Caring for yourself.

Self-help for families and friends supporting people with mental health problems.
Caring for Yourself contents

Caring for Yourself is a self-help workbook for family and friends supporting people with mental health problems.

It is in eight parts. Each covers a different topic:

Booklet 1 Introduction
Booklet 2 Being a carer
Booklet 3 Information
Booklet 4 Communication skills
Booklet 5 Problem solving and goal achievement
Booklet 6 Relapse management and staying well
Booklet 7 Recovery and hope
Booklet 8 Taking care of yourself

Quick guide icons

Throughout Caring for Yourself, you will see these picture icons to illustrate different sections.

- Question / To think about
- Stories / case studies
- Exercise
- Action / things to do
- Information and resources

Authors: Dr Gráinne Fadden, Dr Carolyn James and Dr Vanessa Pinfold.

Rethink Mental Illness and the Meriden Family Programme have created *Caring for Yourself* to help people with mental health problems and carers, family and friends. It is for you if you support someone with any mental health condition. You may have a relative struggling with anxiety, depression or bipolar disorder, a friend with psychosis, schizophrenia or a personality disorder. Whatever the diagnosis, *Caring for Yourself* can help you to develop skills and new ways to cope.

**You can use *Caring for Yourself* in two ways:**

- Use it yourself independently.
- Use it as part of other training programmes for carers such as the Rethink Mental Illness ‘Caring and Coping Programme’ or the Meriden Family Programme’s ‘Caring for Carers’ training.

Whichever way is best for you, you can work through it at your own pace, in your own time. Start with Booklet 1, then plan how to use the other booklets and in which order you want to use them.

Everything in *Caring for Yourself* comes from the experiences of others who have cared for people with mental illness or from professionals. There are exercises and activities to help you develop skills to help you cope with your situation, whatever that is.

**You will find information about:**

- Being in a caring role.
- Taking care of yourself.
- Getting your own life back.
- Finding information about what your relative or friend is going through.
- Dealing with problems.
- Talking about what is going on.
- Supporting your relative or friend.

We hope the exercises and activities will help people who cannot attend training courses or support groups. If it helps you, please get in touch. We want to know how we can help more people who are supporting a relative or friend with a mental health problem.

---

**Gráinne Fadden**
Director
Meriden Family Programme

**Paul Jenkins**
Chief Executive
Rethink Mental Illness
Caring for a relative or friend with mental health problems often means that through necessity they have been the centre of your attention. *Caring for Yourself* attempts to create a balance by focusing on you and your experiences. You may be new to caring or you may have been in the role for some time. It is really important to approach this booklet with hope and optimism as many people living with mental illness do make a good recovery.

This may be the first time you are taking a step back and thinking about changes that you and your friend or relative have been through. Others in your position have found that ‘telling their story’ or ‘taking stock’ can be the start of thinking about how they want things to be in the future.
As a starting point, take some time to think about how things have been for you. Think about how things were before your friend or relative became unwell. Reflect on how things were once you and they were aware that things were changing even though you may have had different views on what was happening at the time. You might also reflect on how things have changed within the family – what has been the impact on children, siblings or grandparents? Finally, think about how things are now.

You might like to think of this as a bit like telling a story, starting wherever you feel is most relevant and comfortable for you. It may be that you want to write it out, covering before, during and where you are now. If this is the case, you could use the table on the next page. If writing doesn’t suit you, think about other ways of putting together your ‘story’. Some of the following ideas may be helpful:

- Drawing or painting.
- Making lists of words.
- A diagram with symbols.
- A time line with significant dates or events marked on it.
- Using photographs or pictures from papers/magazines.
- Music that reminds you of different times.
- Talking to a trusted friend who has supported you along the way.
- Just taking time out to think about it and reflect.

Thinking about some of the following questions might be helpful.

How are things different?

What impact has your experience had on other areas of your life?

What has been the effect on your friend or family member?

Has your role, or the role of others in the family changed?

What has been the effect on other family members – children, siblings, grandparents?

How is your relationship with your relative or friend different now?

What feelings have you experienced?

Has the experience changed the way you view yourself?

Has the way you view life changed e.g. what you see as important?

Have there been any positive benefits?
Thinking of my experiences

Before ____________________________ became unwell, life was

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

During the time when ____________________________ was very unwell, life was

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Now life is ____________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
Things may have changed beyond all recognition, some in difficult ways and some in positive ways, while others have remained the same. Either way, you, and your relative or friend, have been through a very hard time. Thinking about these things may be difficult, challenging you in many different ways: practically, physically, emotionally, socially and spiritually. On the other hand, the whole experience may have helped you to reassess what is important to you. You may have found out who your true friends are, and seen the very best in them and your family. Perhaps you have found new friends or support from unlikely sources. It may be that you have developed new skills or found qualities in yourself that you didn’t know you had. Some of your experiences therefore have probably been challenging while others have had positive effects.

Adjusting to the changes that have occurred will take time, energy and support. After looking at the challenges that you may have faced in a bit more detail, this booklet then explores the positive aspects. Although it may not be immediately obvious, there are some positive things that have come with the changes you have experienced.

Dermot

Dermot had looked after his wife, Mary, for over 10 years. Mary, who had experienced episodes of depression since her second child was born, had become severely depressed following the death of her mother. She had been admitted to hospital on two occasions. Mary and Dermot’s youngest son, Liam, was 15 and old enough to get himself to school but Dermot thought it important that Liam concentrate on his exams. He decided to reduce his hours at work so that, in addition to supporting Mary, he could do all the shopping, cooking, and housework. This affected their income, so there were worries about finances. He also found it hard to find time to maintain friendships. It was difficult for him to leave Mary, particularly if she was very unwell, and so he eventually gave up darts on Tuesday nights and found that friends stopped calling or popping in.

Things started to change for Dermot when he started to attend a carers’ group. He was relieved to find that he was not the only person in this situation. He met with a carers’ support worker who was very helpful. She helped him to get a Carer’s Assessment and information about what benefits he was entitled to. He began to think about his own needs and realised it was important to keep up his own interests, so he took up playing darts again.

You can see that Dermot made the best decisions that he could along the way, trying to balance the needs of his wife and his son. Through meeting other people in the same position as himself, he began to think about what he needed to do longer term so that he could continue to remain healthy himself and continue to offer support. Getting advice from a carer support worker was helpful, and he benefitted from a Carer’s Assessment. He therefore managed to balance everyone’s needs more successfully.

It is important to know your entitlements as a carer, and to know what kind of help and support you can avail of. Some of these are listed on the next page.
A checklist of questions carers might want to ask

Clinical information
Visit the website below for a checklist that you may find helpful in terms of thinking about the sort of questions to ask clinical staff:

www.rcpsych.ac.uk/campaigns/partnersincare/checklistforcarers.aspx

General information
These are some more general questions you might like to consider asking:

- Where can I get information about local support groups?
- What support is available for respite, breaks or complementary therapies?
- Is there a carer education programme relevant to my needs running in the area?
- What is a structured family intervention? Would it be relevant to my family and if so, how can I access it?
- Where can I go for information about financial support such as carers’ allowance and direct payments?
- How can I become more actively involved in the commissioning, planning and delivery of local services?

A guide to carers’ rights
Carers have a number of legal rights:

1. Your right to an assessment
Carers aged 16 or above, who provide a ‘regular and substantial amount of care’ for someone aged 18 or over, have the right to an assessment of their needs as a carer. This is provided by the social services department of your local authority as a way to see if they can offer any support to aid you in your caring role.

2. Right to a direct payments
These are payments given by a local authority for carers over 17 who have been assessed as needing help from social services. They can be used to buy services from an organisation or to employ someone to provide assistance.

3. Carers and employment rights
Carers have the right to ask their employer for flexible working if they care for an adult who is a relative or lives at the same address.

4. Your NHS rights
Like every other English citizen, you are entitled to expect to be treated in a certain way, as set out under the NHS Constitution.

You can find out more about your rights as a carer on: www.nhs.uk/carers
2.3 Being a carer

It is possible that in thinking about your story you were only able to identify the difficult and painful things about your experience. This is understandable – when adjusting to change and loss, the things that get our attention first are the difficult issues. You may have noticed that your relationship with your relative or friend changed and that there are things that you do now that you wouldn’t usually expect to be doing.

These changes may reflect a change in your role with regard to your family member or friend. For example, a change from parent, to parent and carer, or wife, to wife and carer. You may not think of yourself as a ‘carer’ or feel comfortable with this idea.

**What does the term carer mean to you?**

**Do you see yourself as a ‘carer’?**

**What term would you prefer to ‘carer’?**

Whether or not you use the term ‘carer’ to describe yourself doesn’t matter. You will find that there are things that you do or ways that you behave that are different or extra to what you might usually be doing. It is helpful to understand how health and social care services use the word ‘carer’.

If health and social care services see you as a ‘carer’, this can help you to get access to benefits. It is also the way to get a Carer’s Assessment which is an assessment of your needs as a carer. Carers can also get a care plan linked with the needs that were identified in the assessment.
There are particular challenges that come with a caring role that are different to the challenges that are part of other relationships. For example, a parent of a young person may expect to have arguments as they grow up, but this may be very different to the extra things they may find themselves doing if that young person experiences mental health problems.

Think about your own story and experiences and then take a moment to think about the following questions:

**What are the things that you have found most challenging?**

**What are the different emotions you feel?**

**What challenges do your family or friendship group face?**

Here are 2 examples for you to think about:

### Jasmine
Jasmine spent some time reviewing the photo-story she had put together on her computer. The story told the changes that she and her father, who had bipolar disorder, had been through. She noted down the things that she found most difficult:

- Losing touch with her friends from college.
- Feeling angry about the changes that had happened.
- Feeling frightened about some of the things her Dad did.
- Worrying about money, as he could no longer work and she found it difficult to work as much as she needed to.

### Omar
Omar and his wife, Fatima, had different worries. Their son, Rahim, developed psychosis at 16 and his schooling was interrupted. Before becoming unwell, Rahim had been doing very well and they had all hoped that he would be able to pursue a career in medicine. He had to repeat some of his exams and he seemed to have lost contact with his friends. Their concerns included:

- Worry about whether they had done something to contribute to how he was.
- Concern about his future in terms of his career and whether or not he would be able to go to university.
- A sense of embarrassment and shame in their community because of the stigma associated with mental illness and also because he had been using street drugs.
- Concern about his prospects of finding a suitable marriage partner.
- A sense of sadness that he is not doing the things other young people of his age are doing.
- A questioning of their faith.
There are many challenges that people may face when caring for someone with a mental health problem. You may have found there is a mix of things that are difficult, from how you have been affected emotionally, to some of the more practical difficulties. The following is a list of some of the common challenges carers have identified. You might like to add others that are relevant to you.

**Effects on family/relationships:**
- Less time to be together or too much time together.
- Having difficulties communicating.
- Feeling more stress and tension.
- Feeling distant from each other.
- Blaming each other.
- Effects on other members of the family, children, siblings and extended family.

**Emotional effects:**
- Feeling stress.
- Sense of loss.
- Effects on own mental health.
- Family relationships strained.
- Anxiety about the future for you and your family member.
- Fear of risks and perhaps personal safety.
- Loneliness
- Managing the uncertainty and stress that may come with caring.
- Isolation.
- Frustration.

**Effects on practical issues:**
- Financial difficulties.
- Limits on social activities and friendships.
- Problems with work/employment.
- Disruption of household routines/activities.
- Finding it hard to do some of the things that you once used to.
- Having no life outside caring responsibilities.
- Obstacles that will need to be overcome.
Effects on thoughts/knowledge:
- Not knowing about the mental health problem your friend or relative is experiencing.
- Not understanding the treatment they are having.
- Difficulty finding your way around the mental health system.
- Not knowing where to go for your own support.

Effects on health:
- Feeling extremely tired.
- Not enough time for relaxation or exercise.
- Changes to appetite.
- Difficulties sleeping.
- Feeling stressed.
- Feeling depressed.

Every situation is individual. As you can see from the example about Jasmine, Omar and Fatima, they faced very different challenges, but what is common is that things had changed for each of them. They found that they were doing more, and doing very different things to what they might have expected to be doing at this stage in their lives. It is these very different or extra things, that make up the challenges that are central to the caring role.

Dealing with negative attitudes or prejudice from other people

Sadly one of the things that people like Jasmine, Omar and Fatima may have in common is sometimes having to deal with the challenge of negative attitudes from friends, acquaintances, work colleagues and even professionals. This attitude is often referred to as stigma and although it is an uncomfortable topic it might be helpful for you to have a better understanding of it. The next part of this booklet looks at the impact of stigma on people who experience mental health problems and also on their carers.

Think about some of the words you have heard to describe mental health problems or someone who has mental health problems. How would you describe these words?
Think about your friend or relative. What emotional impact might these words have on them?
How might this affect what they do and how they think?
How do they impact on you?
Many of the words people use to describe mental health problems and people who experience them are unhelpful. These words can upset people with mental health problems and their relatives. Stigma may also show itself in ways other than in language – in people’s behaviour or feelings towards those who experience mental illness. For example, people with mental health problems may find it harder to find employment, or some people may not want to socialise with them. Naturally this can have a negative impact. They may feel shame, anger, guilt or other difficult feelings. People can end up feeling reluctant to talk about what is going on for them. They may avoid meeting others because, understandably, they may be frightened about what others might say. If someone is already feeling depressed and seeing themselves in a negative way, such stigma may only strengthen this picture.

Dorothy
Dorothy described how her son, Trenton, had been affected by stigma. He had a psychotic episode when he was 17. While he was in hospital his family would visit, but most of his friends stayed away. After his recovery some friends from college had asked him how his stay in the ‘loony bin’ had been. Although, Trenton was well, he was still seeing professionals from the local Early Intervention in Psychosis team. He became reluctant to see his friends and would avoid talking about his difficulties with them.

Trenton avoided playing football and soon felt isolated. Before he had been unwell, he was quite a confident person but his mental health problems had affected his confidence. The response and attitude of his friends increased his doubts about himself and it became harder for him to attend college.

Why do you think Trenton’s friends said the things they did? Why didn’t they visit him in hospital or when he first came home?

Consider ways in which Trenton might have responded to his friends. What might be helpful and what might be unhelpful?

What might Trenton do in the future to help him deal with unhelpful comments?

You will find some of the other sections in this workbook helpful in relation to this issue. Booklet 4 on Communication Skills will help you to find useful ways of asking people to do something different or to stop doing something, and also how to express difficult feelings to others. Booklet 5 on Problem Solving will help you and your relative or friend to think of ways of handling things differently.
The Impact of stigma on carers

Dorothy and Trenton

When Trenton told Dorothy about some of the things his friends had said she was very hurt. She knew his friends and was disappointed that they had responded in the way they did. After talking with Trenton she thought about how her friends and other family members had been since Trenton had been unwell. Dorothy remembered that a friend of hers had made a similar comment, something about Trenton going loopy. This person had avoided talking to Trenton when she had visited Dorothy at home.

Dorothy felt angry on Trenton’s behalf. She knew that Trenton’s behaviour had seemed strange and frightening when he was unwell, especially when he was responding to the voices that he was hearing. However, she knew that this was just a symptom of the mental health problem he was experiencing. Dorothy also recalled experiences with a friend she used to meet for lunch and a chat about once a month. After Trenton became unwell, her friend always seemed to have something else on or have a reason for not meeting with her, but Dorothy felt it had something to do with what was wrong with Trenton. On another occasion, she felt very upset at a group event where people were talking about another young person with a mental health problem. Someone had said that you could always put things like this down to what the parents had done. People in the group were not aware that Dorothy’s son had been having difficulties. Dorothy was very upset when she got home.

Sadly, carers experience stigma both on behalf of the person they are supporting, and also themselves. You might feel embarrassed when people ask you questions about how your relative or friend is doing, or if they do something in public that attracts attention. This can impact on all members of the family. For example, brothers and sisters of a young person can feel concerned or unsure of what to say to their friends. Younger children may feel embarrassed about things a parent does.

Caring for someone who experiences a mental illness is a challenge enough in itself. Negative attitudes from others add to this challenge. It leads to people feeling hurt and, at times, having to manage some very unpleasant responses. This may mean it is then harder for carers to talk with others about the challenges they face. This in turn can lead to more stress and a greater sense of isolation.

Thinking about Dorothy’s situation, what might she do to support Trenton? What might be helpful to him?

What might she do to manage her own feelings?

How would you handle situations such as those described?
It can often be difficult to challenge other people’s points of view, especially if they are very negative and if you are feeling vulnerable. Children or siblings may find this particularly difficult. It is therefore important to seek support from friends, family and other allies such as carer support staff and other carers. You need the opportunity to talk about how things are for you, as well as be with people who do not hold these views and can support you in managing the stigma you may feel. This can also help you to decide what to do.

You might want to consider some different ways to manage the impact of stigma. You could:

• Talk about the mental health problems your relative or friend has been experiencing with someone whom you think will help.

• Join a Carers’ Support group.

• Talk to a professional in the mental health or social care services about your issues.

• Consider telephone support if you find it hard to get out to a group.

• Talk with people who have had similar experiences.

• Contact Rethink Mental Illness and find out more about the “Time to Change” campaign.

• Get information on mental health problems so you can inform others how common they are.

• Refer to the communication skills and problem solving sections in this manual.

• Seek professional support for yourself such as counselling.

• Log on to an online support group such as www.rethink.org/talk

Spending some time talking with people about mental illness can feel like a big step. However, doing so can open up avenues of support that you may not have had before. It can also have the effect of bringing people closer together. Sometimes the people who prove to be the most helpful are the least expected, so it is important to explore all avenues.

Having discussed some of the difficulties, the next part of this booklet looks at some positive things that can come from being a carer.
Go back to your story, the one you put together at the start of this section. You have already identified some of the challenges that caring has brought for you. However, now think about whether there have been positive things or changes that have occurred since you started caring for your relative or friend. It may be that you have changed your priorities or you have learnt some new skills because you have taken on a new role or have found some new friends and activities. Or perhaps you have become closer to your relative or friend or have become more appreciated.

**What have you learned since taking on a caring role?**

**How do you feel you have been able to help the person you care for?**

**What are you pleased or proud about having achieved?**

**What are the valuable things about being a carer?**

**Thinking about your relative or friend, what have they achieved that you are proud of?**

**Rachel**

Rachel spent some time thinking about the positive things that had happened since her sister, Chloe, was admitted to hospital. It was difficult at first. Having considered some of the challenges of being a carer, she thought about some of the positives. Rachel saw that for the first time in a long time they had been able to talk about some of the things that Chloe had been experiencing. This along with having a greater understanding about how things were for Chloe, meant that Rachel felt much closer to her. Rachel also found that the things that used to annoy her or stress her out didn’t seem so important anymore. Her perspective had changed and she described feeling as if she knew what was really important in her life – her sister was alive, and although she still had difficulties, she was so much better than she had been when she was very suicidal. Rachel valued being with friends and family and being aware of the love and support that she got from this.

Some of the things that carers have identified as being important for them have been:

- **Resilience**
- **Encouragement**
- **Support**
- **Courage**
- **Pride**
- **Love**
- **Networks**
- **Closeknness**
- **Putting other things into perspective**
- **Friendship**
- **Endurance**
- **Confidence**
- **Loyalty**
- **Satisfaction**
- **Meaning**

These are some things that may balance out the challenges of being a carer. It is important for you to consider these positive aspects alongside the more difficult ones.

The final part of this booklet helps you think about what you might need to support you in your role as a carer by asking you to think about what else you might need yourself. It then lists some of the sources of support for carers and some ideas for further reading.
2.4 Your needs as a carer

Take a moment to think about the things that you need right now.

- What would be helpful in your life?
- Do you need practical or financial support?
- What, if any, emotional support do you need?
- What do you feel you are missing?
- Where do you go to get the help you need?

**Cheung**

Cheung decided that he would like to get back in touch with some of the friends he had not seen in a while. He missed seeing two friends from work, and decided that as a first step he would try to meet up with them once a month or so. In the longer term he hoped increasing his hours at work would mean that he saw them more often. He also realised that he would like to have some more time to exercise, and thought about how to get out for a walk a few times a week.

**Samantha**

Samantha found that her focus was different to Cheung's. She really wanted to find ways of linking in with others who shared similar experiences to her. She thought it would be important to find allies, and get some emotional support. Getting involved with her local carers' group, and linking in with a mental health charity helped her find the support she needed. She also found out about mental health problems, which she found a great help in her role as carer to her father, who experienced problems with anxiety and obsessive compulsive disorder.

Your needs as a carer are individual to the situation you find yourself in, and may change over time. You may have easily identified what you need to keep you going. It is really important that you find out from the mental health team about how to get a Carer’s Assessment. This is an assessment which you are legally entitled to but not obliged to undertake. Some people worry that it is an assessment of your capabilities as a carer, but it is not. It is about your needs as a carer.

Many carers find this process very helpful particularly in finding out about local services, support groups, and how to access specific information, benefits and entitlements. Other sources of information and support may be a Carers’ Centre if there is one in your area – they generally can tell you what supports are available locally. There may also be Carer Support Workers where you live – the mental health services looking after your relative or friend should be able to put you in touch with them.
There are other parts of *Caring for Yourself* that could support you in your role as carer.

**Booklet 3:** Information about mental health problems.

**Booklet 7:** Recovery and hope.

**Booklet 8:** Taking care of yourself.

It may also be helpful to think about the following exercise as a first step to getting more support.

Think of someone in your life that you could share what has been happening with your relative. This person must be someone you trust. It might be a member of your extended family, a close friend, a member of your faith community (like your temple, mosque, or church) or a neighbour.

**What are your worries about talking with this person?**

**What might the benefits be?**

**Now that you have thought about this, who will you talk to?**

**When might you do this?**

If you can’t think of anyone in your life at the moment, it might be helpful to think about talking to your GP if you get on well with them, or someone in the mental health services whom you have found it easy to talk to. The most important thing is not to try to deal with it all on your own, and that you have support for yourself in a situation that can be challenging.
2.5 Summary

This booklet has suggested that you reflect on your experiences so far. It is likely that at the start of this booklet you could easily see the difficult sides of caring. However, there are also some very valuable and important aspects to your role as a carer. Hopefully you have been able to identify some of these as well. Finally the booklet may have helped you think about where to go next in terms of both your caring role and any support you may need for this.

2.6 Key learning points

The term ‘carer’ is used in health and social care services to describe someone who has responsibilities for someone with serious or long-term health issues. You may not see yourself as a carer and that is fine – you are a Mum, Dad, spouse, sibling, friend etc. What is important to know is that you have legal rights in your role. You may also be able to access of a range of services depending on what is available in your area.

Mental health problems affect everyone in the family so it is important to be aware of the impact on children, siblings, grandparents and extended family.

Supporting someone with mental illness can be challenging and demanding. Some things such as the negative attitudes of others can be difficult to handle. The positive thing is that people who experience mental health problems can and do recover and you as their relative, friend or carer can get your life back too. It is important that you don’t try to do this on your own – get support from others in whatever ways suit you.
In addition to the support of friends or families, there is lots of help and support available for carers. The links and telephone numbers listed below may provide you with a way of making contact with other people in a similar situation.

**Information about mental health problems**

**Rethink Mental Illness**
Rethink Mental Illness is a charity that believes a better life is possible for millions of people affected by mental illness.

- 0300 5000 927
  (specialist advisors are available from 10am to 2pm, Monday to Friday)
- info@rethink.org
- www.rethink.org

**Mind info line**
Mind provides advice and support to empower those experiencing a mental health problem as well as campaigning to improve services, raise awareness and promote understanding.

- 020 8519 2122
- contact@mind.org.uk
- www.mind.org.uk

**Support with caring and the caring role**

All local authorities have a statutory duty to provide support to carers. Your local authority will have a carers’ helpline. Most localities also have a carers centre.

**NHS National Carers Helpline**

- 0808 8020202

Free, confidential information Monday to Friday, 8am to 9pm (Saturday and Sunday 11am – 4pm). Calls are free from U.K. landlines, or you can request a callback.

- www.nhs.uk/carers

**Carers UK**

Provides information and advice about caring alongside practical and emotional support for carers. Carers UK also campaigns for carers and influences policy makers, employers and service providers, to help them improve carers’ lives.
Healthtalkonline
Health talk online is a website that allows you to share people’s experiences and find reliable information about specific conditions.

www.healthtalkonline.org

The Carers Trust
Carers Trust is a new charity which was formed by the merger of The Princess Royal Trust for Carers and Crossroads Care in April 2012.

Carers Trust works to improve support, services and recognition for anyone living with the challenges of caring, unpaid, for a family member or friend who is ill, frail, disabled or has mental health or addiction problems.

www.carers.org

National Debt Line
National Debtline is the national telephone helpline for people with debt problems in England, Scotland and Wales. The service is free, confidential and independent.

0808 808400

Citizens Advice Bureau
The Citizens Advice Bureau helps people resolve their legal, money and other problems by providing free, independent and confidential advice, and by influencing policymakers.

www.citizensadvice.org.uk

Children and young people
There may be a young carers group in your area or someone at school that young people can talk to.

Stigma

Time to Change campaign
Time to Change is England’s biggest ever attempt to end the stigma and discrimination that faces people with mental health problems. It is a campaign which aims to change attitudes and behaviour towards those with mental health problems.

www.time-to-change.org.uk
Thank you to...

Producing a resource such as this relies on the support and contribution of a wide range of people. We consulted widely at the various stages of the development of the material in terms of content, layout and presentation, and would like to thank all of those who gave so generously of their time and ideas.

In terms of initial discussions on content, Thurstine Bassett, Alison Faulkner, Michele Gladden, Becky Heelis, Peter Woodhams and Aiesha Wright were particularly helpful. Martin Atchison and Chris Mansell kindly provided materials for some of the case examples and exercises. Thanks also to Claudia Benzies and the ‘COOL’ group of carers for allowing us to share some of their material on recovery.

One of the biggest tasks was reading through the earlier versions of the different sections which was a really time-consuming activity. We wanted to ensure that the material is meaningful, helpful and presented in a way that is easily accessible to carers and family members, so we enlisted the help of family members recruited through Rethink Mental Illness and the Meriden Family Programme. We are so grateful to those helped with this task – June Cooley, George Gladden, Michele Gladden, Edward Haslam, Christine Lewis, Philippa Lewis, Philippa Lowe, Maggie Morgans, Jeanette Partridge and Peter Woodhams. A number of other carers who equally spent hours reading through drafts and providing feedback did not wish to be named in person, so our heartfelt thanks to those ‘anonymous’ family members for all their time, commitment and valuable comments.

Special thanks to Peter Woodhams for his help in preparing the final version of the booklet ‘Being a Carer’, to Paula Conneely for help with the final versions of the sections on Relapse Management, Communication Skills and Problem-Solving, and to Sam Farooq for all her attention to detail in proof-reading the material, and all the other administrative tasks such as liaising with family members and the design and printing team. Finally thanks to Mark Teagles from White Halo Design for design and layout, and for his patience and flexibility in producing the finished product.
About the authors

Gráinne Fadden is a Consultant Clinical Psychologist based in Birmingham and Solihull Mental Health NHS Trust, Honorary Senior Research Fellow at the University of Birmingham and Director of the Meriden Family Programme. The cascade method of training and system of organisational change for improving services to families developed through the Meriden Programme have been adopted by several organisations within the UK and abroad. The Programme has been the recipient of numerous awards for ‘Modernising Mental Health Services’ and for ‘Mental Health Innovation’. She was awarded the prestigious Marsh Lifetime Achievement Award by Rethink Mental Illness in 2009 for her outstanding contribution to mental health. Gráinne has been involved in family work and research throughout her career, and has written extensively on the effects of mental health problems on families, on how family members can be supported, and the training of mental health professionals. She links with a range of national bodies on issues relating to families and carers and has delivered training around the world.

Carolyn James qualified as a Clinical Psychologist in 2003. Currently she works in clinical health psychology and training, and prior to this she was part of a child and adolescent mental health team in East Birmingham. Before training Carolyn worked as a Research Assistant on a number of projects, including the Meriden Programme. Carolyn is proud to have been part of the Programme since the very beginning. She has maintained her links with the team since that time and returned to talking with families and therapists as part of her doctoral research. Carolyn was interested to find out what helped engagement in family therapy and, as a result of her work, developed a theory about some of the factors that therapists may need to consider when talking with families about Behavioural Family Therapy (BFT).

Vanessa Pinfold is a health services researcher. She joined Rethink Mental Illness in 2003 to establish a research team within the charity. Previously she worked at the Institute of Psychiatry, Kings College London. She is currently working as a part time research fellow at Rethink Mental Illness and is chair of The McPin Foundation – a small family charity that supports mental health research and promotes mental well being through innovative projects.

Vanessa has always had an interest in mental health carers and through research programmes has sought to develop practical tools to assist families and relatives of people with mental illness. She has been involved in the Time to Change campaign to end mental health discrimination and the re-development of Rethink Mental Illness ‘Caring and Coping’ training programme. Vanessa has also led the development of an online package to assist practitioners to work with families through timely and appropriate information sharing in mental health.
The Meriden Family Programme
Birmingham & Solihull Mental Health NHS Foundation Trust
Tall Trees, The Uffculme Centre
80 Queensbridge Road
Moseley, Birmingham
West Midlands B13 8QY

Phone 0121 678 2896
Fax 0121 678 2891

www.meridenfamilyprogramme.com