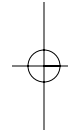
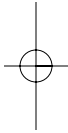


# Psychiatric Hospitalization: A Guide for Families



**Depression and Bipolar  
Support Alliance**

We've been there. We can help.

## What are mood disorders?

Mood disorders are treatable physical illnesses of the brain involving changes in energy, behavior, thought and mood. A person may experience periods of depression or alternating periods of depression and mania (known as bipolar disorder or manic depression).

## Symptoms of depression

- Sad, empty, irritable or tearful mood most of the day, nearly every day
- No interest in or pleasure from activities once enjoyed
- Major changes in appetite or body weight
- Insomnia or sleeping too much
- Feelings of restlessness or being slowed down
- Fatigue, exhaustion, lack of energy
- Feelings of worthlessness or excessive guilt
- Inability to concentrate or make decisions
- Thoughts of death or suicide

**If someone has thoughts of death or suicide, get help immediately by calling a medical professional or (800) SUICIDE.**

## Symptoms of mania

- Feeling overly energetic, high, better than good or unusually irritable for at least one week
- Very high self esteem, feeling all-powerful
- Decreased need for sleep without feeling tired
- Talking more or faster than usual, pressure to keep talking
- Racing thoughts, many ideas coming at once
- Distracted easily, thoughts or statements jumping from topic to topic
- Increase in goal-directed activity, restlessness
- Excessive pursuit of pleasure (e.g., financial or sexual) without thought of consequences.

*“You will probably wonder if the whole thing was your fault.*

*If you care enough to feel that way, the problem was probably not your fault.*

*If wondering about it helps you correct mistakes and communicate better with your family member, good.*

*But don’t blame yourself.*

*There are many caring parents whose children have mental illnesses. You can help your family member most if you keep yourself well and get the support you need.”*

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*Mother of a young woman with bipolar disorder*

## When does a person need psychiatric hospitalization?

Symptoms of mania or depression can seriously interfere with a person's life. Sometimes hospitalization can be the best option to keep the person safe and stabilize severe symptoms.

### People may need to go to the hospital if they:

- Threaten or try to take their lives or hurt themselves or others
- See or hear things (hallucinations)
- Believe things that aren't true (delusions)
- Need special treatments such as electroconvulsive therapy
- Have problems with alcohol or substances
- Have not eaten or slept for several days
- Are unable to care for themselves or their families, e.g., getting out of bed, bathing, dressing
- Have tried treatment with therapy, medication and support and still have a lot of trouble with symptoms
- Need to make a significant switch in treatment or medication under the close supervision of their doctor
- Have any symptom of mania or depression that significantly interferes with life

**Voluntary hospitalization** takes place when a person willingly signs forms agreeing to be treated in the hospital. A person who signs in voluntarily may also ask to leave. This request should be made in writing. The hospital must release people who make requests within a period of time (two to seven days, depending on state laws), unless they are a danger to themselves or others. If your loved one asks to be released and the hospital does not comply, your state's Protection and Advocacy agency (see page 10) can help you with your next steps.

Most psychiatric hospital stays are from five to ten days. There are also longer residential rehabilitation programs for alcohol or substance abuse, eating disorders or other issues that require long-term treatment.

**Involuntary hospitalization** is a last resort when someone's symptoms have become so severe that they

will not listen to others or accept help. You may need to involve your loved one's doctor, the police or lawyers.

*Involuntary hospitalization is an option of last resort only.* It is better to talk with your loved one before a crisis and determine the best treatment options together. Work with your loved one in advance to write down ways to cope and what to do if symptoms become severe. Having a plan can ease the stress on you and your loved one, and ensure that the appropriate care is given.

## How can an advance directive or a medical power of attorney help?

An advance directive and a medical power of attorney are written documents that give others authority to act on a person's behalf when that person is ill. Your loved one can specify what decisions should be made and when. It is best to consult a qualified attorney to help with an advance directive or a medical power of attorney. These documents work differently in different states.

## How can I find out more about involuntary hospitalization for a family member?

- Your family doctor or psychiatrist may be able to explain things.
- Your local hospital can tell you about admission policies.
- Your local police (call the non-emergency number if you are not in crisis) can explain how they handle this type of situation.
- A lawyer who specializes in mental health law can give you some advice.
- The Treatment Advocacy Center (see page 10) can explain involuntary commitment laws in your state.
- Your state Protection and Advocacy Association (see page 10) can let you know your options.
- Your local Depression and Bipolar Support Alliance support group may have members who have similar experiences to share.

## How can I convince my loved one to check in voluntarily?

- Explain that the person is not going to an institution, asylum or prison. Hospitalization is treatment, not punishment.
- Reassure your loved one that the hospital is a safe place where a person can begin to get well. No one outside the family needs to be told about the hospitalization.
- Tell your loved one that getting help does not mean someone has failed. A mood disorder is an illness that needs treatment, like diabetes or heart disease. Hospitalization is nothing to be ashamed of.
- Call the hospital and find out more about admission, treatment and policies.
- Help your loved one pack comfortable clothing and safe items that are reminders of home.
- Offer the person choices, such as going to the hospital with you or with another loved one.

## How should I talk to a person in crisis?

- Stay calm. Talk slowly and use reassuring tones.
- Realize you may have trouble communicating with your loved one. Ask simple questions. Repeat them if necessary, using the same words each time.
- Don't take your loved one's actions or hurtful words personally.
- Say, "I'm here. I care. I want to help. How can I help you?"
- Don't say, "Snap out of it," "Get over it," or "Stop acting crazy."
- Don't handle the crisis alone. Call family, friends, neighbors, people from your place of worship or people from a local support group to help you.
- Don't threaten to call 911 unless you intend to. When you call 911, police and/or an ambulance are likely to come to your house. This may make your loved one more upset, so use 911 only when you or someone else is in immediate danger.

## How can I help a loved one who is hospitalized?

- Find out when people are allowed receive phone calls and visits. If your loved one wants you to, stop by to say hello and bring a book, comfortable clothing, slippers, food or something else your loved one likes. Check with hospital staff first. Some items (mirrors, belts, drawstrings, spiral notebooks, some grooming items) may not be allowed on the ward.
- Know that your loved one may not want to see anyone at first, and respect those wishes.
- Ask if the hospital offers a family support group.
- Learn about your loved one's illness, its symptoms and its treatments. Remind yourself that your loved one has an illness, not a character flaw, and it is not anyone's fault. If you don't know your loved one's diagnosis, find out more about mental illness in general.
- Help your loved one make a list of questions about the illness and treatment to ask the doctors or hospital staff.
- If your friend or family member is not getting good care from the hospital, say something. Ask the staff to explain the treatments your loved one is getting. If he or she is getting unnecessary or experimental treatment, ask that it be stopped. Don't be afraid to ask more than once for good treatment for your loved one. Stay calm but be persistent.
- Ask if your loved one needs you to help with things like housework, care for children or pets, or phone calls to an employer during the hospital stay.



## How can I get answers to questions about my loved one's treatment?

- There may be privacy regulations at the hospital that will keep you from finding out about your loved one's treatment. These rules are there to protect your loved one, not to keep you out. Ask hospital staff what you can do to find out more. Your loved one may be able to ask that the restrictions be removed.
- There will probably be several professionals treating your loved one. This may include a psychiatrist, therapist, social worker, psychiatric nurse and psychiatric technician. It may be difficult to reach hospital staff who can give you information about your loved one, especially at the beginning of treatment. You may need to try several times before you reach someone who can help you. Keep trying.
- Write down the name of your loved one's psychiatrist and therapist, and other hospital staff that work with your loved one, and the best time to reach them with questions. Write down the questions you have and the answers you are given. Keep questions specific and to the point. Be patient, polite and assertive. Ask for clarification of things you do not understand.
- Keep a record of your communications with hospital staff, including the times of calls, who you talk to and what you find out. If the staff is not responding, try calling the ombudsman or hospital administrator.
- If possible, schedule a meeting for you, your loved one, other family members and hospital staff to talk about treatment and other concerns.
- Before your loved one is released, make sure there are written instructions for treatment, e.g., what medications should be taken and when, who to see for follow-up care and when, and what professionals are available in case of emergency. Write down any changes in diet or activity your loved one needs to make because of treatment.

## How can I be supportive after my loved one comes home?

- Believe in your loved one's ability to recover. Your belief in your loved one can make a big difference. Show your support by being kind, available and dependable. Many people say their families' faith in them kept them going through difficult times.
- Help your loved one prioritize bills, housework and other tasks so he or she doesn't feel overwhelmed.
- Ask what your loved one needs – don't assume. Ask if you can help with daily tasks, give medication reminders or come along to health care appointments.
- Respect your loved one's boundaries. Be available when he or she is ready to accept your help.
- Be patient. Don't rush, pressure, hover or nag. It may take some time for your loved one to feel better. A person may have temporary side effects such as dizziness, upset stomach, headache or trouble sleeping when starting a new medication.
- Give your loved one a DBSA Personal Calendar to track medications, moods and patterns.
- If your loved one is in school, help with make-up work and special accommodations.
- If you live far away, show your support with phone calls, cards and letters. Talk with the person's health care providers and other loved ones who live nearby about how you can help.
- Get support for yourself. It helps to talk to people who know how it feels to be in your situation. Call DBSA at **(800) 826-3632** or visit **[www.DBSAAlliance.org](http://www.DBSAAlliance.org)** to find a support group near you. If there is no group nearby, DBSA can help you start one.



## Preparing for the future

- Keep a list of phone numbers, including your loved one's doctor, therapist, and psychiatrist, your local hospital, and trusted friends who can help.
- List the warning signs that your loved one may be having a severe episode. List things he or she might say or do, and what you can do to help.
- List the treatments and medications that work and don't work for your loved one.

## You are not alone.

Supporting a loved one with a mood disorder can be difficult, but you can have a positive impact on your loved one's wellness. Help your loved one cope before, during and after hospitalization. Help him or her find the best treatment. Get support for the entire family, and never give up hope.

## Resources

The following organizations may provide additional help. DBSA assumes no responsibility for the content or accuracy of the material they provide.

**Bazelon Center for Mental Health Law** (Provides information but cannot give individual legal advice.)  
(202) 467-5730 • [www.bazelon.org](http://www.bazelon.org)

**National Alliance for the Mentally Ill (NAMI)**  
(800) 950-6264 • [www.nami.org](http://www.nami.org)

**National Association of Protection and Advocacy**  
(202) 408-9514 • [www.napas.org](http://www.napas.org)

**National Hopeline Network**  
(800) 442-HOPE (800-442-4673) or  
(800) SUICIDE (800-784-2433)

**National Institute of Mental Health (NIMH)**  
(800) 421-4211 • [www.nimh.nih.gov](http://www.nimh.nih.gov)

**National Mental Health Association (NMHA)**  
(800) 969-6642 • [www.nmha.org](http://www.nmha.org)

**Substance Abuse and Mental Health Services Administration (SAMHSA)**  
(800) 789-2647 • (866) 889-2647 (TTY)  
[www.mentalhealth.org](http://www.mentalhealth.org)

**Treatment Advocacy Center**  
(Explains each state's hospitalization laws)  
(703) 294-6001 • [www.psychlaws.org](http://www.psychlaws.org)

## Help DBSA change lives.

We hope you found the information in this brochure useful. Your gift will help us continue to assist people and families with mood disorders.

**Yes,** I want to make a difference. Enclosed is my gift of:

\$100     \$50     \$20     Other \_\_\_\_\_

NAME

ADDRESS

CITY

STATE

ZIP

PHONE

E-MAIL

Check (payable to DBSA)     Money order  
 VISA     MasterCard     Discover Card     AmEx

ACCOUNT

EXP. DATE

NAME AS IT APPEARS ON CREDIT CARD

SIGNATURE (REQUIRED)

- I wish my gift to remain anonymous.
- Please send me \_\_\_\_ donation envelopes to share.
- I'd like details on including DBSA in my will.
- I have enclosed my company's matching gift form.
- I'd like to receive more information about mood disorders.
- Please send all correspondence in a confidential envelope.

*If you would like to make your gift a Memorial or Honorary tribute, please complete the following:*

In Memory of/In Honor of (circle one):

PRINT NAME

Please send an acknowledgment to:

RECIPIENT'S NAME

ADDRESS

CITY

STATE

ZIP

Please send this form with payment to: **Depression and Bipolar Support Alliance, 730 N. Franklin Street, Suite 501, Chicago, IL 60610-7224 USA**

**Questions?** Call (800) 826-3632 or (312) 642-0049.

**Credit card payments** (Visa, MasterCard, Discover or AmEx) may be faxed to (312) 642-7243. Secure online donations may be made at [www.DBSAAlliance.org](http://www.DBSAAlliance.org).

DBSA is a not-for-profit 501(c)(3) Illinois corporation. All donations are tax deductible based on federal and state IRS regulations. Please consult your tax advisor for more details. All information is held in strict confidence and will never be shared.

***Thank you for your gift!***



Depression and Bipolar  
Support Alliance

We've been there. We can help.

**The Depression and Bipolar Support Alliance (DBSA)** is the leading patient-directed national organization focusing on the most prevalent mental illnesses. The organization fosters an environment of understanding about the impact and management of these life-threatening illnesses by providing up-to-date, scientifically-based tools and information written in language the general public can understand. DBSA supports research to promote more timely diagnosis, develop more effective and tolerable treatments and discover a cure. The organization works to ensure that people living with mood disorders are treated equitably.

Assisted by a Scientific Advisory Board comprised of the leading researchers and clinicians in the field of mood disorders, DBSA has more than 1,000 peer-run support groups across the country. Three million people request and receive information and assistance each year. DBSA's mission is to improve the lives of people living with mood disorders.

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#### **Depression and Bipolar Support Alliance**

730 N. Franklin Street, Suite 501  
Chicago, Illinois 60610-7224 USA  
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Fax: (312) 642-7243  
Web site: [www.DBSAAlliance.org](http://www.DBSAAlliance.org)

*Visit our updated, interactive website for important information, breaking news, chapter connections, advocacy help and much more.*

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*This brochure was reviewed by DBSA Scientific Advisory Board member Larry Culpepper, M.D., M.P.H., Chairman of Family Medicine at Boston University Medical Center, and Barry Buchanan of DBSA SW Iowa..*

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DBSA does not endorse or recommend the use of any specific treatment, medication or resource mentioned in this brochure. For advice about specific treatments or medications, individuals should consult their physicians and/or mental health professionals. This brochure is not intended to take the place of a visit to a qualified health care provider.