

Session Nine

BOUNDARIES & COMMUNICATION TOOLS

“From one man God made all the nations, that they should inhabit the whole earth; and he marked out their appointed times in history and the boundaries of their lands. God did this so that they would seek him and perhaps reach out for him and find him, though he is not far from any one of us.”

“For in God we live and move and have our being.”

—Acts 17:26-28 NIV¹

Jesus: “For where two or three gather in my name, there am I with them.”

—Matthew 18:20

KEY POINT: Boundaries enable individuals facing mental health challenges and their support partners to establish healthy and secure relationships.

JESUS' EXAMPLE:

Jesus, divinely the Son of God, also demonstrated his humanity in the New Testament through practices like setting boundaries, seeking solitude, and leaving harmful situations.

1. Note: Jesus is informed that his cousin has been murdered. “When Jesus heard what had happened, he withdrew by boat privately to a solitary place. Hearing of this, the crowds followed him on foot from the towns” (Matthew 14:13).
2. “Yet the news about him spread all the more, so that crowds of people came to hear him and to be healed of their sicknesses. But Jesus often withdrew to lonely places and prayed” (Luke 5:15-16).
3. “They got up, drove [Jesus] out of the town, and took him to the brow of the hill on which the town was built, in order to throw him off the cliff. But he walked right through the crowd and went on his way” (Luke 4:29-30).

Jesus' example shows the importance of personal wellness and the maintaining of our spiritual connection. Rest, gratitude, and peace help us care for ourselves and others.

FOUR REFLECTIVE PAUSE PROJECTS

TIMEOUT

Many of the trials faced by those living with mental health challenges and their support partners can be related to unhealthy communication.

It is important for the healing-recovery process to work at adopting respectful communication and behavior practices, such as avoiding harsh words, accusations, cursing, silent treatment, or physical abuse.

Overcoming survivors and support partners: *describe what communication currently looks like for you and the other in your current relationships.*

Overcoming survivors and support partners: *what are ways in which you both might grow and improve in terms of showing respect for one another?*

SOME FACTS

- Mental health symptoms can lead to exhaustion, reduced motivation, and cognitive difficulties. Likewise, support partners may experience fatigue as they endeavor to provide meaningful assistance.
- Support partners and individuals striving for recovery should collaborate to establish purposeful roles in the home, workplace, or community, thereby affirming the inherent value of those navigating mental health challenges.
- Support partners benefit from validation, affirmation, and external support. Access to safe environments for expression and renewal, along with opportunities such as support groups, therapy, or spiritual guidance, is essential to reduce the risk of compassion fatigue and burnout.

NOTES:

DEFINITIONS:

Compassion fatigue and **burnout** both cause exhaustion and detachment in those caring for loved ones with serious mental health conditions.

- **Compassion fatigue** (or secondary traumatic stress) arises from the emotional toll of witnessing a loved one's suffering, leading to numbness and reduced empathy.
- **Burnout** develops gradually due to chronic caregiving stress and lack of support. This can result in feeling overwhelmed, resentful and lead to a loss of purpose.
- Symptoms like sleeplessness, irritability, headaches, and social withdrawal often overlap. Recognizing these signs and seeking help — through support groups, therapy, spiritual guidance, or faith communities — is crucial.

TIMEOUT

Overcoming survivors: describe how you've found purpose and interests beyond mental health challenges; what has brought you relief or meaning; and which support strategies have worked or not worked.

Support partners: describe ways that you can help your loved one be more involved in finding his or her meaningful purpose and personal interests. What has worked and what hasn't worked in the past?

NOTES:

TIMEOUT

Supporting loved ones who avoid professional help can be difficult. You can't force help but be a steady, compassionate presence and watch for crisis signs that require "crisis management."

For immediate mental health crisis support in Tulsa, call the COPES Hotline at **918-587-9471**, available 24/7, or dial or text **988** to reach the Suicide & Crisis Lifeline, which connects COPES for local support in Tulsa County. Outside of Tulsa, when you dial or text 988, they can connect you to local resources.

Overcoming survivors: *describe help offered by support partners that you have found to effectively support your progress toward better life management.*

Support partners: *describe your challenges in helping your loved one and explain strategies that have effectively supported their progress toward better life management.*

TIMEOUT

Clear boundaries foster safety and reduce unhealthy patterns for both those with mental health challenges committed to being overcoming survivors and their support partners.

Collaborate to set boundaries, address issues, encourage growth, and adapt if cooperation fails to maintain healthy limits and avoid enabling.

Overcoming Survivors: *describe ways you've learned to accept boundaries. Describe ways you've adjusted to or modified boundaries when things weren't going as planned. What has helped in this process or what has prevented you from trying?*

Support Partners: *describe ways you've learned to accept boundaries. Describe ways you've adjusted to or modified boundaries when things weren't going as planned. What has helped in this process or what has prevented you from trying?*

NOTES:

WHAT DOES ENABLING LOOK LIKE COMPARED TO BEING TRULY HELPFUL?²

Helping Behaviors	Enabling Behaviors
Encourages personal responsibility and accountability for their actions.	Makes excuses for unhealthy behaviors and irresponsibility.
Sets clear, firm boundaries about what you will and won't tolerate.	Fails to set or enforce boundaries , allowing problematic behavior to continue.
Empowers the individual to develop skills and problem-solve on their own.	Takes over tasks and problem-solving for them, hindering skill-building.
Supports healthy choices and encourages professional treatment (therapy, medication).	Protects harmful choices and can delay the person from seeking professional help.
Focuses on long-term growth and recovery, even if it's uncomfortable in the short term.	Provides short-term comfort or relief, but perpetuates negative patterns in the long run.
Prioritizes your own self-care and maintains your support system.	Neglects your own needs and well-being, leading to emotional exhaustion.

NOTES:

THE “LEAP” METHOD TOOL 

The **LEAP** method (**Listen, Empathize, Agree, Partner**) is a recommended tool for helping someone with mental illness accept treatment.

LEAP values understanding the other person's view, prioritizes relationships over treatment goals, and aims to prevent burnout. It promotes respect, staying connected, non-confrontation, and encourages support partners to lean on their network, learn about conditions, listen without judgment, and validate concerns. LEAP suggests gentle inquiry, practical help, boundary-setting, and self-care for support partners.

LEAP = Listen, Empathize, Agree, Partner

This evidence-based approach helps engage those resistant to treatment.

1. **Listen:** Show genuine interest in their concerns; don't interrupt or debate.
2. **Empathize:** Validate their feelings and experiences; show you understand their perspective, even if you disagree.
3. **Agree:** Find points of agreement, even small ones, to build common ground.
4. **Partner:** Work together on small, shared goals to build confidence in treatment.

Key Strategies for Support Partners

- **Prioritize the Relationship:** Focus on connection first, even before getting them into treatment.
- **Educate Yourself:** Learn about the specific illness to reduce your own anxiety and become more effective.
- **Respect Their Autonomy:** Don't force them to talk; let them know you're available when they're ready.
- **Avoid *Helicoptering*:** Don't be constantly over-involved; allow them space.
- **Be Compassionate:** Don't bring up past mistakes when they're trying to improve.
- **Track Progress:** Use journals or apps to monitor symptoms and responses to care.

ENDNOTES

1. NIV = New International Version (Bible). This is the translation used throughout this syllabus unless otherwise indicated.

2. Google: **Eagle Creek Ranch Recovery / Helping vs Enabling: How to Offer Healthy Mental Support** (https://idahorecoverycenter.com/helping-vs-enabling/#:~:text=In%20summary%2C%20helping%20involves%20providing,their%20actions%20and%20learning%20independence.)).

3. Anosognosia, or unawareness of one's own deficits, was first observed by Gabriel Anton in 1898 and formally defined by Joseph Babinski in 1914 as linked to right hemisphere brain damage in stroke patients. Its neural basis was further explored in the 1980s. In the early 1990s, Dr. Xavier Amador identified anosognosia as a neurological symptom in mental illness, especially schizophrenia and bipolar disorder, a perspective detailed in his book *I Am Not Sick: Stories of the Best and Worst of Anosognosia*. He developed the LEAP method after helping his brother, Henry, who had schizophrenia but did not believe he was ill—an experience shared by many with similar diagnoses.

Video Resource / Interview with Dr. Amador — Google: **NAMI Ask the Expert: How To Help Someone With Mental Illness Accept Treatment** (<https://www.youtube.com/watch?v=g4hHwzxOrLU>)

Google: **HelpGuide.org / Family Caregiving / How to Help Someone with Mental Illness Accept Treatment** (<https://www.helpguide.org/mental-health/treatment/how-to-help-someone-with-mental-illness-accept-treatment>)

Google: **What I Learned After Yelling at a Homeless Man (KSBJ)**. This story is shared by my daughter, Rachele Renee “Reside” Carrillo, who co-hosts a morning show in Houston. She recounts an experience from late 2025 when she yelled at a homeless person, prompting her to reflect on themes of anger, forgiveness, and compassion. Her account emphasizes grace and empathy, highlighting the difference between harshness and unconditional Christian love. She also discusses “anosognosia” and the value of the LEAP method.

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