

Perspectives In Learning

Volume 4 | Number 1


Article 11

1-2003

Serious Mental Illness and the Family: How Can Mental Health Professionals Help?

Cynthia Pattillo

Follow this and additional works at: <http://csuepress.columbusstate.edu/pil>

 Part of the [Curriculum and Instruction Commons](#), [Online and Distance Education Commons](#), [Scholarship of Teaching and Learning Commons](#), and the [Teacher Education and Professional Development Commons](#)

Recommended Citation

Pattillo, C. (2003). Serious Mental Illness and the Family: How Can Mental Health Professionals Help?. *Perspectives In Learning*, 4 (1). Retrieved from <http://csuepress.columbusstate.edu/pil/vol4/iss1/11>

This Editorial is brought to you for free and open access by the Journals at CSU ePress. It has been accepted for inclusion in Perspectives In Learning by an authorized editor of CSU ePress.

PERSPECTIVES IN LEARNING

Volume 4; pp 33

Serious Mental Illness and the Family: How can mental health professionals help?

By Cynthia Pattillo

When a loved one is diagnosed with serious mental illness (Schizophrenia, Bipolar Disorder, Schizoaffective Disorder, or Major Depression) family members are faced with new challenges. The family must provide support, act as an advocate with treatment providers, tolerate unpredictable and unusual behaviors, and, in some cases, involve the legal system to achieve inpatient hospitalization or mandate treatment. The family must also grieve for the losses caused by the illness: loss of goals and dreams, loss of abilities, loss of health. Unfortunately, the family must also cope with the stigma of mental illness. Despite evidence to the contrary, our society continues to blame persons with serious mental illness and their families for the illness, and stigma makes both treatment and recovery more difficult.

It is estimated that thirty to sixty-five percent of discharged psychiatric patients return home to live with families (Bernheim & Lehman, 1985; Amenson, 1998). Families are often required to cope with serious behavior disturbances and manage complex medication regimens. Frequently, families are asked to be the primary caretaker for an individual with a life-changing illness, but are given little information about the illness, the treatment, or the skills needed to cope with the illness.

Stigma decreases the support available to families. Some families hesitate to tell anyone, even extended family members about the stresses they are enduring. As one family member stated, "when your loved one is diagnosed with cancer, the neighbors bring casseroles. With a diagnosis of mental illness, there is no casserole". Not only does mental illness not bring an outpouring of support, in many cases it brings blame and shame.

During the past two decades, advances in medical science have increased our knowledge of the brain and brain functioning tremendously. There is now evidence that serious mental illness is a neurobiological brain disorder. Just as a person can develop a disorder of the liver or heart, they can develop a brain disorder. The causes of serious mental illness are complex and require more investigation, but overwhelming evidence of gross pathology, microscopic pathology, altered electrical impulses, and altered neurochemistry document the biological basis of these illnesses (Torrey, 2001). Regardless of these new breakthroughs in understanding the source of mental illness, families still experience blame for the illness.

Many families report negative interactions with mental health professionals, which appear to stem from the professionals' belief that the family 'caused' the illness, and that the family must change in order to 'cure' the illness. Certainly, a family member developing a mental illness can throw the family into chaos, but family interactions do not cause serious mental illness (though they may cause other mental health concerns). I have personally had family members report

statements of blame made to them by professionals that they remember with much clarity and emotion. They also describe their own emotional response and feelings of helplessness and anger at being blamed for their loved ones' illness. One mother put it quite succinctly, "They told me it was my fault that my son was ill, then discharged him back to my home. If the doctors thought I caused the problem, why would they think it is ok for me to be the caretaker?"

Family therapy is an excellent treatment for many concerns families bring to mental health professionals, but not always helpful to families coping with a loved one's serious mental illness. The assumption that the illness is caused by problems in family communication suggests that family therapy is an appropriate solution. In reality, families want and need accurate and up-to-date information about the illness, information about treatment, support, and specific skills to address problem behaviors (Woolis, 1992).

Mental health professionals can assist families in learning about the causes, prognosis, signs and symptoms, relapse prevention techniques, and treatment options for serious mental illness. Research shows that families who are educated about the illness have more positive interactions with the ill family member (Amenson, 1998; Woolis, 1992). With training, family members can learn to identify and respond to an impending relapse in the earliest stages, thus decreasing the severity of the relapse. Some families with a mentally ill loved one experience an increase in conflict as family members disagree on how to respond to symptoms and where (or whether) to seek treatment. Accurate information about the illness and treatment can decrease this conflict as family members learn the most effective means of interaction, and come to understand the symptoms are caused by a brain disorder (Amenson, 1998). In addition, family members who are educated about the illness also feel more effective in interacting with psychiatrists and other treatment providers.

Most persons with serious mental illness function better in a low-key environment, and mental health professionals can assist families in providing this type of environment for their loved one. The needs of other family members may be in conflict with the needs of the ill family member, and mental health professionals can assist family members in making decisions that balance the needs of all family members. Because communicating with a person with serious mental illness can be challenging and requires special skills, mental health professionals can teach family members these necessary skills. Mental health professionals can also direct families to support groups such as the National Alliance for the Mentally Ill (NAMI). These groups provide education, support and advocacy for families. Unfortunately, very few professionals make this referral, or even know that this excellent resource is available.

In conclusion, one in five families are touched by serious mental illness. Recent improvements in treatment are resulting in higher functioning and fewer relapses for persons with serious mental illness; however, if stigma keeps families and individuals from seeking effective treatments, these improvements are useless. Mental health professionals can assist in decreasing stigma by providing services that are helpful and meaningful to families.

References

- Amenson, C.S. (1998). *Schizophrenia: A family education curriculum*. Pasadena: Pacific Clinics Institute.
- Bernheim, K. F., & Lehman, A. F. (1985). *Working with families of the mentally ill*. New York: W.W. Norton.
- Torrey, E. F. (2001). *Surviving Schizophrenia: A manual for families, consumers, and providers*. New York: Quill.
- Woolis, R. (1992). *When someone you love has a mental illness: A handbook for family, friends, and caregivers*. New York: Penguin/Putnam Inc.

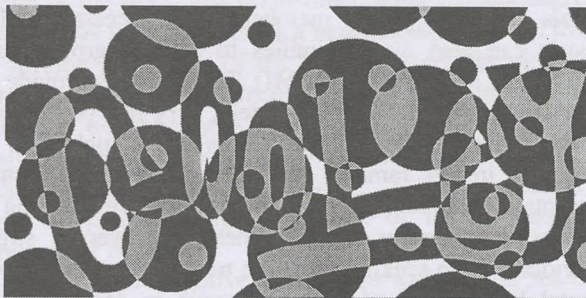
Referral Information

National Alliance for the Mentally Ill – Columbus, GA chapter.
<http://www.widgeon.com/NAMIColumbus/index.html>
Phone: 706-569-7088 or 706-687-4765

National Alliance for the Mentally Ill - Georgia
<http://ga.nami.org/>
Phone: 800-728-1052 or 770-234-0855

National Alliance for the Mentally Ill
<http://www.nami.org>
Phone: 1-800-950-6264

Cynthia Pattillo, Ph.D. is a licensed psychologist and has been employed by New Horizons Community Service Board for thirteen years. She is the Director of Emergency Services for New Horizons, and also serves as the Staff Development Officer and Chair of the Performance Improvement Committee. Cyndy graduated from Tift College (B.A.) and Auburn University (M.S. and Ph.D. in Counseling Psychology).



Heinrich Elmore
paper collage