Difficult Steps
Navigating destructive behavior and legal issues with a mentally ill loved one.

The Grace Alliance
Anyone Can RECOVER ... Everyone has a ROLE
The Grace Alliance

Mental Health Grace Alliance is a 501(c)3 non-profit organization that provides recovery programs, support groups, training, and collaborative partnerships to impact mental health care.

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Introduction

The Grace Alliance vision is to see the works of God displayed in individuals and families affected by mental illness. Anyone can recover and everyone has a role (John 9:1-3).

Mental illness is defined as a disorder of the brain resulting in the disruption of a person’s thoughts, feelings, moods, and ability to relate to others that is severe enough to require treatment or intervention. In some cases this disruption of thoughts and emotions results in destructive decisions and behaviors for the individual and/or others.

Our hope is that the information and suggestions provided in this booklet will help equip you to better deal with these difficult situations and behaviors so that you and your loved one might develop a balanced and healthy lifestyle.

Disorder and Sin

A disorder is a condition in which there is a disturbance of normal functioning. To be disordered is to be broken - thrown into a state of disarray or confusion. In no way does labeling a behavior as disordered cause one to assume that the behavior is normal or accepted. In fact just the opposite is true; disordered behavior is abnormal and implies the need for change.

Sinful behavior, like all behavior, is a complex interplay between physical, mental and spiritual factors. The choice of label, disorder or sin, often results from one’s perspective. If one focuses on the external or physical and ignores the spiritual, then an abnormal behavior may be called a disorder, while a focus on internal or spiritual factors may result in the same behavior being labeled as sin. One label does not somehow change or limit the other; both can describe the same behavior from different vantage points or perspectives.

The labeling of a behavior as disorder also results from the availability of effective treatments or interventions that temper or limit the expression of the problem behavior. Given that all behavior is rooted in biology, it is understandable then that some sinful behaviors can be altered through the use of physical remedies.

The fact that there is such an overlap between behaviors considered disordered and those considered sinful is further proof that both biological and spiritual factors are involved. However, it is important to realize that while some sins may rightly be thought of as disorders (e.g., substance dependence), not all disordered behaviors are sin.

Destructive Behavior

Recognize that destructive behaviors in your loved one are the result of the psychiatric disorder, not the person. These behaviors stem from biological brain abnormalities and chemical imbalances which lead to distorted thoughts, feelings and perceptions.
**Destructive behaviors** commonly associated with psychiatric disorders include alcohol and substance abuse, excessive spending, self-harm (e.g., cutting), violence, stealing/shoplifting and sexual infidelity.

Talk to your loved one’s psychiatrist. **Medications** such as selective serotonin reuptake inhibitors (SSRIs) and mood stabilizers can be used to decrease impulsive behavior and treat associated problems such as depression and emotional instability. Monitoring your loved one’s medication, symptoms and side effects is essential to help minimize this type of behavior.

Keep reminding yourself **this is not personal**. The normal reaction is to believe that they are doing and saying destructive things to harm or disrespect you, but behind their negative words and behaviors they are actually suffering and crying out for help.

**Respond** to the problem (your loved one’s mental illness as a whole) rather than react to specific destructive behaviors. Avoid ultimatums and recognize that change will come as a result of a process rather than a quick fix. You don’t have to be perfect – just willing to see your loved one through God’s eyes.

You can help **create change** in your loved one just by talking with them about the emotional pain they are trying to deal with. This allows them to talk about their internal suffering, rather than express it by hurting themselves or others.

**You don’t have to do it on your own.** Find a Christian counselor or therapist that will help your loved one eliminate destructive and negative behaviors.

**Suicide**

Individuals living with mental illness are at a greatly increased risk of suicide. Approximately 90% of those who die by suicide are suffering from a psychiatric disorder at the time of death.

**Communicating ideas of suicide or a desire to die** is the single strongest indicator of increased suicide risk.

The abuse of **alcohol and/or other drugs**, coupled with depression, greatly increases an individual’s likelihood of suicide.

If you are concerned that your loved one may be suicidal, **talk to them!** Ask specifically if they are (1) having suicidal thoughts/ideas, (2) have a plan to do so and (3) do they have access to lethal means (e.g., pills, weapons). Asking an individual the “suicide question” does not increase their risk of suicide and may save their life.

If their response makes you believe that they are suicidal, **recommend that they seek assistance** and help them contact their mental health care provider.
If they do not have a mental health care provider or are in **immediate danger** of harming themselves, take them to an emergency room or call 911.

If you **need to talk** to someone about your love one’s suicidal thoughts/behavior or need guidance on how to respond, help is only a call away (1-800-273-TALK).

Help your loved one avoid isolation and despair. Develop a **supportive care** structure that includes mental health professionals, family, friends and a faith community.

Nine out of 10 suicide attempts occur at home. To help reduce the risk of suicide at home, follow these suggestions for a safer home environment:

- **Guns** are the leading means of death for suicidal individuals, accounting for nearly 60% of suicide deaths per year. Guns should be taken out of the home and secured.

- While guns are the most common way that people complete suicide, **overdose** is the most common means by which people attempt suicide. To minimize the risk of overdose, keep only small quantities of medication in the home or consider keeping them in a locked cabinet. Remove all unused or expired medication. Remember that over-the-counter medication, such as Tylenol or Advil, can also be lethal if misused.

- **Alcohol** use or abuse can decrease inhibitions and cause people to act on their feelings more freely. Only keep small quantities of alcohol in the home, or none at all.

Although suicide is often preventable, it is important to understand that when a loved one follows through with his or her threats, **no one is to blame**. Sometimes no matter how hard we try, those we love still act on their hopeless feelings and end their lives.

### Legal Issues

**Prepare** a document with your loved one’s insurance information, driver’s license number, social security number, diagnoses, medications (and doses) and mental health care providers names and phone numbers. Find the number for crisis teams or hotlines in your area.

When there is an **immediate safety concern** (e.g., suicidal or homicidal thoughts / actions) for you or your loved one, call 911 and explain your loved one has a mental illness and the situation. Don’t feel guilty - this can begin a process for getting better help and care for them.

Individuals who are judged to be a danger to themselves or others can almost always be **forced to get treatment**, but some states also allow concerned family and friends to petition the court to force a loved one to be evaluated for treatment when they are not a danger to themselves or others. Contact your state mental health agency for more information.
In some cases, an individual’s disorder may be so severe that they are unable to make proper decisions about their finances and care. In these situations, it is important to talk with an attorney about the possibility of obtaining a power of attorney or guardianship of your loved one so that you can assist them in making financial and legal decisions.

Individuals living with mental illness may not be able to work or may have trouble holding a job. This becomes particularly difficult when they are the primary provider in a family. Individuals with mental illness are often eligible for government assistance through entitlement programs such as SSI and SSDI.

Some mentally ill individuals may become involved in criminal activity as a result of their disorder. It is important to find your loved one an attorney that has experience working with mental health issues. In many large cities there is often a specific mental health court system set up to handle such cases. Provide your loved one’s attorney with all available psychological and medical documentation. If there are no documents, ask the attorney to request that a psychiatric assessment be done on your loved one. Making the court aware of your loved one’s mental illness does not guarantee they will avoid legal consequences, but it does help the judge better understand which programs within the criminal justice system are most likely to provide appropriate care for your loved one.

**Boundaries**

**Appropriate boundaries** must be put into place so that destructive behaviors do not harm or take advantage of you or others in your loved one’s life. Before you implement new boundaries, you need to discuss and agree as a family the consequences for destructive and negative behavior. By setting up and consistently enforcing boundaries for a time, you are equipping your loved one with stability rather than allowing the disorder to control his/her life. The purpose of boundaries is to help your loved one develop a safe and healthy lifestyle, not to take away their freedom.

**Crisis** – If you or your loved one are in immediate danger of being harmed, call 911. Let your loved one know that whenever aggressive behavior is displayed, the police will be called.

**Substance Abuse** – Individuals with serious mental illness are at a higher risk of drug and alcohol abuse. It is advisable to remove alcohol from your home to minimize the temptation to drink. The use of illegal drugs is simply not to be tolerated. Alcohol and drugs alter the delicate balance of chemical transmitters in the brain and make it difficult for psychiatric medications to work effectively. If you are personally comfortable with drinking, do this in another setting apart from your loved one.

**Finances** – When excessive spending is a problem you will need to work out what access your loved one has to the family’s finances. A good system is a weekly allotted amount of cash or gift certificates. Limit (or bar) access to credit and debit cards. If they are working or receiving an income of some sort, help them create a responsible system for paying bills and savings.
Treatment – Taking prescribed medications and going to scheduled psychiatrist and therapist appointments must also be looked at as a boundary. Organize medications in such a way that they can be taken regularly and with ease. Make arrangements for transportation to all mental health related appointments.

Attitude and Language – Negative changes in personality are not uncommon in those struggling with mental illness. Your loved one may become irritable, explosive and/or start using foul language. This type of behavior cannot be tolerated, particularly if children are in the home. The use of effective communication tools and strategies (see “First Steps” booklet for suggestions) can help diffuse difficult interactions and bring calm.

Negative Relational Influences – Your loved one may form relationships with others that actively encourage and enable an unhealthy lifestyle. Simply telling your loved one they have “bad” friends and that they must get rid of them will only cause them more distress. Instead, help your loved one to see the value of healthy relationships based on honor. True friends will honor them by encouraging a healthy lifestyle. Friends that disregard their condition (disorder), promote an unhealthy lifestyle and cause division in your relationship with them are not honoring. If these friendships are abusive or involve illegal activity, talk with a professional counselor or attorney to understand what options you have to protect the safety of your loved one and family.

 Freedoms and Responsibilities – Depending on the severity of your loved ones disorder you may need to restrict their use of a vehicle, phone and other freedoms around the home and community. This should be seen as a safety issue, not a punishment.

Reconciliation

All of the behaviors described in this booklet cause division within families and result in damaged relationships. While stopping the display of these behaviors is the first priority, the relational harm they cause must also be dealt with if the person living with mental illness is to continue progressing towards healing and wholeness.

The Old Testament book of Hosea outlines a five-step process for restoring an individual displaying destructive behavior. Relational reconciliation is a process and these steps should not be seen as a quick fix.

1. Clearly identify sinful behaviors and describe the associated consequences of such behavior (Hosea 2:1-13). You must be honest with your loved one about the sinful nature of their behavior and its consequences. This must be done in a spirit of love rather than judgment.

2. Avoid becoming an enabler of your loved one’s destructive behavior (Hosea 2:6). Do not allow frustration or fatigue to cause you to accept your loved one’s destructive behavior as status quo. Maintain the attitude that their behavior must change. Inconsistency in your response will only make the behavior more likely to occur.
3. **Allow your loved one to suffer the consequences of their behavior** (Hosea 2:7). This is a difficult step, especially for parents, but it’s healthy for them to learn from mistakes. If you or someone else constantly covers over or minimizes the negative consequences of their destructive behavior, then the potential for restoration will be greatly limited.

4. **Continually make it clear to your loved one that restoration and forgiveness are possible regardless of what they may have done** (Hosea 3:3). In many instances this will require you to humble yourself. Remember, the unconditional love, acceptance and forgiveness your loved one needs from you can only come through Christ.

5. **Set up appropriate boundaries** (Hosea 3:3). Protect yourself and your family. Behavior does not change overnight. This will be a long and difficult process for both you and your loved one. Reward successes and point out failures in an environment of acceptance and love.

**Online Resources**

- The Grace Alliance (www.mentalhealthgracealliance.org)
- National Alliance on Mental Illness (www.nami.org)
- National Institute of Mental Health (www.nimh.nih.gov)
- WebMD (www.webmd.com)