

A Caregiver's Guide to Addressing a Loved One's Poor Insight in Mental Health

When a loved one or someone you care for does not agree with a mental health condition diagnosis, people may say that person is “in denial.” But the mental health condition may be causing that person to not understand their diagnosis. It may be a lack of insight, also called anosognosia, which is a common symptom of certain mental health conditions. Lack of insight in a person managing a mental health condition means a person is unaware of his/her own condition or may only recognize the condition from time to time.

The Importance of Insight

Having poor insight into a mental health condition and the need for treatment may be a problem for someone managing a mental health condition. As a result, he or she may not follow the treatment plan, which includes taking medicine as directed. Medicines are an important part of mental health treatment. Medicines may help improve symptoms and promote recovery and wellness.

Understanding the Difference Between Lack of Insight and Denial

Denial and lack of insight are often thought of as being the same. But they can have different meanings. Below are things to look for when determining if your loved one or someone you care for is dealing with lack of insight versus denial:

- Lack of insight can be severe and typically lasts for months or years.

It is estimated that lack of insight affects 50% of people with schizophrenia and 40% of people with bipolar disorder.

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- With lack of insight, beliefs of not being sick do not change despite being confronted with evidence otherwise.
- When lack of insight exists, illogical explanations deny the evidence of illness.

How You May Help: The Listen-Empathize-AgreePartner® (LEAP®) Method

The LEAP method was developed to show caregivers/family members and doctors how to help someone with serious mental illness to accept treatment.

Listen — use “reflective” listening, which means really listen and not react to what one feels, wants, and believes. Then reflect to him or her, in your own words, your understanding of what you just heard.

Empathize — learn when and how to empathize with feelings connected to mental health symptoms, such as delusions. Empathizing with how one feels does not mean the belief is true.

Agree — focus on finding common ground and agree on those things; agree to disagree about the others. Acknowledge that people have a choice and responsibility for their decisions.

Partner — form a partnership to achieve the goals you share. Make a decision to work together for the same goal. Create a shared action plan that may help your loved one accept treatment and services.

Listen-Empathize-Agree-Partner and LEAP are registered trademarks of the LEAP Institute.

Help Is Out There

Below are organizations with resources aimed at helping address lack of insight.

LEAP Foundation for Research to Practice
www.leapinstitute.org

National Alliance on Mental Illness (NAMI)
www.nami.org

Collaborating With Your Care Team

- Discuss any concerns you have about a substance use problem, such as taking drugs or alcohol, with your care team.
- Write down the things that trigger your drug or alcohol use. Bring this list to your next visit to discuss with your providers how you might work on coping with these triggers together.
- Ask about potential treatment options for a dual diagnosis or co-occurring disorder.

Questions? Concerns?

Never hesitate to ask. You have a right to know everything about your health and your care.

If you have any questions or concerns about your condition or your care, ask your doctor or a member of your treatment team right away. They are there to help you.

