

Mental Health Awareness Week

In this document, we talk about:

- Depression
- Anxiety
- Loneliness
- Eating Disorders
- Domestic Abuse
- Sleep

It's really important to raise awareness about these mental health disorders and reduce stigma surrounding them. We'll think about what each of these is and give a detailed example from someone who's experienced it. Then we'll think about what to do if you're suffering and would like help. At the bottom, we've added lots of resources: so you can <u>learn</u> more or <u>get help</u>. (*This is an amalgamation of FB posts/emails sent out during Mental Health Awareness Week, written by Isobel Patterson, Priyanka Chandrakumar, and Jamie Slagel.*)

DISCLAIMER

If you're experiencing an emergency, please call 999. If you need to talk to someone urgently, please use of these helplines:

Samaritans: 116 123 (24hrs a day, 7 days a week, 365 days a year)

Shout Crisis Text Line: Text 'Shout' to 85258 (24hrs a day, 7 days a week, 365 days a year)

INTRODUCTION

We are aware that this might be difficult to engage with—please do not feel any pressure to read what you're not comfortable with. Please don't hesitate to reach out to Priyanka, Isobel and/or Jamie, or to our fabulous team of peer supporters.

If you can, it would be fantastic if you could learn a little bit more about what many people are facing during this time—and face throughout their lives, lockdown or no lockdown.

The theme this year is **kindness** in response to coronavirus. <u>Research</u> has shown that protecting our mental health will be central to coping with and recovering from coronavirus— the social and psychological impacts are likely to outlast the physical symptoms. To get involved in Mental Health Awareness Week, <u>the challenge</u> is to be active 30 minutes a day!

Find out more: https://www.mentalhealth.org.uk/campaigns/mental-health-awareness-week

DEPRESSION

TW: mental health; depression

Depression is a low mood that lasts for a long time, and affects your everyday life. In a way, depression is to climate what the ups-and-downs of life are to weather.

When mild, depression can often just mean being in low spirits. This doesn't stop you from living life normally, but it can make everything that bit harder—and make it all seem less worthwhile. When more severe, depression can be life-threatening, and it can make you feel suicidal.

In 2016, <u>it was found that</u> over 3% of people suffered from depression and almost 8% suffered from mixed anxiety and depression. Depression could be more prevalent because of the current situation. More people have reported significant levels of depression following lockdown.

Amy's Story

Here is a story, adapted from Mind about Amy's struggle with depression:

"Depression... just eats you up from the inside out. It's like a monster inside your head that takes over. The worst thing is to know that my family and friends were doing all they could yet I still felt so lonely. Anything that was said to me, I managed to turn into a bad thing. I was literally my own worst enemy. I would come home and feel so exhausted from all of the voices in my head that I would just sleep to block it all out. I didn't want to wake up because living was a nightmare. I felt sick with the fear of night time because that's when the voices got even louder. I would get so frustrated because it seemed impossible to sleep, as if insomnia and depression go hand in hand."

Although I knew I needed help, it felt like doing so made me a burden. I wanted to be free of all that. I felt that I would never be the same again. I couldn't see a future for myself, so I had no motivation to do anything. Anxiety made me believe everyone was faking their love for me. The worst thing was when people said 'cheer up'—it triggered thousands of horrible thoughts. I beat myself up for not hiding that I didn't feel well enough. I wanted people to know, but I didn't dare tell them. So I just isolated myself in my room. That way, nothing could go wrong, right?

Now, I rely on medication. I'm very grateful for it because it's really helped me. I still wish I could be free of it without the fear of relapse, though. Ultimately, the scariest thing is that I'm the only person who can truly help. I've had to change my thought processes and stop bullying myself. It's a hard habit to break, but I've definitely made some positive changes.

2013 was a rollercoaster ride. But to be totally honest, I don't think I'd change what I've been through. It doesn't mean depression is a good thing—it's definitely not—but I believe you have to turn your negative experiences into positive ones, if you can. Without going through all of that, I wouldn't have learned that the most important thing in life is to be happy. I've been offered places at university, and I can see a future. I hope to do something I love when I'm older, that will make *me* happy, rather than focusing on what others want.

What one piece of advice would I give to others who are struggling? *Don't suffer in silence*. There are people out there who have been through what you're experiencing and come out the other side—in fact, those experiences have made them who they are today. It may seem impossible, but you will get there.

You shouldn't feel guilty either. It's an illness like any other—it's no more self-centred than having a broken leg. You should show yourself the same respect and concern you'd show others.

Specific Resources for Depression

Mind: <u>https://www.mind.org.uk/information-support/types-of-mental-health-problems/depression/about-depression/</u></u>

Signs and Symptoms (Rethink Mental Illness): <u>https://www.rethink.org/advice-and-information/about-mental-illness/learn-more-about-conditions/depression/</u>

NHS advice: https://www.nhs.uk/conditions/stress-anxiety-depression/low-mood-and-depression/

NHS info on 'Clinical Depression': https://www.nhs.uk/conditions/clinical-depression/

Samaritan's 'Practical ways to cope': <u>https://www.samaritans.org/how-we-can-help/if-youre-having-difficult-time/signs-you-may-be-struggling-cope/practical-ways-help-yourself-cope/</u>

ANXIETY

TW: mental health; anxiety; OCD; PTSD; panic & panic attacks; phobias

Anxiety is what we feel when we are worried, tense or afraid particularly about things that are about to happen, or which we think could happen in the future. It is a natural human response when we perceive we are under threat. Anxiety can become a mental health problem if it impacts on your ability to live life as fully as you want to. The physical and mental feelings that are associated with anxiety stem from our natural 'fight or flight' response which essentially constitutes an internal alarm system designed to protect us from surrounding dangers. The "butterflies in the stomach" feeling that many associate with anxiety is this mechanism kicking in, but instead of being used to avoid immediate danger, it is often wrongly and inappropriately activated in a person during normal, everyday situations when stress has built up, often unknowingly.

Some people have a very identifiable cause for their anxiety (i.e. trauma), however, some don't have any identifiable cause. An analogy that might be helpful is thinking about anxiety as a bucket of water. If we keep adding stressors to the bucket (even small ones such as commuting to work), over time it fills up until one day it overflows. This explains why sometimes anxiety can seem out of the blue with no significant trigger. Anxiety can be experienced in lots of different ways and anxiety is the main symptom of several conditions including: social anxiety disorder, panic disorder, phobias, post-traumatic stress disorder (PTSD), obsessive-compulsive disorder (OCD), to name just a few.

There are numerous symptoms which a person suffering from any type of anxiety disorder can experience and these vary from person to person. Physical symptoms can include (but are not limited to):

- Increased heart rate
- Dizziness
- Difficulty breaking
- Hot flushes
- Shaking

Some of the most common psychological symptoms (although not all) are:

- Thinking that you may lose control and/or go 'mad'
- Thinking that you might die
- Thinking that you may have a heart attack/be sick/faint/have a brain tumour

James' Story

Here is James' story, taken from Mind, which demonstrates the unexpectedness with which panic attacks can come about and also some of the symptoms:

"For 27 years, I have been a police officer, and now I am quite senior. I have in recent years carried out numerous high-profile jobs, I have commanded over 300 firearms deployments and been responsible for teams and departments that have staff in the hundreds.

Over the last year, work has piled up and my responsibilities have expanded and increased. The attitude has always been that I was a capable person and could rise to any challenge, for my part I never wanted to say 'no', and I never missed a deadline - a matter of pride.

Over the last 12 months though the work has increased even further, I am doing jobs that were previously shared among three or more staff members. On top of that, my wife had a cancer scare and then lost her father - a hugely traumatic experience.

One day at work I was in a meeting when my boss told me that I was going to be responsible for yet another large piece of work. Something happened - a haze descended; my head started throbbing, and I could barely speak. Somehow, I made it back to my car after the meeting where I then had a severe anxiety attack. I didn't know what it was; I thought I was about to die - alone in a car park.

I saw my doctor the next day. She was amazing and kind, but most of all she believed me. She told me I was heading for a mental health crisis, and that I must take time off and get well. I am now prescribed anti-depressants and I am receiving counselling

My doctor was quite frank with me - she told me to get help and accept help, or I might never recover. As it is I am well on the way to a full recovery and I am grateful for that. My message is simply this; needing and receiving help is not a sign of weakness. I do not scare easily and if this can happen to me then, given the right circumstances, it can happen to anyone. I discovered that there are wonderful people out there who want to help and who can help. I

see myself as a lucky one and hope that by sharing this simple story, anyone who is reluctant to get help will do so.

If a big butch policeman can cry in a doctor's surgery and ask for help then so can anyone - you won't shock them, they are prepared for it and it will help you recover.

To your good health."

Specific Resources for Anxiety

Anxiety UK

- Helpline: 03444 775 774
- Text Service: 07537 416 905
- Information on Therapy on Demand Support Service (TOD): https://www.anxietyuk.org.uk/tod/
- Coronavirus anxiety support and resources: https://www.anxietyuk.org.uk/coronanxietysupport-resources/
- Types of anxiety conditions (bottom of webpage): https://www.anxietyuk.org.uk/gethelp/anxiety-information/

Mind

- Information on anxiety: https://www.mind.org.uk/information-support/types-of-mental-health-problems/anxiety-and-panic-attacks/about-anxiety/
- Infoline: 0300 123 3393

NHS

GAD (Generalised Anxiety Disorder) overview: https://www.nhs.uk/conditions/generalised-anxietydisorder/treatment/

Anxiety Alliance:

Helpline (10-10 daily): 08452967877

Young Minds Helpline: 08088025544

OCD-UK: www.ocduk.org

Information and support relating to OCDs. Also information relating to local support groups.

SA-UK (Social Anxiety UK): www.social-anxiety.org.uk

Volunteer led organisation, news, advice, info, meetings, chatroom, forums, support/social groups, info on cognitive behavioural therapy.

LONELINESS

TW: mental health; loneliness; depression

Most of us will have experienced feelings of loneliness during our lifetime. Sometimes it can be easy to attribute our loneliness to a specific life event; perhaps a bereavement, a breakup, or starting at university. However, loneliness can also manifest itself when we are surrounded by family or friends. Chronic loneliness can have long-term physical health impacts, such as alteration to stress hormone levels and changes in immune function. It can also lead to other mental health problems like depression or anxiety. During the COVID-19 pandemic, it may be difficult to manage loneliness. Most mental health resources encourage those experiencing loneliness to join a new class, group, or begin volunteering. Obviously, this might not be possible if you are in a country in lockdown. However, there are lots of opportunities to find meaningful social connection online. For example, the Mind website recommends trying to make a regular phone call to a relative or friend or consider reaching out to Peer Support. If you want to set yourself targets, make sure they are small, attainable goals and be sure to not compare yourself to others, particularly on social media.

Case Study

The following quotes from the <u>Mind website</u> tell of people's experience suffering from loneliness.

This seems particularly relevant during the global pandemic: "I sometimes feel lonely when I am overwhelmed by human information – the news, social media, TV, negative gossip etc. – I feel so separate and different to most people."

"One thing I've learned is the difference between feeling alone and feeling lonely - and how you can feel lonely in a crowd full of people, but quite peaceful and content when alone".

"I want to be able to interact with people and make new connections but my anxiety feels like an invisible barrier that I can't break through."

"My anxiety and depression isolates me from people, stops me from being able to do the things I'd like to do so socially it cuts me off."

"When I suffered from anorexia it fed into so many areas of life. It was all consuming. One of those areas was loneliness. It was something that I felt for such a long time."

If you're feeling lonely, please do not hesitate to reach out to our peer supporters—you can reach out to them for a chat when they're on duty, but you can also send them a message/email at any time, and they will get back to you. See their contact details here: <u>https://peersupport-jesus-ox-tt2020.carrd.co/</u>

Mind: <u>https://www.mind.org.uk/information-support/tips-for-everyday-living/loneliness/about-loneliness/</u>

EATING DISORDERS

TW: mental health; eating disorders

Eating disorders are complex and come in many different forms. Different people experience different symptoms and not all your symptoms may match the diagnosis for the most common eating disorders: anorexia, bulimia or binge eating disorder. However, all eating disorders involve an unhealthy and difficult relationship with food. Disordered eating behaviours can be triggered in response to a specific trauma, wider family issues, or external pressures (such as competitive or critical environments). The road to recovery may seem daunting and extraordinary circumstances or stressful life events can cause relapses. The Mind website (https://www.mind.org.uk/information-support/types-of-mental-health-problems/eating-problems/about-eating-problems/) has lots of resources to help you identify early warning signs and potential 'at-risk' times.

During the COVID-19 pandemic, BEAT has seen a 50% rise in demand for their services. They state food shortages and loss of routine due to isolation as particular challenges facing those coping with or recovering from an eating disorder.

Habiba's Story

Here is a story from <u>Mind</u> about how Habiba is balancing coronavirus, Ramadan, and an eating disorder:

Ramadan this year is very different for all Muslim households, as the coronavirus pandemic has dramatically changed everything. For many with an eating disorder, Ramadan is hard enough as it is but this year, we are all forced to stay at home because of the lockdown.

I haven't fasted for over 10 years due to my anorexia as I have been medically advised not to. The last two years, I decided not to fast without any medical advice because in my heart, I knew I wouldn't be fasting for the right reasons because the only thing that comes to mind when I think about fasting is losing weight.

I have been doing incredibly well in recovery this past year or so and yes, even now I still feel scared about what my mindset will be like if I do start to fast again. Could it drive me to obsession again? Will I start being more conscious of what is going inside my body but in a more destructive way? Will I be curious to start weighing myself again? All those thoughts are going through my mind.

The whole coronavirus pandemic has already been an anxious time for me and I know it has been the same for many struggling with an eating disorder. With food running out in supermarkets (as people are panic buying), gyms closed and everyone isolating, my focus has been going back to my body and how I'm not "in control" of it anymore. My thought pattern is definitely becoming destructive again but it's good I've noticed that and acknowledged it.

It's hard when family think you're "better" so they think you are capable of fasting again, when inside you're not better. My mind is still sick. My thoughts are not healthy. Ideally, I want to be able to fast for the right reasons but I am not putting pressure on myself to fast because I know I have to do the right thing for my mental and physical health.

Right now, I am taking it slowly, like fasting for half a day or just drinking water instead of going teetotal, so at least I'm keeping myself hydrated. Iftar time (the meal the fast is broken) is still quite difficult for me. I often have my meal on my own rather than with the family at the table. Again, it is about taking small steps and doing what I feel comfortable doing.

Remember, there are other ways you can take part in Ramadan if you can't fast. Praying and just having faith in this difficult time is enough. Your mental wellbeing is the most important thing.

Specific Resources for Eating Disorders

Beat's free, confidential helplines are open 365 days a year noon-8pm Monday to Friday and 4-8pm Saturday, Sunday and bank holidays.

Adult Helpline: 0808 801 0677 | help@beateatingdisorders.org.uk.

You can also join one of their <u>online support groups</u>, which are anonymous and give you the opportunity to speak to people going through similar experiences to you.

BEAT: https://www.beateatingdisorders.org.uk/types

NHS Advice: https://www.nhs.uk/conditions/eating-disorders/

Mind: <u>https://www.mind.org.uk/information-support/types-of-mental-health-problems/eating-problems/about-eating-problems/</u>

DOMESTIC ABUSE

TW: mental health; domestic abuse; physical violence; sexual violence

We will now look at domestic abuse. Whilst this is not a mental health condition *per se*, it can have damaging effects on physical and mental health. In times like these, domestic abuse can be particularly challenging without the escapes of normal life and so we thought it would be important to highlight it here. <u>Please don't feel any pressure to continue reading, but if you</u> <u>do, please note that you might find some of this material upsetting.</u>

Domestic abuse is a pattern of behaviour on the part of the abuser designed to control his/her partner. It can happen at any point in a relationship, including after you have split up. Anyone who is forced to change their behaviour because they are frightened of their partner or expartner's reaction is experiencing abuse.

Domestic abuse manifests in multiple ways including:

- Psychological abuse includes name calling, threats, manipulation and 'gas-lighting'
- Economic abuse controlling access to money or resources
- **Sexual abuse** this doesn't have to be physical they might manipulate or coerce you into doing things you don't want to
- **Coercive control** when an abuser uses a pattern of behaviour over time to exert power and control. It is a criminal offence
- Physical abuse hitting, restraining, throwing objects
- **Tech abuse** sending abusive texts, demanding access to your devices, tracking you with spyware or sharing images of you online

1 in 4 women will experience domestic abuse over their lifetime and every 30 seconds the police receive a call for help relating to domestic abuse. In 2018 it was also reported that 13.2% of men aged between 16 and 59 had experienced some form of domestic abuse since the age of 16. Domestic abuse is particularly poignant now and the UK's largest domestic abuse charity, Refuge, has reported a 49% increase in calls to its helpline during this coronavirus period.

Amala's Experience

This is a story adapted from SafeLives about Amala's experience with abuse:

I'm a mother with 5 children, and my husband no longer lives in the country. I met my husband through an arranged marriage in another country. My husband and I lived with my mother and father-in-law and their other adult children. There were 8 people living in the house. I

wasn't allowed to go out anywhere. While my husband's family went to work and school, I was expected to make the lunch, the evening meal, to clean and dust the house, making sure that everything was prepared by the time that they got back. With 8 people living in the house, that's all it was day in and day out, picking up and taking away. My husband's family had all of the control, whatever I did was on their terms.

I could see that my husband loved and cared for me, but it wasn't how it should be because he was scared of his parents. He never fully showed his love and care towards me. When I tried to tell him, what was happening with his parents, he'd say his mum was right because he was frightened of them. He used to work all day and he didn't want to get involved in all of this.

As our family got bigger and we had more children my husband and I decided to get a house of our own. When we got our own house life seemed better, it seemed more peaceful. But even after we moved out of the house, his family's expectation was that I'd drop the children off at school, come back to do the housework and my duties. They put pressure and control on my house, they got a spare key to come and check when we were home and what we were doing. I wasn't allowed to go to parent's evenings, children's parties, they'd send my brothers-in-law instead.

When I stood up and said, I'm not going to go to your house and do all of the work, that's when they turned against me. They manipulated my husband and my children. Soon there was no financial support from my husband and the first time there was physical abuse. My husband started the physical abuse, and the other family members soon followed. His family began to give the children expensive gifts and my children began to turn against me. My husband ignored it and it was not spoken about again. My children now have no respect for me, they don't listen to me, they swear at me. I'm human too, I can' t be treated like this. What is my life, what can I do, what am I allowed to do? I felt so upset and sad, like my life had ended. My in-laws threatened that if I told anyone they'd call the police, throw me out of the house and take my children from me.

The important thing to me is my children. I want to put them first. All I want is for the children to go back to how they were before all of this, I want my husband to realise that he has a responsibility as well. For him to be supportive towards me. I want to live independently with my children. I want them to have respect for women, to not hit women, to not swear at women. I don't want my children to have that kind of attitude - looking down on everyone, thinking they are above everyone else. Most of all, I want my husband to take responsibility, to be supportive, to encourage their good behaviour. But for now, there is his ego, he can't see right from wrong, only that I am wrong and to blame for everything.

Specific Resources about Domestic Abuse

Domestic violence support for women Refuge | <u>0808 2000 247</u> | <u>refuge.org.uk</u>

Domestic violence support for men Men's advice line <u>0808 801 0327</u> | <u>MENSADVICELINE.ORG.UK</u>

Support for all adults

Samaritans | <u>116 123</u> | <u>samaritans.org</u>

Mind (Information on all types of abuse): <u>https://www.mind.org.uk/information-support/guides-to-support-and-services/abuse/all-types-of-abuse/</u>

Refuge (the largest UK charity for domestic abuse; the website gives an insight into what constitutes domestic abuse and how you seek legal help, help with housing, money, children and much more): <u>https://www.nationaldahelpline.org.uk</u>

Domestic abuse and Covid-19: <u>https://safelives.org.uk/news-views/domestic-abuse-and-covid-19</u>

SafeLives Amala's story: <u>https://safelives.org.uk/practice_blog/honour-based-abuse-amalas-story</u>

SLEEP

Sleep was the original topic of this year's Mental Health Awareness Week before, in a response to coronavirus, it was adapted to **kindness**. Nevertheless, there are loads of really good resources out there!

Sleep problems are closely linked to mental health. Most adults need 8 hours of sleep a night; children need 9-10 hours and babies need 17 hours. Sleep problems affect at least 50% of adult patients with generalised anxiety disorder (GAD) and between 65 - 90% (!) of patients with major depression experience. Recently, the IES found that during coronavirus, 64% of people lose sleep from worry, 40% aren't waking up feeling fresh, and 60% experience fatigue as well as physical and emotional health concerns.

Sleep problems can lead to negative thoughts. They can make you feel depressed or anxious. If you lack sleep, you be unable to rationalise worries or irrational thoughts. Sleep problems can also lead to feeling lonely or isolated. It may make you not want to be sociable/see friends. This is particularly problematic considering lockdown. Finally, you may experience psychotic episodes. If you have a psychotic disorder or bipolar disorder, sleep problems might make symptoms worse. For such people, lacking sleep may even trigger mania, psychosis or paranoia.

The interaction between sleep and mental health works both ways. Poor mental health and worrying lead to poor sleep. This can create a vicious cycle. Anxiety can cause thoughts to race through your mind all night. Depression can lead to oversleeping—and if you experience difficult thoughts, this can cause insomnia. PTSD can cause nightmares and night terrors. This can lead to feeling nervous about falling asleep, leading to insomnia. Paranoia and psychosis can make it hard to fall asleep—you may hear voices, see frightening things, or have frightening thoughts. Mania causes feelings of energy and elation making you feel not tired, or unwilling to sleep. Mania also causes racing thoughts. Finally, insomnia is one potential side-effect of psychiatric medication.

Annie's Story

Here is a story about sleeping with anxiety, adapted from Mind's blog written by Annie:

"It's 2:30am.

You're staring at the ceiling, perfectly still and eerily quiet.

Yet inside, you feel like you're sweating through your teeth and your mind's swarming like a flock of angry bees.

Yeah, you can't drift off. And I'll bet my figurative hat that it isn't the first time.

Sleep is absolutely vital for bodily repair, cognitive function, and general health. That's a nobrainer. Extended sleep problems increase our risk of heart disease, diabetes, and having a reduced immune system. But it's not so easy for those with anxiety. When you're suffering from anxiety, your mind whirrs at night.

"You can't 'switch off', and you're pleading with your brain to just give you a break, just for a few hours, at least."

You wake up feeling grouchy. You're irritable and sluggish. Your adrenaline levels are constantly running higher than 'normal'. It's like being in 'fight or flight' 24/7. It's forgivable if your body doesn't want to fall asleep when in danger and needs to be moving pretty quickly, pretty sharpish. But it's hard to feel empathetic when it always feels this way. 2:30am, and on the brink of tears. It's hardly relaxing, is it?

My personal problems with sleep started in my first year of Uni. I suffered debilitating panic attacks. I often skipped lectures to stay in my room, where I felt... not safe, but more safe than I was outside. I was trapped in a bubble. I saw no way out of. The only way to get myself out of this vicious circle was to put on some TV to fall asleep.

"I found myself irritable in the day, and always felt out of kilter. After I started this, these symptoms gradually backed off."

I used to watch an American TV show. The funny, light conversation wasn't mentally stimulating enough to keep me awake. But it was taxing enough to keep my mind busy. That way, I avoided demons. I'd also count backwards from 100 in French. It was repetitive, but required a little thought to keep my mind occupied elsewhere.

I'd recommend the above techniques, over and over again, until the cows come home. At first, make sure you're fully wound-down after a long, stressful day. Don't exercise in the three hours before you go to bed. Don't eat in the two hours before you go to bed. If you can, have a hot bath or do something relaxing. Going on your smartphone or laptop is not one of them—the backlight will keep you stimulated for hours.

Cut down or cut out caffeine and alcohol. I don't drink caffeine after midday, if at all. Make sure your room is a comfortable temperature and well ventilated—and your bed is comfortable. Make sure you're not interrupted by a partner, pets or children.

If, after all this, you're still not drifting off, get up and do something gentle. Sometimes I do the laundry, or slowly wipe down the kitchen. Nothing loud, all calm and gentle. Trying too hard will only make it worse, and odds are you'll suddenly be overwhelmed with a desire to get into bed and not do that horribly boring housework. I'd also recommend Sleep Cycle app

- which monitors your patterns of sleep and wakes you during a light stage of sleep so you don't get that horrid groggy feeling in the morning.



Tips and tricks

- Find a relaxation routine to prepare for sleep
 - You could try:
 - \circ $\;$ Doing something calm—listening to music or having a bath
 - o Breathing exercises
 - o Meditation
 - Muscle relaxation (see: <u>http://www.guysandstthomas.nhs.uk/resources/patient-information/cardiovascular/jacobsons-progressive-relaxation-technique.pdf</u>)
 - Visualisation—picture a scene or landscape that has pleasant memories for you
 - Many of these are things we naturally do while falling asleep
- Make sure where you sleep is comfortable
 - o Temperature-normally a cool environment is ideal
 - Light—don't have too much light; for most people, a dark environment is ideal
 - Noise—generally, a quiet environment helps
- Keep a sleep diary
 - $\circ~$ This involves recording information about your sleep habits to understand what does(n't) work for you
 - \circ $\;$ If you want, you can show it to professionals to help
 - You could record:
 - \circ What time you go to bed, and what time you get up
 - Total hours sleep
 - Quality of sleep, ranked 1-5
 - Waking up in the night—how many times, for how long, and what you do
 - Whether you have nightmares, night terrors, sleep paralysis or have sleepwalked
 - Whether you sleep during the day, and for how long
 - Any medication you're taking: dosage and time
 - Caffeine, alcohol and nicotine consumption

- Physical activity
- What you eat and drink
- Feelings and moods, esp. anxious and repetitive thoughts
- Resolve stresses and worries
 - Identify what's causing stress
 - You might find it helpful to write it down in a journal, or to meditate
 - You may also find it helpful to talk to a friend/family member about these feelings
 - There may also be practical measures to reduce the stresses/worries—like managing anxiety or reducing workload
- Give yourself tech-free time
 - Bright screens before night is a big no-no
 - Try to avoid screens for an hour
- Check for a physical cause
 - E.g. pain, illness or physical problems
 - Visit your GP
 - o talk to your partner about common issues disturbing sleep e.g. snoring
- Food, drink and exercise
 - o Caffeine, alcohol and sugary foods are particularly bad
 - Regular physical activity helps!
- Treatment options
 - You don't have to do it all by yourself
 - You can speak to a doctor or mental health professional
 - Options include:
 - o Talking treatments like Cognitive Behavioural Therapy for insomnia
 - Medication e.g. sleeping pills and SSRI antidepressants

Specific Resources for Sleep

Helpline: **Oxford Nightline**: Chat via instant messenger: <u>http://oxfordnightline.org/open-im</u> (open 8pm to midnight)

*Mind: https://www.mind.org.uk/media-a/2957/sleep-problems-2016.pdf

*Time to Change's Activity Pack on Sleep for MHAW: <u>https://www.time-to-change.org.uk/get-involved/get-involved-workplace/make-impact-your-workplace/mental-health-calendar/mental-health</u>

The Mental Health Foundation: https://www.mentalhealth.org.uk/a-to-z/s/sleep

The Royal College of Psychiatrists: <u>https://www.rcpsych.ac.uk/mental-health/problems-</u> <u>disorders/sleeping-well</u>

HELPLINES

Samaritans: 116 123 (24hrs a day, 7 days a week—"confidential support for people experiencing feelings of distress or despair")

Oxford Nightline: Chat via instant messenger: <u>http://oxfordnightline.org/open-im</u> (open 8pm to midnight)

Shout Crisis Text Line: Text 'Shout' to 85258 (24hrs a day, 7 days a week—"for anyone in a crisis anytime, anywhere")

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

Other helplines: https://www.nhs.uk/conditions/stress-anxiety-depression/mental-health-helplines/

OTHER RESOURCES

Mental Health during coronavirus: <u>https://www.mind.org.uk/information-</u> support/coronavirus/coronavirus-and-your-wellbeing/

https://www.mind.org.uk/information-support/coronavirus/coronavirus-and-your-wellbeing/

Online Mental Health Tools (Mind): <u>https://www.mind.org.uk/information-support/tips-for-everyday-living/online-mental-health/online-mental-health-tools/</u>

NHS Advice: https://www.nhs.uk/conditions/stress-anxiety-depression/feeling-lonely/

LGBT Foundation: https://lgbt.foundation/

Mental Health Awareness Week: <u>https://www.mentalhealth.org.uk/campaigns/mental-health-awareness-week</u>