



tips for

coping with mental health crises and emergencies

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Fortunately, we can take steps to help control mental health crises and emergencies.

Symptoms of a mental illnesses can be better or worse at times. This happens when people are doing their best to manage their illness, too. Experiencing worsening symptoms for a short period of time is a normal part of the recovery process. Sometimes we need outside help when symptoms become worse. Some people may also need urgent emergency help if they're at risk of hurting themselves or others. Fortunately, we can take steps to help control mental health crises and emergencies.

What can I do about it? Prevention and preparation

The best way to handle a crisis or emergency is to prevent it in the first place. Prevention might include:

- Following your individual treatment plan
- Monitoring your symptoms for any changes
- Learning stress-management and problem-solving skills that work for you
- Planning ahead for stressful events you know are coming
- Maintaining a balanced, healthy lifestyle

 Going to your doctor or mental health professional as soon as you notice a change in the way you feel

Unfortunately, working to prevent your symptoms from getting worse or coming back doesn't guarantee that you'll never feel unwell. So it's important to think about what you want to do if you start to feel unwell again. Then you can take action right away and help control the crisis or emergency. Your action plan also tells others what to do if you can't express your needs and wishes to them.

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when should i get immediate help?

These are situations when you need immediate help:

- ☐ Thinking about ending your life or trying to end your life
- Experiencing sensations that aren't real and/or beliefs that can't possibly be true
- ☐ Making choices that put you in serious danger
- □ Becoming unable to care for yourself, and it's putting you at risk of serious harm
- □ Experiencing medication problems like serious side effects
- □ Experiencing an alcohol or any other drug overdose
- ☐ Taking a dangerous combination of substances (like antianxiety medication and alcohol)

If you or a loved one experiences these signs, see your doctor right way, or call 911 or go to the nearest emergency room. If you call 911, don't leave anyone alone before emergency responders arrive. Wait until emergency responders say you can leave.

An action plan might be a formal agreement you sign with your health care provider, or it might be an informal plan between you and your loved ones. It might include:

- Signs that show you aren't feeling well
- At what point you want outside help: As soon as you notice warning signs? When you can no longer manage symptoms on your own?
- Where to go for help or who to contact in an emergency situation
- What treatments you'd prefer
- A list of your current medications and any other treatments (including alternative treatments)
- Contact information for your health professional, the nearest emergency room, and contact information for the loved ones you want notified

An action plan may also include steps your loved ones agree to take. For example, a loved one may contact your doctor or mental health provider, inform your employer that you aren't well and help keep everything in order (such as rent or bill payments) if you need to stay in hospital. Whether your action plan is a formal agreement or an informal plan among loved ones, it's best to put everything in writing so everyone knows what they need to do.

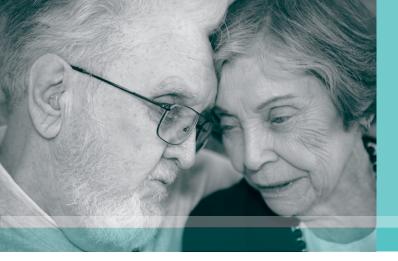
You might not want to think about feeling unwell when you're feeling well, but planning ahead may actually help you feel better. Many people who recover from a mental illness worry about what will happen if their symptoms come back (a relapse) or become worse. An action plan may reduce some of the worry because you know that you have a back-up plan if you need it.

If your plan or agreement involves the care of your children, access to your financial information or other important matters, it's best to talk with a lawyer about your options.

Action

If you are having a mental health crisis or emergency, don't wait for things to get worse. If you have an action plan, follow the steps in the plan. If you don't have an action plan, follow the steps below:

• Reach out to a friend or family member. If you aren't sure that you need help or aren't comfortable talking to a professional about the signs you've noticed, talk to a loved one. If you trust them, ask them to make the call for outside help. Friends and family are often the first to notice when you're not feeling well. They can help you connect with mental health services, let your doctor or mental health provider know what changes they've noticed and help you navigate the mental health system. They can help you feel hopeful, able and confident, which are all important in recovery.



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- Contact your doctor or mental health provider. If you're experiencing a lot of warning signs and feel like you're nearing a crisis, or if you're already experiencing a crisis, contact your doctor or mental health provider. They will know what to do to get you the help you need.
- Contact your local crisis centre. They are trained to help people experiencing a crisis and can connect you with local services, including emergency mental health services. In BC, call 310-6789 (do not add 604, 778 or 250 before the number) to talk to someone without a wait or busy signal. They're available 24 hours a day. See the "Where do I go from here?" section of this sheet for more helpful phone numbers.
- Go to the nearest emergency room or call 911. If you are afraid of hurting yourself or someone else, or if no other options are available, go to the nearest emergency room or call 911.

Reflection

After a crisis or emergency, take another look at your action plan. Were there new warning signs or an unexpected trigger? What worked or didn't work for you in the course of getting help? Consider this information and use it to improve any parts of your plan that weren't successful.

the mental health act

The Mental Health Act is the law that describes what happens if someone living with a mental illness needs treatment and protection. There are two different ways to get help under the Mental Health Act: voluntary admission and involuntary admission.

Voluntary admission means that you choose to go to a hospital or other treatment centre, and can choose to leave treatment.

Involuntary admission means that you don't choose to receive treatment or can't legally agree to the treatment. A doctor, the police or a judge can admit you to a hospital or other treatment centre on the grounds that:

- ☐ You are living with a mental illnesss, which is seriously affecting the way you live
- ☐ You need treatment
- ☐ This treatment is urgent because you're at risk or seriously harming yourself or others
- ☐ You can't be admitted to treatment voluntarily (you refuse treatment, for example)

You can be involuntarily admitted to treatment for 48 hours based on a doctor's exam. During that time, a second doctor examines you and decided if you can be released or if you need more treatment.

For more on the Mental Health Act and how it works, see the Guide to the Mental Health. It's online at www.health.gov.bc.ca under "Reports and Publications."

Involuntarily admitting someone may be necessary in some situations, but it can be very traumatizing and stressful for everyone. And it can be complicated. There may be resources in your community that can help before involuntary admission is necessary. See the 'Where do I go from here?' section of this sheet for more on community resources.

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where do I go from here?

IN AN EMERGENCY or CRISIS:

Call 911, go to the nearest emergency room or follow the emergency instructions provided by your doctor, mental health professional or care team. If your community has a mental health car, you can call 911 to request it.

1-800-SUICIDE

Call 1-800-SUICIDE (1-800-784-2433) to get help right away, any time of day or night. It's a free call.

Your Local Crisis Line

If you are in distress, call 310-6789 (do not add 604, 778 or 250 before the number) 24 hours a day to connect to a BC crisis line, without a wait or busy signal. The crisis lines linked in through 310-6789 have received advanced training in mental health issues and services by members of the BC Partners for Mental Health and Addictions Information.

Kid's Help Phone

For children and youth aged 5 to 20. Call 1-800-668-6868 to speak to a professional counsellor, 24 hours a day. It's free, confidential, anonymous and available across Canada. They can also refer you to local services and resources. Kid's Help Phone is available in English and French.

IN A NON-EMERGENCY:

Your Local Crisis Line

Crisis lines aren't only for people in crisis. You can call for information on local services or if you just need someone to talk to. See the number in the previous section.

BC Partners for Mental Health and Addictions Information

Visit www.heretohelp.bc.ca for our Managing Mental Illnesses series, more info sheets and personal stories about mental illnesses. The Managing Mental Illnesses series is full of information, including templates for creating your action plan and tips for avoiding crisis and emergencies. You can also find the "Tips For...Dealing with Alcohol or Other Drug Overdose (OD) Situations" info sheet.



Resources available in many languages: *For each service below, if English is not your first language, say the name of your preferred language in English to be connected to an interpreter. More than 100 languages are available.

HealthLink BC

Call 811 or visit www.healthlinkbc.ca to access free, non-emergency health information for anyone in your family, including mental health information. Through 811, you can also speak to a registered nurse about symptoms you're worried about, or talk with a pharmacist about medication questions.

BC Alcohol and Drug Information and Referral Service

Call 1-800-663-1441 (or 604-660-9382 in Greater Vancouver) to talk to someone about substance use. They can also connect you with local substance use resources. It's available 24 hours a day.

This fact sheet was written by the Canadian Mental Health Association's BC Division. The references for this fact sheet come from reputable government or academic sources and research studies. Please contact us if you would like the footnotes for this fact sheet. Fact sheets have been vetted by clinicians where appropriate.

