

The journey to recovery is undertaken by both the ill person and the family members supporting that person. It is important to remember that mental illness impacts each family member differently. While family members may share a number of common issues, their unique role within the family and their relationship with the ill person will influence how they cope and the level of support they are able to provide.

Mental Illness Can Strengthen Family Relationships

Relationships between family members and the ill person can improve or deteriorate over the course of a mental illness. While a serious mental illness can disrupt family functioning and shake a family to its core, the long-term outcome for some families is that the illness brings the family members closer together and may actually strengthen otherwise tenuous relationships. In fact, several members of our focus groups stated that having to deal with a mental illness strengthened the relationship and allowed for their own personal growth.

“There were times when I was so frightened and worried that I just needed a motherly hug. In my moments of need my husband’s mother was there for me as if she were my own mother. Since this crisis, our relationship has been stronger than I could ever have imagined.”

“The kid is my soul child...so connected to me and the relationship is stronger than ever.”

“The change in my family member allowed me to grow as a person.”

Focus Group members

Embarking on the recovery journey together can result in closer family relationships than was the case before the illness. Collaboration and sharing of the challenges can nurture relationships with non-ill family members who otherwise can feel left out or of secondary importance.

Participants in our focus groups identified some strategies to consider as a means to enhance relationships amongst well members of the family:

- “Focus on relationships with other family members.”
- “Make the needs of other family members priorities as well.”
- “Communicate openly, in an honest way.”
- “Don’t limit conversation to how the ill relative is doing.”

- “Work through family issues, becoming more functional.”
- “Praise family members.”
- “Allow others to have reactions without feeling you have to respond.”
- “Do not take the burden by yourself.”
- “Do not keep secrets.”
- “Take time to be together.”

Many of these strategies are based upon the need for clear communication and an understanding of and respect for each member’s personal journey along the path toward acceptance of the illness.

Have Fun as a Family

Mental illness can disrupt enjoyable moments and activities that families share together. Family rituals and celebrations can be put aside as the illness takes center stage, with less effort being put into spending quality time together and developing family interests.

Life can become one-dimensional and relationships can suffer when life becomes “all work and no play”. It is important to take the focus off the illness on a regular basis and to make a commitment to building joy into family life by spending time doing fun activities that the ill relative and other family members enjoy.

Having fun together can be a valuable way to reduce stress, rejuvenate relationships, and nurture hopefulness as it lifts families out of their everyday lives and puts them into a place of imagination and pleasure. It can also create happy memories for the future and offset difficult times experienced during illness.

Each family will interpret “play” differently depending on its culture, traditions, and their present circumstances. For some, it may be renting a movie for a quiet evening at home. For others, it may be renting ATVs and exploring the backcountry together!

Regular (preferably weekly) family meetings, in which each member has equal input, can be a valuable tool for developing and prioritizing a list of things your family likes to do together. It is important to revisit the list regularly as it will evolve as your ill relative recovers and is able to handle more socialization and stimulation.

“Laughter is inner jogging”

Norman Cousins

Your family's "fun list" might include going out for dinner, cross-country skiing, 10-pin bowling, making music, telling funny jokes, reading the comics together, singing, walking, hiking, baking, going to the playground to play on the swings, and so on.

Having fun and laughing go hand in hand and it seems that laughter is, indeed, the "best medicine" for families. Not only does it play an important role in family bonding, medical research has shown that laughter is good for our physical and mental health. It can help to reduce stress hormones, produce a sense of well-being, boost immune function, stimulate physical healing, enhance creativity and cognitive processes, break down interpersonal barriers, and so on. (And the best part is that it's free and has no side-effects!)

Relationship with Ill Relative

When a family member develops a mental illness, it can change the way they relate to their family. It can be a challenge to recognize when an action is the result of the person's personality or when it is due to the mental illness. But regardless, your family member still needs you, probably even more than they did before the illness struck. The following are more quotes from our focus group on ways in which they tried to enhance their relationship with their ill relative:

- "Don't feel defensive about what to say."
- "Be less secretive."
- "Engage in conversations other than, 'Have you taken your meds?'"
- "Don't take it for granted when things are good."
- "Appreciate what you have."
- "Try to re-engage them with their previous interests, perhaps by participating yourself."
- "We never gave up on her."
- "We told her, 'No matter what happens, we will always be there.'"
- "We learned not to judge."
- "We learned to separate the person from the disorder."

When asked their priorities for assistance, youth with serious mental illness identified the following areas:

- Finishing school and career training
- Finding a decent job
- Learning independent living skills
- Managing and living within a budget
- Finding an affordable and comfortable home
- Dealing with family issues

Seeking Effective Solutions: Partnerships for Youth Transition Initiative, 2007

Supporting Adult Children

Tragically, many mental illnesses develop at a time when a person is reaching adulthood and transitioning to a life of their own. Moving from adolescence to adulthood is a significant transition for anyone, but for those diagnosed with a serious mental illness, the pathway is even more challenging. In addition to your child's struggles with illness, they are also struggling to gradually separate themselves from you as a way of discovering their own identity and self-image.

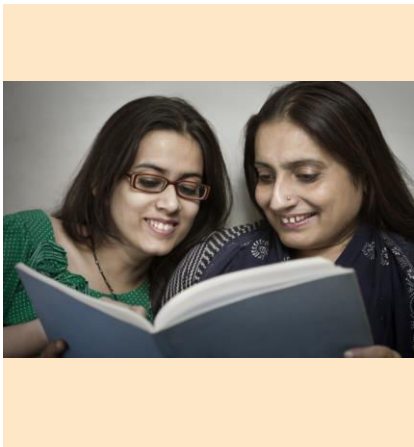
In spite of their illness, young adults with mental illness desire to live their lives in as full and complete a way as possible. They have the same basic desires as other young adults—an education, a decent job, a place of one's own, friends, intimate relationships, and, eventually, their own family.

Supporting an adult child who has developed a mental illness requires a delicate balance between caring for their needs and supporting them back to independence. Parents may worry that their adult child is not capable of making certain decisions or that they are ready to take on increased responsibility for themselves. However, being able to “call the shots” is typical during this transition phase and it is important to create safe opportunities for your child to make decisions, try out problem solving, and to evaluate the impact of their decisions.

This is a tough balancing act and can be a source of great conflict between a parent and young adult, even at the best of times. Parents may become frustrated trying to find the "happy medium" between helping their child manage their illness and allowing them the appropriate freedom and privileges.

This period of self-discovery and exploration can also be frightening for parents. Faced with very real worries about the increased risk of school failure, substance abuse, and criminal activities, it is easy to fall back into the role of nurturing parent. But it's important to remember that this can create dependency.

As a child transitions to adulthood, the character of the parent-child relationship changes significantly. One of the important tasks for young adults and their parents is to develop a more peer-like relationship. Mental illness can interfere with this as it can make the adult child dependent on his or her parents for even the most basic of needs.



As with any parent, the ultimate hope is for your ill son or daughter to become an independent, functioning, and responsible adult. Despite the added challenges presented by mental illness, you can work toward this goal by encouraging your child to move beyond the confines of their illness and to work on achievable goals for their future.

Some useful tips for connecting with your child during this transition phase include:

- Develop your relationship through enjoyable times, laughter, and humor—know your child’s interests and choose opportunities to have fun together doing things they enjoy.
- Choose the time and place for connecting carefully—your child is more likely to talk in a relaxed, age appropriate, appealing environment (for example, across a pool table, side-by-side playing a video game, on the basketball court, driving in the car, shopping for new clothes, eating at their favorite restaurant, etc).
- Keep lines of communication open by creating an atmosphere where all family members feel free to express themselves honestly—avoid judging or preaching; practice active, empathic listening; focus on what’s right rather than what’s wrong; etc.
- Allow for personal choice and social responsibility—build your child’s capacity to take an increasingly more active part in and responsibility for decisions that affect their future.
- Stand back and support your child’s own coping and problem-solving abilities during crises rather than rushing in as their saviour. As their parent, however, you know your child best and must assess when he or she needs more direct help.
- Acknowledge and praise positive choices and achievements, no matter how small or large.
- Be your child’s “talent scout”—nurture their strengths, and encourage them to pursue activities that use them.
- Encourage your child’s dreams and goals—believe in your child and communicate your confidence in their ability to achieve their goals.
- Be part of creating a collaborative team, including mental health professionals, teachers, school counselors, close friends, other significant adults, etc, who can work together to support your child.
- Assist your child in finding developmentally appropriate mental health services, job training, financial planning, housing, etc.

- Allow for privacy around certain aspects of your child’s life—for example, it may be more comfortable for your child to discuss issues such as their sexual health, puberty, etc, with their pediatrician.
- Be a role model for good health practices—including regular exercise, nutrition, hygiene, sleep, etc.
- Continue to maintain boundaries, expectations, structure, and consistency in your parenting.
- Seek professional guidance on parenting your child through this transition phase.
- Most importantly, continue to provide constant love and support—reassure your child that you are there for them, no matter what.

Supporting A Spouse Or Partner With Mental Illness

If the ill person in your life is a spouse or romantic partner, there are many additional issues that arise. Mental illness makes it difficult for someone to connect on a deep emotional level with anyone, even with the person they love the most. As the spouse or partner of a mentally ill individual it is easy to feel lonely, rejected, or unloved. To make matters worse, the sexual side-effects of mental illness, and the medications used to treat it, can further erode intimacy. These strains on a marriage may be devastating and unfortunately many marriages do not survive.

Marriage is supposed to be a balanced partnership but mental illness often destroys that balance. The ill partner may be unable to fulfill both mundane responsibilities and the deeper emotional commitments that are the foundation of the relationship. Furthermore, when they are the main provider for the family, issues such as financial dependency can make for a very worrying experience for the spouse.

In addition to the role of being a husband/wife (and possibly parent), the well spouse/partner may find themselves taking on additional responsibilities as a result of the illness. These may include:

- Crisis intervention;
- Case-management;
- Counselling/therapy/social work;
- Basic needs support—including housing, transportation, and financial support;
- Socialization and rehabilitation;

- Ongoing advocacy to ensure your spouse/partner gets the care they need;
- Helping your spouse/partner understand what has happened to them

The unexpected addition of these responsibilities can be an overwhelmingly stressful experience. Remember though, many of these will be temporary. Your goal is to transition from being a caregiver

to a supporter of your spouse's own efforts toward recovery. (See more about this in Section 6: Transitioning Away from Mental Illness.)

Ways to Be Supportive as a Spouse or Partner

The following are some suggestions to consider on how to support your spouse during different stages of illness. Remember that each person's experience is unique and there are no hard and fast guidelines as to what to expect or when.

Pre-Crisis Support:

- Be prepared to exercise "tough love". Depending upon the timing of events, a spouse may become aware of the mental illness prior to full-on crisis, a period during which one is tempted to "rescue" and mitigate the fallout from their negative behaviour. Allowing your spouse to fail, however, and to hit the proverbial "rock bottom", may be the best (and most difficult) support you can provide.
- Don't ignore warning signs of mental illness. The sooner your ill relative receives treatment, the better the outcome is likely to be for all of you. Encourage them to see the doctor in a gentle, loving manner. Ask other family members to offer their encouragement in this area.
- Despite your best efforts, your spouse may be in denial and not willing to accept treatment as quickly as you would like. Negative behaviours may persist. It is important to establish your limits and boundaries and to be prepared to enforce them without feelings of guilt. (For example, you may need to be firm in refusing to take any abuse or tolerating any drinking or drug use in the family home.)

"Once my husband was in recovery and I began to deal with my own wounds, I remember saying to myself, 'If only I knew then what I know now, I wouldn't have taken it all so personally.'"

Focus Group member

During Crisis:

A wife in our focus group told of how she learned to visualize oversized, bold parenthesis (or brackets) delineating the time before and after her husband's crisis, during which she experienced many illness-provoked hurts and betrayals. Whenever she thinks of hurtful things that happened during that time, she sees these brackets in her mind and mentally jumps on either side of them to remind herself that his actions were a result of illness, not his poor character.

- Be available to provide information. Although you may not understand fully the events leading to the crisis, it is likely that you will have witnessed sufficient behavioural/mood changes in order to aid in an accurate diagnosis.
- Once a diagnosis has been made, educate yourself — learn about the diagnosis, treatment, and prognosis of your spouse's illness. Mental illness is often uncharted territory and will require a steep learning curve. Education brings compassion and reduces anger and fear. The more you know, the better you can help your spouse and yourself.
- Join a support group for caregivers—in addition to the comfort of knowing others are in a similar situation, the information to be learned from those further along the learning curve is invaluable.
- Turn to close friends and family for the support and love your spouse is currently unable to provide. It can be a lonely time for spouses when they are unable to turn to their partner for moral support and may, in fact, be treated very poorly by them. The irony is that just when you need your spouse the most, they cannot be there for you.
- Establish a collaborative partnership with your spouse's professional care team— demonstrate a desire and determination to be an integral part of the team.
- Learn techniques to separate your perception of your spouse from his/her illness—mitigate any feelings of hurt, resentment, betrayal, blame, and so on by reminding yourself that the behaviour is connected to illness, not the person you love. See them as a “whole person” and remember that that person is still there. Compassion goes a long way at this stage.
- Undertake “damage control”. Be proactive and deal with worrisome issues (for example, limiting access to funds, investigating legal implications on debt accumulated during illness) to gain a sense of control over things that may affect you. You cannot control your spouse's illness and you cannot “fix” them, but you do have some control over how the illness affects you.
- Most importantly, take a “one day at a time” approach. While it is natural to want to see the whole staircase, try to be content seeing one step at a time.

Post-Crisis:

- Consider attending couples and/or individual therapy to discuss issues in a neutral, safe environment. Recovery within a marriage is rife with pitfalls as a couple navigates their “new” life together, post-illness. One aspect of the grieving process will be accepting that your life together will no longer be the same. A good therapist can help you to see that your “life redefined” can actually be better than before.
- Practice communication skills that encourage open and honest dialogue. Create a safe environment for your spouse/partner for self-expression in which they will not feel threatened, constrained, or condemned. Provide a nurturing, safe place to express the frustration they are feeling about coping with mental illness. Try to understand their immense pain and give plenty of room to grieve for everything that once was and now no longer is.
- Use respectful humour as much as your spouse/partner is comfortable with. Making light of the situation can help put a positive tone on what can be an all-too-serious stage in your lives.
- Have fun with your spouse/partner. Add laughter and joy to your life together by doing things that you each love to do.
- Avoid focusing on what is currently wrong in your relationship and focus on what’s right. Focus on why you became a couple in the first place. Take the power away from the illness and put effort into strengthening and improving what was once a good thing.
- Be your spouse’s best friend. Be there for them the way you would hope your best friend would be there for you. If it helps, remember the vows you made and consider the now very real meaning of “in sickness and in health”.
- Work with your partner to create a holistic treatment plan—including medication, lifestyle changes, diet, exercise, and so on—to allow you to respond to the illness more effectively in future. Encourage your partner to help identify symptoms and triggers and become familiar with the pattern of their illness. Being aware of the pattern and having a treatment plan in place will help recreate a stable and loving relationship as you work together towards recovery.

More information on supporting a spouse with mental illness can be found in the “*Family Toolkit*” prepared by the B.C. Schizophrenia Society (<http://www.bcscs.org/documents/HTH/familytoolkitbook/>) and in the “*Spouses Handbook*” (<http://www.bcscs.org/resources/topics-by-audience/family-friends/2004/05/spouses-handbook/>).

Supporting Siblings

Mental illness can have a devastating “ripple effect” on all members of the family and siblings frequently report that they feel neglected or ignored as their family life revolves around their ill brother or sister. They often feel isolated and alone as parents and professionals deal with the needs of the ill relative and have little sense of the turmoil that exists for the other children in the family.

Family life can feel unstable and unpredictable for siblings, who can experience a range of emotions as a result of traumatic or disruptive experiences with their brother or sister’s illness. Pain, confusion, despair, hopelessness, anger, grief, guilt, stress, fear, and shame are some of the emotions experienced.

Many factors contribute to a sibling’s reaction, including their age when illness presented itself in the family. As serious mental illness is typically diagnosed during late adolescence or early adulthood, the non-ill siblings generally can recall a time when their brother or sister was not ill. In this case, mental illness may require the siblings to redefine their relationship.

Some common experiences for the non-ill siblings include:

- Confusion and embarrassment about their ill sibling’s changed behaviour
- Fear of stigma, losing friendships, being judged
- Guilt that they are healthy and their sibling is not (“survivor’s guilt”)
- Jealousy of their parents’ attention
- Resentment about not being like other families
- Grief over the loss of their life as they knew it
- Concern about developing a mental illness themselves
- Concern about passing mental illness on to their future children
- Worry about the burden on their parents
- Worry about expectations regarding their future involvement in their ill sibling’s care.

The negative impact of mental illness on well siblings can be managed by making sure their needs are made a priority within the family. Some of their needs include:

- Education/information about their sibling’s illness. Siblings need to understand what has happened and how the illness will affect their brother or sister and the whole family. Accurate, age-appropriate

information will help reduce unnecessary fears and worries. It will also help them to explain the illness to others.

- Open lines of communication. Siblings need to feel safe to discuss their confusing emotions and to express their needs and wants. Set up some uninterrupted time when you and your other child(ren) can sit down and really talk. Talk with each child about what kind of ongoing support they would like to have. Make sure they understand it's OK to have needs and to tell you what those needs are.
- Reassurance. Siblings need to know that they are not to blame for their brother or sister's illness and that they are not responsible for "curing" them. They need to know that they are not alone, that they matter, and are loved. They may also need reassurance about their own mental health.
- Structure and routine. Daily activities for siblings should be kept as normal as possible. Friends and extended family may be able to help with errands, meals, carpools, and so on, in order to achieve this. Involving the siblings in discussions about family routines and any changes that might occur can help maintain some predictability in their lives.
- Freedom to grieve. Siblings go through a grieving process as do other family members. Acknowledging their sense of loss of their brother or sister and the normal family life they knew before illness can help them gradually move toward acceptance.
- Freedom to "have a life of their own". Siblings need to develop some independence through spending time with peers doing a range of activities. They also need their own space and privacy. Knowing that they are not responsible for their ill relative, that they don't need to be perfect, and that they are free to enjoy their life and follow their dreams without burden or guilt, can help siblings to maintain a healthy, interdependent role within the family.
- One-on-one time with parents and/or other significant adults. Spending time with you doing something enjoyable reinforces the message that they are not alone, that they matter, and are loved. You can also see if an extended family member (aunt, uncle, or grandparent) can arrange to spend some one-on-one time with them on a regular basis, or find a friend or relative they can visit for a weekend when they need a "time out".
- Opportunities to connect with other siblings. Having the support of others who are going through the same thing can help reduce siblings' feelings of isolation and offer a safe place to "vent" their frustrations, anger, resentment, and so on. Your community may offer a local or online support group for siblings.

Supporting Children When A Parent Has A Mental Illness

Mental illness can be frightening, not only to your ill relative but also to people around them. For children who are reliant on the care of an adult who has a mental illness, things can be even more confusing. Younger children don't have the maturity to understand that an illness is causing their parent to behave in a strange way.

Confusion and lack of understanding can breed fear, anxiety, worry, and self-blame. Helping a child understand their parent's illness will reduce their fear and give them the tools they need for a more confident, safe, and happy life. Research has shown that some children of parents with a severe and enduring mental illness experience greater levels of emotional, psychological, and behavioral problems than children in the rest of the population. However, many display incredible resiliency and are able to thrive in spite of genetic and environmental vulnerability. It seems that the greater the number of protective factors within the family and the smaller the number of risk factors, the greater the likelihood the child will be resilient.

What You Can Do

Some strategies to protect children's mental health and increase their resiliency when their parent is unwell include:

Education and communication:

Help the child to understand what is happening and educate them about the illness as much as their age allows. Children need clear and factual information about their parent's mental health. There are several good books targeted to different age groups that can be of help in this area (See Resources for Children and Teenagers in Appendix D).

Be prepared to answer their questions matter-of-factly. Being honest with them helps them trust you. Offer examples from their life to help explain how their ill parent is feeling and to put the situation into a context they can understand.

Avoid buying into the stigma surrounding mental illness or requiring your children to conspire in a code of "family secrecy". Expecting children to keep the illness a secret can be extremely burdensome to them. Teach them how to talk to other people and friends about mental illness.

Keep the lines of communication open and create a "safe" atmosphere that encourages children to talk about their feelings. Reassure them that unpleasant feelings such as anger, jealousy, sadness, fear, or embarrassment are normal and help them work through them.

Help your children identify other adults they trust and with whom they can share their feelings.

Talk about ways to deal with their emotions when they feel upset, scared, embarrassed, unsafe, and so on (for example, deep breathing, meditation, going for walks, talking to a friend, playing sports, etc).

Provide a safe, loving, and consistent home environment:

Be consistent in your parenting style and maintain the family's routine as much as possible. A consistent routine helps children feel safe—the more predictable and structured the environment, the better most children will feel.

Develop a written schedule of the children's daily/weekly routine to assist other caregivers in maintaining this consistency.

Enlist the support of relatives, teachers, other adults (for example, guidance counselors, church members) and their friends. A day at the beach/park/water slides with a special relative can be valuable "therapy" for both young and old!

Avoid at all costs putting your children in physical danger. If you sense your spouse is becoming dangerous, you should leave with your children and call for professional help. Make sure the children know what to do and who to call if they don't feel safe. This is especially important if they are children of a single parent who is ill or if their ill parent has a history of violence or suicide attempts.

Ease their worries:

Remind your children that the illness is not their fault and they are not to blame—assure them that they did nothing to cause this problem.

Remind them that their ill parent loves them very much, regardless of what they may have said or done that might have been hurtful.

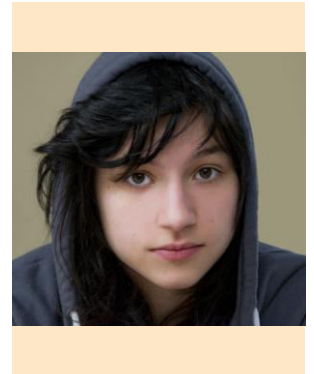
Seek out support programs geared specifically for children—this will help them to know they are not the only children dealing with this.

Avoid making the ill person the axis around which the family revolves and maintain the family's focus on living and enjoying life—spend as much time as you can doing things that the family enjoys.

Allow your children to have as much choice in their lives as is reasonable.

Maintain a child's ability to be a child—it's important that they not be burdened down as primary caregiver for their parent.

Don't overwhelm them with your feelings as your strong emotions can be very frightening to them.



Summary

Maintaining stable, loving relationships within a family is difficult at the best of times. Taking on the additional role of caregiver and relearning to live with your relative with a mental illness can be very stressful and feel overwhelming at times. It can wear you out! But by working together as a family to find the right balance between supporting your ill relative while still nurturing other relationships, it is possible to preserve and even improve upon family dynamics in spite of the challenges presented by the illness.