

Types Of Stress

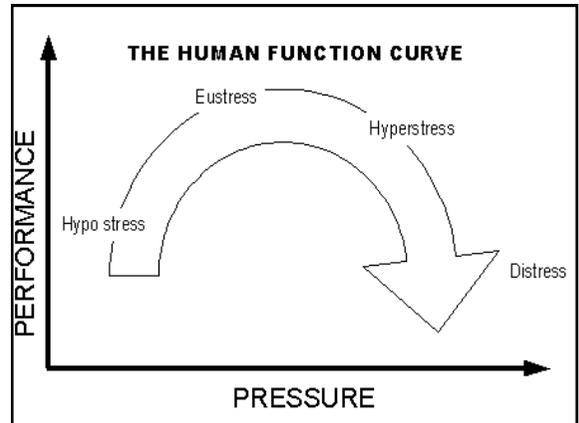
Why You Need to Know What Kind You Have

Stress?? What Stress??

- Stress
 - Can be both positive and negative.
 - Comes in various degrees.
 - The effects are cumulative.
 - People have different levels of stress tolerance.
 - Stress is harder to deal with when we feel helpless to deal with the situation.
 - The amount of stress people can effectively deal with can change significantly over time.
 - Stress in one part of life can add to and create stress in another part of life.

Some Sources of Stress

- Relationships (both family and friends)
- Changes and transitions in life
- Issues with children and grandchildren
- Physical problems (in yourself or in a loved one)
- Taking care of one's home
- Work
- Money
- Time pressure
- Emotional distress
- Spiritual crisis and/or crisis of meaning



Hypostress

- Occurs when we are not challenged enough, have set our expectations too low, or are being lazy.
- Leaves us bored, unfulfilled, without a sense of mission and purpose; mindless activities.

Eustress (Good Stress)

- Refers to the optimal amount of stress which helps promote health and growth.
- Provides us with a challenge and a mission, but doesn't overwhelm us.
- Uses our skills, focus and can be hard work; however, we also feel energized by our involvement in the tasks and accomplishing something.

Hyperstress

- Occurs from time to time in the course of normal life.
- Significant stress and strain.
- Can only be sustained for a short time before negative effects occur physically, emotionally, relationally, and spiritually.
- If not remedied, will eventually progress to distress with time.

Distress

- Increasing deterioration of functioning in all areas.
- Harm to one's body, emotions, relationships, and spirituality is occurring and becomes more serious the longer it goes.
- Burnout, compassion fatigue, etc.

Burnout & Compassion Fatigue

Possible Symptoms of Burnout

- It is *completely normal* to have some of these symptoms some of the time!!
 - However, when we start to have numerous symptoms for much of the time, that's something to really take note of!
1. Do you feel ineffective in the things you are doing?
 2. Does it seem like it takes longer and longer for you to get things done and you never seem to catch up?
 3. Do you feel unappreciated for what you do?
 4. Do you have trouble shutting off your worries?
 5. Are you bored a lot or lack enjoyment in life?

Possible Symptoms of Burnout cont.

6. Do you often feel guilty, hopeless, and powerless?
7. Do you feel fatigued (not enough energy)?
8. Do you dread or have anxiety about going to work or coming home?
9. Are you often irritable?
10. Do you often have conflicts with others?
11. Do you find yourself blaming and/or criticizing others for your problems?
12. Are you experiencing more physical ailments? (e.g. frequent colds, headaches, backaches or gastrointestinal problems)

Possible Symptoms of Burnout cont.

13. Do you find your performance dropping and you don't seem to care that it is?
14. Are you starting to notice a lack of empathy for others?
15. Are you missing activities, meetings, or appointments more often?
16. Is your frustration tolerance getting lower and lower?
17. Are you finding it difficult to feel joy?

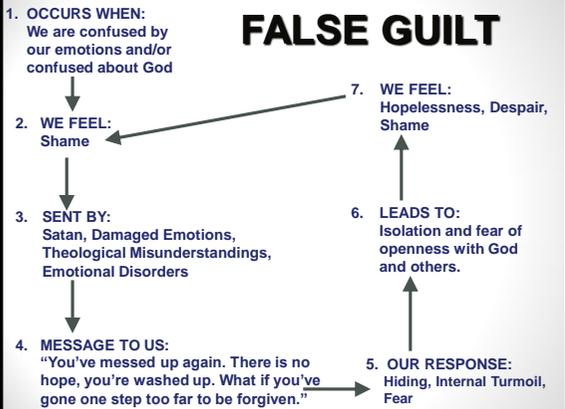
Compassion Fatigue

- Is a type of “burnout” that builds up in caregivers who are working with individuals in need.
- Caregivers are more likely to experience compassion fatigue when:
 1. The situation is ongoing, long-lasting or chronic.
 2. The situation is stressful (due to losses, finances, transitions, health, decisions).
 3. The more total the level of care needed by a loved one.
 4. The caregiver doesn’t adequately attend to his/her own needs.

TRUE GUILT



FALSE GUILT



When The Effects Of Chronic Stress Become Depression

Major Depression (Unipolar)

- This is what most people think of as “clinical depression”.
- Major Depression is diagnosed when a person has five or more of the following symptoms for two weeks or more (person must have either #1 or #2):
 1. Depressed or sad mood.
 2. Diminished interest, desire, or pleasure in usual activities (anhedonia).
 3. Changes in appetite resulting in significant weight loss OR weight gain.

Major Depression (Unipolar) Cont.

4. Oversleeping OR Insomnia (early waking often occurs).
5. Agitation OR feeling slowed down.
6. Fatigue or loss of energy nearly every day.
7. Feelings of worthlessness; excessive or inappropriate guilt, self-reproach, low self-esteem.
8. Difficulty concentrating, making decisions, and/or indecisiveness.
9. Recurrent thoughts of death or suicide.

Biological Influences on Depression

1. Genetics/Hereditiy/Family Patterns
2. "Chemical Imbalance" – Neurotransmitters
3. Imbalance in the hormonal/endocrine system - irregular hormones and menopause
4. Physical Illness (thyroid problems, cancer, etc.)
5. Side effects of some medications
6. Sleep disorders (sleep apnea, etc.)
7. Physical effects of chronic stress/strain
8. Unknown causes – sometimes depression "just happens"

Situational and Emotional Influences on Depression

- Prolonged stress
- Major life changes
- Unresolved/complicated grief and loss
- Broken or strained relationships, chronic marital problems, etc.
- Built up anger, bitterness, & un-forgiveness
- Disappointments – examples: plans that don't work out, problems with children, etc.

Types Of Interventions For Depression

Counseling

- Has been shown to be effective in treating depression both with and without antidepressant medication.
- Helps the person to:
 - #1 Cope with the symptoms
 - #2 Become familiar with what likely caused it
 - #3 Learn skills necessary to overcome it
 - #4 Prevent and/or shorten relapses
- Offers the long-term benefit of reduced risk of relapse.
- For mild to moderate depression, studies show counseling to be as effective as antidepressant medication in treating depression.

Medication for Major Depression

Antidepressant Medication:

- Prescribed by a physician (psychiatrists specialize in this).
- Not addictive and has a very low potential for abuse.
- Has no effect on normal mood and does not create a high.
- Must be taken for at least 2 to 4 weeks before the therapeutic effects are felt by the person.

Antidepressant Medication

- Unfortunately, ***if*** a person is going to experience a side effect, s/he will usually develop it right away.
 - Often side effects go away with time, but sometimes a different medication must be tried.
- Because each person's genetic/physical make-up, life experiences, and situation, etc. is different, no single medication or dosage is right for all people.
 - The most commonly prescribed antidepressant medications are the SSRIs (Paxil, Zoloft, Lexapro, Prozac, etc. and SNRI's (Effexor)

Exercise

- Studies repeatedly show that exercise can provide both protective and restorative benefits against depression and stress.
- Aerobic exercise like walking seems to be particularly effective; although any exercise is better than none!
- Studies have shown that attending an exercise class is especially effective for depression in older adults (social, emotional, and physical benefits).

"Time on" & "Time off"

- It is important to allow yourself and others time to deal with serious issues AND to also have time to not have to deal with them.
- Some people will tend to either do one or the other.
- Understand people's roles, responsibilities, personal circumstances, and how they are coping all affect how much they want to focus on dealing with issues (or not).

Coping Well During Times of Struggle

Using four areas of human functioning:

- ❖ Spiritual (your relationship with God)
- ❖ Biological (your physical body)
- ❖ Emotional (your thoughts and feelings)
- ❖ Relational (your social support network)

Spiritual Resources #1

- God has compassion for people who are hurting. (*Psalm 34:18-19, Psalm 103, Isaiah 43:2, Romans 8:26*)
- Read Scripture and pray daily to keep yourself connected to God's promises and His plan for you. (*Jeremiah 29:11, 1 Corinthians 14:33, 2 Corinthians 4:8-9*)
- Don't worry if you can't pray or read for very long. Simply do what you can do!
- Use comforting Scriptures to counteract negative thinking. (*Psalms 119:11, 105*)

Spiritual Resources #2

- Talk with your Elder, Ministers, and spiritual mentors to get encouragement and support.
- Use hymns and note-cards with Scripture verses on them for reminders of God's promises. (*Joshua 1:8, Isaiah 40:31*)
- When discouraged, read Scriptures that are comforting (*Psalm 103*, etc.) and don't try to figure out difficult books or passages like Revelation or Lamentations.

Spiritual Resources #3

- Depression doesn't necessarily indicate a poor relationship with God. *1 Peter 1:6 "Wherein ye greatly rejoice, though now for a season, if need be, ye are in heaviness through manifold temptations."*
- **Don't pin your spiritual peace to your emotions.**
- Often people who are depressed confuse "true guilt" (guilt that results from sin) from "false guilt" (a guilty feeling, related to depression, that is not the result of a sinful action).
- Depressed individuals may feel like they are not forgiven by God, repeatedly confess, or worry that s/he didn't repent correctly. If there are actual sin issues, they must be dealt with. However, remember repeated repentance won't cure an illness.

Biological Resources

- Our bodies – God’s temple – (*1 Corinthians 3:16*)
- Get a thorough physical examination from your physician. Talk to him/her about your symptoms and ask about the effects of medical illnesses and side-effects of medications you are taking.
- Exercise: Walking appears to be a natural antidepressant; start slowly and build up.
- Medication: If emotional symptoms are interfering with your ability to take care of your responsibilities.

Biological Resources #2

- Use relaxation skills and reduce stress as much as possible,
- Regulate sleeping: go to sleep and get up at regular times; limit napping – especially in the late afternoon and evening.
- Regulate eating: eat regular nutritious meals; avoid over/under eating.

Emotional/Cognitive Resources

- “*For as he thinketh in his heart, so is he*”
Proverbs 23:7
- Work to change perfectionistic and negative thinking. This is a “renewing the mind” process. (*Romans 12:1-2*)
- Repeat reassuring Bible verses to yourself to fight negative thinking. (*Philippians 4:13*)
- Journal (write out) your thoughts and feelings. Like David, write your own psalms and acknowledge your feelings to God.

Emotional/Cognitive Resources #2

- Read *Philippians 4:8* for a checklist of healthy things to think about.
- Set small and reasonable goals for yourself to meet each day.
- Be compassionate to yourself -- just like you would be to a friend who was struggling.
- Learn about depression and its treatment so you know what to expect and how to cope with it most effectively.

Relational Resources #1

- “*Two are better than one*” *Ecclesiastes 4:9*
- One of Satan’s greatest tools is isolation. Fight the desire to isolate yourself from others.
- Try to have regular contact with friends and/or an accountability partner.
- Try to attend some of the normal social functions you would go to even if you need to leave earlier than you normally would.

Relational Resources #2

- While this can be true of anyone, men tend to have more difficulty sharing their feelings with others. Unfortunately, at times, things build up inside and eventually weigh the person down.

Helping Someone Who Is Depressed

How To Be Supportive #1

- Be informed; know the symptoms of depression and how it is treated. Understand that it is an *illness*.
- Privately, ask the individual if there is any way you can help him or her. (example: offer to transport or go with the person to their counseling sessions.)
- Support and encourage the person, but remember you don't have to feel like it is your job to make the other person's depression go away.
- Support and encourage the person's treatment. This is especially true because some people are reluctant to seek treatment.

How To Be Supportive #2

- Realize depression makes decision-making more difficult. Offering a lot of advice, especially when it is opposing to the recommendations they have received from their physician and/or counselor, causes confusion and distress.
- Do your best to avoid giving clichés. Simplistic answers can make a depressed person feel worse! *Proverbs 25:20* says, "As he that taketh away a garment in cold weather, and as vinegar upon nitre, so is he that singeth songs to an heavy heart."
- If the person is having suicidal thoughts, seek professional help immediately.

How To Be Supportive #3

- Let the person know you are praying for him or her. Satan tries unrelentingly to undermine the faith of those who are depressed. Fervently ask God to comfort, protect, encourage, strengthen, and bring healing to the person.
- Remember Job's friends and learn from their mistakes. Don't automatically assume the person is trying to get attention or is hiding sin in his or her life.
- Don't try to handle the situation on your own. Instead, see yourself as one part of the body of Christ that can minister to the person. (*Proverbs 11:14*)

How To Be Supportive #4

- A careful balance of support, along with gentle nudges to encourage the person to take steps of progress, is the best way to assist a struggling person. (*Proverbs 12:25, 16:24, 25:11*)
- **For family members:** The depressed person's illness *will* disrupt the family – accept that this is part of the problem rather than an attempt to exploit the family.
- **Avoid blaming:** Depression may be completely unrelated to anything going on in the family **OR** it may be directly linked to issues in the family.