



The continuum of mental health

By Andrew Miki



Earlier in the school year, CPCO and **Starling Minds'** founder and CEO, Dr. Andrew Miki, launched an online mental health initiative supporting our Practising Associates. Starling is an online program available to all CPCO members. It presents an example of an administrator such as David to explain mental health concepts and how to increase resiliency to stress. To learn more about Starling Minds, please read our **earlier blog post**.

The Starling program was developed by Dr. Andrew Miki. Andrew is a registered psychologist with over 10 years of experience working with patients to treat depression, anxiety and other mental health issues using Cognitive Behavioural Therapy (CBT).

This is the second of several posts Andrew is contributing to our blog.

A large part of my private practice is focused on treating educators who are off work due to anxiety and/or depression. **In my previous blog post**, I described my early experiences with David, a 58-year-old Principal. Like many administrators, David's personality profile indicated high levels of emotional stability, agreeableness, openness, extraversion and conscientiousness.

When I met David for the first time, he immediately reminded me of a taller version of Steve Martin. He looked physically tired, but appeared fine otherwise. This is typical for most people who I treat. When I asked what brought him to my office, he said that he was feeling stressed and overwhelmed. He wasn't sleeping well and was more irritable with his family. It took him a lot more energy to keep up at home and at work. What bothered David the most was that he couldn't understand why he was struggling and why he couldn't get himself back on track.

I asked whether there were any recent changes or stressors in his life. David's eyes watered as he told me about his teenage daughter who was recently diagnosed with Obsessive Compulsive Disorder (OCD). She is his only daughter and they have a special bond over their love for tennis and nature. He felt saddened by the fact that his daughter would likely deal with OCD throughout her life.

Although she was only recently diagnosed, the experience affected everyone in their family. His two sons received less attention and his relationship with his wife had become strained over how to manage their daughter's illness. David described the many appointments with school counselors, doctors, psychologists and psychiatrists over the previous year. He showed a flash of frustration because, in his opinion, it took too long to get her the help she needed. David disclosed that a part of him often questioned whether there was anything he could have done to prevent her OCD, while another part felt inadequate as a father because he couldn't fix it or relieve her emotional pain. At the end of the day, he was distraught over the uncertainty of her future and the unfairness of mental illness affecting someone so young and full of promise.

When I inquired about other stressful issues, David didn't feel that there was anything unusual as there are always challenges as the Principal of a school. However, as we discussed his job, I learned that his school had very demanding parents and a strong Parent Advisory Council (PAC). It was a major source of stress for the teachers and staff at the school. Although David did not feel that it was a problem when parents' demands were directed at him, they would relentlessly contact many of the teachers and expect immediate responses – even outside of regular school hours. It seemed that David was able to cope with this dynamic for several years, but now it was taking a lot more of his time and energy to manage the parents' expectations and advocate for his teachers.

When we applied the gas tank analogy (see *Understanding Mental Health* in Module 1 of the Starling Minds program) to David's life over the past three years, it became clear that his daughter's recent health struggles lowered his baseline level of fuel. As his baseline dropped, his conscientious personality caused him to work harder to keep up with all of his work responsibilities. While this helped in the short-term, he could not maintain such a high output for an indefinite period of time. Eventually, his baseline dipped below the symptom line and he did not know how to refuel.

I asked David specific questions about his symptoms. He didn't feel constantly sad, but he definitely felt a lower mood and had to push himself more than usual to get through the day. His sleep was broken as he would wake up to either go to the bathroom or for no apparent reason. He had gained about 10 pounds, he was tired, and his memory wasn't as sharp. David was also more anxious and worried (see *Sadness, Anxiety, and Worry* in Module 1 of the Starling Minds program for definitions). However, David did not initially understand his increased tendency to worry. He saw it as a tendency to "think a lot" or problem solve about a lot of issues. The problem was that his worrisome thoughts were always "in the back of his mind" and he kept ruminating over the same issues. His wife would often comment on how tense and distracted he seemed. David was experiencing more headaches, irritable bowel symptoms, and he often felt edgy.

David pushed through his symptoms during the day and it was unlikely that anyone at his school would have noticed a difference. He didn't take any time off work, but he did notice that he wasn't always as sharp or present.

Does David's story resonate with you? Do you think it's understandable what he is experiencing? Where would you place David on the mental health continuum based on his symptoms and functioning (see *Continuum of Mental Health* in

Module 4 of the Starling Minds program)? I will cover this and his diagnosis in my next blog post for CPCO.

** **Please note:** the case study of David was created to illustrate a wide range of issues that are faced by Principals and Vice-Principals. David's name and all of his personal details have been changed to protect his confidentiality/privacy.*

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