Understanding mental health problems
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Mental health problems affect around one in four people in Britain.

This booklet is for anyone who experiences a mental health problem, and your friends and family. It explains what mental health problems are, what may cause them, and the many different kinds of help, treatment and support that are available.
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What are mental health problems?

Mental health problems can affect the way you think, feel and behave. They affect around one in four people in Britain, and range from common mental health problems, such as depression and anxiety, to more rare problems such as schizophrenia and bipolar disorder. A mental health problem can feel just as bad, or worse, as any other physical illness – only you cannot see it.

There are a lot of different approaches to how mental health problems should be diagnosed, what causes them and which treatments are most effective. And, unfortunately, there is still widespread stigma and discrimination towards people with mental health problems, and misunderstanding about what different diagnoses mean.

However, despite these challenges, it is possible to recover from a mental health problem and live a productive and fulfilling life.

Cultural perspectives on mental health problems

Different cultures have different approaches to mental health and mental illness. Most Western countries agree on a similar set of clinical diagnoses and treatments for mental health problems. However, cultures in which there are other traditions or beliefs may not use these terms.

Depending on the culture you grew up in, you might be more familiar with terms like 'poor emotional health' or 'poor emotional wellbeing' to describe your experiences, and have different ideas about how best to cope. And in many cultures, mental health is closely associated with religious or spiritual life. How you understand your own mental health, and any problems you experience, will be personal to you.
What kinds of mental health problems are there?

There are many different mental health problems, and many symptoms are common to more than one diagnosis. So you may experience the symptoms of more than one mental health problem at once.

**Depression**

Depression is a feeling of low mood that lasts for a long time and affects your everyday life. It can make you feel hopeless, despairing, guilty, worthless, unmotivated and exhausted. It can affect your self-esteem, sleep, appetite, sex drive and, sometimes, your physical health. In its mildest form, depression doesn’t stop you leading a normal life, but it makes everything harder to do and seem less worthwhile. At its most severe, depression can make you feel suicidal, and be life-threatening.

There are also some common specific forms of depression, such as:

- **postnatal depression (PND)** – depression that can develop from between two weeks to up to two years after becoming a parent. It's usually diagnosed in mothers, but can affect partners too.
- **seasonal affective disorder (SAD)** – depression that is related to day length and usually (but not always) occurs in the winter.

> Depression feels like I am locked in a black room inside myself.

(See Mind's booklets Understanding depression, Understanding postnatal depression and Understanding seasonal affective disorder.)

**Anxiety**

Anxiety refers to strong feelings of unease, worry and fear. Because occasional anxiety is a normal human experience, it's sometimes hard to know when it's becoming a mental health problem – but if your feelings of anxiety are very strong, or last for a long time, they can be overwhelming.
You might experience:

- **constant worrying** about things that are a regular part of everyday life, or about things that aren’t likely to happen.
- **unpleasant physical symptoms** such as sleep problems, panic attacks, an increased heartbeat, an upset stomach, muscle tension or feeling shaky.
- **a specific anxiety disorder**, such as generalised anxiety disorder (GAD), panic disorder, a phobia, obsessive-compulsive disorder (OCD) or post-traumatic stress disorder (PTSD).

(See Mind's booklet *Understanding anxiety and panic attacks* and *Understanding post-traumatic stress disorder.*

**Obsessive-compulsive disorder (OCD)**

OCD is a type of anxiety disorder. The term is often misused in daily conversation – for example, you might hear people talk about being 'a bit OCD', if they like things to be neat and tidy. But the reality of this disorder is a lot more complex and serious.

OCD has two main parts:

- **obsessions** – intrusive thoughts, ideas or urges that repeatedly appear in your mind. For example, thinking that you have been contaminated by dirt and germs, or worrying that you might hurt someone.
- **compulsions** – repetitive activities that you feel you have to do. This could be something like repeatedly washing something to make sure it’s clean or repeating a specific phrase in your head to prevent harm from coming to a loved one.

The aim of a compulsion is to relieve the intense anxiety caused by obsessive thoughts. However, the process of repeating these compulsions is often distressing in itself, and any relief you feel is often short-lived.

(See Mind's booklet *Understanding obsessive-compulsive disorder.*)
What kinds of mental health problems are there?

Phobias
A phobia is an extreme form of fear or anxiety triggered by a particular situation (such as going outside) or object (such as spiders), even when there is no danger. A fear becomes a phobia if it lasts for more than six months, and has a significant impact on how you live your day-to-day life. For example, you may begin to organise your life around avoiding the thing that you fear.

(See Mind's booklet Understanding phobias.)

Eating problems
Eating problems aren’t just about food. They can be about difficult things in your life and painful feelings, which you may be finding hard to express, face or resolve. Focusing on food can be a way of disguising these problems, even from yourself.

The most common eating problems are:
- **anorexia** – not allowing yourself to eat enough food to get the energy and nutrition you need to stay physically healthy. Sometimes people assume that anorexia is about slimming and dieting, but it is often connected to very low self-esteem, negative self-image and feelings of intense distress.
- **bulimia** – finding that you eat large amounts of food all in one go, often because you are feeling upset or worried (this is called bingeing); then feeling deeply guilty or ashamed, and taking steps to get rid of the food you have eaten (this is called purging).
- **binge eating disorder** – feeling that you can’t stop yourself from eating, even when you want to. This is sometimes described as having a food addiction or compulsive eating.
- **eating disorder not otherwise specified (EDNOS)** – this diagnosis means you meet some of the criteria for one of the above disorders, but not all of them.

(See Mind's booklet Understanding eating problems.)
Bipolar disorder

Bipolar disorder (previously called manic depression) mainly affects your mood. With this diagnosis you are likely to have times when you experience:

- manic or hypomanic episodes (feeling high)
- depressive episodes (feeling low)
- potentially some psychotic symptoms during manic or depressed episodes.

Everyone has variations in their mood, but in bipolar disorder these changes can be very distressing and have a big impact on your life. You may feel that your high and low moods are extreme, and that swings in your mood are overwhelming. In between, you might have stable times where you experience fewer symptoms.

“At first it’s] loss of interest in doing anything. I have to force myself to do tasks. Then it’s as though I'm in catch up. Mind full of ideas, feel fantastic, doing three things at once.”

(See Mind's booklet Understanding bipolar disorder.)

Schizophrenia

You may receive a diagnosis of schizophrenia if you have symptoms such as:

- psychotic experiences, for example hallucinations or delusions
- disorganised thinking
- a lack of interest in things
- feeling disconnected from your feelings
- wanting to avoid people.

This diagnosis can be controversial as not all people who experience such things agree that they have a mental health problem, or that the term 'schizophrenia' is the best way to describe their experiences.
Personality disorders

Personality disorders are a type of mental health problem where your attitudes, beliefs and behaviours cause you longstanding problems in your life. There are several different types of personality disorder, but the two most commonly diagnosed ones are:

- **borderline personality disorder (BPD)** – you might be given this diagnosis if you experience things like intense, changeable moods, an overwhelming fear of abandonment, an unstable sense of identity and impulsive, risky behaviour. Some people prefer the term ‘emotionally unstable personality disorder’ (EUPD) to BPD, as they feel it's a more accurate description of the symptoms.

- **antisocial personality disorder (ASPD)** – you might be given this diagnosis if you experience things like disregard for the feelings and needs of others, manipulating others for your own gain, difficulty maintaining relationships, feeling little guilt for your actions and feeling easily bored or aggressive.

**“Having BPD is like the emotional version of being a burn victim. Everything in the world hurts more than it seems to for everyone else and any 'thick skin' you are supposed to have just isn't there.”**

If you're given a diagnosis of a personality disorder, it's understandable to feel like you're being told that who you are is 'wrong'. But a personality disorder does not mean that you're a bad person, or that you have a bad personality.

(See Mind's booklets *Understanding personality disorders* and *Understanding borderline personality disorder.*
Other symptoms, feelings and behaviours

In addition to the diagnoses listed above, these are some common symptoms, feelings and behaviours which are often associated with mental health problems.

**Panic attacks**

Panic attacks are an exaggeration of your body’s normal response to fear, stress or excitement. These are bouts of intense, often very frightening symptoms, usually lasting between 5 and 20 minutes. You may experience overwhelming physical sensations, such as:

- a pounding heartbeat or chest pains
- sweating and nausea (feeling sick)
- feeling faint and unable to breathe
- shaky limbs, or feeling like your legs are turning to jelly.

It’s easy to mistake these for the signs of a heart attack or another serious medical problem.

“I’d hyperventilate and cry with panic as the feeling that I was going to fall unconscious was so convincing.”

**Self-harm**

Self-harm is a way of expressing very deep distress, where you take actions to cause yourself physical pain. You may not know why you self-harm, but it can be a means of expressing feelings that you can’t put into words or think clearly about. After self-harming you may feel a short-term sense of release, but the cause of your distress is unlikely to have gone away.

(See Mind's booklet *Understanding self-harm.*)
Suicidal feelings

Many people experience suicidal thoughts and feelings as part of a mental health problem. They can be unpleasant, intrusive and frightening, but having thoughts about suicide doesn’t necessarily mean that you intend to act on them. Lots of people think about suicide, and don't ever go on to attempt to take their own lives.

However, if you start to feel you may act on suicidal feelings and become unable to keep yourself safe then this a mental health emergency. It's important to treat it as seriously as you would any physical health emergency, and seek urgent help.

(See Mind's booklets How to cope with suicidal feelings and How to support someone who feels suicidal.)

Psychotic experiences

Psychotic experiences or episodes (also called psychosis) are when you perceive or interpret events very differently from people around you. This could include:

• hallucinations, such as hearing voices or having visions
• delusions, such as paranoia or delusions of grandeur.

You may experience psychosis as part of a diagnosed mental health problem, but it's also possible to have a psychotic experience without meeting the criteria for any particular diagnosis.

(See Mind's online booklet Understanding psychosis.)
Understanding mental health problems

Could I be ‘going mad’?

Experiencing a mental health problem is often upsetting and frightening, particularly at first. If you become unwell, you may feel that it's a sign of weakness, or that you are 'losing your mind', and that it's only going to get worse. You may be scared of being seen as 'mad' by other people in your life. You may also be afraid of being locked up in an institution.

These fears are often reinforced by the negative (and often unrealistic) way that people experiencing mental health problems are shown on TV, in films and by the media. These fears may stop you from talking about your problems, or seeking help. This, in turn, is likely to increase your distress and sense of isolation.

However, in reality, mental health problems are a common human experience. Most people know someone who has experienced a mental health problem. They can happen to anyone, at any time. And it's likely that, when you find a combination of self-care, treatment and support that works for you, you will get better.

What causes mental health problems?

Mental health problems can have a wide range of causes. In most cases, no one is sure precisely what the cause of a particular problem is. It's likely that for many people there is a combination of factors, although some people may be more deeply affected by certain things than others.

The following factors could potentially trigger a period of poor mental health:

- childhood abuse, trauma, or neglect
- social isolation or loneliness
- experiencing discrimination and stigma
- the death of someone close to you
- severe or long-term stress
- unemployment or losing your job
• social disadvantage, poverty or debt
• homelessness or poor housing
• caring for a family member or friend
• a long-term physical health condition
• drug and alcohol misuse
• domestic violence or other abuse as an adult
• significant trauma as an adult, such as military combat, being involved in a serious accident or being the victim of a violent crime
• physical causes – for example, a head injury or a condition such as epilepsy can have an impact on behaviour and mood (it is important to rule out causes such as this before seeking further treatment for a mental health problem)
• genetic factors – researchers are currently investigating whether there might be a genetic cause of various mental health problems but there is no clear proof yet.

How are mental health problems diagnosed?

To diagnose a mental health problem, doctors will look at:
• what symptoms you're experiencing (groupings of certain symptoms suggest different diagnoses)
• how long you've been experiencing these symptoms
• the impact they're having on your life.

To do this they may ask you questions about your mood, thoughts and behaviours – sometimes by using questionnaires or forms. They will base your diagnosis on what you describe. For example, if you tell your doctor you've been experiencing low mood, low energy and a lack of interest in usual activities for more than two weeks, this may lead to a diagnosis of depression. If your symptoms change you might find you are given different diagnoses over time.
Who can diagnose me?

For common problems such as depression and anxiety, your GP may be able to give you a diagnosis after one or two appointments. For less common problems you’ll need to be referred to a mental health specialist (such as a psychiatrist), and they may want to see you over a longer period of time before making a diagnosis.

After overcoming the initial shock of the diagnosis, it is actually a blessing because now I know what I need to do to get better.

What if I don't find my diagnosis helpful?

Receiving a diagnosis can be a positive experience. You might feel relieved that you can put a name to what's wrong, and it can help you and your doctor discuss what kind of treatment might work best for you.

However, a lot of people, including some doctors, feel the medical model of diagnosis and treatment is not enough. For example, you might feel that the diagnosis you're given doesn't fully fit your experiences, or that it's simplistic and puts you in a box. Other factors – such as your background, lifestyle and other personal circumstances – may be just as important in understanding what you're experiencing and working out how best to help you feel better.

A diagnosis does not have to shape your entire life, and may come to be a relatively minor part of your identity.

Are people with mental health problems dangerous?

Some people think that there is an automatic link between mental health problems and being a danger to others. This is an idea that is largely reinforced by sensationalised stories in the media. However, the most common mental health problems have no significant link to violent behaviour. The proportion of people living with a mental health problem who commit a violent crime is extremely small.
There are lots of reasons someone might commit a violent crime, and factors like drug and alcohol misuse are far more likely to be the cause of violent behaviour. But many people are still worried about talking about how they're feeling, or seeking help, because of the fear and stigma of being seen as dangerous.

It's important to remember that experiencing difficult thoughts, feelings and behaviours when you're unwell is common, and it's extremely unlikely to mean you may harm another person.

How can I help myself?

Self-care techniques and general lifestyle changes can help manage the symptoms of many mental health problems, and may also help to prevent some problems from developing or getting worse. If they work well for you then you may find you don't need any formal treatment.

However, it’s important to remember that there is unlikely to be an instant solution. Recovering from a mental health problem is likely to take time, energy and work. Here are some tips for looking after yourself that you might find helpful.

**Nourish your social life**

Feeling connected to other people is important. It can help you to feel valued and confident about yourself, and can give you a different perspective on things. If you can, try to spend more time with your friends and family – even a phone call can make a difference.

If you don't have supportive friends and family around you and are feeling isolated, there are other ways you can make connections. For example, you could try joining a group like a book club or local community group to meet new people.
I try to have a friendly conversation everyday, even if it is online with distant friends.

Try peer support

When you experience a mental health problem it can feel like no one understands. Peer support brings together people who’ve had similar experiences to support each other. This can offer many benefits, such as:

- feeling accepted for who you are
- increased self-confidence
- meeting new people and using your experiences to help others
- finding out new information and places for support
- challenging stigma and discrimination.

You can contact Mind’s Infoline for details of local support groups near you, or try online peer support like Mind’s Elefriends community (see ‘Useful contacts’ on p.31). (See Mind’s online booklet How to stay safe online for tips on using online support safely.)

Make time for therapeutic activities

There are various techniques and therapies you can safely practise on your own. For example:

- **relaxation** – you may already know what helps you relax, like having a bath, listening to music or taking your dog for a walk. If you know that a certain activity helps you feel more relaxed, make sure you set aside time to do it. (See Mind’s online booklet Exploring relaxation for more tips.)

- **mindfulness** – mindfulness is a therapeutic technique that involves being more aware of the present moment. This can mean both outside, in the world around you, and inside, in your feelings and thoughts. Practising mindfulness can help you become more aware of your own moods and reactions.

- **ecotherapy** – getting out into a green environment, such as the park or the countryside, is especially helpful. If you have a garden,
you may want to spend more time there. If you like gardening, there may be an ecotherapy group near you. (See Mind's booklet *Making sense of ecotherapy* for more tips.)

These activities can be particularly valuable if you don't want to try medication or talking treatments, or you're having to wait a while for treatment on the NHS.

"I really have to remember to be kind to myself and actually try to function when I'm unwell. Otherwise things spiral even faster."  

**Look after your physical health**

Taking steps to look after your physical health can help you manage your mental health too.

- **get enough sleep** – this can help you have the energy to cope with difficult feelings and experiences. (See Mind's booklet *How to cope with sleep problems* for more tips.)
- **eat healthily** – what you eat, and when you eat, can make a big difference to how well you feel. (See Mind's booklet *Exploring food and mood* for more tips.)
- **keep physically active** – doing regular exercise can be very effective in lifting your mood and increasing your energy levels. It doesn't have to be very strenuous or sporty to be effective – to start with you could try gentle exercise like going for a short walk, yoga or swimming. The important thing is to pick something you enjoy doing, so you're more likely to stick with it. If you are physically disabled, you may want to contact a local disability group or Disability Rights UK (see ‘Useful contacts’ on p.31) for information about exercises you might be able to do. Alternatively, ask your doctor for advice. (See Mind's booklet *How to improve your wellbeing through physical activity and sport* for more tips.)
• **look after yourself** – when you're experiencing a mental health problem, it's easy for personal care to not feel like a priority. But small things, like taking a shower and getting fully dressed, whether or not you're going out of the house, can make a big difference to how you feel.

• **avoid drugs and alcohol** – while you might want to use drugs or alcohol to cope with difficult feelings, in the long run they can make you feel a lot worse. You can contact Turning Point for information and support to stop using drugs and alcohol (see ‘Useful contacts’ on p.32).

> *Exercise is hugely beneficial, in whatever shape or form. Keep on moving.*

Mind's programme Get Set to Go is supporting people living with a mental health problem to get into sport and exercise. Contact your local Mind to see if they're running any groups (see ‘Useful contacts on p.31’).

### Contact a specialist organisation

If you have a diagnosis, or would like support in a specific area, try contacting a specialist organisation for help. For example:

• **Depression Alliance** supports people living with depression and runs a range of support groups.

• **Hearing Voices Network** runs an online forum and local groups across the country.

• **Mind Out** offers mental health advice and support for anyone who identifies as LGBTQ+.

• **No Panic** offers help and advice about anxiety disorders, including a helpline and recovery groups.

• **YoungMinds** supports children and young people with their mental health.

For further details on these organisations, see ‘Useful contacts’ on pp.31–32.
Challenge stigma and discrimination

Unfortunately, not everyone understands mental health problems. You might find that some people hold misconceptions about you based on your diagnosis, or use language you find offensive or hurtful. This can be very upsetting, especially if someone who feels this way is a friend, colleague, family member or a health care professional. But it's important to remember that you aren't alone, and you don't have to put up with people treating you badly.

Here are some options for you to think about:

- **show people Mind's information** to help them understand more about what your diagnosis really means.
- **know your rights** – search ‘legal rights’ on Mind’s website for information.
- **contact an advocate** – an advocate is someone who can support your choices and help you make your voice heard. (See Mind’s online booklet *The Mind guide to advocacy.*)
- **get involved in a campaign** – Time to Change and Time to Change Wales organise national campaigns to end stigma and discrimination towards mental health problems (see ‘Useful contacts’ on p.32).

What treatments are available?

Recommended treatments for different conditions usually follow official clinical guidelines issued by the National Institute for Health and Care Excellence (NICE) (see ‘Useful contacts’ on p.32). These guidelines are based on published evidence, expert contributions and real life experiences. But although health professionals are encouraged to follow these guidelines, unfortunately access to treatment varies enormously across the NHS.
The two most common forms of treatment offered though the NHS are talking treatments and medication. There are also alternative treatments available, which you may wish to try.

NHS Choices provides more information about treatments and lets you search for services in your area (see ‘Useful contacts’ on p.32).

**Talking treatments**

Talking treatments provide a regular time and space for you to talk about your thoughts and experiences and explore difficult feelings with a trained professional. This could help you to:

- deal with a specific problem
- cope with upsetting memories or experiences
- improve your relationships
- develop more helpful ways of living day-to-day.

You may hear various terms used to describe talking treatments, including counselling, psychotherapy, therapy, talking therapy or psychological therapy. These terms are all used to describe the same general style of treatment.

There are many different types of therapy available in the UK and it’s important to find a style and a therapist that you feel comfortable with. For example, if you're referred for a talking treatment through the NHS you're likely to be offered cognitive behavioural therapy (CBT). This is a relatively short-term treatment that focuses on how your thoughts, beliefs and attitudes affect your feelings and behaviour, and aims to teach you practical skills for dealing with your problems.

You may also access talking treatment through the private sector, although this usually means paying a fee. The British Association for Counselling and Psychotherapy (BACP) provides a list of registered counsellors and psychotherapists (see ‘Useful contacts’ on p.31).
(See Mind's booklets *Making sense of talking treatments* and *Making sense of cognitive behavioural therapy* for more information.)

"**Talking things through with a counsellor or therapist really helps me to see things more rationally and make connections between reality and inside my head.**"

**Medication**

The most common type of treatment available is prescription medication. These drugs don’t cure mental health problems, but they can ease many symptoms. Which type of drug you are offered will depend on your diagnosis. For example:

- **antidepressants** – these are mostly prescribed for people experiencing depression, though you might also be offered an antidepressant if you're experiencing anxiety, OCD, eating problems, or depression as part of another mental health problem.
- **minor tranquillisers or sleeping pills** – these can help you sleep, or calm you down if you experience anxiety (sometimes called anti-anxiety medication).
- **mood stabilisers** – these help stabilise your mood when you experience extreme mood swings, for example if you have a diagnosis of bipolar disorder.
- **antipsychotics** – these reduce distressing symptoms of psychosis, but are sometimes also prescribed for people experiencing bipolar disorder as they can help control mania.

Many people find these drugs helpful, as they can lessen your symptoms and allow you to cope at work and at home. However, drugs can have unpleasant side effects that may make you feel worse rather than better. They can also be difficult to withdraw from, or cause you physical harm if taken in too high a dose.

Before prescribing you any medication, your doctor should explain to you what the medication is for, and discuss any possible side effects and alternative treatment options.
Antidepressants helped once I found the right ones.

**Arts therapies**

Arts therapies are a way of using the arts – music, painting, dance or drama – to express and understand yourself in a therapeutic environment with a trained therapist. Arts therapies can be especially helpful if you find it difficult to talk about your problems and how you are feeling.

**Complementary and alternative therapies**

Some people find complementary and alternative therapies helpful to manage stress and other common symptoms of mental health problems. These can include:
- hypnotherapy
- massage
- acupuncture.

The clinical evidence for these therapies is not as robust as it is for other treatments, but you may find they work for you.

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**What support services are available?**

If your mental health problems are severe or longer lasting, or the treatment your doctor has offered you isn't working, they can refer you to specialist mental health services.

**Community mental health teams (CMHTs)**

CMHTs support people with mental health problems living in the community, and also their carers. The team may include a community psychiatric nurse (CPN), a psychologist, an occupational therapist, a counsellor and a community support worker, as well as a social worker.
Often, a member of the team will be appointed as your care coordinator, to keep in regular contact with you and help plan your care.

**Social care**

Social care is any care or support you need to carry out day-to-day tasks that you are finding difficult. This could include help with managing money or improving relationships, transport to attend appointments or services, or assistance with benefits and housing applications. You can ask your doctor or CMHT to refer you to social services, or you can contact them directly to ask for an assessment.

**Residential care**

If you aren’t able to cope on your own at home, there are other options. You can talk through your options with your support worker(s), carers and mental health team. You might be able to access:

- **hostels** – these are short-term accommodation, with supervision, to help you until you can live more independently.
- **residential care homes** – these offer a much higher level of support for people with severe mental health problems.
- **therapeutic communities** – these are for short stays, with group or individual therapy as part of their rehabilitation programmes.
- **supported housing schemes** – these enable you to live independently, in furnished accommodation, with the back-up of a mental health support worker in case you need extra help.

(See Mind’s online booklet *The Mind guide to housing and mental health* for more information.)

**Crisis intervention**

In most areas, you should have access to a crisis resolution and home treatment team (CRHT). These teams can support you through a crisis at home.
If you do not have access to a local crisis service, you could:

- get an emergency appointment with your doctor
- call the Samaritans (see ‘Useful contacts’ on p.32)
- contact your CMHT if you have been referred to it previously
- go to the Accident and Emergency (A&E) department at a local hospital or call 999 if you are at immediate risk.

(See Mind’s online booklet *The Mind guide to crisis services* for more information.)

### Campaigning for excellent crisis care

While we know that excellent crisis services do exist, unfortunately they’re not consistently available across the UK. We know how frustrating and difficult it can be to cope with services that don’t provide the precise help you need, exactly when you need it. That’s why we’re campaigning to improve crisis care across the country.

To find out more and see how you can get involved, search ‘crisis care’ on Mind’s website.

“I did take myself to the crisis team at A&E and got some help, [although I was] left to sit on my own for two hours. [After waiting] I was put in touch with the right people – they came to see me while I was there and I had a psych evaluation.”

### Hospital treatment

Hospital inpatient services support people with severe mental health problems, or people who are experiencing a crisis. The majority of hospital admissions are voluntary, but if you are assessed and judged to be at risk of harming yourself or others, you can be detained under a section of the Mental Health Act 1983 (often called being sectioned).

How long you stay in hospital will depend on your personal situation.
Being treated in hospital can mean you have faster access to treatment, round-the-clock support and are kept safe during a crisis. Some people find hospital a positive experience, while others find it unpleasant as you might be far away from your support network, in an unfamiliar place or admitted against your will.

If you are treated in hospital, it's important to know your rights. (See Mind's online booklet *The Mind guide to the Mental Health Act 1983* for more information.)

"It began changing for me when one hospital suggested that there was a way forward... they were able to offer me far more time than individuals had."

How do I ask for help?

It's common to feel unsure about seeking support for your mental health, and to feel like you ought to wait until you can't handle things on your own. But it's always ok for you to seek help – even if you're not sure you are experiencing a specific mental health problem.

The best way to start is normally by making an appointment to talk to a health care professional, such as your doctor. Your friends and family may be able to offer you support day-to-day, but only your doctor can make a diagnosis, prescribe you medication or refer you to other NHS treatments and services.

What should I say to my doctor?

When you talk to your doctor it can be helpful to:

- be honest and open
- focus on how you feel, rather than what diagnosis you might meet
- try to explain how you’ve been feeling over the past few months or weeks, and anything that has changed
• use words and descriptions that feel natural to you – you don’t have to say specific things to get help
• try not to worry that your problem is too small or unimportant – everyone deserves help and your doctor is there to support you.

Be aware that doctor's appointments are often short, so it's a good idea to prepare in advance. You could:
• write down what you want to say, and take your notes in with you. Using short bullet points rather than long paragraphs can help ensure you cover all the points you want to.
• highlight or print out any information you’ve found that helps you explain how you’re feeling.
• think about taking someone with you to support you, like a close friend or family member.

You can use an online app like Doc Ready to help you think through what you’d like to talk to your doctor about and prepare for your appointment (see ‘Useful contacts’ on p.31).

(See Mind’s booklet The Mind guide to seeking help for a mental health problem for more information.)

“The first time I went to my GP about my depression, I was completely terrified. I had suffered in silence for six months, and was so ashamed that I couldn't 'fix' it myself. Thankfully my GP was lovely and really seemed to care.”
Will I recover?

It is possible to recover from mental health problems and many people do – especially after accessing support. Your symptoms may return from time to time, but when you've discovered which self-care techniques and treatments work best for you, you're more likely to feel confident in managing them.

If you're experiencing a more serious mental health problem, it's still very possible to find ways to manage your symptoms. For many people, getting better doesn't necessarily mean going back to how your life was before, but learning new ways to live your life the way you want to, and gaining control over areas of your life that might have felt out of your control before.

However, it's important to remember that recovery is a journey, and it won't always be straightforward. You might find it more helpful to focus on learning more about yourself and developing ways to cope, rather than trying to get rid of every symptom of your mental health problem. What recovery means to you will be personal, but for most people, the most important thing is to find ways to live the kind of life you want.

Further information about living with particular diagnoses is available in Mind’s Understanding booklets.

"With time you do learn to cope... I have struggled for 15 years with [my mental health problem], but every year I seem to get stronger and better at coping with it!"
What can friends and family do to help?

This section is for friends and family who would like to support someone who is experiencing a mental health problem.

It can be very difficult to see someone who you care about becoming distressed and unwell, but you don’t need to be an expert on mental health to offer support. Often, small everyday actions can make the biggest difference.

Show your support

If you know someone has been unwell, don’t be afraid to ask how they are. They might want to talk about it, or they might not. But just letting them know they don’t have to avoid the issue with you is important. Spending time with your loved one lets them know you care, and can help you understand what they’re going through.

"Sometimes all you need is a hug and for someone to tell you that you're going to get there."

Ask how you can help

Everyone will want support at different times and in different ways, so ask how you can help. It might be useful to help keep track of medication, or give support at a doctor’s appointment. If your friend wants to get more exercise, you could do this together, or if your partner is affected by lack of sleep, you could help them get into a regular sleeping pattern.

Be open-minded

Phrases like ‘cheer up’, ‘I’m sure it’ll pass’ and ‘pull yourself together’ definitely don’t help. Try to be non-judgemental and listen. Someone experiencing a mental health problem often knows best what's helpful for them.
What can friends and family do to help?

Leave out the 'cheer up' comments, they don't help and force my low moods lower as my condition is being made a joke of.

Don’t just talk about mental health
Keep in mind that having a mental health problem is just one aspect of your friend or family member's life. Most people don’t want to be defined by their mental health problem, so keep talking about the things you've always talked about together.

For me, it is good to have them there to talk to me about other things, and take my mind off negative thoughts.

Show trust and respect
Trust and respect between you and your friend or family member are very important – they help to rebuild and maintain a sense of self-esteem, which a mental health problem can seriously damage. This can also help you to cope a bit better if you can see your support having a positive impact on the person you care about.

Look after yourself
Supporting someone else can sometimes be stressful. Making sure that you look after your own wellbeing can mean that you have the energy, time and distance you need to be able to help. For example:

- **Set boundaries and don't take too much on.** If you become unwell yourself you won't be able to offer as much support.
- **Share your caring role with others, if you can.** It's often easier to support someone well if you're not doing it alone.
- **Talk to someone about how you’re feeling.** You may want to be careful about how much information you share about the person you’re supporting, but talking about your own feelings with someone you trust can help you feel supported too.
If your friend or relative has been given a needs assessment, you may be entitled to have your needs as a carer assessed and taken into account. (See Mind’s booklet *How to cope as a carer.*) You can also visit the Carers UK website for more information (see ‘Useful contacts’ on p.31).
<table>
<thead>
<tr>
<th><strong>Useful contacts</strong></th>
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<tbody>
<tr>
<td><strong>Mind Infoline</strong></td>
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<tr>
<td>tel: 0300 123 3393</td>
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<tr>
<td>Open from 9am to 6pm, Monday to Friday.</td>
</tr>
<tr>
<td>text: 86463</td>
</tr>
<tr>
<td>email: <a href="mailto:info@mind.org.uk">info@mind.org.uk</a></td>
</tr>
<tr>
<td>web: mind.org.uk</td>
</tr>
<tr>
<td>Offers mental health information and support. We can provide details of Mind’s Legal Line and help you find local services near you, including local Minds.</td>
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<tr>
<td><strong>Disability Rights UK</strong></td>
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<tr>
<td>web: disabilityrightsuk.org</td>
</tr>
<tr>
<td>Information and support for people living with a disability, including contact details of local disability groups.</td>
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<tr>
<td><strong>British Association for Counselling and Psychotherapy (BACP)</strong></td>
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<tr>
<td>tel: 01455 883 300</td>
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<tr>
<td>web: itsgoodtotalk.org.uk</td>
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<tr>
<td>Information and details of accredited practitioners.</td>
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<tr>
<td><strong>Doc Ready</strong></td>
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<tr>
<td>web: docready.org</td>
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<tr>
<td>A free online tool that helps you prepare for speaking to your doctor.</td>
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<tr>
<td><strong>Carers UK</strong></td>
</tr>
<tr>
<td>tel: 0808 808 7777</td>
</tr>
<tr>
<td>web: carersuk.org</td>
</tr>
<tr>
<td>Independent information and support for carers.</td>
</tr>
<tr>
<td><strong>Elefriends</strong></td>
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<tr>
<td>web: elefriends.org.uk</td>
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<tr>
<td>A supportive online community for people experiencing a mental health problem.</td>
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<tr>
<td><strong>Hearing Voices Network</strong></td>
</tr>
<tr>
<td>tel: 0114 271 8210</td>
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<tr>
<td>web: hearing-voices.org</td>
</tr>
<tr>
<td>Information and support for people who hear voices or have other unshared perceptions.</td>
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<tr>
<td><strong>Mind Out</strong></td>
</tr>
<tr>
<td>web: mindout.org.uk</td>
</tr>
<tr>
<td>Brighton-based mental health charity, offering information and support for anyone who identifies as LGBTQ. Offers online chat and peer support.</td>
</tr>
</tbody>
</table>
### Useful contacts

**NHS Choices**  
web: nhs.uk  
Provides information on a wide range of health and social care topics. There is an online search tool to find NHS services near you.

**NICE (The National Institute for Health and Care Excellence)**  
web: nice.org.uk  
Evidence-based guidelines on treatments.

**No Panic**  
helpline: 0844 967 4848 (10am–10pm)  
web: nopanic.org.uk  
Provides a helpline, step-by-step programmes, and support for those with anxiety disorders.

**Samaritans**  
24-hour helpline: 116 123 (freephone)  
email: jo@samaritans.org  
web: samaritans.org  
Freepost: RSRB-KKBY-CYJK  
PO Box 90 90  
Stirling FK8 2SA  
Emotional support for anyone feeling down, experiencing distress or struggling to cope.

**Time to Change**  
tel: 020 8215 2356  
web: time-to-change.org.uk (England)  
web: timetochangewales.org.uk (Wales)  
Campaign to end stigma and discrimination against people with mental health problems.

**Turning Point**  
tel: 020 7481 7600  
web: turning-point.co.uk  
Provides services for people with drug, alcohol and mental health problems.

**YoungMinds**  
parent helpline: 0808 802 5544  
web: youngminds.org.uk  
Information about mental health problems for both parents and young people.
We publish over 40 printed titles and many more online resources on a wide range of topics, all available to read and download for free at mind.org.uk

If you found this booklet useful, you may be interested in the following titles:

- Understanding depression
- Understanding anxiety and panic attacks
- How to improve and maintain your mental wellbeing
- How to manage stress
- The Mind guide to seeking help for a mental health problem

You can telephone **0844 448 4448** or email **publications@mind.org.uk** and request up to three of our professionally printed information booklets free of charge. Additional copies are charged at £1 each plus delivery.
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web: mind.org.uk/donate

This information was written by Katherine Dunn.

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References available on request
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We're Mind, the mental health charity for England and Wales. We believe no one should have to face a mental health problem alone. We're here for you. Today. Now. We're on your doorstep, on the end of a phone or online. Whether you're stressed, depressed or in crisis. We'll listen, give you advice, support and fight your corner. And we'll push for a better deal and respect for everyone experiencing a mental health problem.

Mind Infoline: 0300 123 3393
info@mind.org.uk
mind.org.uk

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