**Families and Mental Health**

**Teaching Guide**

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**Teaching Guide General Notes**

The presentation, “Families and Mental Health” has two versions, the full version presented at the State Leader Lesson in 2023 and a condensed version which can be presented in less time by educators. When presenting this material, the educator may elect to emphasize certain portions of the material while de-emphasizing others for the sake of time. When doing so, the important concepts that should remain in any version are the following:

* We recognize a wide range of what may be considered “healthy” for individuals and families, what is often more important than a single set of guidelines or behaviors to follow is that an individual and people in family relationships work to honor different parts of themselves and their family relationships.
* Honoring parts of the “system” includes an attitude of openness and curiosity, maintaining flexibility in roles and rules of the relationships, and especially in relationships with others remember to take responsibility for your own behaviors, allow family members or romantic partners to be responsible for theirs, and maintain an empathic and caring perspective for another’s perspectives, mistakes, and behaviors.
* Healthy families and healthy couple relationships and founded on individuals who work to maintain their own psychological wellbeing.

The format of this guide includes the text of the PowerPoint slides for the full version of the presentation and corresponding notes for the presenter.

**Slide 1: Introduction Slide**

* *Notes to the Presenter*: Use this slide to introduce yourself and to advocate for the importance of building healthy relationships to improve mental health, which in turn supports healthy relationships.

**Slide 2: Why This Presentation**

* Mental health issues are common yet severely overlooked. Why?
* Simply *raising awareness* of mental health issues isn't enough.
* Psychotherapy is effective, but our desire is to help individuals and *families* become the key resource in addressing mental health issues.
* *Notes to the Presenter*: This slide is not meant to discourage people from seeking therapy. At the same time, therapy is a bridge to healthier relationships which tend to be a key component in building health long term. Therapists can only be with individuals and families for a relatively short period of time. Even if a therapist is seen regularly for more than a year, this still represents a tiny fraction of the total amount of time in a person’s life and for their relationships, and so therapists seek to build individual skills and healthy relationships to encourage health *beyond* the experience of therapy. Much of this presentation is based on the concept of getting to the fundamental goals of therapy, especially for relationships.

**Slide 3: Mental Health in Oklahoma**

* In OK, 7+ of the top 10 counties reporting frequent mental distress are rural.
* Where are the most MH providers in OK?
	+ Adults residing in rural geographic locations receive mental health treatment less frequently and often with providers with less specialized training, when compared to those residing in metropolitan locations.
* *Notes to the Presenter*: The purpose of this slide is to emphasize that one challenge Oklahoma faces in the shortage of mental health providers, and the concentration of mental health providers in key locations around Oklahoma City and Tulsa leaves much of the rest of this rural state in need of other kinds of supports.

**Slide 4: Our Goals**

* Explore what a “healthy” family looks like
	+ With individuals, couples, and parent-child relationships
* Where things go "*wrong*"
	+ Or no longer working well in the family...
* How families can improve wellbeing
* *Notes to the Presenter*: This slide is used to set the expectation for the basic format of the rest of the presentation in which a general picture of what “healthy” looks like for individuals and in relationships, how problems tend to form, and introductory tools for improving health.

**Slide 5: What Makes a “Healthy” Family (System)**

* One way to think of a healthy family is one that works well enough for everyone in it; where there are clear rules, hierarchy, and structure; yet members voices are not silenced.
* There is a wide range in what a "healthy family" looks like; it can look different in each family.
* At the same time, there are common patterns that family scientists and family therapists hope to help families follow.
* *Notes to the Presenter*: This slide reinforces the concepts introduced in previous slides, and introduces the concept of systems and the key role of rules, hierarchy, and structure. These themes are repeated throughout the presentation

**Slide 6: Family Systems Basics**

* A "system"...
	+ Is made up of many parts, but makes something bigger when together.
	+ It's pieces constantly affect and are affected by one another.
	+ It has a way of keeping the system working in a steady state.
* A "family system" works in a similar way, but it's parts:
	+ Have unique thoughts and feelings
	+ Constantly communicate and interpret messages (spoken and unspoken)
	+ Uses actions & emotions to keep the system working in a consistent way
* *Notes to the Presenter*: The concepts of systems can be difficult to explain. An example can be helpful, such as the following. Clock are made up of gears that are interconnected pieces in which each part is effected by any piece in the system moving, even if not directly touching it, giving an example of interconnectedness and mutual influence in systems. Air conditioning units generally work by a sensor noticing when the temperature is too hot inside its space and uses a coolant and fan system to move cool air into the living area in a home until it senses that it is back to the state/temperature it is set to, giving an example of homeostasis (the tendency for a system or individual to continue behaving and relating in consistent ways whether they are healthy or not

**Slide 7: Family Systems Continued**

* Family Subsystems
	+ *Couple* subsystem
	+ *Parental* subsystem
	+ *Child/Sibling*subsystem
* **Embedded in layers of influence**
	+ Extended family, School, Peers
	+ Socioeconomic background
	+ Jobs, Communities, Media
	+ Culture, Government, Policies
	+ Time, History
* *Notes to the Presenter*: Couple subsystem and parental subsystem can be made of the same members, but have a distinct set of roles, rules, and boundaries. In the case of divorce and separation, the systems may become more complex, with a dissolved couple system but a maintained parental system, sometimes including step-parents who are part of new couple subsystems. These pieces continue to interact. A child subsystem could include parent and child, parent and multiple children, parents and child, parents and children, or various subsets of siblings. Technically an individual can also be considered a subsystem as they have internally interacting psychological, neurological, and biological components that mutually and simultaneously interact and maintain homeostasis (including psychological homeostasis through cognitive dissonance and bias forces). The diagram on this slide can be used to convey the idea that each person lives within multiple layers of systems that all influence each other. A person lives in and affects a family, who live in and affect a community, who live in and affect bigger systems (schools, religious organizations, political organizations, work organizations, and so on), which exist inside of cultures at this time in history. These systems all effect the layers above and beneath them.

**Slide 8: Common Patterns in *Healthy* Individuals & Families**

* Roles, Rules, and Boundaries that are...
	+ Flexible
	+ Clear
	+ Consistent
* Congruence and authenticity within and between
	+ With self, with partner, as a parent
	+ "*I mean what I say and say what I mean*..." (\*and I also encourage you to do the same)
* *Notes to the Presenter*: This slide is meant to reinforce the concepts of flexibility, clarity, and consistency which are themes reinforced for the rest of the presentation.
* *\*\*\*Additional Note***:** This slide concludes the first portion of the presentation containing the major theories and themes that are covered in the second portion of the presentation. The next portion of the presentation specifies how these concepts apply for individuals, couples, and families.

**Slide 9: Understanding Individual Health**

* We have many (psychological) "parts"
* A healthy individual pays attention to each of their internal parts, balances their needs, and continues to grow.
* Just like your psychology, the biology of your brain is made up of different parts:
	+ The "Thinking brain," the emotion and panic part, and the body maintenance part.
	+ A healthy individual uses their "*thinking brain*" while working with their emotion and maintenance brains.
* *Notes to the Presenter*: While it is simplified, the basic outline of the brain is the "Thinking Brain" or the frontal cortex (located primarily behind the forhead), where most of our planning, ability to direct behavior intentionally, and ability to be thoughtful comes from. We also have a part of our brain where emotions and danger senses originate, which is where the basics of fight/flight/freeze in terms of both evolution and experiences/memory. The lower part of the brain controls automatic processes like breathing, heartrate, and digestion. You can use many different examples when describing different parts of a person, such as a thoughtful part, a playful part, a working part, a part that hopes to be cared for, a romantic part, etc.

**Slide 10: How Problems Form for Individuals**

* When these parts get out of balance, we become unwell (& sometimes we call that *unwellness*a psychological disorder)
	+ "*Anxiety Disorders*" - our part that worries runs the show/ we work hard to find control and order when feeling chaos.
	+ "*Mood Disorders*" - our part that wants to be cared for is neglected/ we stop fully using our thinking brain to interrupt maladaptive coping mechanisms (self-protective).
* Chronic stress buildup – over activation of the stress response
* Trauma – "scars" our emotion and panic center and they override our "thinking brain" when the alarm goes off

**Slide 11: Skills to Build a Healthy Individual**

* Balancing the parts of self
	+ Take care of your biology (caution with self-medication; SLEEP)
	+ Take care of *each* of your psychological parts
	+ Exercise your *thinking* brain
	+ Use SMART goals to direct what you do
* In *relationships* with others (overcome the isolation factor):
	+ Validate/normalize each other's experiences
	+ Explore the mind's parts, feelings, and beliefs – get them to connect with one another
	+ Challenge self and one another to grow....
* *Notes to the Presenter*: When discussing psychological parts, encourage attendees to balance being playful, focusing on doing the things that matter most them, and being bold enough to say discomforting things in a kind way. For specific components of the SMART exercise which can be used on the individual, couple, and family slides see the final page of the teacher guide. You can use the following example when laying out the SMART goal for individuals: Specific (Something that can be DONE with your body, and something a living person can do better than a dead person – active goals to do something rather than to stop doing something), Meanigful (DON’T SKIP THIS ONE, and no one but you can tell you what is meaningful), Adaptive (Will this make your life better/more meaningful in the long run), Realistic (if its not a 7/10 with 10 being absolutely certain likelihood of being completed, chances are it won't work), and Time-framed (the more specific the better)

**Slide 12: Couple Health**

* Well-functioning Couples
	+ Starts with "*healthy*” (enough) individuals
	+ Maintain interdependence
	+ Each partner recognizes their own unique set of thoughts, feelings, and beliefs *while also* caring for and allowing themselves to be cared for by another person
	+ Connect thoughtfully/intentionally
	+ Fight fairly (rather than trying to get our partner to see that we are right)
* Problem Formation
	+ Rigid dependence (overly connected/fused) or independence (disengaged/aloof)
	+ Doing relationships on automatic/bad habits/unaware
	+ Inflexible roles and rules
	+ Fighting to win (criticizing, contempt, and/or the cold-shoulder)
* *Notes to the Presenter*: We tend to get into romantic relationships because they make us feel wanted & valuable, attractive and likable, sexually gratified, and ideologically fulfilled. Protecting those experiences, however, requires intentionality, thoughtfulness, and responsibility. Those sound boring, and truthfully without the first sentence they are. A well-functioning couple puts faith (because we can't ever know with complete certainty that these will come through for us) into experiencing the things that make relationships beautiful by working to be interdependent. The order of information in the “well-functioning” column is intentional, starting with interdependence, then moving to connection, then to balance, and finally to fighting fairly (or communicating effectively). The philosophy of the order is to maintain differentiation so that connection can be intentional and thoughtful to build the emotional capacity for work around maintaining **balance** so that there is as little in the way of communicating effectively and using communication tools intentionally.
* Explain interdependence:
* A balance between being independent and dependent. Remain aware of what your thoughts, feelings, and beliefs are as separate from your partners thoughts, feelings, and beliefs. We have a bias to believe that our beliefs are common or at least right, that when we feel a certain way other people feel a similar way, and that if we think something chances are someone else will be thinking that too. This is particularly true when you spend significant time with another person, and is heightened when you can predict with reasonable accuracy what another person is thinking or feeling. Mind-mapping is sometimes a part of empathy and showing another person that you are trying to be in-tune with what is important to them, but mistakes are inevitable and when you are overconfident in your mapping skills it leads to unmet expectations and frustration. When we feel threatened emotionally most of us have a tendency to either seek approval or assert our "rightness." When taken to an extreme this leads to emotional dependence and despair WHEN the other person cannot follow through OR emotional disconnection after losing faith that the other person won't be there for you (which often leads to a self-fulfilling prophecy). When we fight to win rather than fighting fairly we tend to either vindicate ourselves or prove a point through criticizing, show our dominance through contempt (or fall on our sword as a martyr), or shut down to avoid any further damage. Balance roles and rules, maintain an interdependence in emotional boundaries (allow themselves to rely on another person without expecting them to take ownership of your experiences and beliefs), fight fairly (use complaints rather than criticisms, make reasonable requests before demands, be assertive and authentic without being aggressive or complacent), connect thoughtfully (spend time together in ways that both appreciate, be mindful of self and cooperative with partner during sex, maintain a friendship – fun, laughter, shared interests, etc.)

**Slide 13: Skills to Build a Healthy Couple**

* Attend to what is *mine first; t*hen *care for*what is *theirs*
	+ Acknowledging mutual influence.
	+ Say "I" instead of "you"; "and" instead of "*but*", compromise when you can; balance the pain with joy and kindness.
* Lean into *curiosity* ("*Help me understand*..."; be able to say "*I was wrong*").
* Build Rituals......Plan SMART time together (\*make the *relationship* a priority).
* Discuss and balance roles; including asking for help.
* In therapy – we spend so much time on "communication"
	+ Break down *miscommunications*; Address *wounds*; Create *new patterns.*
* *Notes to the Presenter*: You can use the following as a SMART goal example for couples: Specific (kiss at the door), Motivated by value (being the kind of partner who shows partner appreciation; for connection), Adaptive (does this work for me in the long run?; a kiss at the door fits within our couple relationship and long-term capacity), Realistic (easily added), Time specific/bound (will happen when I leave for work)

**Slide 14: Healthy Children and Families**

* Flexible Parenting
	+ Warmth balanced with structure
	+ Parenting that adapts as children grow
* **Emotion Guides**
	+ Active involvement as guides on understanding emotions and guiding behaviors
* **Facilitating Child’s Use of Voice**
	+ Help children find the *language*, *safety*, and *space* to use their voice
* **Consistency Over Grandiosity**
	+ We spell “love” with TIME
	+ Everyday consistency does more than grand gestures

**Slide 15: Problem Formation in Parent-Child Health**

* Aloof or patronizing parenting
* Transgenerational nature of doing business "*this*" way...
* Using Shame to drive child behavior
* Drill sergeant and Best friend parenting
	+ Drill sergeants get results in the short term but end up with kids who either "wash out" or cut-off as soon as they can get away
	+ A best friend doesn't give rules/expectations to each other to follow; they are on equal footing when it comes to rules and expectations. *Kids aren't ready to go without direction/support/correction yet.*

**Slide 16: Skills to Build a Healthy Parent-Child Relationship**

* Become Predictable
	+ Plan out specific routines and what to do *when* routines go off the rails
	+ Practice what you preach
	+ Play alongside your children
* Praising the positive gets you further than pointing out the problems
	+ Use logically connected consequence *when you need* to use consequences to reinforce your lesson.
* In therapy – we spend a lot of time educating parents about developmental needs of children and ways they can facilitate children's use of voice....
	+ Help parents really listen to what a child is saying with their words and behaviors
	+ Help parents respond *intentionally* rather than *reactively*
	+ Ultimately works to help parents become a child's "therapist"
* *Notes to the Presenter*: Examples of routines that parents often find helpful to build include bedtimes, off-to-school times, holiday traditions, and chore/homework expectations. When describing being examples it may be helpful to discuss the helpfulness of expecting children to do what you do when it comes to rules around electronic use, chores, and language use; expect your children to become echoes of what you say.

**Slide 17: Key Takeaways**

* No person is an island
* Flexibility is the spice of life
* Genuine/*caring* communication works
* Healthy individuals support healthy relationships and families (and rural communities)
* *Notes to the Presenter*: Use this slide to reinforce the themes of interconnectedness, flexibility, being genuine, and that healthy families and couples are based around individuals trying to maintain their own and other individuals’ health.

**Slide 18:**

* 988 (was 211)
* NAMI helpline 1-800-950-6264 (NAMI) or info@nami.org
* Suicide Hotline 1-800-273-8255
* Ok Child Abuse Hotline 1-800-522-3511
* Disaster Distress helpline 1-800-985-5990
* Text: TALKWITHUS to 66746
* Crisis Text 24/7: Text HELLO to 741741
* *Notes to the Presenter*: This slide can be left on during any Q&A portions so that participants can copy down numbers they may want to use in the future.
* *Additional Note:* The SMART goal exercise from the following two pages can be used as an activity to reinforce taking broad ideas covered in the presentation and applying them to a specific and manageable goal to put the ideas into practice. Depending on time, it may be helpful to go over what each element of the SMART goals are, as described in the first page of the exercise, and then walk through an example applying an idea from the presentation to a specific goal with participants.

**SMART Goals**

SMART goals, adapted from Acceptance and Commitment therapy (Harris, 2019), are a useful way to build healthy routines for individuals, couples, and families. **SMART goals are:**

**Specific**: Goals should be as specific as possible, and are often most useful what they are a goal to do something new or differently, rather than trying to stop doing something

**Motivated by Values:** This may be the most important piece of the SMART goal but is easy to overlook. A value is a trait or idea that is important for you on a personal level. The best goals come together when you decide what about the goal connects with a deep value that you hold. Without keeping this value in mind, you are much more likely to lose the “why” behind the goal and keep struggle to keep moving forward. A key difference between a value and a goal is that a goal can be accomplished and checked-off, a value is something that goes beyond being checked off a list.

**Adaptive:** A goal that is adaptive is simply one that makes your life better *in the long run*. The emphasis for adaptive goals are those that prioritize long-term benefits over short-term benefits

**Realistic**: Having a realistic goal is critical to succeeding in keeping the goal. Ask yourself, on a scale of 1 – 10, how likely is it that you will keep to the goal. If the answer is less than an 8, go back and make the goal more specific, motivated by a more personal or meaningful value, or simply make it a little smaller. Often taking on a smaller goal is a useful way to change or add a new behavior.

**Time-framed:** Finally, a SMART goal is one which is set to a specific timeframe. Setting a timeframe in which to accomplish a goal greatly helps increase how specific the goal is, it adds a way to determine if it’s been accomplished, and helps make the goal seem more doable.

**Write down your SMART goal below**

**Specific**

**Motivated by values**

**Adaptable**

**Realistic**

**Timeframe**

**Additional Resources and Reference Material**

Christensen, A., Doss, B. D., & Jacobson, N. S. (2014). *Reconcilable differences: Rebuild your relationship by rediscovering the partner you love—without losing yourself* (2nd ed.). Guilford Press.

Cline, F., & Fay, J. (2006). *Parenting with love and logic: Teaching children responsibility.* *Updated and expanded ed.* Colorado Springs, CO, NavPress.

Gottman, J. M., & DeClaire, J. (1997). *Raising an emotionally intelligent child.* New York, N.Y., Simon & Schuster Paperbacks.

Harris, R. (2008). *The happiness trap*. Robinson Publishing.

Harris, R. (2019). *ACT made simple: An easy-to-read primer on acceptance and commitment therapy, Second Edition.* New Harbinger Publications.

van der Kolk, B. A. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma.* New York, New York, Viking.

Information on Parenting Styles: <https://jessup.edu/blog/academic-success/the-psychology-behind-different-types-of-parentingstyles/#:~:text=In%20the%201960s%2C%20psychologist%20Diana,Eleanor%20Maccoby%20and%20John%20Martin>.

Information on the state of mental health in Oklahoma: <https://oklahomawatch.org/2016/08/26/rural-oklahoma-struggles-to-overcome-barriers-to-mental-health/>