



Are you worried about someone's mental health?

This factsheet will try to help if you are concerned that a loved one, friend or relative may need professional help. It is mostly written from Rethink Mental Illness's experience and mainly concerns the onset of a psychotic illness (such as schizophrenia, schizoaffective disorder, psychotic depression or bipolar). However, a lot of the information in the factsheet may be useful whatever mental health problem you think your loved one may have.



- Sometimes changes in a person's behaviour can be a sign they need treatment for mental health problems.
- Psychotic illnesses, such as schizophrenia, rarely come out of the blue and are usually preceded by gradual changes in a person's mood or behaviour.
- If you suspect your loved one is developing a psychotic illness it is a good idea to get treatment as soon as possible because early intervention can improve recovery.
- Your loved one should go to their GP first. If they refuse you could contact their GP for them.
- Sometimes the GP may refuse to assist so you could contact the Community Mental Health Team or the Early Intervention Team directly.
- It can sometimes be hard to get the help you need because health professionals normally expect a person to ask for help themselves.
- It is a good idea to keep a diary of changes in behaviour to give to professionals
- If you cannot get help and your loved one's condition worsens you
 may need to read Rethink Mental Illness' <u>'Getting help in a crisis'</u>
 factsheet. Our contact details are at the end of this factsheet.

This factsheet covers

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1. Signs that something is not quite right

Normal behaviour can be disturbed by the sorts of stressful events that we all experience from time to time such as a relative dying, losing a job or a relationship ending. Typical emotions in response to these events may be sadness, anger or feeling stressed. These are all natural responses and, although the feelings may be very intense for a short period, the changes will probably only be temporary. Support, patience and understanding will help a person get back to normal.

Sometimes changes in behaviour may indicate that a psychotic illness is developing. Psychosis rarely come out of the blue. Typically, it is preceded by a gradual change in behaviour¹. This can happen over a relatively short period or over a number of months. Some of the changes you may see include:

- becoming more anxious, irritable.
- becoming depressed.
- difficulty in concentration or memory.
- being preoccupied with unusual new ideas or odd beliefs.
- change in sleep patterns, lack of or too much sleep.
- changes in social behaviour, overly friendly or withdrawn.
- marked changes in mood.
- not able to function as previously, unable to cope with work or studies.
- less able to complete personal tasks such as personal hygiene or preparing food.
- becoming overly suspicious and paranoid such as thinking people are talking about them.

Whilst many of these symptoms alone may not indicate that a mental illness is developing, a cluster of them could be a sign of mental health problems and, in some circumstances, may indicate a psychotic illness is developing.

If the illness has not been detected or treated early then more obvious signs that someone needs treatment may include:

- Feeling suicidal.
- Not completing basic tasks such as personal hygiene or preparing food.

- Not communicating with anyone or refusing to leave their room for days.
- Not sleeping at all or sleeping most of the day.
- Believing that the world is "out to get them" or that there is a government conspiracy against them.
- Believing that friends/family members want to do them harm.
- Thinking that the TV is talking to them or that external forces are invading their thoughts.
- Believing they are on a special mission or have special powers.

If your loved one is experiencing any of these symptoms then is may be best to read our factsheet <u>'Getting help in a crisis'</u> which can be downloaded from <u>www.rethink.org/factsheets</u> or by contacting the Rethink Advice & Information Service. Our contact details are at the end of this factsheet.

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2. What next?

Evidence suggests that the earlier psychosis is recognised and treated, generally the better the outcome ². Getting help sooner rather than later can:

- improve how fast a person recovers.
- improve how much a person recovers.
- reduce the likelihood of relapse.
- reduce the likelihood of admission to hospital.
- reduce the stigma associated with mental illness.
- reduce time lost from work, school or college.
- reduce stress on family and friends.

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3. Where do I start?

If you are concerned that someone is suffering from the onset of psychosis, it is important to seek medical help early. Unless there is a crisis, treatment for mental health problems is normally accessed through a person's GP who can prescribe medication, arrange an appointment with a psychiatrist and make a referral to the local community mental health team if necessary.

Helping someone must start by encouraging them to realise there is a problem and seek help. It will be important to:

- Imagine how you would feel in their situation. Remember that the person may be anxious, frightened, confused.
- Remember they may feel you are "getting at them" so try to be calm, sympathetic and tactful.
- Approach the subject when they seem to be relaxed and most likely to listen to you.

• Remember that, to the person, any unusual feelings of paranoia are very real. Reassure them that you understand that they believe certain things but that you do not think they are true.

You may try suggesting that:

- stress, anxiety or other symptoms are making it difficult for them to cope as well as usual and that a doctor should be able to help.
- you could arrange for you or someone else close to your relative/friend to accompany them to go to see a doctor.

Maybe try to reassure them that:

- Most mental health problems, including psychotic symptoms, are treated very effectively in the community with medication. A common concern for people is that they will have to go to hospital but this is unlikely especially if treatment is sought early.
- All GP's visits and notes are kept entirely confidential unless consent is given by the patient. A concern they may be having is that other people will know they are being treated for mental illness.

It might be helpful to read our factsheet <u>'Dealing with unusual thoughts</u> and <u>behaviour</u>' which can be downloaded from <u>www.rethink.org/factsheets</u> or by contacting the Rethink Advice & Information Service. Our contact details are at the end of this factsheet.

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4. Asking for help

If your relative/friend has refused to see a doctor but you still believe that they are suffering from a mental health problem (which may or may not be a sign of a psychotic illness developing) it may be time for you to seek help.

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5. Seeking help from a doctor

You could start by writing a letter to your loved one's GP. Clearly describe the reasons for your concern tactfully and try to stick to facts and examples. Most people find it helpful to make a list of reasons for their concern or keep a diary. If the doctor seems unsympathetic you could try asking at reception if any of the doctors have special experience in working with people with mental health problems, and try contacting them.

You may be invited to talk over your concerns with the doctor you contacted, or you may want to make an appointment yourself. Once again, the doctor will appreciate factual statements about what has happened rather than opinions or vague descriptions; for example:

- My daughter has left college because she believes all the staff are talking about her.
- My son does not come out of his room except to collect some food.
- My wife insists on changing her route to work because she believes she is being followed.

Any evidence of the changed behaviour would be useful, for example, comments made in a school report about deteriorating school work. You may want to make them aware if there is anyone else in the family that suffers from mental illness.

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6. Common responses from doctors

Some doctors will treat your information and concerns with respect and will be willing to arrange for your friend/relative to be visited and assessed at home.

However, often doctors believe that it is not their role to assess someone for a mental health problem unless that person has approached them directly.

If you provide enough written examples which indicate the person could be developing a psychotic illness which is affecting their health and safety, the GP should take that into account when deciding whether to approach them or may consider making referral to the community mental health team. It might also help to point out the NHS's priority of treating people who have signs of psychosis early.

Some doctors believe that in listening to the concerns of others they may be breaching their duty of confidentiality to their patient. This is not true and the duty of confidentiality does not prevent a doctor listening to your concerns³.

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7. Asking for help elsewhere

If you still have concerns but you have been unable to get help from a doctor there are other people who may be able to help. You could try calling the local community mental health team and talking to a community psychiatric nurse (CPN). Normally the local mental health team will require a GP's referral to see someone but it may be possible to arrange a visit if you explain that your loved one is refusing to see the GP.

If they refuse and you feel your loved one needs help urgently it may also be useful to read our factsheet <u>'Getting help in a crisis'</u> which can be downloaded from <u>www.rethink.org/factsheets</u> or by contacting the Rethink Advice & Information Service. Our contact details are at the end of this factsheet.

Under the NHS and Community Care Act 1990 Social Services have a duty to perform a community care assessment even if the person who

needs it has not asked for help. If your loved ones mental health problems are creating social care needs it may help to write to Social Services and ask for a community care assessment. Your loved one may or may not cooperate with the assessment but if it appears to the assessor that the person may also have health needs they have duty to inform health services and invite them to assess⁴.

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8. Early Intervention in Psychosis

Research has suggested that the 18 – 30 age group are particularly vulnerable to developing psychosis. Furthermore, the earlier this group has access to treatment the better their chances of recovery and the lesser the impact on long term life chances such as education, employment and relationships.⁵ To address this need, some areas have set up early intervention services to deal with young people between 14 and 35 who are experiencing their first episode of psychosis. They should assess anyone who may have symptoms of psychosis but are not necessarily confirmed as psychotic. It is sometimes possible to self refer to these teams without going through your GP. Details of early intervention services in your area and how you can access them should be available from you local community mental health team.

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9. Problems with getting help

Rethink are aware that the main problem for families when trying to get help for their loved one is the response from professionals when the person experiencing symptoms of mental illness will not ask for help. As said earlier in the factsheet many GP's will only see a patient if they have asked for help. As Community Mental Health Team's will often only see clients if they have been referred by the GP, this presents a particular difficulty for people with psychotic symptoms as they often do not believe they have a problem (this is known as "lacking insight").

Even if health professionals have agreed to make contact with your loved one, they cannot be forced to accept treatment unless they are under the Mental Health Act.

If you are in this situation you could contact the Rethink Advice & Information Service to discuss it in more detail. Our contact details are at the end of the factsheet.

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10. Is there anything else I can do?

Additional factors can also trigger and maintain poor mental health as well as cause difficulties in assessing someone for a mental health problem. These can include the use of alcohol and drugs. This is because drugs and alcohol can⁶:

- trigger mental illness in some people
- be used by people developing a mental health problem to make them feel better (often referred to as self-medicating)

• cause symptoms of mental illness such as paranoia

You could make your friend or relative aware of these facts and perhaps encourage them to reduce their use of these substances. You may also want to read our <u>'Dual Diagnosis'</u> factsheet which can be downloaded from <u>www.rethink.org/factsheets</u> or by calling the Rethink Advice & Information Service.

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¹ Schizophrenia,Core interventions in the treatment and management of Clinical Excellence, 2009

² Loebel, A. D., Lieberman, J. A., Alvir, J. M., et al. (1992) Duration of psychosis and outcome in first-episode schizophrenia. American Journal of Psychiatry, 149, 1183–1188.

³ Confidentiality, Guidance for Doctors; General Medical Council, 2009

⁴ As above

⁵ Bertolote, J. & McGorry, P. (2005) Early intervention and recovery for young people with early psychosis: consensus statement. British Journal of Psychiatry, 187, s116-119. ⁶ Dual Diagnosis Good Practice Guide, Department of Health 2002

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Rethink Advice & Information Service

Phone 0300 5000 927 Monday to Friday, 10am to 1pm

Email advice@rethink.org

The Rethink Advice & Information Service welcomes your feedback on whether this information was helpful to you. You can provide feedback in the following ways:

By email: feedback@rethink.org

By post:

Rethink Advice & Information Service Rethink Mental Illness 89 Albert Embankment London SE1 7TP

By telephone: 0300 5000 927



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