Positive interactions in the learning environment

- A positive environment can encourage skill building, learning and asking questions.
- Flexible hours or deadlines may help accommodate doctor or therapist appointments and/or optimum performance times of the individual.

Disclosure is often a very difficult issue for people with a mental illness due to stigma, misconceptions and prejudices demonstrated daily in our community, media and historical literature. Privacy and confidentiality principles are critical for developing and maintaining trust.

It is very rare that a person with a mental illness will display completely unacceptable or challenging behaviour. Research indicates that people receiving treatment for a mental illness are no more violent or dangerous than the general population.

Handling Confrontation Positively

- Outline clear boundaries of acceptable and non-acceptable behaviour.
- Make tasks clear and precise.
- Where possible, deal with unacceptable behaviour in a confidential setting.
- Remain calm and logical.
- Do not argue. Speak in a calm and clear manner.
- Do not make promises you may not be able to keep.
- Do not say things like ‘Now, don’t do anything silly’.

Adjustments may need to be provided to enable a person with a disability to gain equitable access to education. Reasonable adjustments may include:

- modifying or providing equipment
- modifying assessment procedures
- changing course delivery
- modifying educational premises.

Adjustments must be determined in consultation with the student concerned.

For further advice contact your TAFE NSW Teacher Consultant

http://www.sane.org

Other sources of support
Mental Health Association NSW Inc.
Mental Health Coordinating Council
Human Rights & Equal Opportunity Commission
www.hreoc.gov.au
Disability Discrimination Act 1992
Disability Standards for Education 2005

State Office: TAFE Disability Programs Unit Ph: 9244 5089 TTY: 9266 8389
What is a mental illness or disorder?

A mental illness/disorder is a diagnosable illness that significantly interferes with a person’s social abilities. Mental illnesses/disorders are of different types and degrees of severity and include depression, anxiety, substance abuse disorders, and psychosis.’ (World Health Organisation)

Psychiatric disability and mental illness are often used interchangeably. Mental illness refers to the actual disorder, while psychiatric disability refers to the impairment the individual experiences as a result of mental illness.

Not every person who has had a mental illness will experience a disability. Many people recover from an episode of illness and enjoy long periods of complete health. Psychiatric disability is seldom permanent, and the level of disability experienced often fluctuates. Most mental illnesses are episodic and the majority are treatable.

Mental illness or disorders can affect anyone from any social or ethnic background, with any intelligence level and at any age. It is estimated that one in five of the population will experience a mental illness at some point in their lives.

Currently, over one million Australians experience a mental illness or disorder. 3-4% of Australians experience severe mental illnesses or disorders which will significantly interfere with their well being and reduce their capacity to participate fully in community life.

National Mental Health Strategy:

Common forms of Mental Illness

**Anxiety disorders**: a group of illnesses characterised by persistent feelings of high anxiety, continual or extreme discomfort and tension and fear of panic attacks usually without discernible cause. An anxiety disorder is distinguished from normal feelings because the level of anxiety and feelings of panic are so extreme that they significantly interfere with daily life.

- **Obsessive compulsive disorder and post-traumatic stress disorder** are considered types of anxiety disorder. Effective treatments are available and new, improved therapies can help most people with anxiety disorders lead productive, fulfilling lives.

**Depressive disorders** range from mild to severe forms with extreme cases resulting in hospitalisation. Experiences include a prolonged period of sadness during which people lose interest or pleasure in previously enjoyed activities; they slow down and are negative in their thoughts.

**Bipolar mood disorder** is the new name for what was called manic depressive illness. The new term better describes the extreme mood swings – from depression and sadness to elation and excitement – that people with this illness experience. With access to appropriate support, most people with bipolar mood disorder lead full and productive lives.

**Psychotic disorders** are a group of serious illnesses that affect the mind. These illnesses alter a person’s ability to think clearly, make good judgments, communicate effectively, understand reality and behave appropriately. When symptoms are severe, people with psychotic disorders have difficulty staying in touch with reality and often are unable to meet the ordinary demands of daily life. However, even the most severe psychotic disorders are treatable. Psychotic disorders include schizophrenia and delusional disorder.

**Schizophrenia** affects approximately 1% of the population and 20% to 30% of these will only experience one episode in their lifetime. It affects a person’s ability to think clearly, manage emotions, make decisions, and relate to others. People with this illness may be fearful and withdrawn. Other symptoms may include depression, anxiety, extreme fears (phobias) and obsessive behaviour. During occurrence symptoms may include delusions such as false beliefs of persecution, guilt or grandeur-hallucinations, commonly involving ‘hearing voices’, and thought disorders characterised by illogical and ‘jumpy’ thought patterns. Secondary symptoms include lack of drive, blunted emotions, social withdrawal and lack of insight. This illness is highly treatable and new treatments are continually improving the outlook for people with this disorder.

**Personality and disruptive disorders** are characterised by significant impairment in social, educational or occupational functioning, interacting with groups and accommodating group needs.

- **Oppositional defiant disorder** is a pattern of antagonistic, deliberately disobedient and hostile behaviour. The person often blames others for mistakes and is easily annoyed by others
- **Conduct disorder** may cause the person to bully, intimidate, or coerce others and to be cruel
- **Eating disorders** are real, treatable medical illnesses involving certain maladaptive patterns of eating. They frequently develop during adolescence. They are not due to a failure of will or behaviour and often occur in conjunction with other psychiatric disorders such depression, substance abuse, and anxiety disorders. Anorexia and bulimia are the two most serious eating disorders but both are treatable.