MENTAL HEALTH & WELLBEING FACTSHEET

Supporting Someone With Their Mental Health

Practical ways to listen, respond and help without carrying everything alone

The short version

You do not need to diagnose someone or have perfect answers to be helpful. Noticing changes, asking calmly, listening without judgement, offering practical support and helping the person reach appropriate services can make a meaningful difference. Take immediate action when life or safety is at risk, and protect your own wellbeing and boundaries too.

Changes you may notice

Mood	Persistent sadness, anxiety, irritability, anger, hopelessness, emotional numbness, unusual fearfulness or rapid changes in mood.
Behaviour	Withdrawal, missing work or appointments, reduced self-care, loss of interest, risky behaviour, agitation, unusual spending or increased alcohol or drug use.
Thinking	Difficulty concentrating, confusion, strong self-criticism, suspiciousness, unusual beliefs, hearing or seeing things others do not, or talking about being a burden.
Body and routine	Marked changes in sleep, eating, energy, movement, hygiene, weight, unexplained pain or the ability to manage ordinary tasks.
Communication	Statements such as ‘there is no point’, giving possessions away, saying goodbye, talking about death, self-harm or feeling unable to continue.

One change does not prove a mental-health condition. Consider what is different from the person's usual pattern, how long it has lasted, the effect on daily life and whether there are immediate safety concerns.

Starting a conversation

Choose the moment	Find a reasonably private, calm time when neither person is rushing. Talking while walking, driving, making tea or doing another simple activity may feel less intense.
Say what you noticed	Use specific, non-judgemental observations: ‘You have seemed quieter and you have missed a few things you usually enjoy. How are you doing?’
Ask open questions	Questions beginning with how, what, where or when can invite conversation. Avoid interrogation or demanding an explanation.
Allow silence	Give the person time to think. They may not be ready to talk, may communicate differently or may need to return to the conversation later.
Keep the door open	If they decline, say you care and are available. Continue ordinary contact so the person does not feel punished or avoided.

Useful opening phrases

- ‘I have noticed you do not seem yourself. How are things?’
- ‘What feels hardest at the moment?’
- ‘Have you felt like this before? What helped then?’
- ‘You do not have to explain everything, but I can listen.’
- ‘Would talking, practical help or some company be most useful?’
- ‘Would you like help finding someone qualified to speak to?’

Listening well

- give full attention and reflect back what you have heard
- acknowledge the feeling without claiming to know exactly how it feels
- take distress seriously even when the problem seems small to you
- ask what the person needs rather than assuming
- respect different cultures, faiths, identities and communication needs
- avoid rushing to advice, comparisons or positive slogans

Helpful support and common pitfalls

Helpful	‘That sounds exhausting. Thank you for telling me.’
Unhelpful	‘Other people have it worse’, ‘cheer up’, ‘stop overthinking’ or ‘you just need to be more positive’.
Helpful	Offer one specific action: a meal, lift, childcare, a short walk, help making a call or company at an appointment.
Unhelpful	Taking control without consent, making promises you cannot keep or becoming the person's only source of support.
Helpful	Ask what has helped before and explore choices together.
Unhelpful	Diagnosing, recommending someone else's medication, demanding disclosure or attempting therapy without suitable training.

Practical help can reduce the load

- write down questions for a GP or therapist
- offer transport or accompany them if invited
- agree a simple check-in time and method
- include the person in ordinary activities without pressure
- find contact details and appointment options together
- help with food, laundry, forms or one urgent task
- support routines without policing behaviour
- help identify other trusted people and services

Support should fit the person

Ask about accessibility, disability, neurodivergence, language, culture, faith, caring duties, finances and privacy. Communication might be easier by text, letter, agreed emoji, visual scale or with another trusted person present.

Asking about suicide and self-harm

If you are worried, ask calmly and directly. Clear questions do not encourage suicide; they give the person permission to be honest. Do not avoid the subject because it feels frightening.

Begin directly	‘Are you thinking about harming yourself?’ or ‘Are you thinking about suicide?’
Understand immediacy	‘Are you in immediate danger?’, ‘Have you taken anything or injured yourself?’, ‘Have you made a plan?’ and ‘Do you have access to what you would use?’
Identify safety	‘Can you stay safe right now?’, ‘Who else can be with us?’ and ‘What has helped you get through these thoughts before?’

If the answer is yes

- stay calm, listen and take the person seriously
- do not leave them alone when there is immediate danger, if it is safe for you to remain
- call 999 or go to A&E; when life is at risk, serious injury or overdose has occurred, or safety cannot be maintained
- use NHS 111 and select the mental health option for urgent help that is not an emergency
- involve another trusted adult or professional and follow an existing crisis or safety plan
- do not agree to keep imminent danger secret

Immediate physical safety

Do not put yourself in danger. If there is violence, a weapon, fire, traffic, severe intoxication or another immediate threat, move to safety and call 999. Do not physically restrain someone unless you are trained and authorised to do so.

Safety planning

A safety plan can record warning signs, coping steps, safe people and places, professional contacts and ways to reduce access to means of harm. It is best developed collaboratively, ideally with a qualified professional. A plan does not replace urgent help when risk is immediate.

Encouraging professional help

GP	A GP can consider mental and physical health, medicines, alcohol or drugs, risk and the most appropriate service. Offer help preparing notes or attending if invited.
NHS Talking Therapies	Adults in England can usually self-refer for anxiety, depression, PTSD and several related difficulties without an existing diagnosis.
Specialist services	Eating disorders, bipolar disorder, psychosis, substance dependence, perinatal mental illness and complex needs may require GP or specialist referral.
Existing care team	If the person already has a mental-health team, crisis line, care coordinator or safety plan, encourage them to use the agreed contact route.
Private therapy	Check that a private practitioner belongs to a relevant professional register, has suitable training and explains confidentiality, safeguarding, fees and complaints procedures.

Consent, privacy and safeguarding

Respect privacy	Do not share someone's personal information casually. Ask what they are comfortable sharing and with whom.
Know the limit	Privacy cannot be promised when a child or vulnerable adult may be at risk, abuse or exploitation is suspected, or there is serious and immediate danger.
Share proportionately	When urgent action is needed, give emergency or safeguarding professionals the relevant information they need. Be honest with the person when it is safe to do so.
You can give information	Even when services cannot disclose confidential information to you, they can usually receive concerns and observations from family members or carers.

If help is refused

Adults generally make their own choices unless immediate risk, safeguarding or decision-making capacity changes what action is required. Keep communication open, offer information, focus on specific concerns and seek advice for yourself. Escalate when life or safety is at risk.

Boundaries protect both people

Be clear	Say what you can offer, when you are available and what requires professional or emergency help.
Share responsibility	Help build a wider support network rather than becoming the only person who knows or the only person the individual contacts.
Do not become the clinician	You can care deeply without diagnosing, monitoring every action, managing medication or providing therapy.
Protect your safety	Abuse, threats or coercion are not acceptable because someone is unwell. Seek help and leave unsafe situations.

Looking after yourself

- talk confidentially with an appropriate trusted person
- take regular breaks and preserve ordinary parts of life
- use carers' information and peer support where helpful
- maintain sleep, food, movement and medical care
- notice guilt, resentment, fear or exhaustion without shame
- seek your own GP or counselling support if needed

Stepping back to rest, sharing responsibility or setting a limit is not abandonment. Sustainable support is safer and more reliable than being available without limits until you become unwell.

A simple support plan

1. Notice	What changes, warning signs or situations should prompt a check-in?
2. Ask	How does the person prefer to be contacted, and what questions feel helpful?
3. Help	Which practical tasks, coping steps and professional contacts are useful?
4. Escalate	What signs mean use the GP, NHS 111, a crisis team, safeguarding services or 999?
5. Review	What is working, what is too much for either person and what needs to change?

Urgent help and emergencies

Call 999 or go to A&E now

Do this if someone's life is at risk, they have seriously injured themselves or taken an overdose, or you cannot keep yourself or someone else safe. Do not drive to A&E in an emergency; call 999 for an ambulance or ask someone else to drive when appropriate.

Urgent but not an emergency	Use NHS 111 online or call 111 and select the mental health option. You can also request an urgent GP appointment.
Samaritans	Call 116 123 free, day or night, 365 days a year. You can also call for advice if you are worried about someone else.

How Health Matters UK can support

Health Matters UK can provide general mental-health education, help organise concerns and questions, identify practical wellbeing needs and signpost appropriate NHS, community, safeguarding and carers' services. We do not diagnose, provide psychological therapy, manage medication, assess clinical risk or replace emergency and crisis services.

Being present matters

Support is not measured by having the perfect words or solving everything. Calm attention, respect, practical kindness and helping someone reach the right level of care can be deeply valuable. Your wellbeing matters within that support too.

Important information

This factsheet is for general education and does not replace personalised medical, legal, safeguarding or emergency advice. Use NHS 111 for urgent mental-health help. Call 999 or go to A&E when life is at risk, serious injury or overdose has occurred, or someone cannot be kept safe.

Conversation and action checklist

Before	Choose a suitable time and place, know your main concern, check your own capacity and have relevant support contacts available.
During	Use observations, open questions, calm listening and direct safety questions when needed. Ask what kind of help the person wants.
After	Agree one realistic next step, who will do it, when you will check in and what signs mean the plan must escalate.
For you	Record important facts appropriately, share responsibility, maintain boundaries and seek support if the situation is affecting your health.

Evidence and review

Prepared in line with Health Matters UK's Evidence & Editorial Standards. Information was checked against current NHS and NICE resources. External guidance remains the responsibility of the issuing organisation.

• NHS Every Mind Matters. Help others with mental health problems. nhs.uk/every-mind-matters/supporting-others/helping-others/

• NHS. Where to get urgent help for mental health. nhs.uk/nhs-services/mental-health-services/where-to-get-urgent-help-for-mental-health/

• NHS. Help for suicidal thoughts. nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/help-for-suicidal-thoughts/

• NHS. Find NHS Talking Therapies for anxiety and depression. nhs.uk/nhs-services/mental-health-services/find-nhs-talking-therapies-for-anxiety-and-depression/

• NHS. Talking therapies. nhs.uk/tests-and-treatments/talking-therapies/

• NICE. Self-harm: assessment, management and preventing recurrence (NG225). nice.org.uk/guidance/ng225

• Samaritans. Contact a Samaritan. samaritans.org/how-we-can-help/contact-samaritan/

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