

Psychosis

This factsheet covers what psychosis is. And how you can get treatment. You might find it useful if you have psychosis. Or if you care for someone who does.

- Psychosis is a term to describe when you experience reality in a different way to other people.
- Common examples are hearing voices. Or believing that people are trying to harm you.
- Psychosis can be a one-off experience or linked to other conditions.
- There is no single cause of psychosis. Researchers believe that environment and genetics may affect who develops psychosis.
- You should be offered medication and talking therapy to help with your experiences.
- To access treatment for psychosis, you usually need to have an assessment by a specialist mental health service. such as the Community Mental Health Team (CMHT).
- You may need to go to hospital if you are experiencing very distressing psychotic symptoms.

This factsheet covers:

- 1. What is psychosis?
- 2. What mental health conditions are linked with psychosis?
- 3. What causes psychosis?
- 4. How do I get help if I am experiencing psychosis?
- 5. What treatment should the NHS offer me?
- 6. What if I am not happy with my treatment?
- 7. What can I do to manage psychosis?
- 8. Different views on psychosis
- 9. Information for carers, friends and relatives

Key Points.

1. What is psychosis?

Psychosis is a medical term. If you have psychosis you will process the world around you differently to other people. This can include how you experience, believe or view things.

You might see or hear things that others do not. Or believe things other people do not. Some people describe it as a "break from reality". There are different terms use to describe psychosis. Such as "psychotic symptoms", "psychotic episode" or "psychotic experience."

Traditionally psychosis has been seen as a symptom of mental illness. But this isn't necessarily the case. Psychosis is not always because of a mental illness.¹ There are many theories about what causes people to experience psychosis.²

You may not find it helpful to think of your experiences as symptoms of a mental illness.³ You may have a different belief.

This factsheet will use the word 'experiences' to describe what you may go through if you have psychosis. In mental healthcare, your experiences may be referred to as 'symptoms' of psychosis.⁴

Common examples of psychosis include the following.

Hallucinations

These are when you see, hear or feel things that other people don't.⁵ For example:

- hearing voices,
- seeing things which other people do not see,
- feeling someone touching you who is not there, or
- smelling things which other people cannot.

Hearing voices or other sounds is the most common hallucination.⁶ Hearing voices is different for everyone. For example, voices may be:

- female or male,
- someone you know or someone you've never heard,
- in a different language or different accent to your own,
- whispering or shouting, or
- negative and disturbing.

You might hear voices sometimes or all of the time.

Delusions

These are beliefs that are not based on reality. Even though they feel real to you.⁷ Other people are likely to disagree with your beliefs. A delusion is

not the same as holding a religious or spiritual belief which others don't share. For example, you may believe:

- that you are being followed by secret agents or members of the public,
- that people are out to get you or trying to kill you. This can be strangers or people you know,
- that something has been planted in your brain to monitor your thoughts,
- you have special powers, are on a special mission or in some cases that you are a god, or
- your food or water is being poisoned.

You may not always find these experiences distressing, although people often do. You may be able to stay in work and function well even if you have these experiences.

Cognitive Experiences

Cognitive experiences are ones that relate to mental action. Such as learning, remembering and functioning.

Some cognitive experiences associated with psychosis are:

- concentration problems,
- memory problems,
- Unable understand new information, and
- difficulty making decisions.

2. What mental health conditions are linked with psychosis?

Psychosis can be:8

- a one-off experience,
- part of a long-term mental health condition. You may only experience psychotic symptoms as part of your condition. Or you may experience other symptoms too, such as depressive symptoms.
- part of a neurological condition such dementia, Alzheimer's or Parkinson's,
- caused by a brain injury,
- a side effect of medication,
- an effect of drug abuse, or
- an effect of drug or alcohol withdrawal.

Hallucinations can also happen if you are very tired. Or if someone close to you has recently died.⁹

In this section we use the term 'symptom' instead of 'experience.' This is because symptom is a medical term. And here we are describing mental health conditions from a medical view. If you want more information about psychosis linked to neurological conditions or brain injuries look at the Useful Contacts section at the end of this factsheet.

Schizophrenia

You may get a diagnosis of schizophrenia if you experience a mixture of what medical professionals call 'positive' symptoms and 'negative' symptoms.

You can have a combination of negative and positive symptoms.

Positive symptoms

Positive symptoms are something you experience in addition' to your normal experience. Such as psychosis. They include the following.

- Hallucinations. Such as hearing voices.
- Delusions. Such as believing something that isn't factually correct.
- Disorganised thinking. Such as switching from one topic to another with no clear link between the two.

Negative symptoms

Negative symptoms are things which are taken away from your normal experience. They include:

- lack of motivation,
- slow movement,
- change in sleep patterns,
- poor grooming or hygiene,
- difficulty in planning and setting goals,
- not saying much,
- changes in body language,
- lack of eye contact,
- reduced range of emotions,
- · less interest in socialising or hobbies and activities, and
- low sex drive.

Bipolar Disorder

Bipolar disorder can be a life-long mental health problem that mainly affects your mood. Your mood can change massively. You can experience episodes of mania and depression.

If you experience manic symptoms you may also experience psychosis. Your delusions will usually be grandiose. This means that you may believe that you are a very important person. Or you believe that you are able to achieve something which can't be achieved. For example, you may believe you have special powers or are on a special mission.

Not everyone with bipolar disorder will experience psychosis. And you may feel well between episodes of mania and depression. When your

mood changes, you might see changes in your energy levels or how you act.

Schizoaffective disorder

Schizoaffective disorder is a mental illness that can affect your thoughts, mood and behaviour. You may have symptoms of bipolar disorder and psychosis.¹⁰

Drug induced psychosis

People who use or withdraw from alcohol and drugs can experience psychosis.¹¹

In rare situations side effects of medication can cause psychosis. Also taking too much medication can cause psychosis.¹²

Depression with psychotic symptoms

You may experience psychosis if you have severe depression. Severe depression means that your symptoms are more severe than someone who has mild or moderate depression.

If you have a diagnosis of depression you may:

- feel low,
- lack motivation,
- lack energy,
- feel guilty,
- lose your appetite, and
- sleep poorly.

Postpartum psychosis¹³

If you have psychotic experiences after giving birth, this is known as postpartum psychosis. This is a rare condition. This is most likely to happen suddenly within 2 weeks of giving birth.

If you experience postpartum psychosis you may:

- experience psychosis,
- feel confused,
- be suspicious,
- talk too quickly,
- think too quickly, and
- show signs of depression.

This is a serious mental health condition and should be treated as an emergency. If you don't get treated quickly there is a risk that you could become worse very quickly.

You are likely to make a full recovery as long as you get the right treatment. You may be admitted to a mother and baby unit for support.

Delusional disorder¹⁴

You may have a delusional disorder if you have a single firmly held belief that is not true. Or a set of related beliefs that are not true. These are likely to be constant and lifelong beliefs. You are very unlikely to hear voices with this disorder.

Brief psychotic episode¹⁵

You will experience psychosis for a short period of time. The psychosis may or may not be linked to extreme stress.

The psychosis will usually develop gradually over a period of 2 weeks or less. You are likely to fully recover within a few months, weeks or even days.

You can find more information about:

- Schizophrenia
- Bipolar disorder
- Schizoaffective disorder
- Depression
- Personality disorders
- Hearing voices
- Post-traumatic stress disorder

at <u>www.rethink.org</u>. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

Top

3. What causes psychosis?

Nobody knows exactly what causes psychosis. There are different reasons why you may experience psychosis. It is thought that many people who experience psychosis because of life experiences. Which are largely out of their control.^{16,17}

Researchers also believe that genetics may affect who develops psychosis.

Life experiences

There is evidence that stressful life experiences can cause psychosis. In particular abuse or other traumatic experiences.¹⁸ A review found that over half of patients that were in hospital for mental health problems had either been physically or sexually abused as children.¹⁹

Other life experiences can cause psychosis or make your psychosis worse. These include:

- stress, anger or anxiety,²⁰
- drugs and alcohol misuse or withdrawal, ^{21,22}
- homelessness,²³

- delirium. This is a state of mental confusion which may follow a serious physical illness or an operation,²⁴
- grief, divorce or separation,²⁵
- childbirth ²⁶
- racism,²⁷ and
- tiredness.²⁸

Genetic causes

Research suggests that mental illness can run in families.²⁹ But at the moment it isn't possible to separate genetics and life experiences to work out the cause of mental illness.³⁰

Brain Chemicals

Research suggests that changes to your brain chemistry can cause psychosis.³¹ But it's not known why the chemicals in your brain change.

You can find more information about:

- Does mental illness run in families?
- Drugs, Alcohol and mental health
- Cannabis and mental health
- Stress. How to cope

at <u>www.rethink.org</u>. Or call our General Enquires team on 0121 522 7007 and ask them to send you a copy of our factsheet.

<u>Top</u>

4. How do I get help if I am experiencing psychosis?

You may decide to get help for your experiences. You can get help from:

- The NHS
- Adult social services
- Charities
- Self help

How can the NHS help me?

You can speak to your GP about your concerns. They will be able to talk to you about treatment options and coping strategies. You don't have to do what your GP thinks that you should do. But you should listen to them. Make sure that you understand the pros and cons of your treatment options before you make a decision.

Your GP should not give you antipsychotic medication without first talking to a psychiatrist.³²

Your GP should refer you to a secondary mental health team if this is the first time that you have experienced psychosis and asked for help.³³ You should be assessed quickly.³⁴ A secondary mental health team will usually be called the:

- early intervention team (EIT)
- community mental health team (CMHT), or
- crisis team.

You or your carer should be able to make a self-referral to a secondary mental health team if this is the first time that you have experienced psychosis.³⁵

EIT's specialise in helping people who experience psychosis for the first time. But they aren't available in all areas of England. To find your local secondary mental health team you can try the following.

- You can ask your GP for their details.
- You can call NHS 111.
- Use an internet search engine. Use a term like "community mental health team in Cheshire' or 'early intervention in psychosis Camden'.

Look at section 5 of this factsheet, '<u>What treatment should the NHS offer</u> <u>me?</u>' for more information

Support under the care programme approach

Secondary mental health teams can support you using a package of care called, 'Care Programme Approach.' This means that you will have a care coordinator and a care plan. A care coordinator will have regular contact with you. And they will manage your care plan to make sure that you get the help that you need. This can include both treatment and social care needs.

Support for physical health

You are at a higher risk of physical health issues if you have a mental illness. Your risks can include being overweight, having coronary heart disease or diabetes.³⁶

Because of the increased risk you should have regular physical health checks.³⁷ Such as a full health check including weight, blood pressure and other blood tests when you start antipsychotic medication. ³⁸

It could also include:

- a combined healthy eating and physical activity programme.
- support to help you to stop smoking.

How can adult social services help me?

Your local authority is responsible for your social care and support. The social services team are part of the local authority.

If you need help and support to look after yourself then you can have an assessment by social services. For example, you may need support so that you can:³⁹

- get out of the house,
- keep in touch with friends and family,
- get a job or take part in education,
- clean your house,
- prepare meals or go shopping,
- keep safe,
- manage your money,
- take part in leisure activities, or
- contribute to society. For example, volunteer, or be in a group.

What other help is available?

Charities

In some areas, charities will support people who experience psychosis. This may be through support groups where you can talk to other people who have experience of psychosis. Or there may be a different service available for you, such as employment or isolation support.

You can look on our website <u>www.rethink.org</u> to see if we have any support groups or services in your area. Click on 'Help in your area' at the top of the webpage.

Some of the other national mental health charities are:

- Mind,
- Richmond Fellowship,
- Together, and
- Turning Point.

You can look on their websites to see what support they offer in your area.

If you would like us to look for you please contact our advice line on 0300 5000 927 and let us know what sort of support you are looking for.

Self-help

There are things that you can do to help manage your mental health. This is called 'self-help.' You can read more about self-help in <u>section 7</u> of this factsheet. You can find more information about:

- Community mental health team
- Early intervention team
- Crisis team
- Care Programme Approach
- Social care assessment under the Care Act 2014

at <u>www.rethink.org</u>. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

5. What treatment should the NHS offer me?

The National Institute for Health and Care Excellence (NICE) recommend that you should be offered antipsychotic medication and talking therapy if you experience psychosis.⁴⁰ If you decide not to take medication you should still be offered talking therapy.⁴¹

NICE produce guidelines for how health professionals should treat certain conditions. You can download these from their website at <u>www.nice.org.uk</u>.

Your GP may refer you to a specialist mental health team such as the early intervention team (EIT), community mental health team (CMHT), or crisis team.

Medication

Antipsychotic medication can help with psychosis.⁴² Your doctor should give you information about antipsychotics including side effects. You and your doctor should choose the medication together.⁴³

Some people find that they do not start to recover until they get the right medication. It is important to take the medication every day to help your symptoms.

Try not to be too upset if the first antipsychotic that you try doesn't help. There are lots of different antipsychotics to try because people respond to different medications. Some may not improve your symptoms and cause side effects. You should discuss your medication with your doctor if your medication is not working. Or you are finding the side effects hard to deal with. There might be another medication that will suit you better.

Doctors should check that your medication is working. They should also give you a physical health check 12 weeks after the start of medication and then at least once a year. Some antipsychotic medication can make you put on a lot of weight. So, your weight should be monitored each week for the first 6 weeks.⁴⁴

Talking therapies

There are different types of talking therapies recommended for people who have psychosis.

Cognitive behavioural therapy (CBT)

CBT can help you understand your experiences and any upsetting and worrying thoughts and beliefs.⁴⁵ You can discuss new ways of thinking about them and dealing with them.

What is CBT?46

CBT is a talking treatment. It is there to try and help you to:

• understand links between your thoughts, feeling and actions,

- understand your symptoms and how they affect your day to day life, and
- look at your perceptions, beliefs and reasoning.

CBT aims to:

- help you to be aware of signs that your thoughts, feelings or behaviours are changing,
- give you a way of coping with your symptoms
- reduce stress, and
- improve your functioning.

Family intervention

Family intervention is where you and your family work with mental health professionals to help you to manage your relationships. This should be offered to people who you live with or who you are in close contact with.

The support that you and your family are given will depend on what problems there are and what preferences you all have. This could be group family sessions or individual sessions. Your family should get support for 3 months to 1 year and should have at least 10 planned sessions.⁴⁷

Family intervention can be used to:^{48,49}

- learn more about your symptoms, and
- improve communication among family members.

Family intervention could help you and your family to:

- learn more about your symptoms,
- understand what is happening to you,
- improve communication with each other,
- know how to support each other,
- think positively,
- become more independent,
- be able to solve problems with each other,
- know how to manage a crisis, and improve mental wellbeing.

Art therapy

Art therapy may be more useful if you have depressive symptoms, such as withdrawing from people or losing interest in things that you used to enjoy.⁵⁰

You will have arts therapy with a therapist. It will usually be in a group. It is there to mix different communication techniques with creativity. Art therapy aims to help you to: $\frac{51}{2}$

- learn new ways of relating to other people,
- show how you are feeling,

- accept your feelings, and
- understand your feelings.

Therapy for trauma

If you have experienced trauma, your psychosis may be part of your way of dealing with this. This is something which can be treated with counselling or psychotherapy. The therapist will help you to understand the root causes of your hallucinations or delusions. They will explore ways to over-come and control difficult voices and beliefs.

The NHS do not usually offer counselling or psychotherapy to people who are experiencing psychosis. But they should listen to you if you ask for it. Especially if other therapies like CBT, family intervention and arts therapies, are not available locally.⁵²

You can find more information about:

- Antipsychotics
- Medication. Choice and managing problems
- Talking therapies

at <u>www.rethink.org</u>. Or call our General Enquires team on 0121 522 7007 and ask them to send you a copy of our factsheet.

Top

6. What if I am not happy with my treatment?

If you are not happy with your treatment you can:

- talk to your doctor about your treatment options,
- ask for a second opinion,
- get an advocate to help you speak to your doctor,
- contact Patient Advice and Liaison Service (PALS) and see whether they can help, or
- make a complaint.

There is more information about these options below.

Treatment options

You should first speak to your doctor about your treatment. Explain why you are not happy with it. You could ask what other treatments you could try.

Tell your doctor if there is a type of treatment that you would like to try. Doctors should listen to your preference. If you are not given this treatment, ask your doctor to explain why it is not suitable for you.

Second opinion

A second opinion means that you would like a different doctor to give their opinion about what treatment you should have. You can also ask for a second opinion if you disagree with your diagnosis. You don't have a right to a second opinion. But your doctor should listen to your reason for wanting a second opinion.⁵³

Advocacy

An advocate is independent from the mental health service. They are free to use. They can be useful if you find it difficult to get your views heard.

There are different types of advocates available. Community advocates can support you to get a health professional to listen to your concerns. And help you to get the treatment that you would like.

You can search online to search for a local advocacy service. If you can't find a service you can call our advice service on 0300 5000 927. We will look for you. But this type of service doesn't exist in all areas.

The Patient Advice and Liaison Service (PALS)

PALS is part of the NHS. They give information and support to patients.

You can find your local PALS' details through this website link: <u>www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-</u> (PALS)/LocationSearch/363.

Complaints

If you can't sort your problem, you can make a complaint. Your concerns investigated in more detail.

You can ask a member of your health team to explain how to make a complaint

You can ask an advocate to help you make a complaint. Advocates that do this are called Independent Health Complaints Advocates. They are free to use and don't work for the NHS.

You can find out more about:

- Medication Choice and managing problems
- Second opinions
- Advocacy
- Complaining about the NHS or social services

at <u>www.rethink.org</u>. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

<u>Top</u>

7. What can I do to manage my psychosis?

People deal with their experience in different ways. You might need to try different things before finding something that works.

Support groups

You could join a support group. A support group is where people come together to share information, experiences and give each other support. Hearing about the experiences of others can help you feel understood. This may help you feel less alone and boost your self-confidence.

You might be able to find a local group by searching online. The charity Hearing Voices Network have face to face support groups in some areas of the country. Their contact details are in the 'useful contacts' at the end of this factsheet.

Rethink Mental Illness have support groups in some areas. You can find out what is available in your area, or get help to set up your own support group if you follow this link:

www.rethink.org/about-us/our-support-groups.

Or you can call our advice service on 0300 5000 927 for more information.

Recovery College

Recovery colleges are part of the NHS. They offer free courses about mental health to help you manage your experiences. They can help you to take control of your life and become an expert in your own wellbeing and recovery. You can usually self-refer to a recovery college. But the college may tell your care team.

Unfortunately, recovery colleges are not available in all areas. To see if there is a recovery college in your area you can use a search engine such as Google. Or you can call our advice service on 0300 5000 927 for more information.

Peer support through the NHS

Your doctor may offer you peer support. Peer support is when you work with someone who has lived experience of psychosis. And who are now in recovery.⁵⁴ They should be able to offer advice and support with: ⁵⁵

- side effects,
- recognising and coping with symptoms,
- what to do in a crisis,
- meeting other people who can support you, and recovery.

Self-management techniques

Managing your condition on your own is called self-help. Health professionals may offer you help to manage your condition on your own. They may call this a self-management programme.

You can try some of the suggestions below to manage or cope with upsetting experiences.

- Speak to a supportive, friend, family member or someone else who has psychosis.
- Try relaxation techniques, mindfulness and breathing exercises.
- Do things that you find relaxing such as having a bath
- Try a complementary therapy such as meditation, massage, reflexology or aromatherapy.
- Stick to a sleep pattern, eat well and look after yourself.
- Set small goals such as going out for a small amount of time every day. Reward yourself when you achieve a goal.
- Do regular exercise such as walking, swimming, yoga or cycling.

Taking control of the voices

If you hear voices, you could:

- talk back to them,
- distract yourself,
- keep a diary, or
- use a mobile app.

Talk back to them

You may find that talking back to your voices helps you take control.

You could set a time each day to listen to and answer the voices. Remember that the voices are a part of you, so it may be helpful to respond to them in a way that you would like to be spoken to. For example, if your voice is stressed you could try speaking to it in a calming voice. Some people find it helpful to visualise the voices.

If you are worried about talking back to your voices in public, you could pretend you are speaking to someone on the phone.

If you start to talk back to the voices, you may find that they don't like the change. Standing up to voices that frighten or bully you can be tough. You may find it helpful to have talking therapy to help you to take the power away from the negative voices.

Distract yourself

Listening to music, the radio or an audiobook may help you focus on something else.

Concentrating on a task such as a household chore or hobby can help to distract you from your voices.

Keep a diary

You could keep a diary of your voices. You may want to keep a record of the following.

- How many voices you have?
- How often they talk to you, or each other?
- What are they saying?
- How they make you feel?

• What you do to cope with each voice?

Keeping a diary may help you to notice patterns and if anything you are doing is making them worse. This may help you to find new ways to cope with them.

A diary may also help you to talk about your voices with your therapist.

<u>Use a mobile app</u>

The Hearing Voices mobile app offers support and promotes understanding of the challenges faced by people who hear voices. It was developed in partnership with the Hearing Voices Network England. The app is free to download. You can find more information at:

https://hearingvoicescymru.org/hearing-voices-app-a-guide-tounderstanding-helping-and-empowering-individuals/

You can find out more about:

- Recovery
- Complementary and alternative treatments

at <u>www.rethink.org</u>. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

Top

8. Different views on psychosis

You may feel that a mental health crisis linked to your psychosis is part of a spiritual crisis. It may have encouraged spiritual growth. You may find support from others who share your views helpful. For example, within faith communities.⁵⁶

Some people feel that their mental health crisis has been positive and has caused growth in their personal lives. ⁵⁷

You may believe that psychosis can be caused by a deeper psychological distress, which can be worked through. For example, if you feel as though your life is being controlled by outside forces, this might come from feelings of lack of control in your life.

You can find more information about '**Spirituality, religion and mental illness**' at <u>www.rethink.org</u>. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

Top

9. Information for carers, friends and relatives

It can be very distressing if you are a carer, friend or relative of someone who has psychosis. You can get support.

How can I get support for myself?

You can do the following.

- Speak to your GP about medication and talking therapies for yourself.
- Speak to your relative's care team about family intervention. For more information about family intervention see <u>section 5</u> of this factsheet.
- Speak to your relative's care team about a carer's assessment.
- Ask for a carers assessment.
- Join a carers service. They are free and available in most areas.
- Join a carers support group for emotional and practical support. Or set up your own.

What is a carers assessment?

NICE guidelines state that you should be given your own assessment through the community mental health team (CMHT) to work out what effect your caring role is having on your health. And what support you need. Such as practical support and emergency support.⁵⁸

The CMHT should tell you about your right to have a carers assessment through your local authority. To get a carer's assessment you need to contact your local authority.

How do I get support from my peers?

You can get peer support through carer support services or carers groups. You can search for local groups in your area by using a search engine such as Google. Or you can call our advice service on 0300 5000 927. They will search for you.

How can I support the person I care for?

You can do the following.

- Read information about hearing voices or psychosis.
- Ask the person you support to tell you what their symptoms are and if they have any self-management techniques that you could help them with.
- Encourage them to see a GP if you are worried about their mental health.
- Ask to see a copy of their care plan. They should have a care plan if they are supported by a care coordinator.
- Help them to manage their finances.

What is a care plan?

The care plan is a written document that says what care your relative or friend will get and who is responsible for it.

A care plan should always include a crisis plan. A crisis plan will have information about who to contact if they become unwell. You should be given information about what to do in a crisis. ⁵⁹ You can use this

information to support and encourage them to stay well and get help if needed.

Can I be involved in care planning?

As a carer you should be involved in decisions about care planning. But you don't have a legal right to this. The healthcare team should encourage the person that you care for to allow information to be shared with you.⁶⁰

What can I do if my friend or family member is in crisis?

If you think your friend or relative is experiencing psychotic symptoms you may want them to see a doctor. This can be difficult if they do not believe they are unwell. This is called 'lacking insight'.

If you think that your friend or family member is a risk of harm to themselves or others you can:

- call their GP and tell them,
- call 999 and ask for an ambulance,
- take them to A&E, or
- use your nearest relative (NR) rights to ask for a Mental Health Act assessment.

Your nearest relative is a legal term under the Mental Health Act. It is different to 'next of kin.' Your nearest relative has certain rights.

What is a Mental Health Act Assessment?

A Mental Health Act assessment is an assessment to see if someone needs to go to hospital to be treated against their will.

How do I ask for a Mental Health Act assessment?

If you are concerned that your friend or family member is a risk to themselves or other people you could try and get a Mental Health Act assessment by contacting an Approved Mental Health Professional (AMHP).

An AMHP works for social services but can often be found through the community mental health team (CMHT) or mental health crisis team. It is best if the request comes from your friend or family member's nearest relative.

The only way to give someone treatment who doesn't want it is through the Mental Health Act. Your friend or family member will only be detained under the Mental Health Act if they are assessed as a high risk to themselves or other people.

There is no definition for what high risk means. It could include:

- not being aware of hazards because of delusional thoughts or confusion,
- · refusing to eat for fear that food is contaminated, or
- threatening to harm others due to delusions or severe paranoia.

Think about the following questions:

- Who is in danger of being harmed?
- What evidence do you have of this? Have they done it before?
- How has their behaviour changed?
- When did their behaviour change?
- Are they aggressive? If so, how?
- Have they tried to harm themselves or other people? If so, how and when did it happen?
- Have they stopped eating, drinking or bathing?
- Have you got any evidence to show the changes in their behaviour?

Because of the stress involved in detaining someone it is usually the best option if your friend or family member can be encouraged to get the help for themselves, such as though their GP. There is no extra care available whilst detained, compared to in the community.

You can find out more about:

- Supporting someone with a mental illness
- Getting help in a crisis
- Suicidal thoughts. How to support someone
- Responding to unusual thoughts and behaviours
- Carers assessment
- Confidentiality and information sharing. For carers, friends and family
- Money matters: dealing with someone else's finances
- Worried about someone's mental health
- Benefits for carers
- Stress
- Nearest Relative
- Mental Health Act

at <u>www.rethink.org</u>. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

<u>Top</u>

Further Reading

Back to Life, Back to Normality: Cognitive Therapy, Recovery and Psychosis by Douglas Turkington et al. (Cambridge University Press, 2009)

This is a self-help guide for people who experience psychosis and their carers. It helps readers use Cognitive Therapy techniques to control their symptoms and delay or prevent becoming unwell again.

The First Episode of Psychosis: A guide for patients and their families by M. Compton & B. Broussard (OUP USA, 2010) This is a book covering a range of illnesses as well as issues such as stigma and a glossary of medical terms.

Me and My Mind

A website produced by the South London and Maudsley (SLaM) NHS Foundation Trust. The service is for young people in the SLaM area. But there is lots of useful information on the website and resources you can download.

Website: www.meandmymind.nhs.uk/

Rufus May

He is a psychologist who has different views on the cause and management of psychosis. His website has articles and further reading.

Website: www.rufusmay.com

Caring for someone with psychosis or schizophrenia

This is a free, online course provided by Kings College in London. It is aimed at people who care for people who have psychosis or schizophrenia.

Website: www.futurelearn.com/courses/caring-psychosis-schizophrenia

The Royal College of Psychiatrists

Their website has reliable information about different mental illnesses.

Telephone: 020 7235 2351 Address: 21 Prescot Street, London, E1 8BB Email through online form: <u>www.rcpsych.ac.uk/about-us/contact-us</u> Website: www.rcpsych.ac.uk/

The Hearing Voices Network (HVN)

HVN are a charity. They give information, support and understanding to people who hear voices and those who support them. They also support people who have visual hallucinations and people who have tactile sensations. They have a list of self-help groups across the country.

Address: National Hearing Voices Network (HVN), 86-90 Paul Street, London, EC2A 4NE Email: <u>info@hearing-voices.org</u> Website: <u>www.hearing-voices.org</u>



Action on Postpartum Psychosis

A national charity for women and families affected by postpartum psychosis. They run a peer support service, provide information, training to health professionals, do research and promote awareness.

Phone: 020 33229900

Address: c/o Birmingham Mother & Baby Unit, The Barberry National Centre for Mental Health, 25 Vincent Drive, Birmingham B15 2FG Email: app@app-network.org Website: www.app-network.org/

Intervoice

Intervoice are a charity. They encourage people all over the world to share ideas through their online community. You can also find information about hearing voices through their articles and resources.

Address: c/o Mind in Camden, Barnes House, 9-15 Camden Road, London, NW1 9LQ Email: <u>info@intervoiceonline.org</u> Website: <u>www.intervoiceonline.org</u>

Headway

Help people with a brain injury and their families.

Telephone: 0808 800 2244

Address: Headway - the brain injury association, Bradbury House, 190 Bagnall Road, Old Basford, Nottingham, NG6 8SF E-mail: <u>helpline@headway.org.uk</u> Website: <u>www.headway.org.uk</u>

Alzheimer's UK

Support people with Alzheimer's and their families.

Telephone: 0330 222 1122

Address: Alzheimer's Society, 43-44 Crutched Friars, London, EC3N 2AE Email through website: www.alzheimers.org.uk/form/contact-us-generalenquiries

Website: www.alzheimers.org.

 ² Division of Clinical Psychology. Understanding Psychosis and Schizophrenia. Leicester: The British Psychological Society; 2014. Page 17 Available at: <u>www.bps.org.uk/what-psychology/understanding-</u> <u>psychosis-and-schizophrenia</u> (accessed 16th July 2019).

³ As note 2. Page 17.

References

¹ British journal of general practice. <u>https://bjqp.org/content/67/663/436</u>

⁴Mental Health Care. *What is Psychosis?* <u>www.mentalhealthcare.org.uk/what is psychosis</u> (Accessed February 2016).

⁵ NHS. *Hallucinations and hearing voices* <u>https://www.nhs.uk/conditions/hallucinations/</u> (accessed 17th July 2019)

⁶ As note 5

⁷ NHS. *Symptoms. psychosis*

https://www.nhs.uk/conditions/psychosis/symptoms/ (accessed 17th July 2019)

⁸ NCBI. Differentiating organic from functional psychosis.

https://www.ncbi.nlm.nih.gov/pubmed/1543102 (accessed 17th July 2019) ⁹ As note 8

¹⁰ Royal College of Psychiatry. *Schizoaffective Disorder*.

http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/schizoaffectived isorder.aspx (Accessed 16th July 2019).

¹¹ NHS. Causes. Psychosis

https://www.nhs.uk/conditions/psychosis/causes/

¹² As note 11

¹³ NHS. *Postpartum psychosis* <u>https://www.nhs.uk/conditions/post-partum-psychosis/ (accessed 16th July 2019)</u>

¹⁴ World Health Organisation. *International Classification of Diseases version 10.* Para F.22: Delusional Disorders.

https://icd.who.int/browse10/2016/en (accessed 16th July 2019)

¹⁵ As note 14. Para F.23

¹⁶ As note 2. Page 42.

¹⁷ Stilo S, Gayer-Anderson C, Beards S et al. Further evidence of a cumulative effect of social disadvantage on risk of psychosis.

Psychological Medicine. 2017; 47 (5): 913-924.

https://kclpure.kcl.ac.uk/portal/files/61593588/div_class_title_further_evide nce_of_a_cumulative_effect_of_social_disadvantage_on_risk_of_psychos is_div.pdf (accessed 13th February 2019).

¹⁸ As note 2. Page 42.

¹⁹ As note 2. Page 42

²⁰ Douglas Turkington. *Back to Life, Back to Normality: Cognitive Therapy, Recovery and Psychosis.* Cambridge: Cambridge University Press; 2009. Page 63.

²¹ Royal College of Psychiatrists. *Alcohol and depression.*

www.rcpsych.ac.uk/mental-health/problems-disorders/alcohol-anddepression (accessed 16th July 2019).

²² As note 5

²³ As note 2. Page 44

²⁴ Royal College of Psychiatrists. *Delerium*. <u>www.rcpsych.ac.uk/mental-health/problems-disorders/delirium</u> (accessed 16th July 2019).

²⁵ As note 2. Page 42.

²⁶ Royal College of psychiatrists. Postpartum psychosis for carers. <u>https://www.rcpsych.ac.uk/mental-health/problems-disorders/postpartum-psychosis-in-carers</u> (Accessed 15th July 2019)

²⁷ As note 2. Page 45

²⁸ As note 2. Page 29.

²⁹ As note 2. Page 38.

³⁰ As note 2. Page 38.

³¹ As note 13

³² National Institute for Health and Clinical Excellence. *Psychosis and schizophrenia in adults: prevention and management.* Clinical Guidance 178. London: National Institute for Health and Clinical Excellence; 2014. Para 1.3.2.1.

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<sup>33</sup> As note 32. Para 1.3.1.1.
<sup>34</sup> As note 32. Para 1.3.1.2.
<sup>35</sup> As note 32. Para 1.3.1.2
<sup>36</sup> British journal of general practice. https://bjgp.org/content/67/663/436
(accessed 17th July 2019)
<sup>37</sup> As note 32. Para 1.5.3.2.
<sup>38</sup> As note 32, Para 1.5.3.2.
<sup>39</sup> Department of Health and Social Care. Care and Support Statutory The
Care Act 2014, www.gov.uk/guidance/care-and-support-statutory-
guidance (Accessed: 10th May 2019) Para. 1.5.
<sup>40</sup> As note 32. Para 1.3.4.1
<sup>41</sup> As note 32. Para 1.3.4.2.
<sup>42</sup> As note 32. Para 1.3.4.1 and 1.4.2.1.
<sup>43</sup> As note 32. Para 1.3.5.1
<sup>44</sup> As note 32. Para . para 1.3.6.4
<sup>45</sup> As note 32. Para 1.3.7.1.
<sup>46</sup> As note 32. Para 1.3.7.1.
<sup>47</sup> As note 32. Para 1.3.7.2.
<sup>48</sup> As note 2. Page 66.
<sup>49</sup> As note 32. Para 1.3.7.2.
<sup>50</sup> As note 32. Para 1.4.4.3.
<sup>51</sup> As note 32. Para 1.4.4.4.
<sup>52</sup> As note 32. Para 1.4.4.6
<sup>53</sup> General Medical Council. Good Medical Practice. Manchester: GMC;
2013. Para 16(e).
<sup>54</sup> As note 32. Para 1.1.6.1.
<sup>55</sup> As note 32. Para 1.1.6.3.
<sup>56</sup> As note 2. Page 55
<sup>57</sup> As note 2. Page 55
<sup>58</sup> As note 32. Para 1.1.5.1.
<sup>59</sup> As note 32. Para 1.1.5.3.
<sup>60</sup> As note 32. Para 1.1.5.4.
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Rethink Mental Illness Advice Service

Phone 0300 5000 927 Monday to Friday, 9:30am to 4pm (excluding bank holidays)

Email advice@rethink.org

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