

NAMI Ask the Expert:
Session 2: Family Communication
Featuring Dante & Chastity Murry and George Kauffmann
March 9, 2023

Ken Duckworth (00:00:00):

Hey, I'm Ken Duckworth. It's great to be here. I want to thank the 250 people for joining our conversation. As you know, this book is a celebration of lived experience as expertise. I am so honored to have written our first book. Let's see, what do the slides say? All I see is Jordan here. Oh, there we go.

What I want you to know is that there are 400 pages of this book, and this is but one chapter. But I want to tell you something about this chapter. My family never figured out how to communicate about my dad's severe bipolar disorder, psychosis, hospitalizations, and terrifying moments. He was a very loving person. This is the reason I became a psychiatrist, because my family didn't have chapter nine. There's nobody that I could see that had solved for problems of communication. It's a great honor that we have three people from the book to talk about communication strategies.

That's squeaking noise in the background is my dog. I'm going to work on that in a bit. All right, next slide, please. It's very NAMI, isn't it?

Obviously, you're hearing a story at any time. Remember, you are not alone. We have a helpline that serves 75,000 calls, texts, and chats. This helpline is open from 10:00 AM to 10:00 PM. It's staffed by about 250 volunteers who are in service to our shared mission of supporting people and reminding people you are not alone.

Next slide, please.

Hey, so here's our first book. Fun, huh? I always really wanted us to have a book. I was so honored when I sent out requests for volunteers. What's different about this book is that there's 130 people who share their names and what they've learned. Somehow in the mental health books, and there's thousands of them, not one book, it could only be NAMI that did it this way, not one book would ask real people what helped them. What helped them communicate? What helped them problem solve? What helped them after dealing with adversity? How do they overcome things? How do they develop a way to help others?

It was a great honor to write this book. I want to acknowledge Jordan Miller was the world's greatest co-pilot. She is working on the next airplane while I'm simply chatting about the book and doing a bunch of book events.

All right, next slide please.

All right, here's my three lived experience experts. These are all people who are in the book. Obviously in a book with 130 people, Jordan and I were in tears one day when we had sent a 600-page manuscript in and the publisher said, "Yeah, that's not going to work. You have to cut all the quotes." It came down to 400 and we took people's best, most essential, beautiful quotes. But this is a chance for 350 of you to talk to the people in the book who stepped forward to model how they communicate.

Ken Duckworth ([00:03:01](#)):

I want to say, I developed the Ask the Expert about 15 years ago. It was the so-called Friday phone call with Dr. Ken. This was on one phone line. I had Marshall Laningham and 900 people, and dogs would be barking, and people would be doing their dishes. It couldn't have been more chaotic and beautiful because I was bringing the best researchers and thinkers in America to us. Then along the way, people at NAMI figured out how to make it into a webinar. Then Jordan Miller exists. Now you have this beautiful production. There's a whole group of people behind them that I want to thank and acknowledge to make this happen.

I want to say in my 15 years of doing Ask the Expert, Dante and Chastity Murry are the first married couple in the history of Ask the Expert. What they're going to do is they're going to talk about their experience of family communication, what they've learned, and then my friend, George Kaufmann... That's apparently his high school picture, I was just told. Nice tie too. People don't even wear ties. I don't think I can find a tie.

We're going to start with Dante and Chastity. They're going to discuss their strategies. George is going to discuss what he learned, particularly in the Family-to-Family Program. I want to invite you to have questions. NAMI is all about learning, supporting and listening to each other. You can of course also ask me about the book. What's it like to write a book? Am I ever going to recover from writing the book? All these questions. How many books have we sold? How do you get one? We can do all of that in the chat as well.

But I want to thank you for joining us. This book is incredibly important to me. I wanted NAMI to have a book, and I wanted the book to be exactly this. I've met so many amazing people at the National Alliance on Mental Illness, and I wanted their stories to be real in a book that doesn't have a bunch of typos, it doesn't look like I printed it on a mimeograph machine in my basement. It's a real publisher. Molly Stern, who edited, Michelle Obama's *Becoming*, *Gone Girl* and *The Martian*. We're talking about the real deal here. I've yet to get an email that there's a typo in the book.

I was told, "Oh Ken, when you write a book, the first thing will happen is you'll get an email, page 88 has a typo, and then you'll look at page 88 and there's a different typo." This speaks to Jordan and Alexis Zielinski, my teammates, who worked very, very hard to make this happen.

We just hit 400 people. How fun is that? This beautiful little community.

Dante Murry ([00:05:33](#)):

Wow.

Chastity Murry ([00:05:33](#)):

Wow.

Ken Duckworth ([00:05:33](#)):

Chastity, Dante, I want you to take this away and let's have a conversation about what you've learned in communication with each other and how you learned it. Take it away.

Dante Murry ([00:05:44](#)):

All right. First off, my wife and I want to give a kudos and thanks to you and your staff.

Chastity Murry ([00:05:50](#)):

Yes.

Dante Murry ([00:05:50](#)):

We appreciate this opportunity to speak with everybody and this huge number of folks here joining on webinar. This is a great privilege. I want to make introductions to my wife, Chasity. Want to say something?

Chastity Murry ([00:06:01](#)):

Hey, nice to meet everyone. The book has been, for us, our friends, our family, such an honor. It's been an honor. Our families are proud of us. It's just such a good feeling to be able to help people. Absolutely.

Dante Murry ([00:06:21](#)):

The book speaks for it itself. You're not alone.

Chastity Murry ([00:06:23](#)):

Yes.

Dante Murry ([00:06:23](#)):

It says, a NAMI Guide to what? Navigating Mental health.

Chastity Murry ([00:06:27](#)):

Right.

Dante Murry ([00:06:28](#)):

We are grateful to be a part of this journey. It's a privilege to be a part of this and share our personal stories, especially as a married couple.

Chastity Murry ([00:06:39](#)):

Yes.

Dante Murry ([00:06:40](#)):

What makes it even more unique, Dr. Duckworth, is that we're an interracial couple dealing with the mental health issues and advocacy that we do together. It's interesting. Our backstory is about how we met. We put that in the bio a little bit. How we met at Frankfurt, Kentucky.

Chastity Murry ([00:07:01](#)):

Right.

Dante Murry ([00:07:03](#)):

I had a speech at the Rotunda.

Chastity Murry ([00:07:05](#)):

I was there talking to the legislators.

Dante Murry ([00:07:08](#)):

We knew about Phyllis.

Chastity Murry ([00:07:10](#)):

Yes.

Dante Murry ([00:07:10](#)):

She was one of the Cupids that let us connect.

Chastity Murry ([00:07:15](#)):

Yes.

Dante Murry ([00:07:16](#)):

I was really nervous. I saw this beautiful woman here and I was like, "Oh my gosh, I got this presentation at the Rotunda and then she's going to be there to hear me speak." I turned on my GQ cap and I started talking and didn't want to make a mistake and convinced her to give me her number and her email, indirectly because I said, "I do trainings for *In Our Own Voice*, I do trainings for Connection. If you want to have some of those opportunities, then I'll be more than willing to help you be a part of the trainings."

It helped me to have more communications with her, which is a great way to do it. At least in my opinion. Did it work for you?

Ken Duckworth ([00:07:57](#)):

NAMI as meet cue, right?

Dante Murry ([00:08:00](#)):

This is better than Tinder. She's a wonderful woman. We met through Frankfort, Kentucky.

Chastity Murry ([00:08:09](#)):

We Sure did.

Dante Murry ([00:08:09](#)):

The rest is history.

Chastity Murry ([00:08:09](#)):

At the rally.

Dante Murry ([00:08:11](#)):

She's given me the opportunity and the blessings to be in her life it's been great.

Chastity Murry ([00:08:16](#)):

We've had our ups and downs, I will say that, because you're both dealing with mental health issues. Of course also I have a son that's autistic. That's another thing we have to throw into the mix. With that, when we get upset with each other, we try to be kind and caring, supportive. If someone needs to walk away and come back to the problem, that's what we do, so that nobody says something mean or hurtful to each other. Because when you do that, you can't take it back.

Dante Murry ([00:08:48](#)):

It's like toothpaste. Once it's out the tube, you can't put it back.

Chastity Murry ([00:08:51](#)):

Exactly.

Dante Murry ([00:08:51](#)):

Go for it.

Chastity Murry ([00:08:56](#)):

Okay. That's what we do. If we need to sit down and have a check-in, that's what we do in the morning, or whatever time of the day is best for us, we have a check-in.

Dante Murry ([00:09:07](#)):

Yeah. Now, we did read that book on Love Languages.

Chastity Murry ([00:09:11](#)):

Yes, we sure did.

Dante Murry ([00:09:12](#)):

We did that. Now, is it practice a hundred percent of the time?

Chastity Murry ([00:09:16](#)):

No.

Dante Murry ([00:09:17](#)):

No, our batting average is not that great, but I'm into baseball, so our batting average is what, 200, 300, something like that?

Chastity Murry ([00:09:23](#)):

Something like that, yeah.

Dante Murry ([00:09:25](#)):

We do use some of it.

Ken Duckworth ([00:09:26](#)):

[inaudible 00:09:26] if you could keep it up.

Dante Murry ([00:09:28](#)):

Yeah. If we live long enough. We both are dealing with similar diagnoses of mental health; bipolar disorder, depression, anxiety.

Chastity Murry ([00:09:39](#)):

Borderline also.

Dante Murry ([00:09:42](#)):

We try to be merciful with each other about who took medicine and who didn't.

Chastity Murry ([00:09:48](#)):

That's what I do. I just check it.

Dante Murry ([00:09:49](#)):

Did you take your medicine today?

Chastity Murry ([00:09:49](#)):

I do. I check it.

Ken Duckworth ([00:09:49](#)):

What do you mean by that?

Chastity Murry ([00:09:54](#)):

Every morning, I ask my son, "Have you taken your meds? Dante, have you taken yours?" And of course I ask myself, "Have you taken yours?"

Dante Murry ([00:10:02](#)):

She asked herself did she take her medicine? Anyway, we have-

Chastity Murry ([00:10:09](#)):

Yeah, that's a joke.

Dante Murry ([00:10:12](#)):

We have a little sense of humor to our relationship. In fact, it's one of the 12 principles that we go through. We recognize each other's pain and struggle and we also add a little humor, when balanced, to some of the situations we get in, so it's not goofy over the top. Some of the stuff we deal with are situational comedies as it relates to the principles of support.

Chastity Murry ([00:10:31](#)):

Yes.

Dante Murry ([00:10:32](#)):

It's a structured program that we use. I'm looking to transition, guys. I'm kind of making a segue into our support groups that we do. The family support group is one of our flagships that we use to teach and facilitate courses that help our community. Now, the first one is Family Support Group, FSG. The second is NAMI Connection. We do that once a week for Family Support. We do it once a week for NAMI Connection.

Zoom is a wonderful tool, as we can see today, a wonderful tool for connecting with a lot of people and sharing the Fidelity Program designed by NAMI National. Did you want to show them some of the principles?

Chastity Murry ([00:11:14](#)):

I can. I can go over some of the principles, if you guys want.

Dante Murry ([00:11:17](#)):

Yeah, because they might not know about the principles.

Ken Duckworth ([00:11:20](#)):

I think as they relate to your successful marriage.

Chastity Murry ([00:11:21](#)):

Yes.

Dante Murry ([00:11:22](#)):

Yes. They relate to it.

Chastity Murry ([00:11:23](#)):

They do.

Ken Duckworth ([00:11:24](#)):

You're our first marriage couple in the 15-year history of Ask the Expert.

Chastity Murry ([00:11:27](#)):

That's right. Okay.

Ken Duckworth ([00:11:29](#)):

People want to know how do you do it.

Chastity Murry ([00:11:30](#)):

Embrace humor is healthy, Doc.

Dante Murry ([00:11:32](#)):

Yeah.

Chastity Murry ([00:11:33](#)):

Embrace humor is healthy.

Dante Murry ([00:11:35](#)):

You have more on the time limit. Do you want to pick one that you want?

Chastity Murry ([00:11:37](#)):

Embrace humor is healthy.

Dante Murry ([00:11:39](#)):

[inaudible 00:11:39]. Now here's-

Chastity Murry ([00:11:39](#)):

That's definitely one of mine.

Dante Murry ([00:11:41](#)):

Here's the one that we kind of embrace in our group. If someone does not bring their principal support, they know, in our support group, the last one is, what?

Chastity Murry ([00:11:52](#)):

We never give up hope.

Dante Murry ([00:11:54](#)):

We will never give up hope. Yes.

Chastity Murry ([00:11:54](#)):

And that's how we feel with each other, in our marriage. We never give up.

Dante Murry ([00:11:59](#)):

Sometimes we're like Italians and we're talking to each other, but at the end of the day, we follow the scripture, "Do not go to bed angry."

Chastity Murry ([00:12:06](#)):

Angry.

Dante Murry ([00:12:08](#)):

Those are good principles, good advice that we follow.

Chastity Murry ([00:12:11](#)):

Our spiritual is another thing too.

Dante Murry ([00:12:14](#)):

That helps.

Chastity Murry ([00:12:15](#)):

It does.

Dante Murry ([00:12:15](#)):

As it relates to family and communications. I know we're in a section called Communications Strategies.

Chastity Murry ([00:12:19](#)):

Yes.

Dante Murry ([00:12:19](#)):

If you look at the back of the book and you are not alone, there's a section called Communication Strategies. There we talk about how we remind each other, how we look out for each other. That's the big picture, mutual respect. Sometimes we express ourselves and it's like any couple. I have never met a perfect couple that does not have some kind of issue to talk about. But the principle of the matter is, at the end of the day, are you trying to make peace? Are you trying to follow the basic principles of a relationship to be successful? We want to plan to succeed, not plan to fail.

Chastity Murry ([00:13:02](#)):

Right.

Dante Murry ([00:13:03](#)):

There's some basic ideas that we use to help ourselves out. Being interracial couple, that is a challenge sometimes, and how we function outside of the household and things like that. It's to be expected.

Chastity Murry ([00:13:18](#)):

Coping skills is something-

Dante Murry ([00:13:18](#)):

And coping skills.

Chastity Murry ([00:13:18](#)):

... is something that we have to use.

Dante Murry ([00:13:21](#)):

Yeah, we find ways to manage that.

Chastity Murry ([00:13:22](#)):

Yes. With each other. We do coping skills with each other, and then we have our own that we work with.

Dante Murry ([00:13:28](#)):

Yep. I think I'm one of your biggest cheerleader.

Ken Duckworth ([00:13:31](#)):

I would ask one open-ended question. How is being an interracial couple a challenge that you use NAMI taught coping skills for?

Dante Murry ([00:13:40](#)):

Language.

Chastity Murry ([00:13:41](#)):

Language.

Dante Murry ([00:13:42](#)):

I'm going to tell you that much.

Chastity Murry ([00:13:42](#)):

Language.

Dante Murry ([00:13:43](#)):

Language because you've got to understand each other. I come from a different culture, different words. As it relates to communication strategies, like we are in this section of this book and how we use basic concepts from NAMI National, using Love Languages is a great tool, a great foundation for marriage relationships, but the next level up on the collegiate level is learning colloquialisms, is learning how each of us express ourselves culturally. When you learn those kind of things, the communication is better and improved.

I'm going to give you an example guys. I grew up in a household where I never used fixing. I never used the word fixing, because fixing means I'm going to fix something broke outside, fix the lawnmower, put some more oil in the lawnmower, fix the car, fix the carburetor, change the filter on the car, but she says fixing like... [inaudible 00:14:37], you fix something. She says, "I'm fixing something to eat." I said, "Fixing something? Fixing something to eat?" Yeah, she says fixing. She used fixing in different ways.

That's one example, a fun example what we have, but I did learn some wisdom though. I called the countryside, E town's countryside to me, but I learned this, guys. I said... We had a power outage. I don't know if anybody knows about this. We had some bad rains and I said, "God willing, the creek don't rise." I said to myself, "That sounds familiar." My wife says, "God willing, the creek don't rise. I hope we have some food in his house, because electricity's out, because I was fixing to go get something."

Ken Duckworth ([00:15:18](#)):

You're using each other's language, right?

Dante Murry ([00:15:20](#)):

That's right.

Chastity Murry ([00:15:23](#)):

We do. Since we've gotten married, we have caught onto that. We literally, sometimes we'll talk about the same exact thing, and answer each other's sentences. I've done that before.

Dante Murry ([00:15:37](#)):

We're at the point where we finish each other's sentences.

Chastity Murry ([00:15:41](#)):

Finish and answer.

Dante Murry ([00:15:43](#)):

Yeah. We're like, "Wonder Twin powers, activate." If anybody's familiar with the DC Super franchise.

Ken Duckworth ([00:15:52](#)):

Could you describe when you're facing a challenge, let's say one of your symptoms are active, or both of your symptoms are active at the same time. This would of course be a high stress moment for all of us.

Chastity Murry ([00:16:05](#)):

Right.

Ken Duckworth ([00:16:05](#)):

What have you learned to manage that? Because you described a couple things you did in our interview, which of course you can't put everything in the book, but I wanted people to be able to learn a little bit from you.

Dante Murry ([00:16:16](#)):

I think today was probably a prime example of communication and balancing out how to deescalate. The big word of the day is de-escalation. Some of the ways to deescalate a situation is to say, "I need to step back." Sit on the porch, sit in a chair, get some fresh air, get a chance to meditate, rethink. Another way that we've found is sometimes I need to go for a walk. That active walk around the block allows me to... Walk to the park and back. During that time period, get a chance to reflect, get a chance to think about some things, and come back, refreshed. Okay, I think I know what we need to do, and I talked to my partner.

Chastity Murry ([00:17:01](#)):

Same as me. I do the same thing. We both walk. Power walk, I do.

Dante Murry ([00:17:06](#)):

Our best conversations, guys, are when we walk.

Chastity Murry ([00:17:10](#)):

Yes, they are.

Dante Murry ([00:17:11](#)):

That's one of the things we've done to improve our relationship with communication. That's just a wonderful tool to be out there and be in the elements. To get that walk in, it's been really useful.

Chastity Murry ([00:17:24](#)):

It has.

Dante Murry ([00:17:24](#)):

Especially when the weather's changed for the better now.

Chastity Murry ([00:17:26](#)):

Yes. That's one of the things that we do. Like I said separately, when we have a problem and we can't fix the problem, then I'll call my therapist and say, "Okay, what do I need to do?," if we're in a situation like this and she'll let me know what I need to do. But most of the time, we've never had a problem like that. I see a therapist every week, and Dante sees one, I think every week, or every two weeks.

Dante Murry ([00:17:54](#)):

I need to see one every week. But anyway, I see him once a month.

Chastity Murry ([00:18:01](#)):

I see mine every week.

Dante Murry ([00:18:01](#)):

My insurance won't let me do it once a week.

Chastity Murry ([00:18:02](#)):

Because I'm going through grieving counseling, as well as trauma as well.

Dante Murry ([00:18:06](#)):

We do keep in touch with our therapists and clinicians. We advise everyone in this support group to stick with their therapists, stick with their doctors.

Chastity Murry ([00:18:12](#)):

We do.

Dante Murry ([00:18:13](#)):

Take their medication like they're supposed to. Do the best you can, find all the supplements. Spiritual supplement, we talked about communications, we talked about the basic principles from NAMI National to help with supplement some things. The classes that we're able to teach, like Family to Family, are awesome for giving us the opportunity to get refreshers on how to deal with hot potatoes.

Chastity Murry ([00:18:35](#)):

And connections.

Dante Murry ([00:18:36](#)):

And connections, yeah.

Chastity Murry ([00:18:36](#)):

Definitely.

Dante Murry ([00:18:37](#)):

The family support group has been a blessing for us to manage, every Monday at six o'clock on Zoom. We've had some good turnouts. We leave it open where people can call us or text us about some issues.

Chastity Murry ([00:18:50](#)):

We do.

Dante Murry ([00:18:51](#)):

It's been working out and it's been a blessing by God.

Chastity Murry ([00:18:53](#)):

It has been. We have had so many people in our group. The connections group has been absolutely amazing.

Dante Murry ([00:19:01](#)):

In fact, we got our mantra in the back here. It's called Live, Love, and laugh.

Chastity Murry ([00:19:08](#)):

Yeah.

Dante Murry ([00:19:10](#)):

That's what we try to remind ourselves.

Ken Duckworth ([00:19:12](#)):

I'm going to ask a follow up question. Chastity, you mentioned you were grieving and that was traumatic for you. I wanted to ask how you communicate that in your marriage? Because all of us on this call have experienced loss at one form or another, and have all been grieving. That can be a challenge because the people around us in some circumstances might say, "Well, you've had a week. Are you good to go now? I'm done grieving."

Chastity Murry ([00:19:40](#)):

I've had that happen.

Ken Duckworth ([00:19:40](#)):

What? That happened?

Chastity Murry ([00:19:43](#)):

I said I've had that happen before with family. My husband though, he has tried to be as understanding as possible because he's not lost his mom or dad. It's a whole different ballgame with that.

Ken Duckworth ([00:19:57](#)):

Yeah. Once you've experienced it, you never forget it. But you've been able to problem solve that too because that can be a stress within a marriage.

Chastity Murry ([00:20:05](#)):

Yes.

Ken Duckworth ([00:20:06](#)):

When one person's grief process is longer than the other person, or more complex than the other person might anticipate.

Chastity Murry ([00:20:14](#)):

Yes. Yes, exactly. Exactly.

Ken Duckworth ([00:20:16](#)):

Are there NAMI skills that you've used to appreciate that?

Chastity Murry ([00:20:20](#)):

Yes. Yes, it is.

Ken Duckworth ([00:20:20](#)):

What are they?

Chastity Murry ([00:20:22](#)):

Coping skills. I've used a lot of coping skills. I have used... I aim for better coping skills, I have. I would say that one of the others is we cannot solve all problems. I know my husband cannot solve all problems and I have to realize that. That going through that grieving process and also dealing with depression and anxiety on top of it is extremely hard. But when you have someone in your life that will listen to you and that will be there for you, it makes a huge difference, and that wants to understand you. If they don't want to understand you, it makes it hard. But if they do, then it makes it a whole lot easier.

Dante Murry ([00:21:13](#)):

When my wife shows me scriptures and things like that, that helps. Especially one that we went over before about love. Love believes all things, endures all things. When you look at that particular scripture, and I'm just paraphrasing, it is something that's palatable to the ears. You're like, "Oh, that sounds great." But then when you get married, now you got to put that to practice. Now you got to find the principle behind the sayings to make it a reality. I think that when her mother passed, God rest her soul-

Chastity Murry ([00:21:49](#)):

My mother was my best friend.

Dante Murry ([00:21:51](#)):

... that I met her, we talked. Yep.

Chastity Murry ([00:21:52](#)):

My mom was my best friend. When I lost her, I lost a part of me. I still have days where I grieve. I asked my therapist this morning, I said, "Am I ever going to get to a point where I don't grieve as much?" She said, "It's different for everyone." I keep trying to do that and I'm like, I just have to go with it every day and do the best I can do. That's all you can do.

Ken Duckworth ([00:22:25](#)):

Before-

Dante Murry ([00:22:25](#)):

Another thing that helps us... I'm sorry.

Ken Duckworth ([00:22:25](#)):

Go ahead, Dante.

Dante Murry ([00:22:28](#)):

Another thing that helps us out is this. I can provide her with empathy and sympathy, those two things, because I've lost a close friend of the family. I've lost uncles, I've lost cousins, and I also lost a son-in-law to suicide, death by suicide is a term they want us to use now. With him having that kind of loss and that kind of hurt in the family, I have empathy and sympathy for my wife. Like you said, Dr. Duckworth, there's a strain there on a death in the family, especially one so close like her mother.

To let people honestly know how I respond to that, is yes, I want to hear your concern. Yes, I encourage you to do your therapist thing. Yes, I want to build you up. Sometimes the grief can get so much that it affects me, and then I'm in a depressed grief mode and I don't want to go there all the time. As we apply the principles, we have to try finding ways to build other coping skills, to do other things, like go for walks, or go to see a movie that's a comedy. We try to do things that balance out that conversation so that...

Chastity Murry ([00:23:55](#)):

He tries to make me feel better.

Dante Murry ([00:23:56](#)):

... that way it's not too much. Dealing with a death conversation every day is going to be taxing on a relationship. I do give her affirmation. I do confirm, I do validate. In fact, that's one of the terms we use in Family Support group, and in Family to Family classes. You validate the person's emotions and feelings because those are real, those are lived experiences. I validate her emotions, say, "I understand, I feel for you. I can give you five minutes to dump on me. After that, let's go for a walk. After that, let's go do something encouraging. After that, let's go do this." I give her that timeframe to give her that validation and I want to hear it, but I just can't absorb it every day.

Ken Duckworth ([00:24:38](#)):

You're also setting a limit for how much capacity you have, and you've learned it's five minutes.

Chastity Murry ([00:24:43](#)):

Yes, and I do the same thing.

Ken Duckworth ([00:24:44](#)):

What I want to do is thank the two of you. We're going to learn from George Kaufmann, who's another lived experience expert in the book. I want people, the 437 people on this call, I want you to think of questions they have for what is arguably NAMI's all time class couple. How do they make their marriage work? People are going to generate questions for you. We're going to come back. Some of the questions may apply to George and his experience with his son as well. I'm not going to ask specific questions for you just yet. I want to give George the floor. I want to introduce George by saying I've been NAMI's medical director for many years. George would sit in the front at all the conventions. He probably doesn't remember this. He would always ask good questions, always very attentive. I had mentioned in passing that NAMI needed a book and he said, "We need our own book."

George was one of the people who inspired me to just keep going because NAMI wasn't ready for the book in the world. I wasn't ready at the time either. But I reached out to George. All the people fully participated. It's all optional. But because George had shown leadership and had actually encouraged me, I wanted to thank him in this forum. I'm just so grateful that he took what he learned in Family to Family and shared it with other people, because Family to Family saves relationships. It happens every day.

George, in Santa Barbara, California, I'm sure it's sunny and 77, but I just want to thank you. I think you might be on mute, my friend.

George Kaufmann ([00:26:20](#)):

Yeah, thank you Ken. First of all, I'm going to dispel the myths. It's not 77, it's about 55 and we're getting ready for the next rainstorm.

Ken Duckworth ([00:26:31](#)):

Oh my.

George Kaufmann (00:26:34):

We're going to be driving through it in a few minutes on our way to San Francisco. Anyway, I figured what I would do, just to get things started, is I'm going to give you a thumbnail sketch of what our family history is. I'm going to come at it from a different perspective than our previous speakers here. But by the way, before we start, I want to recognize. You guys are ambassadors for recovery. You really are. You're inspirational. There's certain parts of what you say that remind me frankly of my son and his wife. They're both peer support specialists. They met on the job and got married and had a family together while Pat was completing his education. So many of the things that you mentioned, I've seen them practice as well. Not all of them, but some of them, which is, it's great. Everybody has to find their own way forward.

You guys do such a great job, to me at least, of fulfilling what my son first said was his definition of recovery. That was recovery is when I have a life I want to live. I said to him, "What does that mean?" He said, "You know what it means. We want the same thing that anybody else in this world wants. We want a safe, comfortable place to live. We want a reason to get out of bed in the morning, and we want meaningful relationships, and I don't just mean friends. Romantic relationships." You guys are such a great example. Anyway, thank you for that.

I'm going to give you the classic comic books version of our family's perspective, because it's going to give you a little bit of a idea of where we're coming from. I'm going to talk about a slightly different perspective, that of a family member of someone living with a mental health condition.

Our son was diagnosed in 1994 at the age of 20 with schizoaffective disorder. Shortly thereafter ensued what he now refers to as his "lost decade." Because at that time, he was completely not on board with any sort of treatment or even acknowledgement of his disorder, which sadly is not all that uncommon. What transpired was what usually transpires and unfortunately, which was about an involuntary hospitalizations, which frankly further alienated him from care in a lot of ways, interrupted by times on the street, major substance use disorder, a couple of incarcerations.

About nine years into it, he finally reluctantly accepted therapy. Everybody asked him, "Well, why? What was the magic..?" He said, "Well, frankly, it was just easier to go along with it. They finally wore me down." Then when he did accept treatment, he found that he was able to function much better.

He found this, by the way, through another peer. The one thing that I think that you guys represent is one of the most important and underappreciated aspects, frankly, of our whole mental health system, which is the impact, potential impact of one peer on another. Patrick asked the question, "How do I accept... When I accept treatment, what does that mean? What's it going to get me?" He was able to look at this other individual and say, "Huh, he's got a lot of the same problems I do. He's had substance use, [inaudible 00:30:16] disease, he's got hung with this mental health diagnosis, but the difference is, he has a life, I don't. Maybe I can have a life too."

That was the beginning of his path to recovery. When he finally accepted treatment, he improved somewhat, but not completely. It wasn't until he decided he wanted to get clean and sober that he really... It was like this veil lifted and there was this caring sensitive person.

Anyway, that allowed him to go on and become a certified peer specialist. He actually completed his education, graduated Western Michigan University with a degree in family studies when at age 43, and now works as a peer specialist in a first episode psychosis program in his community in Michigan.

George Kaufmann ([00:31:03](#)):

What have I learned from this journey as a family member about communication? The first and foremost thing that I just can't overemphasize is that it's all about relationships. We have all these skills that we teach about how to communicate with people. None of them work until you as a family member, those of us that are family members, can connect with their ill relative in a way that builds trust. Unfortunately, many of us as family members, our primary focus seems to be on treatment of the illness rather than relating to the person.

I just can't emphasize enough how important it is to develop mutual respect, trust, empathy, and compassion. A lot of the same things you guys talked about, you and your relationship with each other. It works the same way between families and people that are living with mental health conditions in their families. None of these communication skills are going to work very well until or unless we, as family members, focus on them.

The second sort of corollary to this, I guess that we've learned, is that you have to stop doing what you know doesn't work. When Millie and I were constantly at Patrick, "Well, are you feeling okay? Is everything all right? Did you take your meds today?," it was stifling him. He already had serious questions about his future and we weren't adding confidence to that. We were only making him think that he was in somehow needed to be fixed.

We have to stop. As family members, we got to find a way to stop doing that. It's not easy, because especially as parents, that's what you think your job is. When we stopped doing that and started to ask ourselves different questions, or ask him different questions, like, "What are your hopes and dreams? What do you want to accomplish in your life?" There were some things that we learned along the way from NAMI. My wife is telling me I've only got three minutes left, but okay, I'll try to get through the rest of this.

Ken Duckworth ([00:33:30](#)):

It's not sunny at 77, George, I'm going to give you five more minutes.

George Kaufmann ([00:33:34](#)):

Okay, great.

Ken Duckworth ([00:33:35](#)):

You're dealing with non-Southern California weather and I want to just acknowledge it.

George Kaufmann ([00:33:40](#)):

Thank you. I'm on my 37th point, so I'll pick it up. The one thing that helped us more than anything else, there's a book that many of you at NAMI are already familiar with, but if you're not, get it and read it. If you're a family member, it's called I'm Not Sick, I Don't Need Help by Dr. Amador. He didn't learn this from psychology school, he learned it from his brother who had schizophrenia. It's all about... It's not just about getting the person to do what you think they ought to do. It's not about that at all. It's about how you go about developing a relationship with a person that's a meaningful trustful relationship. It even tells you the words to use, how you do that, for those of us that need that sort of help. Just a terrific resource.

George Kaufmann ([00:34:24](#)):

The other thing that we found that was absolutely crucial is to try to, every time that you're interacting with the person with the condition, to try to assess where they are on what I call the recovery line, which is on one end of it, is when the person's not doing too well at all. On the other end is when everything is going great. By tailoring how we as family members connect with our relatives to where we think they are on that continuum is tremendous because we can't speak in the same way or have the same expectations for somebody that's really struggling with maybe an acute episode of their disorder, that they would be very much more receptive to if they were further along in their recovery. As we all know, this isn't a linear thing. It goes back and forth because all these things are cyclical.

That's one thing, adjust what we say and what our expectations are to where that person is. Another thing that was helpful for us, we recognized, and it's the hardest thing I think for family members to do sometimes, that we can't do something for another person that only they can do for themselves. It doesn't matter how much we want something for another person, they're the ones that have to embrace that. We had to learn to back off and shut up and listen, and listen carefully and respond in an encouraging way. When we began to do that, then this trust that I've been talking about did build up.

There's just a great quote on page 232, because Patrick, my son, also participated in the book. He said it all, and I'm quoting this directly from the book, "When my parents stopped trying to rescue me, it made me feel like they believed that I could do it."

By the way, we had no clue of that at the time. We were just following what we thought were our best instincts, but it turned out that that was the one thing we did that probably was correct. I just thought that was so powerful because when we're hovering over somebody, it just reminds them of all the negative aspects of what they're dealing with. When we back off and get on with our own lives, it sends the message that maybe they think I can get better. That was one thing that Patrick said.

Finally, the last thing, for family members especially, is that this is a marathon, not a sprint. I did a poll among our little NAMI group here in Santa Barbara, "What are the things I should talk about for communication?," but this was the one thing that came up. It's patience, patience, patience, patience. When you don't have any more patience, you have to be patient a little bit longer, because the changes that will happen as you learn more effective communication skills aren't going to happen all at once. They're not going to happen in a matter of hours or days. Sometimes it's weeks or months, sometimes years. But if we can plant seeds and if we can provide the hope that perhaps the person has a hard time seeing on their own, that's the one most valuable thing that we can do as family members.

Thank you very much for that.

Ken Duckworth ([00:38:02](#)):

Well, thank you, George. It's great. Jordan and I went to Kalamazoo, Michigan and did an event with Patrick. He was fantastic and talked about his experience of deepening his relationship with his parents because they had learned to trust him and let go a bit. His quote, which is also in the book, when you're drowning and somebody jumps out of the boat and they're trying to help you and they don't know how to swim either, it's not a good thing.

I'm going to turn to all the questions from our 443 participants. I'm going to try to group them into big categories. A couple of the questions are on the really hard things.

Ken Duckworth ([00:38:44](#)):

Dante and Chastity, and again, this is also for George, let's start with the first question. Have any of you dealt with psychosis, and how that impacted your relationship? That's a question for both Dante, Chastity, and for George. What was that experience like? Because that's a little different than ordinary communication in a relationship.

Chastity Murry ([00:39:09](#)):

All right. When I lost my mom, the day I lost her, I went into a psychosis. I literally would not leave my mother's bed, to the point where my husband had to seriously almost get somebody to help me because it was that bad. My daughter had to get me out of there. It was extremely... I don't even remember everything that happened. He was going to send me, well, actually to the ER if I couldn't get calmed down. He calmed me down before I had to go to the ER that day.

Dante Murry ([00:39:38](#)):

It was almost like a psychotic break to some degree.

Chastity Murry ([00:39:40](#)):

It was, to some point, yeah.

Dante Murry ([00:39:42](#)):

If I understand the question about the psychosis part, if you're relating it to a psychotic break or a PTSD moment or something like that, are you relating it to voices? Are you relating it to something else other than the trauma she went through when she passed?

Ken Duckworth ([00:39:59](#)):

The question, a lot of people with bipolar disorder, borderline personality disorder experience delusions, hallucinations. This is a different kind of emotional experience.

Chastity Murry ([00:40:10](#)):

I did. During that time, I even told my husband, I felt like she was there, literally talking to me. It was a very weird...

Dante Murry ([00:40:20](#)):

It's like the day after she passed, and then the funeral. There's two episodes that happened during that time because they really touched her emotionally.

Chastity Murry ([00:40:31](#)):

I lost it. I completely lost it, Doc. I completely lost it.

Ken Duckworth ([00:40:35](#)):

How did you, Dante, support her through that? Because that's kind of the question. There's communication and there's distress and distress tolerance, taking a walk, taking away, and then there's dealing with altered experience, like psychosis.

Dante Murry ([00:40:52](#)):

Well, I'm going to tell you what, I took a page from George. That is the research is very essential. I read up on the different phases of grief. I've heard that grief goes through different phases. I've got a book and I looked online. I said, "What can I do to help her get through this?" I know that the mental health issue is being managed by medication, but now we got to go past the medication part and see what kind of techniques, what kind of education tools I can use to be that support. I had to educate myself on that because, like my wife said beautifully, everyone grieves different. Everybody has a psychosis that's different. It's not consistent. If the symptoms are there, the symptomatics are there, but everyone goes through it differently. I'm going to give you a prime example. When my family best friend passed away, his name is Brother Watson, Gene Watson. I've talked to him the day before he passed.

Hang on, someone's at the door.

Chastity Murry ([00:41:57](#)):

Oh my goodness.

Dante Murry ([00:41:57](#)):

Hello.

Speaker 5 ([00:42:01](#)):

Hello, I have a certified for Murry.

Dante Murry ([00:42:03](#)):

Yes. I'm sorry guys. We just got...

Speaker 5 ([00:42:09](#)):

There's your mail.

Dante Murry ([00:42:10](#)):

Okay.

Chastity Murry ([00:42:15](#)):

Oh my goodness.

Ken Duckworth ([00:42:16](#)):

Dante, why don't we switch to George on this same question. We'll back to you after you've opened your lottery winnings.

George, let's talk a little bit about Patrick was actively hearing voices and very ill for more than a decade, as I understood it from the conversation with you. How did that go for you? What did you learn? Because that's kind of the question. This is a little different than an ordinary father/son communication.

George Kaufmann (00:42:44):

Yeah, it's... You're right. It's exhausting for everybody, first of all. The thing that we learned from that was that... In the beginning, we as family members tend to think about how it impacts us. When a person is in a continuing psychotic state for a pretty long period of time, it is exasperating in some ways for people that are living with him. But it took us a while to figure out that, wow, it must have been horrible for him too. Once we got that and understood it, and that's one of the things that you learn in Family to Family, by the way, when they do the exercise, the virtual hallucination exercise in there, there's some of the things in that class that really help you understand what the person's going through.

The reason that that's so important is that there's sometimes when family members feel like they're being.... They're ill relative is really blaming them and accusing them. We have this saying that if we have to blame something, let's blame the disorder, not the person. Just us learning that simple lesson through our NAMI support groups and Family to Family, that was helpful for us because there were some things said that were hurtful on both sides, both us to Patrick and him back to us. We tried to insulate ourselves from from some of that emotion that is due to the psychosis that the person's experiencing.

The other thing is, like I mentioned earlier, we had to find a way to relate to him entirely differently. One of the ways that we... Things that we have to do at that point is we banned all discussion about mental illness during that period because whatever we said would've been interpreted by Patrick as us manipulating or trying to control him rather than let him trying to figure out things on his own. For us, every... Like was said earlier, everybody experiences these things differently. That's the way that we experienced it.

Ken Duckworth (00:45:17):

I'm going to answer a couple questions and give you guys a break. Somebody asked, are their resources for siblings? I interviewed a couple of sibling teams, one in their twenties and one in their sixties. The couple in their sixties, the sisters, it took them decades to really figure out how to make their relationship work optimally. Now they're basically best buddies. They said it's like fine wine. It really took time for them.

But I would agree with you, the sibling experience is under-examined in our mental health dialogue. I'm not sure that NAMI has done as much as it ideally could in a perfect world around the sibling experience.

I want to go back to the books George mentioned. Our book is *You Are Not Alone*. NAMI has the copyright. NAMI gets all the royalties. We've sold over 31,000 copies in five months. We're going to be in every Target store in America. PBS is going to do a little program on us in the fall. It's just going to keep coming. People are going to know about NAMI.

The expert that George referred to who wrote the book, *I am Not Sick, I Don't Need Help*, he also is featured in our book. I just want you to know that.

Let's take up another question. This is a variation on the first question. Somebody's actively ill, psychotic, internal stimulation. Is there a communication with that? Do you just get treatment? Do you wait for it to pass? The related question is, were either of you blamed when the other person had active psychosis? How did you deal with that?

I know this from my own childhood with my dad. That's part of the complexity of it. It's not always easy when you're having the experience to recognize that it's an illness process. You often want to project your distress onto another person, typically the person right next to you over the kitchen table who loves you. How did you deal with those experiences?

Dante Murry ([00:47:29](#)):

Did you want to talk about him?

Chastity Murry ([00:47:29](#)):

I'll let you.

Dante Murry ([00:47:34](#)):

Okay. I want to give you guys a little comic book backstory like George was talking about. Everyone likes a backstory in one of their characters. When I dealt with mental health for the first time in my life, I was in the military. Nothing stressed me out there. I finished my enlistment. Everything seemed fine and stable. I worked at UPS. Everything was fine and stable. But some of the things that hit me the hardest were the external factors that stressed me out. Stress at an extreme level, going through divorce, going through litigation of the house and resources that were accumulated over a period of time. Those are the kind of things that really caught up with me and stressed me out to the point where I did have a psychosis. I know that, but I'm getting to the point about the blaming part.

The blaming part was coupled with what I was going through and what my ex was putting me through. My parents, having never dealt with mental health issues at all, like George was having to experience with his son, with me being the only son and having the life that I lived, the hopes and dreams that I wanted to have for myself prior to a psychosis, that was very strainful for my parents. I know George can identify with that. Having that first time psychosis experience, as I'm going to relate to that question, is that the blame comes not from the individual all the time, but it comes from when the parents, based on what they've told me, especially my mom. My mom says, "I wish I had done this. I wish I had done this to stop that. I wish I could have been there to save my son from going through this divorce. I wish I could have seen the signs of how these external stressors were really catching up with him and causing him to go down this dark path."

As my mom and I talked about those things, that's where she blamed some things on herself, and she put a lot of the blame on my ex that was not supportive during that time period when she exploited the mental health crisis I was going through. That's the only way I know how to relate to that question, if I've answered it to some degree.

As it relates to my wife and I, we both have experienced that same kind of experience with your initial psychosis, your initial breakdown. That blame that I believe I'm understanding is, who caused it? The blame is who could have stopped it? The blame is, how come I didn't see this coming? How come I didn't recognize the signs and say, "Time out guys, we are going to fix this right now before it gets worse"? As my mom related that information to me, my dad related that to me, that's the best way I can understand on my end of the question, is that.

Now, my wife, she's never had mental health history, but there's something that happened to her that caused you to have that meltdown. Something caused the internal [inaudible 00:50:37]. Something happened.

Chastity Murry ([00:50:37](#)):

Whenever I had my psychotic break and everything hit, I was going through abuse. It was domestic abuse. The domestic abuse got worse and worse and worse until I had a psychotic break to the point of suicide. It was that bad. This is before I met my husband. Completely...

Dante Murry ([00:50:57](#)):

Wasn't me!

Chastity Murry ([00:50:58](#)):

Nope. When that happened, my whole personality changed. I wasn't the same. I'm still not the same as I used to be. I'm still not. With my husband, like I was saying, with the psychotic part of it, he knows when I'm off. He knows when my moods are off. I know when he's not feeling well mentally. I can pick up on it. I can ask him and say, "Are you okay today?" He'll say, "I took my medicine. I'm all right," or something like that to the fact, but me on the other hand, I'm the same way he is. He can pick up on me as well. It's vice versa with us. We know when each other is having these issues. We can pick up on it.

Ken Duckworth ([00:51:46](#)):

It's not just NAMI's strategies and trust. You've also both gotten treatment. I just want to make it clear. People are writing about family medical prep, untreated psychosis.

Chastity Murry ([00:51:57](#)):

Yes. Yes.

Ken Duckworth ([00:51:59](#)):

I don't think communication strategies are the job, one, if a person is really sick, really blaming, really even violent or threatening. The job, one, isn't the communication, I think, my opinion, but I'm interested in what you think. The job, one, is arrange treatment in figuring out how to do that.

Chastity Murry ([00:52:18](#)):

You got it.

Dante Murry ([00:52:20](#)):

You got to get the help. The thing is, my wife and I were blessed to get the help we got when it happened.

Chastity Murry ([00:52:25](#)):

We got our parents.

Dante Murry ([00:52:26](#)):

The support... Yeah.

Chastity Murry ([00:52:26](#)):

Our parents, my mother and father. My dad is a clinical psychologist. My mom called him up and she said, "Look," whenever I was in the place that I was in, which is central state. She said, "Look." He said, "Look, I'll help you get you on the right path with her, but you're going to have to do it yourself because I'm so far away." My mom and dad, they worked together to get me treatment, to get me the therapy I needed, to get me on the right track to be where I'm at today.

Ken Duckworth ([00:52:58](#)):

Got it. Was one of the treatments DBT for you, Chastity, because that was a question?

Chastity Murry ([00:53:03](#)):

Yes. Yeah, one of mine was.

Ken Duckworth ([00:53:05](#)):

That was a question. That's learning how to manage distress, identifying skills that you can use, research validated skills-based coping strategy. That was a question that someone had asked.

Chastity Murry ([00:53:18](#)):

Yes. That is something I had.

Dante Murry ([00:53:21](#)):

I know we were throwing out some acronyms sometimes, but can we let those over 300 people know what DBT is?

Ken Duckworth ([00:53:26](#)):

Oh, well, it's over 400 people. It's Dialectical Behavioral Therapy.

Dante Murry ([00:53:30](#)):

Okay, sorry Dr. Duckworth! 400. [inaudible 00:53:33].

Ken Duckworth ([00:53:34](#)):

I'm so impressed by our attendees. Dialectical Behavior Therapy, or DBT was invented by Marsha Linehan, who was a psychologist and a behavior specialist. She won the NAMI research award in 2015, stood up in front of the whole NAMI community and said, "This is the most important award I've ever won." Marsh Linehan has won a hundred awards. But the idea, the people who are living with it, see her, DBT can be hard to get. There aren't enough people trained in it, but it's a course that you take. You have to [inaudible 00:54:10].

Chastity Murry ([00:54:08](#)):

I was blessed to be able to.

Ken Duckworth ([00:54:08](#)):

Yes, exactly.

Chastity Murry ([00:54:10](#)):

I was blessed to be able to have that treatment. I was blessed.

Ken Duckworth ([00:54:13](#)):

Update, it save lives because it teaches coping strategies.

Chastity Murry ([00:54:17](#)):

It did. It saved me.

Ken Duckworth ([00:54:17](#)):

Thank you, Dante. I fall into acronyms all the time, so I want to thank you.

Dante Murry ([00:54:25](#)):

I just had to put it out there. I was [inaudible 00:54:26]. I had acronyms for everything.

Ken Duckworth ([00:54:27](#)):

Oh, I know. Thank you. I appreciate the correction. George, what about this question? When your son is ill and he's blaming you, and he's not thanking you for being loving and supportive, he's blaming you, in some way, I'll let you develop this, that lasts for years, not days. How do you manage that?

George Kaufmann ([00:54:50](#)):

It's really a great question. It is something that most families that have... It really speaks to this question about what do you do when somebody doesn't want any part of what you have to offer? It's especially hard for any relative, but especially for parents who think they're supposed to be able to solve all these problems.

The way that I'm interpreting this question is what do you do when nothing works and you're waiting for the person, and trying to encourage the person to be open to accepting treatment? Because we all know, the treatment works and recovery's possible. But if a person is under the influence of their beliefs, systems or psychosis, it may be really difficult for a long period of time to get that. How do you do that?

There's a couple things that we can do, none of which are universally effective, but it does keep us busy while we're waiting. One of the things that we found was really important is that we were perceived eventually that part of the struggle was actually dealing with the reality that maybe I do have this diagnosis and maybe I am going to have to accept treatment for it, and maybe it's lifelong, but it doesn't... The question is, how do you help them believe that this is not the end of the world?

I think the one thing that families can do is try to find ways to provide hope. Sometimes it's difficult to find something really positive in the person's behavior when they're going through this. But one thing that I noticed with Patrick was that no matter what happened to him, whether he was... Whatever the crisis was, whether he was in jail or he was in the hospital against his will or anything, he didn't give up. He had one single solitary suicide attempt. After that, he said, "That's not my style, that I realized that's not the answer."

The one thing that I was able to say to him that to keep the door open to the light maybe in the future, was one of the things, and it was true. One of the things that I respected about him is that he never gave up in the face of horrible things that were going on in his life that were happening to him. He always has kept putting one foot in front of the other. I said, "I don't know if I could do that if I was in your position." That was the one thing that resonated. It was the first time that he said anything that wasn't confrontational, I think, in the previous several months. He said, "Thanks, I appreciate that." That was the little glimmer of hope there.

Ken Duckworth ([00:57:41](#)):

You were acknowledging his experience instead of telling him what he needed to do. That's the key feeling.

George Kaufmann ([00:57:52](#)):

But it's hard when you're going through that.

Ken Duckworth ([00:57:53](#)):

Yes, it is.

George Kaufmann ([00:57:55](#)):

It's hard to find something. Here's the thing. People that are in this state, they're not stupid. They're very smart. If you try to blow smoke at them, they're going to see it in a nanosecond. Whatever you say to them, it's got to come from your heart. It's got to be something that you really believe. Sometimes it takes a lot of thought and process to think about something that's genuine that you really admire about that person.

If we think hard enough, there are many things. The problem is that everybody gets caught up in the perception of the worst outcome instead of the best. I love the way that Patrick has explained it to me. He's been my greatest mentor and teacher, this whole thing. What he said to me about this was that when I'm going through this, I feel like nobody else in the world understands. But he said, if I just feel like I'm being heard, not that somebody's solving my problems, but just that I'm being heard, it gives comfort.

Sometimes, we as the family members, the best thing we can do is we can be the custodian of hope when somebody's gone through that process and they're not able to have that hope for themselves. There's a lot of other things that we did. The other thing is you have to follow your instinct, follow your gut. You just keep trying things. You got to stop doing the things that haven't worked very well and try some new things. As you do that, you get the communications going, even when the person's not fully there and even when you're feeling blamed and everything. When you feel blamed, you just try to invoke...

We have somebody in our NAMI that calls it a mantra. He said whenever that happens, he says, "NAMI, NAMI, NAMI, NAMI, NAMI," because it reminds him that what we tell them in the support groups is it's the illness, not the person, it's the illness, not the person, it's the illness, not the person. The more that we do that, then the better we are to realize that that is the truth and that it helps us feel a little bit better as family members, but also helps us be able to connect better with our relative.

Ken Duckworth ([01:00:22](#)):

A bunch of the questions are also dealt with in the book. There's a lot of very specific questions that people are asking. How do you deal if your child is homeless? Well, we of course interviewed people who family members are lost to follow up, or living with homelessness. Is cognitive behavior therapy or DBT good for schizophrenia? Well, I interviewed the leading thinker in cognitive behavior therapy for psychosis. My son has PTSD. What are the treatments? Well, I asked one of the leaders in PTSD to explain that.

Ken Duckworth ([01:00:56](#)):

The idea of the book is it's lived experience as expertise, but there's also traditional expertise. For some of these really complicated situations, you might want to hire a clinician or find somebody who could help you navigate a very specific question. What George, Chastity, and Dante are doing is offering hope because they figured out a way to make things work. That doesn't mean that there aren't other ways to make things work because a lot of these situations that you've presented are complex and challenging.

One person wrote, I'm not sure my son will ever get better. I interviewed a man in Connecticut who his daughter lives in a nursing home. It was an unexpected interview. I gave a talk to NAMI Connecticut and he was a volunteer. I took all volunteers. I figured in doing 130 interviews, we would find every story. Sooner or later, you would come upon every theme that is important in the NAMI community.

He teaches Family to Family as a retiree. He does not play golf like all his friends. He said, "I have no expectation that my daughter will ever get better. She lives in a nursing home. She hears voices every day. They don't take Saturday off. They don't take Sunday off. What I do is I teach Family to Family to make myself better for her, not to make her better."

If that isn't the most beautiful, loving spirit. A completely unexpected interview. A random person said, "Hi, I want to be involved in your book." Jordan and I listened to this man, we thought this is so profound because every journey is different. This man has made so much meaning of his life. He said, "I don't want my daughter to be a statistic. I owe this to her. I am going to give to others."

Dante and Chastity, you have your hand raised.

Dante Murry ([01:02:49](#)):

Yeah, my wife always makes a good point about something.

Chastity Murry ([01:02:52](#)):

You go ahead.

Dante Murry ([01:02:53](#)):

I'm following up on what she told me to say. She says it better, but she said, "Dante, I need you to say this."

Chastity Murry ([01:02:58](#)):

No, I did not!

Dante Murry ([01:03:01](#)):

I read between the lines, guys. Anyway, she wanted to say something about Dr. [inaudible 01:03:08], friend of Duckworth, Associated Press. She said to me, "Dr. Duckworth said some kudos about us to Associated Press and that we wanted to make sure that everyone knew that we have outlets with our story in it because Dr. Duckworth did reference us to Associated Press and likewise. They put it in some outlets." I was surprised to see our story in the New York Post. Unfortunately, I don't know anybody who reads the New York Post. It was online newscast. We had some interest in it from our family members who wanted to see the story. It was a great privilege. We thank you for that, Dr. Duckworth.

Chastity Murry ([01:03:52](#)):

Yes. We sure do.

Dante Murry ([01:03:53](#)):

We thank you for that opportunity.

Chastity Murry ([01:03:55](#)):

Yes.

Ken Duckworth ([01:03:55](#)):

Well, the idea that living with something is another kind of expertise. It's not the only kind of expertise, but it's a kind of expertise the mental health field has completely ignored for a hundred years. I don't understand why, but NAMI was the only team that would deliver it. NAMI was the only team would deliver real people, use their names, to reduce isolation and shame. Here's what worked for me. Here's what worked for my family. Thank you.

Before we close, I want people to know You Are Not Alone is available everywhere you buy books. It's at every bookstore. It's at 2,700 libraries. It's on Amazon. All the royalties go to NAMI, that I can get paid to write the book. I don't make a nickel if we sell a million copies, but because I so believe in this and my heart has been broken by so many people who said, "If only I had found NAMI five years sooner, it would've saved my marriage, my relationship."

People tell me this on airplanes all the time. I think, "My God, why did it take so long for them to find NAMI?" My vision is we're in every Barnes and Noble. We're on Amazon. If you want to read the reviews, they're quite beautiful. If you happen to buy a book and you like it, consider writing a review. It all goes to support the mission. If you didn't like the book, take a walk. Don't write a nasty review. You don't have to do that. You can find another way. If you don't like the book, give it away.

I want to ask you, final comments. What's it been like to be on a panel with 400 people learning from you? Is there anything else you want to share? I'm going to start with George, and then I'm going to close with our class couple and first married couple in the history of Ask the Expert. George, anything else you want to add?

George Kaufmann ([01:05:43](#)):

Yeah, Ken, I just want to say a word about that last question about the lady that said, "I wonder if my son's ever going to get better." Because I think that's not a small proportion of people that are dealing with the more severe diagnoses. I can't overemphasize how much I learned from Patrick, from my son about how he views this. Because in his work... We had this argument once about 15 years ago, probably now, when he was fairly new at the peer specialist job. He said, "I believe a hundred percent everybody can, with a mental health diagnosis, can experience a recovery." I said, "Pat, I can't get my mind around that because there's people who don't ever completely accept the diagnosis or the treatment, and there's other people that do, but that treatments just don't work very well. How can you say that?"

He said, "No, no, no, no, no, no. You're looking at it all the wrong way." He said, "The way that I do is I separate it into two buckets. What you're talking about is illness. What I'm talking about is wellness and recovery. Two different things, and I need two different sets of tools for this." He said, "The way that you have to think about recovery is it's a journey, not a destination, and that anybody can get to the point where they have," you heard his definition earlier, his definition of recovery is, "When I have the life I want to lead."

George Kaufmann ([01:07:17](#)):

Now, that might not be the same life that you as a parent had in mind for that person when they were growing up as a child, or maybe not the same one that they had in mind for themselves. But the fact is that what he was saying is that everybody can embrace what the reality is and find a way to a life that they want to lead. Now, it may not be to everybody's approval and every friend and family member, but he really believes that. I've come to believe it too. It's going to be different for everybody. The notion about whether somebody accepts treatment or not doesn't necessarily have to be mutually exclusive from using other skill sets that help a person in the daily activities of life. That's what Patrick was saying. It works better if we have treatment on one side when you need it, and as long as you need it.

Ken Duckworth ([01:08:22](#)):

Both and might be better than either/or. But his point was there's another way to think about it.

George Kaufmann ([01:08:28](#)):

Exactly.

Ken Duckworth ([01:08:28](#)):

Right. All right, Dante and Chastity, NAMI's all time class couple, let's talk about anything you want to say to close this conversation.

Dante Murry ([01:08:38](#)):

My wife wanted to make a quote on something.

Chastity Murry ([01:08:41](#)):

I think that I want to say this. My definition of recovery is being able to help others, to inspire others to do good things and inspire myself to help others. I think by doing that, that helps me. It keeps me on the right track saying, you know what? I have to keep my recovery in check, that I have to keep myself in check before I can help anyone else. I have to help myself.

Dante Murry ([01:09:07](#)):

And rely on supports and doctors.

Chastity Murry ([01:09:10](#)):

Exactly. And rely on supports.

Dante Murry ([01:09:10](#)):

That's part of the quote.

Chastity Murry ([01:09:10](#)):

That's part of the quote. And the therapy, and the medications, and family support. All those are a combination.

Dante Murry ([01:09:18](#)):

By the way, everybody, that's page 166. It's got Chasity Murry on there. She is the second paragraph on the [inaudible 01:09:29] of the book. Little promotion there, honey.

Chastity Murry ([01:09:33](#)):

I just wanted to make sure that they heard my definition of recovery, because they're a part of us.

Ken Duckworth ([01:09:38](#)):

Well, thank you. I want to say thanks to everybody for joining. A question came up, is the book available in Spanish? The publisher is trying to sell it to a Spanish publisher. It has been resold to a Mandarin Chinese publisher. The book has been resold in the United Kingdom. The tentative title for that book is You Are Not Alone with Scones. That's the tentative.. That's a joke. It's a tentative title.

It's go you are not alone, but of course, there's no NAMI in the United Kingdom. They don't have anything like this community of amazing people. I just want to acknowledge that. I'm encouraged the publisher to sell the book, resell the book in Spanish. They're working the problem. When I was in Los Angeles, the demand for it was overwhelming. I must have had 50 people ask me, when are we getting this in Spanish? It's up to the publisher to figure that out. They did resell it in Mandarin.

We're working the problem. We're working the problem together. I want to thank all of our staff, all the people who support this Ask the Expert endeavor. None of this is possible without you. Jordan, are there any slides? Oh, we're coming back to you. Thursday, April 13th, the usual one, customary Thursday afternoon time. We'll be talking about the adverse childhood experience in dealing with trauma. We have a cool expert for that.

This is an informational webinar. It's not intended to provide medical advice. You already know that. NAMI's here to support you. The answers are all around us. You may find them in people right in our NAMI community. If you feel like donating to things like this, there's an option right there, but it's more important to me that you consider buying this book. This book is now down to 18 bucks. You can get used copies for 12 on Amazon. Other royalties go to NAMI. We're going to continue to advance the cause because I want people to know about NAMI sooner.

Not everybody can find their perfect mate at a NAMI meeting, but everybody should know about us in case they need us.

Chastity Murry ([01:11:42](#)):

That's right.

Ken Duckworth ([01:11:45](#)):

Thank you everybody. As a dating site, I don't know how far we're going to get, but we can help a lot of people together. George Kaufmann, Dante, Chastity Murry, want to say thank you for everything. Thanks everybody for joining. Take good care. We'll see you next month, April 13th. We'll be talking about the Adverse Childhood Experience study and what we've learned from that. Thanks everybody.

George Kaufmann ([01:12:07](#)):

Thank you again.