



For the Support Person

Welcome to this self-care guide and thank you for agreeing to act as a Support Person. Your involvement is an important part of the support for the person in recovery.

You may be a relative, mental health professional, friend, co-worker, neighbour, or mentor to the person you are supporting. For simplicity's sake, we will use the term *person in recovery* to identify the person you are supporting.

Feel free to read this entire manual if you like. Please know, though, that you do not have to read the entire manual to be an effective Support Person. Two important sections that you should read are “About this Toolkit” (page 3) and “Monitoring Your Progress” (page 5) which are at the beginning of the document. You can read individual sections in any order you choose. Also, the person in recovery can work on the sections in any order. The sections are ordered in a way that introduces some exercises early on to build skills that will be useful in the later sections. So, although it is not necessary, it may be a bit better to work on the earlier sections first.

It is okay to share this *Support Person* section with the person in recovery. There are no secrets in this, or any, of the sections.

In general, you can help the person in recovery fill out any of the worksheets, and you can help make information more understandable to the person in recovery by putting things in your own words.



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There are five sub-sections to this section of the self-care guide:

1. The *General Overview of Each Section* provides a brief outline of what each section covers.
2. The *General Tips on Supporting the Person in Recovery* shares ideas on how to support the other person in general, including when filling out the different worksheets.
3. The *Detailed Description of Each Section* provides more specific information about how you can assist the person in recovery.
4. The *Index* lists all of the pages in the guide that include the term *Support Person*. The number of occurrences in the index is an indication of how important you are. **You can refer to this index to see where the person in recovery is being asked to seek your support.**
5. The *Additional Resources* section of the guide provides links to other sources of information that you may find helpful.

Recovering from psychosis can be viewed as the effective mix of three things.

Good Outcome = Capacity + Motivation + Opportunity

The prescribed medications increase someone's *capacity* to think and function better.

People with psychosis often have difficulties maintaining *motivation*. As a Support Person, you can be particularly effective helping the person in recovery maintain motivation.

Getting the *opportunity* to do things that lead to a better life can be restricted in people with psychosis. This self-care guide and your involvement can help the person in recovery gain some of the skills that increase the chances of finding better opportunities.





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1. General Overview of Each Section

This overview briefly introduces each of the sections of the self-care guide. The overview should provide you with enough of an understanding to go ahead and begin reading the in-depth sections of the guide that interest you. The person in recovery also may want to read this *General Overview* section to help her or him choose which sections to work on.

Remember, the guide is primarily for the person in recovery. Your role is to be supportive.

What is Psychosis?

This section provides background information on psychosis. It outlines common symptoms of psychosis and examines six different factors that may contribute to the onset of psychosis. You will probably want to read this and talk it over with the person in recovery.

What Can You Do about Psychosis?

This section emphasizes the importance of learning new skills, finding good support, and taking effective medication. Most of the activities in this section focus on medication. Learning new skills and finding good support is the focus of much of the rest of the guide.

Taking Care of Your Health

This section includes information on sleep, exercise, and other factors that contribute to a healthy lifestyle. You can act as a support when the person in recovery starts to make efforts to maintain a healthy lifestyle.

Managing Stress

Stress is a part of every person's life. Learning to deal with and manage stress are important skills. In addition to helping the person in recovery develop techniques for relaxation, you can gently let the person in recovery know when he or she may be reacting to stressful situations and mention previous effective methods that were used to reduce or cope with stress.



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Solving Problems

Problems can increase one's stress level. This section explains a popular and effective six-step method used to identify and solve problems.

Setting Goals and Moving Forward

Regardless of whether a person has symptoms, a meaningful life still involves having goals and aspirations. This section provides tips and worksheets to assist the person in recovery in setting specific, attainable goals.

Understanding Cognition

This section contains information on *cognition* and shows how psychosis can affect cognitive abilities. It then introduces practical suggestions for identifying which areas of cognition might be stronger and weaker. Most importantly, it presents some useful ways that a person in recovery can better deal with difficulties concerning memory, attention, and other cognitive processes.

Connecting with Other People

People with psychosis often disconnect from other people and may become isolated. This section contains activities to help people examine their current social circles, develop social skills, and identify opportunities for connecting with other people.

Preventing Relapse

The activities in this section include identifying and controlling triggers for psychosis, recognizing early-warning signs of a relapse, and then developing a full relapse prevention plan.

Dealing with Symptoms

This is a more complicated section that may be a bit of a challenge for both you and the person in recovery. It discusses some non-medication techniques aimed at dealing with the symptoms of psychosis. As the Support Person you can be helpful in providing assistance with all three of the different strategies mentioned in this section. Be honest, respectful, and caring when you provide feedback. Talking about psychotic symptoms with the person in recovery can easily lead to arguments about who is correct. *Agreeing to disagree* is usually okay if the relationship is built on trust and acceptance of each other. There are more ideas about how you can best help the person in recovery in the next section, *General Tips on Supporting the Person in recovery*, on the next page.





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2. General Tips on Supporting the Person in Recovery

Remember Your Role

The most important guideline to keep in mind is: **You are a supporter, not a director.**

The Support Person's role is to assist and follow the lead of the person in recovery, not dictate to the person in recovery what to do. Part of the recovery process involves gradually assuming more responsibility for one's own choices. Making independent choices includes how the person in recovery engages with this self-care guide.

Be supportive and non-judgmental. Don't let the role of Support Person jeopardize your relationship with the person in recovery.

Help with Organization and Record-Keeping

It is recommended to keep some record of:

1. When a toolkit section was done
2. The exercises that the person in recovery works on alone
3. Where and how often the person in recovery tries the exercises
4. When you will review the successes and challenges that occurred

As the Support Person, you can really help with this kind of scheduling and record-keeping. The person in recovery may fill out worksheets completely alone, and may ask you for some support in keeping them organized and in one place.

The person in recovery may find it useful to have a photocopy or written record that reminds him or her of key elements of an exercise. The person in recovery could then refer to the copy when appropriate. The guide is meant to be flexible. There are no strict rules about how the two of you should work on any particular section.



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Begin with Small Changes

Several sections of the self-care guide involve making changes. You can help ensure success by reminding the person in recovery to begin with one or two small changes and make positive progress on those before moving on to additional changes. Too many changes at once—or changes that are too large—can be overwhelming rather than helpful.

Be Flexible in the Timing of Progress

Periodically check on the progress of the person in recovery. Different people work through the guide at different speeds. Someone might complete a section in a few days. Other sections may require a week or more to finish. It is also possible to work on more than one section in the same week.

Avoid encouraging the person in recovery to attempt too many things at once. Learning is usually more effective when the person in recovery focuses on one thing for a while and then comes back to it again after a break. A break can last for a few minutes, a few days, or even several weeks. Some sections, such as the *Understanding Cognition* section, involve quite a few different techniques. Allow plenty of time to practice these techniques over long periods of time.

Share Ideas and Provide Encouragement

Be willing to share your own ideas and suggestions. Also, be willing to share your feedback, particularly when you notice a positive difference. Lots of positive feedback and encouragement can be quite empowering.

Set an Appropriate Pace

One of your jobs is to help the person in recovery set and maintain a comfortable pace. Keep *pace* in mind both during specific sessions of using the guide, as well as in determining when to tackle new sections. Be sensitive that you are *following* the overall pace of the person in recovery. However, even with this recognition in mind, you can at times influence the pace. Sometimes you may want to speed up the pace. At other times it will be important to slow the process down.

Check on Energy and Concentration

Check with the person in recovery periodically to gauge her or his energy and level of concentration. It is better to spend ten to twenty productive minutes on a section rather than an hour when the person in recovery cannot maintain concentration.



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Help with Motivation

Sometimes your role may simply be to motivate the person in recovery. Motivation can come in many forms, from acting as a supportive coach to being a good role model.

Try the Following Teaching Technique

Some research shows that people with the psychotic disorder of schizophrenia do not tend to benefit from the teaching techniques most people know. For example, it is typical for a person who is trying to learn a new skill to have a teacher explain what has to be done, and then for the teacher to ask the person to try it. The teacher sees the slight failures, gives *corrective feedback*, and expects the student to learn from that feedback. This teaching technique may not work well for people with schizophrenia.

An effective technique for many people with schizophrenia starts by isolating a small part of a bigger task. After a certain level of proficiency with this first step is achieved, the student builds on that small element by adding another small element. This *errorless* learning approach often works better for people with schizophrenia when they are trying to learn. This incremental, stepwise approach can also reduce arguments and misunderstandings. Mastering a small step sets the stage for adding a bit more, and then a bit more. Positive results, however small, increase motivation. Failure, however small, can lead to less motivation and poorer learning.

Helping to Fill Out the Worksheets

You may not need to assist in filling out all of the worksheets. The person in recovery may choose to fill out some worksheets independently. That's great.

It's a good idea for the person in recovery to write down the dates the worksheets are filled out and keep the completed worksheets in a binder or folder. These completed worksheets can be a valuable resource

Allow ample time to fill out the worksheets. The steps don't all have to be completed in one session. Check to see if the person in recovery needs a break or wants to continue on another day. With some worksheets it is especially helpful to take enough time (hours to days) to think things through.



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3. Detailed Description of Each Section

The following topics provide more specific tips and strategies for supporting the person in recovery in each of the sections of the self-care guide. Remember, your best role is to *assist* the person in recovery in making decisions and provide guidance to complete the worksheets. You don't need to make decisions for the person in recovery.

What is Psychosis? (Page 7)

The goal of this section is to provide an explanation of psychosis, as well as describe some of its common symptoms.

Everyone's experiences of the described symptoms fall on a range from completely normal to abnormal. For example, many people without psychosis occasionally experience the visual hallucination of seeing a mirage in a desert. When these types of experiences become more frequent and persistent, that state of mind is regarded as *psychotic*.

Some people are uncomfortable with the word *psychosis*. That's fine. The other sections of this guide will still be useful. You don't need to convince the person in recovery of the presence of psychosis. Your job as the Support Person is not to argue about terms such as *psychosis*.

The best way to help the person in recovery answer the questions in the worksheets in this section is to be supportive and non-judgmental. The first two sets of questions are open-ended.

- Strange or unrealistic thoughts that won't go away
- Images or sounds that aren't there

All of these questions do not have to be answered in one session. The list can be adjusted by adding (and even deleting) items as they occur (or cease to occur).

The third set of questions, the questions that involve checking boxes that match changes in state of mind on page 9, are not limited to the six questions on the list. Please feel free to add and check more changes if you feel the additions are appropriate.



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The *six factors that can influence the onset of psychosis* discussed at the beginning of this section may be hard to understand if you read all at once. Providing examples from your life or the life of the person in recovery may make the concepts more understandable.

It may be helpful to first listen to the description of her or his thoughts prior to an onset and then help show how these thoughts fit with the six factors.

What Can You Do About Psychosis? (Page 14)

The person in recovery and an appropriate health professional should complete the first two worksheets in this section, *My Medications* and *My Medications—Possible Side Effects*. You may want to accompany the person in recovery on a visit to a doctor or other health professional to assist in filling out these worksheets.

Aspects to consider for the third worksheet, *How Taking Medication Has Helped Me*, are changes in mental and physical states (both good and bad) and how the medication makes the person in recovery feel about her or himself.

Additionally, your support will be helpful with encouraging the person in recovery to continue taking any prescribed medications. You may be able to suggest a specific strategy that reminds and encourages the person in recovery to take the medications on a regular schedule.

Taking Care of Your Health (Page 21)

The three factors covered in this section are:

1. Sleep
2. Eating and Exercise
3. Drugs and Alcohol

Sleep: Getting enough sleep helps reduce stress and contributes to general well-being.

Eating and Exercise: Weight gain is a common problem for people with psychosis. You can use the techniques in the *Setting Goals and Moving Forward* section on page 41 to assist in improving the diet and exercise regimen of the person in recovery.

Remember that small changes are usually easier to accomplish and maintain than large ones.





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Drugs and Alcohol: Your feedback may be helpful in providing the person in recovery with ideas of both positive and negative effects when filling out the first worksheet in this section. You can refer to the *Setting Goals* section on page 41 for techniques on how to reduce any harm associated with drug and alcohol use.

Managing Stress (Page 27)

As a Support Person the four points about stress to keep in mind are:

1. Too much stress can make anybody's mental health suffer. It is well known that stress can make psychosis worse.
2. You can help the person in recovery learn to reduce stress using the methods described in this section.
3. You can let the person in recovery know when she or he is showing signs of stress.
4. You can also prompt the person in recovery to employ the stress-reducing and relaxation techniques covered in this section.

There are many ways to manage stress. The two methods described in this section are *relaxation* and *preparation*.

RELAXATION

Please feel free to share any relaxation techniques you have found. You may also want to investigate some relaxation books, CDs, or programs with the person in recovery.

PREPARATION

An effective way to help the person in recovery with the preparation method is to role play different situations so she or he can practice *rehearsing*. You can discuss what topics and situations may arise before the role play, and then practice them with the person in recovery.

Rehearsal works in two ways. First, through rehearsal the person in recovery begins to see the imagined stressful event as less of a challenge. This has the positive effect of decreasing the perception of threat associated with that event. Second, rehearsal increases the perception of competence, so the person in recovery feels more able to face the challenge posed by the stressful event.



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As with other techniques, begin with small, easier items. Focusing on the most stressful possible situation as the first answer to the *Stressful situation coming soon...* question might increase the person's stress. Please remember that the goal is to *manage stress*, not increase it. You could suggest beginning with situations that are only mildly stressful.

OTHER WAYS OF REDUCING STRESS

The *Solving Problems* section provides additional strategies for dealing with stressful situations.

Also, keep in mind that sometimes stress is the result of taking on too much. The best solution may be to help the person in recovery evaluate the overall situation and lower the number of commitments. Any potential reduction in commitments should not add stress in the long term, nor negatively affect the person's self-esteem.

Solving Problems (Page 31)

Problems generate stress, and stress can make psychosis worse. The *Solving Problems* section of the guide presents specific steps to help reduce and/or eliminate problems. For this section, the six listed steps should be followed in order.

STEP ONE: CHOOSE THE PROBLEM

- Help the person in recovery be more specific about the problem. Be honest and straightforward with your assessment.
- Encourage the person in recovery to start with a small problem. Once you are both comfortable with the problem-solving method, you can try working on bigger problems.

STEP TWO: UNDERSTAND THE PROBLEM

- Understanding the problem more clearly can lead to better solutions.
- If the example in the guide doesn't seem clear, provide another example. Make one up or use an example familiar to the person in recovery.
- Help the person in recovery understand the problem better by talking about it. Use the questions on the worksheet or others you think of. For example, ask about factors associated with the problem.





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STEP THREE: COME UP WITH DIFFERENT SOLUTIONS

- This is the *brainstorming* step. Work with the person in recovery to think of as many solutions as you can. Try not to judge the solutions you both come up with. Don't worry if some of the solutions at first seem "way out there." Brainstorming "wacky" ideas can sometimes lead to a workable solution.
- Think of as many solutions as possible (not just four). Use extra paper if needed.
- It's a good idea to take a break after brainstorming. Check with the person in recovery about taking a short break—or even wait to continue another day. Sometimes a bit more time leads to additional solutions.

STEP FOUR: COMPARE YOUR SOLUTIONS

- Look at each of the proposed solutions with the person in recovery. Are these ideas realistic? Your perspective will be useful.
- If the example in the guide doesn't seem clear, provide another example. Make one up or use an example familiar to the person in recovery.

STEP FIVE: PICK THE BEST SOLUTION

- Try not to rush to pick the best solution. Take enough time to think about each one.
- Help the person in recovery look at different aspects of each solution. What is positive about the idea? What might the negatives be?
- Cross out the solutions that are unacceptable.
- Imagine trying out each of the solutions. This can be helpful in picking the best one.
- The best solution may end up being a combination or variation of the solutions on the list.

STEP SIX: PUT YOUR SOLUTION INTO ACTION

- Help the person in recovery carry out the steps needed to implement the solution.
- Use the goal-setting method for strategies on how to carry out the solution.
- Arrange a time to check on the progress and revise the solution, if needed.
- Be encouraging. Acknowledge and congratulate the person in recovery's efforts.





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Setting Goals and Moving Forward (Page 41)

Setting and then achieving goals leads to a happier, more fulfilled life. This section of the guide presents specific steps to help with setting and achieving goals. For this section, the four steps listed need to be followed in order.

STEP ONE: SELECT YOUR GOAL

- The greatest chance for success is for the *person in recovery* to select the goal.
- You are there to assist, not to direct.
- You can provide feedback about what you think might be realistic goals for the person in recovery; you shouldn't determine the person's goals.
- Encourage the person in recovery to **begin with smaller goals** as a way to set the stage for attaining larger goals later on.

STEP TWO: DEFINE YOUR GOAL

- You can be particularly useful by suggesting smaller or time-limited goals that can be measured easily.
- Goals that are stated in the form of specific items that can be crossed off or checked on a daily basis are easier to work with than more general, vague goals.

STEP THREE: MOVE TOWARDS YOUR GOAL

- A great sense of accomplishment and increased motivation come from tracking positive steps towards a goal.
- While you may want to help the person in recovery set up a workable system, the best results usually come when the person records the tracking results.

STEP FOUR: REVIEW YOUR GOAL

- Goals should frequently be re-evaluated and reviewed.
- You can also aid the person in recovery in updating her or his goals.
- New goals can be added as old goals are achieved.
- Unachieved goals can be modified or set aside.



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Understanding Cognition (Page 49)

Cognition is the mental process of gaining knowledge and understanding. Some cognitive abilities are:

- Attention
- Memory
- Processing information
- Solving problems
- Planning and organizing
- Recognizing and understanding emotions in oneself and other people

People with psychosis frequently experience problems with cognition. The ways that psychosis affects people vary widely from person to person.

Reading the *Understanding Cognition* section on page 49 will likely provide you with a better perspective on what the person in recovery is experiencing. For example, you may recognize some of the items in the list of attention problems on pages 50 and 51.

The areas discussed in this section are:

- Learning preferences
 - Attention
 - Learning and memory
 - Critical-thinking skills
 - Social cognition
- 1. Learning preferences:** People learn in different ways. Your objective viewpoint and feedback may help the person in recovery recognize her or his own learning preferences when filling out the checklists in this section. Knowing and incorporating a person's learning preferences can help increase the chances she or he will get the most out of any learning situation.
 - 2. Attention:** You can be useful in helping the person in recovery apply the *What Can I Do?* strategies on page 51 to focus her or his attention.
 - 3. Learning and memory:** Support the person in recovery when choosing and trying some of the strategies for dealing with learning and memory difficulties.





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- 4. Critical-thinking skills:** After filling out the checklist in this section you can assist the person in recovery in developing and following the suggested strategies. Remember, though, reminding someone to follow routines can frequently be seen as nagging, rather than as helpful.
- 5. Social cognition:** As a Support Person you can help the person in recovery interpret social situations. These could be situations between the two of you, situations in which you were present along with others, or situations in which you were not present.

Connecting with Other People (Page 59)

This section has three elements:

- Social circle
- Social skills
- Opportunities for connecting with other people

SOCIAL CIRCLE

You will probably want to use a blank sheet of paper—or several sheets—when assisting the person in recovery in filling in the names of the various people in her or his social circle. You can also fill this information out by labelling “me” (referring to the person in recovery) across the top of a blank sheet of paper and dividing the page into four columns for the four categories: family, friends, health professionals, and other people.

Your perspective may help the person in recovery fill in members of her or his social circle that may otherwise be overlooked.

After the person in recovery has compiled this list you can invite him or her to look at it more closely. Which ones are the good relationships to develop? Along with possibly adding relationships worth developing to the list, should some people be taken off? Your viewpoint may be useful in helping the person in recovery determine which types of friends have the most positive effects.

SOCIAL SKILLS

Some people may be too shy to think of social skills at which they are good. If this is the case, you can point out some of these skills. This is also a nice opportunity to praise the person in recovery and build up some self-esteem.





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Some fundamental social skills are presented. You can help the person in recovery practice those social skills. Role playing various social skills with the person in recovery can add confidence, as well as provide practice.

OPPORTUNITIES FOR CONNECTING WITH OTHER PEOPLE

You can provide encouragement to make connections with new and old friends. The goal-setting section has techniques that are also useful for making social connections. You may also be able to provide introductions and opportunities for the person in recovery to expand her or his social circle.

Preventing Relapse (Page 65)

Relapse prevention can be seen as a range of lower-level interventions progressing to higher-level interventions. Lower-level relapse-prevention efforts focus on:

- Trying to prevent a relapse from occurring by following treatments
- Minimizing recognized triggers
- Coping with stress

Higher-level relapse prevention involves creating a plan for when things are getting worse. A higher-level prevention plan sets out exactly whom to contact and what else should be done before there is a full-blown relapse.

Fortunately, psychotic episodes don't come unannounced and out of the blue. There tends to be a sequence the person goes through. The goal is to recognize the person's sequence and break the pattern of relapse early. The sequence may progress to early-warning signs. Being aware of the person's early-warning signs will allow everyone to help prevent further deterioration. If the trend towards psychosis continues, you need to seek professional help.

The activities in this section include:

1. Identifying and controlling triggers for psychosis
2. Recognizing the early-warning signs of psychosis
3. Developing a full relapse prevention plan

The relapse prevention plan should be developed with input from the person in recovery's health professionals. Discuss with the person in recovery who are the appropriate people who should have a copy of the relapse prevention plan.



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Dealing with Symptoms (Page 74)

Some symptoms persist, even with effective medication. This section discusses three different strategies for dealing with symptoms.

- 1. Distract yourself:** The person in recovery may call on you to help with this method. Spending time with the person in recovery—in person or on the phone—may provide enough of a distraction.
- 2. Perform a reality check:** Your calm, rational feedback is especially important for this method. Be prepared to have your feedback discounted or challenged by the person in recovery. Persistence and patience usually yield results. You don't want the discussion to escalate into an argument. You can “agree to disagree.”
- 3. Challenge unrealistic thinking:** Your unbiased feedback is important here, as well. You are there to help the person in recovery explore his or her thoughts using the questions in the guide as prompts. The process is more of a dialogue than a debate. This is true even if you are a trained therapist.

4. Index

The following pages include references to the Support Person. You may want to read these pages when assisting the person in recovery.

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