INFORMATION ABOUT MENTAL HEALTH AND WAYS TO LOOK AFTER YOUR WELLBEING

For asylum seeking and refugee women
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Photographs by Karen Gordon.
Introduction

About the wellbeing resource for women
What is mental health and wellbeing?
What are mental health problems?
What helps?
What contributes to mental health problems?

Mental wellbeing and the asylum process

Seeking asylum
Challenges for refugees
Advice and support for refugees
Post-traumatic stress disorder (PTSD)

Mental health stigma and discrimination

Common mental health problems

Depression
Anxiety
Postnatal depression
Stress
Phobias/fears
Obsessive compulsive disorder (OCD)

Mental health and wellbeing of children and young people

Other mental health problems

Bipolar disorder
Psychosis
Schizophrenia
Eating disorders
This wellbeing resource is designed for asylum seeking and refugee women. The content and design of the resource was shaped by asylum seeking and refugee women as part of the Amaan project. This resource aims to help asylum seeking and refugee women to better understand what mental health is and provide a toolkit to help them have a better understanding of mental health and ways to help themselves and others.

About the wellbeing resource for women

This resource is intended to:

• Provide supportive information about mental health and wellbeing for asylum seeking and refugee women.
• Raise awareness about what contributes to mental health and wellbeing.
• Share ways to look after your mental health and wellbeing.
• Share ways to seek help and support if you need it.

The resource first covers generally how we understand mental health and wellbeing, and mental health problems. Then, there is more information about common mental health problems including the signs and symptoms, what might cause them and how we can deal with them. There is also information about more serious mental health problems and feeling suicidal, and details about how to seek help.

The resource includes messages and stories from the women who participated in the Amaan project, about what helped them to understand and look after their mental health and wellbeing, and about how they have sought help. Some of the approaches women have found helpful are included, such as the wall of support.

The Amaan project raised awareness, amongst those working in a range of services, about the mental health needs of asylum seeking and refugee women in Glasgow to decrease the risk of negative treatment by services and professionals, which can add to the trauma that these women may have already experienced.

The project also provided community conversation sessions and arts-based work around improving mental wellbeing for asylum seeking and refugee women.
What is mental health and wellbeing?

Many of the asylum seeking and refugee women we spoke to through Amaan said that they did not know that they had a mental health problem until they came to the UK. This was because mental distress is not widely recognised, understood, and/or looked down on and so it is not discussed in certain countries or cultures. This resource is designed to help refugee and asylum seeking women more clearly understand mental health, and talk about it and seek help if they need it.

Our mental health and wellbeing is about how we feel, our thoughts, emotions and how we cope. Our mental health and wellbeing can be linked to our physical wellbeing and affects our daily life. Your mental health and wellbeing might change as your life circumstances change and as you move through different stages and experiences in your life.

It is healthy to know and talk about how you are feeling. Just exploring and talking about our mental wellbeing can help us to feel better. That can be the first step in looking after your own mental wellbeing and seeking help from others if you need it.

What are mental health problems?

We all have times when we feel down, stressed or frightened. This can be very common amongst people who are seeking asylum and even after they become refugees. Most of the time those feelings pass. Everyone is different; some recover from a setback in their mental health and wellbeing quite quickly, while others may feel weighed down by it for a long time. When a person is feeling down or stressed, this means that they are experiencing a mental health problem; this could happen to any one of us.

Usually people experience mild to moderate mental health problems such as low mood, depression or anxiety. These are called common mental health problems. People can often overcome common mental health problems by talking about them to someone, exercising and eating well, and other self-help.

More serious problems can include feeling extremely depressed, over-excited, panicky or confused, or hearing voices.
What helps?

Often people experiencing serious mental health problems can be helped by seeing a doctor, having talking therapy and/or taking medication. It is very normal to receive help for mental health problems and illnesses.

Mental health does not mean that a person is ‘crazy’ or is ‘losing their mind’. They are problems that can be diagnosed by a doctor, not personal weaknesses. Most people who experience mental health problems can get better or learn to live well with their mental health problems, especially if they get help early on.

What contributes to mental health problems?

Many things in life can lead to us developing mental health problems such as:

- feeling overwhelmed with life
- the asylum process
- stress at work, family difficulties
- bad things that have happened to us in the past
- where we live, lack of exercise
- poor physical health
- not knowing our rights
- the cloudy and dark weather

There are many ways we can help ourselves or get help from others (see pages 23, 24 and 25).
Seeking asylum

As a result of the violence, torture or conflict that asylum seekers may have gone through, they are likely to have experienced mental health problems before arriving in the UK. This is known as pre-migration trauma.

Seeking asylum can be a long and distressing process and may contribute to mental health problems. Many asylum seeking women have said that waiting to hear if their asylum case has been accepted and reliving what they have been through is distressing.

It is very common for asylum seekers to have mental health problems, so it is important for you to know that you are not alone and that there are services available for people like you to support you with your mental health (see page 22).

“My experience of seeking asylum has been stressful and is causing me a lot of anxiety. The reason for this is because I do not know what my future is going to be. I am just hoping for a better tomorrow. I want to look ahead, to my future, but I cannot because it is very uncertain. I don’t know when I’ll be free from being an asylum seeker.” Amaan participant

Challenges for refugees

When asylum seekers are granted Leave to Remain they may experience a new set of barriers and issues. These include housing, employment and support services. The Scottish Refugee Council offers support for refugees through their Refugee Integration Service (RIS).

Advice and support for refugees

The Scottish Refugee Council’s Refugee Integration Service (RIS) offers a 12-month programme to people who have been granted Refugee Status or Humanitarian Protection, Discretionary Leave to Remain or Indefinite Leave to Remain following an asylum claim. The programme covers:

• Advice and support in addressing initial critical needs such as housing, education and access to benefits.

• Links to employability options to help you enter long-term employment at the earliest opportunity.

• Support for family members of refugees reunited in Scotland.
If you have been granted Leave to Remain following an asylum claim and are currently living in Scotland, please call the RIS on 0141 248 9799 to make an appointment with one of their advisers. A similar service is also available through the London Refugee Council. For further information please call the Refugee Council on 020 7346 1166.

**Post-Traumatic Stress Disorder (PTSD)**

Post-traumatic stress disorder is a reaction to experiencing very stressful and traumatising events, such as war and rape. People with PTSD can have flashbacks, panic attacks and other mild symptoms.

People with PTSD usually start to have symptoms straight after the traumatic event, but some people develop symptoms much later. People experiencing PTSD may not get treatment for months or years after the first time they have the symptoms because they do not think they can be helped.

It can last for a long time after the stressful event, so it is important to get expert help in order to be treated. If you are feeling like this, you should speak to your GP who should refer you to the right service in order for you to receive the right treatment and support.
MENTAL HEALTH STIGMA AND DISCRIMINATION

**Stigma** is a set of negative opinions or beliefs that a group or society has about something such as mental health problems.

**Discrimination** is when people are treated unfairly because of the stigma about an aspect of them such as their race, gender, religion or mental health problem.

Often people feel uncomfortable about their, or other people’s, mental health problems and don’t talk about them to others. This can lead to people with mental health problems keeping their problems to themselves, being avoided by others and feeling excluded from wider society, work, their family and the local community. This in turn can lead to people not seeking help when they need it and can have an impact on their recovery.

Many people’s mental health problems are made worse by the stigma and discrimination they experience – from wider society, but also from families, friends and employers. Social isolation, poor housing, unemployment and poverty are all linked to mental ill health. Nearly nine out of ten people with mental health problems say that stigma and discrimination have a negative effect on their lives. This is something we need to overcome; people’s attitudes towards mental health are becoming more positive and understanding as they understand more, but there is still a long way to go.

Some asylum seeking and refugee women shared their experiences of when they felt they were being discriminated against due to their race, gender, religious beliefs and even asylum status. They said that they did not know how or who to complain to about the way they have been mistreated. It is important to know that action can be taken to hold people who are discriminatory to account. This can be done by complaining to managers or other staff members.

The Equality Act 2010 makes it illegal to discriminate directly or indirectly against people with mental health problems in public services and functions, access to premises, work, education, associations and transport.

“Before starting the community conversations I felt that I needed a lot of support. I needed to know how to deal with my depression and stress issues. After attending mental health support groups I feel that I am not as tense as I used to be. I felt relieved as my wellbeing was improving. The information in the group sessions taught me different methods of coping with my mental health, for example keeping myself occupied so that I don’t have to think about my problems.” Amaan participant
Mental health problems such as anxiety and depression are the most common problems, with around one in four people affected at any one time. Anxiety and depression can be mild, but can also be severe and long-lasting, and have a big impact on people’s ability to get on with life. This section covers the more common mental health problems.

**Depression**

Depression is a common mental problem that causes people to experience depressed mood, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy, or poor concentration.

Depression is different from feeling down or sad. Unhappiness is something which everyone feels at one time or another, usually due to a particular cause, and will pass. A person suffering from depression will experience intense emotions of anxiety, hopelessness, negativity and helplessness, and these feelings stay with them instead of going away.

**What causes depression?**

Depression can happen suddenly as a result of physical illness, experiences dating back to childhood, unemployment, bereavement, family problems or other life-changing events.

Sometimes, there may be no clear reason for your depression but, whatever the original cause, identifying what may affect how you feel and the things that are likely to trigger depression is an important first step.

**Signs and symptoms of depression:**

- Tiredness and loss of energy
- Sadness that doesn’t go away
- Loss of self-confidence and self-esteem
- Difficulty concentrating
- Avoiding other people
- Feelings of helplessness and hopelessness

- Sleeping problems
- Physical aches and pains
- Very strong feelings of guilt or worthlessness
- Loss of appetite
- Finding it hard to function at work/college/school
- Self-harm
How can it be managed?

Depression often makes you feel helpless. Taking action to make yourself feel more in control will have a positive effect, whether it’s going to see your GP for treatment, joining a gym, going for daily walks, or doing something that you are interested in or good at.

If you don’t feel up to starting something new or joining a local group on your own, ask a friend to go with you.

There are many things you can do to help manage your symptoms and a wide range of treatments, both medical and non-medical, available through your GP.

Anxiety

Anxiety is a type of fear and worry. It is usually linked with the thought of a threat or something going wrong in the future, rather than something happening right now. The physical feelings it brings can occur when people have these kinds of thoughts, or without warning.

These are all because your body is preparing you to respond to an emergency. Anxiety increases the blood flow to the muscles, increases your blood sugar and focuses your mind on the thing that’s scaring you.

When you feel frightened, panicky or seriously anxious, your mind and body speed up. Some of the things that might happen are:

- Heartbeat gets very fast – maybe it feels irregular
- Breathing gets very fast
- Muscles feel weak
- Sweat more
- Feel dizzy
- Feel like you cannot move
- Hard to concentrate on anything else
- Not knowing what to do next
- Can’t eat
- Hot and cold sweats
- Dry mouth
- Painful muscles
Anxiety also has a psychological impact, which can include:

• Trouble sleeping
• Lack of concentration
• Feeling irritable
• Feeling depressed
• Loss of self-confidence

Causes of anxiety
Feelings of anxiety can be caused by lots of things and can be a result of what you’re worried about and how you act when you feel uneasy. They depend on lots of things such as:

• Your genes
• How you were brought up
• What’s happened to you in your life
• The way you learn / cope with things

Just knowing what makes you anxious, and why, can be the first step to managing anxiety.

Getting help for anxiety
Fear and anxiety can affect all of us every now and then. Most people get through passing moments of anxiety with no lasting effect. People experiencing anxiety in their everyday lives often find the personal resources to cope through simple treatments (see pages 23–25 for more ways to cope with anxiety).

Postnatal Depression
Many women experience this type of depression after having a baby. At first it may just be a short period of depression, but can lead on to postnatal depression which is much more serious. Postnatal depression can be treated but many mothers do not recognise that they have it, so they do not get the help they need to feel better. Symptoms can start soon after giving birth and last for months or, in serious cases, they can continue for more than a year.

The main symptoms of postnatal depression are:

• Repeated feeling of sadness and low mood.
• Little or no energy and feeling tired all the time.
• Loss of interest in the world around you and no longer enjoying things that used to make you happy.
Postnatal depression can create problems with your day-to-day life. Some women feel that they are not able to look after their baby, or they feel too anxious to leave the house or keep in touch with friends. A small number of women may develop psychosis, which is a severe condition that occurs suddenly within the first six weeks after childbirth. If you have postnatal depression it can be very helpful to speak to someone who has had a similar experience. Speaking to your health visitor is also very important.

**Stress**

All sorts of situations can cause stress. The most common involve work, money matters and relationships with partners, children or other family members. Sometimes there are no obvious causes.

When you are stressed you may experience many different feelings, including:

- Anxiety  
- Fear  
- Frustration  
- Anger  
- Depression

You may behave differently when you are stressed. You may not be able to sleep properly. You may be annoyed or tearful all the time. Some people seem to be more affected by stress than others. For some people, just getting out of the door on time each morning can be a very stressful experience, or going to sign on at the Home Office. Others are more relaxed and easy-going, and seem to cope better with pressure.

An important step in tackling stress is to realise that it is causing you a problem. You need to make the connection between feeling tired or ill with the pressures you are faced with. Do not ignore physical warnings such as tense muscles, overtiredness, headaches or migraines.

If you think you are feeling stressed there are many things you can do to help yourself (see pages 23–25).
Phobias/Fears

Phobias are types of fear or anxiety caused by a particular situation. It’s possible to develop a phobia to almost any situation or thing, but the most common include:

- **Social phobia** – fear of how you are seen and judged by other people or fear of being humiliated in social situations, or at times when you are on show, speaking or performing in public.

- **Agoraphobia** – fear of leaving home: going into shops, crowds and public places or travelling alone in trains, buses or planes.

- **Fears attached to specific things**, such as fear of heights, spiders, enclosed spaces (claustrophobia), needles, thunder, darkness, flying, dentistry, using public toilets, eating certain foods, or the sight of blood or injury.

People with a phobia will try to avoid the object or situation they fear. For example, someone with agoraphobia may find it very difficult to leave their house at all. The symptoms of your anxiety – such as a racing heart or feeling faint – may be frightening in themselves and these are often lined with secondary fears of dying, losing control, or ‘going mad’.

Obsessive compulsive disorder

Obsessive compulsive disorder (OCD) is a common form of anxiety disorder involving distressing, repetitive thoughts. This makes OCD difficult to make sense of or to explain to other people. Obsessions are distressing or frightening, repetitive thoughts that come into your mind automatically, however strange they may seem and however much you try to resist or ignore them. Examples of OCD include cleaning too much, checking – such as checking doors are locked, or that the gas or a tap is off – counting, and ordering and arranging things.

**What causes OCD?**

It can be based on previous experiences, especially during childhood. Your personality type may also be important – perfectionists seem to be more prone to OCD.

Stress does not cause OCD, but a stressful event such as giving birth, the death of someone close to you or divorce may act as a trigger.

**What are the treatments for OCD?**

There are a number of treatments and strategies to help you deal with OCD. The first step in getting treatment is to explain your symptoms to your GP who can then refer you for specialist help. The most effective treatments for OCD usually involve talking treatments – such as counselling, psychotherapy and cognitive behaviour therapy – and medication.
Mental health problems affect about one in ten children and young people. They include depression and anxiety and are usually a direct reaction to what is happening in their lives.

The emotional wellbeing of children is just as important as their physical health. Good mental health allows children and young people to develop ways to deal with whatever life throws at them and grow into healthy adults.

**Things that can help to keep children and young people mentally well include:**

- Being in good physical health, eating a balanced diet and getting regular exercise.
- Having time and the freedom to play – indoors and outdoors.
- Being part of a family that gets along well most of the time.
- Going to a school that looks after the wellbeing of all its pupils.
- Taking part in local activities for young people.

**Other factors are also important, including:**

- Feeling loved, trusted, understood, valued and safe.
- Being interested in life and having opportunities to enjoy being hopeful and positive.
- Being able to learn, and having opportunities to succeed.
- Accepting who they are and recognising what they are good at.
- Having a sense of belonging in their family, school and community.

If children have a warm relationship with their parents, they will usually feel able to tell them if they are troubled. One of the most important ways parents can help is to listen to them and take their feelings seriously.

If your child is having problems at school, a teacher, school nurse, school counsellor or educational psychologist may be able to help. Otherwise, go to your GP or speak to a health visitor. These professionals are able to refer a child to further help. Different professionals often work together in Child and Adolescent Mental Health Services (CAMHS).
There are around one in ten people who experience more complicated mental health problems and need more extensive treatment.

**Bipolar disorder**

Bipolar disorder, formerly known as manic depression, is a condition that affects your moods, which can swing from one extreme to another.

If you have bipolar disorder, you will have periods or episodes of:

- **Depression** – where you feel very low and lethargic.
- **Mania** – where you feel very high and overactive (less severe mania is known as hypomania).

Symptoms of bipolar disorder depend on which mood you are experiencing. Unlike simple mood swings, each extreme episode of bipolar disorder can last for several weeks (or even longer), and some people may not experience a ‘normal’ mood very often.

**What causes bipolar disorder?**

The exact causes of bipolar disorder are unknown, although it’s believed that several things can trigger an episode. Extreme stress, overwhelming problems and life-changing events are thought to contribute, as well as genetic and chemical factors.

**Living with bipolar disorder**

The high and low phases of bipolar disorder are often so extreme that they interfere with everyday life. However, there are several options for treating bipolar disorder that can make a difference. They aim to control the effects of an episode and help someone with bipolar disorder live life as normally as possible.
The following treatment options are available:

- Medication to prevent episodes of mania, hypomania (less severe mania) and depression – these are known as mood stabilisers and are taken every day on a long-term basis.
- Medication to treat the main symptoms of depression and mania when they occur.
- Learning to recognise the triggers and signs of an episode of depression or mania.
- Psychological treatment – such as talking therapy, which can help you deal with depression, and provides advice about how to improve your relationships.
- Lifestyle advice – such as doing regular exercise, planning activities you enjoy that give you a sense of achievement, as well as advice on improving your diet and getting more sleep.

Psychosis

Psychosis is a mental health problem that causes people to perceive or interpret things differently from those around them. This might involve hallucinations or delusions.

The two main symptoms of psychosis are:

- Hallucinations – where a person hears, sees and, in some cases, feels, smells or tastes things that aren’t there; a common hallucination is hearing voices.
- Delusions – where a person believes things that, when examined rationally, are obviously untrue – for example, thinking your next door neighbour is planning to kill you.

The combination of hallucinations and delusional thinking can often severely disrupt perception, thinking, emotion and behaviour. Experiencing the symptoms of psychosis is often referred to as having a psychotic episode.

What causes psychosis?

Psychosis isn’t a condition in itself – it’s triggered by other conditions. It can also be triggered by traumatic experiences, stress or physical conditions, such as Parkinson’s disease, a brain tumour, or as a result of drug or alcohol misuse.
Treatment for psychosis involves using a combination of:

- **Antipsychotic medication** – which can help relieve the symptoms of psychosis.
- **Psychological therapies** – the one-to-one talking therapy Cognitive Behavioural Therapy (CBT) has proved successful in helping people with schizophrenia and, in appropriate cases, family therapy has been shown to reduce the need for hospital treatment in people with psychosis.
- **Social support** – support with social needs, such as education, employment or accommodation.

**Schizophrenia**

Schizophrenia is a long-term mental health condition that causes a range of different psychological symptoms, including:

- **Hallucinations** – hearing or seeing things that do not exist.
- **Delusions** – unusual beliefs not based on reality that often contradict the evidence.
- **Muddled thoughts** based on the hallucinations or delusions.
- **Changes in behaviour**.

**Symptoms**

Doctors describe two groups of symptoms in people with schizophrenia: positive and negative. Although the positive symptoms are often the most dramatic and, at least initially, the most distressing, the negative ones tend to cause the most problems, as they tend to be longer-lasting.

**The three main symptoms are:**

- Feelings of being controlled by outside forces (i.e. having one’s thoughts and actions taken over).
- Hearing, seeing, smelling or feeling things which are not there (hallucinations).
- Irrational and unfounded beliefs (delusions).

Other symptoms include: tiredness, loss of concentration, and lack of energy and motivation, which may be exacerbated by the side effects of drugs used to treat the positive symptoms. Because of these symptoms, people with schizophrenia are often unable to cope with everyday tasks, such as work and household chores.
Treatment
Most people with schizophrenia are prescribed drugs to reduce the positive symptoms. The drugs may be prescribed for long periods and may have unpleasant side effects. Some people need a great deal of help in managing the symptoms of schizophrenia; others find ways to cope with experiences such as hearing voices, and do not necessarily wish to receive any treatment.

Eating disorders
You may be diagnosed with an eating disorder if your eating habits threaten your health and happiness, or threaten the health and happiness of the people who care for you. The most common eating disorders are anorexia nervosa and bulimia nervosa. These affect about two per cent of adult females and some men. Both are serious mental health problems and anyone experiencing them needs a great deal of help and understanding.

Anorexia nervosa
People with anorexia nervosa don’t eat enough, usually because they feel that their problems are caused by what they look like.

Bulimia nervosa
People with bulimia nervosa can’t stick to a healthy eating pattern. They tend to binge, that is, eat a lot at once.

What causes eating disorders?
Eating disorders usually have underlying causes. For example, if you are a teenager, hormone changes and lack of confidence, or problems such as bullying or difficulties with schoolwork can trigger the conditions. Refusing or bingeing on food may make you feel you have some control over your life. Some people attribute eating disorders to media and fashion. It is fashionable in Western culture to be slim. This is not possible for everyone as we are naturally all different shapes and sizes.

How to get help for eating disorders?
There are a number of self-help books available in the shops. These books can be very helpful in describing strategies for improving your eating habits. The first stage for many people with an eating disorder will be to talk to their GP. The most successful treatment for eating disorders in the longer term may be talking to a specialist who can help with your emotional needs and can help you take control of your eating. Talking treatments such as counselling or Cognitive Behavioural Therapy (CBT) are generally considered to be the most effective way of treating eating disorders because they deal with the deeper emotional issues rather than simply with the obvious problems.
Self-harm describes a wide range of things that people do to themselves in a deliberate and usually hidden way. In the vast majority of cases, self-harm remains a secretive behaviour that can go on for a long time without being discovered.

**Self-harm can involve:**

- Cutting
- Burning
- Hitting or scratching
- Breaking bones
- Hair pulling
- Swallowing toxic substances or objects

Although some very young children and some adults are known to self-harm and it often continues from childhood into adulthood, the majority of people who self-harm are aged between 11 and 25 years.

For information on how to get help, see page 22.
Suicide is when a person causes their own death. There are some situations that are known to be linked with increased risk of suicide. These include:

- drug and alcohol misuse
- unemployment
- social isolation
- poverty
- poor social conditions
- imprisonment
- medication side effects
- violence
- family breakdown
- fear of deportation

A number of things are known to protect against suicide:

- Strong connections to family and community support.
- Having people dependent on them e.g. their children.
- Personal, social, cultural and religious beliefs that discourage suicide and support self-preservation.
- Skills in problem solving, conflict resolution and non-violent handling of disputes.
- Feeling they have good reasons for living.
- Seeking help and easy access to quality care for physical and mental health problems.

Feeling suicidal is usually a temporary state of mind. If the right and timely help and emotional support is offered to people who are experiencing deep unhappiness and distress, this can reduce the risk of them choosing to end their own life. There can be signs to show that a person has tried to end their life. These can include evidence that they have self-harmed and/or the person expressing their thoughts about wanting to die to family, partners, friends or professionals, and/or the person appearing to make plans to say goodbye to people and leave their affairs in order. These signs create opportunities to take action and save lives.

If you are worried that someone you know may be considering suicide, try to encourage them to talk about how they are feeling. Listening is the best way to help. Try to avoid offering solutions and try not to judge. If they have previously been diagnosed with a mental health condition, such as depression, you can speak to a member of their care team for help and advice.

See page 22 for information about where to get help.
Here are services that are available if you need to speak to someone. These services are anonymous which means they will not ask for your name, address or contact details.

**Samaritans**

**Telephone:** 116 123

Samaritans provides confidential, non-judgemental emotional support, 24 hours a day for people who are experiencing feelings of distress or despair, including those that could lead to suicide.

http://www.samaritans.org/

**Breathing Space**

**Telephone:** 0800 83 85 87

Monday to Thursday 6pm–2am.

Friday to Monday 6pm–6am

Breathing Space is a free and confidential phone line service for any individual who is experiencing low mood or depression, or who is unusually worried and in need of someone to talk to.

http://breathingspace.scot/

**NHS 24**

**Telephone:** 111

NHS 24 is an online and telephone-based service which can answer your questions about your health as well as offering advice.

http://www.nhs24.com/
KEEPING BUSY IS A GOOD WAY OF IMPROVING YOUR EMOTIONAL WELLBEING. BY DOING THINGS YOU CAN HELP YOURSELF FEEL BETTER. IT CAN ALSO IMPROVE YOUR CONFIDENCE. THROUGH SOCIALISING, YOU CAN MAKE NEW FRIENDS AS WELL AS MEET PEOPLE WHO ARE GOING THROUGH THE SAME THINGS AS YOU.

ANOTHER WAY YOU CAN HELP YOURSELF IS BY VOLUNTEERING AND GETTING INVOLVED IN YOUR COMMUNITY. IF YOU ARE ALONE ALL THE TIME YOU WILL THINK TOO MUCH.

RELAX

An important way of stopping stress is to realise that it is causing you a problem. You need to make the connection between feeling tired or ill with the pressures you are faced with. Do not ignore physical warnings such as tense muscles, overtiredness, headaches or migraines.

If you find yourself becoming angry or upset you may find it helpful to take time out, even if it’s only for five minutes. Get yourself a drink of water or take a walk around the block until you feel calmer. Once you notice you are becoming stressed, try to relax your muscles and calm yourself down by slow, deep breathing. Start by taking a deep breath, hold this for a count of three and then slowly breathe out. Continue this slow breathing until you feel more relaxed, and then go on with what you were doing.

BE IN POSITIVE COMPANY

It is important to be around people who have a positive impact on you as this may have an impact on your mental health. Sometimes people can make you feel unhappy, so it is healthy to be with people who make you feel good about yourself.

GET ACTIVE

Another way to look after your mental health is by exercising and being active. Exercise is known to have a positive effect on mental health. Try to join an exercise class such as Zumba or Yoga, which can improve your mental and physical health.

SOME PEOPLE ARE MORE ACTIVE THAN OTHERS, BUT IT IS IMPORTANT TO MAKE THE EFFORT TO MEET OTHER PEOPLE AND SOCIALISE.
Community groups such as women’s groups or healthy eating workshops are a great way to stay active as well as meeting new people who may be going through the same experiences as you. Information about community groups can be found at your local community centre, or through friends or leaflets.

**Mood and food**

Healthy eating is known to reduce the chance of getting lots of physical illnesses, like cancer and heart disease, and it can also help improve your mental health – it can give you more energy. Eating a balanced diet can help your mental health. Sometimes you may feel like you do not want to eat, but it is important for both your mental and physical health to eat.

**Ways to improve your diet include:**

- Drink six to eight glasses of water a day to stay hydrated.
- Eat oil-rich fish or hemp oil supplements to boost levels of brain-enhancing omega-3 oils.
- Eat regular meals and snacks that include ‘brown’ whole grains, oats, whole fruits, nuts and seeds. They release energy more slowly and steadily.
- Check the food labels so that you can avoid unnecessary food additives that can affect how you feel.
- Avoid drinking too much caffeine as it has been associated with anxiety, cravings, nervousness and depression.
- Eat good mood breakfast foods, including porridge, wholegrain cereals or live yogurt with fresh/dried fruit, nuts and seeds, wholemeal bread/toast plus nut or seed butters and sugar-free jam.
- Five is the very minimum number of portions of fruit and vegetables you need each day.

Try to reduce the amount of salt, sugar, oil and ghee you eat as these are not good for your health. You can buy vitamins and supplements from a range of places to improve your diet. Vitamin D deficiency is very common among asylum seekers and refugees due to not getting enough sunlight. GPs may prescribe vitamins for you if it is required, or refer you to a dietician.
“I learnt a lot from the support groups, especially coping methods. All the sessions were relevant to what we were going through. We learnt how exercise can have a big impact on our health and wellbeing. And also how the food we eat can make a big difference on how we are feeling. I also learnt that talking to people helps relieve stress and tensions. I felt encouraged to always think of a better tomorrow.”
Amaan Participant

Self-help

There are a number of self-help books available in the shops. You can use these on your own, with a friend or with help from your GP or practice nurse.

Some people find that these books are a useful first stage in getting help. They can teach you about some of the ways of dealing with your eating disorder as well as other mental health problems and they can also get you used to reading about or discussing problems which you have previously kept completely to yourself.

Self-help materials

Here are some self-help materials that you can access online either at home or at your local library. You can also find self-help books at your local bookshop.

**Moodjuice – self-help guide:**
http://www.moodjuice.scot.nhs.uk/

**Mind – self-help resource:**
http://www.mind.org.uk/information-support/tips-for-everyday-living/wellbeing/self-help-resources/#.VOyCO7dFCM8
WHEN TO SEEK HELP FROM OTHERS

Why would I need to get help from someone else?
The asylum seeking and refugee women who have helped us with the content of this resource said that it is not always easy to speak to their GP and ask for the support they need. This can be because of language and poor treatment by some staff members.

You can take a friend to your appointment and, if you feel that you have been mistreated, then you have the right to complain. If you place a complaint against a service or a staff member, it will not affect your asylum case.
Talk to someone you trust

A lot of women said that talking to people they trust about their feelings really helped. This could be at a women’s group or talking to a support worker. Some women felt that anti-depressants given by a GP were not helping and that they just needed to talk to someone.

Talk to your GP

Your GP may be the first person you talk to about your mental health problems. If you have a good relationship with your doctor, you may find it helpful just to know there is someone you can talk to about the feelings you are having. Your GP may give you anti-depressants or refer you to specialist services if he/she feels they will help you.

Anti-depressants may cause side effects. If this is the case, speak to your GP. Side effects of anti-depressants can include weight gain, a dry mouth, constipation and not being able to sleep well. If you do not want the medication, you can say that you do not want it to your GP.

In an emergency

If you really feel that you cannot cope and are in despair, there are emergency support services you can contact. See page 22.
You do not have to be a professional to talk about mental health.

If you know someone who has mental health issues there are ways in which you can help them.

- Talk
- Listen
- Stay in touch
- Do not judge other people
- Be patient
- Talk about other things, not just about problems
- Show and remind them that you care
- You do not have to do it on your own

Other people may not know where to get help, so maybe you can help them to get the support they need.

See page 22 for more information about where to get help.
Wall of support

Write on the wall all the different types of support you have. This could be members of your family, friends, organisations, books, hobbies and anything else that helps you when you are feeling down.

Once you have written all the different types of support you have, you can see that if one block is no longer there, you still have the rest of the wall to support you!
Wheel of change

The wheel of change allows you to write your thoughts regarding what you would like to achieve in life, barriers in place that are preventing you from achieving your goal, and who can support you to accomplish your ambitions.

WHAT WOULD YOU LIKE TO ACHIEVE?

WHY DO YOU WANT IT?

WHAT ARE THE BARRIERS?

WHAT ARE YOUR FEARS?

WHAT ARE YOUR STRENGTHS?

WHO COULD SUPPORT YOU?