

# SANE

FACTSHEET

## IS SOMEONE YOU KNOW UNWELL?

### QUICK FACTS

If something is not quite right about the way a loved one is behaving, it can be helpful to think about any significant recent changes in behaviour or mood. It may not be a serious problem. But if there is a developing mental illness, then getting help early is very important.

If mental illness is identified early, then treatment can work early too. It's more likely that the person will keep up good relationships with family and friends, and there will be less disruption of school, work, and everyday activities.

**Related:** [Supporting someone having thoughts of suicide](#)

'I'd never lived out of home before. I felt isolated and alone, and I just couldn't handle the stress alongside everything else going on in my head. That's when things really took a turn for the worst, and I experienced my first episode of psychosis.'

[Hannah](#)

### REGULAR BEHAVIOUR VS CONCERNING BEHAVIOUR

Some behaviour is considered normal, but may be difficult to handle. People may be rude, argumentative, unmotivated or withdrawn. Often this is a normal reaction to stressful events such as a family crisis, relationship breakdown or physical illness.

In these cases, the person probably doesn't need to see a doctor for assessment. Try to be as supportive as possible while waiting for the bad patch to pass. If the behaviour is disruptive or distressing for other people, or if the difficult behaviour persists, seek help from a counsellor, a GP or other health worker.

### When to seek help

Some behaviour may be considered out of character or abnormal for that person. This may include:

- withdrawing completely from family, friends and others.
- sleeping poorly – for example, sleeping during the day and staying awake all night.
- becoming very preoccupied with a particular topic – for example, death, politics or religion.
- uncharacteristically neglecting responsibilities, personal hygiene or appearance; eating poorly.
- deteriorating performance at school or work.
- having difficulty concentrating, following conversation or remembering things.
- panicking, becoming anxious, depressed, or talking about suicide.
- having extreme changes in mood for no real reason.
- hearing voices that no-one else can hear.
- believing, without reason, that others are plotting against or spying on them, and feeling fearful or angry about this.
- believing they are being harmed, or influenced to do things against their will.
- believing they have special powers or influence.
- believing their thoughts are being interfered with, or that they can influence the thoughts of others.
- spending extravagant and unrealistic sums of money.

These behaviours are a strong sign that something needs to be checked out by a doctor, particularly if they have been present for some weeks. There may only be a minor disturbance but a mental illness may be developing.

**Related:** [The first steps](#)

## **WHAT ABOUT ILLICIT SUBSTANCES?**

Some people who are developing a mental illness may use alcohol or street drugs to help feel better. These drugs will make symptoms worse, and can make treatment more difficult.

Drugs such as cannabis can also produce psychotic symptoms like those listed above. This may be short-term (a drug-induced psychosis) or can lead to a long-term psychotic illness such as schizophrenia. If someone's behaviour worries you – or drug use causes problems at home, school or work – then try to get help for the person. A doctor can make a medical assessment to see if there is a mental illness which needs treatment, or decide if referral to a drug and alcohol agency for treatment would help.

**Related:** [Cannabis and psychosis](#)

## **ENCOURAGING A VISIT TO THE DOCTOR**

Sometimes people don't want to see a doctor because they feel they are being criticised, that

others are against them, or because they feel frightened, anxious or angry. Some may have trouble putting their thoughts together to explain their problems.

It can help to talk things over when you are both calm and when you feel the person is likely to be cooperative. For example: I'd like to talk something over with you that's been worrying me - is this a good time or shall we talk later?

### **The doctor is ready to help**

Focus on how the person is feeling and try to stand in their shoes. Ask someone else to talk to the person if you do not feel sympathetic or are not trusted by them.

At first, try to focus on problems the person feels comfortable talking about. For example: *I know you've been having trouble sleeping and concentrating lately - would you like to talk to someone about it?*

*You've been feeling very down in the dumps lately - shall we talk to the doctor and see if she can help?*

Encourage everyone involved to think of the doctor as someone who can help, and who will not judge them. Suggest that you, another relative or a friend go along to the appointment.

### **Talk to the doctor beforehand**

If possible, discuss the situation beforehand with the doctor, especially if the person is reluctant to talk about how they feel. Write down some notes about your concerns beforehand.

If there is outright resistance to the idea of getting medical help, talk to the doctor yourself to work out a plan.

The doctor may be able to visit the person at home to make an assessment. If this is not possible, they should still be able to tell you where to get help and support - for the person and for the family and others who are worried.

**Related:** [Guide for families, friends and carers](#) • [What I wish I knew when I became a carer](#) •

### **HOW TO TALK TO THE DOCTOR**

Book a longer appointment and take this pamphlet with you as a discussion-starter. When explaining your concerns, give specific examples rather than vague expressions.

**Instead of:** *Jack gets very frustrated,* **try** *Jack was so angry last night that he kicked his bedroom door down.*

**Instead of:** *Mia looks awful,* **try** *Mia wears dirty clothes to school and doesn't wash or comb her hair any more - she used to be fussy about her appearance.*

**Instead of:** *Paul is very shy these days,* **try** *For the past week Paul has only come out of his room to get food.*

**Instead of:** *Donna thinks we hate her, try Last night Donna would not come out of her room or eat with us. She said we are all plotting against her.*