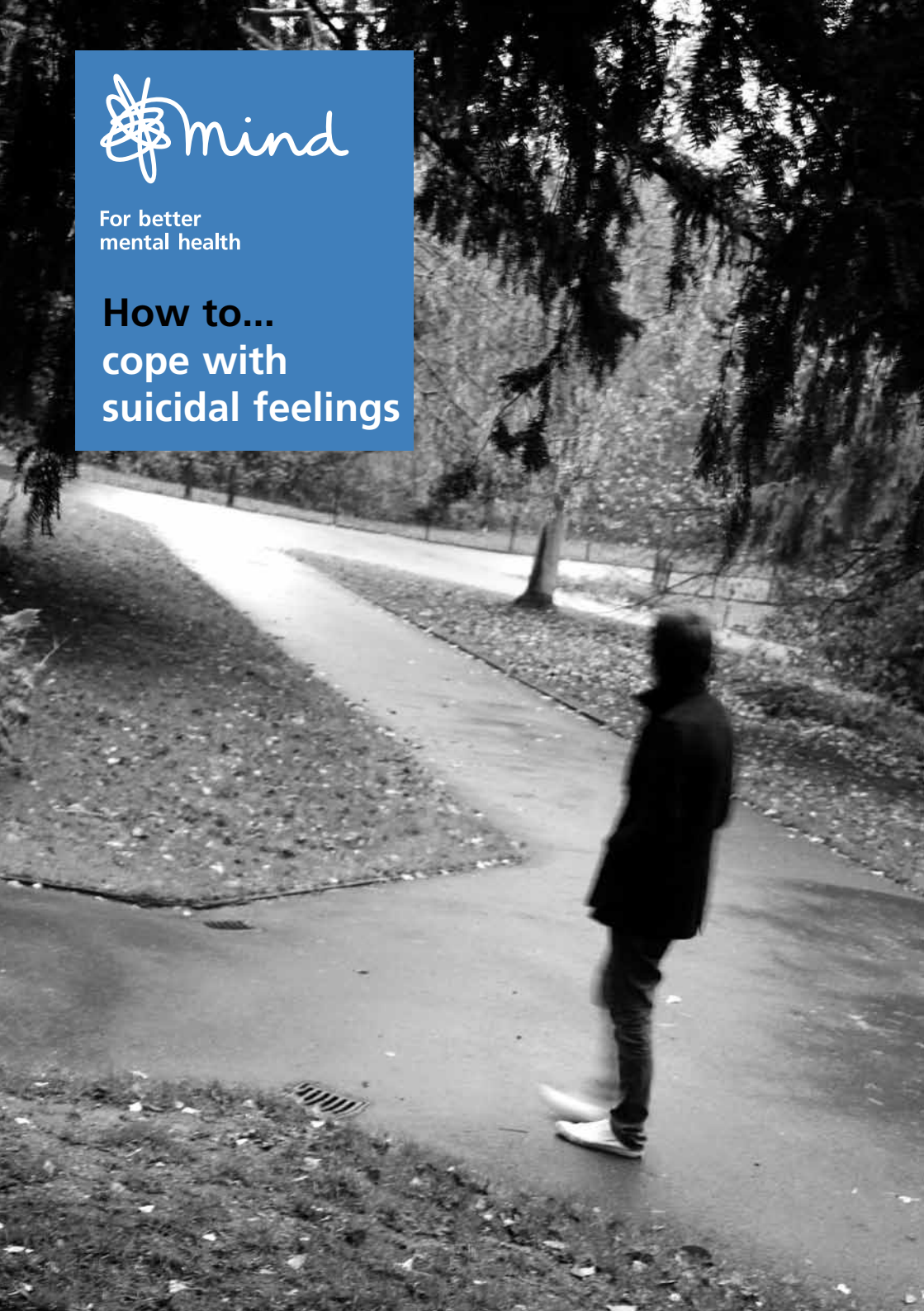




For better
mental health

How to... cope with suicidal feelings



How to...

cope with suicidal feelings

This booklet is for anyone who has feelings of hopelessness on an ongoing basis and has thoughts about taking their own life. It explains why you may have suicidal feelings and provides some options to help you look forward and break the circle of your negative thoughts.



What are suicidal feelings like?

Suicidal feelings can be terrifying.

If you can no longer see why you should go on living, your distress will seem unbearable. You may hate yourself and believe that you are useless and unneeded. You may feel rage, shame and guilt.

Repeated painful experiences, particularly losses, can lead you to blame yourself and feel that you haven't lived up to your own standards. Faced with an unbearable situation, unsolvable difficulties, overpowering feelings of guilt, failures or conflicts, you may start to think that death is your only option.



"Sometimes everything gets on top of me. I get tired of fighting and wish I wasn't here anymore."

You may feel suicidal for no apparent reason. You may think that you have no reason to want to kill yourself. This can trigger feelings of deep guilt and shame and you may find it difficult to tell others what you are going through.



"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."

Whether you are aware of a cause or not, it can be difficult to relate to others at this time, so you are likely to feel withdrawn or irritable. Even 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 be thinking of 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; you may simply not care if you live or die; you may be thinking of death as a release.

If you feel powerless to influence circumstances that are distressing you, the idea of suicide may give you a sense of being in control again. Depending on your beliefs, you could be looking forward to 'nothingness' or to being reunited with loved ones or to reincarnation.

If you feel low and suicidal for no apparent reason, this can also make you feel powerless: if you can't find a cause for your difficult feelings, you may find it hard to believe that there might be a solution.

You may be harming yourself by cutting, biting or burning your body. Perhaps you are getting into fights or taking

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extreme risks. You may also be overdosing on drugs, bingeing on alcohol or have developed anorexia or bulimia. However, even when you are not sure why you are self-harming, it is usually a means of trying to stay alive – trying to kill the pain you are feeling inside rather than a wish to actually kill yourself.

For most people, suicidal thoughts are confusing. As much as you want to die, you may also want a solution to your difficulties in life and you may want others to understand how you feel and to help. Such mixed feelings and being unsure what to do can cause great anxiety. This is why suicidal thoughts can be frightening and confusing.



Why do I feel suicidal?

It may appear to others that suicide or an attempt at suicide is an impulsive act, especially if a person is misusing alcohol or drugs, or responding to a sudden crisis. More usually though, you will have experienced an increasing sense of hopelessness and worthlessness.

Although thinking about suicide is quite common, and may occur whatever your age, gender or sexuality, you will be more vulnerable to suicidal thoughts and feelings if you feel incapable of solving 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
- long-term physical pain or illness
- doubts about your sexual or gender identity
- facing discrimination
- a history of sexual or physical abuse.

"The problem for me is suicidal thoughts. Because I have been suicidal in the past, suicidal thoughts come automatically to me when I get stressed. They are horrible and frightening."

“ ”

Mental health problems

It is also common to have suicidal thoughts if 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.

It is not inevitable that any of these mental health problems will lead you to feeling suicidal; however, if you recognise where your difficulties come from and what makes them worse, there are plenty of organisations that can help you to make sense of them. (See 'Useful contacts' on p. 13).

Depression

The deeper your depression, the more likely it is that you will consider killing yourself. However, you are actually 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 possibly because you have more energy and motivation available at that stage. (Also see Mind's booklet *Understanding depression*.)

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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, and this can intensify thoughts of ending it all. (See *Understanding borderline personality disorder*.)

Psychosis

If you have symptoms of psychosis and have been diagnosed with, for example, 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, these delusional ideas are more likely to *contribute* to your suicidal thoughts; you are actually 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.

See Mind's booklets *Understanding schizophrenia*, *Understanding psychotic experiences* and *Understanding bipolar disorder*.

Can I get help?



If you are thinking about suicide then you may believe that you are beyond help. 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 inwards and you feel self-hatred or guilt, you may believe that you don't deserve help.

These thoughts and feelings may have particular urgency if you have already attempted suicide or if there is a history of suicide in your family. It is important to look out for the warning signs in yourself and take them seriously.

"I treat my suicidal thoughts like obsessive thoughts. They can often pop up as images or ideas, particularly when I'm feeling stressed or worthless. Every time a suicidal thought appears, I sound a mental whistle in my head and imagine a stop sign. I will not let myself think about the suicidal thoughts — they are not going to control my life."

“““

A great 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. Try some of the ideas in the next two sections for helping yourself, or letting someone else guide you through this crisis. Once you are on the other side of it you will be in a better position to think more clearly and decide what to do.

What help is available?

Your GP

Consider making an appointment with your GP – most people's first point of contact with the NHS. Many patients visiting their GP are there for help with emotional difficulties, so the doctor will be used to listening to these types of problems.



Your doctor can suggest a range of treatments. depending on the nature of your difficulties. For example, if you are depressed, they may recommend an antidepressant and/or refer you to a

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professional counsellor or psychotherapist; or they may refer you for hospital or community-based care. Some GP practices have counsellors, therapists, social workers or community psychiatric nurses attached to their surgeries.

Your GP should be respectful and helpful. If they are not, you can get in touch with your local advocacy service by contacting Mind, Advocacy Resource Exchange, your local Patient Advice and Liaison Service (in England) – visit www.pals.nhs.uk – or your local Community Health Council (in Wales) – visit www.wales.nhs.uk (Also see 'Useful contacts' on p. 13.) You have a right to change your GP if necessary.

Talking treatments

Counselling

Counselling will focus on your immediate difficulties and help you with problem-solving skills. You are likely to see a counsellor once a week over a short period, but longer-term counselling may also be available depending on the type of counselling and whether it's NHS or private. (See Mind's booklet *Making sense of counselling*.)

Psychotherapy

Psychotherapy is often a longer-term treatment in which the therapist listens in a non-judgmental way to you talking freely about whatever is troubling you. They will support you to come to terms with difficult memories, feelings and fears.

Cognitive behaviour therapy (CBT)

A specific form of short-term therapy you may be offered is CBT. Your therapist will explore with you in a supportive and practical way how your negative thoughts are causing you distress and difficulty. They will train you to think and feel differently, replacing your suicidal thoughts with more realistic and helpful ones.

Access to talking treatments

In some areas you may be able to access talking therapies through your GP, but if waiting lists are too long, you might consider seeing a private practitioner. Help is available via the therapy associations listed on p. 13, which can all provide you with a list of practitioners in your local area. Recommendations from a professional or a friend can also be helpful. (Also see *Understanding talking 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, 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.

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.

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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 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.

Telephone helplines and online discussion groups

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 (Samaritans or POPYRUS, for example: see 'Useful contacts') 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 discussions groups can help you to learn practical ways of managing your crisis from others who have been through a similar experience. However, many are not subject to quality control and in some cases may be harmful if they are not promoting recovery. NHS Direct and the leading mental health charities all provide good online information services and many link to other websites that have been assessed.

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.

Learn 'distress tolerance' skills – these can help you survive when in crisis and support your ongoing mental health. Dialectical Behavioural Therapy 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 www.dbtselfhelp.com

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. Set yourself goals for engaging with other people and beginning new activities.

Get healthier – regular exercise like walking, running and swimming will lift your spirits and make it easier for you to sleep better. Yoga and meditation can energise you and help to reduce tension. Food also influences your mood directly. When you are less anxious, your appetite may return and you

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could begin to eat healthier foods. 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. Over time, this can give you fresh insight and increase your ability to respond to your difficulties differently. Alternatively, creating artworks based on your feelings can also be a powerful tool.

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.



Will I ever feel better?

Just as your suicidal feelings took time to emerge, so it will take a while for them to recede. 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.



"The urge to kill myself was overpowering, and completely out of my control. I really could see no alternative but to end it all. Now I remind myself that life is all about change, and so these feelings, however bad they feel, won't last forever."

It helps if you can accept that all of us have difficulties at times and that people do find great courage in themselves. There is no feeling so terrible that it cannot be changed. There is no difficulty that is too great to overcome.

Useful contacts

Mind

Mind infoline: 0300 123 3393 (Monday to Friday 9am to 6pm)

email: info@mind.org.uk

web: www.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.

Advocacy Resource Exchange

tel. 08451 228 633

web: www.advocacyresource.org.uk

To find a local advocate

British Association for Behavioural and Cognitive Psychotherapies (BABCP)

tel. 0161 705 4304

web: www.babcp.com

Directory of accredited behavioural and cognitive psychotherapists available online

British Association for Counselling and Psychotherapy

tel. 01455 88 33 16

web: www.bacp.co.uk

See website for details of local practitioners

The British Psychological Society

tel. 0116 254 9568

web: www.bps.org.uk

For a directory of chartered psychologists

continued overleaf...

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

tel. 0800 132 737

web: www.callhelpline.org.uk

Emotional support and information on mental health to the people of Wales

Depression Alliance

tel. 0845 123 2320 (England)

tel. 029 2069 2891 (Wales)

web: www.depressionalliance.org

Provides information, support and self-help groups

Hearing Voices Network

helpline: 0114 271 8210

web: www.hearing-voices.org

Local support groups for people who hear voices

PAPYRUS

helpline: 0800 068 41 41

web: www.papyrus-uk.org

Advice for young people at risk of suicide

Samaritans

Chris, PO Box 9090, Stirling FK8 2SA

Helpline: 08457 90 90 90

email: jo@samaritans.org

web: www.samaritans.org.uk

24-hour telephone helpline offering emotional support

Sane

Saneline: 0845 767 8000

web: www.sane.org.uk

Advice for those in crisis, as well as practical information

Further information

Mind offers a range of mental health information, covering:

- diagnoses
- treatments
- wellbeing

Mind's information is ideal for anyone looking for further information on any of these topics.

For more details, contact us on:

tel. 0844 448 4448

email: publications@mind.org.uk

web: www.mind.org.uk/shop

fax: 020 8534 6399

Support Mind

Providing information costs money. We really value donations, which enable us to get our information to more people who need it.

Just £5 could help another 15 people in need receive essential practical information booklets.

If you would like to support our work with a donation, please contact us on:

tel. 020 8215 2243

email: dons@mind.org.uk

web: www.mind.org.uk/donate

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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.
- Whether you're stressed, depressed or in crisis.
- We'll listen, give support and fight your corner.



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