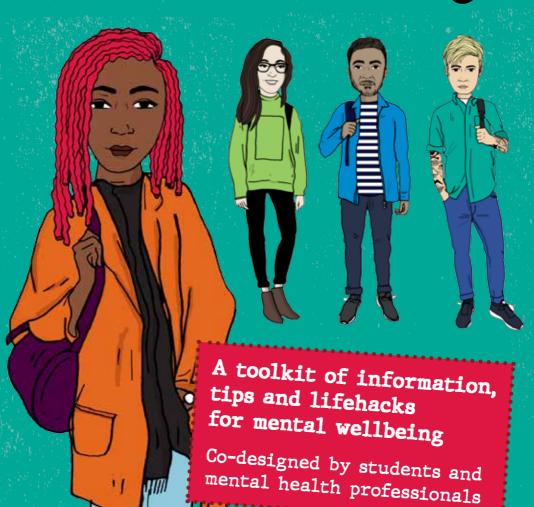
Step Up: University



Your mental health is a priority.

Your happiness is an essential.

Your self-care is a necessity.







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Understanding your Wellbeing



What is Mental Health

Mental health is something that affects everybody. It can impact how we feel, think and act. Almost all of us will go through a struggle that affects our mental health in our lives. That's why it is important we look after it, just like we would our physical health.

We are more susceptible to mental health difficulties in times of:

Stress

Exams, work, responsibilities, lack of time, lack of support

Change

People, places, life, season, current events

- Low resilience
- Difficulty

Loss, illness, traumatic events and unresolved issues

Biology

(more impact on illness), hormones, menstrual cycle

This handbook will mainly cover low mood and anxiety as these are the most commonly experienced difficulties.

However, the next few pages do contain a definition for some other common mental illnesses and typical symptoms linked to these illnesses.

Defining Mental Health

Mental illness is more uncommon, enduring and usually requires treatment, either professional or self-help. There are any different disorders and so below is a very limited list of some common illnesses.

Anorexia

Obsession about weight and body image. Attempt to control emotions through severe diet restriction and possible over exercising. Usually combined with a distorted selfimage and how others view them.

Symptoms: Weight loss, low energy, low self-esteem, fear of eating, fear of weight gain.

Bipolar Disorder

Fluctuations between high (manic) and low (depressive) moods. Inability to keep mood stable.

Manic symptoms: Low sleep, excited mood, inability to slow down thoughts, impulsive and/ or risky behaviour (e.g. excessive spending, drinking, drugs).

Low symptoms: Like clinical depression.

Bulimia

A cycle of restricting food and over exercising along with an uncontrollable compulsion to binge eat. Some people may also throw up or abuse laxatives, after binging but not always.

Symptoms: Yo-yoing between starving and over-eating, purging (throwing up or using laxatives), poor self-image, anxiety, low mood.

Clinical Depression

The feeling of low mood, loss of enjoyment and general happiness. Can happen suddenly (e.g. losing someone) or slowly (e.g. loneliness during summer holidays).

Hormones and chemicals in the brain can have a large impact too, most notably the hormone serotonin. **Symptoms:** Tiredness, reduced concentration, social withdrawal, numbness, feeling of hopelessness, negative thinking, disturbed sleep.

Obsessive Compulsive Disorder

Ritualistic behaviours that come from a compulsive and usually irrational thought. An example would be washing your hands every time you touch a person from fear of catching a disease.

Symptoms: Uncontrollable thoughts, repeated behaviours (to try and stop thoughts), self-limitation, obsessions, struggle with change.

Panic Attacks

Unpleasant and intense physical symptoms triggered from a situation you are anxious about. An example is having a fear of heights and feeling faint if you are in too tall of a building.

Symptoms: Breathlessness, shaking, increased heart rate, nausea, sweating and much more.

Post-Traumatic Stress Disorder

The stress, anxiety and mood changes caused from an unpleasant event that we have not been able to process. An example would be witnessing a car crash on the motorway. In the moment you may not think you were harmed as you were not physically involved.

However, in the future you may experience nightmares and panic symptoms when you are on the motorway.

Symptoms: Flashbacks, anxiety, low mood, nightmares, disassociation, repression, addiction/self-medication (method of coping).

Psychosis

Perceiving or interpreting things differently from those around you through disturbed thinking, seeing or hearing things that are not there. Can be caused by drug misuse or chemical imbalances and may lead to a diagnosis of schizophrenia.

Symptoms: Hallucinating sounds, smells, tastes, hearing voices and/ or delusions of strong beliefs not shared by others.

Visualising Stress

We all have a different capacity to deal with stress depending on what's going on in your life. This is called your resilience. Imagine the bucket below represents your capacity to deal with stress.

The bucket fills up as you experience more stress. If we take on too much, the bucket might overflow, and we might become susceptible to feeling unwell.

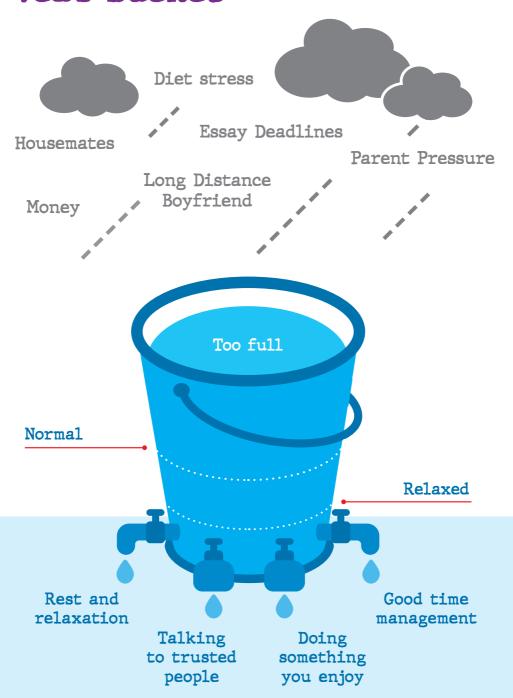
However, by making time for pleasurable activities and healthy habits, we can turn on the tap to relieve the pressure and prevent the bucket from getting full.



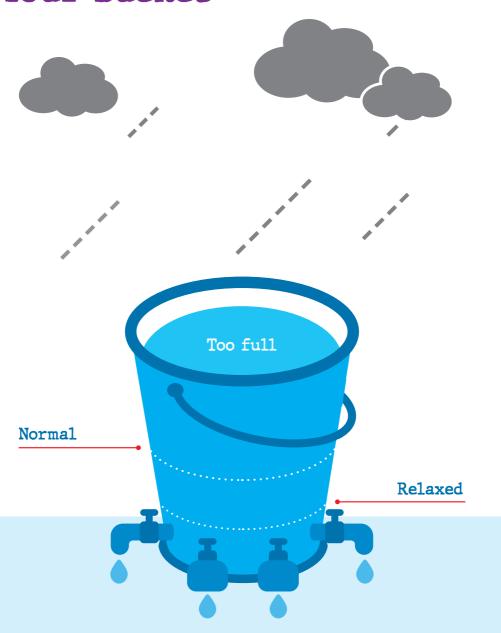
Use the bucket on the next page to fill in your life stresses.

- How full is your bucket?
- Do you need to turn on another tap?

Vea's Bucket



Your Bucket



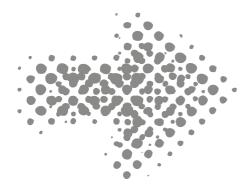
"You can only be responsible for your own happiness. It is not something that can be given from one person to another. You are the most helpful to other people once you have found your own. Then you can show them real love, as you have learnt to give this to yourself."

Beth, Student Mentor

Mental Health Continuum

Having good mental health requires a good understanding and use of self-care strategies so you can take care of your wellbeing. Just like how someone with a physical illness such as diabetes can still be well with medical support and good lifestyle choices, the same is true of mental health.

It can be helpful to think of mental health as a continuum. Everyone will sit somewhere on this and can move around as their health maybe better or worse at different times.





Where do you think you sit on the Mental Health Continuum?

Maximum

Maximum mental illness diagnosis





Minimum



Minimum mental illness / no diagnosis



wellbeing

Big Picture

If you feel you might be struggling with your wellbeing, have a think about what has changed in how you think, feel and what you do. This can help us get a bigger picture on how you are being affected and what tools might work best for you.







THINK

Thoughts we think

FEEL

How we feel physically

DO

Behaviours we do

The toolkit section of this handbook follows four students through common struggles of university life and techniques that help them look after their wellbeing.





A large part of looking after your wellbeing is recognising when you are struggling. This can be particularly difficult to identify when you are in the eye of the storm.



- Indicators you might be struggling.
- Focus on one problem area per flag
- Consider what has the most important impact to your wellbeing.
- · Can share with people closest to you
- Helps you better understand your mental health

Have a think about what factors or Red Flags might indicate you are becoming run down. We can also share this with the important people in our lives that may be able to recognise it objectively. We can then take action early to avoid getting worse.

Use the space below to reflect on your red flags:

These questions are commonly used to help indicate if you could be suffering from symptoms of low mood and/or anxiety. This is not a diagnosis, but rather an indicator of your current wellbeing.

- Count up all your scores for each questionnaire separately.
- If you scored 8-15 you may be exhibiting mild symptoms of low mood and/ or anxiety. A score over 15 can indicate more intense symptoms.

Seek help if you feel your symptoms are affecting your wellbeing.

Low mood

Over the <u>last 2 weeks</u>, how often have you been bothered by any of the following problems? (Use ✓ to indicate your answer)

	Not at all	Several days	More than half the days	Nearly every day
Little interest or pleasure in doing things	0	1	2	3
Feeling down, depressed or hopeless	0	1	2	3
Trouble failing or staying asleep, or sleeping too much	0	1	2	3
Feeling tired or having little energy	0	1	2	3
Poor appetite or over eating	0	1	2	3
Feeling bad about yourself – or that you are a failure or have let yourself or your family down	0	1	2	3
Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3

Anxiety

Over the last 2 weeks how often have you been bothered by any of the following problems? (Use ✓ to indicate your answer)

	Not at all	Several days	More than half the days	Nearly every day
Feeling nervous, anxious or on the edge	0	1	2	3
Nor being able to stop or control worrying	0	1	2	3
Worrying too much about different things	0	1	2	3
Trouble relaxing	0	1	2	3
Being so restless that it is hard to sit still	0	1	2	3
Becoming easily annoyed or irritable	0	1	2	3
Feeling afraid as if something awful might happen	0	1	2	3

Toolboxes



When something needs mending at home, you may need tools to help you. Sometimes different tools are required for different jobs.

We use this metaphor to also help us create a toolkit of positive and pleasurable activities. This can be used to help us counter balance the red flags you identified earlier.

Try to avoid negative habits or patch up jobs which may help us feel better in the short term but make us worse later such as excessive drinking.

Have a moment to think about what would be

in	you	r toolbox?

"When you feel anxious, depressed or worthless, that is when you need to be kindest to yourself. Don't get mad at yourself for feeling this way or feel like you don't deserve your own compassion. Try to accept these feelings and do something that puts you in a better mood."

Finding your Voice

Often when we feel low or anxious, we stop doing our hobbies and usual activities. We may do this due to low motivation. However, those activities help keep us strong.



Frankie

Wellbeing through my pen

Writing helps me feel better. I write poetry about my experiences and emotions. It really helps me make sense of my journey and release my emotions.



Vea

Wellbeing through food

I like to cook. There is something soothing and relaxing about it. I sometimes struggle to find the motivation to cook and want to rely on takeaways. However, I know if I cook I will feel better, even if it's something simple.



Emma

Wellbeing through volunteering

Helping other people has really helped with my recovery from anxiety. It gets me out of my comfort zone. I also get to help other people, which is rewarding.

Low Mood

Raj's Big Picture

Raj is in his first year studying Economics (1st year)

Difficulty: Anxiety (fear of failure, social anxiety, disappointing family)

Other factors: Dyslexic, friends don't go to university, doesn't drink

Accommodation: Lives at home

Intake: Good diet, over sleeps, daily weed use

- Raj finds it hard to stay focused
- He struggles to wake up for any early class
- Spends a lot more time at home playing FIFA and PUBG
- Stopped playing football on Saturday because it's too early in the day
- Can't be bothered to speak to his family
- He notices that he feels happier in summer and a bit worse in winter

Thoughts we think

- 'I can't be bothered'
- · 'What's the point'

How we feel physically

- Always tired
- No concentration

Behaviours we do

- Sleeping and waking up late
- Stopped playing football
- Plays PUBG on his phone with friends for hours instead



Raj's red flags





Lack of routine



Less activity



Disturbed sleep pattern



Endlessly playing games



Withdrawn from family



Mood worse in winter

Raj has developed the following four habits as a part of his toolbox to prevent him from feeling low...



Finding voice

Play football weekly



Sleep Hack

Wake up early even if he doesn't sleep



Balancing act

Limit time on PUBG to one hour per day



Balancing act

No phone or tablet one hour before bed

Balancing Act

Maintaining positive behaviours becomes particularly important in times of stress. They help us remain resilient and reduce chances of feeling worse. Having a routine of harmful behaviours can increase our chances of feeling worse and make it harder to recover.

By harmful behaviours, we mean things that have a negative impact to your physical and emotional wellbeing overall.

Examples include:

- Over indulging in drinking
- Sleeping less than seven hours regularly
- Emotional eating such as binge or restriction

- Erratic spending
- · Social withdrawal
- Emotional spending outside of means
- Engaging in risky unprotected sex

Harmful behaviours differ between people. Some may enjoy activities such as drinking and eating junk food as a treat without negatively impact on their wellbeing. It may even be part of strengthening their wellbeing resilience.

Sleep, diet, activity levels and **social contact** are particularly important. If these are in unbalanced, they can have a detrimental effect on our wellbeing.

Too much activity can lead to feeling 'burnt-out'.

Too little activity can extinguish our motivation and reduce our energy levels.

"you are 7x more likely to accidentally injure yourself physically when you have had less than 7 hours sleep?"

Too much sleep can lead to restlessness and make us feel out of sync with the rest of society.

Positive behaviour



Pressing Reset and taking it slow

- · Make your bed and tidy room
- Invite a new friend to go for a walk and explore somewhere new
- Take time to try out cooking something nutritious for yourself
- Take a night off the usual: if you're in the habit of staying in find something fun in a new place. If you're always out, try spending a night in

Sleep Tips



Go to bed at the same time everyday.



Don't try catch up on sleep by taking naps or lying in.



didn't get much sleep. Wake up same time everyday, even if you



Avoid using your phone or anything with a screen for at least 30 minutes before you try to sleep.



Charge your phone away from your bed.



Try not to do work in your bed so you associate it only with sleeping and relaxing.



Practice a relaxing bedtime ritual such as having a warm bath or doing yoga before going to sleep.



If you can't fall asleep after 30 minutes, get up and engage in a quiet restful activity such as reading or listening to music, until you get sleepy. Then try going to sleep again.

Tried and tested



Breathing! In for 4 seconds, holding for 7 seconds and out for 8 seconds. I try and do this for 10 minutes



Lavender essential oil on my pillow



What would for would

Switching to herbal tea and steering clear of caffeine at least 6 hours before bed

Whilst nicotine, marijuana and alcohol are popular de-stressors, these actually disrupt sleep in the same way as caffeine

what works for you:

Life Online

It's easy to forget how edited the life's you see online can be and the affect this can have on us. Consider trying out a few of the following and seeing the difference it makes:

- # Unfollow any accounts that make you feel bad about yourself
- # Follow accounts related to your interests and values
- # Put your phone on aeroplane mode for 2 hours a day
- # Call someone you would normally message
- # Search Eventbrite for a free event on something you're passionate about
- # Set yourself a single screen rule

"People are attracted to humanity, not perfection. Don't give into the pressure of having to look perfect, to do perfectly at school. You will never reach perfection so you have a choice to accept yourself with all the imperfections or continue obsessing about ways to reach perfection, which never ends." Emilia, Student Mentor

Low Mood

Vea's Big Picture

Vea is in her fourth year studying Medicine

Difficulty: Low mood, stress, sleep trouble

Other factors: Team sports, popular

Accommodation: Lives off campus in house share

Intake: Good diet, poor sleep, alcohol, very occasional MDMA use

- Vea has found herself getting increasingly worried about her upcoming exams
- She often finds herself having very negative thoughts going around her head
- She finds it very difficult to be productive as she thinks nothing she writes will be good enough

Thoughts we think

- 'I am going to fail'
- 'I will disappoint'

How we feel physically

- Short of breath
- Racing heart
- Butterflies

Behaviours we do

- Procrastination
- Worry
- Avoidance



Veals red flags





Procrastination



Panic symptoms



Thoughts of failure



Thoughts of disappointment

Vea has developed the following four habits as a part of her toolbox to help her relax...



Use study tips



Study with friends



Practice mindful breathing



Keep a wellbeing box

The biology of panic attacks

You cannot die from a panic attack! Panic attacks are the body's natural response to a perceived danger. The symptoms are a result of release of hormones which help the body fight the situation or run away. The diagram below helps explain what you may be going through in a panic attack.



Threat/ Perceived Threat Wild animal attack or exam pressure



Brain Processes Signals Amygdala (emotions and fear) and

hypothalamus (nervous system)



Pituitary Gland Releases cortisol and adrenaline hormones





Fight or

Flight

Physical Reactions



Heart rate increase



Dry mouth



Bladder relaxation



Shaking



Slowed digestion



Dilated pupils



Flushed face



Hearing loss

All these symptoms have evolved to prepare you for a fight or flight.

Breathing, yoga and mindfulness

Just Breathel

Using a breathing exercise can help regulate the body and reduce the symptoms. It is particularly useful to help prevent a panic attack from occurring in the first place.



Breathe in through your nose slowly for 3 seconds



Breathe out very slowly through pursed-lips for 5 seconds



Repeat

Yoga

Yoga is known to have many benefits to your mental and physical health. Studies have found taking time to do yoga two times a week can lower blood pressure, decrease the feeling of stress and low mood.

There are lots of places you can practice yoga on the cheap as a student. Look out for classes in the nearest community space or gym or just look on YouTube!

Mindfulness

This technique will take you through your five senses to help remind you of the present. This is a calming technique that can help you get through tough or stressful situations.

Take a deep belly breath to begin.



LOOK

Look around for 5 things that you can see and say them out loud.



FEEL

Pay attention to your body and think of 4 things that you can feel and say them out loud.



LISTEN

Listen for 3 sounds. It could be the sound of traffic outside, the sound of typing or the sound of your tummy rumbling. Say the three things out loud.



SMELL

Say two things you can smell. If you're allowed to, it's okay to move to another spot and sniff something. If you can't smell anything or you can't move, then name your 2 favourite smells.



TASTE

Say one thing you can taste. It may be the toothpaste from brushing your teeth, or a mint from after lunch. If you can't taste anything, then say your favourite thing to taste.

Take another deep belly breath to end.

Concentration and motivation

Tips of low concentration and lack of motivation

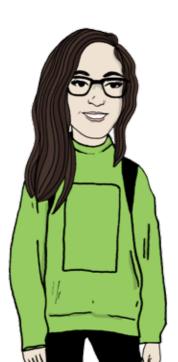
It can be hard to find the motivation and have the concentration to study or work when we are feeling unwell. These are normal feelings. Here are a few tips from other students you might find helpful:

Tidy space, tidy mind

It may sound obvious, but I find it much easier to study in the library, the walk there helps clear my mind and there are less distractions than anywhere else.

Study with friends

I find studying with other people much more enjoyable and being able to teach each others different topics really helps the information stay in our heads.





Reward yourself for each milestone

It is very important to reward yourself. If I have completed a task, such as cleaning one part of my room. I make sure I reward myself with something nice like an episode of the show I am currently obsessed with.

This way I feel good about what I have done and I am more eager to complete the task as I know I am working towards a reward.



Break it down into manageable steps

When the workload is huge, I break my work into small goals. I set a target to study for just 30 minutes, then I can take a break and repeat. It becomes so much easier hit my first target and I feel like I've achieved something.

Before I know it, I have studied more in one day using small targets than I did a whole week in the past.

To do and today

I like lists but often find they can become unachievable, so I write a "to do" and a "today". The to do helps me think about everything I'd like to do and the today is a more specific list of what I might realistically achieve.

Self-harm and body image

Frankie's Big Picture

Frankie is in their second year studying Fine Art

Difficulty: Body image issue (self-harm)

Other factors: Sees a therapist fortnightly, moved far from home

Accommodation: Lives on campus

Intake: Poor diet, good sleep, weekly alcohol use

- Frankie was bullied in 6th form but found their first year of university to be a positive experience
- They really enjoy the course and have made some close friends through clubs and societies
- Frankie still uses self-harm as a coping mechanism and engages in disordered eating in times of low mood and high stress.

Thoughts we think

- 'I am ugly'
- 'I will never get a partner because of the way I look'

How we feel physically

- Hopeless
- Not good enough
- Shame

Behaviours we do

- Emotional eating
- Purging
- Punishing self for bad behaviour

Frankie's Red Flags





Feeling of low self-worth



Excessive drinking



Avoiding friends and withdrawing from socialising

Frankie has developed the following four habits as a part of their toolbox to prevent them from feeling low...



EatingAcknowledge and montior



Self harm coping
Elastic band

on wrist



Support map Keeps support map on wall



Positive habits
Meets with LGBTQ+

society weekly

Disordered Eating and Body Image

Frankie has found it helpful to see Disordered Eating on a sliding scale to help awareness of eating behaviours and the emotions involved.

Excessive/compulsive exercise		Anorexia Nervosa
Healthy body image	Emotional eatir	ng Orthorexia
Yo-yo diet	Binge-purge eating	
Caloria	B e counting	inge-eating disorder
Conscious eating		nkorexia'
'Skinny' teas	Restricted eating	EDNOS/OSFED
Steroid a	abuse Distorted bo	ody image
Positive mental health	Laxative abuse	Bulimia Nervosa
	ng ting a light of the light of	THE STATE OF

Frankie also sets mantras to repeat and remember:

"Your appearance and presentation does not validate who you are as a person."

"Your body does not dictate your worth."

"Your body is not to blame for things that happen to you that are out of your control."

"No one has the right to comment on your body without your consent."

Self-harm

Self-harm is a coping mechanism where individuals harm their physical self to deal with emotional pain, or to break feelings of numbness by arousing sensation.

Self-harm may include:

- · Cutting
- Hitting, punching walls
- Branding (burning, friction burns)
- · Hair pulling
- Picking at skin or reopening wounds
- Drinking harmful chemicals



If you are feeling the urge to self-harm first try:

- Expressing your feelings get it all out on paper. You can rip up the paper afterwards
- **Creating something** it doesn't have to be related to your issues. Don't judge it or yourself by how 'good' it is, focus on and enjoy the process of creation;
- Calling someone keep it short and friendly, just a chat might help
- 15 min rule when the urge to self-harm comes, tell yourself that you are going to choose to not to for 15 minutes; then re-evaluate how you feel
- Hit a pillow or cushion to vent your anger and frustration
- Have a good scream into a pillow or cushion
- Take a minute break and breathe or meditate
- Flicking an elastic band on wrist
- Go for a walk to take yourself away from triggers.
 Being in a public place gives you the time and space to reduce the urge to hurt yourself
- Visit www.lifesigns.org.uk for online support
- Speak to your GP for support services and help

Social Support map

University can also be an amazing opportunity to meet new people with similar interests to you and find your tribe. But it can be a socially challenging time and it's really common to feel unsettled.

Whether you've moved down the road or across the world, little changes can make asking for help feel like a large and confusing task. It can be helpful to map out who is important and you can turn to in your life.

Who: Sam (brother)

What: life chats and family struggles

Where: Manchester

How: Voice notes, facetime, visits

Who: Jo

What: long distance support

Where: Edinburgh

How: Voice notes, facetime,

snapchat

Who: Mum

What: cooking advice and

comfort

Where: Bristol

How: phone calls, visits, text

Who: Rach

What: when I'm lonely

Where: UCL

How: Snapchat, facetime, coffee, exploring, netflix

Who: Who: What: What: Where: Where: How: How: Who: Who: What: What: Where: Where: How: How:

Social Anxiety



Emma's Big Picture

Emma is in her first year studying psychology

Difficulty: Social Anxiety

Other factors: First time being away from home, friends at different universities

Accommodation: Lives in halls

Intake: Poor diet, regularly binge drinks

- Emma had a very supportive friendship group throughout school but is finding it challenging to meet new people at university
- She doesn't know anyone on her course and only socialises with her housemates on nights out

Thoughts we think

- 'Nobody likes me'
- 'I don't fit in here'

How we feel physically

- Not good enough
- Panicked
- Nauseous

Behaviours we do

- Avoiding seeing people
- Staying in
- Excessive drinking

Emma's red flags





Eating in her room



Socially withdrawing



Drinking to blackout on nights out

Emma has developed the following four habits as a part of their toolbox to prevent them from feeling low...



Safety behaviour

Acknowledge and montior



Support map

Keeps support map on wall



Thinking habits

Positive self talk



Positive habits

Started volunteering at animal shelter

Safety Behaviour



When Emma finds herself in challenging social situations she often drinks to appear more confident. Whilst this helps her at the time, she feels paranoid and depressed afterwards.

This is known as **Safety Behaviour**: Things like keeping our heads in our phones to avoid having to socially interact may give temporary relief from feeling anxious but actually keeps us stuck in that vicious circle.

Start with something that gives you at least 50% anxiety but is manageable. It should still cause enough anxiety to help you reach **habituation**. Stay in the exposure exercise situation, without using distraction for a **prolonged** time until your anxiety drops by 50% from the start of the exercise.

Repeat a situation until the exercise no longer makes you feel anxious, say if it no longer goes above 40% anxiety at the start of the exercise. Then it is time to move up to the next situation.

Step One: Write down a list of the major anxiety provoking situations or activities from most to least. Then rate them each on a scale of 0-100 according to much how high your anxiety feels in the situation.

Step Two: Identify an activity that you rate as giving you 50% or above anxiety levels. Try to start with something more manageable like Simon did in his example on the next page.

Step Three: Give it a try!

Activity/Situation	Anxiety 0-100%	Nearly every day
Go on a night out with flat mates	90%	Always drinking alcohol when in social situation to cope
Spend 45 minutes in the communal area with my flat mates	65%	Keeping my phone in my hand so I can avoid awkward silences by pretending to be busy
Have a 10 minute chat with class mates after lecture	40%	Keep a bottle of water with me in case I get dry mouth

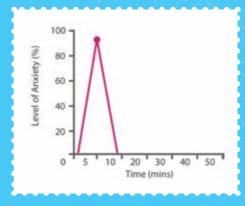
Activity/Situation	Anxiety 0-100%	Nearly every day

Gradual exposure and rewards

When we are faced with an anxiety provoking situation, it may feel better to avoid it altogether to stop symptoms of anxiety. However, this may lead to you to avoiding anything that causes considerable anxiety and creating self-imposed confines. In the long term this can cause vicious cycles and make your anxiety much worse.

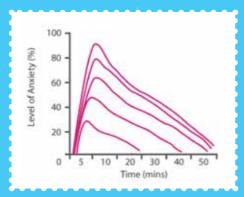
This graph shows anxiety rising in an uncomfortable situation and then quickly decreasing once we have escaped/avoided it.

Whilst **gradually** exposing yourself to the anxiety provoking situation can increase the unpleasant feelings in the short term, it will help reduce anxiety in the long



term and break out of the vicious cycle. This process is called exposure.

If you continue to repeat this process you will find your anxiety no longer reaches the same height. Reducing anxiety by at least half is called



habituation. Eventually your anxiety will remain manageable and you will no longer feel the need for avoidance.

This graph shows how the intensity of the symptoms of anxiety will reduce when you remain in the situation long enough.

Thinking habits

Thoughts are powerful. Our thoughts can cause us to feel physically and emotionally down and anxious. It can also make us change our behaviour. Most people fall into unhelpful thinking habits. They become subconscious and we don't realise we are doing it

Try to remember

Thoughts are not facts! – Just because you thought it, doesn't mean it's true (see page 51).

Look at the examples below and see if you fit into any of these habits.

Thinking Habit	Example	
Mental Filter When we notice only the negative, and we dismiss anything that doesn't fit our perception.	"I know he asked me out, but it was probably only because he felt sorry for me."	
Mind-Reading Assuming we know what others are thinking.	"My friends must think I am a total idiot on nights out."	
Catastrophising Imagining and believing that the worst possible thing will happen.	"I didn't make any close friends on freshers week I'm never going to make any friends"	
Memories Allowing past negative experiences affect your present and future.	"I was super awkward at that party, it is definitely going to happen again no matter how hard I try!"	

"Imagine how a small child would feel if you kept criticising them and putting them down. Now imagine how they would feel if you complimented them, believed in them and supported them. The way you talk to yourself matters!"

Minoo, Student Mentor

Taking your thoughts to court

The next time you experience an anxious thought that makes you feel down, don't let it get away! Take a second to judge for yourself if the thought is fact or opinion. Below is an example of how you can take your thoughts to court.



Case Study

Emma is walking to her local shop on the weekend. She is hungover and feeling low. She notices one of her class mates Chen is walking towards her. Emma prepares to say hello to her. However, Chen passes her without noticing her.

My Thought: Chen ignored me on purpose because I am unpopular and nobody likes me. I bet they make fun of me behind my back. It's probably because I am such a weirdo.

Evidence it's a fact

Evidence it's an opinion

Based on my emotions. I'm not feeling very confident

Based on the evidence, is it Fact or Fiction? Fiction.

Revised Rational Thought: She probably didn't see me as she was looking at the floor.

It is your job to fill in the evidence and make a judgment. If the thought is found to be an opinion, make sure you replace it with a more rational thought. The more you practice this, the less emotional power fiction thoughts will have!

My Thought:		
Evidence it's a fact	Evidence it's an opinion	
Based on the evidence, is it Fact or Fiction?		
Revised Rational Thought:		

TIP: Keeping a diary of your thoughts can also help

Seeking help

"The longer we leave a problem, the worse it gets; don't be afraid to seek help!" Harry, Student Mentor

Crisis Care

If you or someone you know is experiencing a **wellbeing crisis and/or** wants to end their life, please contact emergency services or your **GP as soon as possible**. If you or the person feels they cannot keep themselves safe, stay with someone until help arrives.

Remember it is **normal** to have thoughts of wanting to end your life when experiencing mental health difficulties. These may be unpleasant, but if you feel you can keep yourself safe, it is recommended you seek support. However, if those thoughts develop into urges and/or plans, it is vital that you seek emergency support as soon as possible.

Talking Therapies



Therapy for common disorders such as depression and anxiety are now widely available across England thanks to the Improving Access to Therapies (IAPT) services. Each borough or locality has their own therapy service which can vary in size, waiting times, and therapeutic options available.

The most commonly available therapy is Cognitive Behavioural Therapy (CBT) Many of the tools provided in this handbook are developed from CBT principles that IAPT also uses. This is because there is a strong evidence base for these techniques being useful for anxiety and depression. Most services have a local website where you can look up how to get access to their service. Some require referrals via a GP, whilst others accept self-referrals. IAPT is available for people aged 18 and over.

Mental Health Referrals





Adults aged 18 and over need to access Adult Mental Health Services.

Both Adults and CAMHS services provide support for depression, problems with food, self-harm, abuse, violence or anger, bipolar, schizophrenia and anxiety, and more.

There are local NHS services around the UK, with teams made up of nurses, therapists, psychologists, support workers and social workers, as well as other professionals.

Someone (GP, parents, teacher, professional) can refer you for an assessment with either service to see what help you could get.

If you are working with social care, youth offenders' team, or school support, they might also be able to refer you as well.

It's important to tell the person referring you as much as you can so you can get the right help you need.

Most services have a local website where you can look up how to get access them.

Helpful Websites

The following are a list of websites that may be useful for yourself or someone you know. Rethink have no official affiliation with these sites and organisations and can't take responsibility for the content, but we have found to the best of our knowledge that they are informative and can be useful to many people across the country.

General Mental Health



www.rethink.org

Rethink Mental Illness helps millions of people affected by mental illness by challenging attitudes, changing lives. Website contains A-Z factsheets on conditions, treatments, living with mental illness also information for carers.

Advice line 0300 5000 927 Monday to Friday, 9.30am to 4pm



www.mind.org.uk

Mind is a mental health charity offering both frontline services and online information. A-Z information about mental health and information and support can be found on their website.

Info line 0300 123 3393 Legal Advice line 0300 466 6463



www.time-to-change.org.uk

Time to change is a joint project between Rethink Mental Illness and Mind with the aim to challenge stigma and discrimination surrounding mental health. Website contains useful facts and stats, fact sheets and ways to get involved.



www.studentminds.org.uk

StudentMinds is committed to improving emotional wellbeing and mental health of students. Website has information for students, parents and university staff

Parents Helpline 0808 802 5544 Monday to Friday, 9.30am to 4pm



www.samaritans.org

Samaritans provide a helpline for people wanting assistance to talk about issues related to their wellbeing or any other problem troubling them.

Helpline 08457 909090, 24hrs, 7 days a week



www.mentalhealth.org.uk

Mental Health Foundation focus mainly on policy and service development and research. Their website contains A-Z mental health fact sheets.



ww.bigwhitewall.com

Big White Wall is a completely anonymous online space to express yourself freely but safely.



www.sane.org.uk

Sane is a campaigning charity with the aim of improving quality of life for anyone affected by mental illness. Helpline is an out of hours emotional support line for people in mental distress. Community and text based support.

Helpline 0300 304 7000 4.30pm to 10.30pm, 7 days a week

Anxiety



www.anxietyuk.org.uk

Anxiety UK have support and resources they can offer for both people experiencing anxiety disorders and professionals working with people experiencing anxiety.

Helpline 08444 775 774 Monday to Friday, 9.30am to 5.30pm



www.nopanic.org.uk

No Panic helps people who experience Panic Attacks, Phobias, Obsessive Compulsive Disorders and other related anxiety disorders including those people who are trying to give up Tranquillizers.

Helpline 0844 967 4848, 7 days 10am to 10pm

Depression



www.mindfull.org

MindFull is a service for 11-17 year olds, providing support, information and advice about mental health and emotional wellbeing; helping you to overcome life's ups and downs and feel confident and happy about who you are.



www.depressionalliance.org

Information on all aspects of depression including how it's treated, recommended reading and things you can do to help yourself.



www.moodswings.org.uk

Support for people experiencing mood problems.

Helpline 0845 123 6050 Monday to Friday, 10am to 4pm

Psychosis



www.voicecollective.co.uk

The Voice Collective is for young people who see and hear things that other people don't. Website has personal stories, information to help understand the basics surrounding their experience.

www.hearingvoices.org.uk

Information about ways to manage hearing voices or unusual beliefs. Includes details of local groups and self-help networks.

Suicide and self-harm



www.thecalmzone.net

CALM (Campaign Against Living Miserably) is a health promotion charity with the aim of reducing male suicide in the UK. Website contains helpful information and ways to get involved.

Helpline 0800 58 58 58, 5pm to midnight, 7 days



www.lifesigns.org.uk

Site that gives guidance and support around selfharming.



www.papyrus-uk.org

Site focused on preventing young suicide with dedicated sections on resources for young people and their friends.

Hopeline UK 0800 0684141 Monday to Friday, 10am to 10pm

Drug and alcohol

drinkaware.co.uk

www.drinkaware.co.uk

Drinkaware helps to promote up to date info and facts about alcohol and drinking. Website has a detailed section about alcohol and mental health. Also drinking self assessment.



www.addaction.org.uk

Provides a wide range of information sheets on both drug and alcohol issues.



www.talktofrank.com

Web-based information as well as an email service and helpline. Website contains A-Z of drugs and advice on what to do if you are worried about a friend **Helpline 0300 123 6600, 2pm to 6pm**

Student Wellbeing



www.nightline.ac.uk/want-to-talk

A confidential listening, support and practical information service for University students You can talk to them about anything – big or small – in complete confidence without judgement.

Call (+44)207 631 0101 6pm to 8am BST every night of term

Deferral and additional support at university

Most universities provide counselling for students who need emotional support. Student services or the students' union can give you information about what's available as can the university website.

This support is there for you so if you're feeling low give them a call.

Additional Support

A SOSN (Summary of Support Needs) is a document produced by a Disability Advisor in Disability/Mental Health Services at a University to communicate the recommended support a student needs. It is sent to their academic school/lecturers etc.

You will be assigned a Mental Health Advisor and usually have an initial meeting so the document can be drawn up accurately.

Amendments may be things like letting lecturers know that a student may not always make 9am/early morning lectures due to drowsiness from prescribed medication etc.

If you have a chronic mental illness, you may also be eligible for a Disabled Students' Allowance (DSA) and additional support and reasonable adjustments.

You can register for this with a GP or consultant's letter that clearly states a long-term diagnosis. Ask at your Student Support Centre for university specific guidance.

Extensions and Deferrals

Mitigating Circumstances are given in the case of an ongoing or recent Mental illness or any other unpleasant/ unforeseen circumstance. It is usually a longer extension and can offer students the option of a few month's deadline. Different universities have different policies but your Student Services can help guide you through this.

If you feel you need a break from your course, it may be possible to take some time out. This often called a 'Leave of Absence (LOA)'.

This would usually be for a Semester or a year and may be for the following reason:

- · Medical/health reasons
- Maternity
- · Personal problems including bereavement
- Financial difficulties
- Work placement
- · Changing course

The first step would be to talk the option through with your Personal Tutor or a member of staff in your university. Your Personal Tutor will be able to talk to you about the academic implications of taking this time out and if you would need to repeat a period of study on your return.

You should then make an appointment to see a student adviser in the Student Services Centre either by email or in person.

What's available in your university

it available and specific to your university and area. This can be found on your university website, at your student support service and on the local council website under "local offer".

Volunteer opportunities

This handbook and our workshops are co-designed and delivered by 18-25 year olds with mental health experience.

If you interested in being involved in mental health projects like Step-Up and make meaningful changes in mental health for other young people. Please contact us via e-mail on coproduction@rethink.org.

We are always looking for young people of all backgrounds and skills to get involved!

Step-up is able to deliver workshops through City Bridge Trust funding and Rethink Mental Illness co-production team.



Rethink is a charity which helps millions of people affected by mental illness by challenging attitudes, changing lives.

It began 40 years ago, when one man bravely spoke about his family's experiences of mental illness in a letter to the Times and in the process brought together hundreds to talk about their experiences of mental illness and support each other.

Today Rethink directly supports almost 60,000 people every year across England to get through crises, to live independently and to realise they are not alone.



Step-up is a two-year wellbeing project funded by City Bridge Trust and delivered through Rethink Mental Illness.

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