

# Family teamwork and education

**E**ducation about mental illness is vital for society to understand what mental illness is all about and how to cope with it as well. For the last eight years, my mother and I have educated as a family team about mental illness. We have found the experience very beneficial to the people we talk with and to us as well. To begin, I'd like to talk about the different effects educating as a family team creates.

The first effect is the effect on the family



*Dylan Abraham*

educators. Educating as a family draws us closer together. With our combined efforts educating, we learn more about ourselves, always discovering something new in our talks, our efforts and our results.

The effect our educating has on other families is positive as well. People relate and see that all families have their struggles but with education on the family level we see bonding and closeness despite those struggles.

There is also the effect on myself. I had always been open and up-front about my illness. Family education with my mother has allowed me to continue to be up-front about my illness and about my life in general. It has taught me that people listen, people care and people want to share their stories with mine. It has created self confidence as well as respect from others; it has allowed me to really look deep within and be honest with myself at a gut level. I find that sharing and caring can go a long way in life, my life as well.

No one can better educate about mental illness than families going through the trials and tribulations surrounding mental

illness. Day by day, families deal with these illnesses and day by day, whether it seems like it or not, families make progress.

Family education is a chance for families to relate to other families. In our talks over the years, questions and comments posed by our audiences open up more about their situations as well. Better to ask questions and communicate than trying to go it alone.

**T**here is so much families can learn from each other. We might learn from one family how they cope when their family member is off meds. We might learn how another family deals with the system, for example, SSI, work, money, apartment, etc. Another family may have a good relationship with the doctor and teach others how to communicate with professionals. Every family has their own unique and individual stories and experiences to share.

For myself, to be able to talk and communicate about my story, my knowledge and my experiences is a confidence booster

and it says that mentally ill or not, I have great use in society, as does everyone who is ill. Wealth cannot be measured in dollars. Wealth can be measured in experiences, knowledge, growth and love. If that is the case, there are many wealthy, people with mental illness out there.

Families that are united, caring and understanding will find the going easier in the long run. Don't be hard on yourself as a family member and don't be hard on yourself as a person who is ill. We do not know what causes these illnesses and we have no cure. But we can work with what we have today and do our best so that tomorrow will be better than today.

—Dylan Abraham

**C**athedrals are not built by cynics.

—Henry Kissinger

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# A CONSUMER SPEAKS OUT

## PACT—a client's perspective

by Dylan Abraham, consumer, PACT and emergency services support counselor, Madison, Wisconsin



Dylan Abraham

*Note: Dylan Abraham describes his experiences with the Program of Assertive Community Treatment, or PACT. For more information about the program, see the October/November 1998 issue of the Advocate (page 18), contact your state NAMI office, visit the NAMI web site ([www.nami.org](http://www.nami.org)), or call the National PACT Center at 703/524-7600. See the NAMI News section for information about available PACT materials.*

It was spring of 1977. At that time my life was in a shambles. I was hospitalized in a psych ward for the fourth straight year, desperately trying to find health and peace of mind. I had first been hospitalized in 1974, at the age of 18, with a diagnosis of schizophrenia. My spirits were low, as was my self-esteem. I had no job, no car, no money, and I was not attending college. Generally, after fighting valiantly against my illness, I had hit rock bottom. What was I to do?

A social work student at the hospital arranged to get me into the Program of Assertive Community Treatment, or PACT. I had no idea what PACT was or how it operated. I rebelled against getting involved with the program and

hoped—one way or another—I could find a way out of my situation.

But the answer was right under my nose if I would be open to it. That spring I *did* join PACT, the program that was about to turn my entire world around into a life that I thought I would never reach.

PACT is a true community-treatment program that doesn't use inpatient care unless there are no other options. Most staff time is spent out in the community, dealing with clients and their needs and problems on their turf. Clients and staff keep in touch on a day-to-day basis, whenever and wherever the client needs someone to help. Over 50 percent of PACT clients are working, and if Social Security rules that discourage full-time work are changed, PACT could be even more successful in helping clients obtain work.

That first year, 1977, I literally had to start from scratch, not only with PACT but with my life as well. I was frustrated, bitter, and angry at the system and at myself feeling as though I had really messed up. I looked at PACT as a dumping ground, a place where they put you when nothing else works. It was a difficult adjustment to be in PACT as opposed to psych wards and seeing a private doctor. But, within the first two years I realized that PACT was more than just a safety net. It was an opportunity if I used the program the right way.

With time, an apartment, a good volunteer job at a children's day care center and another volunteer job at an adult day care center, I was back working. It was a good step, the jobs were enjoyable, and I felt some self-worth and self-esteem returning to my life. It wasn't perfect, but it was a start. I began to appreciate what PACT was attempting to do and began to respect what staff accomplished.

I was becoming somebody again. Slowly but steadily I was doing what I wanted to do and what I liked to do. I

wrote a book about my experiences with mental illness. I also began to write poetry. I've written many articles and spoken about PACT and mental illness across the country and in England. Now as well as writing and public speaking, I am a staff member in the crisis service of a community mental health center.

We must remember that recovery is an individual concept. PACT has worked for my recovery and other people's recovery by providing medication, helping with housing and social skills, and finding work. Many people work, some go to school, and others like me work as professionals and write. People are making it *in the community*.

Staff have rough times as well as smooth. Sometimes they're dealing with the person who has gone off meds, the client who is being evicted from an apartment, or somebody getting into trouble with the law. Despite a person's problems, PACT is still there for them when they are in trouble. The ill person may need more meds, more contacts with staff or simply a couple of days off from work. PACT is there 24 hours a day for their people.

I also realize—and so does PACT—that if somebody needs to be hospitalized in a psych ward, it isn't a failure. Rather, it is part of the process for that particular person in their recovery.

One of the good features of PACT is that people have ongoing care that provides stability and continuity in their lives. And the care provided by the staff can mean a break and a relief for the family; no longer do families have to be the treaters. Instead they can live their lives knowing their loved one is being treated, and that eases the stress and strain on families. For the most part, families are a part of the treatment team at PACT. They are listened to and are respected by the program.

This community-based program, in my thinking, is another word for hope. It

isn't perfect. But for now, PACT—even after some 25+ years—is still an innovative idea. With time and hard work there will be more PACTs out there with more and more people getting good-quality community treatment.

The years have come and gone. I've gone from a man with nothing to a man with a life, a man whose worst nightmare turned into a dream come true. My life took an unexpected turn that in the long run has been positive and has led me to a life that is important, has meaning, and is enjoyable.

PACT has stood the test of time as have I and others. PACT is a program that needs to be tried elsewhere. People need the experience of an independent life. And finally, people just need to be people, and that includes clients at PACT. We are not guinea pigs in PACT. The illnesses and brain disorders are the real guinea pigs we are treating.

To close, I would say that in the long run, PACT has been a key in my recovery and a key to my continued health. Hopefully, we can all have positive experiences when treated for mental illnesses, and I ask all of you to help in making this program sprout nationwide so others like me can have access to it. I can honestly say that PACT gets the job done. ⊗



# Getting well is not a race

By Dylan Abraham

Mental illnesses are very tough and severe diseases to try to cope with and live with. The age most people become ill is between ages 16 and 30, and within that range the late teenage years is the most common. One can imagine how difficult it is for young teens to be dealing with severe brain diseases.

Many times — and this includes myself — doctors, family, friends and society in general try and rush the individual who is ill to come back in a hurry and “catch up” on the time they have “lost.” This happens often and it is often a tragic mistake to try and come back so fast. Recovery is important when someone is mentally ill, but it's not smart to turn recovery into a race with the clock. Getting well is not a race — it is something that takes time, patience, and a few ups-and-downs.

Why race? Do we put a time limit on someone who has a heart attack? We don't tell them, “You have two weeks to get well.” Why should it be

any different for someone who has a mental illness and is striving for health?

These diseases of the brain are very traumatic. Maybe that's why there is always that rush to

For those who are ill, they themselves need time to put it back together again. Granted, one must make some effort to move forward, but believe me a person needs time to let the

natural, but in reality those feelings and actions are negative for the ill person. The person going through the trauma needs to take small bites — instead of one huge bite — to be on

their way again. With time things will come around, even though the illness is so overpowering to everyone involved. If you go up a flight of stairs, usually you go one step at a time. For dealing with mental illnesses, one step at a time will get you to the top of the building without wearing you

*‘Getting well is not a race — it is something that takes time, patience, and a few ups-and-downs.’*

get well, to forget about the pain, the stigma, the hurts and tears, to eliminate the horror immediately. I'm sure it is all well-intentioned. However, I know from experience that getting well is not a race. In fact, making it a race only puts more pressure on everyone, especially the person who is ill. Such “racing” in most cases only leads to a relapse because somebody was brought back too fast: quite well intentioned, but dangerous in the long run.

smoke clear and get a perspective on what is happening with them and the world around them. Work, school or whatever it may be, will come to pass soon enough. Let the person, the illness and the situation come about naturally. It helps the person to heal, to function and then start out and get some success under his or her belt. If a race is indeed a race, then remember the tortoise beat the hare.

Feelings of pushing the ill person may be

out.

So let it be known that getting healthier when dealing with this illness — mental illness — is not a race nor should it be a race. Instead, take your time as haste makes waste. We all have enough time to do what we were meant to do in life. This holds true for everybody, including those who have a mental illness.

*Dylan Abraham is a consumer who lives in Wisconsin.*