

Treatment Contracts

A **treatment contract** is a document that you write while you are feeling well to plan for the times when you do not feel as well. It is written so you, your family, friends, and doctors can recognize your symptoms of illness and can comply with your wishes for treatment.

Below are detailed instructions on how to fill out a treatment contract. Take a look at a **sample treatment contract** by [clicking here](#).

DETAILED INSTRUCTIONS FOR COMPLETING A TREATMENT CONTRACT

When filling out the Treatment Contract, it is important to get some input from others who know you. You may wish to complete it yourself and then show it to a family member or your doctor to ask for their impressions. Alternatively, you may prefer to collectively complete the contract with members of your support system.

Instructions for Page 1:

1. First decide whom you would like to include in the contract. You should consider including your psychiatrist, psychotherapist, spouse or significant other, or any other people that you feel are important members of your support system. Sometimes people choose to include their family doctor, a close friend, or an ally at work.
2. Write these people's relationship to you (e.g. "wife," "boss," etc.), their names, and phone numbers in the spaces provided. You do not need to fill in all the spaces if you would only like to include one or two people.
3. Next, under the section headed "WHEN I AM WELL," check off any behaviors that describe how you behave when you are feeling your usual self; that is, when you are neither depressed nor elevated.
4. Extra lines are provided so that you can add any other behaviors that reflect how you are when you are feeling well.
5. Read the suggestions under the section headed "When I am well, I can do the following things to help myself," and use the spaces provided to add any other coping behaviors you have found helpful when you are feeling well.

Instructions for Pages 2-3:

1. On pages 2-3, we list many common symptoms of depression, including thoughts, feelings, and behaviors. Read carefully over these symptoms, and check off any that apply to you when you are depressed.
2. Mark an "E" next to any symptoms that are early warning signs; that is, symptoms which generally signal the beginning your new episodes.
3. Use the blank lines to add any symptoms you get that do not already appear on the form.
4. Under the section headed, "**PERSONAL TRIGGERS OF DEPRESSION**," check off the events that have led up to your becoming depressed in the past. Understanding what kinds of events trigger depression for you can help you identify times when you might be vulnerable to becoming depressed. You can then both be alert for symptoms and work to reduce or minimize symptoms.

Instructions for Page 4:

1. On page 4, you will find suggestions for ways to cope with depression. Please read over the

suggestions and fill in the blanks. This page will be yours to refer to when you start to get depressed. Under #1, fill in your doctor's name and phone number so that your family will have it for easy reference.

2. Items #2,3,and 4 guide you in trying to identify what may have triggered the depressed symptoms. Under #4, add in any typical personal triggers of depression to remember to think about (these may include triggering events that you have checked off on page 3).

3. In item #8, fill in the names of one or two people who you could call for support (or just to talk) if you were going through a hard time.

4. Under item #9, fill in any coping strategies that you have found helpful during the past times you have been depressed. For example, some people benefit from taking short daily walks. Others find it rewarding to write down their thoughts or feelings in a journal. Still others find it beneficial to distract themselves from their thoughts and feelings by listening to music or the radio. If you cannot think of any strategies that work for you, you may want to talk this item over with your therapist or psychiatrist.

5. Under item #10, fill in any coping strategies that you know ARE NOT helpful during periods of depression. For example, some people desire alcohol more when they are depressed, but this can make them feel even worse once the alcohol wears off. Other people want to stay in bed all day when they start to get depressed. This can also lead to more severe depression by making their sleep schedule even more disturbed, lowering the energy further, and making them miss out on activities that could give them more enjoyment or sense of accomplishment.

6. Under the section headed, "**When I am depressed, other people can help me by...**," read the suggestions and add any of your own on the lines provided.

Instructions for Pages 5-6:

1. On pages 5-6, we list many common symptoms of elevated mood, including thoughts, feelings, and behaviors. Read carefully over these symptoms, and check off any that apply to you when your mood is elevated.

2. Mark an "E" next to any symptoms which are early warning signs; that is, symptoms that commonly signal the beginning of your mood episodes.

3. Use the blank lines to add any symptoms you get that do not already appear on the form.

4. Under the section headed "**PERSONAL TRIGGERS OF ELEVATED MOOD,**" check off the kinds of events that have led up to your becoming hypomanic or manic in the past. Understanding what kinds of events trigger mania can help you identify periods of time when you might be vulnerable to developing new episodes of mania. You can then both be alert for symptoms and work to reduce or minimize symptoms.

Instructions for Page 7:

1. On page 7 you will find suggestions for ways to cope with mania or hypomania. Please read over the suggestions and fill in the blanks. This page will be yours to refer to when you start to become manic or hypomanic. Under #1, fill in your doctor's name and phone number so that you and your family members will have it available for easy reference.

2. Items #2, 3, and 4 guide you in attempting to identify what may have triggered past manic symptoms. Under #4, add in any typical personal triggers of mania to remember to think about (these may include triggering events that you checked off on page 6).

3. In item #8, fill in the names of one or two people that you could call for support (or just to talk) if

you were going through a hard time.

4. Under item #9, fill in any coping strategies that you have found helpful during past times you have been manic or hypomanic. For example, some people prefer to stay in a darkened room without much stimulation when they are feeling overwhelmed or overstimulated.

5. Under item #10, fill in any coping strategies that you know ARE NOT helpful during periods of mania or hypomania. For example, some people desire alcohol more when they are manic, but this can make them even more impulsive and likely to do risky things.

6. Under the section headed, "**When I am manic, other people can help me by...**," read the suggestions and add any of your own on the lines provided.

Instructions for Page 8

1. At the end of the contract, there is space for you to add other important points that may not be listed.

2. You will notice that the last clause states that you or any of the other people named in the contract may call a meeting (with the psychiatrist or therapist) to change the contract, as long as you (or they) give the other people on the contract three weeks written notice. This makes sure that you will think ahead about any changes and will not change or cancel it impulsively.

After Filling Out the Contract

After filling out the contract, go over it with each of the other people in your support system whose names you have included on the first page (your psychiatrist, therapist, spouse, etc.) and get their input.

Once everyone has agreed to it, sign the contract and have others sign it too.

Congratulations! You have just filled out your first treatment contract!