When to get help

How long, how severe, and can she still function. Not a diagnosis.

Treasured Vessels Girls' Centre
Walukuba-Masese Road, Jinja, Uganda
treasuredvesselsuganda.org

FOUR STAGES

Ordinary stress

WHAT IT LOOKS LIKE
Alert, worried, sleeping badly for a few days after something hard.

WHAT HELPS
Routine, rest, someone to talk to. It ends when the demand ends.

Prolonged distress

WHAT IT LOOKS LIKE
Weeks rather than days. Withdrawing, tearful, losing interest in what she used to like.

WHAT HELPS
Stay close. Keep her included. Ask the direct question. Watch the trend.

Needs professional assessment

WHAT IT LOOKS LIKE
Cannot function. Not washing, eating or caring for her child. Fear dominates the day.

WHAT HELPS
A qualified counsellor or a health facility. Not an amateur version of one.

Urgent risk

WHAT IT LOOKS LIKE
Self-harm, talk of not wanting to be alive, or a sudden lift after a long despair.

WHAT HELPS
Same day. Do not leave her alone. Use the numbers below.

EIGHT SIGNS IT NEEDS A PROFESSIONAL

- **Hopelessness that persists.** Weeks of believing nothing will change.
- **Withdrawal from everything.** What she used to like, not only what she must do.
- **Sleep that will not come right.** Weeks without it, or sleeping most of the day.
- **Unable to function.** Washing, eating, caring for her child, getting through a day.
- **Fear that dominates.** Panic, not leaving the house, a body always braced.
- **Not eating, or losing weight** with no physical cause anyone can find.
- **Alcohol or drugs appearing** where they were not there before.
- **A sudden lift after long despair.** Things given away, affairs put in order.

IF SHE IS AT RISK RIGHT NOW

Do not leave her alone. Ask directly: are you thinking about ending your life? Asking does not put the idea in anyone's head.

Mental Health Uganda 0800 21 21 21 Monday to Friday, 8:30am to 5:00pm. Confidential counsellors and referral.

Anyone under 18: Uganda Child Helpline 116 Free from any network, 24 hours.

If she has harmed herself or taken something, go to a health facility now and say what has happened. Outside helpline hours, go to a facility and ask for the mental health worker.

Photocopy freely. Not a diagnostic tool.

Being useful without being a counsellor

For the person who will be in the first conversation.

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Do

- Ask one open question and then be quiet. The silence is the part that works.
- Say plainly that you have noticed, without naming a cause or a diagnosis.
- Keep her included in the ordinary things. Isolation makes all of this worse.
- Protect the routine: a reason to be somewhere, work for her hands, other women nearby.
- Ask about safety directly when the signs on page one are present.
- Offer to go with her, and pay the fare if that is the obstacle.
- Follow up on an agreed day, in a way she has chosen as safe.

Do not

- Ask her to talk through a traumatic event. Without training that can make her worse.
- Diagnose. Not in conversation, not in a report, not in a funding application.
- Tell her to pray harder. To someone who cannot get out of bed it lands as an accusation.
- Promise it will pass, or compare it to something you went through.
- Repeat what she tells you to colleagues, family or her church.
- Wait and watch when there is talk of not wanting to be alive.
- Withdraw because she said she is fine. Many people say no several times first.

WHERE THE LINE IS

Supportive contact is not counselling. You are not treating anything. Trauma work is delivered by trained counsellors, and an amateur version of it can do harm.

It is not an assessment either. Recognising the signs on page one tells you to refer. It does not tell you what is wrong.

Prayer and friendship are real, and they are not a substitute. A community that keeps including her is one of the few things that reliably protects people. Where there is risk to her life, spiritual support and clinical care are not alternatives to choose between.

What she tells you is hers. You do not pass it on without her agreement, except where a child is at risk or someone is in immediate danger, and then you say who you are telling before you do it.

WHAT TREASURED VESSELS CAN AND CANNOT DO

We do not employ clinicians. No psychiatrist, no psychologist, no clinical counsellor. We will not describe what we do as counselling, because it is not.

What we do: notice early, sit with it without flinching, keep her in the room, and refer with her consent, including the fare, the company on the journey and the follow up that finds out whether she arrived.

If you provide counselling, psychological or psychiatric services in or near Jinja, we would rather verify you than guess. Please write to treasuredvesselsug@gmail.com.

Nothing in this handout is a diagnosis, and reading a list of symptoms is not an assessment.