

GUIDANCE FOR FAMILY MEMBERS:

If someone you love is clearly unwell, but chooses not to seek or consistently engage with mental health services, here are some strategies that may help. Some of these suggestions may seem simple, obvious or “touchy-feely,” but they are powerful.



Tips TO IMPROVE DISAGREEMENTS ABOUT TREATMENT NEEDS

HELP YOUR LOVED ONE CONNECT WITH PEER SUPPORT. This may be from a peer specialist, support group, drop-in center or a trusted person who is living well with mental illness. Peers have often experienced serious crises and have in-depth knowledge about coming out of crises and into treatment and recovery. Peers can often relate and communicate with your loved one in a very different and compelling way. Contact your local NAMI or NAMI Wisconsin for more information (also see pages 31-33 of this guide).

“For a long time, I would skip meds, flush them down the toilet, just in general had a hard time. As I was struggling, a friend invited me to a NAMI support group. I finally felt as if I was not alone. From there, I was propelled into my road to recovery.”

—Mandy, DVR counselor

LISTEN WITH EMPATHY AND WITHOUT GIVING INPUT. Challenge yourself to have a conversation where you do not give any advice or input, no matter how obvious the solution seems to you. It will be more difficult than you think! Simply ask questions to broaden your understanding of your loved one’s experiences. Do not try to “fix.” Just ask questions and listen.

VALIDATE YOUR LOVED ONE. This does not mean you have to agree with them. Validation means finding something understandable in the person’s experience and letting them know what you’ve found.

DROP THE FIXATION ON YOUR LOVED ONE ADMITTING THEY ARE SICK. The ultimate goal is for your loved one to be well, not to admit that they are sick. Even though it seems counterintuitive, a person can be fully engaged with mental health services *without* agreeing that they have a particular diagnosis.

DEMONSTRATE COMFORT WITH BEING WRONG. If you get into an argument with your loved one, take time afterward to reflect on how you communicated. If you feel like you said things you didn’t mean or didn’t approach the issue in the best way, acknowledge those mistakes. Apologize to your loved one and explain your point of view. This will help to normalize making mistakes, which results in a healthier relationship.

NOTE: If you feel your loved one may be a **DANGER TO THEMSELVES OR OTHERS**, please review page 46-47 of this guide.

DISAGREEMENT ABOUT TREATMENT NEEDS

IDENTIFY COMMON GOALS. Perhaps your loved one wants to stay out of the hospital, work (or stay in a job longer or feel more fulfilled by work), go to school or have better relationships with family members. Whatever the goals may be, make this the focus of the conversation, not persuading or convincing them to get or stay in treatment. Together, explore strategies for working toward the goal.

AVOID THE “TAKE YOUR MEDS OR ELSE”

APPROACH. In exploring strategies for achieving goals, be flexible. Treatment may only be one of several strategies. Keep in mind that the terms *treatment* and *mental health services* refer to many options, not just medication. It is also important to remember that your loved one probably knows how you feel about medication. Constantly reminding them may do more harm than good.

AVOID THE “FOR LIFE” APPROACH. Coming to terms with having a mental illness can be really hard. There can be a frightening sense of finality and permanence. So, avoid trying to convince your loved one that they’ll need a certain treatment forever. Instead, frame therapy, medication, etc. as one of many helpful recovery tools that may be worth exploring.

“There is a lot of personal shame when [you] realize that you are no longer in line with society’s understanding of sane. It makes you doubt your own instincts and second guess your movements and decisions. Suddenly, the veil of confidence and ability has been lifted and you are a wreck, struggling to piece together the remnants of your self-image.”

—Mike Earley,
Peer Specialist



The bottom line: you want to be your loved one’s partner, not their adversary. For the time being, set aside the goal of convincing your loved one they need treatment. Instead, identify common goals and build trust.

MORE RESOURCES

- NAMI Family Support Groups, NAMI Family-to-Family, NAMI Basics
- *I’m Not Sick; I Don’t Need Help* by Xavier Amador, leapinstitute.org