

## Ulysses (and his brothers)

You know it yourself: During depression your judgment may be off, and your perception of yourself can be skewed. Sometimes other people are better friends to us than we are to ourselves. For this reason, it can be useful to get the input of others when thinking about care decisions. This can be done in three ways:

- **Verbal agreements.** If you just wish to give someone informal permission to let you (or your physician) know when you are behaving differently, a simple verbal agreement may be all that is necessary. *“Joan, you always seem to know when I’m getting depressed before I do. I’d like you to tell me if you notice this happening. If I get angry, remind me that I gave you permission to do it.”*
- **Written agreements.** Perhaps a verbal agreement runs the risk of misunderstandings, or perhaps you have more detailed instructions you would like to convey. In this case, you may wish to write down a) exactly what you want people to do, and b) exactly what events should trigger them to do it. *“Should I begin showing the signs of depression I have mentioned, I want Fred to alert Dr. Cheung (555 1234) immediately.”* Everyone involved gets a copy of the agreement. The intent is to create a clear and specific set of guidelines for all involved, but not for it to become a legally-binding document.
- **Legal agreements.** Most jurisdictions have legislation outlining the requirements for a written agreement to be legally binding. These agreements can, for example, assign legal responsibility for decisions regarding your care to a specific individual in the event of your own incapacity. Because of their legal power, these agreements need to be carefully thought through. They are not necessary for most people who suffer from depression. Some people who have bipolar disorder, however, find them extremely helpful – especially in coping with the loss of impulse control associated with mania.

The term given to these advance directives is the Ulysses Contract. The name refers to Ulysses’ instruction to his crew to tie him to the mast of his ship and ignore his requests for release so that he would not be tempted by the song of the Sirens to steer his ship off course. The idea is to transfer some responsibilities from you to others during times when your own judgment may be affected. In some jurisdictions the term is used to refer to legal advance care directives, while in others it refers mainly to written but nonlegal agreements.

If you think that a legal agreement is necessary given your history, you should consult professional advice in your region. Here we will consider primarily informal written agreements. Such an agreement might include the following:

- A list of the people involved in the agreement, and their contact information (such as telephone number).
- The overall purpose of the agreement. For example, *“... to provide my family and care providers with clear guidelines for my care in the event that I show signs of significant mania or depression.”*

- Your current treatment regimen, including the medications you take and the professionals you see.
- Special instructions/information for care providers. The agreement might list medical conditions, past medical problems, food and drug allergies, and so on.
- The changes that should spark action on your behalf. For example, your typical signs of depression or mania.
- Actions to be taken. These include who should be contacted, which professionals should be informed, whom your physician can inform about your care, and whether anyone can make decisions on your behalf.
- A term for the agreement. Perhaps you don't want the agreement to sit around and be used 20 years from now. *"This agreement is in effect until two years from this date \_\_\_\_\_, unless extended by me in writing."*

These possibilities do not take the specifics of your own situation into account. Most people find they do not require a particularly elaborate or formal agreement. If you develop one, however, you should consult experts in your area to clarify the legal implications. If you don't want an agreement to be legally binding you should ensure that this is spelled out in the document, or that you clearly distinguish your agreement from one bearing legal weight.

Based on this description, is there anyone with whom you would like to make a verbal, written, or legal agreement about your care or condition? Who is it, and what type of agreement seems like the best idea?

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What would you like to include in your agreement?

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If you have concerns about the legal implications of your agreement, or want help writing up a legal document, where could you get some advice?

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