

VCSE

health &
wellbeing
alliance ■

Let's talk – Depression and Anxiety



**A booklet to help us recognise,
explore, and talk about anxiety and
depression using our own language.**

What this booklet is about...

This booklet is about helping you recognise the signs and symptoms of anxiety and depression, where to get help, what treatments are available, and includes tools to help make opening-up about mental health a little bit easier.

Experiencing poor mental health as we age is common. Almost a third of us will experience depression and anxiety.

Feeling occasionally anxious and sad is a natural reaction to life and, usually, these feelings will be short-lived. But there may be times when it feels like we can't push them away.

Sometimes the changes in feelings will gradually creep up on us over time and it's quite likely that we will not recognise these as signs or symptoms of depression or anxiety.

Our feelings may make it difficult for us to get a restful sleep, affect our appetite, and stop us from doing our usual daily tasks and the things we enjoy.

Many of us will put these feelings down to simply being a normal part of ageing and we may not even consider seeking help.



But if our feelings are having a really negative impact on our lives, this is the time we should seek help from a healthcare professional. Healthcare professionals are there to diagnose, manage, and treat depression and anxiety disorders, helping us get back to feeling more like ourselves.

We might be nervous about having these conversations and asking for help, because talking about our feelings is not always easy.

Everybody is different, and some words or language used to describe depression or anxiety may not match our own situation of how we personally feel. That's okay. This booklet will help us to understand our feelings and support us with having conversations about our mental health, using words that feel right for us.

The most important thing for us to remember is that we should never be afraid of sharing our feelings and we shouldn't be worried about 'over exaggerating' or 'making a fuss'.

Talking about our problems, no matter how small, can stop them from becoming larger and more overwhelming.

Talking about how we feel

Feeling out of sorts – why might I feel this way?

We might start to develop the symptoms of anxiety or depression for several different reasons. Sometimes, there may be no clear reason why these feelings have developed.

We might start to feel out of sorts because of a change in our lives. Perhaps we have lost a pet who we loved very much, we have been diagnosed with a new health condition, or we are having to adjust to looking after somebody.

We might also feel worried and stressed over common life uncertainties such as being able to pay our bills or being fearful over events happening in the world.

Or maybe one day, for no clear reason, we've noticed that something feels a little bit off, and we just don't feel like our usual self.

Whatever the cause, struggling with our mental health is not a normal part of getting older.

If you can relate to having these types of feelings, or something just doesn't feel right, it might be a good idea to talk about how you are feeling with someone you trust.

How we want to talk about our feelings and thoughts is down to us.

Using the words that feel right for us

It's not always easy to open-up about how we feel, and it can be hard trying to describe what is going on in our minds.

We may not relate to some commonly used mental health language, including the terms anxiety and depression. Or we may have heard others talking about their own mental health experience and find that it is very different to our own. That's okay.

How we want to talk about our feelings and thoughts is down to us.

Everybody experiences things in their own way, and we should be able to speak about our feelings using words that feel right for us.

However we want to describe them, the most important thing to remember is that we don't just have to put up with negative thoughts and emotions. There are lots of things that can be done to help.



Does this sound familiar?

We all describe how we are feeling in different ways. Here is an example of how some older people explain what poor mental health feels like to them.

Can you relate to any of these?

"It's hard keep trying to put a face on it."

"I feel a burden."

"I am afraid."

"I want to hide away."

"Mole hills feel like mountains"

"Maybe it's just my old age creeping in and an old brain."

"I can't pull myself together."

"I feel overlooked."

"It feels like the damage is done."

"I am quite used to suffering."

"It feels like I've entered into a blank world."

"My confidence has plummeted."

What is Anxiety?

Anxiety

Anxiety is a term that people use to describe a variety of symptoms that we may experience when we feel fearful or anxious.

Anxiety is a normal reaction we may feel in different kinds of events and situations in our lives. Anxiety is what we feel when we are worried, tense, or afraid about things that are currently happening, or things which we think could happen in the future.

It's important that we experience anxiety because it is one of our internal warning systems that alert us to danger or other threats and prepares our bodies to fight back or get out of a dangerous situation.

A small manageable amount of anxiety from time to time is helpful. We can all recognise a time when we might have experienced these feelings and it's important for us to see that this is a normal human response to situations. Anxiety can help us deal with events in our day-to-day life, and even happy times can sometimes make us feel anxious.

Anxiety is a normal reaction we may feel in different kinds of events and situations in our lives.

When can anxiety become a problem?

Anxiety becomes a problem when anxious feelings come on unexpectedly and feel overwhelming and unmanageable. An anxiety disorder is a mental health problem that has a big impact on our daily life.

Some people will find it hard to control their worries. They may overthink situations, problems, and world events that we can't actually do anything about.

This can lead to feelings of anxiety that are more constant and affect our daily lives. These feelings may impact very negatively on the way we live and may even change what we do. We may find that we are avoiding certain situations or even things we used to enjoy.

How can we recognise anxiety?

Everyone's experience of the feelings of anxiety will be different and so will the symptoms. Many of us may experience physical symptoms such as restlessness, irritability, getting tired easily, increased heart rate, chest pain, and abdominal pain.

Importantly, we may also experience cognitive problems that will affect our reasoning or memory and could even mimic the signs and symptoms of dementia. This can be extremely worrying.

Anxiety can be the main symptom of several conditions. An anxiety disorder refers to a number of specific disorders that include fears (phobias) or anxiety symptoms.

Different types of Anxiety

Generalised Anxiety Disorder (GAD)

Some of the symptoms associated with GAD include people feeling anxious on most days, with worries about all aspects of daily life. These worries are usually extreme, unrealistic and hard to control.

Triggers for anxiety can change from day to day. Many people with GAD say it's almost impossible to stop their anxiety and that they can't remember the last time they felt relaxed. GAD can cause a lot of physical signs of anxiety.

Social Anxiety Disorder

Social anxiety disorder is an overwhelming fear of social situations. We can all feel a little bit shy going into new environments and meeting new people, but social anxiety can give us repeated feelings of fear before, during, and after most social situations.

It may leave us constantly worried about doing something which we think is embarrassing and it can contribute to feeling like we are being watched and judged by others.



Agoraphobia

Agoraphobia is an anxiety disorder. Many people assume agoraphobia is simply a fear of open spaces, but it's actually a more complicated condition that describes a fear of being in situations where escape might be difficult or where help wouldn't be available if things went wrong.

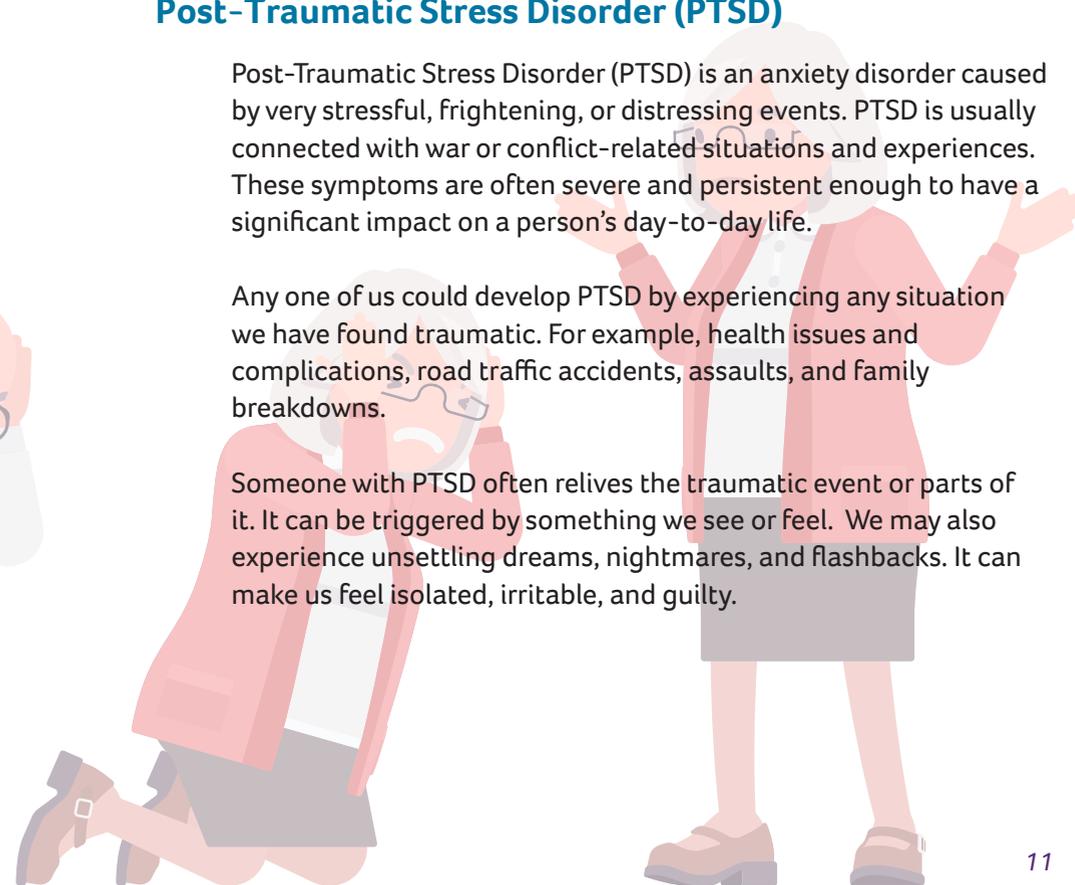
Someone with agoraphobia may develop a new fear of travelling on a bus or train, going to the shops, and in extreme cases not being able to leave their home at all. If someone with agoraphobia finds themselves in a stressful situation, they'll often experience the symptoms of a panic attack.

Post-Traumatic Stress Disorder (PTSD)

Post-Traumatic Stress Disorder (PTSD) is an anxiety disorder caused by very stressful, frightening, or distressing events. PTSD is usually connected with war or conflict-related situations and experiences. These symptoms are often severe and persistent enough to have a significant impact on a person's day-to-day life.

Any one of us could develop PTSD by experiencing any situation we have found traumatic. For example, health issues and complications, road traffic accidents, assaults, and family breakdowns.

Someone with PTSD often relives the traumatic event or parts of it. It can be triggered by something we see or feel. We may also experience unsettling dreams, nightmares, and flashbacks. It can make us feel isolated, irritable, and guilty.



Panic disorder

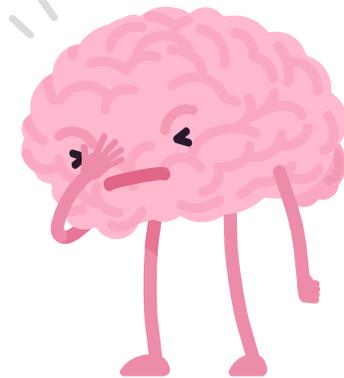
Panic disorder is an anxiety disorder where you regularly have sudden attacks of panic or fear.

We have all experienced feelings of anxiety and panic in our lives and it's a natural response to stressful or dangerous situations.

But someone who has a panic disorder will experience these feelings of anxiety, stress, and panic over and over again. Often there is no clear reason for the panic.

Panic is the most severe form of anxiety. A panic attack can be very frightening and distressing. Most panic attacks last between 5 and 20 minutes. Symptoms may include:

- a racing heartbeat,
- feeling faint,
- sweating,
- nausea,
- chest pain,
- shortness of breath.



Anxiety becomes a problem when anxious feelings come on unexpectedly and feel overwhelming and unmanageable.



What is Depression?

Depression

Feeling low, every once in a while, is something that we can all relate to. This is quite a normal part of life. But when these feelings last a long time or keep returning and start to impact our everyday life, this is when we could be experiencing clinical depression.

Depression is a serious and common problem for older people, and it is not a part of normal ageing. The good news is that it can be diagnosed and often successfully treated.

The tricky part is that, as older people, we often don't recognise the signs and symptoms so don't end up seeking help.



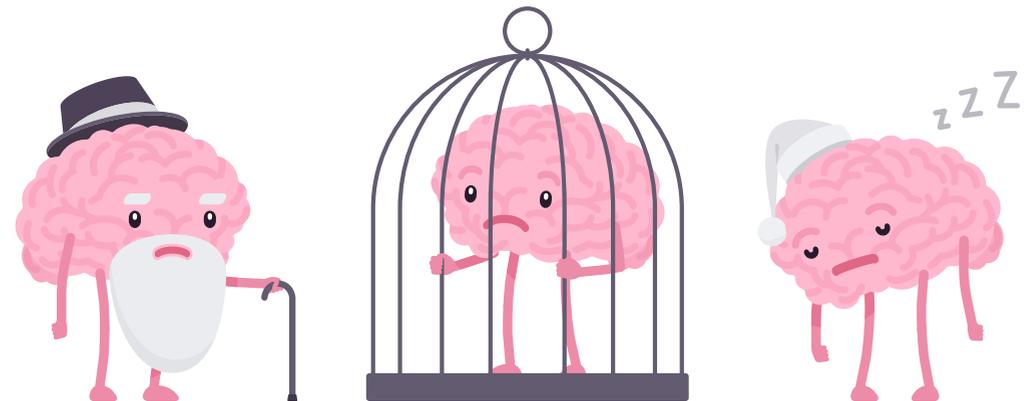
How can we recognise depression?

Each person's experience of depression will be unique. As we age we may have less obvious symptoms and often describe feelings of sadness or grief, with a lack of emotions, rather than feelings of a depressed mood.

We are also more likely to have other medical conditions such as long-term conditions or chronic pain that may cause or contribute to how we feel.

Symptoms of depression can range from being low in spirits and finding everyday tasks slightly harder to do, or feeling less worthwhile, to more severe symptoms that can impact our everyday life.

At its most severe, depression can be life-threatening because it gives us an increased risk of thinking about suicide.



The common signs and symptoms of depression

- Feeling less able to talk to people, needing to be quiet, preferring to be alone more than usual, or losing interest in things,
- Crying more than usual or over things that wouldn't normally make us upset,
- Feeling pessimistic, hopeless, and guilty,
- Difficulty in getting restful sleep, early morning waking, insomnia, and not wanting to get out of bed,
- Difficulty motivating ourselves to wash and dress, or generally not wanting to look after ourselves,
- Not being able to plan, shop, cook or sustain a good diet. Eating poorly, losing our appetite, or eating much more than normal,
- Not taking our medication as directed – either not taking it at all or taking too much of it,
- Drinking more alcohol.

Different types of depression

Clinical depression

This type of depression will last for at least two weeks before it is able to be diagnosed. It includes symptoms of depression that usually interfere with normal life such as sleeping, eating, looking after ourselves, and doing the things that we normally enjoy.

Persistent depressive disorder

This is a continuous, long-term form of depression. You may feel sad and empty, lose interest in daily activities, and have trouble getting things done. You may also have low self-esteem, feel like a failure, and feel hopeless.

Seasonal affective disorder

This form of depression comes and goes with the seasons, typically starting in late Autumn or early Winter and going away during Spring and Summer months.

Depression with symptoms of psychosis

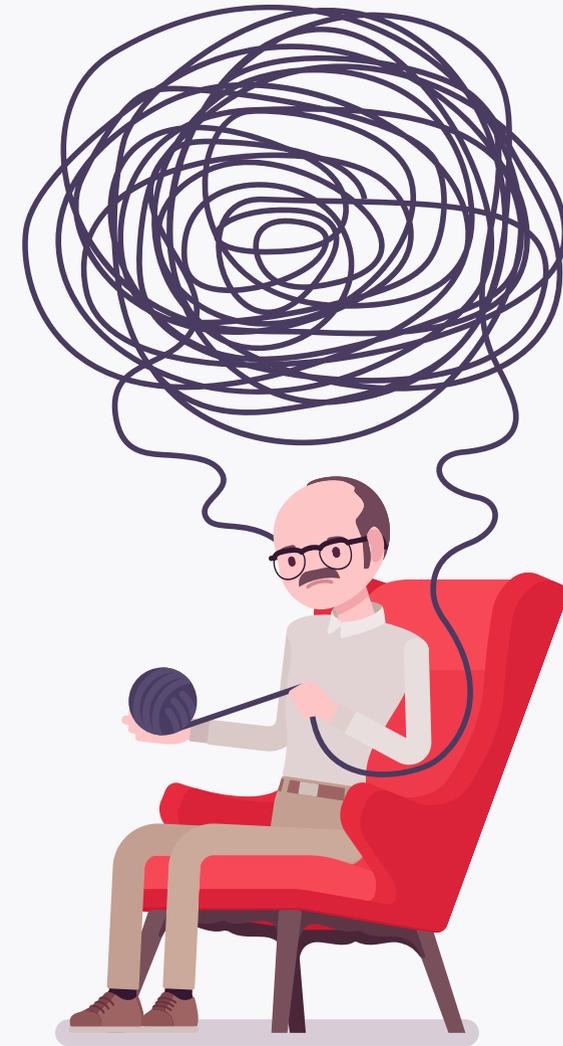
This is a severe form of depression where a person experiences psychosis symptoms, such as delusions (disturbing, false fixed beliefs) or hallucinations (hearing or seeing things that others do not see or hear).

Living with depression

- Recovery is about staying in control of your life with the support of your family, friends, and social networks.
- If you have been prescribed medication, such as antidepressants, it's important that you take them regularly even if you feel better. Do not stop taking them without consulting a healthcare professional.
- A healthy diet can help lift your mood. In fact, eating healthily seems to be just as important for maintaining your mental health as it is for preventing physical health problems.
- Keep an eye on your alcohol and smoking as they can make things worse. It's not advisable to use cannabis if you have a diagnosis of depression.



Depression is a serious and common problem for older people, and it is not a part of normal ageing.



Recognising the symptoms

Here is a summary of the common signs and symptoms of anxiety and depression.

Having these symptoms doesn't always mean that we have a mental health condition, but if we do recognise any of these signs then we should speak to a healthcare professional.

General Anxiety symptoms:

- Feeling extremely nervous,
- Excessive worrying over small things,
- Feeling withdrawn,
- Feeling agitated and restless,
- A noticeable shift in our attitude.
- Getting tired easily,
- Increased heart rate, chest pain, and abdominal pain,
- Problems with thinking and making decisions.

General Depression symptoms:

- Crying more than usual or over things that wouldn't normally make us upset,
- Losing interest in things,
- Sleeping more or less than normal,
- Feeling less able to, or wanting to, talk with others,
- Washing or looking after ourselves less,
- Wanting to be alone more than usual,
- Being quiet,
- Not taking our prescribed medication or taking too much of it,
- Not wanting to get out of bed.

When thinking about our symptoms, it's important to consider the changes to our mood, body, and attitude.

We mustn't forget to mention physical symptoms when talking about our mental health. Many of us may not realise that we have a mental health issue because we may have only noticed the physical symptoms.

All physical changes to our body should also be discussed with a healthcare professional to rule out other causes.

Changes within your body:

- Physical aches and pains,
- Moving very slowly,
- Breathing faster than usual,
- Feeling lightheaded, dizzy, and sick,
- Having a fast, thumping, and irregular heartbeat,
- Sweating and experiencing hot flushes,
- Having sudden, intense bouts of anxiety and fear.

Changes to your mood:

- Feeling low,
- Feeling guilty, worthless, and hopeless,
- Feeling numb,
- Feeling tired all the time,
- Feeling confused and forgetting things.

Changes in what you do:

- Having trouble speaking, thinking clearly, making small decisions,
- Taking less care of our appearance,
- Eating more, or less, than usual,
- Drinking more alcohol than usual.

When our feelings get out of control

Sometimes when we have reached a low ebb, our feelings will be far more severe and can sometimes lead to very frightening and negative thoughts.

This is when we are at risk of experiencing suicidal thoughts and we may start to develop plans to end our life or begin other self-harm and dangerous practices.

What can make us feel this way?

As we age, dealing with loneliness, chronic pain, disabilities, family stresses, and money worries can become more difficult to cope with, making us feel isolated and scared.

We may be able to link certain situations in contributing to our feelings, but sometimes there may be no obvious reason for feeling this way.

We may feel trapped and hopeless in our fear. It may feel like there is no resolution to be found and we might feel we are left with few options.

Feelings like this can be set off when we are suffering from extreme mental and emotional stress and the problem-solving part of our brain is not working. This can make it hard to think clearly and work out the next steps.

How do we get into this situation?

Symptoms of depression and anxiety may slowly creep up on us and, before we know it, these feelings have become how we normally feel. Sometimes we will find it hard to recognise how desperate we feel and might not be able to admit to ourselves that depressive and negative feelings are taking over.

We may want to hide these feelings because we can't find the words to describe how we feel, we fear being judged, and we may be worried about upsetting those close to us and want to avoid having any awkward and painful conversations.

When this is how we feel, we may start to think about and make plans to end our life.

Suicidal thoughts and plans

Sometimes, when we are depressed or experience anxiety, we may develop strong feelings of hopelessness and helplessness about the current situations in our life.

These thoughts are powerful and can become life-threatening if we can't see a way out or when we can't bear feeling like this any longer.

Negative thoughts can overtake us and can become quite frightening and uncontrollable. Sometimes these thoughts might lead us to thinking about plans to end our life.

If you feel that your life is at risk because you have hurt yourself and require emergency medical help, you should:

- **Call 999 for an ambulance.**
- **Go straight to A&E.**

Self-harming behaviour

We might be surprised to know that harmful behaviour in older people may be different to what we hear in the news and on television. It can be hard to identify harmful types of behaviour from behaviour which is simply a normal part of making choices about how we wish to live our life.

It can be tricky to identify which behaviours present a risk. Often, the only way we can recognise harmful behaviours is by admitting to ourselves, or others, our intention behind them.

If our aim is to shorten our life, endanger our health, or cause ourselves pain, we should reach out for help.

Potentially harmful behaviour may be starting to take more of our prescribed dose of medication, taking unprescribed drugs, or drinking more and stronger alcohol. We might do this to numb our feelings, believing that it will help us forget about how we feel for a short time.

We may even stop taking prescribed medications for our long-term conditions, because we think that it may quickly shorten our life.

*If you have strong feelings of wanting to die or have plans to hurt yourself, you should call the **Samaritans on 116 123** and there will be somebody to listen.*

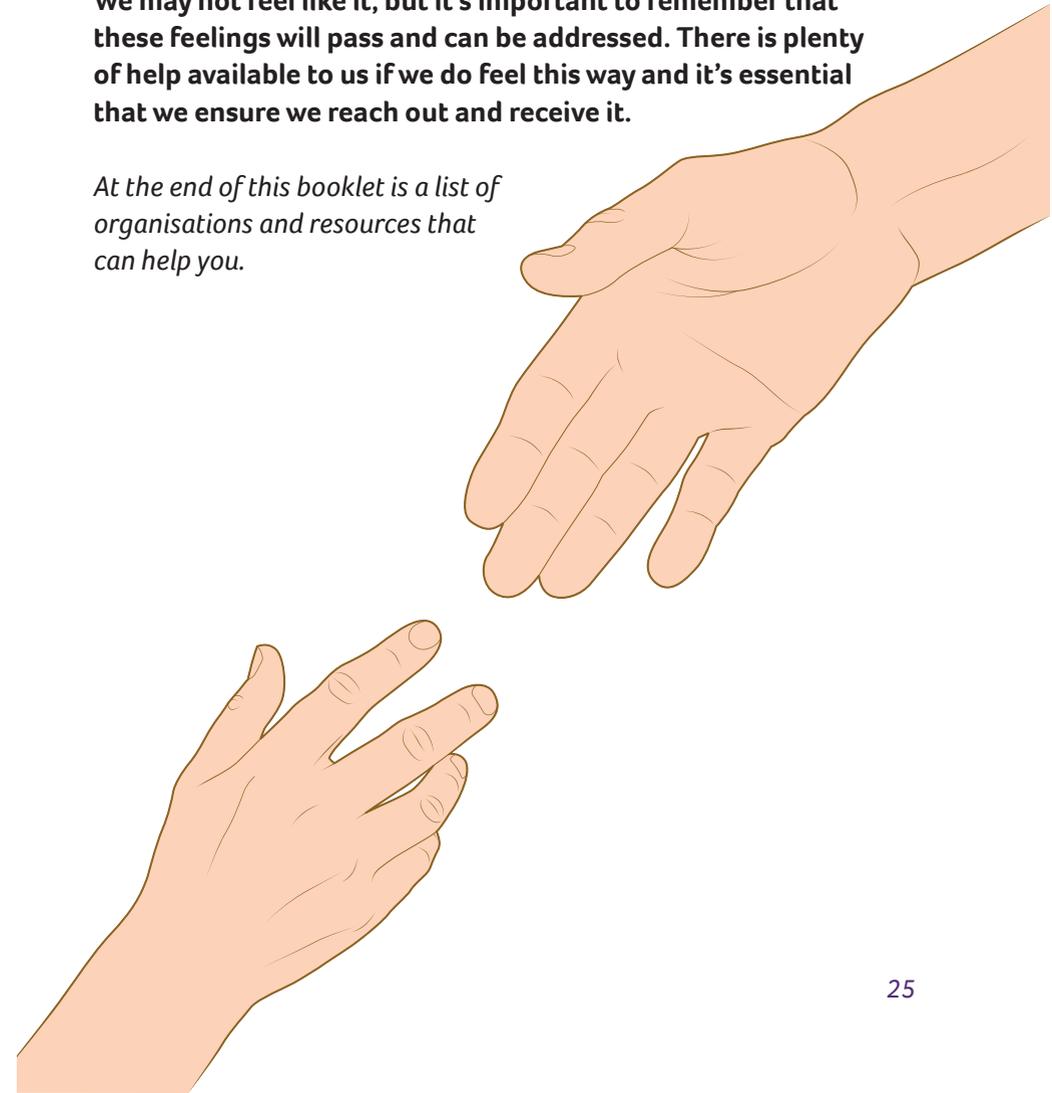
What can help us?

Help and support is out there, but we must be honest with ourselves and admit how dreadful we feel - telling someone we trust and being open to accepting their help.

We must make every effort to do this because, when we get the right support, suicide and self-harm are preventable.

We may not feel like it, but it's important to remember that these feelings will pass and can be addressed. There is plenty of help available to us if we do feel this way and it's essential that we ensure we reach out and receive it.

At the end of this booklet is a list of organisations and resources that can help you.



The diagnosis journey – talking to a healthcare professional

What to expect from a mental health assessment

You may have a face-to-face, video call, or phone call with a mental health professional from the Community Mental Health Team.

They may send you a questionnaire to complete before your assessment. Take your time to complete it and don't worry if you can't. You will have the opportunity to discuss it with the healthcare professional.

Be prepared. It's good to think about what you want to tell them in advance. You can use the conversation tool at the end of this booklet to help with this conversation.

They will make you feel relaxed and have a conversation to find out how you are feeling, ask about your thoughts, discuss the impact of your feelings, and ask about any the issues you are particularly worried about.

They may ask quite a lot of probing questions. You should try to answer these as best you can.

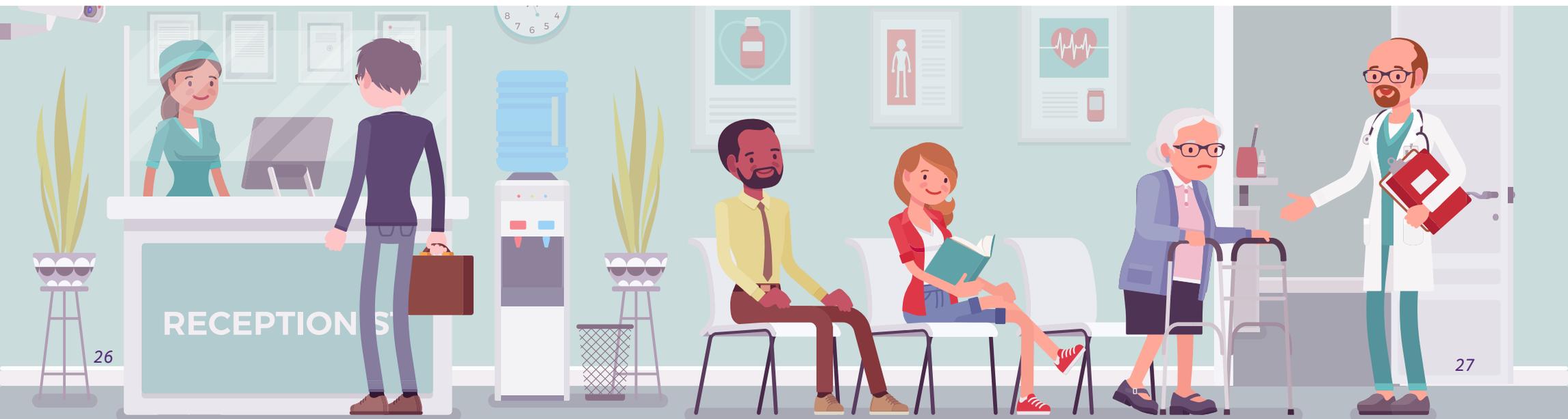
They may ask about your appetite, if you have lost or gained weight, how much alcohol you drink, unprescribed drug use, and if you have had any thoughts about suicide or plans to harm yourself or end your life.

They will ask about your physical health and any health conditions you may have, as well as the prescribed medications you take to help manage them.

How do professionals make a diagnosis?

They will consider the answers from your assessment and the results from the questionnaire. They will use their clinical judgement to decide if you are experiencing depression or anxiety.

Be prepared!
It's good to think about what you want to tell the healthcare professional in advance.



Engaging with healthcare professionals – who's who?

Mental health is a dynamic field of healthcare that has a flexible approach to treating patients.

Mental health professionals often work together in a community mental health team (CMHT). Most people who experience mental health problems are cared for with input from the whole team. Often this can be done in their own homes.

The team is usually made up of:

- Old-age Psychiatrists who have the knowledge and experience to manage the additional diagnostic and treatment challenges for older people, including issues like long-term conditions. They can diagnose mental health conditions, prescribe and monitor medications, and provide therapy.
- Mental Health Nurse or Community Psychiatric Nurse (CPN) who can assess and support a person through their mental health condition and enable them to have more involvement in, and control over, their condition.
- Pharmacists who give advice and monitor prescribing of medications to the team.
- Social Workers who assess a person's mental health. They work with people to find solutions to their problems and are advocates.
- Occupational therapists who identify areas where skills development is needed and assess how the environment helps or hinders people in achieving their goals.
- Psychologists who are trained to assess a person's mental health using clinical interviews, psychological evaluations, and testing. They can provide individual and group therapy.



Treatment options:

If you have been to see a healthcare professional and received a diagnosis for anxiety or depression, you might be referred for treatment.

There are a range of treatment options available. It can be quite confusing understanding what all the different treatment options are and how they can help. Your healthcare professional will prescribe the best treatment option for you.

Some of us may be referred for a single treatment, whilst others will receive a combination of treatments.

Wait and see – ‘Watchful Waiting’:

If you are experiencing symptoms of mild depression, your healthcare professional may suggest waiting a short time to see if it gets better by itself. This will be followed up by a healthcare professional. This is known as watchful waiting.

Mindfulness:

Mindfulness is a technique to help us focus more on the present moment by becoming more aware of the sights, sounds and feelings that we’re experiencing. It can help us cope with difficult thoughts or feelings. Mindfulness exercises can be done at home or when we’re out and about.

Talking treatments:

‘Talking therapies’ can be very helpful when we are feeling low, anxious, or out of sorts. They have been proven to work particularly well for older people and involve talking to someone who is trained to help us manage our thoughts and feelings and the effect they have on our mood and behaviour.

Talking therapies are offered in different ways, including using a self-help workbook with the support of a therapist, as an online course, one-to-one (in person, over the phone, or through video consultation), and in a group.

The most common talking therapies are cognitive behavioural therapy (CBT) and counselling.

- **Cognitive Behavioural Therapy:** is based on the idea that thoughts, feelings, what we do, and how our bodies feel physically, are all connected. CBT works to help us notice and challenge patterns of thoughts or behaviours so we can feel better.
- **Counselling:** involves talking about our problems and feelings in a safe environment. Counsellors are trained to listen and empathise. They won’t give specific advice but will, instead, support and guide us to understand our problems and deal with negative thoughts and feelings.

Medication

Depending on your symptoms, you might be prescribed medication as a treatment for depression or anxiety.

Medication can really help, but you might be wary about starting a new medication and have concerns about any potential side effects, particularly if you take other medicines to manage our long-term conditions.

You should discuss any specific concerns you may have about starting medication with your healthcare professionals so they can prescribe the right treatment.

Keeping on top of our medication

Medicines prescribed by health professionals can have a very positive effect and help us to manage our conditions and keep well. It's important that we regularly have our medicines reviewed by a pharmacist or a GP.

If you find that you are taking lots of different medications every day, and you are getting side effects, ask your pharmacist to do a medicines check.

If you have been prescribed medication such as antidepressants, it's important that you take them regularly even if you feel better.

Do not stop taking them without consulting with a healthcare professional.

Antidepressants:

Antidepressants are a common and effective type of medication treatment that is prescribed to treat depression. Antidepressants are usually taken in tablet form.

You'll start on the lowest dose needed to improve your symptoms. They work by boosting the level of brain chemicals that lift our mood.

There are several different types of antidepressants, and your healthcare professional will explain which type they think will work best for you, taking into consideration any other medications you're already taking and any other health conditions.

Remember, antidepressants can take between two to four weeks to begin to work, and you may find that it takes six to eight weeks for them to actually make a difference.

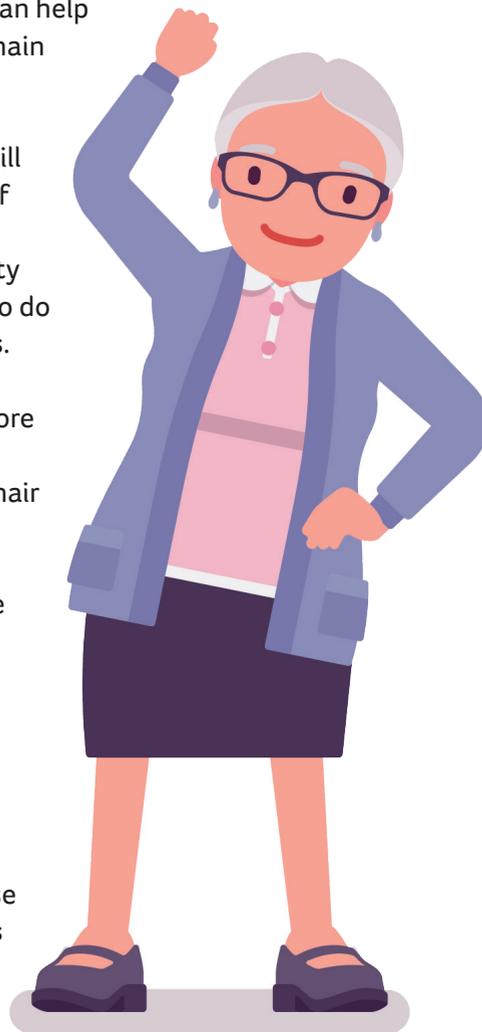


Exercise

There's evidence that exercise can help depression, and it's one of the main treatments for mild depression.

How much exercise we can do will be different for all of us. Some of us may be able to join exercise classes and local physical activity initiatives. Others may choose to do more exercise in our own homes.

The key thing is to try and do more physical activity than we would usually do. This might involve chair exercises, walking around the house, or even just opening up the windows and taking in some deep breaths.



Applied relaxation

If we receive a diagnosis for anxiety and depression, we might be offered applied relaxation. This teaches us to use relaxation techniques to help us cope in situations where we feel anxious.

Healthcare professional guided self-help

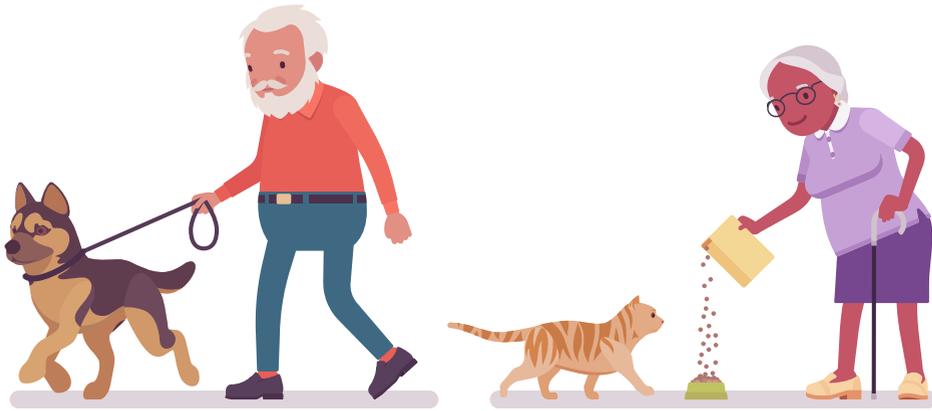
Our healthcare professional might suggest that we have a look at self-help resources or groups.

These can be a great way to find support, share ideas on what helps boost our mood, and gain self-confidence. Meeting other people who understand what we're going through can be helpful too.

Some types of self-help involve very little contact with a healthcare professional, while others involve talking to a someone every few weeks to review our progress. Treatment examples include working through a self-help book or doing online therapy programmes.

- **Workbooks:** Your GP might recommend workbooks from a scheme called [Reading Well](#), which offers Books on prescription. This scheme is supported by most local libraries.





Summary

This booklet has explored anxiety and depression, with the aim of helping us understand what these disorders are, how they can make us feel, how we can recognise them, and what we can expect in a diagnosis and treatment journey.

As we get older, we must remember that experiencing anxiety and depression are not normal and we don't have to put up with those feelings.

There is plenty of help, support, and treatments available to help us get back on our feet.

We should always remember that there is no cut off age or point to seeking help, and many treatments have a very positive outcome for us as older people.

Feeling or talking about depression and anxiety is not a weakness, it has no reflection on how 'strong' we are or our ability to manage life's struggles.

There is a lot of courage to be found in reaching out for help and telling people how we feel.

We hope this booklet can provide you all with the knowledge and understanding to confidently speak out about mental health and recognise that it's okay to describe how we are feeling in a way that works for us.

There is a lot of joy to be found in being older and we mustn't let our mental health hold us back.

Resources and organisations that can help

Age UK

- We provide advice and information for people in later life through our Age UK Advice line, publications and website.
- We offer support through our free **advice line on 0800 678 1602**.
- Lines are open 8am–7pm, 365 days a year. We also have specialist advisers at over 125 local Age UKs.
- There's plenty of really useful information on our website, too. Visit www.ageuk.org.uk
- [Age UK Your Mind Matters Information Guide](#)

NHS

- Website providing information about local NHS services in England and advice on mental wellbeing. www.nhs.uk
- The NHS Every Mind Matters website gives advice and practical tips to help you look after your mental health. www.nhs.uk/every-mind-matters

MindEd Resources – Health Education England

- Safe and reliable mental health advice for older people and those who care for them.
- www.mindedforfamilies.org.uk/older-people

Malnutrition Task Force

- Eating well has a huge impact on our mental health. The Malnutrition Task Force provides a variety of different resources and information for older people on topics such as avoidable and preventable malnutrition, end of life care, and mental health.
- www.malnutritiontaskforce.org.uk/resources

Mind

- Charity providing advice and support on mental health issues.
- www.mind.org.uk

Mental Health Foundation

- Charity offering information and support on mental health.
- [Looking After Your Mental Health in Later Life Resource](#)

Samaritans

- Confidential helpline offering support to talk about your feelings. Lines are open 24 hours a day, 365 days a year. **Helpline: 116 123**
- www.samaritans.org

Cruse

- Charity offering a dedicated helpline and counselling to support people who have been bereaved. **Helpline: 0808 808 1677**
- www.cruse.org.uk

Depression UK

- National self-help organisation that helps people cope with their depression.
- Email: info@depressionuk.org
- www.depressionuk.org

Anxiety UK

- Charity providing information, support and help to people who have been diagnosed with, or suspect they may have, an anxiety condition.
- **Helpline: 03444 775 774**
- www.anxietyuk.org.uk

Hub of Hope

- The Hub of Hope is the UK's leading mental health support database.
- www.hubofhope.co.uk

Harmless

- Harmless is an organisation who works to address and overcome issues related to self-harm and suicide.
- [Harmless Resource Hub](#)

Shout

- Shout is the UK's free and confidential, 24/7 text messaging support service for anyone who is struggling to cope.
- Text 'Shout' to **85258** to talk to somebody.

'Can I talk to you?' – Conversation Slip

You may be feeling like you want to open-up to somebody about how you are feeling. This could be a friend, partner, healthcare professional, or may be just somebody you trust. It's not always easy to talk about these things and sometimes it can be hard to find the right words.

Using the information in this booklet you may want to use this slip to help you prepare for the conversation and as a prompt to help you express how you're feeling.



I have been feeling a bit out of sorts and was wondering if I could talk to you about some of the changes I have been noticing. These include:

Some changes in my mood, such as:

Some changes in my body, such as:

Some changes in my actions, such as:

I have been feeling this way for:

This has impacted my life by:

Some recent events in my life which may have contributed to how I'm feeling include:

(You may want to think about whether you have experienced any recent loss in your life, changes to your health, retirement, changes to your finances, changes to your responsibilities and who you look after, or general life experiences which have impacted you in a negative way)

What I would like to do about how I'm feeling:

- I'm not sure and would like some help.
- I just want to talk about it.
- I would like to speak to a healthcare professional.
- I would like to know more about possible therapy or counselling.
- I would like to know more about possible medication.
- I would like to know more about self-help techniques.
- Other:

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For more information, please visit: <https://www.england.nhs.uk/hwalliance/>

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