

how to



How to cope with suicidal feelings

This booklet explains why you may have suicidal feelings and provides some options to help you look forward and break the cycle of your negative thoughts.

Note: Please note that this booklet is not aimed to help you through a serious crisis. If you feel in acute crisis you could call Samaritans on 08457 90 90 or go to your local hospital's A&E department.

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A message from Penny Abraham who has kindly supported the production of this booklet. "Dedicated to Aaron, Hannah and Clive Abraham, who struggled with suicidal thoughts – each in their own way. May those who read this booklet find the comfort they seek."

What are suicidal feelings like?

Suicidal feelings can be terrifying.

If you can no longer see why you should go on living, your feelings can seem unbearable. You may hate yourself and believe that you are useless and not wanted or needed by anyone. You may feel rage, shame and guilt.

If you have had many painful experiences, particularly losses, you may blame yourself and feel that somehow it is all your fault and that you are a failure. You may feel overwhelmed; for example, by conflicts with family or friends. You may feel stuck in emotional pain and believe that there are no solutions to your problems.

If you feel powerless and that you can't change your situation and what is distressing you, the idea of suicide may give you a sense of being in control again. Depending on your beliefs, you could see 'nothingness', being reunited with loved ones or reincarnation as a relief and your preferred option.

You may not actually know why you feel suicidal, and think that you have no reason to want to kill yourself. Because of this, you may feel deeply guilty and ashamed, and start feeling even worse.

People kept telling me that I should be grateful because I had a lovely husband, a nice house, and two perfect children. This just made me feel more terrible and guilty for thinking about killing myself.

If you don't know the reasons why you feel suicidal, you may find it hard to believe that there could be a solution. You may start to think that death is your only option.

Whether you are aware of a cause or not, it can be difficult to tell others about what you are going through. Therefore you may avoid other people and feel annoyed if they approach you. If you have family and friends around, you may find it impossible to tell them how bad you feel. If you have been badly hurt by someone close to you, you may see suicide as a way of getting back at them. It is understandable to be angry with people who have hurt us, but suicide turns that anger in on ourselves.

What you may experience:

- sleeping badly and waking early
- a change in appetite
- weight loss or gain
- feeling cut off from your body or physically numb
- a loss of energy
- you may have stopped taking care of yourself e.g. neglecting your physical appearance.

Mixed feelings

You may be very clear that you want to die – or you may simply not care if you live or die. However, for most people, suicidal thoughts are confusing. As much as you want to die, you may also want a solution to your difficulties. You may want others to understand how you feel and hope that they can help. Yet, you may not feel able to talk to anyone who offers to help. Having such mixed feelings and being unsure about what to do can cause great anxiety.

You may be harming yourself by cutting, biting or burning your body. Perhaps you are getting into fights or taking extreme risks. You may also be overdosing on drugs, binging on alcohol or have developed anorexia or bulimia. However, even when you are not sure why you are self-harming, it is usually a way of trying to kill the pain you are feeling inside rather than a wish to actually kill yourself.

Why do I feel suicidal?

If you are feeling suicidal it is likely that you have been experiencing a growing sense of hopelessness and worthlessness over a period of time.

You will be more vulnerable to suicidal thoughts and feelings if you feel unable to solve the difficulties in your life. These may include:

- isolation or loneliness
- the breakdown of an important relationship
- being bullied at work, home or at school
- experiencing bereavement or other loss
- work problems, unemployment or poor job prospects
- adjusting to a big change, such as retirement or redundancy
- debt problems
- · being in prison
- pregnancy, childbirth or postnatal depression
- cultural pressures
- doubts about your sexual or gender identity
- facing discrimination
- a history of sexual or physical abuse
- long-term physical pain or illness
- mental health problems.

Long-term physical pain and illness

If you experience an illness or condition that causes a lot of physical pain, and is difficult to control with pain relief, you may feel depressed and think that you would be better off dead. You may not want to die; rather you may want to find a way of ending the physical pain. You may also feel particularly scared or down if you have been diagnosed with a serious condition, such as cancer, and are terrified of what it will be like to live with it or to go through unpleasant treatments.

Mental health problems

You may have suicidal thoughts while you are experiencing mental health problems – especially if you have a diagnosis of depression, borderline personality disorder, or psychotic disorders such as schizophrenia or bipolar disorder. However, it is not inevitable that any of these mental health problems will lead you to feeling suicidal.

Depression

The deeper your depression, the more likely it is that you will consider ending your life. However, you are more vulnerable to acting on your thoughts as you start to come out of your depression rather than when it is at its most severe. This is because you have more energy and motivation available at that stage. (See Mind's booklet *Understanding depression*.)

Borderline personality disorder

If you have been diagnosed with borderline personality disorder you may find it especially hard to cope with a stressful experience like losing a loved one or a job. You may feel out of control, paranoid or unreal. This can intensify thoughts of wanting to die. (See *Understanding borderline personality disorder*.)

Psychosis

If you have a psychotic disorder such as schizophrenia or bipolar disorder, your thoughts about wanting to die may be most related to depression, and particularly to feelings of hopelessness about the future.

If you hear voices urging you to kill yourself, this may contribute to your suicidal thoughts. However, you are more likely to act on your suicidal thoughts during your non-psychotic, depressed phase. If you have been diagnosed with bipolar disorder and have just come out of a manic phase, you may be feeling guilt, worthlessness and despair. This can trigger feelings of depression and suicidal thoughts. See *Understanding schizophrenia*, *Understanding bipolar disorder* and *Understanding psychotic experiences*.

Can I get help?

If you are thinking about suicide then you may believe that you no one can help you. You may be so deeply hurt or afraid that you feel out of reach. If you are filled with rage it can seem difficult to allow another person to make a difference. You may be refusing help as a way of punishing a person who has hurt you. If your anger has turned towards yourself and you feel self-hatred or guilt, you may believe that you don't deserve help.

Many people think about suicide, but the majority do not go on to kill themselves. Like them, you can help yourself and you can get help from other people.

You deserve help, no matter what. By reading this, you have already made a first step to looking for support and help. In the next two sections, you will find information about how and where you can get help from others. You will also find information about what you can do to help yourself. With some extra time, support and input from others, you may feel in a better position to consider your options and decide what to do.

• If you consider killing yourself, give yourself 24 hours breathing space. You have nothing to lose by this. That 24 hours has saved me many times.

What help is available?

Many patients ask their GP for help with emotional difficulties, so your doctor will be used to listening to these types of problems. They can refer you on for further treatment if this is something you want or need.

Your doctor should discuss all your treatment options with you, and your views and preferences should be taken into account when making decisions about your treatment.

Talking treatments

Talking treatments, including counselling and psychotherapy, can help you make sense of your feelings and explore ways to deal with what you are going through.

The aim is to help you find your own solutions, rather than giving you advice or telling you what to do. Many people find that talking to a person who is trained to listen can help release tension, and also help them view their difficulties in a different way. This can make it easier to see new options and solutions.

If you get therapy via your GP or the NHS, you may be offered cognitive behaviour therapy (CBT). This looks at how you can change any negative patterns of thinking or behaviour that may be causing you difficulties, and can change the way you feel. CBT tends to be short, taking six weeks to six months. (See Minds' booklet *Making sense of cognitive behaviour therapy.*)

Give yourself a chance. Yes, rational thought is difficult if not impossible when you're that low, but tell yourself that there are no second chances. Once you've killed yourself, there is no way back. That thought saved my life.

There are several other forms of talking treatments; for example, humanistic therapy, psychodynamic therapy, and mindfulness-based cognitive therapy. You will find more information about these and other types therapy, in Mind's booklet *Making sense of talking treatments*. You can also contact Mind Infoline for further information (See 'Useful contacts' on p.18)

Access to talking treatments

You have the right to ask your GP to refer you for a talking treatment. However, the availability of talking treatments varies from area to area.

Talking treatments are free on the NHS, and some voluntary organisations, including some local Minds, provide therapy and counselling free of charge or at a low cost. Because of this, they may also have a long waiting list.

If you can afford it, you may choose to see a therapist privately. Private therapists should be appropriately trained and registered and/or accredited. You can find lists of them from some of the organisations listed under 'Useful contacts' on p.18. Recommendations from a professional or a friend can also be helpful.

Medication

Your GP may offer you medication for depression, e.g. antidepressants, or medication that can help reduce anxiety, such as tranquillisers. (See Mind's booklets *Making sense of antidepressants* and *Making sense of sleeping pills and minor tranquillisers*.) Before you are prescribed any medication, your doctor should explain to you what the medication is for, and discuss any possible side effects and alternative treatments.

Hospital services

The Accident and Emergency (A&E) department of your local hospital may be the best place to go in a crisis. Some may offer you medication and discuss with you what kind of help you want. Some may suggest you are admitted to hospital.

Although most admissions are voluntary, you may also be detained in hospital (sectioned), under the Mental Health Act, if health professionals believe you are a danger to yourself. You will be referred to the psychiatrist or other mental health staff on call, who may send you to a psychiatric inpatient ward.

Under the care programme approach (CPA) you should leave hospital with a crisis plan to prevent or resolve any future crises, and you should continue to receive care for up to a year after your supervision has been reduced or your drug dosage cut.

Community care

Although hospital may prevent you harming yourself, wards can be distressing and frightening places and many people prefer to remain in their own home with the support of a community mental health team. The team might refer you to a crisis house, which will offer you intensive short-term support outside of a hospital setting. Crisis resolution teams or home treatment teams are also community-based and offer intensive support while you are in crisis, and support while you learn how to prevent and manage any future crises. (see Mind's online booklet *The Mind guide to crisis services*.)

How can I help myself?

Talking to family and friends

Talking to family and friends can make a real difference. They may calm you down and offer you a breathing space while you decide what to do next. They may also be able to suggest how to manage your difficulties. It is often easier for other people to see solutions, particularly if they know you well.

It is surprising how many people will step-up and help through a very difficult and distressing period.

It is also important to be realistic about the kind of help they can give. They may not be able to help make you feel better right away. Your feelings might be difficult for them to hear. And they may not always be available to listen to you – sometimes when you need them most.

If you have family members and friends you feel close to, you may find it helpful to keep their telephone numbers in a safe place so you can find them easily if you need urgent help. (Use p.17 to keep a note.)

Support groups

Many organisations around the country, including Mind, run support groups for people with different types of mental health problems. Group members can support each other and learn from each other's ways of coping. Call the Mind Infoline (0300 123 3393) for support in your area.

Helplines

If you believe that family and friends don't understand you or that you cannot keep bothering them – especially in the middle of the night – it can be a good idea to phone a helpline, such as Samaritans or PAPYRUS (see 'Useful contacts' on p.18), and talk to someone who has been trained to listen to people who have suicidal feelings.

Keep the number handy so that you aren't hunting around for it in a crisis. You can usually write, email or text if you don't want to talk on the phone.

If you do call, the person listening to you will give you the time and space to talk in confidence without judging you. They will not tell you what to do; they will help you think through what to do for yourself.

Online discussion groups

Online discussions groups can help you to learn practical ways of managing your crisis from others who have been through a similar experience. Unfortunately, the quality of the information and support offered online will vary. In some cases the websites may be harmful if they are not promoting recovery. If you want online support, you could start, for example, by checking out links on Mind's website. Also see Mind's online booklet *How to stay safe online*.

Some practical self-help tips

Remove any means of killing yourself – this is important while you learn how to cope with suicidal feelings. For example, make sure that you have only small quantities of medication in the house; if you are no longer driving carefully, hand over your car keys to a friend. **Make a distraction box** – fill a box with memories and items that can provide comfort and help lift your mood when you feel down. The box can contain anything that is meaningful and helpful to you, e.g. a CD you like listening to, a book, photos, letters, poems, notes to yourself, a cuddly toy, a perfume, jokes etc.

Give yourself a break – and take a break from yourself. If your attention is focused mainly on your distress, try instead to notice the world around you. Like any new habit, it may take effort at first, especially if you feel cut off and disconnected.

Be kind to your body – regular exercise like walking, running and swimming can lift your spirits and make it easier for you to sleep better. Yoga and meditation can energise you and help to reduce tension. A healthy diet can help you feel stronger and may help you feel better. When you feel well, it might help if you put together a list of meals that are easy to prepare. If you have been misusing alcohol and drugs, cutting down on these will make your mind clearer and better able to focus on how to help yourself.

Express yourself – you might like to write down your thoughts, feelings and achievements (however small) in a daily diary. Alternatively, creating artworks based on your feelings can also be a powerful tool. Over time, this can help you see what you are thinking and feeling. And this can make it easier for you to find ways to respond differently to your difficulties.

I give myself a break - it's okay to cry until you can't cry any more - it's the mind's natural way of fighting the illness.

Learn from others – reading about how other people have managed difficult times is usually inspiring. Self-help books can suggest ways to improve your self-esteem and take you through practical problem-solving exercises. You may be able to get self-help books on prescription from your GP.

Learn 'distress tolerance' skills – do this when you are well. These can help you survive when in crisis and support your ongoing mental health. Dialectical behavioural therapy (DBT) gives lots of suggestions for accepting distress, soothing yourself and beginning to think more clearly. (See Mind's online booklet *Making sense of dialectical behavioural therapy*, and dbtselfhelp.com)

Make a wellness recovery action plan (WRAP) – write down what helps you to feel better about yourself. It can including, for example, going for a walk, talking to someone you trust. (Use p.15 to start thinking about this).

I have a wellness recovery action plan which I have written down. It includes all my distraction techniques to get through a crisis. It includes a bath with candles, reading and knitting. Going for a walk. Going for a coffee. It is all written down as I can't think straight in a crisis.

Will I ever feel better?

When you feel very low, it can be hard to believe that you will ever feel better. It can help if you accept that you only have to cope with one day at a time. It can also help to acknowledge that your mood has been different before. As your mood has changed before, it can change again.

When I am feeling really well I write a letter to myself about how good it feels and how I can get there again.

Just as your suicidal feelings take time to emerge, so it will take a while for them to fade. Live from day to day and don't expect too much of yourself. Even if you can't see a way forward now, you can be certain that the way you are thinking and feeling about things will change.

Looking after myself when I am unwell

What I can do to help myself feel better

When you are well, write down what you know can help you feel better, e.g. using a distraction box, going for a walk or talking to a friend. You can then refer back to this when you begin to feel unwell.						

How I want friends and family to help me

Think about what kind of help you may need when you feel unwell. If example, you may want friends to visit you, or help you with the sho or cooking. Let your friends and family know, so they can do their be support you.							

People who can help me

Use this space to write a list of people you trust and who can help when you are unwell. Note down contact details for emergencies.

Friends an	d family					
Mental hea	alth suppor	rt (e.g. Gl	P, therapi	st or a h	elpline)	
Mental hea	alth suppor	rt (e.g. Gl	P, therapi	st or a h	elpline)	
Mental hea	alth suppor	rt (e.g. Gl	P, therapi	st or a h	elpline)	
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Mental hea	alth suppor	rt (e.g. Gl	P, therapi	st or a h	elpline)	
Mental hea	alth suppor	rt (e.g. Gl	P, therapi	st or a h	elpline)	

Useful contacts

Mind Infoline

tel: 0300 123 3393 (Monday to Friday, 9.00am to 6.00pm) email: info@mind.org.uk

web: mind.org.uk

Details of local Minds and other local services, and Mind's Legal Advice Line. Language Line is available for talking in a language other than English.

British Association for Behavioural and Cognitive Psychotherapies (BABCP)

tel: 0161 705 4304 web: babcp.com

Can provide details of accredited

therapists.

British Association for Counselling and Psychotherapy (BACP)

tel: 01455 883 300 web: itsgoodtotalk.org.uk For practitioners in your area.

The British Psychological Society

tel: 0116 254 9568 web: bps.org.uk

Produces a directory of chartered

psychologists.

C.A.L.L. (Community Advice & Listening Line)

tel: 0800 132 737 web: callhelpline.org.uk **Emotional support and information** on mental health to the people of

Wales.

Depression Alliance

tel: 0845 123 2320 (information packs only) web: depressionalliance.org Information and support for anyone affected by depression.

Hearing Voices Network

tel: 0114 271 8210 web: hearing-voices.org A support group providing information, support and understanding to people who hear voices and those who support them.

PAPYRUS

helpline: 0800 068 41 41 web: papyrus-uk.org

Advice for young people at risk

of suicide.

Samaritans

Freepost RSRB-KKBY-CYJK Chris, PO Box 90 90 Stirling FK8 2SA

helpline: 08457 90 90 90 email: jo@samaritans.org web: samaritans.org

24-hour support for anyone experiencing distress, despair

or suicidal thoughts.

Sane

Saneline: 0845 767 8000

web: sane.org.uk

Advice for those in crisis, as well

as practical information.

Further information

To read or print Mind's information booklets for free, visit mind.org.uk or contact Mind infoline on 0300 123 3393 or at info@mind.org.uk

To buy copies of Mind's information booklets, visit mind.org.uk phone 0844 448 4448 or email publications@mind.org.uk

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Mind

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.

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