

Empathetic Guidelines

These guidelines give some ways to respond and behave in ways that show that you are trying to understand emotions an ill relative or friend is feeling

Don't buy into the stigma all around you

People with mental illness are not "bad", or ill because of some failure or character. Our family member is not wilfully trying to disgrace us, frustrate us or embarrass us. Their behaviour is not a reflection on our relationship, or on our parenting. They are not dedicated to undermining our dignity, or ruining our prestige and standing in the community. They are simply ill. Stigma is awfully hard for us to bear in mental illness, but we certainly don't have to go along with it.

Don't criticize

People struggling with any sort of mental illness are very vulnerable, and cannot defend themselves against direct personal attack. Try to be supportive, and keep negative or nagging remarks to an absolute minimum. If there is one single standard to work for in your relationship with a mentally ill person, it is to respect, and protect, their shattered self-esteem.

Don't press, don't fight, don't punish

"With this disease there is no fighting. You may not fight. You just have to take it and take it calmly. And remember to keep your voice down. Also, punishment doesn't work with

this disease. Now that I have lived with a person with schizophrenia, it makes me upset when I see mental health workers try to correct their clients' adverse behaviour by punishment, because I know it doesn't work." *Joe Talbot, quote in The Family Schizophrenia by Patricia Backlar.* If you want to influence behaviour effectively, the best thing to do is ignore negative behaviour as much as you can, and praise positive behaviour every chance you get. Study after study shows that if you "accentuate the positive", people will want to perform the behaviours that earn them recognition and approval. Many reliable studies indicate that criticism, conflict and emotional pressure are most highly related to relapse.

Learn to recognise and accept the primary symptoms, and the residual symptoms, of a person's brain disorder

Don't try to "jump start" someone in depression, or "shoot down" a person with mania, or argue with schizophrenic delusions. Help them learn which of their behaviours are caused by their illness. Tell them it's not their fault if they cannot get out of depression, that they are not "terrible" for the things they did when they were manic, etc. This kind of support relieves a lot of guilt and anxiety, even when someone is still in denial.

Lessen your demand for support from your ill relative

People with mental illness become very "self-involved" when so much of their identity and self-respect is at stake. They often cannot fulfil normal family roles. We are all well advised to seek additional sources of emotional support for ourselves when there is mental illness in the family. Then our loved ones can be who they are, and they will feel less guilty for letting us down. Having made these necessary allowances, treat people with a mental illness, day-to-day, just like anybody else. Expect the "basics" we all require to get along together, and set the same limits and expectations for reasonable order that would exist if they were well. It is very reassuring to people with mental illness when we make a clear distinction between them as a person, and them as someone who has a problem with disordered behaviour. All persons require rules of conduct and cooperative standards to live by.

It is important to encourage independent behaviour

Ask your ill family member what they feel they are ready to do. Plan for progress in small steps that have a better chance of success. Make short-term plans and goals and be prepared for changes in directions, and retreats. Progress in mental illness

requires flexibility; it means giving up our zeal for progress measured by normal standards. There is lots more danger in pushing than there is in waiting. When they are ready, they move.

It doesn't help us to cling to the past, or dwell on "what might have been"

The best gift we can offer is to accept that mental illness is a fact in the life of someone we love, and look ahead with hope to the future. It is important to tell our family members that mental illness makes life difficult, but not impossible. This is the only way it is now; things can be better. People come out of these illnesses, people get better. Family members can help keep the future alive. Most people with mental illness do struggle on and rebuild their lives.

Every time our relatives "get better" and show improvement, for them it means that they are moving back into a risk position

Being well signals that they might be required to participate in the real world, and this is a frightening prospect for the "shaky self". So, it is important for us to be very patient in wellness, just as we are in illness. People recovering from mental illness still have the awesome task of accepting what has happened to them, finding a new meaning in life, and constructing a way of living that protects them from becoming ill again.

Empathy must also extend to each of us who struggle to understand and encourage those we love who have mental illness

Remember, we can only try to do our best. We cannot do any better than that. Some illness processes get "stuck" no matter what we do to help. Brain disorders go through hard, intractable periods where helping those who suffer them is often very difficult to do. We can hope, we can assist, we can keep on trying, but we can't produce miracles. Families tell us that the most important "grace" one learns in the process of caring for people with mental illness is forbearance, synonymous with tolerance, charity, endurance and selfrestraint. Do not criticise yourself if you sometimes cannot muster up these graces when you are feeling frightened or frustrated. For all of us, coming to terms with changed life circumstances in serious illness is a huge adjustment. We do know that empathetic understanding will deepen and enrich our relationships with our relative suffering from a mental illness.

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