

## Helping Someone You Are Concerned About

### Noticing when there is a problem

Mental health difficulties often occur below the surface. It is also common for people to dismiss mental health concerns as attention-seeking behaviour or as something that will pass. Due to these issues it is always best to treat any sign of mental health difficulty seriously and to learn to identify some of the warning signs that someone might be struggling with. These can include:

- Any behaviour that is “out of character” from a person’s normal behaviour (e.g. if the person is normally social and nobody has seen or heard from them in a while).
- Poor day-to-day functioning such as changes in class attendance, increased conflict with others, disengagement from work or other activities the person usually does.
- Poor hygiene or personal care.
- Withdrawal from particular situations, events or things the person usually enjoys.
- Crying or becoming teary for no obvious reason.
- Comments made in passing that make you think “that was a strange thing to say”.
- Self-soothing behaviours such as frequent and intense agitation (e.g. rubbing, tapping, fidgeting, shaking)
- Cuts or scars on the person’s body.

### Approaching the person about your concerns

- **Consider context and environment:** Choose a suitable time and space, preferably in a one-on-one context, in person, in a place that the person feels comfortable in and where there is unlikely to be any interruptions or other people listening in.
- **Eliminate personal distractions:** e.g. Switching your phone to silent or anything else that might distract you from being a good listener.
- **DON’T make it a formal “intervention”:** e.g. Don’t arrange for everyone concerned about the person to speak to them at once, and avoid a confrontational or heavy tone. Make the initial approach one about genuine concern.
- **Make sure you and the person are both sober and calm:** If the other person isn’t sober, simply listen and prioritise the person’s safety. Follow up when the person is sober. Where possible, don’t make the initial approach at a time when you or the other person are noticeably anxious, agitated or in a distressed state (e.g. immediately after something distressing has occurred).
- **Use “I” statements:** e.g. “I have noticed that...” or “I’ve been feeling concerned because I noticed...”
- **Listen:** Encourage the person to talk rather than you doing all the talking:
  - Ask a few open-ended questions (e.g. who, what, when, how) - not too many
  - Don’t interrupt
  - Take what they say seriously

- Show them you are listening by summarising what they have been saying.
- **Encourage the person to think about what can be done:**
  - Ask the person what they can do about the way they are feeling / thinking
  - Encourage the person to generate a few potential solutions.
  - Encourage the person to pick one solution they think will be most helpful.
  - If the solution is vague, help the person to identify some practical steps they can take to implement a solution.
  - Where necessary, or where the above has not helped, encourage the person to seek professional support.
- **Arrange for a follow up:** Suggest a specific time and place to check in on the person's progress and to see whether they have tried some options.

### **What if the person doesn't want any help or doesn't think there is anything wrong?**

If you are seriously concerned that the person might seriously harm or kill themselves or someone else, you need to seek professional support and prioritise the person's immediate safety, even if the person asks you not to. Your concern can also be for behaviour where the harm might be unintentional such as potentially fatal drinking, drug use or risk-taking behaviour. Contact the relevant emergency supports listed further below. Call 000 if the risk is **immediate**. If you are in NSW, you can contact the NSW Mental Health Line on 1800 011 511 to be connected to the right care in the area where the person lives.

In any other case you can suggest alternatives to the person such as:

- Suggesting another person they can call or speak to or be with.
- Asking if you can check in with them another time.
- Extending an offer of practical or emotional support (e.g. the opportunity to talk or help with something) when it suits them.

### **Common Mistakes**

- **Diagnosing the person's problems**
- **Advice giving:** a person is more likely to implement solutions they generate themselves than take advice. It is more important to show a person you are listening. If the person is too unwell to think of solutions or can't guarantee their own safety, then direct advice and action is warranted (see above).
- **Over-involvement:** e.g. staying up at night as the suicide watchman, dropping your own responsibilities and obligations, performing tasks for the other person such as cooking, cleaning, or talking to people they are having issues with. While often well intended, over-involvement can serve to maintain a person's difficulties by reducing their capacity to cope and often results in negative consequences for your own life and mental health.

## Overcoming Over-Involvement

- **Identify your boundaries:** Reflect on what is acceptable and unacceptable to commit to when providing this person with support. Unacceptable levels of support will typically include anything that is likely to negatively impact on you in the short-term or long-term. It is both helpful to you and the other person to clearly identify what your role might be, what your limitations are, or what you can or cannot do from the beginning.
- **Make the person aware of your boundaries if they asking too much from you.**
- **Be assertive and enforce your boundaries:** Assertiveness is a communication style where you clearly articulate how you feel or what you can and can't do while showing respect for the other person's concerns or feelings. If you find being assertive uncomfortable or difficult you can access self-help for assertiveness from: <https://www.cci.health.wa.gov.au/Resources/Looking-After-Yourself/Assertiveness>
- **Last resort:** If, despite your attempts, the person continues to push your boundaries, it is often a strong sign that they need more support. Consider linking the person in with professional support or recruiting other support people in the long-term. If the person is unwilling for this to occur you may need to set some tough but fair consequences. E.G. "If you continue to do X, I have no option but to do Y".

## Support Options and Helpful Contacts

### Phone Counselling

<b>Lifeline</b> (24hr phone counselling)	<b>131 114</b>
<b>BeyondBlue</b> (24hr phone counselling, 3pm—12am skype/ internet counselling)	<b>1300 224 636</b>
<b>Kids Helpline</b> (24hr phone counselling for people aged 5- 25yo)	<b>1800 55 1800</b>
<b>UNE After Hours Crisis Support Line</b> (weekdays 4pm— 9am, Weekends and Public Holidays—for currently enrolled UNE Students)	<b>1300 661 927</b> <b>Text: 0488 884 169</b>

### Long-Term Mental Health Support

Ask the person to seek an appointment with their GP for a referral or if they are a **UNE student** they can ask for an appointment with one of the UNE counsellors on **02 6773 2897** - 9.00 am to 4.00pm Mon—Fri.

### Emergency Mental Health Support

- **Call 000 OR go to the local emergency department with the person in a taxi.**
- **NSW Mental Health Line** **1800 011 511**  
(24 hour mental health triage, or advice to people who are concerned about someone's mental health)
- **For mental health contact numbers in another state please click on the link below:**  
<https://www.mentalhealthonline.org.au/pages/useful-resources/crisis-services>

The support you need to succeed