



## A guide to emotional overwhelm and substance use

When feelings have been pushed down for a long time, they can arrive all at once. Pain, anger, sadness, fear, shame or loneliness may feel difficult to name, tolerate or share. Some people then reach for alcohol or drugs because they seem to turn the volume down, make sleep possible, create a short break, or give feelings somewhere to go. That response can make sense in the moment, while still bringing consequences that are frightening or exhausting. Understanding what a substance is doing for you can open up choices without blaming you for having needed relief.

### The messages many men learn

Messages such as “don’t cry”, “man up” or “stay strong” can teach a person to hide distress, keep functioning and avoid asking for help. These messages may come from family, school, sport, work, friendships or painful experiences. They are not the only influence on how someone copes, and men do not all experience emotions in the same way. But if showing vulnerability has felt unsafe, silence can become a survival strategy. Over time, the feelings do not necessarily disappear; they may show up as irritability, numbness, tension, withdrawal, racing thoughts, poor sleep or a sense of being close to the edge.

### Emotions are information, not instructions

An emotion can signal that something matters: anger may point to a boundary or injustice; sadness may carry loss; fear may be trying to protect you; shame may grow around rejection or criticism. The feeling deserves attention, but it does not have to decide what happens next. Feeling angry does not make someone dangerous, and feeling overwhelmed does not mean they are weak. There is room to notice an emotion, find out what it is connected to and choose a response that protects you and the people around you.

There is nothing weak about having feelings. Strength can include noticing what is happening, asking for support and learning safer ways to cope. You do not have to carry it all alone.

This guide is for reflection and support. It is not a diagnosis and does not assume that everyone who uses alcohol or drugs is trying to avoid emotions.

## When a substance seems to help

A substance can bring a fast change in how a person feels. Alcohol may loosen inhibition or briefly quiet worry; some drugs can create energy, distance, relief or a sense of belonging. The effect depends on the substance, the person, the situation and their health. If a person has been overwhelmed, lonely, frightened or under pressure, that short-term shift can feel valuable. This does not mean they are choosing harm or that they do not care about people around them. It may mean that the coping option available in that moment feels more reachable than talking, resting or asking for help.

### The relief-and-cost cycle

Relief can be followed by a rebound. The original emotion may still be there, alongside disrupted sleep, low mood, anxiety, conflict, money worries, physical symptoms or regret. A person may then use again to manage those new feelings. Repetition can make the substance feel increasingly central: planning around it, using more than intended, struggling to cut down, hiding use, or continuing despite problems. These patterns are signs to seek support, not a reason to label yourself a failure. Dependence and withdrawal can also affect what is safe to do next, so stopping is not always as simple as deciding to stop.

### A gentle check-in: what is happening before, during and after?

You might notice a pattern by writing a few words after an episode or urge. Keep it brief; this is information, not a test. If writing feels difficult, use a voice note, a symbol, or tell someone you trust.

|                 |                                                                                            |
|-----------------|--------------------------------------------------------------------------------------------|
| Before          | What was happening? Who was there? What was I feeling in my body?                          |
| The urge        | What did I hope the substance would change or help me get through?                         |
| After           | What changed for a short time? What happened later that day or the next morning?           |
| Need underneath | Was I looking for relief, sleep, confidence, connection, escape, energy or something else? |

### Look for the function, not just the amount

It may help to notice whether use is connected to particular people, places, times of day, memories, conflict, pain, boredom, celebrations or the end of a demanding day. Sometimes a pattern is driven by a need for sleep or relief from physical discomfort; sometimes it is linked with grief, trauma, isolation, pressure or a wish to feel more at ease with other people. There can be several reasons at once, and the reasons can change. You do not need to prove that your emotions caused the substance use in order to deserve help.

### Notice the effect on the life you want

Rather than judge yourself by a label, consider whether use is taking you closer to or further from the things that matter to you: feeling present with people, being safe at work or home, keeping money for essentials, caring for your health, or having a choice about what happens next. Difficulty cutting down, cravings, secrecy, missed responsibilities, arguments or continuing despite harm are all reasonable reasons to talk to someone. You can ask for help even if you are not ready to stop completely.

## Finding another way through the feeling

There is no single replacement that will fit every person or every moment. The aim is not to force yourself to “calm down” or to pretend the problem is small. It is to create a little space between the feeling and the next action, then choose one step that is safer or more supportive. If a strategy does not help, that is useful information; it is not proof that you have failed.

### A four-step pause

- 1. Make the next few minutes safer. If possible, move away from a risky situation, put distance between yourself and anything you might use impulsively, and contact a trusted person. If you are intoxicated, do not drive or operate machinery.
- 2. Name what is here. Try one or two words: “angry and embarrassed”, “scared and tired”, “numb”, or “I’m not sure”. If naming an emotion feels too much, describe the body instead: tight chest, clenched jaw, hot face, restless legs, heavy limbs.
- 3. Lower the intensity by one notch. You might step outside to a safer place, drink water, hold something cool, slow your exhale, walk, stretch, shower, listen to one familiar piece of music, or sit near another person. Choose what is comfortable for your body and circumstances.
- 4. Decide what the feeling is asking for. Do you need safety, a boundary, a break, information, food, sleep, company, practical help or time? Choose one small action that answers part of that need.

### Let the feeling move without harming yourself or someone else

Anger can be intense, especially when it is covering fear, hurt or powerlessness. It is possible to take anger seriously without acting it out. Pause the conversation, step into a different room if safe, unclench your hands, put both feet on the floor, or write what you wish you could say before deciding what to share. If you are worried you might hurt someone, create distance and contact urgent support. If another person is at risk now, call 999.

### Talking does not need to start with a perfect explanation

Some people find it easier to talk while walking, doing an activity, or sending a message first. You could say: “I don’t need you to fix this yet. Can you listen for ten minutes?” or “I’m getting overwhelmed; I need a pause and I will come back to this.” A therapist, GP or substance-use worker can help you explore how past experiences, current stress and substance use connect for you, at a pace that feels manageable. You can ask about confidentiality and what information may be shared before discussing details.

### A pause is not the same as ignoring the problem

When the immediate intensity has eased, return to what needs attention: a boundary, a practical problem, a safer situation or support. Taking a pause can make a response safer without asking you to accept something harmful.

If someone is with you, make one clear request: “Please stay nearby,” “Listen before offering ideas,” or “I need a pause; let’s talk at 7pm.” If you are supporting someone else, ask what helps, stay calm and avoid shaming or cornering them.

My next small experiment

When I notice \_\_\_\_\_, I will try \_\_\_\_\_ for ten minutes and then check what I need next. The person I could contact is \_\_\_\_\_.

Keep the plan realistic. “Tell one person” or “book one appointment” may be more useful than promising yourself you will change everything overnight.

## Support, safety and next steps

You can ask for help before things reach crisis point. A GP can talk through mood, sleep, physical health, alcohol or drug use and treatment options. Local drug and alcohol services can offer assessment and a plan tailored to you; NHS services and charities provide support, and you can ask what the first appointment involves. If you prefer, write down what you want to say, take someone with you, or start by asking a practical question.

### Support can be joined-up

The right plan may include more than one kind of help: emotional support to understand what has built up, treatment or advice about alcohol or drugs, and practical help with sleep, health, work, money or relationships. You can tell a service what matters most to you and ask about the choices available. If you are not ready to stop, you can still ask about safety and what a first step could look like. A plan can change as your needs change.

### Important safety points

- Alcohol: if you drink heavily or regularly, or get shaking, sweating, nausea, anxiety or other withdrawal symptoms when you stop, speak to a GP or alcohol service before cutting down or stopping. Alcohol withdrawal can be dangerous and may need medical support.
- Drugs or alcohol emergency: if someone is unconscious, having difficulty breathing, having a seizure, or you are seriously worried about their immediate safety, call 999. Tell the ambulance crew what you know about what they have taken.
- Urgent mental health support in England: call NHS 111 and select the mental health option. If there is immediate danger or a life-threatening emergency, call 999 or go to A&E.; Elsewhere in the UK, use the local NHS urgent mental health service.

### Ways to reach support in the UK

- GP or NHS alcohol support: ask your GP, or use the NHS finder for local alcohol addiction services: [nhs.uk/nhs-services/find-alcohol-addiction-support-services](https://nhs.uk/nhs-services/find-alcohol-addiction-support-services).
- NHS drug treatment information: [nhs.uk/live-well/addiction-support/drug-addiction-getting-help](https://nhs.uk/live-well/addiction-support/drug-addiction-getting-help).
- FRANK: confidential drug information and support on 0300 123 6600; text 82111. Website: [talktofrank.com/contact-frank](https://talktofrank.com/contact-frank).
- Samaritans: if you need someone to listen, call free on 116 123 at any time. Website: [samaritans.org](https://www.samaritans.org).
- NHS urgent mental health help: [nhs.uk/nhs-services/mental-health-services/where-to-get-urgent-help-for-mental-health](https://nhs.uk/nhs-services/mental-health-services/where-to-get-urgent-help-for-mental-health).

### Making the first contact easier

Before you contact a service, you might note what you use, roughly how often, what worries you most, any physical or mental health concerns, and what you would like to change. You do not need perfect records. If speaking feels hard, show someone this guide or write: "I'm using alcohol or drugs to cope with feelings that feel too big. I want to talk about my options." Ask what is confidential, what the service can offer and whether you can bring a supporter. Local services can explain their process and help you decide on a realistic next step.

### While you are waiting for support

If you can, tell one trusted person that you are trying to get help, agree how they can check in, and make a simple plan for difficult times of day. Keep emergency numbers available. Avoid making major decisions while intoxicated. If you are worried about your immediate safety, move towards another person or a safer place and use urgent support. A setback does not erase what you have learned; it can show which situations need more support or a different plan.