

## Living with family members with severe mental illness

**Symptom management.** Symptoms can be early signs that your family member is having problems.

- (a) **Identify and regularly monitor warning signs of relapse.** What are your family member's warning signs? These may include things like failing to eat or sleep regularly, skipping work, or an increased intensity of voices. Develop an emergency plan for responding to these signals. What works? What doesn't? Sometimes finding ways to monitor and decrease stress is helpful.
- (b) **Avoid street drugs and alcohol.** You both should know why alcohol and illicit drugs are bad news for someone with schizophrenia. Your family member may need help in resisting using substances and in talking openly and honestly about substance use with health care providers (Eckman, Wirshing, Marder, Liberman, Johnston-Cronk, Zimmermann, & Mintz, 1992).

**Medication management.** People who know about their medication use it more effectively and are more likely to take it regularly.

- (a) **Educate yourselves about the medication.** Learn how drugs work, why maintenance therapy is used, and the benefits of taking medication. Learn how to take your medication effectively. What other drugs or foods must you avoid with your medication? When should it be taken?
- (b) **Identify side effects.** Know the medication's side effects and what should be done when you experience these.
- (c) **Discuss medication, symptoms, and side effects with health care providers.** While it's useful to recognize symptoms and side effects, it's also important to be able to discuss these with your health care providers. Build an honest and open relationship with them. Tell them when you are having problems as well as when you are no longer having problems. If you are working with several providers, sometimes it helps to identify who is easiest to communicate with and ask that this information be passed along to other providers (Eckman et al., 1992).

**Family communication patterns.** Everyone does best in an open, honest, noncritical family environment. Find ways to make your communication more effective.

- (a) **Choose supportive, noncritical communication patterns.** People with schizophrenia are not always easy housemates. However, those people with schizophrenia with families low in expressed emotion (EE) are least likely to relapse. High EE families are high in hostility, criticism and emotional overinvolvement (e.g., "Why don't you do something useful? It's like you want us to do everything for you!"). Low EE families still care for their mentally ill family member, but are less critical and more flexible (e.g., "I know there's a time and place for everything and I'm trying to learn to respect his needs.") (Hooley, 1985).
- (b) **Learn empathic listening styles.** While the speech content of people with schizophrenia can be pretty scary and should not be reinforced, often their emotional concerns can be heard in these statements and validated. For example, "Those people are out to get me and no place is safe any more." "It sounds like you are feeling pretty scared and don't know where to turn."
- (c) **Practice effective problem solving techniques.** Learn and practice effective problem solving to assist your mentally ill relative so that each of you remember that you still have options when you are stressed and overwhelmed.