Understanding borderline personality disorder

This booklet is for anyone experiencing borderline personality disorder (BPD). It explains what the diagnosis means and what it’s like to live with BPD. It also provides information about self-care, treatment and recovery, and gives guidance on how friends and family can help.
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What is borderline personality disorder (BPD)?

Borderline personality disorder (BPD) is a type of personality disorder. Personality disorders are a type of mental health problem where your attitudes, beliefs and behaviours cause you longstanding problems in your life.

What are the symptoms of BPD?

You might be given a diagnosis of BPD if you experience at least five of the following things, and they've lasted for a long time or have a big impact on your daily life:

- You feel very worried about people abandoning you, and would do anything to stop that happening.
- You have very intense emotions that last from a few hours to a few days and can change quickly (for example, from feeling very happy and confident in the morning to feeling low and sad in the afternoon).
- You don't have a strong sense of who you are, and it can change depending on who you're with.
- You find it very hard to make and keep stable relationships.
- You act impulsively and do things that could harm you (such as binge eating, using drugs or driving dangerously).
- You have suicidal thoughts or self-harming behaviour.
- You feel empty and lonely a lot of the time.
- You get very angry, and struggle to control your anger.
• When very stressed, sometimes you might:
  – feel paranoid
  – have psychotic experiences, such as seeing or hearing things other people don’t
  – feel numb or 'checked out' and not remember things properly after they've happened.

Because you only need to experience five of these possible symptoms to be given the diagnosis, BPD can be a very broad diagnosis and include lots of different people with very different experiences.

“For me] having BPD is like the emotional version of being a burn victim. Everything in the world hurts more than it seems to for everyone else and any 'thick skin' you are supposed to have just isn't there.”

**What does 'borderline' mean?**

The term 'borderline personality disorder' came about because in the past, doctors used to think that you could be on the borderline between psychosis and 'neurotic mental health problems' (an old-fashioned way of describing all other mental health problems). Mental health professionals don't usually talk about mental health like this anymore, so if you get a diagnosis of BPD it can be hard to understand what it means.

Because of this, some people prefer to use the term emotionally unstable personality disorder (EUPD), as they feel it’s a clearer description of the experiences you might have with this diagnosis. The terms BPD and EUPD both refer to the same mental health problem – it's your choice which term you want to use, but your doctor might use either.
Understanding borderline personality disorder

**Does BPD mean I have a bad personality?**
If you're given a diagnosis of BPD, it's understandable to feel like you're being told that who you are is 'wrong'. But **BPD does not mean that you have a bad personality.**

We all have both positive and negative personality traits, and we all have feelings and behaviours that can be useful at times and a problem at others. For example, if you can only concentrate on a task under pressure, you might be good at exams but bad at long projects. But if you experience BPD, some of your feelings or behaviours might be so difficult for you to manage that they're stopping you from living your life as you'd like to. Treatment for BPD can help you work out which thought and behaviour patterns are useful to you, and which aren't.

> When I was diagnosed I felt like I was being told my personality was broken. It's through my friends and family's love and support that [I've come to see] my personality is still mine and not broken as I'd thought.

**Who can diagnose me with BPD?**
You can only be diagnosed with BPD by a mental health professional, such as a psychiatrist – not by your GP. If you speak to your GP about your mental health and they think you might have BPD, they can refer you to your local community mental health team (CMHT), who will be able to assess you.

> After overcoming the initial shock of the diagnosis, it is actually a blessing because now I know what I need to do to get better.
What causes BPD?

There's no clear reason why some people develop BPD. More women are diagnosed with BPD than men, but it can affect people of all genders and backgrounds. However, most researchers think that BPD is caused by a combination of factors, such as difficult childhood and teenage experiences, genetic factors and your personality in general.

Also, if you already experience some BPD symptoms, then going through a stressful time as an adult could make your symptoms worse.

How could childhood experiences cause BPD?

It's not clear what causes BPD, but if you get this diagnosis you're more likely than most people to have had very difficult or traumatic experiences growing up, such as:

- chronic fear or distress
- family instability, such as living with a parent who is an alcoholic, or who struggles to manage a mental health problem
- sexual or physical abuse
- neglect
- losing a parent.

If you had difficult childhood experiences like these, you might have developed certain beliefs about how people think and how relationships work, and developed certain strategies for coping, which aren't helpful in your adult life. You might also still be struggling with feelings of anger, fear or sadness.

"When I get let down, it just reinforces my belief that the world is full of bad people who won't be kind to you – like my parents weren't kind to me."
Can children and young people get BPD?

It's very hard to diagnose BPD in children and young people because your personality is still developing as you grow up. However, a psychiatrist could diagnose you with BPD while you are still a teenager if they are confident that your symptoms have gone on for long enough that there can't be another cause.

Could BPD be genetic?

Some evidence suggests that there might be a genetic cause of BPD, because if someone in your close family has a mental health problem you might be more likely to get this diagnosis.

However, because most people grow up with one or both of their biological parents, it's very hard to know if symptoms of BPD – like problems with relationships or coping with strong emotions – are inherited from your parents' genes or picked up from their behaviour. Children tend to learn how to behave by observing the people around them, so if you grew up around a parent with BPD, you might have learned some unhelpful ways of acting and feeling from them.

“Nobody taught me to regulate my emotions. I saw my parents and family members regularly behave in out of control ways and I thought that was normal.”
What's it like to live with BPD?

Your experience of living with BPD will be unique to you, but this section describes some common experiences that you might recognise.

“There are positive sides too; I believe that I experience pleasant emotions more strongly than others, and my friends value my sincerity.”

Difficult feelings and behaviour towards yourself

<table>
<thead>
<tr>
<th>How you might think or feel:</th>
<th>How you might behave as a result:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• lonely</td>
<td>• frequently changing jobs, hobbies, goals, ambitions or studies</td>
</tr>
<tr>
<td>• overwhelmed by the strength of your emotions and how quickly they change</td>
<td>• self-harming or attempting suicide</td>
</tr>
<tr>
<td>• that there is something inherently wrong with you, and that it’s your fault if bad things happen to you because you deserve them</td>
<td>• significantly overspending or binge eating, to the point where it is harmful to you</td>
</tr>
<tr>
<td>• that you don’t know what you want from life, or what you like or dislike</td>
<td>• quitting just before achieving something, or avoiding activities where you think you might fail or be disappointed</td>
</tr>
<tr>
<td>• that you’re a bad person, or not a real person at all</td>
<td>• keeping very busy so you’re never alone.</td>
</tr>
<tr>
<td>• like you are a child in an adult world.</td>
<td></td>
</tr>
</tbody>
</table>

“My experience is that I have to keep my emotions inside, because I get told I am overreacting [...] So I end up feeling like I’m trapped inside my body screaming while no one can hear me.”


**Difficult feelings and behaviour towards others**

<table>
<thead>
<tr>
<th>How you might think or feel:</th>
<th>How you might behave as a result:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• that friends or partners will leave you forever if they are angry or upset with you</td>
<td>• lashing out when you’re angry with people</td>
</tr>
<tr>
<td>• like no one understands you, or you’re not like other people and will never be able to understand them</td>
<td>• struggling to trust people</td>
</tr>
<tr>
<td>• that some people are completely perfect and could never do bad things or hurt you, whereas others are completely terrible and could never do anything good or kind, and there's no middle ground (this is sometimes called splitting, or black-or-white thinking)</td>
<td>• wanting to be close to people but worrying they will leave or start to believe you're a bad person, and so avoiding people</td>
</tr>
<tr>
<td>• like the world is a scary and dangerous place, and you want to run away and hide.</td>
<td>• ending relationships with friends or partners because you think they might leave you.</td>
</tr>
</tbody>
</table>

**Alcohol and substance misuse**

If you have BPD you might be more likely than most people to misuse drugs and alcohol as a way of coping with the difficult emotions you experience. For confidential advice about drugs and alcohol you can contact FRANK (see ‘Useful contacts’ on p.23).

**Other mental health problems**

Co-morbidity (having more than one diagnosis at the same time) with BPD is common, but it can sometimes make BPD difficult to diagnose. For example, if you experience BPD, you might be more likely than most people to have other mental health problems as well, such as anxiety, depression and eating problems.
Getting several different diagnoses can be a good thing if it leads you to find the treatment and support that suits you best. However, if you're finding it hard to find the right treatment, you might feel that not all the diagnoses you've been given are helpful to you (see ‘could my diagnosis be wrong?’ on p.18).

“[It] took a long time to get my BPD/EUPD diagnosis because of co-morbid disorders, but I'm at a happy place now in life thanks to a variety of factors.”

Experiences of facing stigma

Because BPD is a complex diagnosis that not everyone understands well, you might find some people have a negative image of it, or hold misconceptions of you. This can be very upsetting and overwhelming, especially if someone who feels this way is a friend, colleague, family member or a health care professional.

But it's important to remember that you aren't alone, and you don't have to put up with people treating you badly. Here are some options for you to think about:

- **Show people this booklet** to help them understand more about what your diagnosis really means.

- **Get more involved in your treatment.** (See our booklet *The Mind guide to seeking help for a mental health problem* for guidance on having your say in your treatment, making your voice heard, and steps you can take if you're not happy with your care.)

- **Know your rights.** Search for ‘legal rights’ on Mind’s website for more information.

- **Take action with Mind.** Search for ‘campaigns’ on Mind’s website to find details of the different ways you can get involved with helping us challenge stigma.
The stigma of being violent and dangerous is the worst for me. [I am a] caring and empathetic soul who would do anything for the people [I] love.

How can I help myself cope?

If you experience BPD you might feel like every day is a struggle against yourself, but in fact there are lots of things you can do to help yourself. This section offers some practical tips for coping with difficult emotions day to day, and supporting your long-term wellbeing.

With time, you do learn to cope with [BPD] better. I have struggled for 15 years with the disorder, but every year I seem to get stronger and better at coping with it!

How can I cope with difficult emotions day to day?

If you're feeling overwhelmed, it might help to focus on one feeling at a time. The table below lists some ideas that you could try to see if they work for you. Over time, you might develop your own tips to add to this list.

<table>
<thead>
<tr>
<th>How you're feeling</th>
<th>What you could do to get through it</th>
</tr>
</thead>
</table>
| angry, frustrated, restless | • rip up a newspaper  
                         | • hit a pillow  
                         | • throw ice cubes into the bath so they smash                                                   |
| depressed, sad, lonely    | • wrap up in a blanket and watch your favourite tv show  
                         | • massage your hands with a nice-smelling moisturiser  
                         | • write all your negative feelings on a piece of paper and tear it up  
                         | • listen to a song or piece of music you find uplifting                                      |
How can I help myself cope?

| anxious, panicky, tense | • make yourself a hot drink and drink it slowly, noticing the taste and smell, the shape of the mug and its weight in your hand  
• take ten deep breaths, counting each one out loud  
• do a reality checklist – write down everything you can think of about where you are right now, such as the time, date, colour of the walls, all the furniture in the room, etc.  
• take a warm bath or shower – this can help change your mood by creating a soothing atmosphere and a distracting physical sensation |
|---|---|
| dissociative, spaced out | • chew a piece of ginger or chili  
• clap your hands and notice the stinging sensation  
• drink a glass of ice cold water |
| wanting to self-harm | • rub ice over where you want to hurt yourself  
• stick sellotape or a plaster on your skin and peel it off  
• take a cold bath |

※ If I am feeling very bad but can't put into words how I feel or why, I wear a particular bracelet. My closest friends and family know that this means I am having a rough time at the moment and might need some TLC. ※

(For more guidance on how to deal with these experiences, see our booklets How to deal with anger, Understanding depression, Understanding anxiety and panic attacks and Understanding self-harm.)
How can I support my wellbeing in the long term?

Taking some time to make your wellbeing a priority can make a big difference to how you’re feeling. Here are some ideas:

• **Talk to friends and family.** It can be hard to reach out when you are not feeling well, but sharing difficult thoughts can often make them seem easier to handle.

• **Know how to get help in a crisis.** When you’re feeling well, it’s a good idea to make plans for how you want to be treated in a crisis. For example, you might want to make an advance statement, or if you have a care team, create a crisis plan with them. Remember, if you’re feeling suicidal or are worried you may seriously harm yourself, you can call the Samaritans (see ‘Useful contacts’ on p.24), or go to your local hospital’s A&E department. (See our online booklet *The Mind guide to crisis services* for more information.)

• **Try online peer support.** Networks like Elefriends can be a good way to get some support if you don’t feel like you can talk to the people around you (see ‘Useful contacts’ on p.23). This can also be a good way to connect with other people who understand what you’re experiencing.

• **Find specialist support.** Organisations like Emergence and BPD World offer specialist support for anyone affected by BPD (see ‘Useful contacts’ on p.23). If you’ve experienced abuse in childhood, the National Association for People Abused in Childhood is there to support you (see ‘Useful contacts’ on p.23).

• **Contact an advocate.** If you feel like you’re not being listened to or treated fairly, such as when talking to doctors or applying for benefits, an advocate can help you make your voice heard. (See our online booklet *The Mind guide to advocacy* for more information.)

• **Try keeping a mood diary.** This could help you identify things or situations that trigger a change in your mood. You can then use that information to learn how to cope with triggering situations in future.
• **Get enough sleep.** This can help you have the energy to cope with difficult feelings and experiences.

• **Do regular exercise.** Physical activities like dancing or going for a walk can distract you from your current mood, and help get rid of anxious or angry energy.

• **Eat a healthy diet.** This can help you have the right nutrients and energy to cope with things when you're having a difficult time.

“When I am in a really irritating and triggering situation which I can't get out of or change I just take it five minutes at a time [...] Breaking it into bite-size pieces makes it possible.”

### What treatments can help?

There is a range of treatments that might help you if you experience BPD, such as talking treatments (see p.16) and medication (see p.18).

### Could I recover from BPD?

Yes – when you find a treatment that works for you, there is a very good chance you could recover. In the past, doctors thought that BPD couldn't be treated, but new research has proved this wrong. A recent study showed that 85% of people who receive treatment don't experience enough of the symptoms of BPD after 10 years to be given that diagnosis any more (although it won't necessarily take you 10 years to get to this point).

However, it's important to remember that recovery is a journey, and it won't always be straightforward. You might find it more helpful to focus on learning more about yourself and developing ways to cope, rather than trying to get rid of every symptom of BPD.
Talking treatments for BPD

Treatment for BPD usually involves some kind of talking treatment, depending on what is available in your area and what sort of treatment suits your needs.

The National Institute for Health and Care Excellence (NICE) – the organisation that produces guidelines on best practice in health care (see ‘Useful contacts’ on p.24) – suggests that the following kinds of talking treatments could help:

- **Dialectical Behaviour Therapy (DBT)** – a treatment specifically developed for BPD. It uses individual and group therapy to help you learn skills to manage your emotions. (See our online booklet *Making sense of dialectical behavioural therapy* for more information.)

- **Mentalisation Based Therapy (MBT)** – a long-term talking treatment which aims to improve your ability to recognise and understand your and other people's mental states, and help you examine your thoughts about yourself and others to see if they're valid. You can read more about MBT on the NHS Choices website (see ‘Useful contacts’ on p.24).

- **Therapeutic communities** – specially designed programmes where you work with a group of people experiencing mental health problems to support each other to recover. Most therapeutic communities are residential, often in a large house, where you might stay for all or part of the week. Activities can include different types of individual or group therapy, as well as household chores and social activities. The Consortium for Therapeutic Communities provides a directory of therapeutic communities in the UK (see ‘Useful contacts’ on p.23).

*DBT is what has really helped me. I still take meds, but sometimes wish that I had known about DBT before I just said yes to pills.*
You might also find other talking treatments can help you, for example:

- **Cognitive Behavioural Therapy (CBT)** – a treatment which aims to help you understand how your thoughts and beliefs affect your feelings and behaviour. In the therapy sessions you learn to replace negative thinking patterns with more positive ones. (See our online booklet *Making sense of CBT* for more information.)

- **Cognitive Analytic Therapy (CAT)** – CAT combines CBT’s practical methods with a focus on the relationship between you and your therapist. This can help you reflect on how you relate to people, including yourself, and why these patterns have developed.

- **Other talking therapies** – you might find other talking treatments useful, such as psychodynamic therapy, interpersonal therapy or arts therapy.

> I have educated myself about emotions, I have learned from books, therapy, psychologists, friends. The most important thing is that it is never too late to learn.

**How do I access talking treatments?**

To access talking treatments through the NHS you can ask your GP for a referral. Alternatively, to search for a therapist privately, you can look at the British Association for Counselling and Psychotherapy website (see ‘Useful contacts’ on p.23). (See our booklet *Making sense of talking treatments* for more information.)

It's important to be aware that NHS waiting lists for talking treatments can be long, and unfortunately in some parts of the country the treatment you want might not be available at all. Mind is campaigning to make sure that everyone who needs these treatments can access them. (Search for ‘campaigns’ on Mind’s website to find out more.)
Medication for BPD

There's no drug specifically licensed to treat BPD, but your doctor might offer you psychiatric medication (such as antidepressants, antipsychotics or mood stabilisers) to help treat some of the problems you experience because of – or as well as – BPD.

Before prescribing you any medication your doctor should explain to you what the medication is for, and discuss any possible side effects and alternative treatment options. (For more guidance, search for ‘medication’ on Mind’s website.)

"It began changing for me when one hospital suggested that there was a way forward, that I didn't have to feel so broken forever. It wasn't plain sailing from there, but just realising there was hope made my life easier. Realising that other people had recovered [...] and gone on to achieve amazing things really inspired me."

Could my diagnosis be wrong?

Some symptoms of BPD can be very similar to other mental health problems. Depending on your mood and what's going on in your life when you speak to your mental health professional, they might find it hard to understand which diagnosis best fits your experiences.

"[I have the experience of] having the wrong diagnosis for nearly 30 years and feeling like a freak, because when reading up about the diagnosis I was given there was no mention of [my other symptoms]."
Bipolar disorder

Some of the symptoms of bipolar disorder are very similar to BPD, such as:
- mood swings between extreme emotions
- impulsive or risky behaviour
- suicidal thoughts and self-harming behaviour.

Because of this, mental health professionals might find it hard to work out if you are experiencing BPD or bipolar disorder, and you might be offered treatment for bipolar disorder. (See our booklet Understanding bipolar disorder for more information about this diagnosis.)

Complex post-traumatic stress disorder (PTSD)

Complex PTSD is a form of post-traumatic stress disorder caused by experiencing a traumatic situation for a long time, such as ongoing domestic violence or child abuse. Some of the symptoms are very similar to BPD and include:
- difficulty controlling anger
- problems controlling your emotions and getting easily upset
- feelings of guilt and worthlessness
- problems with relationships
- feeling cut off and disconnected from other people.

(See our booklet Understanding post-traumatic stress disorder for more information on general treatments and support for PTSD, which you might find helpful for complex PTSD.)
Depression

Because feelings of low mood or suicidal thoughts might be the reason you first speak to your doctor about your mental health, your GP might offer you treatment for depression without realising that you are also experiencing other symptoms, or referring you to a specialist. (See our booklet Understanding depression for more information about this diagnosis.)

“I was always treated as having depression but I think I knew that wasn't quite right. Obviously the depression itself is a massive part of it, but I know many others [with depression] and they didn't seem to relate to the thoughts in my head.”

Psychosis

If you experience BPD, you might sometimes experience symptoms of psychosis, such as seeing, hearing or believing things that other people don't, or experiencing paranoia. Mental health professionals might sometimes focus on offering you treatment for psychosis, rather than exploring whether these experiences might be a symptom of BPD. (See our online booklets Understanding psychosis and Understanding paranoia for more information about these diagnoses.)

Antisocial personality disorder (ASPD)

If you're a man experiencing symptoms similar to BPD, you are more likely to get a diagnosis of ASPD than a woman experiencing the same symptoms. This could be because you or your doctors are focusing on your symptoms of anger and impulsive behaviour. (See our booklet Understanding personality disorders for more information about this diagnosis.)

What can I do if I disagree with my diagnosis?

If you're worried that your diagnosis doesn't fit the way you feel, it's important to discuss it with your mental health professional so you can make sure you're getting the right treatment to help you.
How can friends and family help?

This section is for family and friends who want to support someone with a diagnosis of BPD.

If someone you care about is diagnosed with BPD you might sometimes find it hard to understand their feelings or behaviour, or to know how to help. But there are lots of positive things you can do to support them.

• **Try to be patient.** If your loved one is struggling to deal with their emotions, try not to get involved in an argument in the heat of the moment. It could be better to wait until you both feel calmer to talk things through.

• **Don't judge them.** Try to listen to them without telling them that they're overreacting or that they shouldn't feel the way they do. Whether or not you understand why they feel like this, it's still how they're feeling and important to acknowledge it.

  "One thing that I find helps is when others validate my emotions, as I often feel guilty for having them."

• **Be calm and consistent.** If your loved one is experiencing a lot of overwhelming emotions, this could help them feel more secure and supported.

• **Help remind them of all their positive traits.** When someone you care about is finding it hard to believe anything good about themself, it can be reassuring to hear all the positive things you see in them.

• **Try to set clear boundaries and expectations.** If your loved one is feeling insecure and worried about being left alone, it can be helpful to make sure you both know where the boundaries of your relationship are, and what you can expect from each other.
• **Plan ahead.** When the person you're supporting is feeling well, ask them how you can help them best when they're unwell.

  "I have a friend who [...] goes for hot chocolate with me every week. To know there is somebody who cares and has time for you, even when you're not sure who you are ... that means the world."  

• **Learn their triggers.** Talk to your loved one and try to find out what sort of situations or conversations might trigger negative thoughts and emotions.

• **Think about how you could help keep them safe.** It can be scary if you're worried someone you care about is hurting themself, or is struggling with suicidal thoughts, but being prepared can help you cope. (See our booklet *How to support someone who feels suicidal* for more information.)

• **Learn more about BPD, and help to challenge stigma.** BPD is a complicated diagnosis, and your loved one might sometimes have to deal with other people's misconceptions on top of trying to manage their mental health problem.

• **Help them seek treatment and support.** For example, you could offer to go with them to appointments, or help them find an advocate.

• **Take care of yourself.** Supporting someone else can be stressful. Remember that your mental health is important too, and make sure to look after yourself. Taking care of your own wellbeing can help you maintain the energy, time and distance you need to be able to help someone else. (See our booklet *How to cope as a carer* for more information.)
Useful contacts

Mind Infoline
tel: 0300 123 3393
Open from 9am to 6pm,
Monday to Friday.
text: 86463
e-mail: info@mind.org.uk
web: mind.org.uk
Our Infoline offers mental health information and support. We can provide details of Mind’s Legal Line, and help you find local services near you.

British Association for Counselling and Psychotherapy (BACP)
tel: 01455 88 33 00
web: bacp.co.uk
Information about counselling and therapy. See sister website, itsgoodtotalk.org.uk for details of local practitioners.

BPD world
web: bpdworld.org
Provides information, advice and support to people with BPD, their families, friends and carers.

The Consortium for Therapeutic Communities
web: therapeuticcommunities.org
Provides a directory of therapeutic communities in the UK.

Elefriends
web: elefriends.org.uk
Elefriends is a friendly, supportive online community for people experiencing a mental health problem.

Emergence
web: emergenceplus.org.uk
Service user-led organisation supporting all people affected by personality disorder including service users, carers, family and friends.

FRANK
tel: 0300 123 6600
web: talktofrank.com
Free 24-hour national drugs helpline.

The National Association for People Abused in Childhood (NAPAC)
tel: 0808 801 0331
web: napac.org.uk
A charity supporting adult survivors of any form of childhood abuse. Provides a support line and local support services.
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**NHS Choices**
web: nhs.uk
Provides information on treatments for BPD which are available through the NHS.

**National Institute for Health and Care Excellence (NICE)**
web: nice.org.uk
Produces guidelines on best practice in health care, including recommended treatments for BPD.

**Samaritans**
Freepost RSRB-KKBY-CYJK
Chris PO Box 90 90
Stirling FK8 2SA
24-hour helpline: 08457 90 90 90
email: jo@samaritans.org
web: samaritans.org
24-hour emotional support for anyone struggling to cope.
Further information

Mind offers a range of mental health information on:
• diagnoses
• treatments
• practical help for wellbeing
• mental health legislation
• where to get help

To read or print Mind’s information booklets for free, visit mind.org.uk or contact Mind Infoline on 0300 123 3393 or at info@mind.org.uk

To buy copies of Mind’s information booklets, visit mind.org.uk/shop or phone 0844 448 4448 or email publications@mind.org.uk

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Mind

We're Mind, the mental health charity for England and Wales. We believe no one should have to face a mental health problem alone. We're here for you. Today. Now. We're on your doorstep, on the end of a phone or online. Whether you're stressed, depressed or in crisis. We'll listen, give you advice, support and fight your corner. And we'll push for a better deal and respect for everyone experiencing a mental health problem.

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