

# OCD, Substance Abuse, Isolation, and Suicide

Chris Trondsen, Neil Hemmer, Thomas Smalley, Collin Schuster, and Jess Kotnour

## Agenda

1. Introductions
2. Define Terms
3. Discussion on stigma / audience participation
4. Panel member's personal stories
5. Audience participation
6. Panel member's personal stories
7. Panel member's healthy coping methods
8. Resources
9. Audience participation
10. OCD safety buddy
11. Q&A

## Isolation

- Sense, actions, and experience of being alone from others
- May not be socially isolated, but emotionally isolated (not have people you can really talk to)
- Saying no to things, not interacting with friends, withdrawing
- Spending time alone in your room, giving up on activities you once enjoyed, not reaching out to your support system (friends, family, etc.), and living "off the radar"

## Self Harm

- Self Harm: harming oneself intentionally; can be done in a variety of ways (cutting, burning, etc); not the same as BFRBs such as dermatillomania
- Does not always look like cutting; can be intentional reckless behavior
  - Can be for many reasons and in response to a variety of emotions, or lack thereof
  - Shame from self harm can be as difficult to manage as the self harm itself

## Depression

- Depression: persistent feeling 'sadness' of loss of interest, often changes in sleep, eating, and other normal habits
- Like OCD, may look different in different people
  - You do not have to be suicidal to have depression
  - No highs; loss of pleasure
  - Feel as if it is more difficult to function, hard to get out of bed, move about slower than usual
  - Negative, self-hating thoughts

## Suicide

- Wanting and taking steps to end one's life
- Suicidal ideation vs implementing a plan
- Shame and fear regarding suicidal thoughts
- When to be concerned
  - Method / Plan
  - Time
  - Implementing steps
  - Getting rid of items or saying goodbye to loved ones

### Substance Abuse

- Using drugs, drinking alcohol in an excess amount on a regular basis to attempt to drown out your symptoms of OCD or any comorbid diagnosis i.e. depression
- Using drugs of any kind will be detrimental to your mental and physical health/ drinking while suffering is never a safe idea, slippery slope
  - Medication interactions
- Puts a strain on, relationships, school work, job performance, friendships, mental health
- Interferes with social, work, or school functioning

### Comparing Self to Others - Being "Behind"

- Feeling a sense of being "behind" peers similar in age
- Comparing life to others and feelings as if everyone else is where they should be and happy, while you feel as if you are unhappy and unsuccessful
- Negative judgement of self
- Self-hate, overall negative outlook of accomplishments
- Never feeling as if you can catch up to others around your age
- Negative feelings when looking at peer's social media

### Avoiding Life Altogether

- Not working or working minimal hours
- Isolating from loved one's and spending most of your time alone in your room
- Coping with drugs, alcohol, sleep, video games, your phone, or television
- Dropping classes and ultimately not going to school
- Giving up on sports or other hobbies once enjoyed
- Angry often or absence of emotion
- Exerts minimal effort daily

### Stigma

- It is okay to not be okay!
- You will have bad days; recovery is not linear
- Things do not have to reach rock bottom in order to seek help
- You are *not* the disorder
- It is not showing weakness to reach out for help
- Those who isolate often feel that others do not care or will not support you because you are in a low place. This is not true! There are others out there who want to help!

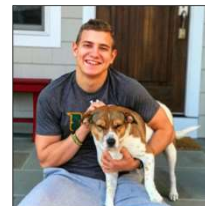
### Stigma Continued

- If you are using a substance to cope, you are not a druggie, junkie, or drunk-- you just want relief from the thoughts and there are healthier ways to cope!
- People with depression are not weak, being dramatic, or simply "sad," and they cannot just "get over it"
- Those who self-harm are not doing it for attention
- You are not alone
- You may be feeling guilt or shame, but feelings are not always facts
- Attempting suicide or having suicidal ideation does not make you a "quitter"

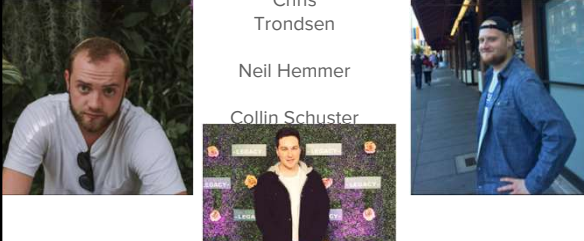
### Personal Stories



Jess  
Kotnour  
&  
Thomas  
Smalley



### Personal Stories



Chris Trondsen

Neil Hemmer

Collin Schuster

### Coping Mechanisms

- Exercise, sports, gym, yoga
- Support system: support groups, friends, family, and online support
- Spirituality / Religion / Faith
- Mindfulness (grounding, breathing exercises) / Meditation
- Express your emotions! It is okay to let it out, cry, being angry, etc. instead of keeping your emotions hidden
- Music: Creating playlists that boost your mood, not keep you feeling distress

### Coping Mechanisms Continued

- Talk to someone you trust who is supportive; visit a friend
- Journal: write out your thoughts
- Wait it out: sometimes if you don't react to the feelings, they pass or get weaker
- Volunteer; give back. Help / advocate for others. If you feel you cannot live for yourself, live for others
- Get a sponsor and keep track of how many days you are sober
- Keep busy and create structure in your life

### Advocacy - "Stomp Out The Stigma!"

Become an advocate for the IOCDF: <https://iocdf.org/get-involved/ocdvocate/>

IOCDF Ambassador Program: <https://iocdf.org/iocdf-ambassador-program/>

The Advocate's Pledge: <https://iocdf.org/get-involved/ocdvocate/pledge/>

Join a local IOCDF affiliate: <https://iocdf.org/about/local-affiliates/>

Speak at the annual International OCD Foundation (IOCDF) conference

Share your OCD experience on social media #OCDCon

### Resources: Hotlines

National Suicide Prevention Hotline: 1-800-273-8255

- Spanish: 1-888-628-9454

Crisis Text Line: Text HOME to 741741

The Trevor Project, crisis hotline for LGBTQ "youth": 1-866-488-7386

SAMHSA's National Helpline: 1-800-662-HELP (4357)

Self-Harm Hotline: 1-800-DONT CUT (366-8288)

Self-Injury Foundation's National Crisis Hotline: 1-800-334-HELP (4357)

### Resources

To Write Love on Her Arms: <https://twloha.com>

You Feel Like Shit: <http://youfeellikeshit.com>

Mental Health First Aid Training: <https://www.mentalhealthfirstaid.org>

Alcoholics Anonymous: <https://www.aa.org>

Narcotics Anonymous: <https://www.na.org>

Marijuana Anonymous: <https://www.marijuana-anonymous.org>

National Suicide Prevention Helpline: <https://suicidepreventionlifeline.org>

### OCD Safety Buddy

- A close family member, parent, friend, or person in your life who is responsible and trustworthy
- Someone accessible that you can reach out to in times of crisis and need
- Someone who understands the struggles you are going through and knows your safety plan
- Give them specific ways they can help you in times of need
- They have access to resources if the help you need is beyond their scope of competency

Triggers	Healthy Coping Strategies	OCD Safety Buddy

### Creating a Safety Plan

1. Warning signs
2. Coping strategies
3. People & places used for support
4. People who can help
5. Emergency numbers
6. Creating a safe environment
7. Why is keeping safe important to you?

**Patient Safety Plan Template**

**Step 1: Identify signs, thoughts, feelings, beliefs, behaviors, situations that could lead to a relapse.**

1. Name: \_\_\_\_\_  
 2. Address: \_\_\_\_\_  
 3. Phone: \_\_\_\_\_

**Step 2: Identify warning signs, thoughts, feelings, beliefs, behaviors, situations that could lead to a relapse.**

1. Name: \_\_\_\_\_  
 2. Address: \_\_\_\_\_  
 3. Phone: \_\_\_\_\_

**Step 3: People and places used for support.**

1. Name: \_\_\_\_\_  
 2. Address: \_\_\_\_\_  
 3. Phone: \_\_\_\_\_

**Step 4: People who can help.**

1. Name: \_\_\_\_\_  
 2. Address: \_\_\_\_\_  
 3. Phone: \_\_\_\_\_

**Step 5: Professionals or agencies I can contact during a crisis.**

1. Name: \_\_\_\_\_  
 2. Address: \_\_\_\_\_  
 3. Phone: \_\_\_\_\_  
 4. Email: \_\_\_\_\_  
 5. Website: \_\_\_\_\_  
 6. Hours: \_\_\_\_\_

**Step 6: Making the environment safe.**

1. Name: \_\_\_\_\_  
 2. Address: \_\_\_\_\_  
 3. Phone: \_\_\_\_\_

Please use this template as a guide only. It is not intended to be used as a substitute for professional medical advice.

### Question & Answer Segment

