

Finding a Mental Health Professional

A Personal Guide



**Depression and Bipolar
Support Alliance**

We've been there. We can help.

■ Am I looking for talk therapy? If so, what kind of therapist do I need – someone who will listen to me, someone who will help me set goals, someone who will help me learn coping skills?

■ Do I have any concerns or questions about taking medication?

■ What has my health history been like? Include recurring physical problems such as headaches or stomachaches, and habits such as drinking, illegal drug use, prescription drug abuse, or self-abuse (cutting). Also include any treatment you've had with a psychologist, therapist, social worker or psychiatrist in the past and how it helped you.

■ What options do I have to pay for treatment? (You may need to call your insurance company or Medicare/Medicaid provider to find out what is covered. If you will be paying out-of-pocket, you may want to make a budget and see how much money you can afford to spend per week or per month.)

What kinds of professionals do I have to choose from?

Primary care doctor or family doctor (MD or DO)

Your family doctor should give you thorough physical examination to find out if you have any other illnesses that might be contributing to your symptoms. Your family doctor may talk to you about troubling issues or prescribe medication for you, or he or she may refer you to a psychiatrist or psychologist. Primary care physicians are trained to treat a variety of illnesses, and can effectively treat mild to moderate depression that responds well to treatment.

Psychiatrist (MD or DO)

A psychiatrist is a medical doctor who specializes in treating illnesses of the brain. If your primary care doctor is not comfortable making a diagnosis, is unsure of your diagnosis, or believes you may need

a combination of treatments, he or she may refer you to a psychiatrist. Some psychiatrists offer talk therapy and medication, while others see patients to prescribe and adjust medications only.

Psychologist (PhD, PsyD, EdD, MS)

A psychologist has intensive training in illnesses of the brain and can help you feel better by teaching you coping skills and helping you change the way you approach things. Your appointment with a psychologist will usually be about 50 minutes long, and you will have a chance to talk about what is happening in your life and what you can do to get through it. In most U.S. states, a psychologist cannot prescribe medication.

Social worker (DSW, MSW, LCSW, CCSW, LICSW, MFCC) or Counselor/Therapist (MA, MS, MFCC, MFT, LPC, LCPC)

Social workers, counselors and therapists are highly trained professionals who work with thought- and action-related coping skills. Their methods are similar to psychologists' methods.

Psychiatric nurse (APRN, PMHN)

Psychiatric nurses work with individuals and families to assess needs and develop treatment plans. They may monitor treatment, assist with crisis intervention or offer counseling.

Most professionals use a combination of approaches, and alter their approach to best help the person they are treating. They may also hold group or family therapy sessions. Some people find it helpful to get feedback from a group; others are more comfortable talking one-on-one.

No one type of professional is better than another. The most important thing is your ability to work with the person, talk honestly and openly, and make progress. Choose the one that is the best fit for you in terms of your needs, your comfort level, and your finances.

Sometimes people see more than one professional. For example, a person might get medication from a family doctor, and then see a social worker for talk therapy.

Where can I look for a professional?

- Your family doctor can give you a referral.
- Your workplace employee assistance program. (If you are worried about confidentiality, first find out if this service is confidential.)
- Your insurance network. If you have insurance, your insurance company may have a list of professionals that are “in the network” and rules for seeing those who are not.
- Friends, family, community centers or places of worship. Sometimes a friend or relative’s doctor will recommend someone, since some people don’t feel comfortable seeing the same person a close friend or relative is seeing.
- Professional associations. The Resources section on page 16 has a list of organizations, phone numbers and websites.
- Your city or state mental health department. (Check the community, government or Blue Pages section of your phone book.)
- Local hospitals, or universities that have teaching hospitals.
- A local doctor referral service.
- Recommendations from people at your DBSA support group.
- DBSA’s online referral program at www.DBSAlliance.org

What should I tell the professional?



Many people find it difficult to “open up” to a new doctor, especially if they are talking about feelings and emotions. Take another look at the list you made on page 3: “What are the main things I’m looking for help

with?” Bring it with you to your first appointment. It can be a good way to start talking about the main things that are causing problems in your life, or the things you want to improve. Filling in the list on the next page can also be helpful.

- What are my main concerns or fears about treatment? (Example: I get uncomfortable talking about my feelings; I usually don't stick with things I start; I don't have the time for weekly appointments.)

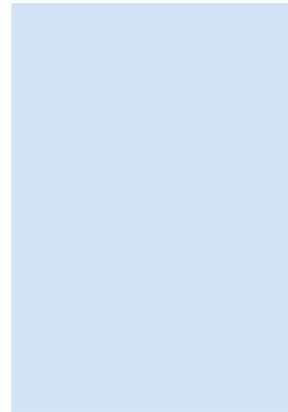
- Do I have any special needs for extra privacy and confidentiality?

Remember that seeking help is no reason to be ashamed. You would not be ashamed if you asked for help with symptoms of diabetes, asthma or any other health problem. Your doctor should not judge you or your actions. If, after a few appointments, you feel your doctor is judging you, it may be helpful to talk to him/her about it, or look for another doctor that you feel is more accepting.

After you have found some health care professionals that look like they fit your needs, call the office of one and make an appointment. Most of the time you will only need to give your name and phone number to the person who sets the appointment – you will be able to explain your reasons for seeking help during the appointment. If you have concerns about privacy, bring them up during the call.

If you need help right away, let the person know. You don't need to go into detail, just say you are in a crisis situation. If the first doctor you call can't see you soon enough, call other doctors until you can find one who is able to help you quickly.

What should I expect at my first appointment?



In your first session, you will probably do most of the talking. You should tell the professional why you are there and what you would like to get from treatment. The professional will tell you how he or she can help, and the two of you will work together to set goals and develop a treatment plan. After the professional gets to

know more about you and your situation, he or she may be able to give you an idea of how long treatment will take and when you can expect to feel better. Most treatment today is goal-oriented and it does not necessarily go on indefinitely.

What should I find out from the professional?

This will depend on your personal needs and concerns, but here are some questions you may want to ask:

- What type of training and experience have you had?
- What's your treatment philosophy/method?
- How long do appointments usually last and how often will they be?
- How do you handle billing? Do you offer a sliding scale?
- How can I reach you in an emergency?

How will I know if I'm making progress?

If you and the professional you're seeing make a list of short- and long-term goals at the beginning of treatment, you'll be able to check the list and see if you're closer to reaching any of those goals. It's helpful to keep a journal or a DBSA Personal Calendar to track your progress – how you feel each day and how you deal with difficult situations. You and your professional should also set a time when you will look back and review your progress. Improvement won't happen overnight, and the problems you're having may not completely disappear, but you should be able to see some change, even if it's just a better understanding of your own thoughts and feelings. Many people who keep journals or Personal Calendars are surprised when they look back to see that they have made a lot of progress. Another helpful tool to track your progress is the "How is my treatment plan working?" worksheet starting on page 18.

It is also helpful to learn everything you can about mood disorders (and any other illnesses you have) and their treatments. Visit DBSA's website at www.DBSAlliance.org, and check your local library for other books and reference materials. You can also ask your pharmacist for information if you are taking medication, or find information at www.nlm.nih.gov/medlineplus/.

What if I'm not making progress?

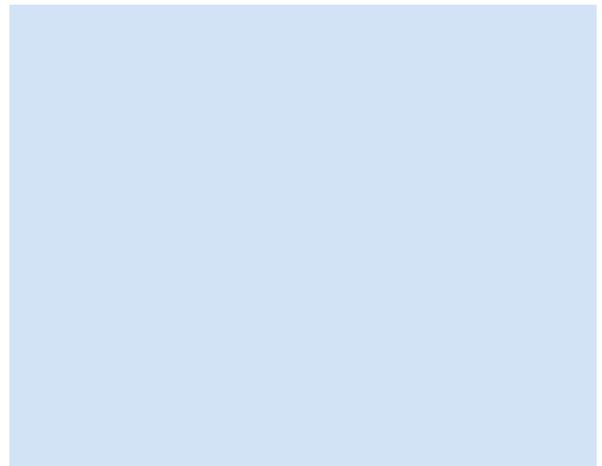
As hard as professionals try, sometimes they may give you an incorrect diagnosis or lack the time to pay attention to your unique needs. If, after honestly looking at your goals and your feelings before and after treatment, you believe that you are not getting better, you have a right to seek a second opinion (as you would with any illness), and to have the best treatment possible. You do not have to stay with your current professional. But *if you are taking medication, never stop taking it without the supervision of a medical professional*, to avoid harmful effects.

Look for additional referrals using the resources listed on page 16, and start again, using the knowledge you've

gained from your time in treatment. Don't let one unsuccessful experience make you unwilling to try treatment again. And don't blame yourself. Sometimes the match of professional and patient personalities doesn't work out, or a patient might make more progress using a different method of treatment. Keep trying and don't give up hope. There is a way for you to feel better.

Let your doctor know you won't be returning for further treatment, and ask that copies of your records be forwarded to the next professional you see. Be courteous and remember to cancel any appointments with enough advance notice.

How can a DBSA support group help me?



If you think you might have depression or bipolar disorder, a DBSA support group is a helpful, reliable, knowledgeable group of people who know what you are going through and can help answer the question, "What next?" and other questions you have.

DBSA group participants are people with mood disorders and their families who share experiences, discuss coping skills and offer hope to one another in a safe and confidential place. DBSA support groups provide the caring and assistance that is important to lasting recovery, and are a valuable addition to therapy and/or medication. People who attend say that the groups:

- Provide a safe and welcoming place for mutual acceptance, understanding and self-discovery.
- Give them the opportunity to reach out to others and benefit from the experience of those who have “been there.”
- Motivate them to follow their treatment plans.
- Help them to understand that mood disorders do not define who they are.
- Help them rediscover their strengths and humor.

People who had been attending DBSA groups for more than a year were also less likely to have been hospitalized for their mood disorder during that year, according to a DBSA survey.

How can I deal with financial and insurance issues?

There is no easy answer to this question. Unfortunately, mental illnesses sometimes are not insured at the same level as other illnesses. Sometimes mental health coverage is not offered at all, or a person is unable to get health insurance. Here are some things you can do to try to reduce the cost of your treatment.

- Talk to your health care provider(s) and try to work out lower fees or a payment plan.
- Use community or state-provided services, many of which offer a sliding payment scale.
- Space out your allowable psychotherapy visits over time and work on developing skills you can use between visits.
- If you are taking medication, ask your doctor to contact the pharmaceutical company that makes your medication and see if you are eligible to receive free medication. Ask if your doctor has any free samples of your medication to give you.
- Ask your doctor to contact your insurance company and ask if they will allow more treatment for you.
- If you are having a hard time getting insurance because you’ve had treatment for mental illness, your state may have a risk pool, which offers insurance for hard-to-insure individuals. There is often a

waiting list, and this insurance is often costly, but it is an option to consider. For more information, visit www.healthinsurance.org/riskpoolinfo.html

- Get help before there is a crisis. A brief appointment to talk about how you’re feeling or adjust your medication can prevent more costly interventions later.

There is hope.

Right now you might be dealing with symptoms that seem unbearable, and it can be difficult to have patience as you search for a professional and go through treatment. The most important thing you can do is believe that there is hope. Treatment does work, and most people can return to stable, productive lives. Even if you don’t feel 100% better right away, it’s important to stick with treatment and remember that you are not alone.

Other helpful *free* publications from DBSA

Call, write or e-mail DBSA (information on the back cover) for a free copy of any of these helpful and informative materials, or download them at www.DBSAlliance.org.

Bipolar Disorder: Rapid Cycling and its Treatment

Bipolar Disorder: Stories of Coping and Courage

Dealing Effectively with Depression and Manic Depression

Finding Peace of Mind: Medication and Treatment Strategies for Bipolar Disorder

Finding Peace of Mind: Medication and Treatment Strategies for Depression

Guide to Depression and Bipolar Disorder

Healthy Lifestyles: Improving and Maintaining the Quality of Your Life

Helping a Friend or Family Member with a Mood Disorder

Is It Just a Mood...or Something Else? Information on Mood Disorders for Young People

Personal Calendar (A way to track moods, medications, and life events)

Suicide Prevention Card

Suicide Prevention and Mood Disorders

Support Groups: An Important Step on the Road to Wellness.

How is my treatment plan working?

This worksheet can help you check your progress and find out which issues need to be discussed at future appointments. You may want to make copies and use one each week.

WEEK OF _____

NEXT APPOINTMENT _____

On a scale of one to ten, how do you feel?
(circle the number)

1 2 3 4 5 6 7 8 9 10

1=sad, tired, anxious, tense, irritable, withdrawn
10=happy, rested, relaxed, energized, involved in life

Check any words that describe how you felt this week:

- Trouble concentrating
- Sad/Crying
- Joyful/Pleased
- Overeating/Not eating
- Slept too much/Trouble sleeping
- Irritable/Angry/Worried/Anxious
- Calm
- Don't care/Pessimistic
- Lazy/No energy
- Interested/Involved in life
- Aches and pains
- Guilty/Hopeless/Worthless/Overwhelmed
- Difficult to concentrate or make decisions
- Clear thinking
- Wanted to be alone
- Happy/Content
- Thoughts of death or suicide
- Working well/Clear thinking
- Alcohol/Substance use
- Active
- Other: _____

Have my family, co-workers or friends said anything about my mood? If so, what?

What difficulties did I have sticking with my treatment plan? (*medication, talk therapy, support groups, etc.*)

Did my medication make me feel bad in any way? How?

I experienced the following side effects this week:

- Nausea
- Sexual difficulties
- Constipation
- Dizziness
- Weight gain/loss (___ lbs.)
- Shortness of breath
- Shaking
- Dry mouth
- Other: _____

In what ways am I feeling better than last week?

Do I think I could be doing better?

- Yes No

If yes, in what ways?

Questions to ask my doctor:

Goals for my next appointment:

Symptom Checklist

This checklist can help you prepare for a first-time discussion with your professional, or evaluate your progress from day to day or week to week. However, it is not meant to help you diagnose yourself. Only a health care professional can diagnose you.

Symptoms of depression

- Prolonged sadness or unexplained crying spells
- Significant changes in appetite and sleep patterns
- Irritability, anger, agitation
- Worry, anxiety
- Pessimism, indifference
- Loss of energy, persistent exhaustion
- Unexplained aches and pains
- Feelings of guilt, worthlessness and/or hopelessness
- Inability to concentrate; indecisiveness
- Inability to take pleasure in former interests; social withdrawal
- Excessive consumption of alcohol or use of chemical substances
- Recurring thoughts of death or suicide

If you or someone you know has thoughts of death or suicide, contact a medical professional, clergy member, loved one, friend or crisis hotline such as (800) SUICIDE immediately.

Symptoms of mania

- Increased physical and mental activity and energy
- Exaggerated optimism and self-confidence
- Grandiose thoughts, inflated sense of self-importance
- Excessive irritability
- Aggressive behavior
- Decreased need for sleep without feeling tired
- Racing speech, racing thoughts
- Impulsiveness, poor judgment
- Reckless behavior such as spending sprees, impulsive business decisions, erratic driving and sexual indiscretions
- In severe cases, delusions and hallucinations

Please help us continue our efforts.

We hope you found the information in this brochure useful. Your gift will help us continue to distribute this information and help people find health care professionals. Please fill in and mail the donation form below, call (800) 826-3632 or visit www.DBSAlliance.org for more information.

Yes, I want to make a difference. Enclosed is my gift of:

- \$100 \$50 \$20 Other _____

NAME

ADDRESS

CITY

STATE

ZIP

FAX

E-MAIL

- Check (payable to DBSA) Money order
 VISA MasterCard Discover Card

ACCOUNT

EXP. DATE

NAME AS IT APPEARS ON CREDIT CARD

SIGNATURE (REQUIRED)

- I wish my gift to remain anonymous.
- Please send me _____ donation envelopes to share.
- I'd like details on including DBSA in my will.
- I have enclosed my company's matching gift form.
- I'd like to receive more information about mood disorders.
- Please send all correspondence in a confidential envelope.

If you would like to make your gift a Memorial or Honorary tribute, please complete the following:

- In Memory of/In Honor of (circle one):

PRINT NAME

- Please send an acknowledgment to:

RECIPIENT'S NAME

ADDRESS

CITY

STATE

ZIP

Please send this form with payment to: **DBSA**
730 N. Franklin Street, Suite 501, Chicago, IL 60610-7224 USA

Questions? Call (800) 826-3632 or (312) 642-0049.

Credit card payments (Visa, MasterCard or Discover) may be faxed to (312) 642-7243. Secure online donations can also be made at www.DBSAlliance.org.

DBSA is a not-for-profit 501(c)(3) Illinois corporation. All donations and bequests are tax deductible based on federal and state IRS regulations. For more information, please consult your tax advisor.

Thank you for your gift!



We've been there.
We can help.

Depression and Bipolar Support Alliance

The **Depression and Bipolar Support Alliance (DBSA)** is the leading patient-directed national organization focusing on the most prevalent mental illnesses. The organization fosters an environment of understanding about the impact and management of these life-threatening illnesses by providing up-to-date and scientifically-based tools and information written in language the general public can understand. DBSA supports research to promote more timely diagnosis, develop more effective and tolerable treatments and discover a cure. The organization works to ensure that people living with mood disorders are treated equitably.

Assisted by a Scientific Advisory Board comprised of the leading researchers and clinicians in the field of mood disorders, DBSA has more than 1,000 peer-run support groups across the country. Nearly two million people request and receive information and assistance each year. DBSA's mission is to improve the lives of people living with mood disorders.

Depression and Bipolar Support Alliance

(Previously National Depressive and Manic-Depressive Association)

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Chicago, Illinois 60610-7224 USA

Phone: (800) 826-3632 or (312) 642-0049

Fax: (312) 642-7243

Website: www.DBSAAlliance.org

Visit our updated, interactive website for important information, breaking news, chapter connections, advocacy help and much more.

This brochure was reviewed by DBSA Scientific Advisory Board member Eric J. Nestler, M.D., Professor and Chairman of the Department of Psychiatry at University of Texas Southwestern Medical Center, and by Jane Ann Cartwright of DBSA MDSG New York.

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