions, your role is to seek the consolation and to try to help them find where God is at work in their lives. You are not there to solve their problems or to major on the difficulties, obstacles or hazards that are around. But at times there will be signs that all is not well, and you may be worried. These notes are about what the warning signs might be, and what to do.

Some Common Problems

'Stress'

Few people these days describe themselves as not being stressed! But what do we mean by stress?

Stress is the feeling of being under too much mental or emotional pressure. Pressure turns into stress when people feel unable to cope. People have different ways of reacting to stress, so a situation that feels stressful to one person may be motivating to someone else.

The key word in stress is *demand*: someone may be under pressure but can cope with the demands. When the demands seem excessive, then stress is a very negative experience and we don't feel that we are coping. This may be temporary, but if it is long term it can lead to physical and psychological problems.

Coping strategies are broadly strategies to: 1. Change the *situation* (may not be possible!); and 2. Change our *responses* to the situation (psychological, physiological, social).

Depression

The core of depression is *hopelessness*, and often involves some sort of *loss*. It is characterised by low mood, and the person invariably holds negative beliefs about themselves, others, the world and the future.

Psychological symptoms include:

- continuous low mood or sadness; feeling *hopeless* and helpless
- low self-esteem; feeling tearful, guilt-ridden, irritable and intolerant of others
- having no motivation or interest in things; not getting any enjoyment out of life
- finding it difficult to make decisions; feeling anxious or worried
- having suicidal thoughts or thoughts of self-harming

Physical symptoms include:

- Feeling slowed down; lack of energy or lack of interest in sex (loss of libido)

- change in appetite or weight (usually decreased, but sometimes increased)
- disturbed sleep (usually waking up very early in the morning)

Social symptoms include:

- not doing well at work; having difficulties in your home and family life
- taking part in fewer social activities and avoiding contact with friends
- neglecting your hobbies and interests

Note: Grief can look much like this – but is in fact a normal process!

Anxiety Disorders

The key issue in anxiety is threat. Anxious person sees the world as dangerous and themselves as not having the ability or resources to cope with this world ('I am weak'; 'I am vulnerable'). Threat mobilises the 'flight or fight' response.

Psychological symptoms of anxiety disorders include: restlessness; a sense of dread; feeling constantly "on edge"; difficulty concentrating; irritability.

People may withdraw from social contact (seeing family and friends) to avoid feelings that lead to worry and dread. They may find going to work difficult and stressful and may take time off sick. These actions can increase the worry and lead to self-esteem.

Physical symptoms of anxiety disorders include:

- dizziness; tiredness; noticeably strong, fast or irregular heartbeat (palpitations);
- muscle aches and tension; trembling or shaking; dry mouth; excessive sweating; shortness of breath; stomach ache/feeling sick; headache;
- difficulty falling or staying asleep (insomnia).

Serious Psychiatric Problems

It is unlikely that you will encounter these, but psychotic disorders are characterised by *hallucinations* (seeing or hearing things that are not there) and/or *delusions* (bizarre or extreme beliefs that are out of touch with reality). If you are seeing someone with problems such as these it is almost certain that others will be very worried about them indeed!

What to Do

- a. Rapport and empathy – not advice and problem-solving!
- b. Remember what you are there for – finding God in this, and discerning!
- c. Stay within your limits of competence, and don't make unrealistic promises – 'Phone me any time'.
- d. If you have serious concerns, your goal will be to put the person in touch with someone who can help, ie a GP; a mentor; a suitably trained psychotherapist.
- e. Try not to be directive: get them to 'problem-solve'; ask 'What would you say to a colleague/member of staff who had these sorts of problems?'
- f. Summarise and ask 'What are the options here?' and 'What are the pro's and con's of these options?'

Conclusion

- Helping someone is sometimes a matter of finding someone else who can help!
- Take suicidal talk very seriously.
- Take care of yourself: seek supervision if you are left feeling distressed or worried; and seek advice on how best to respond. Seek help, and recognise what you can and can't do.

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