



Natalie Kovacs on the Benefits Of Using a Family Approach to Treating Schizophrenia



Stephanie Greer, CEO of Akin Mental Health, November 17, 2023

Schizophrenia, a condition that affects millions around the world, not only impacts the individual diagnosed but also their surrounding family. It's becoming increasingly clear that the journey towards mental wellness is not solely an individual pursuit but a collective one. Incorporating family perspectives and integrating a family approach in treatment methodologies can be pivotal in achieving holistic healing and stability. In this interview series, we are talking to psychiatrists, therapists, counselors, researchers, and other mental health professionals to delve deeper into the significance of a family-oriented approach in the treatment of schizophrenia. As a part of this interview series, I had the pleasure of interviewing Natalie Kovacs, a social worker with VNS Health, one of the largest nonprofit home- and community-based health care organizations in the country.

Natalie Kovacs, LCSW, has been the Program Coordinator of the VNS Health Parachute Program since January 2023 and has been a psychiatric social worker with the program since 2019. Prior to that, she was a behavioral health clinician with an Assertive Community Treatment (ACT) team in New York City through the NYC Mental Service Corps. Natalie has a Master of Science in social work from the Columbia University School of Social Work.

Thank you so much for joining us in this interview series! Before we start, our readers would love to “get to know you” a bit better. Can you tell us a bit about your background and your childhood backstory

I was born in Los Angeles. Growing up, I experienced a lot of physical health issues related to autoimmune disease, so from an early age I was familiar with the world of health care. I also had family members who struggled with mental illness, and it was always unclear to me what was going on—it felt like there was a lot that was just unsaid. These experiences allowed me to see, firsthand, how illness can create misunderstanding and even conflict within families. As I grew up, I wanted to find a life path where I could help others. I wanted to help people communicate better with each other—particularly in the context of family dynamics.

Can you please give us your favorite "Life Lesson Quote"? Can you share how that was relevant to you in your life?

It's hard to pin down a "life lesson" in one sentence, given how many ways people can experience the world! But in my own work, there's one saying that's always in my mind when I'm working with others. In graduate school, we were studying a particular line of dialectical behavioral therapy. The pioneer of this approach based it on her own experience with borderline personality disorder. It's about balancing acceptance and change when it comes to addressing your mental health.

I've always been very inspired by this approach, and I use it a lot in my own work. I often find myself telling my clients (and myself!) that **"You are doing the best that you can, and we're going to work to do better."** The idea is that mental health is about trying to do your best and not letting yourself get you down, and that with commitment and the support of others, meaningful change is possible.

Let's now shift to the main part of our discussion. Can you tell us a bit about your background and your professional career treating clients with schizophrenia diagnoses?

After moving to New York, I worked with children and adolescents, but I knew I wanted to work with people of all ages. I got involved with the NYC Mental Health Service Corps, and started working on an **Assertive Community Treatment (ACT) Team**. ACT is a wraparound program that provides care to individuals who are dealing with severe mental illness and substance abuse, and who are unable to participate in traditional mental health treatment. The program works to make sure these individuals take their medications and that they have the housing, food, and essential mental health treatment they need to stay healthy.

I then started working in the **Parachute Program** at the home and community-based nonprofit [VNS Health](#). This is a great organization that provides care to people in their homes and in the community. My colleagues and I played key roles in setting up the program in the fall of 2019.

Parachute is designed to meet the needs of people who are coming out of intensive mental health treatment or who have been hospitalized multiple times. Our care team is made up of social workers, registered nurses, psychiatrists and others, who work with clients where they're most comfortable—at home. The treatment plan includes [open dialogue therapy](#), an approach that integrates an individual's support system of friends and/or family. It also really brings whoever is involved in treatment into the therapy session itself.

Our team's approach, and my personal approach, is to remember that a lot of our clients have been pushed down a lot and told that they don't have choices. We are focused on giving people choice and greater ability to participate in their own treatment and their own goals.

We are very much “boots on the ground” when it comes to delivering care—if a client can only meet us at a Burger King to sign a form, I’ll be out there to meet them. Or if a client feels more comfortable seeing one of our nurses in their friend’s home, we’ll go there, too. It’s about “meeting people where they are,” physically and emotionally.

It is exciting to see how the Parachute program empowers individuals who’ve spent literally years in different treatment programs. It’s all about arming people with the support and resources they need to thrive and stay healthy long-term. While Parachute itself is a short-term program of six months, we work to fully connect our clients and their families to permanent resources in the community so they continue to grow and feel empowered. Our organization collaborates with many community-based programs and connects our clients with resources that help to support and sustain the progress they make with Parachute. We’re there for that part of the journey to help give them a “soft landing,” if you will, into whatever transition period might be next for them.

When you work with patients, I understand that you often integrate family or friends into the treatment process. What do you consider the three primary benefits of including family?

The Parachute Program’s approach is very much rooted in integrating family and friends into a personalized care plan. Over the years, I’ve seen just how important that is. We can’t look at an individual as just a list of symptoms. Factors like family, background, where they’re from, income, and so much more play a role in how they experience mental illness.

First, family are there when our team isn’t, so as clinicians it’s important to look at someone’s family members as the “eyes and ears” for our team. They often play a really key role in their loved one’s recovery. Family members are a part of the treatment, so there can be a strong cohesiveness. For example, a sibling or close friend might act as the “skills coach,” or they can play a huge role in simply reinforcing what’s been discussed in treatment.

Secondly, some friends and family might have stigma around schizophrenia, making it hard for them to understand what’s going on with their loved one. Misconceptions and hurtful stereotypes can lead to internalized stigma. To effectively work together and help families understand their loved one’s condition, we work to provide psychoeducation for the family and teach them how to avoid stigma.

Thirdly, there are many cases where individuals may trust their family members or friends more than a treatment provider, especially if they have had negative experiences with health care in the past. By including and really integrating family members in care, you can increase trust and foster relationship-building between our team and our client.

What are some of the challenges you run into when working with families? How do you balance responding to the needs of the family with the needs of the patient?

As mentioned earlier, it’s not unusual to encounter families who don’t understand schizophrenia—from what it is and what the symptoms are, even to how schizophrenia is treated. A common reaction is to see families who just want their loved one to “be like how they used to be.” We don’t ignore the wishes of the family—it’s important to recognize that their feelings are valid and often come from a place of pain.

Part of our work with a client *and* their family is to develop recovery goals that include the client's wishes and that help them get where they would like to be in their wellness journey. We work with the family to process what their loved one's recovery would look like, help them better understand an individual's diagnosis, and learn ways that a whole person can be considered, from physical to mental wellness.



Family dynamics can vary greatly depending on the sociocultural backgrounds of the individuals involved. How do you tailor your family approach to respect and incorporate different sociocultural perspectives and values?

An individual's culture and family values should always be respected. It's part of who they are. When making home visits, I always remember that I am a guest in someone's home and that my team members and I should remain humble and respectful with all families. This also gives us an advantage, because we get a better sense of where a family is coming from when we're right in their home. Working across New York City, we serve an incredibly diverse population with people from many backgrounds, and we always work to remember that everyone has a unique lived experience. Again, that's something I really love about this work.

Sociocultural perspectives also greatly influence how a family understands their family member's mental health. As a team, we begin by listening to the family to get a sense of how *they* view their family member's diagnosis and condition. This is just so important. We never tell an individual how to feel, or prescribe a way of thinking. By listening, we can understand where the family is coming from and can determine how best to "meet them where they are" and acknowledge their perspective. For many, that's never really happened before. It's an especially important first step.

Likewise, inter-generational dynamics can sometimes play a significant role in the therapy process. Can you share any insights or experiences on how inter-generational understanding and communication facilitate the healing process?

We are all a product of our social ecology. Families pass down their communication styles and how they understand or approach the world. Family lessons and how families are raised play a large part in their understanding of mental health, including any stigma they may have around a mental health diagnosis. The VNS Health Parachute team works with families to facilitate and understand their family member's mental health condition, address any stigma, and improve communication between family members.

Many mental health professionals don't have training in working with families. How did you learn the techniques you use and what would you recommend to professionals who want to learn more about this approach?

Our team is trained in the Open Dialogue model, a unique family- or support network-based approach that was developed in Finland for the treatment of psychosis. It is a non-judgmental approach that brings family into treatment. It focuses primarily on the family working together to hear each other and to tolerate uncertainty and difference. I would recommend to other professionals working with individuals experiencing psychosis or a schizophrenia spectrum disorder that they learn more about this treatment, I think it is a valuable approach because it can significantly benefit the individual with a severe mental illness, and in the process also bring greater understanding and healing to the family.

Caring for a family member with schizophrenia can sometimes be challenging and might lead to caregiver burnout. How does your approach incorporate strategies for self-care and support for family members who are involved in the caregiving process?

Caring for any family member with a mental health diagnosis is not without its challenges, especially given that finding the right treatment can take time. Families shouldn't feel guilty if they are experiencing burnout. Sometimes we see that families take on the responsibility or blame themselves for their family member's mental health status or condition. We always reiterate to friends and family that they are not responsible for their loved one's mental health and cannot control mental illness.

The skills we teach are not just for the "identified client." In the Parachute program, we work to incorporate families into our skills training, so they can help act as coaches, and address their own burnout or stress. We discuss what tools might help them, using various methods from deep breathing to distress tolerance skills and more. Our team is also there as an ongoing resource during treatment for families to reach out to. They might not understand what is going on with their family member and want information, or they can follow up to discuss with us what the next course of action is in a treatment plan. Having someone that a family trusts and knows they can rely upon is important in working towards long-term recovery.

Preventive education is often seen as a powerful tool in managing schizophrenia symptoms. How do you integrate education and awareness for family members within your family approach to treating schizophrenia?

Education and understanding are especially important when working with families. Schizophrenia is still a very misunderstood mental health condition, and we want to demystify this for families. It can be very hard for families when seemingly overnight, your family member has a personality change and begins exhibiting difficult-to-understand behaviors. Our team helps families understand various schizophrenia spectrum disorders and approaches to treatment. We also work to address the stigma of these mental health conditions; our goal is to reduce the fear and confusion some people have around symptoms of schizophrenia,

like hearing voices or having other perceptual experiences that others do not. Our hope is that families can move from a space of misunderstanding, stigma and fear to acceptance and hope.

Thank you. Here is the main question of our interview. What are 5 things you wish more people knew about people navigating life with schizophrenia?

1. Recovery is possible! A schizophrenia diagnosis does not mean you or your family member's life is over. Many people live happy and fulfilling lives with a schizophrenia spectrum diagnosis. Working together with your family or chosen support network and your treatment providers can assist in building the life *you* want to live.

2. Recovery looks different for everyone, and that is okay. Recovery does not have one path! We all want different things with our lives and so do individuals diagnosed with schizophrenia. Asking our clients what they want out of their own recovery and listening to them is important in building trust and engagement in treatment. We are always listening and validating with our clients that recovery is a process and can be challenging. We are all working together to get to a goal and want to find the best way there.

3. Hearing voices or experiencing other perceptual differences does not mean that you are "crazy." It just means you are experiencing something that others are not. Hearing voices and how your loved ones react to them is highly personal. In our team, we ask the individual if their voices are bothering them and how they would like to address them. Some individuals may find that their voices are friends or companions, while for others they are antagonists and bothersome. How someone feels about their voices leaving them is very different: one person might feel lonely and abandoned and another could feel relief. It's important to listen to how someone with schizophrenia wants to address their voices or any other perceptual differences they might experience.

4. Medication is not one-size-fits-all. Medication can be an important part of a treatment plan, and it can often take trial and error to find the right medications or the right dose to manage symptoms. Medications can also have side effects that will need to be addressed. Working together and listening to an individual's concerns about their medication helps our team assist in developing their treatment goals. Also, medication is not the only part of a treatment plan. There are many other aspects that can be included in a recovery plan including: individual and/or family therapy; group therapy; psychosocial club houses; vocational training; and educational support. In addition, it's important to note that avoiding boredom, helping an individual feel like their life has purpose or meaning, and finding a supportive community are all essential parts of any recovery plan.

5. People with a schizophrenia spectrum disorder are not scary or violent. As a society, there is a lot of fear and stigma around schizophrenia diagnoses and how to treat individuals diagnosed with these conditions. This only further pushes these individuals to the fringes and leads to them avoiding or even rejecting necessary care. Reducing stigma and fear around this condition is a necessary step to increasing care for those with schizophrenia.

There is a lot of misunderstanding when it comes to mental illnesses, especially involving psychosis. What do you wish more people were aware of, either in the professional field or the general public?

I wish more people understood that individuals experiencing a schizophrenia spectrum diagnosis are not inherently scary or violent. In fact, the NIH has found that they [are more likely](#) to be the victims of violence than to perpetrate them. It is difficult to understand when an individual is experiencing something that you have never experienced yourself, and people with schizophrenia are reduced to their highly stigmatized diagnosis. I wish more people were aware that we should be seeing all people as the person they are, and not define them by their mental health challenge or condition.

Another thing that I think is important to know is the impact mental health can also have on one's physical health. Many of our clients come to us with coexisting medical conditions that aren't being addressed. That's why it's so valuable that we have great nurses on our team, especially as they can come and see these clients in their homes, and work with us to integrate that care into a treatment plan.

We are very blessed that some very prominent names in Business, VC funding, Sports, and Entertainment read this column. Is there a person in the world, or in the U.S., with whom you would love to have a private breakfast or lunch, and why? He or she might just see this if we tag them. :-)

While it's not as "glamorous," the first people that come to mind honestly are my colleagues on the [Behavioral Health team at VNS Health](#). It takes a special kind of person to work in home health care—you have to want to get into the trenches and get to know people ...where they go, what they fear, how they cope—or don't cope—and what they need. You often can't learn that in an office setting or an exam room. It's such personal and creative work, and every person adapts the clinical treatments in unique ways that are customized for an individual's goals and needs—and on the timeline that works for that person. It can be slow, challenging work, but my teammates are real heroes in my eyes. They walk through some of life's toughest challenges with their clients one step at a time. Our health care system doesn't make that easy, and they are just...THE BEST! I really can't imagine any other path that I could see myself on that would be more rewarding.

How can our readers further follow your work online?

You can learn a lot about behavioral care programs and services and community-based nonprofit home health care on our website: www.vnshealth.org. We do outreach and education programs in the community as well and you can follow us on [Instagram](#), [X](#), [Facebook](#) and [LinkedIn](#) for updates on Parachute and tons of other programs from VNS Health.

Thank you for your time and thoughtful answers. I know many people will gain so much from hearing this.

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