

HOW TO HELP SOMEONE IN CRISIS

Sometimes depression and bipolar disorder have symptoms that can best be helped by inpatient psychiatric treatment. Try to find out what treatment is available to your loved one, and what steps you can take during a crisis before the crisis occurs, if possible.

People may need to go to the hospital if they:

- Threaten or try to take their lives or hurt themselves or others
- See or hear things (hallucinations)
- Believe things that aren't true (delusions)
- Need special treatments such as electroconvulsive therapy
- Have problems with alcohol or substances
- Have not eaten or slept for several days
- Are unable to care for themselves or their families, e.g., getting out of bed, bathing, dressing
- Have tried treatment with therapy, medication and support and still have a lot of trouble with symptoms
- Need to make a significant switch in treatment or medication under the close supervision of their doctor
- Have any symptom of mania or depression that significantly interferes with life.

Voluntary hospitalisation takes place when a person willingly signs forms agreeing to be treated in hospital. A person who signs in voluntarily may also ask to leave. This request should be made in writing. The hospital must release people who make requests within a period of time (two to seven days, depending on local laws), unless they are a danger to themselves or others.

Most psychiatric hospital stays are from five to ten days. There are also longer residential rehabilitation programmes for alcohol or substance abuse, eating disorders or other issues that require long-term treatment.

Involuntary hospitalisation is a last resort when someone's symptoms have become so severe that they will not listen to others or accept help. You may need to involve your loved one's doctor, the police or lawyers.

Involuntary hospitalisation is an option of last resort only. It is better to talk with your loved one before a crisis and determine the best treatment options together. Work with your loved one in advance to write down ways to cope and what to do if symptoms become severe. Having a plan can ease the stress on you and your loved one, and ensure that the appropriate care is given.

 0800 SELF HELP (0800 735 343)

 info@eapworks.co.nz

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How can I convince my loved one to check in voluntarily?

- Explain that the person is not going to an institution, asylum or prison. Hospitalisation is treatment, not punishment.
- Reassure your loved one that the hospital is a safe place where a person can begin to get well. No one outside the family needs to be told about the hospitalisation.
- Tell your loved one that getting help does not mean someone has failed. A mood disorder is an illness that needs treatment, like diabetes or heart disease. Hospitalisation is nothing to be ashamed of.
- Call the hospital and find out more about admission, treatment and policies.
- Help your loved one pack comfortable clothing and safe items that are reminders of home.
- Offer the person a chance to make choices (such as what to take to the hospital, or who to go with), if this is desired.

How should I talk to a person in crisis?

- Stay calm. Talk slowly and use reassuring tones.
- Realise you may have trouble communicating with your loved one. Ask simple questions. Repeat them if necessary, using the same words each time.
- Don't take your loved one's actions or hurtful words personally.
- Say, "I'm here. I care. I want to help. How can I help you?"
- Don't say, "Snap out of it", "Get over it" or "Stop acting crazy."
- Don't handle the crisis alone. Call family, friends, neighbours, or people from a local support group to help you.
- Don't threaten to call 111 unless you intend to. When you call 111, police and/or an ambulance are likely to come to your house. This may make your loved one more upset, so use 111 only when you or someone else is in immediate danger.

Crisis Planning

- Some people find it helpful to write down mania prevention and suicide prevention plans, and give copies to trusted friends and relatives. These plans should include:
 - A list of symptoms that might be signs the person is becoming manic or suicidal
 - Things you or others can do to help when you see these symptoms
 - A list of helpful phone numbers, including health care providers, family members, friends and a suicide crisis line such as 1737 or 111
 - A promise from your friend or family member that he or she will call you, other trusted friends or relatives, one of his or her doctors, a crisis line or a hospital when manic or depressive symptoms become severe.

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- Encouraging words such as “My life is valuable and worthwhile, even if it doesn’t feel that way right now.”
- Reality checks such as, “I should not make major life decisions when my thoughts are racing and I’m feeling ‘on top of the world’. I need to stop and take time to discuss these things with others before going through with them.”

Where to Get Help

If you are worried about your or someone else's mental health, the best place to get help is your GP or local mental health provider.

However, if you or someone else is in danger or endangering others, call police immediately on 111.

If you need to talk to someone else:

Police Non-Emergency (use 105 to report things that have already happened that don't need urgent Police assistance)	105 police.govt.nz/105support
1737 Need to Talk?	1737 1737.org.nz
Lifeline	0800 543 354 or (09) 522 2999 lifeline.org.nz
Depression Helpline	0800 111 757 depression.org.nz
Suicide Crisis Helpline	0508 828 865 (0508 TAUTOKO) suicidecrisishelpline.org.nz
Healthline	0800 611 116 healthline.govt.nz
Youthline	0800 376 633 youthline.co.nz
Alcohol and Drug Helpline	0800 787 797 alcoholdrughelp.org.nz
Samaritans (Samaritans' 0800 number services Rotorua, Taupō, New Plymouth, Hawke's Bay and Lower North Island only)	0800 726 666 samaritans.org.nz
OUTLine (confidential service for the LGBTIQ+ community, their friends and family)	0800 688 5463 outline.org.nz
Rural Support Trust	0800 787 254 (0800 RURAL HELP) rural-support.org.nz

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