

A photograph of two Black men in conversation. The man on the left is wearing a yellow shirt and looking towards the man on the right. The man on the right is wearing a light-colored shirt and has his hand near his chin, looking thoughtfully to the side.

MENTAL HEALTH & WELL-BEING

What does the term "mental health" mean to you? Many people automatically think of chronic mental illnesses and mood disorders like bi-polar disorder or schizophrenia — and if they aren't dealing with those issues, they think the subject doesn't apply to them.

In fact, just like physical health, mental health is a part of everyone's life. And in the same way that our physical health can **fluctuate**, so can our mental health. Some days we might feel better than others. Sometimes we may feel unwell for a few days, like when we have a cold or when **we're** sad about a current situation, but then feel better. Some people may be diagnosed with chronic conditions that may not go away, but can be treated and managed. Mental health and well-being can affect us all and are just as important to pay attention to as our physical health.

ABOUT MENTAL HEALTH

- THE MEANING OF MENTAL HEALTH
- WHAT IS GOOD MENTAL HEALTH?
- THE RELATIONSHIP BETWEEN MENTAL HEALTH AND MENTAL ILLNESS
- UNDERSTANDING MENTAL ILLNESS

MENTAL HEALTH AND ARTHRITIS

- THE LINK BETWEEN ARTHRITIS AND MENTAL HEALTH
- ARTHRITIS AND GRIEF
- ARTHRITIS & ANXIETY AND DEPRESSION

DEALING WITH STRESS

- STRESS BUSTING
- TAKING ACTION AGAINST STRESS

TAKING CARE OF YOUR MENTAL HEALTH

- SELF-MANAGEMENT STRATEGIES
- IMPROVING YOUR MENTAL HEALTH
- FOOD AND MOOD
- ADDING OR ELIMINATING FOODS — EXPERIMENT AND TRACK
- NUTRIENTS TO FIGHT DEPRESSION
- WHAT TO DRINK
- PHYSICAL ACTIVITY AND MOOD
- GETTING STARTED
- EXAMINE YOUR THOUGHT PATTERNS
- POSITIVE (BUT REALISTIC) SELF-TALK
- SOME TYPES OF HARMFUL THOUGHT PATTERNS
- EMOTIONAL EVENT WORKSHEET
- ADDITIONAL RESOURCES
- PLANNING, PRIORITIZING, PACING AND PROBLEM-SOLVING
- RELAXATION TECHNIQUES
- BREATHING EXERCISES
- MEDITATION
- MINDFULNESS
- PROGRESSIVE MUSCULAR RELAXATION (PMR)
- SLEEP

WHEN YOU NEED SUPPORT

- GETTING HELP
- BARRIERS TO GETTING HELP
- CULTURAL SAFETY AND MENTAL HEALTH
- BUILDING YOUR PERSONAL SUPPORTS
- TALKING TO YOUR DOCTOR
- MENTAL HEALTH PROFESSIONALS
- MORE PLACES TO FIND SUPPORT

THE MEANING OF MENTAL HEALTH

What does the term "mental health" mean to you? Many people automatically think of chronic mental illnesses and mood disorders like bi-polar disorder or schizophrenia — and if they aren't dealing with those issues, they think the subject doesn't apply to them.

In fact, just like physical health, mental health is a part of everyone's life. And in the same way that our **physical health can fluctuate, so can our mental health**. Some days we might feel better than others. Sometimes we may feel unwell for a few days, **like when we have a cold or when we're sad about a current situation**, but then feel better. Some people may be diagnosed with chronic conditions that may not go away, but can be treated and managed. Mental health and well-being can affect us all and are just as important to pay attention to as our physical health.

Our mental health determines how we interact with the world and deal with challenges big and small. **It's** important to be proactive in learning about mental health and developing coping skills before we **find** ourselves in a crisis.

This is especially important if you're living with a chronic illness. Adding the complications of living with arthritis to the stressors of everyday life can compound the challenges you face — everything gets tougher.



Experts have identified that people with arthritis are more likely to have increased symptoms of depression, anxiety and/or stress. In addition, research has shown that ongoing anxiety and depression can lead to poor management of arthritis symptoms and reduced response to treatment.

Source: [Faith Matcham, Symptoms of Depression and Anxiety Predict Treatment Response and Long-Term Physical Health Outcomes in Rheumatoid Arthritis Rheumatology, 2015](#)

This material will give you some insight into aspects of mental health and its relationship to your physical health. It will provide you with some strategies and suggestions for maximizing your well-being and will also help you recognize when you need to bring in expert help.

It's not easy to talk about the struggles and negative emotions we might experience. It can even be challenging to honestly examine them privately. There is a lot of pressure in our society to project a happy, successful image of ourselves, and a great deal of stigma remains around admitting to sadness, stress and fear — let alone a chronic mental illness. But the more you know, the better off you'll be. Even if you come away from this information with just a few new ideas or another way of looking at your issues and challenges, your outlook will be from a better place.

“I was unaware of the effects that arthritis could have on my mental health. I have always been aware of the tools available to help ease my physical pain, but was lost when it came to healing my mental health. The Arthritis Society has always been a source of valuable information for me, I am happy they have now created a place on their website to address mental health issues for those coping with arthritis.”

Amanda, living with arthritis for 25 years

WHAT IS GOOD MENTAL HEALTH?



Mental health is as important to our well-being as physical health. Most experts no longer subscribe to the view that the two are separate entities at all. Mental illnesses can have physical causes, and often have a physical impact, and vice versa — poor physical health almost always takes a mental and emotional toll. Taking care of your health means taking care of both your body and your mind.

“There is no health without mental health.”

The World Health Organization

The way we feel, think, behave, react to and interact with the world around us are determined by our **mental state**. According to the World Health Organization, “[good] mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work **productively and fruitfully, and is able to contribute to their community.**” In other words, it means thriving instead of just surviving.

Source: [World Health Organization, “Mental Health: Strengthening Our Response, 2018](#)

Good mental health is more than just the absence of mental disorders or illnesses. People who live with a chronic mental illness can and do thrive, just as there are many people without a mental illness who can experience poor mental health. Positive mental health is the ability of people to feel, think and act in ways that enhance their enjoyment of life and deal with challenges. Positive mental health is about feeling good and functioning well.

Source: [Health Canada, “Measuring Positive Mental Health in Canada”](#)

Having good mental health doesn’t mean your life will be perfect. It’s about living well and feeling capable despite challenges.

The Five Characteristics of Good Mental Health

The Canadian Mental Health Association (CMHA) describes the following **five** characteristics of good mental health:

1 - The ability to enjoy life

Can you live in the moment and appreciate the “now”? Are you able to learn from the past and plan for the future without dwelling on things you can't change or predict.

2 – Resilience

Are you able to bounce back from hard times? Can you manage the stress of a serious life event without losing your optimism and a sense of perspective?

3 – Balance

Are you able to juggle the many aspects of your life? Can you recognize when you might be devoting too much time to one aspect, at the expense of others? Are you able to make changes to restore balance when necessary?

4 - Self-actualization

Do you recognize and develop your strengths so that you can reach your full potential.

5 – Flexibility

Do you feel, and express, a range of emotions? When problems arise, can you change your expectations — of life, others, yourself — to solve the problem?

Source: [Canadian Centre for Addiction and Mental Health - Introduction to Mental Health Course](#)

With these factors in mind, think about **a recent challenge you've faced related to your arthritis, then** consider the following questions from CMHA:

1. Did you feel there was no way out of the problem and that life would never be normal again? Did these feelings get in the way of living your life?
2. With time, were you able to enjoy your life, family and friendships?
3. **Were you able to regain your balance and find things to look forward to in the future?**

It's okay if you can't answer these questions positively at the moment. Don't be discouraged. If your mental health is particularly troubling to you or your loved ones, speak to a healthcare provider. Otherwise, below are some suggested strategies you may want to try. Think of them as exercises for mental health. In the same way that we need to exercise to keep our bodies healthy, we also need to actively take care of our minds.

Imagine the following scenario:

Your social life used to revolve around going on weekend hikes with your friends. The fatigue and pain that have come with your arthritis make this **difficult now, and you feel left behind when they go without you.**



How do you deal with this?

Naturally, you will experience sadness about this **change. That's normal. But then what? Some people** get stuck on the feelings of isolation and deprivation and get depressed. They might hold grudges against those friends.

What are some more positive ways to respond?

Flexibility

You might tell your friends you miss them and ask if you can sometimes get together to do an activity you all enjoy

Resilience

You might talk to your doctor and ask if there are better medications to control your pain and inflammation or talk to your physiotherapist about building strength so that you can go on short hikes again.

Self-Actualization

You might take a class on weekends to develop **another skill that you've always wanted to try.**

Balance

You might make a point to schedule fun time. It can be easy to get swamped in going to appointments and use up all your energy trying to get chores done, so make sure you plan time to do the things that make you feel like you.

The Ability to Enjoy Life

You might make a point to focus on the things that do give you pleasure, rather than on the things you miss.

MENTAL HEALTH METER

The Canadian Mental Health Association's Mental Health Meter is a questionnaire that will take you less than five minutes to complete. It asks questions related to each of the five characteristics of good mental health. It's not meant to provide a diagnosis, only to help you identify your strengths and indicate the areas where a little work could really pay off. <https://cmha.ca/mental-health-meter#.WATbF-UrldW>

THE RELATIONSHIP BETWEEN MENTAL HEALTH AND MENTAL ILLNESS



Mental health and mental illness are separate yet interconnected things. Each is measured on its own continuum.

The mental illness continuum runs from ‘no symptoms of mental illness’ at one end to ‘presence of a serious mental illness’ on the other. At one end of the mental health/wellness continuum lies ‘optimal mental health’; the continuum runs to ‘poor mental health’ at the other end. Therefore, someone can be mentally healthy with a mental illness and someone else can have poor mental health without a mental illness.

Source: Centre for Addiction and Mental Health, “Promoting mental health: Finding shared language”



This can be a little **difficult** to comprehend. These examples might serve to clarify.

Good mental health with a mental illness:



Sarah has been diagnosed with chronic depression, which has been an issue all her adult life. Clinical depression is an issue of brain function – it has a physical basis. However, Sarah has found medication that helps control her symptoms and has learned coping techniques with the help of a social worker. She has strong relationships with her family and friends, and knows where to get help if things become **difficult**. She still has a mental illness, but she enjoys life and copes with **difficulties** well.

Poor mental health with no mental illness:

John feels he has no one he can talk to about **life's** challenges and tries to keep his emotions buried inside. When things go wrong, he tends to lash out in anger. He sometimes drinks too much and comes to work hungover, which has put his job in jeopardy. John **doesn't** have a mental illness, but his mental wellness is extremely poor. He does not cope well with challenges that arise, and his life is much less successful and enjoyable than **Sarah's**



Even though “**poor mental health**” is not **defined** as an illness, according to the Canadian Mental Health Association, “**having** poor mental health is associated with emotional distress and psychosocial impairment comparable to that of a major depressive **episode**.”

Source: Canadian Mental Health Association, “**What is Mental Health and Mental Illness**”

“A large proportion of people will have a mental disorder at some point in their lifetime. Despite this, resiliency and recovery are common. For example, someone who has been diagnosed with arthritis and an associated generalized anxiety disorder may be engaged in effective treatments that may include medication and/or cognitive behavioural therapy. As a result, their symptoms are well- managed and they have effective coping strategies, such as relaxation techniques and an ability to challenge negative health beliefs, to use when symptoms worsen.”

Dr Renée El-Gabalawy

UNDERSTANDING MENTAL ILLNESS



According to the Canadian Mental Health Association, in **any given year, one in five** people in Canada experience a mental health problem or illness. By the time Canadians reach 40 years of age, half currently experience or have experienced a mental illness.

Source: [Canadian Mental Health Association](#)

People living with chronic physical conditions, including arthritis, experience anxiety and depression at a higher rate than the general population. It is not uncommon that a disability or mobility limitation can lead to depression and anxiety, given existing structural barriers that a person with a disability may face. In turn, depression and anxiety can affect your functional ability, pain levels, and quality of life.

Source: [John Hopkins, Arthritis Centre, "Staying Health with Arthritis: Body and Mind", 2015](#)

In this section, we will discuss the relationship between mental health and mental illness, learn to recognize the signs of a mental health problem, and discuss how to get help.

Our mental health is not constant. Just as our life circumstances continually change, so do our moods, thoughts, behaviours and sense of well-being. We strive for balance in our lives over time and in a range of situations. It is natural to feel off-balance at times; we all experience fear, anxiety and sadness in response to life events. If these kinds of feelings persist over a long period **of time, lead to significant** distress and lessen our ability to function, it can be a sign of a developing mental illness.

Source: [Centre for Addiction and Mental Health, "Definitions: Mental Health vs Mental Health Problems, Mental Wellness vs Mental Illness"](#)

In most cases, symptoms can be managed with some combination of medication, physical activity and/or psychotherapy. If you suspect that your distress is becoming problematic, talk to your family doctor, a mental health specialist, an arthritis specialist, another member of your healthcare team, or a community **member. It can be difficult to** talk about our negative feelings, but keeping them bottled up actually makes things worse.



Source: [Mayo Clinic, "Diseases and Conditions, Mental Illness"](#)

THE LINK BETWEEN ARTHRITIS AND MENTAL HEALTH



The Arthritis Society surveyed people living with arthritis about the relationship between their disease and mental health. Many reported that as their arthritis pain increases, so does their stress, **anxiety and depression**. **What's** interesting is that many people had not made the connection between arthritis and mental health.

"The worse my arthritis gets the more I worry and the more I get anxious about losing time (at or from) work or not getting better, which in turn makes my pain worse. If this is a genuine quote, editing may not be appropriate."

Survey Respondent

"I did not realize that they were linked. I can see how they would be though, as **one's** quality of life is so diminished when dealing with arthritis."

Survey Respondent

If you live with arthritis and experience anxiety or depression, it's crucial to address your emotional and mental health as part of your overall healthcare. Some people have pre-existing mental health conditions, while **others may find that their** mental well-being decreases as their arthritis symptoms increase.

Understanding the link between your mind and your body is the first step in developing self-management strategies that will help you live your best life.

ARTHRITIS AND GRIEF



We usually associate the concept of grief with the death of someone close to you. But grief is a natural response to any sense of **loss, and it's a common response to being diagnosed with a chronic illness.**

Receiving a diagnosis of arthritis can lead to many different emotions. Some days you may be in denial and want to pretend that everything is the same as before. Other days you may be angry, sad or **depressed**. **It's** important to know that these feelings are normal, and usually ease over time.

Source: American Psychological Association – Coping with a Diagnosis of Chronic Illness

If you're not sure that your grieving process is normal, talk to your doctor or another healthcare professional. **An outside perspective can be beneficial as you adjust to your condition and the changes** that it may bring.

"It is quite common for people living with arthritis to feel a sense of loss for activities that they are no longer able to do, or even for the possibility of 'what might have been' for their lives without illness. Recognizing emotions such as denial, anger, and sadness as normal phases of grief – and working patiently through these – can be an important part of achieving recovery and wellness."

Dr. **Judith Peranson, Family Physician, St. Michael's Hospital, Toronto**

ARTHRITIS & ANXIETY AND DEPRESSION



Anxiety and depression are more common amongst individuals with arthritis than in the general population. One study tested 1,793 adults with arthritis and found that one-third of respondents were living with depression, anxiety or both. The study also indicated that less than half of the respondents with anxiety and/or depression had gotten any help in the past year.

Source: Louise B. Murphy et al – Anxiety and Depression Among U.S. Adults with Arthritis – Arthritis Care & Research, 2012

A second study found that people with rheumatoid arthritis are twice as likely to suffer from depression as compared to the general population.

But even though depression and anxiety affect functional ability, pain and quality of life, these mental health issues are often underdiagnosed and undertreated in arthritis patients.



Source: Johns Hopkins Arthritis Center, “Staying Health with Arthritis: Body and Mind, 2012

According to the Canadian Psychological Association, **“the high rate of depression [amongst people with rheumatoid arthritis] is not surprising when you consider the impact that the disease can have on a person’s ability to participate in life and the significant pain that often accompanies joint damage.**

In addition, significant flare-ups of symptoms are common and unpredictable. These changes can **influence** your ability to work and affect **family and social relationships.”**

Losing the ability to do the things you feel are important, like visiting family or going away on a holiday, can have a huge impact on your sense of well-being. **One researcher found that just “a 10 per cent reduction in ability to perform these valued activities can be followed by a seven-fold increase in depression over the subsequent year.”**

Source: C. Dickens et al. The burden of depression in patients with rheumatoid arthritis – Rheumatology 2001

It's clear that the stresses of living with arthritis can negatively impact mental health. But it is also true that negative emotions can worsen your arthritis symptoms.

Data from the Canadian National Population Health Survey showed that people with long-term illnesses who were depressed experienced more disability and curtailed their activities more than non-depressed patients.

Source: S.B. Patten, Long-Term Medical Conditions and Major Depression in the Canadian Population - Canadian Journal of Psychiatry 1999

Stressful events, particularly interpersonal stressors (like relationship and family troubles) increase symptoms of arthritis.

Source: Canadian Psychological Association, Psychology Works – Fact Sheet: Arthritis

Depression and anxiety can also lead to negative coping behaviours that are related to worsening arthritis symptoms like avoiding physical and social activities, over-eating, or alcohol and drug abuse. It is also likely to affect how well we follow our treatment plans; depressed patients report more physical symptoms, are less likely to be reassured by a doctor and less likely to take their medication as directed.

Source: G. Magni et al. Prospective study on the relationship between depressive symptoms and chronic musculoskeletal pain – Pain, 1994



On the other hand, when you feel more in control of your pain and adopt active coping strategies, the sense of achievement and feeling less helpless leads to less pain, less depression and less disability.

Source: Canadian Psychological Association, Psychology Works – Fact Sheet: Arthritis

ASSESS YOURSELF

Please note, these tools are not intended to provide a diagnosis or replace the advice of a doctor or mental healthcare provider. If you are concerned about your mental health, please speak to a healthcare professional. The University of Michigan Depression Center has quick assessment tools (7 to 9 questions) to gauge your anxiety and depression level: <https://www.depressioncenter.org/toolkit/im-looking-more-resources-1/self-assessment-tools>

STRESS BUSTING



WHAT IS STRESS?

We all talk about stress, but we're not always clear on what it is. Stress comes from both the bad things — feeling overwhelmed, under pressure — and the good things that happen to us, like getting married or starting a new job, that happen to us. Stress **isn't always** detrimental — it can give you the push you need to accomplish great things.

According to the Mental Health Foundation, stress at the most basic level is our **body's** response to pressures from a situation or event:

"When we encounter stress, our body is stimulated to produce stress hormones that trigger a 'flight or fight' response and activate our immune system. This response helps us to respond quickly to dangerous situations. Sometimes, this stress response can be an appropriate, or even beneficial reaction. The resulting feeling of pressure can help us to push through situations that can be nerve-wracking or intense, like running a marathon, or giving a speech to a large crowd. We can quickly return to a resting state without any negative effects on our health if what is stressing us is short-lived, and many people are **able to deal with a certain level of stress without any lasting effects."**

Mental Health Foundation

However, problems arise when stress becomes too much to deal with or goes on too long. When we experience stress for an extended period of time or if our stress response is triggered frequently, it can **wear down our bodies and we may constantly feel in a state of "fight or flight."** Instead of encouraging us to challenge ourselves, it can overwhelm us and leave us feeling unable to cope. This type of stress experienced for prolonged periods of time is often referred to as chronic, or long-term stress, which can negatively affect our physical and mental health.

Source: [Mental Health Foundation – Stress](#)

THREE TYPES OF STRESS

Stress falls into three main categories, according to the National Institute of Health (NIH):

1. Routine stress related to pressures of work, family and other daily responsibilities.
2. Stress brought about by a sudden negative change such as losing a job, divorce or illness.
3. Traumatic stress, experienced in an event like a major car accident, war, assault, or natural disaster where one may be seriously hurt or in danger of being killed.

Source: [National Institute of Health, Transforming the understanding and treatment of mental illnesses - Fact Sheet on Stress](#)

The NIH points out that while the second and third type of stress **are the most dramatic, the first type, routine and ongoing stress, is dangerous because, as it happens over time, it's likely to go unnoticed and untreated.**

“Because the source of stress tends to be more constant than in cases of acute or traumatic stress, the body gets no clear signal to return to normal functioning. Over time, continued strain on your body from routine stress may lead to serious health problems, such as heart disease, high blood pressure, diabetes, depression, anxiety disorder, and other illnesses.”

- National Institute of Health



WHAT'S YOUR STRESS INDEX?

According to the Canadian Mental Health Association, stress can be difficult to understand. The emotional chaos it causes can make our daily lives miserable and decrease our physical health. Strangely, though, we are not always aware that we are under great stress. It can build up slowly, making the signs hard to recognize because they have become so familiar. <https://cmha.ca/whats-your-stress-index>

TAKING ACTION AGAINST STRESS



STRESS-BUSTING TIPS

Ignoring the effects of stress can lead to other **mental health issues**. There is no “right way” to **fight stress**. The tips below are from the **Canadian Mental Health Association**. You may want to try them out and see what works best for you. Remember to test both short- term and long-term **solutions when you’re dealing with stress**.

Identify the problem. What are the underlying causes that are making you feel stressed – are you worried about work, family, school, money? Do you get upset about the little things when they might be masking deeper issues? Once you can determine the sources of your stress, you can start to take action to address them.

Solve problems as they come up. Rather than ignoring a problem or putting it off until later, be proactive and try to address it directly. This can help reduce stress because sometimes the anticipation of dealing with an issue can add to our worry. What can you do, and what might be the results? Your **solution doesn’t need to be perfect** — just focus on doing the best you can and ask for help if needed. You can break up the work into manageable pieces rather than approach it as one big task, which will **give you a sense of accomplishment as you finish one piece at a time**. **Practicing your problem-solving** skills will help you get better at it and can give you a greater sense of control over your stressors.

Talk about your problems. Keeping our stress bottled up inside can make the problem worse. Try opening up about it with your family or friends. They may not realize what you are going through and can provide help and support. Just having someone to listen may provide a source of relief. They might also have useful suggestions to help you approach your challenges. You could also ask your family **doctor to refer you to a counsellor or find out what supports are available to you through your work, school or faith community**.

Simplify your life. **Don’t be afraid to set boundaries for yourself and say “no” when you are feeling overwhelmed.** Give yourself permission to look after yourself and focus on only the really important things. Stress can arise when we try to do too much at once. Prioritize your to-do list to help you manage what needs to be done, what can someone help with, and what is less important.

Learn helpful thinking strategies. How we perceive a situation will impact the way we respond to it. If we focus on the negative aspects, such as what could go wrong or the challenges we face, it can make **the situation seem more difficult than it really is.** **Focusing on the positive aspects, such as what could go right or what we are able to control can make it easier to address.**

Start on the inside. **Reflective practices such as breathing exercises, meditation, yoga, prayer or mindfulness can help clear your mind and enable you to look at your problems from a different point of view,** The more you practice these types of activity, the easier it will become to use them when stressful situations arise.

Get active. **Exercise can help relieve stress and put you in a better mood. You don't need to really exert yourself to benefit. Even taking a walk around the block can help.** It's important to just get moving. If **physical activity is difficult for you, your doctor or another healthcare provider might be able to provide you with some suggestions.**

Do something you enjoy. Sometimes when we are in pain or feeling sad, we may not make time for the things we enjoy doing. However, spending time on hobbies, with friends, or doing other activities we like is even **more important when we're not feeling well to give our minds a break.** Watch a movie, listen to music, do a crossword puzzle – whatever makes you happy. Try to schedule some time every day to do at least one activity that makes you feel good.

Can I prevent stress?

While we can take steps to reduce stress, unfortunately we are unable to eliminate it from our lives entirely. However, stress management techniques can help us better cope with stress and bounce back from challenging situations more quickly.

The strategies outlined above can help you take control of your stress before it starts to control you. Just like when learning any new skill, practice will help you get better and make it easier for you to deal with **difficulties as they arise.**

Source: [Canadian Mental Health Association, "Stress"](#)

SELF-MANAGEMENT STRATEGIES



When you live with arthritis, physical changes caused by your condition can affect your ability to do things you used to be able to do, and these changes can lower your self- **esteem**. **When people don't feel good about themselves**, they tend to withdraw from family, friends and social activities, which can make dealing with challenges even harder. Stress, anxiety and sadness are normal emotions, but if not managed properly, they can start to interfere with your life in serious ways.

In this section, we will provide you with some suggested approaches for dealing with stress, challenges and negative emotions. Adopting a few that work for you will improve your sense of well-being, and in turn, help you to better manage your overall health.

“When you are diagnosed with a chronic illness such as arthritis, your life changes, and with this comes changes in plans and changes in emotions. Many of these emotions are negative. They may include **anger** (‘Why me? It’s not fair.’), **depression** (‘I can’t do anything anymore, what’s the use?’), **frustration** (‘No matter what I do it doesn’t make any difference. I can’t do what I want to do.’), or **isolation** (‘No one understands.’). **Managing your arthritis, then, also means learning skills to address these negative feelings.**”

Kate Lorig, RN, DrPH, Holman, Halsted, MD, et al,
“Living a Healthy Life with Chronic Conditions”

IMPROVING YOUR MENTAL HEALTH



We all have different paths to achieving mental well-being, just as we all have our own goals, challenges, talents and supports. According to the Canadian Mental Health Association (CMHA), good mental health is within everyone's reach. **Below are their tips to help you discover your strengths and activities to try to foster your well-being.**

Build healthy self-esteem

Self-esteem isn't just about focusing on your good qualities. It's about being able to recognize your strengths but also to accept that we all have weaknesses and trying your best regardless. Everyone has unique abilities and talents. You may not be able to do things exactly like another person, but you have your own set of skills and attributes. Self-esteem means thinking about what you are able to contribute **and using that confidence to pursue your interests and goals. Self-esteem can't come from comparing ourselves to other people, but only from recognizing value within ourselves.**

Activity: Build Confidence

Take a good look at your good points. What do you do best? Where are your skills and interest areas? How would a friend describe you? **Now, look at your weak points. What do you have difficulty doing?** What things make you feel frustrated? Which list was easier to write? Remember that all of us have our **positive and negative sides. We build confidence by developing our weaker areas** and regularly reminding ourselves of the things we're comfortable with and proud of. (CMHA 2018)

Build positive support networks

Creating and maintaining good relationships takes effort, **whether it's with family members, friends, partners, colleagues, or other important people in our lives. Trust isn't** something that happens immediately, but takes time to build. While it might take courage to reach out to another person, the reward is worth the effort. Social support plays a big role in our mental health and well-being. We may look to different people for different kinds of support, such as providing advice and guidance, emotional support, or helping out when needed. There are lots of different sources that we can turn to for support, including friends and family, classmates or co-workers, neighbours, faith communities, in-person or online support groups, or healthcare professionals, to name a few.



Activity: Make Time

Sometimes when we're not feeling well, we might be tempted to turn inward and spend less time with other people. Or else just coping with a chronic condition like arthritis can leave us with little energy to socialize. However, making the effort to spend time with others can help improve your mood and provide a distraction from your symptoms.

Challenge yourself to make plans for some social time at least once a week. Whether it's scheduling a phone call with a friend, drawing pictures with your kids, or having lunch with a co-worker, tapping into your support network can really be a mood booster.

Get involved

When pain or limitations are getting you down, sometimes getting involved in activities that provide a larger sense of purpose can shift your focus elsewhere and provide a sense of satisfaction. You can make a difference, no matter whether the amount of time and energy you have is large or small. Contributing to your community or a cause can help connect you with others who share similar interests and introduce you to people you may otherwise not meet. This can also help you develop new skills and increase your **confidence, while enabling you to see your abilities in a different light.**



Activity: Volunteer

Sign up to volunteer in your community or online. There are lots of different ways to get involved. You could read to children at your local school or library, help out at a fundraising event, join a committee of your favourite charity, visit people in a care facility, or get involved with a faith community. Make sure to listen to your body and physical ability before choosing your volunteering placement. If mobility is a challenge for you at the moment, look into e- volunteering opportunities. You may be able to help with **writing an organization's newsletter, doing online research, translating material, or e-mentoring** by sharing your experiences and knowledge.

Build resiliency

Problems and stress are unavoidable in our lives. However, we can develop our resiliency, which will **enable us to cope more effectively when we're faced with challenges. Situations like the loss of a loved one or a job, accidents or illness can happen to anyone.** Resiliency is what helps us bounce back eventually when we face setbacks. It can mean looking at a situation realistically, determining what we **can change through our actions and what we can't, as well** as reaching out to others when we need support.

Strengthening our resiliency might mean working on skills such as problem-solving, prioritizing, assertiveness, and relationship-building. While some people may come to develop these skills through treatment for mental illness, they really are important life skills for everyone. You can learn more about how to develop these skills through online learning, community classes or organizations, as well as through your healthcare professional.

Activity: Build your Own Toolkit

Set aside time to think about the resiliency tools you already have. This might include skills like structured problem- **solving or people who can help you during difficult situations. Remember to include** strategies that have worked for you in the past. Keep your list on hand and use it as a reminder when you **need help. It's also a** good way to see where you might want to build new skills or supports. (CMHA 2018)

Recognize your emotions

Negative emotions are part of being human, no one is expected to be happy all the time. Emotional well-being isn't so much about always feeling good as it is about finding healthy ways to cope with and express our emotions in a way that is respectful of everyone, including ourselves. Keeping our feelings bottled up inside doesn't respect our own needs, while lashing out at others doesn't respect theirs. Emotional well-being also involves developing an awareness of how our emotions can impact the way we think or act, taking responsibility when we respond inappropriately, and learning to accept the fluctuations in our feelings.

Activity: Identify and deal with your moods

Think about what makes you feel happy, relaxed, angry or sad. Can you remember the last time you had a really good laugh? When you felt really calm? You may want to keep a list of things that make you feel good and pick one to try when you're feeling low. Find strategies to express your emotions in a healthy way – celebrate good news with a friend or reach out for support when you're feeling sad. Keep some funny movies, cartoons or joke books on hand when you need a laugh, or turn on your favourite music to pump you up or calm you down. Physical exercise can help you deal with your anger or anxiety.

Take care of your spiritual well-being

Spiritual well-being means getting to know ourselves, discovering our values, and learning to be at peace with who we are. It also involves finding and connecting to something bigger than ourselves and living with purpose. Spirituality can give us meaning and solace, help us overcome challenges, and help us build

connections with others. This may mean religion for some, but it doesn't have to – it's really about how we feel on the inside. (CAMH 2018)

Activity: Connect with yourself

Find some quiet time when you can be alone without distraction and try the following breathing exercise: inhale slowly as you count to four, then exhale slowly as you count to four. As you exhale, imagine all the stress and tension leaving your body with your breath. If you practice a faith, you may want to set aside some time for prayer or to engage with your faith community. Taking care of your spiritual self can also mean doing something you love like baking, going on a walk, painting or playing basketball. Whatever helps you re-connect with yourself.

For a helpful reminder of these tips, print out the Canadian Mental Health Association's Mental Health for Life brochure. <https://cmha.ca/wp-content/uploads/2016/02/MH-for-Life-NTNL-brochure-2014-web.pdf>

FOOD AND MOOD



In this section, we will take a brief look at the kinds of foods that can support your mental health.

Can what we eat really affect how we feel emotionally and mentally? Yes, research shows that what we eat directly affects the structure and function of our brain and, ultimately, our mood.

Source: Harvard Health Publications, Harvard Medical School, “Nutritional psychiatry: Your brain on food”

Eating Well goes into much more detail about the kinds of foods that will you manage your arthritis overall. <https://arthritis.ca/support-education/online-learning/eating-well>

Our brain is always on, regulating both our thoughts and emotions and our bodily functions. It needs a constant source of fuel, and that fuel comes from the food we eat. What is in the fuel makes all the difference.

Diets high in refined sugars and carbohydrates are harmful to the brain. Multiple studies have found a relationship between a diet high in refined sugars and reduced brain function, and even a worsening of symptoms of mood disorders, such as depression.

Source: Harvard Health Publications, Harvard Medical School, “Nutritional psychiatry: Your brain on food”

Eating fewer foods that are high in sugar and **refined carbohydrates and increasing the amount of whole grains, nuts, beans, legumes, fruits and vegetables** will make it easier for your brain to do its job — your blood sugar will be more stable, meaning fewer mood and energy swings, and these foods contain vitamins and nutrients that have been associated with control of mood as well.

Source: Mental Health Foundation, “Diet and mental health”

It can be difficult – when you're depressed, junk food can provide a short-lived boost, and preparing healthy food can seem like an overwhelming task. Make use of the healthier convenience foods that have become available. If you don't have the energy to make a salad, buy a salad in a bag. Keeping bags of pre- chopped frozen vegetables can make life easier too.

ADDING OR ELIMINATING FOODS — EXPERIMENT AND TRACK



Everyone responds differently to foods and supplements. While magazines and websites seem to constantly uncover what foods and supplements can solve all your issues, the science is still new and views are constantly changing. What works for one person may **backfire on another**.

The only way to tell what might work for you is to try. If you feel you might be responding poorly to a particular food **and are thinking of eliminating it from your diet, talk to your healthcare professional first** about your plans. Try eliminating the food for a set period of time, and keep track of how you feel.

Afterwards, try adding the suspected food back into your diet and note any changes. The same protocol applies if you want to try adding a kind of food. The only way to know if that will work for you is to try it, assuming your healthcare professional judges it to be safe.

Source: Arthritis Society: Food to the Rescue: Using Food to Manage Inflammation, 2016

Start your own food and mood journal. Keeping track of what you eat and how you feel afterwards can help you to understand what works for you.

Download our [Food and Mood Tracker](https://www.arthritis.ca/AS/media/pdf/Support%20and%20Education/EN-food-and-mood-tracker.pdf) to help you figure out what works for you. <https://www.arthritis.ca/AS/media/pdf/Support%20and%20Education/EN-food-and-mood-tracker.pdf>



The image shows a digital form titled "FOOD AND MOOD TRACKER". At the top, there are two "DATE:" fields. Below that, there is a section for "Hours of sleep:" with a sub-question "How many hours of sleep?" and "Was it interrupted? Why?". The main section is "Food and water:" with instructions: "List the food and beverages that you consumed and draw a line through each glass of water you drank throughout the day." This section is divided into two columns: "Breakfast:", "Lunch:", "Dinner:", "Snacks:", "Water:", and "Other beverages:". Each of these categories has a corresponding grid of small boxes for tracking consumption.

NUTRIENTS TO FIGHT DEPRESSION



Research is continuously teaching us about the complex ways that the body, and **specifically the brain**, reacts to various elements of food. Here are **some recent findings** that are relevant to dealing with depression:

B vitamins:

Depression has been linked to a shortage of vitamins in the B family, including B6, B12 and folic acid. Ask your doctor if you should supplement your B vitamins. Eating plenty of leafy greens can help boost folic acid.

Vitamin D:

Anxiety and fatigue can be **related to vitamin D deficiency**. **There are only a few foods that are rich in vitamin D – oily fish and fortified milk and orange juice**. Small doses of sunlight without sunscreen – 10 minutes without sunscreen a few times per week – provides a nice D dose too. Talk to your doctor about whether a supplement is a good idea for you.

Minerals:

Calcium, iron, magnesium, selenium and zinc also seem to help prevent or lessen symptoms of depression

Omega-3 fatty acids may also help fight depression. Omega-3 fatty acids are found in fish such as tuna, salmon and sardines, as well as fish oil supplements

Source: University of Michigan Depression Center Depression Toolkit.

WHAT TO DRINK



Hydration is critical to brain function. Even mild dehydration can affect your mood, cognitive skills and memory.

A study done at the University of Connecticut found that mild dehydration caused a measurable increase in negative mood in healthy subjects.

Source: [Lawrence E Armstrong et al., "Mild dehydration affects mood in healthy young women" Journal of Nutrition, 2012](#)

Another study found that people performed as poorly at a driving simulation task when they were dehydrated as when they were at the legal limit of alcohol in their bloodstream.

Source: [Phillip Watson et al., "Mild hypohydration increases the frequency of driver errors during a prolonged, monotonous driving task." Physiology & Behavior, 2015](#)

You've probably heard that you need to drink 8 glasses of water every day. That's a good guide, but everyone is different. A quick way to know if you are drinking enough water is to check your urine. If it is consistently colourless or light yellow, you are probably drinking enough water. If it's dark you're probably dehydrated.

Source: [American Academy of Family Physicians](#)

Other beverages

Water should make up most of what you drink. High sugar drinks like pop and fruit drinks and even juice can send your blood sugar on a roller coaster ride, so they should be enjoyed in moderation.

Alcohol is a depressant, so if you are feeling bad it's even more important to moderate your intake.

PHYSICAL ACTIVITY AND MOOD



When you're feeling fatigued, stressed, anxious or depressed, being physically active can be the last thing you feel like doing. But the truth is that an enormous body of research shows that physical activity can help improve your mood. Physical activity is anything that gets you moving.

In this section, we will take a brief look at why boosting your physical activity level can support your mental health.

Source: Harvard Health Publications, Harvard Medical School, "**Exercise and Depression**"

Staying Active goes into more detail about the overall benefits of getting physically active and explores ways you can get more exercise even when you have painful joints. <https://arthritis.ca/support-education/online-learning/staying-active>

WHAT IS PHYSICAL ACTIVITY?

You don't need a gym membership to be physically active. According to the World Health Organization (2018), physical activity is any movement of the body that uses the muscles and requires energy, including activities while working, playing, carrying out household chores, travelling, and engaging in recreational sports. Both moderate and intense physical activities bring **health benefits**.

Source: World Health Organization (WHO), Physical Activity Fact Sheet

EMOTIONAL AND MENTAL BENEFITS OF EXERCISE AND PHYSICAL ACTIVITY

Studies report that exercise and other forms of physical activity can help ease depression and anxiety. Getting active releases chemicals called endorphins that can ease depression and also reduces stress hormones like adrenaline and cortisol, which can worsen depression.

Here are some of the mental and emotional benefits of exercise, according to the Mayo Clinic (2018):

1. **Gain confidence.** Meeting exercise goals or challenges, even small ones, can boost your self-confidence. **Getting in shape** can also make you feel better about your appearance.
2. **Take your mind off worries.** Exercise is a distraction that can get you away from the cycle of negative thoughts that feed anxiety and depression.
3. **Get more social interaction.** Exercise and physical activity may give you the chance to meet or socialize with others. Just exchanging a friendly smile or greeting as you walk around your neighbourhood can help your mood.
4. **Cope in a healthy way.** Doing something positive to manage anxiety or depression is a healthy coping strategy. Trying to feel better by drinking alcohol, dwelling on how badly you feel, or hoping anxiety or depression will go away on its own can lead to worsening symptoms.

Source: [Mayo Clinic, "Depression and anxiety: Exercise beases symptoms"](#)

GETTING STARTED



It may help to start thinking of exercise or physical activity in a different way – **you don't** have to do it all at one time, but you can add small amounts throughout your day.

For example, get off the bus one stop early, walk over to a colleague's desk to ask a question instead of sending an email, or take the stairs instead of the elevator. If walking is difficult for you, find other ways to stay active, such as doing stretches or working out your upper body.

For more tips on getting started and staying motivated, check out what counts as physical activity in our Staying Active learning module. <https://arthritis.ca/support-education/online-learning/staying-active>

EXAMINE YOUR THOUGHT PATTERNS

When life is difficult, it's natural that our thoughts become negative. It's important, however, to be aware that when negative thought patterns become automatic and habitual, we can actually make things worse for ourselves.

Often you cannot change a situation, such as a diagnosis of arthritis, but you do have the ability to change how you **react to a situation. This is not easy and it takes a lot of conscious effort. The first step is** to be aware of your thinking patterns. No one is suggesting that you can simply think your problems **away, but finding a slightly more positive spin on the stories** we tell ourselves can make a huge difference in what seems possible.

The idea of “the power of positive thinking” has become somewhat cliché, and it's often misunderstood. Tricking yourself into being unrealistically optimistic is bound to backfire when real life intervenes. Instead, strive for a fair and realistic assessment of yourself and the situations you experience.

Unhelpful thinking involves:

- Unrealistic, hopeless and negative thoughts about your situation
- Harsh and unfair self-criticism
- Extreme negative thoughts about your future

This type of thinking can affect how you handle your arthritis since it:

- Feeds into negative emotions (sadness, fear, discouragement)
- Reduces your motivation to take active steps to manage your pain
- Can cause you to withdraw from people who care about you

Source: [Dealing with Depression – Ministry of Children and Family Development](#)

Not only will these factors worsen your mood, they can increase your experience of physical pain. Learn to examine your thoughts. Are they fair and realistic? What would you say to a friend who was in your position?

- Recognize when you are having an unhelpful/negative thought (is it tied to a particular situation?)
- Notice how your unhelpful/negative thoughts can be connected to your low mood and how they affect your behaviour
- Try revising the negative thought with a more fair and realistic thought. The next section will provide some examples of how to do this.

POSITIVE (BUT REALISTIC) SELF-TALK



Self-talk is our inner conversation of those habitual things we say or think to ourselves. We all do it, whether we realize it or not. Negative self-talk can make our life seem like an uphill battle and can perpetuate negative moods and increase pain and fatigue. Learning **to change one's** self-talk from negative to positive is an important tool.

ON WAKING UP BEFORE GOING TO WORK:

NEGATIVE: "Getting up is so hard. All I want to do is stay in bed. Everything I have to do today seems so overwhelming."

POSITIVE: "Getting up is hard, but I know that once I get going it will get easier. I have a lot to do today, but I just have to take it one step at a time and do my best."

ON EXERCISE:

NEGATIVE: "I know I'm supposed to exercise, but I just can't. Just thinking about it makes me tired. I can't play tennis or go running like I used to. And I know that I'd end up in pain no matter what I tried."

POSITIVE: "If I start small and see how it goes it will be better than doing nothing. I could go to the mall and walk around. If I get too tired, I could sit down on a bench and rest."

SOME TYPES OF HARMFUL THOUGHT PATTERNS



The following information has been adapted from the Centre for Applied Research in Mental Health and Addiction (CARMHA) and BC Mental Health & Addiction Services (BCMHAS) (2009).

Step 1: Learn to identify depressive thoughts

Negative thoughts about ourselves and our condition are often unfair and unrealistic. When we are feeling low or depressed, we have a tendency to distort negative situations, that is, to think of them in a way that may not be an accurate reflection of reality. Some common forms of distorted thinking include the following¹:

Filtering: Focusing only on the bad and failing to see the good. Realistic thinking takes into account both the positive and negative aspects of a situation.

Overgeneralization: Assuming that the outcome of one situation will be the same for all situations. **For example, if one type of medication didn't work, assuming that no treatment will ever bring relief** from your arthritis pain. Realistic thinking recognizes that the results of one situation do not predict the results of another.

All or Nothing Thinking: Viewing the world in terms of extreme opposites with nothing in between – i.e. something is perfect or horrible, a treatment will relieve all of your symptoms or none of them, if you are not joyful you are depressed. Small changes are never enough because only a complete change will **satisfy you. For example, thinking "Who cares if I walked a block further today? I still can't walk as far as I used to."** Realistic thinking recognizes that most situations fall in the middle, between extremes, and celebrates small improvements.

Catastrophizing: **Turning a small disappointment into a major disaster. For example, if you have a flare up and need to take a day off work, you assume you are going to have a terrible month and get behind on all your projects. Instead of reacting to the actual event, one day off, you react to an imagined catastrophe, a whole month of falling behind. Realistic thinking recognizes the true significance of an event and doesn't overemphasize the prospect of potential negative future outcomes.**

Labeling: Describing yourself or your actions in a harsh way, such as “idiot” or “foolish.” You label yourself and your behavior in ways you wouldn’t refer to someone else in the same situation. Realistic thinking recognizes these kinds of insults are unfair and inaccurate and can be unnecessarily discouraging.

Mind-reading: Assuming you know what others are thinking about you and that it’s always negative. This can lead you to react based on your assumptions rather than on an actual conversation. Realistic thinking recognizes that you can’t guess what another person is thinking and your assumptions are likely to be inaccurate when you’re depressed.

Fortune-telling: Thinking that you can predict the future and that it’s all negative. You are doomed to be unhappy, so why bother trying to make things better? Realistic thinking recognizes that you can’t foresee how things will turn out and that keeping your mind open to possibility can make you more hopeful.

Shoulds: Assuming you know what the world and your life should be like, but they don’t meet your expectations. This can lead to constant disappointment and anger with yourself and others. Realistic thinking recognizes the limitations of the world and of yourself, seeking opportunities for improvement but also accepting things that can’t be changed.

If you find yourself caught up in negative thoughts, it may be helpful to refer back to this list to identify a more realistic way to look at a situation.

¹ For further information about types of distorted thinking, see *Feeling Good* by David Burns (Avon, 1992).

Step 2: Recognize your depressive thoughts and how they trigger a low mood

Our thoughts about a situation can be so quick and automatic, we may not even be aware of them. Taking time to notice our depressive thoughts is an important step towards shifting them.

When we’re feeling low, it may feel like the negativity will never lift. However, our mood can shift throughout the course of a day.



Every time your mood sinks, ask yourself this important question: “What was going through my mind just then?”

What were you thinking about? What were you reacting to? Write this down. For example, perhaps getting on the **bus one morning you suddenly felt a deepening of the gloom you’ve been feeling**. What was going through your mind just then? Perhaps you noticed that everyone on the bus was facing you, and you had the thought that they were judging you negatively. Write it down!

Keep recording your thoughts until you notice that the same kinds of depressive thinking come up again and again. (CARMHA & BCHMAS, 2009)

Then what? You may start to notice that some of your depressive thoughts are distorted and not a true representation of reality. Perhaps everyone on the bus was facing you because you were at the front, not because they were judging you. Sometimes it might be helpful just to recognize that your mind produces depressive thinking in some situations. Take notice of this and think about where these depressive thoughts come from. You may be able to pay less attention to them or take them less seriously if you are aware of where they come from.

Step 3: Learn to avoid depressive thoughts and replace them with realistic ones

Shifting depressive thoughts involves intentionally **re-thinking the situation that was upsetting in the first place**. Create a chart like the one below to help you analyze a situation from a realistic thinking perspective. To begin, make a note about the **situation, for example, “getting on the bus,” “talking to boss,” “planning to do housework.”** Next, record the negative thoughts that seem to be associated with how you feel.



Finally, reflect on the situation and try to identify a more realistic perspective. Keep in mind that depressive thinking may not be aligned with the facts. Sometimes a more realistic perspective may **simply involve reminding yourself that you don’t have enough information to know for sure what is happening.**

If you're having a difficult time coming up with realistic thoughts, asking yourself the following questions may help:

1. Can I find out more about the situation, perhaps by asking someone else?
2. Would most people agree with my perspective? If not, what might be more realistic?
3. How would a friend interpret the situation?
4. If I continue to think this way, what will be the impact?
5. What is another way of interpreting the situation that is more helpful or encouraging?

From CARMHA & BCHMAS (2009):

SITUATION: [Example] Friend cancels lunch date

DEPRESSIVE THOUGHT

She doesn't like me now that my arthritis restricts my abilities. (*Mind-reading*)

No one likes me now that I have arthritis, I'm unlikable. (*Overgeneralization*)

Life with arthritis is unfair - the world is a cold and rejecting place. (*Catastrophizing*)

REALISTIC THOUGHT

I don't know why she cancelled; maybe something urgent came up. It's only lunch.

Some people do seem to like me, so I must be likable.

This lunch doesn't mean much about the world as a whole. I've been accepted before

Step 4: Practice Realistic Thinking

We often unintentionally repeat our depressive thinking until it becomes automatic. But in the same way that we can develop depressive thinking patterns, so too can we develop realistic thinking patterns with **repetition. It may be challenging at first, but the more we practice, the easier it will become.**

Particular types of situations may be more likely to trigger depressive thinking than others, such as **having an argument with a family member or attending a social gathering where you don't know many people.** Think of a few types of situations that usually trigger depressive thoughts for you and write them down.

Once you've identified triggering situations, try to come up with realistic thinking that you can rehearse

to put into practice in these moments. A realistic perspective may not arise on its own, you will need to remind yourself to think of things from a different point of view. Imagine what advice you might give to a friend in a similar situation.

“Talk back to the depressive thinking. Don’t allow depressive thinking to happen without replying to it. Every time you talk back, you make the depressive thinking weaker and the realistic thinking stronger. But it takes time before realistic thoughts have more influence over you than depressive ones.... Only with time and repetition does realistic thinking – the truth – begin to feel true to you. Eventually you will come to accept realistic thoughts.”

(CARMHA & BCHMAS, 2009)

Download this reminder sheet to help you stay focused and positive.

<https://arthritis.ca/getmedia/07b042fd-351a-4c6c-8388-e18dc0b93b8d/EN-Thinking-Realistically-Worksheet.pdf>



EMOTIONAL EVENT WORKSHEET



There are many different versions of this powerful cognitive behavioural **technique**. **It doesn't take long, but** it can do a great deal to help you understand your emotional reactions and identify unhelpful thought patterns.

Step 1: When you are experiencing strong negative feelings, write down the situation that has caused this reaction. You can also choose to do this for a situation that occurred in the past.

Example: I am unable to go on the trip I was planning with friends because my arthritis pain is too high.

Step 2: Identify the emotions you are feeling and how strongly you are feeling them from 0 (not at all) to 10 (a lot).

Example: I am feeling frustrated (10), hopeless (8), angry (3)

Step 3: What are the thoughts that are going through my mind? Which are the most upsetting thoughts?

Example: Arthritis is ruining my life. I'm never going to be able to travel again. Everything is hopeless. I'm going to be stuck at home alone forever.

Step 4: What is the evidence for those thoughts?

Example: My arthritis made me cancel this trip. I have had to give up things I enjoy because of pain.

Step 5: **Think hard. Is there any evidence that might suggest the most upsetting thoughts aren't entirely accurate?**

Example: **My life isn't totally ruined. I can still do some things I enjoy, like spending time with my friends. My pain isn't always this bad. I might be able to take smaller trips. Even if I can't travel right now, I'm not going to be stuck at home alone forever.**

Step 6: What is a more realistic assessment of what I'm feeling?

Example: It's very disappointing that I can't go on this trip. I am frustrated that I can't go on this trip. I'm sad that arthritis is affecting my life so much. If I want to travel, I'm going to have to plan differently.

Step 7: Rate the level of the moods you listed in step 2

Example: I am feeling frustrated (8), hopeless (3), angry (1)

Step 8: What are possible steps that you could take to improve things?

Example: Research trips that would be more possible. Talk to my doctor about controlling my pain better. Talk to my friends about my feelings.

You can download the emotional event worksheet here:

<https://arthritis.ca/getmedia/2c36c290-4b8f-45c7-898e-5dd9e43e9423/EN-emotional-event-worksheet>

The image shows a screenshot of a worksheet titled "EMOTIONAL EVENT WORKSHEET" with the Arthritis Canada logo in the top right corner. The worksheet is divided into four sections, each with a step number and instructions:

- Step 1:** When you are experiencing strong, negative feelings, write down the situation that has caused this reaction. You can also check to do this for a situation that occurred in the past. (Example: I am feeling frustrated that I can't go on this trip.)
- Step 2:** Identify the emotions you are feeling and how strongly you are feeling them from 0 (not at all) to 10 (a lot). (Example: I am feeling frustrated (8), hopeless (3), angry (1).)
- Step 4:** What is the evidence for those thoughts? (Example: My doctor's advice to avoid travel, the cost of travel, the weather, the time of year, the cost of travel, the cost of travel.)
- Step 3:** What are the thoughts that are going through my mind? Which are the most upsetting thoughts? (Example: I can't go on this trip. I can't go on this trip. I can't go on this trip. I can't go on this trip.)

ADDITIONAL RESOURCES



Please note: The following resources are not intended as a replacement for professional advice. Please speak to your family doctor or a mental health professional if you are experiencing thoughts, symptoms or shifts in mood that you are concerned about.

Positive Coping with Health Conditions, A Self-Care Workbook is a free self-care manual from the Centre for Applied Research in Mental Health and Addiction (CARMHA) and BC Mental Health & Addiction Services (BCMHAS) designed for individuals who are dealing with health conditions. The topics include relaxation; managing worry; activating your life; solving problems; managing depressive thinking; managing anger and relationship building. <https://psychhealthandsafety.org/pcwhc>

The Antidepressant Skills Workbook by CARMHA & BCMHAS gives an overview of depression, explains how it can be effectively managed according to the best available research, and gives a step-by-step guide to changing negative patterns using cognitive and behavioural methods. <https://psychhealthandsafety.org/asw/>

Dealing with Depression is a workbook originally designed for teens coping with depression. It includes some simple and very effective exercises based on Cognitive Behaviour Therapy principles. They help you recognize thinking and behaviour patterns that could be holding you back, and help you come up with realistic alternatives. <https://www.sfu.ca/carmha/publications/dwd.html>

PLANNING, PRIORITIZING, PACING AND PROBLEM-SOLVING



Spending a bit of time to organize your schedule can help cut down on stress and ensure you are making time for the most important things, which is where The Four Ps comes in.

USING THE FOUR PS

The four Ps are key to balancing your life. They are:

1. **Planning:** Make a plan of the things you want to achieve during the day or over the week.
2. **Prioritizing:** List the tasks you need to do in order of importance and decide what you can remove, delay or delegate.
3. **Pacing:** Break your activities up into achievable parts and spread them throughout the day or week.
4. **Problem-solving:** If something you are doing causes a problem, ask yourself if you can do it differently.

Visit [Overcoming Fatigue](https://arthritis.ca/support-education/online-learning/overcoming-fatigue) to get more information on how the Four Ps can help you juggle the multiple demands you may face: <https://arthritis.ca/support-education/online-learning/overcoming-fatigue>

“When I know I have a busy day or week ahead I’ll schedule more relaxing activities, such as quiet reading time, mindful meditation, gentle yoga or I’ll book a spa service. Balancing and pacing activities is vital in managing my fatigue.”

Sue, working full time and living with inflammatory arthritis

RELAXATION TECHNIQUES



Deep breathing exercises, meditation, mindfulness and progressive muscle relaxation are all techniques that have been used by many cultures across the world for centuries. They are now **recognized by scientific and medical communities** as some of the most effective ways for individuals to combat stress and improve their mental and emotional well-being.

“The root cause of stress is emotional, and therefore it is best controlled by gaining insight, reducing life problems that trigger stress, and changing behaviour. In addition to exercise and physical activity, you can also learn to use your mind to relax your body. The relaxed body will, in turn, send signals of calm and control that help **reduce mental tension.**”

Harvard Health, “Exercising to Relax”

Before you start any of these relaxation techniques, check with your doctor to make sure they are right for you.

BREATHING EXERCISES



Breathing exercises are a big part of the practice of yoga, but even **if you aren't ready to** try a few yoga poses, learning to control your breathing has been found by scientists to be **extremely beneficial**. (If you have respiratory issues, check with your healthcare professional first.)

According to Harvard Health, “rapid, shallow, erratic breathing is a common response to stress. Slow, deep, regular breathing is a sign of relaxation. You can learn to control your breath so it mimics relaxation, **which in fact, will be relaxing.**”

Practicing deep breathing is something you can do anytime, anywhere and it's easy to learn. You may want to try it out in a calm situation so that **you'll be familiar with the technique to help you when you're** stressed. You can even make it a daily practice – try repeating the exercise four to six times every day to help ground **you, even when you're having a good day.**

There are lots of great breathing exercises you **can find online, or try the following** technique from Harvard Health:

1. Breathe in slowly and deeply through your nose, pushing your stomach out so that your diaphragm is fully **inflated**.
2. **Hold your breath briefly.**
3. Exhale slowly through your mouth for slightly **longer than your inhale, thinking “relax”**.
4. **Repeat all the steps five to ten times, focus on breathing deeply and slowly.**

Source: Harvard Health Publications, Harvard Medical School, “**Exercising to relax**”

To add an extra dimension to the exercise, heed this advice taken from the practice of mindful meditation:

Follow the 4 steps above. Focus on your breath. If thoughts, worries and stressors come into your mind, simply acknowledge their presence in a non-judgemental way and re-focus back to your breathing. You may have to re-focus 100 times **on your first try, but with practice, this will become much easier.**

MEDITATION



Meditation has been practiced for millennia. In fact, records of meditation practices have been dated as far back as 5000 BC.

Source: [Time Magazine](#) "How Meditation Went Mainstream"

Scientific study of meditation has shown the powerful connection between our minds and bodies: abundant research has shown that by meditating we can lower our heart rate and blood pressure, **reduce our breathing rate and pain levels, diminish the body's oxygen consumption, reduce blood** adrenaline and cortisol (stress hormone) levels and even change our skin temperature. It also has a powerful effect on our moods and ability to cope with illness, as well as enhances our sense of general wellbeing.

Source: [Harvard Health Publications, Harvard Medical School](#), "Exercising to relax"

There are many types of meditation, but most have four things in common: a quiet location with as few distractions as possible; a comfortable posture (for example sitting, lying down, or walking gently); a focus of attention (for example, on the sensation of your breath); and an open attitude (letting the distractions in your mind come and go without judging them).

Many books, guided CDs, online audio files or videos are available to help you with the practice of meditation. Many communities offer meditation or mindfulness classes through their school boards or other organizations.

Dr Herbert Benson, a Harvard **physician, has developed this “relaxation response”, a simple meditation technique to help you combat stress.** Here are his instructions:

Step 1: Select a time and place that will be free of distractions and interruption.

A semi-darkened room is often best; it should be quiet and private. If possible, wait two hours after you eat before you meditate and empty your bladder before you get started.

Step 2: Get comfortable.

Find a body position that will allow your body to relax so that physical signals of discomfort will not intrude on your mental processes. Breathe slowly and deeply, allowing your mind to become aware of your rhythmic respiration.

Step 3: Achieve a relaxed, passive mental attitude.

Close your eyes to block out visual stimuli. Try to let your mind go blank, blocking out thoughts and worries.

Step 4: Concentrate on a mental device.

Most people use a mantra, a simple word or syllable that is repeated over and over again in a rhythmic, chant-like fashion. You can repeat your mantra silently or say it aloud. It's the act of repetition that counts, not the content of the phrase; even the word "one" will do nicely. Some meditators prefer to **stare at a fixed object instead of repeating a mantra. In either case, the goal is to focus your attention on a neutral object, thus blocking out ordinary thoughts and sensations.**

Meditation is a **challenging technique, but is very beneficial. Don't be discouraged if you get distracted** or your mind wanders. Be patient and over time you will be able to focus on one neutral object or sound and block out ordinary thoughts or sensations. As you become better with practice, you may look forward to meditation time. Think about devoting 20 minutes a day to practice meditation.

Source: [Harvard Health Publications, Harvard Medical School, “Exercising to relax”](#)

MINDFULNESS



Mindfulness is the practice of focusing awareness on what is happening in the present (including our thoughts and behaviours) in a non-judgemental way. This sounds simple, **but in fact, most people find it a challenge.**

Source: Mindfulness@McGill

A recent study involved sending text messages at varied intervals to participants, asking them if they were focused on what they were doing. The answer was no 47 per cent of the time. Participants were also asked to rate the enjoyableness of what they were doing and how happy they felt. The study found that regardless of how enjoyable the task was, people were less positive when they were not focused. Analyzing the course **of people's moods and tasks over time allowed the researchers to conclude that** while negative moods can cause wandering minds, often the wandering mind occurred before the worsening mood.

Source: [Matthew A. Killingsworth et al. "A Wandering Mind Is an Unhappy Mind" - Science, 2010](#)

Mindfulness meditation is a particular type of meditation which asks us to pay attention to our body and our sensory experiences, thoughts, and emotions, moment by moment. It helps us to remember to stay fully aware of only what is actually happening in the present, both internally and externally – with no bias and no judgement.

Sources: [Marion Kostanski et al, Mindfulness and Mindfulness-based Psychotherapy – Psychotherapy in Australia, 2006, Melbourne Mindfulness Institute](#)

Recently, researchers at Johns Hopkins in Baltimore, Maryland, found 47 trials that suggest that mindfulness meditation can help ease psychological stresses like anxiety, depression and pain.

The Work Wellness and Disability Prevention Institute has a five-part webinar series called Mindfulness Meditation for Chronic Pain. It provides an excellent overview of the research related to chronic pain and mindfulness training and introduces you to simple exercises that you can practice to positively impact your pain experience. <https://www.youtube.com/watch?v=hrTeEkXrIQ4>

Also recommended:

Dr Jon Kabat-Zinn's 45-minute webinar **Some Reflections and Guidance on the Cultivation of Mindfulness and its Moment-by-Moment Integration in Life Unfolding.**

<https://www.youtube.com/watch?v=dd6ktroFf8Q>

Free guided recordings by Dr Ronald Siegel, an assistant professor of psychology at Harvard Medical School. <https://www.mindfulness-solution.com/DownloadMeditations.html>

PROGRESSIVE MUSCULAR RELAXATION (PMR)



Most of us know that when we are stressed our muscles tend to be tense and tight, but many **people don't realize that the reverse is also true** – tense muscles affect our mood and make us feel stressed and unhappy.

Source: **Michael Pluess et al**, "Muscle tension in generalized anxiety disorder" – Journal of Anxiety Disorders 2009

Progressive muscle relaxation involves systematically tensing and then relaxing individual muscles. This technique can help you recognize in your daily life when particular muscles are tightened, and helps develop your ability to consciously relax them. Over time this allows you to have better control over muscular pain.

If you have heart health issues, check with your doctor before trying PMR.

[Here is a PMR exercise from Harvard Health:](#)

Progressive muscle relaxation is best done in a quiet, secluded place. Be comfortably seated or **stretched out on a firm mattress or mat**. Until you have the routine memorized, ask a partner/friend to read the directions or record them to play back to yourself later.

This technique focuses on the major muscle groups starting from the head down to the feet. Tighten each muscle and hold the contraction for 20 seconds before slowly releasing it. As the muscle relaxes, concentrate on the release of tension and the sensation of relaxation.

- **Forehead** – Wrinkle your forehead and arch your eyebrows. Hold, then relax.
- **Eyes** – Close your eyes tightly. Hold, then relax.
- **Nose** – **Wrinkle your nose and flare your nostrils. Hold, then relax.**
- **Tongue** – **Push your tongue firmly against the roof of your mouth. Hold, then relax.**
- **Face** – Grimace. Hold, then relax.
- **Jaws** – Clench your jaws tightly. Hold, then relax.
- **Neck** – Tense your neck by pulling your chin down to your chest. Hold, then relax.
- **Back** – Arch your back. Hold, then relax.
- **Chest** – Breathe in as deeply as you can. Hold, then relax.

- **Stomach** – Tense your stomach muscles. Hold, then relax.
- **Buttocks and thighs** – Tense your buttocks and thigh muscles. Hold, then relax.
- **Arms** – Tense your biceps. Hold, then relax.
- **Forearms and hands** – **Tense your arms and clench your fists. Hold, then relax.**
- **Calves** – Press your feet down. Hold, then relax.
- **Ankles and feet** – Pull your toes up. Hold, then relax.

This routine should take 12 to 15 minutes. Try practicing it twice daily for at least two weeks to master the **technique and to experience the full stress relief benefits.**

Source: [Harvard Health Publications, Harvard Medical School, “Exercising to relax”](#)

Lesson 29 of 37

SLEEP



Proper sleep hygiene is necessary for good overall physical and mental health. Sleep disturbances and mental illness have a reciprocal relationship, with one sometimes causing the other.

Source: [Raman Malhotra, MD, “Sleep and Mental Illness”](#) - The Journal of the American Medical Association, 2011

Learn how to get a better night’s sleep here: <https://arthritis.ca/support-education/online-learning/overcoming-fatigue>

GETTING HELP



When you are feeling stressed, anxious, low or depressed, it can be hard to ask for help or even to talk about how you feel with family, friends, co-workers or a member of your healthcare team. It often feels as if you are the only one who has had to deal with these issues. **We know that's not the case**, though. Remember that by age 40, half of all Canadians currently have, or have experienced, a mental illness. Almost anyone you talk to will either have experienced a mental health issue themselves or been close to someone who has.

Source: [Canadian Mental Health Association](#)

Asking for help or talking about how you feel is a sign of strength, not weakness. Taking steps to take care of yourself is a mature **choice and will benefit all the people you interact with.**

If you are struggling with your emotions and suspect that your mental health is becoming an issue, it's important to see your family physician, a social worker, a psychologist or other mental health specialist, an arthritis specialist, or another member of your healthcare team. They can help you find coping strategies and refer you to other supports if needed. When left untreated, mental illnesses often get worse over time and can cause serious problems. If any of the factors below apply to you, and especially if they are interfering with your day-to-day life, **it's time to talk to someone.**

- Confused thinking or reduced ability to concentrate
- Excessive fears or worries, or extreme feelings of guilt
- An unusual decrease or increase in appetite
- Loss of interest in personal care or appearance
- Persistent anxiety, fear or dread
- Detachment from reality (delusions), paranoia or hallucinations
- Inability to cope with daily problems or stress
- Unintentional weight loss or gain
- Suicidal thoughts
- Frequent mood changes with extreme highs and lows
- Withdrawal from friends and loved ones
- Prolonged feeling of unhappiness or numbness

- Loss of interest in once-enjoyed activities
- **Significant ongoing fatigue and low energy**
- **Difficulty** sleeping or sleeping too much
- Low self-esteem and feelings of worthlessness
- Hopelessness and despair
- Trouble understanding and relating to situations and to people
- Alcohol or drug abuse
- Major changes in eating habits
- Sex drive changes
- Excessive anger, hostility or violence
- Frequent accidents

Sources:

Mayo Clinic, "Diseases and Conditions, Mental Illness"

[Mood Disorders Association of Ontario \(http://www.mooddorders.ca/faq/depression\)](http://www.mooddorders.ca/faq/depression)

Mood Disorders Society of Canada

University of Michigan Depression Center

BARRIERS TO GETTING HELP



Unfortunately, according to the World Health Organization, it is estimated that two-thirds of people with mental health problems do not seek treatment for themselves.

Source: [World Health Organization](#)

There are many reasons people don't get help.

Sometimes the barriers are internal:

- You want help but don't know where to get it
- You may not realize that what you are **experiencing qualifies as a mental health** issue
- You may want help but are afraid of asking because of the stigma: you may be afraid that people will think less of you and they may have long waiting lists

Other reasons are external:

- The cost of medications and therapy can be too much
- The services that are covered by public health insurance are often limited, there is lack of choice
- If you live in a rural or remote community, the nearest healthcare provider may be **difficult** to access

CULTURAL SAFETY AND MENTAL HEALTH



Different cultures may have different norms and understandings of particular behaviours or ways of thinking. Even within a culture, there may be disagreement over how to interpret certain ways of thinking and acting. Mental health and mental illness are context- **specific**. **What one community may view** as a sign of mental illness, another community may view as a special ability. Stigma around mental illness can make **it more difficult for** individuals who are

feeling distressed about their thoughts to speak up about their concerns. Additionally, discrimination that individuals or groups may face based on their ethnicity, race, faith, language or other identity may also impact mental health. An individual should be able to access supports that are appropriate and acceptable to them, that take into account cultural responsiveness as needed.

As the British Columbia Division of the Canadian Mental Health Association (2014) explains:

Culture plays a big part in the way we think about and understand health and wellness. Different cultural groups may have different explanations of mental health problems or substance use problems. And different people may explain mental health or substance use problems in different ways. For example, some people talk about mental health in the way it affects the physical body. Others may think of it as a sign of **misfortune**. **If the health system doesn't recognize that someone** may be experiencing a problem, people may not get the help they need.

How people seek help may also be tied to culture. Some may prefer to talk privately with family members or faith leaders rather than a doctor. Others may prefer to talk to someone outside of their cultural group. And **some may be less likely to talk to anyone**. **What is considered a "problem" may also** be different among different people. The health system may call something a problem, but someone may understand it in a very positive way, like a spiritual experience. And some people may come from countries with no health care or an inaccessible health care system, so they may not understand how the Canadian health care system works or trust health care professionals.

"Cultural safety" is an important part of ensuring that everyone receives the mental health care they need. It goes beyond understanding different cultures to providing adequate and appropriate care based on a **person's individual needs, while keeping in mind how culture** or other contexts may shape

those needs. Cultural safety includes the attitudes, behaviours, skills, policies and procedures of individual mental health professionals and the mental health care system in general. It may also include:

- The creation of links between health services and culture-based community organizations, acknowledging and drawing from the insights of community leaders
- The ability to access helpful, tailored **information in one's preferred language**
- A healthcare **professional's recognition** of cultural, medical and/or health practices important to an individual patient
- Policies that recognize community needs, such as attention to religious or family roles
- Culturally-relevant health screenings that use examples or questions that apply to a particular group
- A healthcare professional who is able to view a person beyond cultural or any other borders
- A healthcare professional who can see the whole picture and recognize that mental health concerns cannot be easily separated from other concerns such as a chronic physical condition like **arthritis or other matters such as poverty or insufficient housing**

Source: Cross-cultural Mental Health: <https://cmha.bc.ca/documents/cross-cultural-mental-health-and-substance-use-2/>

BUILDING YOUR PERSONAL SUPPORTS



At first, it may be hard to reach out to people and ask for help or tell them how you are feeling. You don't need to share the details of your mental health challenges with everyone in your life. Who you choose to confide in is up to you. The University of Michigan's Depression Center makes the following suggestions:

Source: The University of Michigan's Depression Center has these tips for helping you to decide who to reach out to:
<https://www.depressioncenter.org/depression-toolkit>

Who to include?

Focus on including those people in your life who have shown they can be sympathetic and non-judgemental, and exclude those who tend to be overly critical or make you feel anxious. If you **don't** currently have a strong social

Formal or informal?

You may prefer the formal setting of a support group led by a trained **network, it's never too late to start.** Even if your initial network consists of only the healthcare professionals involved in your treatment, it is important to begin to trust and share how you feel with others in order to help with your recovery professional, or you may be more comfortable sharing in an informal gathering of one or more friends.

Do you share with co-workers?

Each circumstance is different. How closely you work with co-workers and how much they need to know will vary in each work situation.

You'll find an in-depth examination of the pros and cons of disclosing arthritis issues to your co-workers or boss in the Benefits of Disclosure section of the Arthritis and Work online module:

<https://arthritis.ca/support-education/online-learning/arthritis-and-work>

TALKING TO YOUR DOCTOR



Your doctor or other primary care professional is a good person to start discussions with about your mental health. In **fact, you shouldn't wait until a crisis to talk about your mental health and wellbeing** – it should be a part of every appointment. This can make it easier to broach the subject if things do get bad.

You'll find great information about how to create productive relationships with your healthcare professionals and get the most out of medical appointments in Navigating Your Healthcare:

<https://arthritis.ca/support-education/online-learning/navigating-your-healthcare>

The University of Michigan's Depression Center provides the following tips for preparing to talk to your healthcare professional about mental health issues.

Tip 1: Recognize that, although you may feel uncomfortable, you are sharing a legitimate medical concern in order to get the help you need.

Too often, patients are afraid of bringing up their mental health concerns. Sadly, mental illness is still a subject that carries a lot of stigma and is widely misunderstood. If you associate your symptoms with **weakness or character flaws, it's no wonder you hesitate to discuss them. That's why the very first** conversation you need to have is with yourself. Depression and anxiety are serious illnesses, with **specific strategies for managing them.**

Tip 2: Choose which physician to confide in.

For many patients, a primary care physician such as your family doctor provides regular care and coordinates the care delivered by specialists. Your family physician is in a good position to both assess your needs and work with you to develop a treatment plan. However, some patients may be in more regular contact and have a more familiar relationship with a specialist such as a rheumatologist. These **doctors are also qualified to hear and respond to your concerns. In some instances, a patient may ask** their family doctor to make a referral directly with a mental health specialist such as a psychologist or psychiatrist. Regardless of which doctor you choose to discuss your concerns with, the sooner you reach out and start the conversation, the better.

Tip 3: Set goals for the conversation.

Before the discussion, think about what you'd like to achieve. Remember that diagnosing and treating mental health problems can take time and expertise, so if your goal is to make your symptoms disappear **immediately, you're likely to be disappointed. Instead, set a few reasonable goals for the conversation,** such as a) discussing your concerns openly and b) working with your doctor to determine a plan to address those concerns.

Tip 4: Do a little homework.

Prepare and organize your thoughts so you can explain how you feel. Do some additional research to know what types of questions to expect.

Tip 5: Don't expect the doctor to read your mind.

Even a doctor who has seen the same patient for many years may miss the symptoms of mental illness, **especially if they are focused on other conditions and concerns. That doesn't mean that doctors** never sense a problem and ask about it – in fact, they frequently do.

Mental health has become a more commonly-discussed topic in primary care and family medicine, but that is not to say that it will automatically come up, prepare to bring it up.

Tip 6: Make it a top priority, not an afterthought.

In a busy medical practice, your time with the doctor is limited. Many patients see their family doctor or other member of the healthcare team for a brief visit once a year or less and there may be many things to discuss. **Don't leave mental health issues to the very end of the appointment where there is little time left** for discussion, screening and treatment planning. Instead, express your mental health concerns and symptoms up front. Consider preparing a brief list and **in order to allow sufficient time to have a** meaningful dialogue with your doctor, you may need to schedule a separate appointment to address your other medical concerns.

Tip 7: State your concerns as plainly as you can.

Describe your symptoms clearly so your doctor **can focus on emotional factors. Use statements like "I think I might be depressed," or "I am experiencing the following symptoms" to begin the conversation. The more direct and specific you can be, the easier it will be for** your doctor to respond effectively.

Tip 8: Understand that there are a number of diagnoses to consider.

Once you've shared your concerns, realize that your doctor has the important and challenging job of arriving at a diagnosis and a treatment plan. Your doctor may ask a number of screening questions and/or schedule a follow-up appointment to learn more.

Tip 9: Manage your expectations.

If an initial diagnosis can be made, your family doctor may prescribe a medication right away. They might refer you to a specialist such as a psychiatrist or a mental health worker, social worker or psychologist to provide counselling or psychotherapy (talk therapy) as part of an overall treatment plan.

Tip 10: Take ownership of the follow-up.

Make sure to follow up with your family doctor, psychiatrist or other member of your healthcare team soon after a treatment plan is put in place. Be sure to follow the plan and discuss with your family doctor **or other healthcare team member if the treatment plan is working or not. If your doctor doesn't schedule** an appointment, be proactive and make the appointment yourself.

Tip 11: Make sure your providers are communicating with each other.

Just as you may need to take the lead in coordinating your follow-up, you may need to take steps to make sure all members of your treatment team are aware of your treatment plan. It is common for your family doctor to prescribe medications while therapy is provided by a psychologist, social worker or other specialist. Check with your family doctor to be sure they are coordinating all the information about your treatment plan.

Tip 12: Be a persistent advocate for yourself.

Your family doctor is the best "first responder" for all of your health concerns – including those affecting your mental health, and should be both willing and able to tackle this challenge. But in the unlikely event that they do not act upon your concerns, **don't give up. Look for other options. For example, often times workplaces will have special programs to address mental health concerns. If you're a student,** check with your school to see what services they may have. There are also a large number of mental health specialists working in the community that do not require a referral from a physician.

Tip 13: Be patient. Finding the right solution can take time.

Regardless of where you receive care, be patient with yourself and with your care professionals. We are all different, and it takes time to arrive at an effective individualized treatment plan.

Finding the right approach to managing your symptoms may mean trying more than one medication or combination of medications as well as counselling and a mix of self-management strategies. Once **you've begun the dialogue, continue to speak up about what's working and what isn't. Remember: it's a** team effort, and you are the most important member of the team.

MENTAL HEALTH PROFESSIONALS



Our primary care physicians can be great resources, **but often don't have the time or expertise to help us** delve into our mental health issues. Here is a list of some of the types of people who specialize in mental health and information on how to access them.

It's important to note that many people find that the first person they talk to isn't a good fit. This can be extremely frustrating, as it's hard to reach out in the first place. A lot of mental health professionals offer free consultations. This is a chance for you to meet them and ask them about their approach. You will **probably figure out fairly quickly whether they are a person you feel comfortable with.**

Social Workers

A social worker's focus is your quality of life, which can be impacted by your physical and mental health.

Social workers can play two roles in your healthcare. The first involves helping you to get the services you require from government departments, **outside agencies and organizations that provide benefits** — things like health insurance, pension plans or home support. This could also include offering advice on **job retraining, financial problems or finding appropriate housing.**

The second role social workers play is a treatment role — they provide help with social, mental and emotional issues. They can provide help in dealing with depression and anger related to your **symptoms, assisting family members and helping to find meaningful activities to replace** any that you had to give up because of arthritis.

Ask for a referral from your doctor or other health professional.

Psychologists

According to the Canadian Mental Health Association:

Psychologists are trained to assess, diagnose and treat mental health problems and disorders. They hold a masters or doctoral degree in psychology and **usually within a specific specialty area or areas like** clinical psychology or clinical neuropsychology. A psychologist cannot prescribe medications. Their expertise includes psychological testing and assessment of emotional and cognitive functions, the diagnosis of emotional and cognitive disorders and the use of evidence-based psychological treatments and psychotherapies. When a psychologist is employed by a public institution like a hospital, school or correctional facility, their services are covered by the public health system. When a psychologist practices in the community, their services are typically not covered by public health insurance plans. However, their services are usually covered by an extended health insurance plan you may have through your employer. You can make an appointment with a psychologist in the community on your own **without a doctor's referral. To find a psychologist in your area go to** www.cpa.ca/public/findingapsychologist.

Source: [Canadian Mental Health Association – Getting Help](#)

Psychiatrists

A psychiatrist is a medical doctor with a specialty in the diagnosis and treatment of mental illnesses. Psychiatrists can prescribe medication and are covered by provincial and territorial health plans. You will likely need a referral from a **doctor or other health professional to make an appointment. Psychiatrists'** fees are covered by provincial and territorial health plans.

Therapists, Counsellors and Life Coaches

It's important to note that in many provinces, anyone — whether they have formal training or not — can call themselves a counsellor, therapist or life coach. This **doesn't** mean that their services **can't** be extremely valuable. It simply means that you need to shop around. This is true for any kind of healthcare professional — simply because a person is **certified** by a board **doesn't** mean **they'll** be a good **fit** for you.

You **don't** need a referral, but these services are usually not covered by your public health plan.

MORE PLACES TO FIND SUPPORT



Check out the our Support & Education section of our website to learn about resources the Arthritis Society provides, including workshops and webinars and rehabilitation and education programs, as well as community services.

The Mood Disorders Society of Canada has an extensive list of resources. They include both national organizations and ones that are available in each province and territory.

The Canadian Mental Health Association makes these **additional suggestions of other places to find support**:

COMMUNITY MENTAL HEALTH ORGANIZATIONS

Community mental health organizations, such as the Canadian Mental Health Association, can help you **find resources and offer many different programs that may also be of benefit to you. To find a CMHA branch in your community, [visit Find Your CMHA](#).**

SUPPORT GROUPS AND PEER SUPPORTERS

Support groups are a safe place to share your experiences, learn from others, and connect with people **who understand what you're going through. Some support groups are formal groups led by a mental health professional, while others are more casual groups of peers. You can find support groups through members of your support team and through community health organizations.**

Peer supporters are trained to provide support and understanding, help people navigate the mental health system, link people with community services, and support work towards personal goals. Peer supporters are people who have experiences of mental illness or support a loved one.

PHONE, WEB AND TEXT-BASED SUPPORT

Many organizations offer support via the phone, online or through text messaging. Check to see if your Provincial or Territorial Ministry of Health offers a mental health support line or do a web search focused on your community.

FAITH AND CULTURAL GROUPS

Talk with a member or leader you trust from your faith or cultural group.

Source: **The Canadian Mental Health Association, "Getting Help"** <https://cmha.ca/documents/getting-help>

STAY IN TOUCH



Thank you for taking a few minutes to [complete our survey at surveymonkey.com/courseseval](https://www.surveymonkey.com/courseseval). Your feedback will guide the ongoing improvement of our programs to help you and other Canadians better manage your arthritis.

[Sign up to the flourish e-newsletter](#) to receive health and wellness advice, self management tips, inspirational stories and much more to help you move through life with arthritis.

