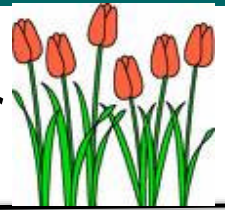




Welcome to our Spring 2010 Newsletter



contents

Editor's Welcome:

Spring is in the air and like many a Highland sheep your editor is about to 'lamb' next month. This means this is the last newsletter edited by my fair hands for a good few months. Fear not - we have a most capable team here at HUG HQ and with Linda coming to cover for my maternity break the newsletter will continue in my absence!

HUG is the Highland Users Group, a network of people with experience of mental health problems from across the Highlands.

Membership of HUG is open to anyone who has experienced a mental health problem. Just write, phone, or email us and leave your name and address - it's as easy as that!

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Highland House
20 Longman Road
Inverness
IV1 1RY
Tel: (01463) 723560
E-mail: hug@hccf.org.uk
Website: www.hug.uk.net

Note: The views expressed by our members in this newsletter are not necessarily the views of HUG.

Deadline for Summer 2010 Newsletter submissions: 25th of June 2010

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Feature on HUG Member – Catriona Naughton

What is your name and tell us something funny about yourself?

Hello. My name is Catriona but my friends call me Cat. My Latin name is Solanum tuberosum. Yes, for all you gardeners out there, I was named after a variety of potato. *My Dad always told me that and it was a well known joke in our family. Bizarrely there are uncanny similarities between me and my potato alter ego, as follows....*

Tuber Skin white with blue eyes. Flesh cream/pale yellow. Oval.	Heritage flavour with show bench looks. Excellent flavour. Cooks well.
Blight Resistance Low Scab Resistance Moderate	(For all you doubters out there see http://www.shrubs.co.uk/potato-catriona-taster-pack-tr-14986-p.asp) I rest my case.
Roasting/Frying No General Purpose Yes	That's me, that is.
Boiling/Salad No Eelworm (PCN) Resistance Susceptible	

How long have you been involved in HUG?

I have only been involved with HUG for about 5 months but really like my time with them as a volunteer. I try to do my bit in the office on volunteer Mondays and have become a new best friend of the photocopier and the franking machine. I'm interested in the Communications Project work that HUG does, particularly in trying to reduce stigma and educating the public about mental health issues. I've been lucky enough to take part in education sessions to school pupils and trainee mental health nurses. It's really rewarding although a bit scary especially when you are talking about your own mental health experiences to a group of 'cool' teenagers. Don't think I have bombed yet but there's always time.....

Do you have an idol, and if so, who?

In real life it would have to be my Dad. He came from very humble beginnings on a small croft in the middle of nowhere in Sutherland. He and his brothers and sisters were taught in a side school with only slate and chalk. But he worked hard and made it to Aberdeen University and went on to have a very successful career. He never forgot his roots and remained totally down to earth a loving, generous man with a great sense of humour, lots of terrible jokes and stories and a great love of fishing (never quite got my head around that!)

In celebrity life I am a huge fan of the Hairy Bikers. Always cheer me up and bring a smile to my face. I'm going to see them in Aberdeen at the end of the month with my best friend. Yes, sad but true. We are middle aged Hairy B groupies. Roll on 26th March, bring it on.....

Do you like animals?

Sure do. Amazingly enough I am a Cat that likes cats. I didn't use to but I inherited/adopted an old lady cat a few years ago when her owner was going to live abroad. She had a brilliant character. A right old bag that did everything on her own terms and occasionally give us a reminder about who was boss. Even my big brother felt her wrath when he made the almost fatal error of accidentally sitting on her tail.

Are you frightened of anything?

Oh yes. I am a total girl and hate spiders. However I now have my own special spider removing technique which involves marigold washing up gloves, a glass tumbler and a piece of cardboard. Oh and a bit of shrieking. I'll leave it up to you to imagine the hideous scene.....

Graham's Update

Hello everyone,

About this time of the year I should be sitting down to tell you all about what we have been doing in the 'Speaking Out' part of HUG over the last few months.

Unfortunately I have almost nothing to tell you. This is because I have spent the last two and half months in New Craigs Hospital and still have a few weeks to go before I am let out to freedom again.

What I can tell you about is my stay here.

Where do I start? I suppose when I gain some distance from all of this I will look back and shudder on the last wee while.

For all sorts of reasons I stopped taking my medication last November. I am still inclined to think that stopping medication exposed me to the reality of who I really am but nowadays I do tend to listen to all those people around me who insist that not taking medication made me ill.

It's very confusing at the moment, trying to decide whether I have been ill or not and whether I really have schizophrenia, still I know many of us struggle with our diagnoses and making meaning out of these experiences is a hard and difficult task.

Anyway I was admitted some time in December right after a meeting with Sheena (my boss) at which I promised to do all sorts of work in HUG. Little did I know that two and half months later I would still be languishing here!

I have been writing poetry ever since I was admitted and now have a collection of 130 badly written poems that I hope to use in our training.

Here is one of the poems I wrote about a month into my stay:

SILVER STEEL

I dream of ripping my skin,
The red blood trickling,
Staining the whiteness.

My sorry badness
Evaporating as it touches the earth.
My heart learning to forgive me.

The pain frightens me.
The loss grieves me.
But I can't escape it.

I dream of stillness
And peace and never knowing
What I could have been.

It's a pretty sad poem and is all about how I have been feeling recently, basically I decided that I was evil and needed to get rid of that evil by 'purifying' myself. Unfortunately that 'purification' meant that I would probably have died in a horrible way.

This meant that I was put on a section the day after I was admitted and spent seven or eight weeks on constant observation. 'Constant obs' may be carried out by caring and sensitive nurses but being in sight of nurses 24 hours a day, having to leave the toilet door open and the lights on at night is an exhausting, intrusive and at times humiliating experience.

I was so pleased at how pleasant the nurses, who were sat at my door, tried to be, and, although I have loads and loads to say about my experience one thing is certain: I am now well and undamaged and very much alive, which I wouldn't have been if they hadn't done it to me. So, thanks nurses, for looking after me, even if I do still feel like grumping about it.

I went from a short term detention certificate to a compulsory treatment

order. My valiant attempts to represent myself at the tribunal resulted in a remarkably short tribunal! My section turned into a six month one as a result.

At least the people making the decisions had the grace to apologise to me for not believing in the need to do as I asked them!

Despite what many of us think, there is quite a lot of activity on offer in the hospital. However there is little to do if you are confined to the ward. That's sort of what my second poem is about:

AFTERNOON SUN

Blue sky,
Streaked with hazy clouds.
The golden light shines beyond the
shadows.

The sea is still.
The city buildings catch the dying sun.
I watch it all through the window.

My world is mainly silent;
I sleep, I stare, I watch, I eat.
Nothing else much.

What stands out over those weeks of doing nothing? The food became a highlight; considering the reputation of hospital food and the number of baked potatoes I have eaten I am surprised at this!

I had lots of amazing visits from friends and HUG members which always made me really glad that I still had that connection with the outside world and those that I care deeply for. There have been some wonderful patients who give life to the ward, we have had quiz nights, takeaway meals, film nights, leaving parties, all organised by patients.

For a time the smoke room, which can be so hostile as a sitting place, was wonderful. It was festooned in lights

and balloons and posters. I just liked sitting in it with everyone even though I don't smoke.

Considering my psychiatrist made it a habit to renew my observation levels every day and consistently insisted on removing my freedom I still like him; he has done his very best to look after me according to his beliefs, and the nurses and other staff have, on the whole, been wonderful.

I cannot pin point what it is that my primary nurse has done for me but what could have been abysmal became liveable. I think I felt respected and appreciated and supported and cared for. I had someone to talk to, to turn to and to listen to.

Some of the patients have hated their stay here and have left in high dudgeon but it seems that, despite what we have been going through, most of us feel a profound sense of gratitude to the staff around us. Considering I was accusing the staff of trying to murder me when they insisted on my depot a few weeks ago a lot must have changed since then to make me say this now!

Here is a poem I wrote shortly after I was allowed off the ward for fifteen minutes at a time. It is meant to show how wonderful what seem to be small things can be:

WALKING

It's snowing again;
Wet, full, flakes watering the ground
With their sodden fall.

Now the wind is fresh,
A sharp clean bite
That chills the ears and waters the eyes.

The sky glowers with a yellow tinge.
The city lights up the dark clouds.
The black trees rustle in the dark.

I am in the snow,
I am walking in the snow,
Round and round the hospital.

Walking in the wind and cold,
Talking to my friend;
"Those bastards with their fifteen
minutes!"

But those minutes are the fresh break
From the stale circle of the ward,
The cloying routine.

They are freedom,
Fifteen sweet clumps of wonderful
freedom!

I am now in the wonderful position of having just been to a ward round where I have been allowed to leave the ward for an hour whenever I want. On Saturday I will be allowed home for the day.

The feeling is fantastic! I'll be able to go into town soon, see my friends, go to the bank, buy some much needed shoelaces. It's all very good.

I am looking forward to the next few weeks of increasing freedom and then the chance to live at home again. I'll still be on my compulsory treatment order and forced to take my depot but I will feel so much freer than I do now.

In my absence so much has been happening. Unfortunately, being off sick meant that we missed out a round of HUG meetings but almost everything else has carried on as normal.

This is thanks to Heidi and the HUG volunteers. It took a time; but now we can all realise that HUG is not dependant on me, as some people thought, but is, in reality, a collection of amazing people with a huge diversity of experience and talent. We have so

much to give and to do; it feels so exciting.

I really hope that I am back in time to say goodbye to Heidi before she goes on maternity leave, to give a proper welcome to Emma who is back from her maternity leave and a great big Hello to Linda our new worker who I haven't met yet.

I'll finish with a huge thank you to HUG and HCCF for their support whilst I have been away and to my fellow patients and staff at New Craigs for making such a horrible time as tolerable as it could be.

Hopefully by the time you read this I will be well on my way to getting back into work and meeting you all again.

A last thought; there are all sorts of things that can be said about psychiatric hospitals that are negative and which would be justified but hospitals are different to the past times of abuse and they do help many of us and keep some of us alive who otherwise would have died.

Whilst I was a patient I met Steph, a fellow patient. She seemed such a lovely person, she just seemed to have this strong spirit. Whilst I was a patient she killed herself. It made me very sad. The day she died we helped another patient who was walking home in tears, in the night, in the bitter frost because she no longer wanted to be in hospital.

Lets hope that the efforts of HUG and the people who help us can one day lead to the sort of service where everyone can find hope in the saddest of times and not despair and, one day, mean that we have services that everyone, whatever their history, can feel safe in and use for, what is hopefully, a brief time before they can face the world again.

Emma's Update

Hi folks, well this is me just back off maternity leave and hoping I still have some brain cells functioning properly!

It is great to come back to some brand new and exciting projects that form part of our new three-year grant from Comic Relief around 'The arts and mental health'.

The two projects this year (that I will be working on) are a new interactive drama project and a photography project:

Interactive Drama Project

In our bid to Comic Relief we said we would:

"Deliver an **interactive drama project** exploring mental health issues with young people in a powerful, creative and dynamic way, following model and success of 'STIGMA' play."

The idea is to build upon the success of the 'STIGMA' play by working with Eden Court to create a new piece of live theatre which will be a central part of our educational and awareness raising work with young people in schools. We will deliver the project in September/October in 8 or 9 secondary schools, reaching about 500 pupils.

We are right at the start of this project and the first stage is about deciding which subject matter we should explore and what age group we should target this at. To help decide this I am spending most of March doing focus groups with young people in schools to see what mental health issues they think it is important we look at. Then we will work with Eden Court Outreach, HUG members and professionals to develop a script outline.

If anyone is interested in being involved please do call or email me – I would love to hear from you.

Photography Project

This is the second new project for this coming year under Comic Relief. Again we are right at the start of this project which we see HUG developing new anti-stigma postcards expressing images and messages of recovery, diverse communities and mental health.

If anyone would like to be part of a group developing this project, or has any ideas or suggestions then please do get in touch.

That's me for now.

Hugs

Emma

Titanic

Misguided frustration,
Anger and blame.
Torment, torture.
Hatred and shame.
Turmoil, anguish,
Shredded within,
Guilt and sorrow
Because of that sin.
Illusion, confusion,
Sadness and pain.
Depression, reflection,
Suicide, Insane.
Trampled on, Beaten,
Battered and bruised.
The tip of the iceberg
If you've been abused.

Margaret

Heidi's Update

Not got too much to say this edition except to let you hear from our HUG volunteers (page 8).

I have been very busy working with HUG volunteers a lot this last few months to cover Graham's Speaking Out work. We have kept everything running ship-shape in regards to running creative writing and Friday forum groups so far. They have been fantastic!

Mental Health Training

Our mental health training has been going well. In January we had some important training with trainee mental health nurses, GPs and occupational therapists.

HUG members and the individuals who attended have given us excellent feedback. We received a particularly warm welcome from the trainee MH nurses. We had a whole day with them and members shared a variety of testimony as well as showing our DVD resources.

Awareness Training in Schools

We have done some awareness sessions in schools. Dornoch Academy in November/December and Inverness Royal Academy January to March this year.

The young people have asked some fascinating and insightful questions, showing how interested they really are in mental health and illness.

HUG members who shared testimony at these sessions have given me great feedback; I can really see their confidence in speaking out to young people really improving as well as their working together to support one another.

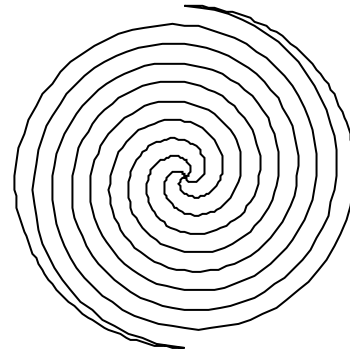
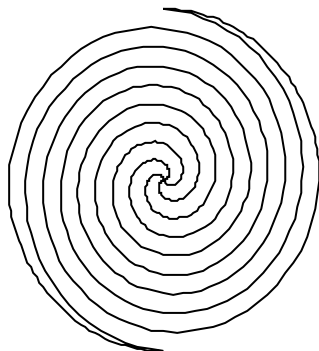
Maternity Leave

As we have mentioned here and there in this newsletter, I am off to have a baby in April. My maternity cover Linda Odd will have my HUG land line and mobile number if you need to get in touch about any DVD or creative projects running later this year.

HELP!

LIFE'S FULL OF TURMOIL, Hurricanes
Whirl-pools, Whirl-
winds, -----
Spinning round, round
like a washing
machine, can't
be paused,
can't be
Stopped!

Debbie



HUG Interim Management Group

I would like to introduce the HUG Interim Management Group. We are five at the moment - Chris Evans, Judith Glaister, me (Keir Hardie), Marja-Liisa Puolakka and Fiona Sutherland. We might add more people later. I'm the leader at the moment but we all have an equal say and I couldn't do it without the others who are wonderful.

We've been going since late January and what we are doing is taking forward the plan to make HUG more independent, where it will have a management group, elected from the wider membership of HUG.

In order for the management group to have a fair chance of working well without too many teething troubles the IMG aim to be able to give them a clear idea of what they are doing before we hand over - therefore our main job is to work out exactly how they will manage the work of HUG, and to start doing it.

There are some associated tasks we have started doing – we will have to have a constitution, so we have started work on that, and also we felt that in order to manage the work of HUG effectively we have to have a good idea of what that work is, so we have started doing a mapping exercise so we can have a better idea of everything that HUG does.

We also have to work out an agreement on paper with the board of HCCF so that our powers don't overlap.

If you've any thoughts or ideas that you think might be relevant to what we're doing, or any concerns, we'd love to hear from you and we will reply as soon as we can.

You can email us on hugimg@googlegroups.com or you can write to us at the HUG address. We are in the service of people in the Highlands with experience of mental health problems, but we're happy to hear from anyone else with an interest too.

Keir Hardie

National & International HUG Involvement

'see me' update

This year will see another photo competition and the introduction of a new creative writing competition. There is a new "wall of support" on the website. A regional meeting will be held in Highland, probably Inverness sometime in September. Perhaps Highland Council and NHS Highland might sign the see me pledge then.

VOX have a new website up and running. Feedback would be very welcome. Those of you who are members will have received a booklet about self directed support. I would appreciate hearing from anyone who has experience of pursuing this option in Highland. As an individual member of the VOX Board I would be keen to hear views on this whole concept.

New Craigs. A couple of items from the inpatient forum at present include trying to re-instate a Patients Council and looking at the patient information available in the wards.

EU Conference on Prevention of Depression and Suicide – Budapest December 2009.

We were asked to provide a service user perspective and comment on some of the papers being prepared for this event. This culminated in an invitation to actually attend the two day conference. I will give a fuller account of this in the next newsletter.

Scottish Government Review of the Suicide Prevention Strategy.

I have attended two meetings to date, with the final one planned for March 18th.

Participation in health 2020 vision.

This two day conference organised by the Scottish Health Council was held at Clydebank on the 16th and 17th of February. As Graham was unable to attend, I was asked to speak instead! He gave me a lot of help which I really appreciated, and "our" effort was very well received.

Chris Evans

News In Brief

Hearing Voices Peer Support Group – Inverness

A Hearing Voices Peer Support Group has recently started at Cairdeas Cottage, the drop-in centre at 5 Bank Street, Inverness. If you would like to know more about the group feel free to call Susan, Eileen or Karen on 01463 713928. The meetings are held on the first Saturday of each month in the mornings and on the third Wednesday of each month in the evenings. The dates for the next four months are:

Saturday, 10.30am to 12.30pm: 3 April, 1 May, 5 June, 3 July
Wednesday, 6.00pm to 7.30pm: 21 April, 19 May, 16 June, 21 July

'Your Call' Freephone Counselling Service

08088 01 03 62

'Your Call' is a free telephone counselling service which is open to people with a disability from all over Scotland. The 'Your Call' counsellors are all people with a disability themselves, providing them with an understanding of what it means to live as a disabled person in Scotland. The counsellors work as volunteers, and are trained to a professional standard in counselling.

The service takes calls to its appointment line from 11am until 3 pm Mondays to Thursdays. Calls are free from a home telephone, and from most mobile networks (including T-Mobile, Vodaphone, O2, 3, Orange and Virgin Mobile).

The number is withheld so it will not appear on the phone bill.

Counselling can help people who are trying to come to terms with painful events from their past, or who need support through a current crisis or change in lifestyle. It can also help people who are struggling to manage difficult feelings such as depression or anxiety, or who are seeking direction and meaning in their lives.

A counsellor will not judge, nor tell a person how to live their life. Instead he or she is trained to help explore a person's own situation and to support them to find their own way forward.

The 'Your Call' number is 08088 01 03 62, and the service is open to all people with a ~~disability in Scotland who are over the age~~ of 16, and their immediate family members.

Bowel Screening

Over 3,000 people are diagnosed with bowel cancer every year in Scotland. The good news is bowel screening reduces bowel cancer deaths and everyone between the ages of 50 and 74 will receive a test kit, by post, every two years. Take the test. You can do it at home – it's quick, easy to do and it could be a lifesaver. To find out more call the Helpline on 0800 0121 833 or visit www.bowelscreening.scot.nhs.uk

Eating Disorder Support Group – Inverness

An Eating Disorder support group meets on the first Wednesday of each month and is held at the Centre for Health Sciences next to Raigmore Hospital in Inverness. The meeting runs from 6.00pm to 8.00pm and is not only open to sufferers of eating disorders but to also their family and friends.

It is recognised that living with someone suffering from an eating disorder can be very stressful and upsetting and this support group is as much about them as the sufferers themselves. The meetings hope to provide a good opportunity to meet with others and share experiences and information, support each other and find productive ways to cope and maintain a positive outlook.

The group is currently facilitated by the NHS Eating Disorders Service but the hope is that it will be self running in the future with the backing of B-eat.

For further information, please contact

Hello Cruel World

I am writing this on my birthday. By the time you read this it won't be my birthday. That's how it goes. For a long time I've not been into celebrating my birthday, or Christmas for that matter. This is for various reasons. I'm all about today, as much as possible. This can have a downside, as I find it hard sometimes to make sure I take



care of things I need to take care of before it's too late, or a frantic dash. I do a lot of things at the last minute and I hate that. But it also means that most of the time I make sure things are okay for me here and now – I don't look

forward to stuff. And I really don't see what there is to look forward to when it comes to Christmas. This year I ended up being glad of the break, but that just showed that I'd been doing too much work, I should be able to deal with that myself without other people forcing my hand. But extra episodes of soaps I don't watch, shops

that are shut, everything disrupted... no thanks.

And as for birthdays, well... I love life too much to celebrate them. One year nearer the end, whoopee! Except it's not even that. Throughout my birthday I was twenty-four hours older than I was twenty-four hours earlier, the same as any other day. And as for presents, well... you don't get me any and I won't get you any, on our birthday or at Christmas, how about that? That's what suits me. Sometimes I buy my partner a present, or vice versa. Just not at Christmas or a birthday. I think it's nicer that way.

Anyway, the reason for all this is, I wanted to write this on my birthday, because I wanted to be doing some work on it, even though I didn't have to. I wanted to be acting like it wasn't my birthday, because a normal day is good enough for me. I did have to deal with having to say 'thank you!' many many times on Facebook to well-wishers, having foolishly started to reply to them all individually, but that's a lovely burden to have really. I later noticed my partner had clicked that she liked every single one of those greetings, there's no excuse for that, she is sad.

Also I thought, I can mention it being my birthday at the start, that will fill some space up before I get to the parable of the cheese puffs.

I like cheese puffs, the best, of course, are Wotsits, they do not identify as cheese puffs but they are, if it's not oppressive of me to say so. I think it's okay to do that, it's not as if they're people. As far as such trashy snacks go they're not bad, calorie-wise. But when I have something that is kind of reasonable, sometimes I can't help wishing it was better. Is this how it's going to be, Keir, I ask myself, or am I berating myself, are you going to settle for this? And so I seek out something better. I bought some WeightWatchers cheese puffs. Fewer calories. And I took them home and opened the multipack, and took a bag out. I opened the bag and tasted them. The taste was incredible – there wasn't any. I finished the bag – still nothing. I was amazed. It just wasn't right. It wasn't that they were a bit tasteless. They were extremely tasteless. What were they thinking, selling cheese puffs as tasteless as that?



Naturally, the next day, I wondered if it was me. Perhaps my judgement was compromised. Perhaps I had been in an unwholesome frame of mind, and was bound to be hypercritical of some very slightly tasteless but basically perfectly reasonable cheese puffs. So I tried another packet.

It was exactly the same.

But still, I wondered if it was me. Perhaps I was being unfair. Perhaps I had it in for these poor, basically acceptable cheese puffs. They never stood a chance. They couldn't be as bad as I thought, could they?

There was only one thing to do. Well, there was another, maybe, but we'll come to that.

I took the rest of them into the office to ask some other members of the team to taste them to see if they thought they were really as tasteless as I thought they were.

They did.

I was so relieved. It wasn't me. I was alright. They were as tasteless as all that.

I love my team.

But I would also love it if when cheese puff are as tasteless as all that I could have more faith in myself and my judgement and just accept that I'm right.

Maybe one day...

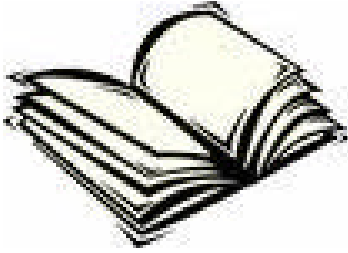
As I write I have plenty of Wotsits in the house. I haven't eaten any today, and I'm not tempted – I'm not hungry or peckish right now. I have some self-control. I really should have more faith in myself.

But what if I'm wrong?

Keir Hardie



Howling At The Moon At Moniack Mohr



Well, the howling did not happen this time, because there was no moon; otherwise HUG's January Creative Writing Weekend was every bit as enjoyable as ever.

There were nine of us, a good little group, with a couple of first-timers, plus our tutor friends Laura and John. Cynthia had once again done us proud with provisions, transport (-cheers Gordon!) and general good feelings of welcome.

Self-catering is a good way of team building, even with people like me who are not great cooks. I did my bit; I chopped the garlic and was a member of the committee that eventually managed to fire up the cooker! Part of the job was pulling Judith out of the oven, where she was checking if any gas was coming through.

The exercises we were given were varied and stimulating. I liked the ones that gave us a title or a first line with which to whatever we wanted. The variety of results was fascinating, from gentle humour to dark tragedy and deep contemplation. Laura and John gave everybody personal time, encouragement and guidance. We relaxed and enjoyed ourselves at the Saturday night "Literary Ceilidh"- as well as writers; some of us are gifted musicians and entertainers.

We have only one complaint about these events: they are too short. Many of us have a long way to travel on the Friday; on Saturday we are still unsettled; and on Sunday, when we are getting up to speed, it is over. Still we left in high spirits, feeling good about ourselves, and looking forward to the next one. Thanks, HUG, Moniack Mhór, and all concerned!

On the bus to Skye, a merry man of Lochend homed in on me, declared that he was "fu'...er, slightly inebriated", kept kissing my hand and telling everybody that I was a True Highlander. I came home a happy woman.

Marja-Lisa

"Sticks & Stones" People First Highland Conference

On Wednesday the 9th of December 2009 Graham took Joanne and Judith to the Boat of Garten Community Hall for the People First Highland Conference 'Sticks and Stones'.

The topic was Bullying and Harassment. There is a new Adult Support and Protection Act which says how you should be helped and who should give that help. In Highland there is a new group called Hate Free Highland who ask people to report bullying and other 'hate' crimes.

HUG members Joanne and Judith gave their testimonies to their experience of 'bullying and discrimination' in the context of their mental health problems. This proved

to show that bullying happens to others and is not, by any means, restricted to people with Learning Disabilities.

A panel made up of members from Social Work, Police, Victim Support and the Procurator Fiscal answered questions on three DVD clips of 'bullying' stories.

Although the above sounds rather depressing and upsetting there was a positive and encouraging aspect to the day. We were given a delicious lunch and afternoon tea and there was fun and relaxation at the end of the day leading to a full-blown party later that evening.

Santa Claus and his Helpers made an appearance and distributed gifts to the men and women of People First. Joanne and I received a beautiful box of chocolates for our contribution and it was a thoroughly enjoyable practical and informative day (I even got a kiss from Santa!!!)

Judith Glaister

Depression

Like a sudden stab of pain
In my heart or in my brain,
Like a great deluge of rain –
Depression.

Like a boulder on my chest,
Like a never-ending quest,
Stumbling onwards without rest –
Depression.

Like a night without an end,
Like a wound, which doesn't mend,
Like a life not lived but spent –
Depression.

Like a desert with no drink,
Like a shipwreck made to sink,
Like a tale, which doesn't link –
Depression.

Like a sparrow in a cage,
Like a silent inner rage,
Like a poor tormented sage –
Depression.

Elkie

Beauty On the Cheep!

I don't know about you but I feel Spring in the air. Ok I know it was -8° this morning but even so the days are getting longer and the bulbs are poking their heads through the ground and it's less than 6 weeks till Easter!

So how do you look and feel? Do you fancy a makeover? "Sure" I hear you say "but I can't afford it". Well perhaps you can! Inverness College Hair and Beauty department (tel number 01463 273273) are offering appointments throughout March, April and May for all sorts of beauty and hair treatments at vastly reduced prices. Facials, waxing, manicures and pedicures, eyelash and eyebrow tinting, electrotherapy, depilation (hair removal to you and me) massage and all sorts of other indulgent treatments are available at amazing prices all under £10 or free! Now what could be better than that?

Dates, available appointments treatments and prices are available on their Treatment Summary Sheet available from Inverness College or give them a ring to find out more. Hairdressing is also available. So we have no excuse!

Maybe I'll get my wee bit grey taken care of and the split ends trimmed, oh and get my legs waxed and have a mud pack and a massage and, andGo on treat yourself, at these prices you can afford to and it will do our mental health (for we all have that) the world of good!

Judith x

A Personal Story of Transport

I am very lucky. I am well, I can work and I can drive and have a car. I also have a history of mental health difficulties that have come and gone over the years.

I was once on a train when I was ill. On this half hour journey I became highly distressed and I was hysterical and very vocal. I believed my only way to resolve my fears and a problems at that moment was to throw myself under the train. At the destination I could not get off the train in case I tried to do this. Eventually the police came and helped me recover enough to speak and face the real world. They also helped sort out transport home for me.

It was agreed I was too ill and distressed to travel home again on the train despite having a free travel card to do so. I was very lucky friends were able to leave their work and come to take me the 20 or so miles home in a car. I could not have got home again any other way. My only other choice was to be taken to the police station until some one else could come and collect me.

If there was a scheme that was more open to emergency transport facilities I would not have been threatened with the police cell nor had my friends take 2 hours out of their work day to help me.

As I said I am very lucky. Not everyone lives locally enough to get the kind of help that was then available for me. Many other people have illness that means my kind of recovery and treatment is not possible for them. Today I can take the train again with no worries or fears or choose to drive because I can. Many people end up in hospital instead and have suffered even more trauma getting there.

Jo

Depression

Depression is a very tiresome illness. Also you have a loss of appetite.

It is a very hard illness to fight. You feel that you are in a losing battle at all times.

Day to day chores you can not do as the Depression in your head will not let you.

It is a ruler of all things. It cripples your mind.

Try to fight it and it will fight you back with a vengeance.

The only way to control it is to stay in your bed, sleep and rest until it passes for how ever long it takes to go. It's the only way to try and defeat it.

DO NOT TRY TO FIGHT IT OR TRY TO DEFEAT IT YOU WILL NOT SUCCEED. YOU WILL LOSE.

This is a picture I got in my mind of how to describe Depression - a very cold dark winter's day with a lot of snow and looks raw and very bleak outside.

Goodbye Ana

I'm Kate, 31 and relieved to be able to say that today I am in recovery from anorexia. Recovery to me has been a long, painful process involving therapy, hospitalisations and learning to change my anorexic thoughts and behaviour patterns, primarily through Cognitive Behavioural Therapy and Cognitive Analytical Therapy.

At school I would hide in the library to avoid having to sit with my peers in the dining area for lunch. I felt so isolated and disgusted at my body that the very thought of having to eat in front of people made me extremely anxious. During my final year I developed a severe bout of glandular fever. My appetite went from very little to completely disappearing and my energy levels crashed. While several of my friends also suffered from the same virus they quickly recovered but I was unable to shake it off and remained unwell for over a year.

By the time I was at university my eating was totally out of control and a pattern of starving, bingeing, over-exercising, diet pills and self-harm became deeply ingrained. Despite my house-mate telling me that she feared that I would not wake up one morning, I still didn't feel 'sick' enough to warrant the diagnosis of anorexia, in fact I felt totally invincible and in control of my life. The reality of course was that with every pound I lost more than the weight and had begun to suffer black-outs as a result. My mind was racing most of the time and I threw myself into my degree believing that if I achieved more I would somehow feel ok again.

Following graduation in 2001 I decided I could no longer exist enslaved to the disease and the time had arrived to seek out more intensive treatment. Up until this point I had seen numerous doctors, attended support groups and out-patient care at Ipswich Hospital. Multiple medications had been prescribed to no avail; some of which had actually caused

me to lose more weight! I knew that if I did not get help soon anorexia would achieve her ultimate goal... another wasted life.

In October 2002, I entered the Eating Disorders Unit at Marchwood Priory Hospital. Nothing could have prepared me for the mentally, emotionally and physically challenging work that lay ahead. Eating 3,000 calories a day and having limited exercise at times felt unbearable and were it not for the tremendous support from doctors, therapists, nurses and most significantly other in-patients, it would have been virtually impossible.

The most humiliating part of treatment was being weighed in my underwear twice a week and having to request my bathroom door be unlocked at the nursing station. Some groups I gained huge benefits from, such as CBT and I had a fantastic therapist who enabled me to understand the illness and recovery process. However, despite writing my 'Step 1' and trying to convince everyone I was 'in recovery' I had secretly been bingeing on my visits home as a means to reach target and be discharged quicker.

My therapist and the Eating Disorders Unit (EDU) manager both tried to convince me that I needed to stay longer but just before Christmas my Consultant agreed to my discharge. I returned home physically stronger but mentally I was still very low. Within four months I was readmitted to the EDU and this time I gave it everything I could as I knew that life on the outside with anorexia was sheer hell.

The second admission was much harder than the first as I had to learn to be honest about my feelings and work through some traumatic experiences. However, I made some very close friends and we spent much time laughing, crying and singing together! I found that through experiencing the changes necessary for

recovery with those close to me I gained strength and received a new perspective on the whole process.

By summer 2003 I was ready to return home and had an excellent care team in place. For the following 2 years, I regularly saw my GP, dietician, therapist and eating disorder Consultant and attended weekly OA groups. A further key part of my recovery involved being 'discipled' (mentored) by a lovely, supportive woman from my church. Today, this continues and I have found my faith and my 'Church on the Rock' family to be a significant factor in maintaining recovery.

The past 6 years have seen me experience wonderful times of freedom from anorexia as well as periods of desperation and relapse. I see recovery as something I choose daily, to follow my menu plan, stick to my exercise contract, take my medication and continue working with my Cognitive Analytical Therapist (CAT). Today, I read as much as I can about CBT and CAT approaches to recovery and have recently put together a book about my journey, entitled "Goodbye Ana" and have included information about what has helped me to remain well.

The main aim for writing the book is simply to educate and support those impacted by this parasitic disease. Chipmunka Publishing, who have kindly worked with me to create my book, specialise in promoting mental health awareness. My heart is to see the stigma and sense of taboo surrounding eating disorders, as well as mental illness in general, be eroded through sharing my story.

To find Kate's book search for *Chipmunka Goodbye Ana* on the internet.

Therapist

For those who, like me, have a problem with the image of Father, these verses are based on the Lord's Prayer and dedicated to Dr David Mead (formerly Cornhill Hospital, Aberdeen), who by his example helped me to see God in a new light.

God, our ever-present therapist,
you deserve all our respect and trust.

Let things turn out the way
that is best for the whole world.

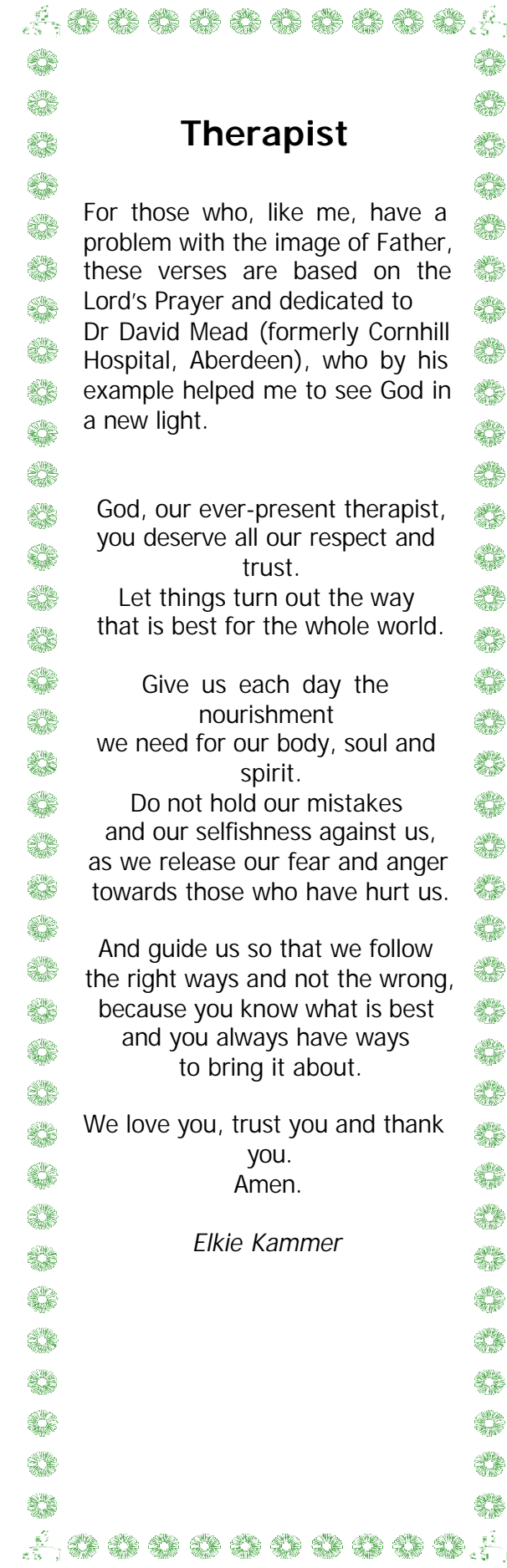
Give us each day the
nourishment
we need for our body, soul and
spirit.

Do not hold our mistakes
and our selfishness against us,
as we release our fear and anger
towards those who have hurt us.

And guide us so that we follow
the right ways and not the wrong,
because you know what is best
and you always have ways
to bring it about.

We love you, trust you and thank
you.
Amen.

Elkie Kammer





Going bankrupt? ONLY FINANCIALLY!!



Discharged bankrupt Alan Muir, gives a few "been there" hints for those facing that dreaded status. *(Article first published in the Depression Alliance Newsletter)*

As I have said here before, we are many faceted, but, in these dark times of recession and, especially in the label obsessed Western World, that one, you know -bust, in queer street, man of straw etc. holds a stigma close to that of "mental health problems", so campaigned against these days.

It is said that over 50% of UK businesses are two bad payment months away from it, so, what does sequestration actually mean? I was asked by a colleague facing the same fate. As they put it, "It sounds like a painful operation!" Well...I replied.

Despite all your hard work and best efforts, the mortgages, loans, credit cards which were previously coming in like rain, the wall is fast approaching. Point 1- YOU ARE NOT ALONE! The increase in the last five years in bankruptcy petitions in Edinburgh Sheriff Court alone is staggering. They may not talk about it at the school gate, but, if you are concerned, so are many around you.

In my case, I was self-employed, single, had car loan, mortgage, credit cards etc. I had however been unable to work for some eight months and the rolling fees out/fees in had suffered the obvious effects. I had agreed a schedule of repayment of the cards etc., but, couldn't meet these.

I went through the nightmares of "I've failed, I've blown all chances, I'll never get back from this etc" - all the normal terrors some of you may be going through just now. Stop and take a deep breath. This type of unaddressed fear can, and has, killed.

Through one call from AB Debt Recovery, I learned that, in one strange way, bankruptcy is power. At 8am one Sunday morning, I was called and very abruptly made aware via a young, rude debt company employee's seemingly personal angst that I had not paid that month's contribution. I was told that, as a lawyer, I should realize the importance of meeting commitments(!). Having just left the Murray Royal psych' system, I was past taking this officious "keich". I said, "Actually I'm being sequestrated next month". The balance of terror had audibly shifted. You see, it's the one term that scares them witless. It means that they will get nothing *and* they know it.

I won't pretend that I went bust whistling Dixie, far from it. There were many sleepless nights. It is one of life's events to teach that you find out who your friends are. It did. So, the reality.

- 1) **I'll lose the house!** Not necessarily, it depends on your trustee and the lender. Your trustee is a Godsend and can allay many of the fears *but* be straight with

them! I have a friend who still has her five bedroom house (with hot-tub) as her bankruptcy draws to a close.

If you're renting just make sure you, or someone, pays three months in advance to give you a breathing space.

- 2) **I can't have a bank account!** Wrong. I stayed with the bank that was my main creditor. They even asked a year later what my business borrowing needs were for the coming year (!) The left hand did not know what the right was doing.
- 3) **I can't get any credit to trade.** Any credit over £250 has to be agreed by your trustee, but, it is out there. Like all contracts it is negotiable.
- 4) **What about all the bills? Gas, electricity!** Draw a line on the day of your sequestration - the clock stops on that date, so does trying to feed that monster. You give all financial letters to your trustee, so, stop opening them just to beat yourself up again!

Contact all, or ask the trustee to do it, and the clock starts on the Gas etc. i.e. the things you are still consuming from that point.

- 5) **They'll take the lot!** No they won't. The trustee's job is to maximize the estate (your stuff) to pay the creditors *but* you really think that they see any point in selling off your Calvin pants? If you paid cash for the year old Merc'-that's different.
- 6) **I'll have the mark of Kane!** No you won't. If you walk into a bar in Leith (a trendy one mind) can you tell me who is bankrupt? Exactly. It goes into Stubbs Gazette-the what? Exactly.
- 7) **No point in me working anyway** Wrong! Your trustee will determine a level of contribution, if any, at your six monthly meetings. When my trustee told me what I was allowed and that, after that figure, they wanted a third of the excess, the excess mind, I was stunned. I had to tell him that, if he could get that out of the Legal Aid Board on a monthly basis, I'd employ him after the discharge!
- 8) **I'll never get a mortgage again!** Wrong. All contracts are negotiable remember. I was told that, after discharge, I could get one. First year out-1% above normal rate, second year ½% above. Face it folks-they want you tied in again ASAP.

So, in my day it was three years, it's now one. If nothing else, it removes that voracious monkey from your back and you can breathe again. You join an interesting club including Abraham Lincoln-twice! Believe me, there comes a point where you realize that when Christ threw the money lenders out the temple, he knew exactly what he was doing.

It's money, just that. It isn't health, talent, personality, love of those in your life. You haven't killed anyone, so, take your gaze from the pavement, there's a new road and it isn't all uphill.

Is Time Running Out for Disability Benefits?

Over the summer a news story quickly began to circulate around internet chat rooms claiming that people had “100 day’s to save DLA” causing alarm bells to ring for disability groups and people. The story was based on a on a government Green Paper which suggested that disability benefits in the future could be scrapped and the money saved used to fund care services in England.

In response to this announcement disability groups mobilized around the UK quickly sending a clear message to the Government that any plans to abolish disability benefits were simply not acceptable forcing the UK government to make an announcement in October that they had ruled out controversial plans to abolish DLA paid to 2.5 million people under the age of 65.

However, the future is less clear for people over the age of 65 claiming disability benefits. The Shaping the Future of Care green paper launched over the summer suggests ways that the costs of care in England can be met in the future.

You might be thinking that this has nothing to do with people in Scotland. On the contrary any changes to disability benefits would be likely to affect people across the UK affecting Scotland’s 256,000 older people receiving either AA (Attendance Allowance) or DLA (Disability Living Allowance)and could also have an impact on provision of free personal care for older people in Scotland.

No of people over 65 receiving a disability benefit in Scotland (Feb 09)		
Age	Disability Living Allowance	Attendance Allowance
Over 65	111,000	145,000

Free personal care was introduced in 2002. At the time the Scottish Executive failed to persuade the UK government to help fund the policy with Alistair Darling, Secretary of State for Work and Pensions, maintaining “that to do so would undermine the whole unified welfare payments system across the UK”. Now, proposals in “Shaping the future of care together”, suggest that Westminster could tap the UK welfare benefit system to fund care for older people in England, which if it was to go ahead would not only reduce the income of older people, it would also reopen the debate as to whether Westminster should contribute financial towards Scotland’s policy on free personal care.

These proposals, however, have already generated a great deal of controversy for people who already feel that their social security benefits are under attack by welfare reform and the threat of losing benefit alone has generated high levels of anxiety for people with a disability.

Neil Bateman one of Britain’s leading Welfare Rights Specialists has argued that these proposals would be ‘catastrophic for millions of the poorest and most vulnerable’. In around 42,000 people received free personal care at home compared to 256,000 older people receiving disability benefits. There would need to be a 600% increase in the numbers of people accessing free personal care to meet the same demand as older people receiving DLA or AA. This seems a highly unlikely proposition. A more likely

scenario is that many older people would no longer qualify for disability benefits, and at the same time would not receive any help with their care needs.

Disability organisations across Scotland and the UK have been campaigning on this issue over the last few months. One petition on the 10 Downing Street website has had over 20,000 signatories against the government proposals. Scotland, SAMH have been working with other mental health organisations including HUG, Depression Alliance Scotland, Bi-polar Fellowship Scotland, NSF Scotland and local mental health associations to petition politicians and campaign against any changes in the shaping the future of care proposals that will affect anyone's entitlement to disability benefits.

Removing or integrating disability benefits with other aspects of social care is likely to have negative impact on people with a disability whatever their age. These benefits paid directly to the individual, giving people with a disability control over their budget to make choices regarding their care and support needs, helping them to remain independent and offer a level of flexibility not delivered elsewhere in the social care system. We know that these benefits make an important difference to people's quality of life, their mental health, and their well-being.

The Westminster Health Secretary Andy Burnham MP has recently tried to reassure people with a disability that the government has ruled out changes to Disability Living Allowance for people under 65, but the fact remains that the Government are considering possible changes to disability benefits for older people. The Consultation period ended on the 13 November and it remains to be seen whether the government will listen to the clear message that has been sent out to leave disability benefits alone.

Chris White, Policy Officer SAMH

HATE

Do you feel a sudden hate for an acquaintance or a mate.
Do your fists come thrashing high as if to fight before you die.
Does your temper start to snap, a sudden punch, a mighty slap,
stop to think of other folk before you start to provoke.
They have a right to live, a right to take, a right to give
Put yourself inside their shoes
Because those who hate always lose.

Irene Renwick

Distance Befriending: A Personal Perspective

Dear Editor,

I am writing to introduce myself and to attach some information that may be of interest to you for HUG members.

I began my new post as Distance Befriending Co-ordinator in September and am in the process of developing and expanding our Distance Befriending service for people who have experienced a mental health issue. We are now able to offer this service across all of the Highland Council Region and as a result have a number of referrals and volunteers already from your area.

Our service is free and, through research carried out and evaluated by the University of Stirling, distance befriending has similar beneficial effects and health improvements to that of Face to Face befriending.

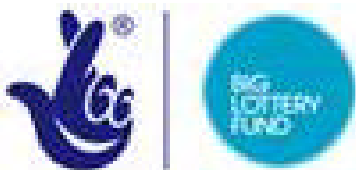
There are many people who have experience of mental health difficulties across the Highlands and they tend to suffer loneliness and isolation and often lack opportunity for social interaction outside of mental health circles. Distance Befriending can offer an outlet to address this isolation.

Sue, who has used our service has kindly given permission to share her own experiences to help others explore how distance befriending could help them.

*Best wishes
Sally.*

Sally Mackintosh
Distance Befriending Co-ordinator
Befrienders Highland
Queensgate Business Centre
1 Fraser Street
Inverness IV1 1DW

01463 235675
www.befriendershighland.org.uk



LOTTERY FUNDED

My name is Sue.

I live on the Isle of Skye with my husband George who was diagnosed with Pick's Disease (Frontal Lobe Dementia) six years ago. This has caused lack of insight, loss of emotion and feelings and disinheritance and will eventually develop into general dementia.

We have been extremely lucky with our support network and live in a really close community. I am still able to work part-time as carers from Crossroads take George out twice a week.

Meeting people at work helps me but there are many times when I feel very alone and lonely. I have regular meetings with my CPN (Community Psychiatric Nurse) who is a real help and through her I was told about Distance Befriending.

She contacted Yvonne Reid and we had an in-depth chat to establish what I am like and what I could get from the service. Yvonne teamed me up with Sarah who lives on the west coast of Scotland but who comes from the same part of England that I came from, is just around my age and has similar interests and outlook.

Sarah has been ringing me once a week for around half an hour for the past three years. I try to arrange the call for when George is out for the day at the Alheimers Scotland club so I can speak freely as he likes to listen to what I am saying. Quite often we don't talk about him or my problems - it is just a chance to be normal and have a blether with a really good friend about anything and everything.

I really do feel that Sarah is interested in my life and it certainly is not just a 'duty call' for her. It means an awful lot to me and I miss our chat if either of us cannot make it for some reason or another.

To give you an idea of what I mean - Sarah arranged to ring me last Sunday. Some friends took George to our local pub while I settled to watch Doctor Zhivago - a film I had not seen for years and I was revelling in the peace to see it right through to the end. After around two and a half hours (with about an hour and a quarter to go) Sarah rang me as planned - I looked at the phone to see who was calling (should I answer it or watch the end of the film?) but to me there was no contest - I answered the phone willingly, turned the television off, had a really lovely half-hour chat and came off the phone feeling really good and so glad I had had my chat with Sarah. The film will come back on the television some day, but that call was the most important thing.

When we first started the phone calls there were a few occasions when I wasn't sure if I wanted to speak to anyone as I felt so low, but they are now a really positive part of my week and the friendly chat helps every time. The calls are not just about me - I learn what has been going on in Sarah's world - so it is definitely a two-way thing. It makes me feel normal for a while. It also means I do not feel the need to burden my friends and colleagues with my problems quite as much - I don't want to be known as a 'miserable old moaner' do I?

Yvonne contacts me every six months to see how things are going with Sarah. I get occasional respite breaks in Inverness and usually try to fit in a visit to Yvonne for a cuppa, biscuits and, of course, a wee blether.

To sum up: I am just so grateful that this service is here for me and others in similar situations and am relieved that funding has been given for it to continue - I really would find I had a huge hole in my life if it wasn't here for me. Thank you for 'listening to me'.

Sue

Scottish Mental Health response to the Department of Health Consultation: Shaping the Future of Care Together

HUG were involved in creating this response to the Department of Health - For a full list of groups involved see the end of this article.

Introduction

SAMH, Scotland's leading mental health charity has produced this response in partnership with other Scottish mental health organisations, local associations for mental health and service user organisations in Scotland.

Health and Social Care have been devolved issues since devolution and the creation of the Scottish Parliament in 1999. Although this Green paper is predominantly about the future of Social Care in England we feel that it is appropriate to comment on it because of the implications for people with mental health problems in Scotland of any future changes to the disability benefits system, a reserved Westminster policy area which could affect people across the United Kingdom.

General Comments

Mental health organisations across Scotland work to promote recovery and mental health and wellbeing for all.

We support the principle that Government should provide the right supports to enable people to remain independent in the community. In order to ensure that people lead as active, independent and healthy a life as possible there is a need to invest in prevention, rehabilitation and recovery. Adopting a recovery approach to supporting people with mental health problems should ensure that individuals have a choice over how and where they receive support that will promote their individual recovery.

We are greatly concerned that removing or integrating disability benefits with other aspects of social care will have a negative impact on disabled people and in particular people with mental health problems. Whilst the Health Secretary Andy Burnham MP appears recently to have ruled out changes to Disability Living Allowance for people under 65, this is not clear in the Green Paper, and his comments do not seem to have been reflected by other government ministers in recent debates in both the House of Commons and the House of Lords.

Disability benefits are paid directly to the individual, giving disabled people, whatever their age, control over their budget to make choices regarding their care and support needs, helping them to remain independent and offer a level of flexibility not delivered elsewhere in the social care system.

Specific comments on the proposals

Working age disabled people

194,000 people of working age in Scotland currently claim Disability Living Allowance (DLA), which provides a personal budget which can be spent on the services the person wants to meet their care and mobility needs. We are opposed to any removal of DLA because it could cause greater need rather than promoting independence. DLA offers people choice and control over their budget and enables disabled people to address their needs in a way which they feel will promote their recovery and wellness, rather than having to rely on a limited range of services that may be available from the local authority.

Promoting independence and recovery for disabled people of working age can reduce the pressures placed on other social care budgets. For example, people with mental health problems can experience much smaller social networks and can feel isolated and alone. Anxiety may mean that a person feels unable to leave their home by themselves. People can choose to use their DLA to use a taxi to access social activities and cover the costs of an informal carer to provide the additional support and assistance needed. Without this additional support the person could experience greater anxiety and social isolation, increasing the potential of a period of hospitalisation or more intensive and costly community support.

It is also the case that many people in receipt of DLA are in work or are progressing towards a return to work. An award of DLA for disabled people in employment can play an important part in ensuring they remain in the workplace. Any changes to the current disability benefit system could result in extra difficulties for working disabled people meeting their care and support needs, particularly as many forms of home based social care support operate during a typical working day, which the person could not access due to their own work commitments. This could lead to them falling out of employment resulting in a loss of financial independence, a loss of revenue to the state through taxation and a greater need to be supported through the social security system.

Older People

We are concerned over the emphasis on older people in the green paper. In Scotland 145,000 people over the age of 65 receive Attendance Allowance (AA) with another 111,000 older people receiving DLA to help with their care needs.

Older people in Scotland receive free personal care which includes nursing care but does not include social care. In 2006 a Joseph Rowntree report concluded that this had created a fairer system without undue extra public spending. Disability benefits and free personal care enable older people in Scotland to remain independent in the community, providing older people with a personal budget to help with their care and support needs. This could include covering the costs of a friend or family member coming to the home in the morning to help the person get out of bed, prepare meals or do shopping and cleaning. Any changes to disability benefits could affect the provision of this care and support and result in an older

person needing more costly forms of social care in the home, or lead to a person moving into residential care if they were not able to manage their household.

We are opposed to integrating elements of the disability benefit system into other social care budgets as this may adversely affect the mental health and well-being of both older people and informal carers by adding additional pressures on families. Many families provide care and support to an elderly parent and have to balance managing responsibilities for two households. Disability benefits offer a personal budget which can help reduce these pressures, for example by paying for taxis between the two households, without which the informal carer may not have the time to provide the care and support required. This care and support may include help with getting into or out of bed, preparing meals, washing and bathing, going shopping or cleaning the house, all of which would be more costly if the support was provided through local authority services.

Changes could increase the pressures on informal carers which could limit the opportunities of carers being able to work and therefore lead to them not contributing through the income tax system.

Children and families

In Scotland almost 27,000 parents receive financial support for disabled children to help with the added mobility and care needs arising from their disability. We believe changes to the disability benefits system would negatively affect the independence and choices of disabled children and their parents and therefore we oppose any such changes to disability benefits.

Such changes could have a significant impact on the mental health and well-being of families, due to a reduction in the personal finances available to support the needs of a disabled child that may not be met by other social care budgets. For example, where a child has additional care and support needs they may receive help towards any aids and adaptations, and may get additional support and school, but are more likely than non-disabled children to take time off school due to periods of illness or attend medical appointments. Parents will need to provide additional care and support, often at short notice. Disability benefits can provide additional income to meet these costs, without which their opportunities to work or continue in work will be limited.

Conclusions

As disability benefits are based on need rather than means tested, many people receive additional financial assistance to help towards care costs where they would not otherwise get help from the state.

We believe that the disability benefits system helps support disabled people to live independently and stay well longer. We believe that the continued provision of disability benefits is an important factor in supporting recovery, giving people control and choice whilst helping people remaining independent and well. Therefore we oppose any changes to the current system of disability benefits that would reduce personal budgets, choice and independence for the individual and lead to greater reliance on more costly forms of social or residential care.

Joint Response Agreed by:

Scottish Association for Mental Health
Depression Alliance Scotland
Penumbra
Scottish Development Centre for Mental Health
Bi-Polar Fellowship Scotland
NSF Scotland
Highland Users Group
Renfrewshire Association for Mental Health
Glasgow Association for Mental Health

November 2009

DVD Review: Lars and The Real Girl

Screenplay by Nancy Oliver, directed by Craig Gillespie

The story takes place in a small town in the north of Sweden. Lars lives in the converted outhouse of his parental property, while his older brother with his pregnant wife occupies the main building. Lars works in an office and attends the local church, but otherwise he lives a rather secluded life. He does not like to follow invitations or respond to the attempts of match-making from people in the community. However, their constant pressure to find a partner leads one day to Lars ordering a life-size doll on the internet and convincing himself that she is real. Thanks to the advice of the local GP, the whole community goes along with Lars' delusion and the doll in her wheelchair helps Lars to get more involved with people.

Right through the film, Lars very convincingly displays typical features of Asperger Syndrome, like his highly organised life with unmovable routines, his hypersensitivity to touch, noise and visual stimuli, his interaction (or lack of it) with colleagues, church and family members and his general interpretation of the world and his life in it. In many ways I found in Lars a mirror of myself.

What makes the film even more valuable is the change of attitude Lars and his girl bring about in their community, initiated by the GP. The typical small town narrow-mindedness is being transformed step by step, culminating in everybody's sincere participation at the girl's funeral, once she has fulfilled her mission.

I thoroughly recommend this film to anyone looking for a positive approach to Asperger Syndrome and inclusion.

Elkie.

Year 2010

It's a decade since the millennium
You wonder where time has gone,
That tends to pass much quicker
As the years start rolling on.

Each day, leaves a longer gap
Since your life had first begun
It feels like a human race
Trying to remember what you've done

You'll find the older you get
Is making up a memory lane
Might want to turn it back
And go through things over again

No matter what age you are
Can't look far ahead of yourself
But comes round sooner than later
You want to see good health

Susan Kelly.

Schizophrenia & Alternative Medicine

During 29 years of schizophrenia, I've tried many cures. Those which didn't give me much were homeopathy, herbalism and autogenesis. The reason for this was that I had to stay on the anti-psychotic drugs recommended by conventional medicine. However each therapy further developed my self-psycho-therapy. And I was put on evening primrose oil which helps one feel better; especially as certain types of schizophrenia are now supposed to be a lack of fatty-acids. I also take Selenium with zinc, an anti-oxidant which helps the blood. Originally I took it for arthritis.

Also contributing to my psycho-therapy (which I've never had officially) are yoga and astrology. Yoga makes one fitter, physically and mentally and is officially used now in relaxation groups. Astrology furthers the self exploratory process and is taught in the local college. Also I did some psychology at university and have read text books in psychiatry.

Every time I came off the drug, I got very high so I have accepted it now: but practising one of the many forms of relaxation and trying to keep positive and

active is half the battle. Writing down ones life history helps self knowledge where the conventional system lacks.

I have also tried faith healing but the drugs and their side effects always won. Evening primrose oil helps the illness's negative effects. I got it from the research psychiatrist but now buy it in the health shop.

I would make lists of all the jobs I've done and all the places I've been etc., and I developed these into a short autobiography, along with notes from diaries. Writing is very therapeutic, as is art, and worth trying.

I'm Christian, Episcopal by choice. I must stop worrying. Also talk therapies and counselling are useful as is Reiki, a form of spiritual healing. Religion can be comparative.

Keith Murdoch

Survivors of Bereavement by Suicide (SOBS)

I would like to tell you a little of the Charity that I support and how I came to be Scottish coordinator and a Trustee.

I lost my son to suicide sixteen years ago for a long time I struggled on my own although people thought I was coping but I was struggling. As a mother I felt it was up to me to keep strong for the rest of my family I had a young son who was just nine years old and two older children both married with young children so I felt they had enough to cope with .

One day I read an advert in our local paper about a group called SOBS and it had a telephone number on it. I got in touch with the leader only to discover I knew her well she gave me the time and place where they met and I went along to the meeting.

I believe that after that it was like a weight being lifted off my shoulders hearing other people talking about their own feelings and knowing you are not alone. I felt my life was saved and I started to move forward.

I started to get more involved with Survivors of Bereavement and help with the help line. Our help line is open to anyone who has suffered a loss to suicide every day of the year from 9 am to 9pm.

I am now very proud to be part of SOBS. The work is hard but very rewarding knowing you can help people to face life again. I will never forget what happened to my son and I hope he would be proud of what I do.

If we can help anyone just phone us on 01397700958 and ask for JOYCE if I can help I will. Every one of us on the help line has suffered a loss to suicide.

I would like to thank HUG for this opportunity. I wish you all good health.

Joyce (Survivors of Bereavement for Scotland)

Left Hand Waving Man From Gairloch Way

One Sunny Day
While on the road from South Erradale,
To Gairloch Bay
I met a left hand waving man
From Gairloch way
Waving frantically with one hand
While beating the air
With the other hand,
Clenched tightly in a fist
Dressed in a suit
He looked so grand,
He stood beside the road
Next to some land.
What was he doing there?
As under my own breath
I tried to declare
Was he waiting for someone?
Or something?
Was he sad?
He seemed not
Was he bad?
He looked not
Was he mad?
I think not
When he saw me
He may have wanted to blether.
I, in turning away, he may have thought me rude,
It felt not right, nor clever
As I went on my way
Hoping to complete my own endeavours,
Of Birdwatching
And sight-seeing
Down Gairloch way
In
Gairloch Bay.
I never saw that man again
From this day on,
Nor the next
Where could he have gone,
That left hand waving man
From Gairloch way?

Allan Damien Goodwin