

THE FAMILY AND MENTAL ILLNESS

Mental illness of a loved one affects everyone in the family. Reactions are varied. Some families have trouble dealing with the reality of the illness or feel a tremendous sense of shame and isolation. Some may become overly preoccupied with what has happened. In reaching out to a family in this situation it is important to remember that living with the disease can be bewildering and taxing. It is important for everyone to know that the family did not cause the illness; the family is not responsible for it. Self-blame and blame leveled by others is destructive for all concerned.

What families need to do is plan for the future. Many families who work together to deal with the often harsh effects of mental illness may discover a wealth of abilities and assets they possess as individuals and as a unit. The family's discovery of these strengths and skills often gives rise to changes that improve the quality of life for everyone in the family (including the ill member). As time goes by the family may find itself the first line of defense for their loved one. They must keep themselves physically and mentally healthy so they are able to best help their ill family member.

Anyone living and/or working with a person who has a mental illness should:

- place no blame or guilt;
- look for support;
- seek relief from stress;
- continue outside interests;
- don't try to be "super parent," "super sibling," "super spouse," or "super friend."

The following are some tips to help in coping with a family member who is mentally ill. Families have sometimes used these techniques successfully. They are to be used to help develop coping strategies that complement professional treatment.

- Learn all you can about the illness and educate other family members and friends about it.
- Know resources for help and support before a crisis occurs.
- Designate someone in the ill person's immediate circle (family member, friend) to be there when help is needed.
- Anticipate vulnerable situations (difficult relationships, job stresses, anniversary and holiday dates), and space them out. If Aunt Tess can't handle the relationship, don't have her to dinner when the ill family member is present.
- Space out stressful events. Remember, what is stressful for your ill family member may not be stressful for you.
- Realize a person with a mental illness can suffer from memory loss or poor concentration. This is frustrating and frightening, but do not be judgmental.
- Break down tasks into small units so they do not overwhelm the ill person. Focus on SUCCESSES not failures.
- Avoid pampering. Set reasonable rules and limits and stick to them. If you find this difficult to do, ask the doctor or counselor for suggestions.
- Avoid expecting that all peculiar behaviors and habits can be corrected.
- Learn about medications - what they are and do, side effects and residual effects they may have, how and how long they take to work.
- Pay attention to medications (are they being taken, do they seem to be working, etc.).
- Realize common substances (coffee, tea, sugar, alcohol, over-the-counter medications) may adversely affect the ill person.
- Be sure other doctors (eye doctor, internist, dentist, foot doctor, skin doctor, etc.) know what medications the person is taking.
- Realize another breakdown can be temporary. The person has recovered before and is likely to do so again.

The congregation can open the church to:

- Hosting a group of people who have a mental illness from a community facility.
- Sponsoring a support group for persons who are ill or family members.
- Sponsoring a social club or drop-in center.
- Offering employment such as secretarial, using artistic talents, janitorial, maintenance, food preparation, etc.
- Initiating a visitation program.

Members of a congregation can educate themselves and others by:

- Encouraging clergy, lay staff and congregations to learn about mental illness.
- Raising awareness in the congregation about mental illness in a sermon, bulletin or newsletter.
- Adding materials about mental illness to the congregation's library.
- Encouraging heightened awareness about mental illness beyond its congregation by writing a letter to the editor or an article for a regional or national denominational publication.
- Encouraging the denomination's area wide, regional or national structure to be responsive to the needs of persons with a mental illness and their families.

Members of a congregation can advocate for persons with a mental illness in the community by:

- Being willing to work with other congregations in the community to improve the quality of life for persons with a mental illness and their families.
- Supporting efforts to obtain appropriate housing and jobs.
- Not letting false, stigmatizing statements about mental illness go unchallenged.
- Objecting in writing or by telephone when media and public events stigmatize people who have a mental illness.
- Encouraging the denomination's legislative and advocacy groups to support increased budgets for research, creation of appropriate housing, and community services.

(adapted from material written by Cheryl Runyan, Horizons Mental Health Center, Hutchinson, Kansas)

*"We are human beings.
Treat us as human beings.
We want to talk about what
you want to talk about.
We want to be involved in what you do.
We want you to be involved in what we do.
Support us. Love us." Ro*

*"The beginning of my journey back
began when people stopped treating me
as being disabled and incompetent and
started treating me as being welcome at the table." Jay*

*"The church can help.
There is this church that donates its services.
They open the hall so we can have a meeting hall.
We can have a get together.
That is all we ask of you.
Just open your door." Gail*

*"I don't see enough outreach from church groups to
people. When you leave the hospital, you can be
discharged from a hospital on Friday and not be placed
in a community program until Monday.
What are you supposed to do from Friday until
Monday?" Gail*

*"As a parent of a son with schizophrenia, I know it is
a great deal easier when you educate yourself about it.
There is no reason for anybody who can read or pick
up a telephone to call for a referral, to sit in the dark
wondering about this illness. We all need to
educate ourselves so we can advocate effectively for the
programs and services people with a mental
illness desperately need." Ann*

*"We are in the same position as any civil rights
group just starting out. We need friends. We need
support in our local communities. We need friends in
the legislature. We need your help." Jay*

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