

Responding to unusual behaviour

If you have a friend or family member with a mental illness, some of their behaviour might worry you. This factsheet suggests some ways to deal with unusual behaviour.



KEY POINTS

- Unusual behaviour in a relative is often the hardest part of mental illness for people to understand, accept and cope with.
- There are lots of reasons why people do things. Not everything your relative does is because of their illness.
- All situations and relationships are different. What works for you might not work for someone else.
- You may have to change your approach when your relative's moods change.
- It can take time for things to change. It can help to keep trying and to be positive.
- You might find it helpful to keep a record of the things you have tried, and whether you thought they were helpful or unhelpful.
- Not all of our suggestions will work for you. At the end of this factsheet there is a template diary you can use to make your own guide.
- Some carer support groups talk about unusual behaviour and may offer suggestions or emotional support. You could try to find a group near you or start your own.

This factsheet covers:

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When we say 'relative' in this factsheet, we mean anyone you know who has a mental illness, even if you are not related to them.

People will have different views about what 'unusual behaviour' is. In this factsheet, it means any behaviour that you think is caused by your relative's illness.

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1. How are behaviour and mental health related?

Behaviour includes the things we say, the places we go, body language, gestures and movements. Behaviour may be affected by:

- personality,
- moods and emotions,
- relationships with other people,
- culture,
- current life events,
- previous experiences,
- habits,
- physical illness,
- mental illness or other mental disorders,
- medication, drug or alcohol use, and
- other circumstances such as tiredness, pain, stress or confusion.

The reasons why we do things are complex. Nobody fully understands the reasons for all their own behaviour. We all do some things without realising it or knowing where the behavior came from.

Mental illness affects the way people behave. You may feel that your relative's illness has a big impact on their behaviour. But there may be other things that affect them too, such as those mentioned in the list above. So we can only give general tips on how to help someone with unusual behaviour.

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2. What are delusions?

Delusions are false beliefs.¹ For example, your relative may believe that:

- people are trying to poison them,
- they are being targeted by the police, or
- that they are on a special mission.

People often have delusions as part of 'psychosis'. You can find more about **psychosis** at www.rethink.org. Or call or General Enquiries Team on 0121 522 7007 and ask them to send you a copy of our factsheet.

Avoiding conflict

It may lead to an argument if you disagree with the beliefs or try to challenge your relative too directly.. They might even accuse you of being part of a conspiracy against them.²

Remember that your relative truly believes these things. You are unlikely to be able to talk them out of it when they are unwell. Your relative may not be able to accept logical arguments at the moment³..

Things to avoid

Laughing

It may be tempting to laugh if your relative's belief is very unusual. However, try not to do this, it may cause upset or anger.

Agreeing with the beliefs

You may feel that it is easier just to agree. But as a general rule you should not do this because there is a chance you could strengthen their beliefs.

Directly challenging the beliefs

You may want to say 'that's not true!' or 'that's ridiculous'. But this is likely to cause an argument. Research shows that if you confront your relative about their beliefs, they may end up believing them more.⁴

Things to try.⁵

- Listening
- Acknowledging feelings
 - "This must be very frightening"
 - "How do you feel?"

- Building trust
 - “I am on your side”
 - “I want to help”
 - “Maybe if we talk about it you may feel less anxious”

Exploring evidence and giving other explanations

Sometimes you can try to get your relative to look at the evidence for a particular belief. This is not the same as challenging it.

"You say that man was following you but can you be sure? How many times have you seen him? Did you see where he walked to? He could have just been walking in the same direction a few times because he lives nearby"

Sometimes you can try persuading your relative to test their belief. For example, if they think their food is poisoned, you could offer to taste it for them. If they think they are being followed, you could offer to go for a walk with them. Try not to be disappointed if your relative continues to have delusions

Reassurance

- “I know you think the police are following you, but I haven’t seen any evidence of this”
- You don’t need to worry, you haven’t done anything wrong, so the police will not be interested in you"

Distraction

You may feel as though your relative spends a lot of time worrying about their beliefs. They may seem obsessed with them. The following things may help.

- Suggest that your relative tries voluntary work, exercise, a hobby or something else to keep their mind off things.
- Set boundaries so that you can only discuss a particular belief at certain times.
- Suggest that your relative talks to their GP about the way they feel because of the situation. Your relative might not want to speak to their GP about their beliefs, but they may be willing to talk about their feelings.

Unfortunately, not every conversation will go as well as you would like. Many carers tell us that their relative has an ‘answer for everything’ and that it can be tiring trying to discuss things. Make sure you take regular breaks from the situation if you feel this way.

Delusions about you

You might find it particularly difficult to deal with a situation if your relative believes that you have harmed them in the past or will try to harm them in the future. Because of the nature of their beliefs, they are unlikely to accept anything you say or do to prove that you care about them and want to help.

In this situation, you can keep in contact in writing if things are difficult face-to-face. You could do this by email, letter or text. It may also help if someone else who is not involved in the situation talks to your relative. This could be a different family member or friend.

It can be very difficult for you if your relative is having delusions about you. You might want to get some extra support in this situation. Section 12 of this factsheet has more information about support.

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3. How can I help with low motivation?

When your relative is unwell, they might feel as though they have no energy or motivation to do the things they used to do. This is common in people with depression and schizophrenia. You may feel frustrated that your relative will not do things to make their situation better.

First of all, you might want to check whether your relative feels tired. This can be a common side effect of medication. A doctor might be able to suggest some options to help with feeling tired.

Sometimes, your relative's low motivation can affect your own motivation. Make sure you take time to do activities you enjoy.

How can I help someone with low motivation?

Acceptance

Accept that this may be a part of your relative's illness, at least for now, and try not to put too much pressure on them..

Encouragement

Try to include your relative in daily activities such as shopping or housework. Be careful not to put them under too much pressure to do these things. You might find that it helps just to ask them whether they would like to help.⁶ If they say no, try not to:

- get upset,
- accuse them of being lazy, or
- ask them at different times on the same day.

When you ask them next time, they may say 'yes'.

Organise regular activities

If your relative gets into a habit of taking part in a certain activity regularly, they may start to enjoy it. You could suggest activities your relative used to enjoy. Or you could explore new activities.⁷ This could include going for a walk, joining a group or club or doing hobbies.

Focus on the future and not the past

Your relative may have lost interest in life because they see that things have changed. Reminding your relative of how they used to be may add to this feeling. Instead, talk about things they can do now.⁸

Take small steps

Your relative may want their life to improve but may not feel it is possible. Work with your relative to break down goals into small steps. Progress may be slow but reassure and encourage them by noting and praising each small success made.⁹

You can find more information on '**Recovery**' at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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4. What if my relative withdraws from other people?

Your relative may feel that they do not want to see you or other people. Doctors sometimes call this 'social withdrawal'. The following may help.

- Lower your expectation to a realistic level and do not put too much pressure on them.
- If this is a recent problem, ask your relative whether there is something bothering them. Let them know that they can come to you if they have any problems they want to talk about.
- Think about whether your relative might feel unsure in social situations.
- Take things slowly to help rebuild their confidence. Keep the number of people to a minimum, keep conversations short and avoid issues that can become too emotional. You could try asking them to:
 - buy something from a shop,
 - order something from a cafe,
 - speak to a visitor,
 - visit family members, or
 - sit with a familiar person in a public place.
- Ask your relative where they would feel most comfortable.
- If your relative feels low, they may be willing to speak to an emotional support line or their doctor. With the right treatment, they might start to overcome the problems they have been having.
- You could suggest that your relative tries going to a day centre or a support group with other people who have a mental illness.

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5. How can I respond to anger and aggression?

Most people with mental illness are no more aggressive or violent than anyone else.¹⁰ But for some people feelings of anger and aggression can be linked a mental health problem.

Preventing anger and aggression

Try to work out which situations make your relative aggressive. Keeping a diary might help. You may be able to work out ways of avoiding these situations.¹¹ For example, talking about certain topics might upset your relative. Or your relative may become angry if you ask them to do too much.

People are often more aggressive if they have taken drugs or alcohol¹². It is likely to be harder to reason with someone if they have taken substances.

If your relative is getting help from the NHS or social services, get in touch with staff to talk about the situation.

If you live with your relative and they often aggressive towards you, you may wish to change living arrangements. This could be going to stay with a friend or family member for a short period of time.

Responding to someone who is angry¹³

- Don't tell your relative that they are angry. Try 'you seem angry' instead.
- Listen to your relative and try to find out why they are angry. You could ask them to explain. Or you could tell them what you think they mean and ask them if this is right.
- Be prepared to repeat yourself and be patient.
- Use your relative's name.
- Don't talk down to them or argue.
- Respect their feelings - don't tell them that they shouldn't be angry.
- Try not to get upset or angry yourself. Use a calm voice and keep a neutral facial expression.
- If your relative says something nasty about you, try saying 'I understand that you think XXXX, but I don't agree with that'.
- Admit if you have made a mistake.
- Ask for more time before responding, if you need it.
- Do not put your own safety at risk. If the things you have tried haven't worked, or if things are getting worse, leave the situation. If you feel that there is a serious risk of violence, call the police.

You can find more information on '**Getting help in a crisis**' at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

6. How can I help with anxiety?

Anxiety can be a difficult part of mental illness to deal with. Your relative might worry about things that may not happen. They may think about the worst thing that can happen. Or they may feel anxious about a specific event such as an appointment or a job interview coming.

How to help

Keep your voice neutral

Try not to talk too fast or too loud. Speak clearly and use simple sentences. Use your relative's name.

Don't tell your relative to calm down

Ask them what is wrong instead and whether you can help. You could suggest that your relative takes slow, deep breaths. It may help to sit down.

Make the situation more comfortable

If you are somewhere your relative doesn't know, ask them if they would like to go somewhere else. This could be somewhere:

- more private,
- more familiar, or
- more comfortable where you can discuss the problem.

Listen

Your relative might find it helpful to talk through their concerns. Especially with someone who wants to understand and help them. There won't always be a practical way forward, and your relative won't always be able to get what they are looking for. But they may feel better after talking things through.

Anxieties about the future

Your relative may be anxious about 'something' which may happen in the future. You can try to help them to break down their anxiety by encouraging them to think about the likelihood of 'something' happening. If it is likely to happen you can talk about how they can prepare for it now.¹⁴ You may be able to think of solutions that your relative hasn't thought of. Your relative may feel a bit better about the situation if they have prepared.

But your relative might not always be open to talk about practical ways forward. They may think that nothing will help them and feel hopeless. If they are not in the right frame of mind to do this at the moment, you can bring it up with them again later. Try to be patient.

7. What can I do about risky behaviour?

Mental illnesses can make people act in a risky way. This could include:

- spending too much,
- drinking and taking drugs,
- driving too fast, or
- having more sexual partners.

Ways you can help.

- Tell your relative that you are there to support them.
- Talk to your relative about what might happen because of their behaviour.
- Suggest ways they could be safer.
- See whether your relative would like to speak to their doctor about their mental health. They may not be worried about their risky behaviour, but there may be other things that do worry them.

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8. What if my relative becomes over-dependent?

If your relative finds it hard to do things, you may want to help them. For example, you might help them to:

- fill in benefits forms,
- get up in the morning,
- pay their bills,
- eat properly,
- go to appointments, and
- take medication.

You may find yourself taking on more than you were expecting to. It is important for you and your relative that they do not become over-dependent on you. Your relative could lose confidence in doing things for themselves. And you may feel stressed and tired.

How to help

Set boundaries

Decide how much you can do for your relative and agree boundaries. It is better if you can agree this early on, but you can review the situation at any time. Explain the reasons why you need to set boundaries sensitively.

Work towards independence

Take steps to slowly build your relative's confidence and independence by agreeing goals. To start with, your relative's goals may be to:

- make a meal from scratch,

- walk the dog, or
- fill in a form.

Later they may be ready to live independently or start a job. You can show them how to do the skill first and agree to practice it with them until they can do it on their own.¹⁵

Get a carer's assessment

You might have to do more than you want to do because your relative is particularly unwell. Contact your local authority's social care team to ask for a carer's assessment if you are finding it hard to cope. They may be able to arrange additional help or a break for you and your relative.

You can find out more about **carer's assessments** at www.rethink.org or call our General Enquiries Team on 0121 522 7007 and ask them to send you a copy of our factsheet.

Get help from professionals

If your relative is under the community mental health team (CMHT), you could talk to their care coordinator. Their care plan may help them develop independent living skills. For example by getting help from an occupational therapist or supported housing.

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9. Is lying part of mental illness?

Lying is deliberately saying something that isn't true. People might lie to:

- cover up events they are ashamed of,
- improve their ego,
- get a job,
- get more money, sex, power or something else they want,
- protect other people, or
- change the behaviour of others.

Lying and mental illness

Lying is common in the general population and people do it for all sorts of reasons. Lying is not a symptom of mental illness. We are not aware of any research that shows whether or not it is more common for people with mental illnesses to lie.

You might find it helpful to keep a record of your relative's lies or any manipulative behaviour. It may be helpful to a doctor in the future.

If someone has delusional beliefs then they will believe the things they say, even if they sound unusual. These are not lies. We give tips on how to deal with these beliefs in [section 2](#) of this factsheet.

How to help

Your relative may become defensive if you challenge them about a lie. If you do decide to challenge a lie, it can be helpful to have evidence to show it is a lie. Try to avoid saying 'you're lying' or 'that's a lie'.

If you don't have any evidence, you can try questioning them. But your relative could accuse you of not trusting them. You might find it helpful to assure them that you believe them, but that you are interested to know more detail about the situation because you are worried.

You may feel that your relative lies to get money from you. If you are not willing to give them money, explain your reasons.

If you are willing to give them money but you want to test a possible lie, ask what they need the money for. You could offer to buy things for them if you think they are lying,

Your relative may have money problems. Try to help them fix their problem by teaching them how to budget or get help from a money charity.

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10. What about social media, text and email?

Your relative might have sent you a letter, email or text message that worries you. Or they might have posted something on a social media page like Facebook.

Your relative may have written something upsetting about you. Or something that made you think they were going to harm themselves or others. They might have been very specific. Or they might have written something vague such as 'what's the point?'

These situations are difficult because:

- you won't always know where your relative is,
- you may not have enough direct contact to be able to weigh up whether they are at risk, and
- if you have not seen the message quickly, your relative might not still feel the same way when you read it..

Each situation will be different. But you could think about the following.

- Will it help if I respond?
Think about the impact your response will have on your relative. Will it harm your relationship if you don't respond at all?
- If I need to respond, should I do it now or should I wait?
If the situation seems urgent, you may wish to respond as soon as you can. Other times, you may feel that you have time to think about a response.
- How should I contact them?
You don't have to respond directly to their message. You could ring them or visit them. You might find it easier to see your relative in

person. Or find out where they are, so that you can offer more support and try to get them help if they need it.

- Should I speak to a friend or family member?
Other people might be able to help you think of the best thing to do.
- What should I say?
This always depends on your circumstances. But think about the following.
 - 'I'm sorry to hear about the way you are feeling.'
 - 'Is there anything I can do to help?'
 - 'It seems as though things have been really hard for you recently.'
 - 'I am here if you need me.'

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11. How can I get help for my relative?

It is likely to worry you if your relative's behaviour has changed. You may think that they need medical help or help from social services.

You can find out more about:

- Persuading someone to speak to their doctor
- Worried about someone's mental health?
- Getting help in a crisis
- Social care, assessment and eligibility

at www.rethink.org or call our General Enquiries Team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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12. What support can I get?

Supporting a person with unusual behaviour can be stressful, and you may need support yourself. You could:

- talk to friends and family,
- talk to your own doctor,
- ask for a carer's assessment from your local council,
- join a support group for carers, friends and family, and
- take some time out to concentrate on yourself.

You can find more about '**Supporting someone with a mental illness**' at www.rethink.org. Or call 0121 522 7007 and ask for the information to be sent to you.

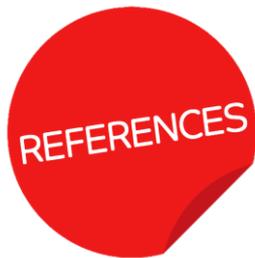
Our '**Caring and Coping**' guide also has some useful tips on how to help someone with a mental illness. You can download the guide from www.rethink.org for free.

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Behaviour Diary

Type of behaviour	What I have tried before		What I will do in the future
	What worked	What didn't work	



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- ¹ British Psychological Society. *Understanding Psychosis and Schizophrenia*.
www.bps.org.uk/system/files/Public%20files/aa%20Standard%20Docs/understanding_psychosis.pdf (accessed 24th November 2016)
- ² Mueser K.T and Gingerich S. *The Complete Family Guide to Schizophrenia. Helping Your Loved One Get the Most Out of Life*. New York: Guildford Press; 2006. Page 261.
- ³ As note 2 at page 261.
- ⁴ As note 2 at page 261.
- ⁵ As note 2 at page 261- 263.
- ⁶ As note 2 at page 282.
- ⁷ As note 2 at page 282.
- ⁸ As note 2 at page 284.
- ⁹ As note 2 at page 411.
- ¹⁰ Mohit Varshney, Ananya Mahapatra, Vijay Krishnan, Rishab Gupta, Koushik Sinha Deb. Violence and mental illness: What is the true story? *Journal of Epidemiology and Community Health*. 2016; 70:223-225 doi:10.1136/jech-2015-205546 (accessed 24th November 2016).
- ¹¹ Kuipers, E and Bebbington, P. *Living with mental illness* second edition. London: Souvenir Press (Educational and Academic) Ltd; 1997. Page 52.
- ¹² Reiss A.J., Roth, J.A. *Understanding and Preventing Violence, Volume 3: Social Influences*. National Academies Press; 1994 at page 377.
- ¹³ As note 2 at page 363 -364
- ¹⁴ As note 2 at page 312.
- ¹⁵ As note 2 at page 414 – 415.

This factsheet is available
in large print.



Rethink Mental Illness Advice Service

Phone 0300 5000 927
Monday to Friday, 9:30am to 4pm
(excluding bank holidays)

Email advice@rethink.org

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We'd love to know if this information helped you.

Drop us a line at: feedback@rethink.org

or write to us at Rethink Mental Illness:

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We're open 9:30am to 4pm
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quality of life for everyone
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