[Sheryl Garriques-Lloyd]: I've been a registered nurse for 24 years, and I started working in medical surgical nursing at the university hospital here in Jamaica. And then I transitioned to the only psychiatric hospital we have here in Jamaica, which is the Bellevue Hospital, and found my love, so to speak.

I think as a person, I've always thought that it was important to make sure you're okay before you take care of others. However, in practice, what it felt like was you start to shift, you went in, you did everything you could for your patients, but you neglected yourself. We weren't using the bathroom, you weren't taking your breaks for meals or something like that. And then I realized that we were breaking down. My colleague actually had what we term in mental health, a psychotic break. It helped me to realize that although I'm a psychiatric nurse, what I really wanted to do was help people to work on their mental health and well-being.

[Welcome to A Nurse First. This is Sheryl Garriques-Lloyd telling her own A Nurse First story.]

[Sheryl Garriques-Lloyd]: We have what we call in mental health and psychiatry, what's called a brief psychotic disorder. And that's if you are not willing to address the struggles and the challenges you're having, your mind will create an alternate reality. That gives itself the break it needs because you're not addressing it, and that's what it is. You may appear to think that you are fine, but what we will see is that your behavior has changed. Your speech is irrational. And what it is, your mind is just saying, “Okay, since you're not addressing that, I'm going to take a break here because I can't manage.”

I was on duty and my colleague, she wasn't at work with me. She was home, but she had reached out to me. She really took a break from reality and started displaying signs of mental illness, having overworked herself. She was struggling with a couple of things that she was not addressing. And so I had to, I'd say, the usual. To me, it started like, what if she were a patient here? I had to quickly figure out how could we help. And so having worked through that, I reached out to find a psychiatrist who she would have been able to see. But we had to wait until I was off duty.

And I tell you, it was Very jarring to have her display the symptoms I had with my patients at work, knowing the problem that it can be sometimes to realize where you are. Because one of the things that we say is a challenge in mental psychiatric nursing is that we don't have insight. And sometimes it's happening to you, but you don't even realize it. And so it was very jarring for me. And then when I tried to get her to have something to eat, I think what hurt me at the core was when she said, “I should taste it first.” She didn't trust me to just give her something to eat.

I'm thinking, this is my friend. And I don't think I'd want anybody else to have to have this experience without support, without the knowledge, because what we lack sometimes is the information to be able

to know what to do next. And so in my mind, I was thinking it was so hurtful to see her experiencing that. I was thinking I wouldn't want her to have to be admitted in a hospital, which was a possibility. I was thinking, “Will this be a brief psychotic episode that she'll recover from? Or has she put herself on a path to maybe having a psychotic disorder?” I was thinking that we help people to manage their mental illnesses. What are we doing to help ourselves?

I think in that moment, it really dawned on me that barring a few things, this could have been me or anybody else that this was happening to. And it really hurt me to see that although we are supposed to be caring for others, we really didn't learn about caring for ourselves.

[In reflecting on this experience, Sheryl recognized a clear pattern. Seeing her friend struggle brought a stark realization of how vulnerable we all are in certain situations and highlighted a deeper truth. In our roles of caring for others, we often overlook the importance of caring for ourselves This understanding became pivotal to Sheryl's life and career path, leading to a shift in her perspective about prioritizing mental health, both for ourselves and those around us.]

[Sheryl Garriques-Lloyd]: That one moment, I think I started talking a little bit more, about making sure you did things each day that would benefit your mental health. Once she was doing better, I realized that this was something I would need to take on. I would not want that to happen to her, but it was maybe what needed to draw me into walking into my purpose, to be focused on mental health as opposed to psychiatric nursing.

I started slowly with my staff on my ward to make sure we were all doing things to incorporate that individually and at the practice level because I wanted us to be what I would have now termed it a mentally healthy workplace without realizing that's what I was doing initially. We didn't really practice caring for ourselves and that It's way easier to maybe consistently work on your mental health and your well-being than to have to address what happens if you don't.

Of course, I started out afraid and I was thinking, you know, maybe my single voice would not make an impact. But in honesty, as I helped her to get back to being herself and I started sharing more with others, I had to realize that one voice can make a difference. And I really started saying to myself, “I'll address mental illnesses and disorders. If I'm asked, I continue to work in psychiatry.” But then I said to myself, “I think this is where I should be focusing on helping other persons on their mental health journey.” What is it you need to know? How do you recognize when you're not mentally healthy?

Mental well-being and mental health is a different concept from mental illness. But if you Google mental health, all the things that pop up are usually about mental illnesses or disorders. I was surprised by that because WHO, the World Health Organization, is our go-to for health, and it defines mental health as a state of well-being that helps us to recognize our abilities, that helps us to live fruitfully and productively, and it includes the absence of mental illness. So therefore, I'm wondering why we were using this umbrella term, whereas we look at like the National Alliance of Mental Illness or even going to or diagnostic and statistical manual that we use for psychiatric diagnosis. It tells us that mental illness is a group of symptoms or signs that are behavioral, affects our mood, affects our thinking and our daily living that are usually assessed by a professional, a mental health professional, and then you are given a

diagnosis, and we have several different mental illnesses. For me, the distinction is important, and I'd say I've been having an uphill battle with getting persons to just recognize that we're talking about two different things. Because of stigma as well, when you say mental, people actually don't hear health, they only hear mental, and they automatically assume what comes after that is disorder or illness. But the distinction is, if you're not sleeping well, for instance, if you're not eating well, if you're not addressing your stressors, you're not doing great stress management, then you are mentally unhealthy. Because it means that whatever your challenge is, it's affecting you, and sometimes you don't even realize that it is.

if you are mentally unhealthy, for instance, and let's say you're trying different coping mechanisms, you're doing the deep breathing, you're doing the relaxation, you've taken some time out in nature and it's not working. One of the things that people shy away from is going to see a psychologist because you don't want people to associate that with being mentally ill, although that's not. And then similarly, what we found is persons who are displaying signs and symptoms of mental illnesses, The longer you stay away from treatment, the worse your prognosis is for getting back to your optimal functioning. But similarly, instead of going to get some professional help from a psychiatrist, people are saying, “I can't go because I don't want that to be associated with me.” And so it's always important for me to distinguish between them because I want people to know, if you are not managing your stressors, and believe me, when life's challenges are coming at you, they don't talk to each other and say, “Oh my gosh, she's struggling right now, let me wait!” They're coming at you. And so you need to recognize when you're either sleeping too much or you recognize you're not sleeping, you know, or you find yourself stress eating.

The challenges I've had is really getting beyond the word mental for people to hear. The challenges I've included recognizing that I didn't say you have a mental illness. I'm telling you that you're mentally unhealthy based on how you're responding to your life stressors. I really try to make sure I put that out at the beginning of any conversation I have so you know exactly what I'm talking about and then the point is to help you to recognize that whichever one it is, whether right now you're mentally unhealthy or if you're living with a mental illness, it's not the end of the world. There are ways to address it and to be active in it and to ensure that you are still going to be your best you.

I'm adamant that wherever I'm placed, while we focus on psychiatric, and we're still using the umbrella term, I have to squeeze mental health and well-being somewhere in there. And I've been able to do Zoom sessions, webinars, and face-to-face presentations to make sure that I'm sharing it. It has integrated into something much bigger over the years. And I'm no longer afraid. If you ask me, I'm going to talk. If you don't ask me, I'm going to talk. If it's out there to be shared, I'm going to share it. And the most important part is that people have the resources to make sure they know what to do.

[How do you practice what you preach?]

[Sheryl Garriques-Lloyd]: I like to watch movies. I like to read. I use positive affirmations. It's very, very good for our mental health to make sure we know our own value. I do physical activity because it's

important to keep that endorphin and those adrenaline activities going. And I'd say sometimes I tell people on your to-do list, have to do nothing. It's important to do nothing.

And then I'd say the other things that are more realistic based on all my roles and responsibilities would be good time management to make sure I'm prioritizing. I'm not a believer of balance because balance means we can do all things evenly. When I go back to, I'd call a dictionary definition of balance, or when you look at scales, balance implies on an even keel, and I'm saying to somebody, balance for me is like this, and both things, all things in the same space. In truth and in fact, when you try to be a person, try to be a lecturer, try to be a mom, try to be a student, all on the same footing, that to me is a recipe for being mentally unhealthy, because it will never be that you could manage all of those things in the exact same way or similarly. So I recognize that prioritizing worked for me.

But overall, I'd say my strategies include that we have to be consistent. So I keep saying to persons that mental health is not a destination, it's a journey. And yes, you're going to have ups and downs. But the important part of it is the consistency of doing something all the time that improves your mental health. And so that means we have to do something each and every day.

I would say as well, know the signs and the symptoms of when you're not doing as well as you are at being your best you. Because when you recognize what's happening, then you have an opportunity To do something about it, prevention is really better than cure. And so you want to be able to do something about it before it gets worse.

And I'd say the last thing is perhaps recognizing that we're all in this together. So I'm not the only one who's going through this, and we may not always want to share, but I would say recognize that it's important to have support.

In these couple of years, it has resonated that I have been living my life the purple way. I love purple, and everybody knows that. And people think it's just the color. And I said to them, as I've done some introspecting and reflecting, I've recognized that purple is my acronym for the way I've been living my life. So I would say my purple is passion, unstoppable, resilience, perseverance, leadership, and excellence. And I want to keep using that. And I tell people, you can borrow my acronym or you can make your own. I just think I love the color and didn't realize that was who I was and where I was. So I tell people I live my life the proper way and I'm open to sharing because it's very important to me that I lead by example and that I help people to really recognize, take care of your mental health. You have to consistently and conscientiously work on it every single day. Self-care and well-being practices are not selfish. You must work on you to be mentally healthy, and that gives you the opportunity to then be able to give back in the way you'd like to.

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