



## Practical Advice for Family/Caregivers

### Medication

- Understand your family member's medication(s) and its side effects
- Help your family member to independently manage their medication(s)
- Discuss with your family member the importance of the medication(s) in reducing their unpleasant symptoms
- Make time to discuss everyone's feelings about the medication(s)
- Watch and learn the signs that your loved one may not be taking his/her medication(s)
- *Please refer to [FERC's Medication Information](#) sheet and table included in our packet for further information on medication*

### Social Withdrawal and Isolation

- Involve your family member in family social activities
- Encourage your family member to become involved in a day program such as: social activities, daily living, and skill building
- Facilitate social activities with your family member's friends to include your family member
- Acknowledge that your family member needs to be alone at times
- Do not push too hard when your family member withdraws
- Remember, he/she needs "down time" for sorting out and coping with his/her experiences

### Hygiene and Appearance

- Acknowledge and encourage their improvements and efforts, regardless of how minor they appear to be
- Encourage your loved one to express their own style and creativity
- Acknowledge the range of styles that are acceptable among your family member's peers
- If necessary, arrange for teaching or instructing in hair care, make-up, or personal style

- Negotiate with your loved one if they are reluctant to bathe; try to implement incentives that you both are comfortable with
- Remind your family member and assist if necessary, to “Please put on a clean shirt,” or “Please comb his/her hair”

**Bizarre or Unusual Behavior (e.g., the need to pace back and forth, paranoia, or laughing to oneself)**

- Sit down and talk calmly with your family member about your concerns
- Be firm, without relying on threats, about behaviors that are unacceptable
- Be clear about what is unacceptable
- Develop a happy medium; remember, you cannot change or control every behavior
- Respond to a hallucination, delusion and/or paranoia by validating their feelings about it: “It must be so frightening”
- Use reassurance to allay your family member’s fears: create a sense of safety, by using a phrase such as “You are safe here with me”
- Try to tolerate behaviors that may appear a little different but that are not dangerous or harmful
- Join a support group that will help/educate you on coping strategies
- Distract your family member from his/her behavior by involving him/her in other activities such as one of their hobbies
- Use humor (when appropriate)
- Solicit information and support from treatment provider(s)
- Become educated about holistic (e.g., meditation, acupuncture, massages) approaches to symptom management
- Be open to new treatment methods
- Coordinate strategies and become involved with a treatment provider
- In public or close quarters, distract your family member by starting a conversation or redirecting their attention

**Violent or Aggressive Behavior**

- Aim to prevent escalation and police involvement
- Talk directly with your family member about his/her behavior
- Remain composed and speak in a calm tone
- Firmly and clearly state what you do not like and what you would like your family member to do
- Set clear boundaries and sign a contract with your family member
- Do not make idle threats; follow through with the consequences that you both agreed to
- Tell your family member how they make you and others feel as a result of their actions

- Learn to identify early signs of relapse
- If necessary, remove, hide, or lock away any item(s) that can be used as a weapon
- Request outside assistance if necessary (Police Department, Crisis clinic, etc.)
- Remember safety first

### **Self-Destructive and Suicidal Behavior**

- Create a supportive space for your family member to disclose feelings that they may have of hopelessness and despair; assist them with identifying these triggers
- Take any disclosure of wanting to commit suicide seriously; ask if they have a plan
- If at all possible, call crisis support services as an alternative to calling the police
- If a family member discloses that they feel suicidal, do a safety assessment and removal of all items that could be perceived as weapons (e.g., sharp items, kitchen utensils, prescriptions or over the counter medication, household cleaners)
- Look for warning signs such as: giving away personal items, mood changes, or a sudden calmness and peacefulness - this may be due to their plan to self harm
- If cutting is a concern, address this issue, and look for visible marks in areas that are normally unexposed (e.g., upper thighs, abdomen, pelvis, arms)
- Remind your family member that they have options to resolve their issue(s) and explore them
- Have your family member commit to working through this difficult time, develop a plan with them and have him/her agree to talk with you or a professional before they hurt themselves (obtain their signature if possible)
- Be aware and look for behaviors that may indicate that your family member is going to have a relapse (e.g., different sleeping or eating patterns, bizarre behaviors)
- Gently approach your family member and remind him/her that they are loved
- If your family member still insists on self-destructive or suicidal behavior, talk to him/her about seeking help right away
- If your family member carries out a threat, or you think they will imminently hurt themselves, seek help immediately and contact the police to initiate a 5150 process
- Contact a therapist or psychiatrist regarding their current state

### **Interacting with Law Enforcement**

- Meet the police outside before they interact with your family member
- As a safety precaution for everyone involved, do your best not to tell your loved one that the police have been called
- To ensure safety, request that there are at least two police officers present during a 5150 process; ask for CIT (Crisis Intervention Trained officers)
- Clearly explain the condition of your family member and the reason for your call
- Have a brief and concise (1 page) information sheet that includes a photograph, medical/psychiatric history, and family/caregiver contact information

- Make copies of social security card, photo I.D. and keep copies for your records
- Turn on all the lights in your home to improve visibility
- Turn off audio appliances such as televisions and stereos to reduce distractions during your conversation
- Remove any items that could be used as a weapon
- Ask where they are transporting your family member

### **Interacting with Healthcare Providers**

- Come with a game plan/strategy for treatment (e.g., labs, appointment schedules, list of questions, suggestions & recommendations for an acceptable next step)
- Encourage your family member to sign a release of information when they are doing well so that his/her treatment providers will be able to share information with you on his/her treatment: keep copies on hand
- Be aware that if your family member refuses to sign a release of information, confidentiality statues DO NOT prevent providers from receiving information from family/caregivers (AB-1424: see enclosed information and form)
- Have a brief and concise (1 page) information sheet that includes medical/psychiatric history, and family/caregiver contact information
- Select one person to be the “point person” to communicate on behalf of your family member
- When you talk to the provider, ask specific questions
- Try to stick to one topic at a time
- If you don’t understand a word or a phrase the provider uses, or something they say, do not hesitate to ask them to explain it
- You may also find it useful to take some notes of what the provider is saying to you, or ask for some written information that you can take away with you