Understanding personality disorders



understanding

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This booklet is for anyone who has, or thinks they may have, a diagnosis of personality disorder. It discusses what the diagnosis means, possible causes and treatment approaches. It suggests ways that you can help yourself, and contains advice for friends and family.

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What is a personality disorder?

The word 'personality' refers to the pattern of thoughts, feelings and behaviour that makes each of us the individuals that we are. These affect the way we think, feel and behave towards ourselves and others.

We don't always think, feel and behave in exactly the same way - it depends on the situation we are in, the people with us and many other things. But we mostly tend to behave in fairly predictable ways.

Personality disorders are a type of mental health problem where your attitudes, beliefs and behaviours cause you longstanding problems in your life. Your experience of personality disorder is unique to you. However, you may often experience difficulties in how you think about yourself and others. You may find it difficult to change these unwanted patterns.

• One minute I'm up and the next I'm down. It's like being on an emotional rollercoaster but without the fun.

What are the signs of a personality disorder?

You might be given a diagnosis of personality disorder if **all three** of these apply:

- The way you think, feel and behave causes you or others significant problems in daily life. For example, you may feel unable to trust others or you may often feel abandoned, causing you or others unhappiness.
- The way you think, feel and behave causes significant problems across different aspects of your life. You may struggle to start or keep friendships, to control your feelings and behaviour or get on with people at work, for example.
- These problems continue for a long time. These difficult patterns may have started when you were a child or teenager and can carry on into your life as an adult.

You may welcome your diagnosis, finding it a way to make sense of your experience. Or you may find it more difficult to come to terms with.

Does it mean there's something wrong with who I am? No. We all have parts of our personality that are troublesome to ourselves and others.

If you have a personality disorder it doesn't mean that you're fundamentally different from anyone else, but at times you might need extra help. See 'How can I help myself?' on p.23 for tips on how to cope.

• It's hard to explain and it has a major impact on all of my relationships. I see things in black and white, there are no grey areas.

Who can diagnose me with a personality disorder?

You can only be diagnosed with a personality disorder 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 a personality disorder, they can refer you to your local community mental health team (CMHT) who will be able to assess you.

Initially I took this diagnosis of BDP as an insult, a criticism of my whole being, but then I began to understand that it is just a diagnosis, an explanation of why I feel as I do. Just as in a medical situation the pain in my stomach being diagnosed as appendicitis means that I am ill, there is a reason for the pain and I can get treatment.

What are the different types of personality disorder?

Personality disorder can show itself in different ways, and specialists take varying approaches to diagnose and understand personality disorders. Here are some of the approaches you may come across:

- You may be given a medical diagnosis, when you are told you have a type of personality disorder.
- Some specialists may focus on the aspects of your personality which cause you most difficulty.
- Some specialists try to understand the problems you experience, by working with you to identify the individual patterns and experiences in your life.

Types of personality disorder

Psychiatrists tend to use a system of diagnosis which identifies 10 types of personality disorder.

These types of personality disorder, and some of the characteristics identified by them, are below. For each type, a diagnosis will not be made if you have only one or two of the characteristics.

The types are grouped into three categories:

| Suspicious | Emotional and impulsive | Anxious |
|-------------|-------------------------|----------------------|
| paranoid | borderline | avoidant |
| schizoid | histrionic | dependent |
| schizotypal | narcissistic | obsessive compulsive |
| antisocial | | |

You may find that you meet the criteria for several different types of personality disorder. It can also be the case that a wide range of people meet the criteria for the same disorder, despite having very different personalities and different individual experiences.

Paranoid personality disorder

You may:

- find it hard to confide in people, even your friends
- find it very difficult to trust other people, believing they will use you or take advantage of you
- watch others closely, looking for signs of betrayal or hostility
- read threats and danger which others don't see into everyday situations.

Schizoid personality disorder

You may:

- be uninterested in forming close relationships with other people, including your family
- feel that relationships interfere with your freedom and tend to cause problems
- prefer to be alone with your own thoughts
- choose to live your life without interference from others
- get little pleasure from life
- have little interest in sex or intimacy
- be emotionally cold towards others.

Schizotypal personality disorder

You may:

- find making close relationships extremely difficult
- think and express yourself in ways that others find 'odd', using unusual words or phrases
- behave in ways that others find eccentric
- believe that you can read minds or that you have special powers such as a 'sixth sense'
- feel anxious and tense with others who do not share these beliefs
- feel very anxious and paranoid in social situations.

Antisocial personality disorder (ASPD)

You may:

- put yourself in dangerous or risky situations, often without considering the consequences for yourself or for other people
- behave dangerously and sometimes illegally
- behave in ways that are unpleasant for others
- feel very easily bored and act on impulse you may find it difficult to hold down a job for long
- behave aggressively and get into fights easily
- do things even though they may hurt people to get what you want, putting your needs above theirs
- have a criminal record
- feel no sense of guilt if you have mistreated others
- believe that only the strongest survive and that you must do whatever it takes to lead a successful life because if you don't grab opportunities, others will
- have had a diagnosis of conduct disorder before the age of 15.

You will be at least 18 years old.

This diagnosis includes 'psychopathy'. This term is no longer used in the Mental Health Act but a 'psychopathy checklist' questionnaire may be used in your assessment.

Borderline personality disorder (BPD)

You may:

- feel very worried about people abandoning you, and would do anything to stop that happening
- 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)
- not have a strong sense of who you are, and it can change depending on who you're with
- find it very hard to make and keep stable relationships
- act impulsively and do things that could harm you (such as binge eating, using drugs or driving dangerously)
- have suicidal thoughts or self-harming behaviour
- feel empty and lonely a lot of the time
- 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 that other people don't
- feel numb or 'checked out' and not remember things properly after they've happened.

See Mind's in-depth resource 'Borderline Personality Disorder (BPD)' to find out more.

BPD is like having no emotional buffer. I can go from nothing to suddenly extremely overwhelming emotions and I struggle with expressing them healthily.

Histrionic personality disorder

You may:

- feel very uncomfortable if you are not the centre of attention
- feel much more at ease as the 'life and soul of the party'
- feel that you have to entertain people
- flirt or behave provocatively to ensure that you remain the centre of attention
- get a reputation for being dramatic and overemotional
- feel dependent on the approval of others
- be easily influenced by others.

Narcissistic personality disorder

You may:

- believe that there are special reasons that make you different, better or more deserving than others
- have fragile self-esteem, so that you rely on others to recognise your worth and your needs
- feel upset if others ignore you and don't give you what you feel you deserve
- resent other people's successes
- put your own needs above other people's, and demand they do too
- be seen as selfish and 'above yourself'
- take advantage of other people.

Avoidant (or anxious) personality disorder

You may:

- · avoid work or social activities that mean you must be with others
- expect disapproval and criticism and be very sensitive to it
- worry constantly about being 'found out' and rejected
- worry about being ridiculed or shamed by others
- avoid relationships, friendships and intimacy because you fear rejection
- feel lonely and isolated, and inferior to others
- be reluctant to try new activities in case you embarrass yourself.

Dependent personality disorder

You may:

- feel needy, weak and unable to make decisions or function properly without help or support
- allow others to assume responsibility for many areas of your life
- agree to things you feel are wrong or you dislike to avoid being alone or losing someone's support
- · be afraid of being left to fend for yourself
- have low self-confidence
- see other people as being much more capable than you are
- be seen by others as much too submissive and passive.

Obsessive compulsive personality disorder (OCPD)

You may:

- need to keep everything in order and under control
- set unrealistically high standards for yourself and others
- think yours is the best way of making things happen
- worry when you or others might make mistakes
- expect catastrophes if things aren't perfect
- be reluctant to spend money on yourself or others
- have a tendency to hang onto items with no obvious value.

OCPD is separate from obsessive compulsive disorder (OCD), which describes a form of behaviour rather than a type of personality. See Mind's resource 'Obsessive compulsive disorder' for further details.

What causes personality disorder?

There's no clear reason why some people develop a personality disorder and others don't. Most researchers think that a complex mix of factors is involved, such as:

- the environment we grow up in
- early childhood and teenage experiences
- genetic factors.

What about the environment I grew up in?

The environment we grow up in and the quality of care we receive can affect the way our personality develops.

You may be more likely to develop personality disorder if you've experienced:

- an unstable or chaotic family life, such as living with a parent who is an alcoholic or who struggles to manage a mental health problem
- little or no support from your caregiver this may be especially hard if you experienced a traumatic event or situation
- a lack of support or bad experiences during your school life, in your peer group or wider community.

If you had a difficult childhood or experiences like these, you might have developed certain beliefs about how people think and how relationships work. You might have developed certain strategies for coping which aren't helpful in your adult life.

How might my early experiences cause personality disorder?

Our experiences growing up can affect our personality in later life. Difficult or traumatic experiences may lead to personality disorder, such as:

- neglect
- losing a parent or sudden bereavement
- verbal, physical or sexual abuse

• being involved in major incidents or accidents.

Not everyone who experiences a traumatic situation will develop these problems. The way you and others reacted to it, alongside the support and care you received to help you cope, will have made a lot of difference.

Similarly, not everyone who develops a personality disorder will have had a traumatic experience.

● I have narcissistic borderline personality disorder. At first it was difficult to accept that the problem was essentially me, my personality. But then being able to put it into perspective as a developmental flaw was much easier to accept – that it was simply the way I'd developed in response to my environment and the situations I'd experienced.

Could it be genetic?

Some elements of our personality are inherited. We are born with different temperaments – for example, babies vary in how active they are, their attention span and how they adapt to change.

Some experts believe inheritance may play a part in the development of personality disorder.

Why is it controversial?

The system of personality disorder diagnosis listed in this resource is the one generally used in this country. However, some psychiatrists disagree with its use, and many people who are given the diagnosis find it stigmatising and unhelpful.

The diagnosis of personality disorder can be controversial because:

- specialists can disagree about the way personality disorder should be understood
- it can be mistakenly diagnosed
- you can feel labelled or insulted by the diagnosis, or experience stigma.

Specialists can disagree about the way personality disorder should be understood

Some psychiatrists believe the types or categories of personality disorder are unhelpful, because:

- most people who are diagnosed with a personality disorder do not fit any one category and may be diagnosed with more than one
- the categories are based on how people behave when they are in hospital, not in the community – where most people live
- some people believe the focus should instead be on what each individual needs in order to deal with their problems and discover new ways of living, not what category they are in.

Could my diagnosis be wrong?

Some symptoms of personality disorder 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.

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 a mental health professional so you can make sure you're getting the right treatment to help you.

See Mind's pages on 'Seeking help for a mental health problem' for information on how to make sure your voice is heard, and what you can do if you're not happy with your doctor.

Experiences of facing stigma

Personality disorder is a complex diagnosis that not everyone understands well, so you might find that people hold misconceptions about you or have a negative image of personality disorder.

In addition, the term 'personality disorder' can sound very judgemental. Being given a diagnosis or label of 'personality disorder' can feel as if you're being told there's something wrong with who you are. You may feel upset, insulted and excluded.

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.

It's important to remember that you're not alone, and you don't have to put up with people treating you badly. Here are some options you can consider:

- show people this information to help them understand more about what your diagnosis really means
- get involved in your treatment Mind's pages on 'Seeking help for a mental health problem' provide 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 Mind's pages on legal rights provide more information
- take action with Mind see our 'Campaigns' page for details of the different ways you can get involved in helping us to challenge stigma.

What treatment can help?

There are a range of treatments that can help you if you experience a personality disorder:

- Talking treatments
- Medication
- Having a say in your treatment.

Can things improve for me?

Sometimes people assume that it's not possible for us to change, especially when it comes to our personality. But research is showing that this isn't the case.

With time, with the right treatment for you and with helpful relationships with others, **it is possible** for things to change and improve.

All my life I have felt different, alienated and completely alone. It is only since my diagnosis of BDP that I began to understand why and, with help, to realise that I could actually do something to change those feelings and feel that I can achieve a life worth living.

Talking treatments

Research is ongoing into what treatments help people with personality disorder. More research is needed but some talking treatments have been found to help.

Depending on where you live and the problems you want help with, the following talking treatments may be available to you:

- Arts therapies are a way of using the arts for example, music, art, dance or drama in a therapeutic environment with a trained therapist. See Mind's pages on 'Arts therapies' for more information.
- Cognitive Behavioural Therapy (CBT) looks at how your feelings, thoughts and behaviour influence each other and how you can change these patterns.
- Cognitive Analytic Therapy (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. You can read more about CAT on Mind's pages about 'Talking treatments'.
- Dialectical Behaviour Therapy (DBT) a treatment specifically developed for Borderline Personality Disorder (BPD). It uses individual and group therapy to help you learn skills to manage your emotions. See Mind's page on 'DBT' for more information.

Since starting a course of DBT, hard as the course is, I am finally beginning to feel that I am worth something.

- 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 to help you examine your thoughts about yourself and others to see if they're valid.
- Schema therapy is usually a long-term talking treatment which aims to help you change the ways of thinking (or 'schemas') which cause you difficulty, while strengthening the ways of thinking which are helpful to you.

 Therapeutic communities (TC) – programmes where you work with a group of other 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.27).

• I spent 18 months as part of a Therapeutic Community, and I'm not exaggerating when I say it's changed my life. My mood swings are far less frequent, and it's rare that they reach the extremes that they used to.

How can I access treatment?

You can access treatment in different ways. This may be through the NHS, privately or through a charity or organisation. See Mind's pages 'How can I access a talking treatment?' for more information.

If you are struggling to access the treatment you need, finding an advocate can be helpful. See our 'Advocate' pages for further details.

Avoidant personality disorder... at first it was a relief to know that I wasn't alone in feeling the way I did – but for a couple of months afterwards I did use the label as an excuse to behave in particular ways and blame it on my 'condition'. Fortunately, with the help of CBT, I realised that I didn't have to live like that.

Medication

There are no drugs specifically licensed for the treatment of personality disorder. Your GP may prescribe medication to help you manage problems such as depression, anxiety or psychosis. These medications could include:

- antidepressants
- antipsychotics
- mood stabilisers.

The National Institute for Health and Care Excellence (NICE) – the organisation that produces guidelines on best practice in health care – recommends that you are only prescribed medication for a short time, if you're in crisis or to treat another problem.

Before you take any medication

Before deciding to take any medication, make sure you have all the facts you need to feel confident about your decision.

For guidance on the basic information you might want, see Mind's resources on:

- 'What you should know before taking any psychiatric drug'
- 'Receiving the right medication for you'
- 'Your right to refuse medication'.

How can I be involved in my treatment?

A really important factor in your treatment is the relationship you form with the professionals who are helping you – whether they are a social worker, psychiatric nurse, therapist or psychiatrist. Having good treatment also depends on you being actively involved in it and having your say. You should expect to:

• Have your say in treatment – your GP or psychiatrist should discuss all your treatment options with you, and your views and preferences

should always be taken into account when making decisions about your treatment. See Mind's resource 'Seeking help for a mental health problem' for more information on having your say.

 Be involved in your care plan – a care plan is an agreement between you and the professionals you're working with, about what you want to get out of your treatment. It should include the problems you want help with, any treatments you may need and planning for a crisis.

• It was only when I met some dedicated professionals willing to go that extra mile that I started to change and believe in myself. I was able to begin therapy and develop a good trusting relationship which has been consistent and secure.

When don't I have a choice in my treatment?

You may not have a choice in your treatment if you:

- do not have mental capacity this is where you are considered too unwell to make informed decisions about a specific situation; see our pages on the Mental Capacity Act for more information
- are being kept in hospital under a section of the Mental Health Act (sometimes called being sectioned)
- are being treated under a Community Treatment Order (CTO) this means you are given supervised treatment in the community
- are being treated under a court order this may be if you have committed an offence.

See Mind's pages on 'Limits to your choices' for more information.

How can I help myself?

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. See Mind's pages on 'Crisis services' and 'Seeking help in a crisis' 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. It can also be a good way to connect with other people who understand what you're experiencing.
- Find ways to help you cope with self-harm. If you have a personality disorder, you may be self-harming as a way of dealing with very difficult feelings or overwhelming situations and experiences. See Mind's pages on 'Self-harm' for other ways to help yourself cope. You can also access confidential advice about drugs and alcohol on the FRANK website. Find out more information and what support may be available in Mind's pages on 'Street drugs and alcohol'.

• I learnt to be kind to myself and that life can be different if I put the work in. Some days I forget what it feels like to be positive and hopeful for the future, but I know it won't last. I deserve to be happy and live a fulfilled life and I'm not about to let an illness take that away from me.

- Try mindfulness and relaxation. This could help you to feel calmer and manage unhelpful thoughts. See Mind's pages on 'Mindfulness' and 'Relaxation' 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. See Mind's pages on 'How to cope with sleep problems' for more information.

- 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. See Mind's pages on 'Physical exercise, sport and exercise' for more information.
- 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. See Mind's pages on 'Food and mood' for more information about how your diet can affect the way you feel.
- Find specialist support. Organisations like Emergence offer information and support for anyone affected by personality disorders. If you've experienced abuse in childhood, the National Association for People Abused in Childhood is there to support you. If you are in prison, the Prison Reform Trust offers an advice and information service – see 'Useful contacts' on p.27 for details.
- Find local support. This can be a way to meet people with similar experiences Mind's Infoline can help you to find local support.
- Contact an advocate. If you feel like you're not being listened to or treated fairly (such as when talking to doctors or accessing treatment) an advocate can help you have your voice heard. See Mind's pages on 'Advocacy' for more information.

For more ideas about caring for yourself when you're feeling unwell, see Mind's pages on 'Self-care'.

How can other people help?

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

Someone with personality disorder may feel especially anxious about their relationships. This can make it hard for them to always keep a good relationship with you.

Sometimes you may find it hard to know the 'right' thing to say or 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.
- Talk to them compassionately and calmly when someone is experiencing difficult thoughts and feelings, their behaviour may be unexpected or upsetting, and you may feel unsettled. Try to understand what they're experiencing and what's affecting their thoughts, feelings and behaviour – this can help you to stay calm.

• I learnt to be kind to myself and that life can be different if I put the work in. Some days I forget what it feels like to be positive and hopeful for the future, but I know it won't last. I deserve to be happy and live a fulfilled life and I'm not about to let an illness take that away from me.

- Don't judge them try to listen to them. You may not understand why they feel like this, but it can mean a lot to acknowledge and value how they're feeling.
- Remind them of their positives a diagnosis of personality disorder doesn't stop someone being likeable, intelligent, kind, highly motivated or creative. Remind them of the positives you see in them.
- Try to both set clear boundaries and expectations 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. This can help you both manage difficult feelings and situations.

Tell me a problem you're having, let me be there for you for a change. Don't hold back sharing difficulties in your life, I am your friend after all. It will make me feel valuable and useful.

- 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 Mind's pages on 'Supporting someone who is self-harming' and 'Supporting someone who is suicidal' for more information.
- Learn more about personality disorder, and help to challenge stigma

 personality disorder is a broad and complex diagnosis, and your loved one may have to deal with other people's misconceptions on top of coping with their own mental health problem. In addition to Mind, organisations like Emergence also offer information and support.
- Help them seek treatment and support see Mind's pages on 'How to support someone to seek help' for more information.
- Help them find an advocate see Mind's pages on 'Advocacy' for more information.
- Take care of yourself it can be upsetting and painful when a loved one is struggling. Your own mental health is also important. Taking care of your own wellbeing can also help you maintain the energy, time and distance you need to be able to to help someone else. See Mind's pages on 'Coping as a carer', 'Managing stress' and 'Maintaining your wellbeing' for more information.

• Having BPD and DPD means I can feel immense empathy and love for others, so it's not all doom and gloom. I'm very caring and do lots of charity work, and love to help others. It's easy to focus on the downside of the disorder but it does give positive traits too.

Useful contacts

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 anyone 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.

NHS Choices

web: nhs.uk Provides information on different personality disorders and treatments 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 Borderline Personality Disorder (BPD).

The Prison Reform Trust

freephone: 0808 802 0060 web: prisonreformtrust.org.uk Write to (no stamp required): Prison Reform Trust FREEPOST ND 6125 London EC1B 1PN A charity working to create a just, humane and effective penal system.

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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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.

Mind Infoline: 0300 123 3393 info@mind.org.uk mind.org.uk



