

# YOUR VOICE

## In Sheffield Mental Health

A magazine for users, carers and professionals

[www.yourvoicesheffield.org](http://www.yourvoicesheffield.org)

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No 76

### Drawing for Wellbeing

By Rose Murphy

Kay Aitch has always drawn. She says: "Art seems to be a part of me. Drawing in particular is something I do all the time, wherever I go, whether in cafés, pubs or at meetings. The important part of drawing is to help me observe my day to day life and it inspires my imagination. I have Asperger syndrome and find that drawing really helps me in stressful situations."

Kay's sketches, strewn as bunting across the gallery, were one of the many highlights of her exhibition at 35 Chapel Walk this July. Amongst the diverse range of artwork on show were paintings, photographs, digital prints and 3D work. Kay also ran 'Drawing for Wellbeing' workshops at the event.

Kay says: "Last year I did a solo exhibition at the Creative Arts Hub in Mirfield, West Yorkshire, and I wanted to show the work here in my home town of Sheffield."

Those who missed the exhibition, will have a second chance to view some of Kay's work at the Harland Café, John Street in October.

In August, Kay will be running demonstration workshops at the new Art House on Carver Street. For details, or to book, visit:

[www.arthousesheffield.co.uk](http://www.arthousesheffield.co.uk)



Artist Kay Aitch at 35 Chapel Walk art gallery. See page 11 for more artwork from the exhibition. To find out more about Kay's work visit: [www.facebook.com/artistkayaitch](https://www.facebook.com/artistkayaitch)

# Editorial

# CONTENTS

◆ Drawing for Wellbeing	Page 1
◆ Editorial	
◆ Donate to <u>Your Voice</u>	Page 2
◆ The Care Quality Commission reports on Sheffield Health and Social Care NHS Foundation Trust	
◆ Response from SHSC	Page 3
◆ Mental health charities voice concerns about benefit cuts	
◆ Sheffield Carers Strategy	
◆ Petition for all calls to Samaritans to be free	
◆ <u>Your Voice</u> survey	Page 4
◆ SAGE Greenfingers announces new series of singing workshops for women	
◆ St. Wilfrid's celebrates St. George's Day	
◆ New telephone counselling service	Page 5
<u>Your Profiles</u>	
◆ Ben Dorey, Recovery Tutor at SHSC, writes about the stigma and isolation of a mental health diagnosis, the value of being an expert by experience and the need for a person-centred approach to Recovery	Pages 6 & 7
◆ The Zest Centre	
◆ Mental Health Action Group Sheffield is looking for new members and volunteers	Page 8
◆ Life history and mental illness	
◆ On Balance	Page 9
<u>Your Reviews</u>	
◆ Service user Steve on 'A Straight Talking Introduction to Psychiatric Diagnosis' by Lucy Johnstone	
◆ adventures in counselling: location = afterthought?	Page 10
<u>Your Artwork</u>	
<u>Your Verse</u>	Page 11
<u>Your Noticeboard</u>	
◆ Walking football	
◆ SUN:RISE Service User Network	
◆ Mental Health Carers Group	
◆ Carer's Toolbox course	
◆ Sage Greenfingers Open Day	
◆ Emotional Wellbeing Practitioners Service	
◆ Recovery in the Community Conference	Page 12

Highlights in this edition include artwork by artist Kay Aitch whose recent exhibition is featured on the front cover; a profile interview with Ben Dorey who draws on his own experience of mental health issues and services in his role as Recovery Tutor at SHSC; SAGE Greenfingers shares how their women's singing workshops help to improve participants' sense of wellbeing; and Exercise Referrals Co-ordinator Jean Kirby tells us about the health, employment and leisure services available to people with mental health problems at the Zest Centre.

We also have a report from SHSC about their recent Care Quality Commission inspection with a message from Chief Executive Kevan Taylor who invites readers to get involved with the Trust.

As always, many thanks to everyone who contributed to this edition. If you'd like to share your experience, news or views, please do get in touch.

**Justine Morrison**

## Donate to Your Voice

Your Voice's current contract with Sheffield City Council will end in September 2015. We're hopeful that we'll be able to obtain funding to allow us to continue our work in sharing information about mental health and promoting recovery in Sheffield and beyond but our future is by no means certain. If you would like to make a financial contribution towards securing our future, please send cheques made payable to Your Voice to Your Voice, Office 27, Woodbourn Business Centre, Jessell Street, Sheffield S9 3HY or contact us by email at [info@yourvoicesheffield.org](mailto:info@yourvoicesheffield.org) to discuss making a donation by BACS.

You can also support us by taking part in our survey on page 4.

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**Acknowledgements:** We would like to acknowledge the input that the Sheffield mental health community makes to the ongoing success of Your Voice. Sheffield City Council provides our core funding. Our greatest debt of gratitude is reserved for all of our contributors and readers – we wouldn't exist without you.

## The Care Quality Commission reports on Sheffield Health and Social Care NHS Foundation Trust

Inspection reports give overall rating of 'requires improvement'

Sheffield Health and Social Care NHS Foundation Trust provides mental health, learning disability, specialist and primary care services for the people of Sheffield as well as providing some services on a wider regional or national basis. We were inspected between October and November 2014 as part of the Care Quality Commission's (CQC) comprehensive inspection programme. The inspection team looked at the Trust as a whole and in more detail at 10 core services, including in-patient mental health wards and community-based mental health, crisis response, learning disability services, and 6 social care services.

The CQC inspectors assess services against five key questions, asking if services are: safe, effective, caring, responsive to people's needs and well-led.

They then rate NHS Trusts as a whole and also their individual service areas to help people understand where care is outstanding, good, requires improvement, or is inadequate. Sheffield Health and Social Care NHS Foundation Trust has been given an overall rating of requires improvement.

The inspectors found many areas of good practice and received many positive comments about care from service users and carers, in particular both staff and services were identified as being caring and responsive. For example, staff treat service users with "kindness, dignity and compassion" and are "committed to providing patient led care".

Other areas of good practice included "innovative service user involvement initiatives for patients

using adult community mental health services"; the Community Learning Disability Team was noted to be "proactive in its approach to gaining feedback from patients and their families"; and "forensic services supported patients and their relatives to keep in contact with technology such as Skype".

One service (the forensic service at Forest Lodge) was rated as outstanding and four services were rated as good (wards for older people with mental health problems, community based mental health services for older people, mental health crisis services and health based places of safety, and supported living at Mansfield View).

However, there were a number of areas where the inspectors found some issues about the way we provide services, and particular areas of concern were identified in some services. Issues were raised in respect of safety and effectiveness across the Trust, including medicines management and staffing levels in certain areas. The majority of the concerns raised by the CQC relate to Woodland View Nursing Home which was rated as inadequate.

The Trust held a Quality Summit with the CQC, Commissioners and partners across Sheffield, including Healthwatch, on 4<sup>th</sup> June 2015 where it presented a draft action plan. Once the action plan is finalised it will be publicly available on our website at:

<http://shsc.nhs.uk/about-us/corporate-information/cqc>

You can read all the reports from the CQC on their website at:

[www.cqc.org.uk/directory/TAH](http://www.cqc.org.uk/directory/TAH)

### Response from SHSC

I am very pleased to have the opportunity to share information with you about our CQC inspection and their findings. While I am disappointed with our overall rating, I would like to assure you that we are fully committed to providing high quality health and social care services to the people of Sheffield. I believe that we provide a good standard of care but I know we both can and need to do better. We are using the inspection reports as a measure to improve quality across all services alongside our own on-going quality improvement plans.

It is important that we learn from both the positive and negative findings of the reports. We need to make sure we maintain the good while addressing the areas which are causing concern. I am confident that our action plan will help us achieve this.

I was delighted that the CQC found our staff to be dedicated to providing patient-led care as this is a key area for us. We aspire to work in partnership with service users towards their recovery goals and we will be rolling out recovery focused care planning from the in-patient wards to the community teams in the coming months.

We very much welcome feedback from service users and carers about their experience of our services and I would like to encourage you to get involved with the Trust by becoming a member or joining one of our Patient and Public Involvement programmes.

With best wishes

**Kevan Taylor**  
**Chief Executive**  
**Sheffield Health & Social Care**  
**NHS Foundation Trust**  
[www.shsc.nhs.uk](http://www.shsc.nhs.uk)

## Mental health charities voice concerns about benefit cuts

A recent survey of people with mental health problems about benefits suggests that cuts could lead to greater costs down the line. In light of these new data, a group of leading mental health organisations are coming together to voice their concerns.

The survey, by Rethink Mental Illness, found that if support from benefits was cut, 78% of respondents said they would need more support from their GP, community health services or in-patient mental health services; and 87% said they would not be able to cover their household bills, accommodation and food costs.

In a joint statement Rethink Mental Illness, Mind, The Mental Health Foundation, the Royal College of Psychiatrists, Centre For Mental Health, Northern Ireland Association for Mental Health and The Scottish Association for Mental Health said:

“We know that many people with mental health problems who are not in work would like to be, but face huge barriers because of the impact of their illness and the stigma and discrimination they often face from employers. Support from benefits such as Employment and Support Allowance simply enables people to cover their basic needs while concentrating on getting well.”

“We are concerned that without this support, people on the way to recovery will suddenly come up against financial hardship and distress, and will have to access healthcare services for support instead, like their GP or local mental health teams.”

The charities are calling on the Government to take into account the impact any cuts to benefits may have on people with mental health problems and for them to indicate how they will mitigate against these.

## Sheffield Carers Strategy

Would you like to be involved?

Do you spend time looking after or helping a friend, partner or family member due to illness, disability, frailty or addiction? The care you provide may be personal, practical, emotional or supervisory and is unpaid. If this applies to you then you are a carer.

We want to develop our carers' strategy with carers, in recognition of their role as expert partners. Your views will help us determine what is important for carers who live in Sheffield. This could involve a focus group, completing a questionnaire but most of all we would just like to talk to you and get your views.

If you want to be involved in developing the next carers' strategy please get in touch with your views and contact details by 31<sup>st</sup> August.

**Emma Dickinson**  
**Floor 9, West Wing, Moorfoot Building, Sheffield S1 4PL**  
**Tel: 0114 273 4746**  
**Email: carers@sheffield.gov.uk**

## Petition for all calls to Samaritans to be free

Even when all other kinds of help are unavailable, Samaritans are there 24 hours a day. However, call charges can be a significant barrier for a lot of people. Lower income families often rely on mobiles with expensive pay-as-you-go tariffs. Even the cost of a local landline call can mean a slice out of a small family budget, maybe even sparking a row in a volatile relationship. Or you may find yourself in debt and desperate to talk about it, only to have your outgoing calls barred. To add your name to the petition to make all calls to Samaritans free, please go to:

<http://www.change.org/p/future-uk-government-help-samaritans-provide-their-telephone-service-for-free>

## Your Voice Survey

Your Voice would like to learn more about how our magazine is used by our readers. If Your Voice helps you in your life or your work, we'd like to hear about it. Maybe the magazine helps you by providing information about services and support; increasing your knowledge about mental health issues; enabling you to access training; enabling you to promote your group's activities; supporting your recovery. We need this information to help secure our future. Please help us to do this by spending a few minutes to take part in our survey at:

[www.surveymonkey.com/s/YMDG773](http://www.surveymonkey.com/s/YMDG773)

Alternatively, you can respond to our survey questions below by email or post.

1. Do you read Your Voice magazine?
2. Do you subscribe to Your Voice to receive an individual copy?
3. Do you think that Your Voice helps you in your work or in your life?
4. Please give an example of how Your Voice helps you
5. Would you like to make any other comments about Your Voice?

Thank you to people from the Trust and others who have already responded to our survey.

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## SAGE Greenfingers announces new series of singing workshops for women



The singing group at the Abbeydale Industrial Hamlet

Abbeyfield Park house has been alive with music when a group of women have been gathering there to sing. SAGE Greenfingers is excited to announce that it is now running regular singing sessions for women. These are delivered in a relaxed and warm atmosphere, and there are no auditions to go through; whoever comes through the door is welcome to participate. We have sung a range of songs, from tribute songs, to poems set to music, to popular songs suggested by the group. We've even tried our hand at percussion using a wide range of percussion instruments!

The singing tutor opens the session with a gentle warm-up, to relax the body, prepare the voice and do some deep breathing. We learn our parts by ear, so there is no music to read. By the end of the sessions we are singing in three part harmony and sounding great!

To celebrate the end of the first block of sessions we are going on a trip to the Abbeydale Industrial Hamlet where we are going to sing, possibly in a place that others will hear us, and enjoy a picnic lunch and a tour of the site.

One of the women who comes regularly said: "I come because I want to feel happy and more

confident, and I always leave feeling better than when I arrive. I've told my friends I've joined a singing group and they can't believe it! It's good to do something outside of the grind of daily life. I love it. I'd like my daughters and grandchildren to come and hear me sing when we are on our trip to the Abbeydale Industrial Hamlet."

As this block of sessions draws to a close we are happy to announce that we are starting up again on Monday 7<sup>th</sup> September through to Monday 7<sup>th</sup> December with a break for the half-term week. We are currently planning that the venue of Abbeyfield Park House will remain the same.

Please do get in touch if this sounds like something you would like to join in with. For more information, please contact Miriam on:

**Tel: 0114 274 3651**

**E-mail:**  
[miriam@sagesheffield.org.uk](mailto:miriam@sagesheffield.org.uk)



## St. Wilfrid's celebrates St. George's Day



A good time was had by all who attended St. Wilfrid's St. George's Day event. After enjoying an English buffet guests were treated to an afternoon of entertainment featuring the England Band, Bernie Clifton, the St. Wilfrid's Singing Group and Dancers, and the prize raffle draw. The High Sheriff and Lord Lieutenant were in attendance, as was Miss South Yorkshire, Stephanie Hill, along with England football legend Tony Currie and four current players from the Sheffield United Squad. The raffle raised in the region of £3,500 towards funding for the Centre's residential project. For information about the project and how to make a donation, please visit:

[www.stwilfridscentre.org/residential-project](http://www.stwilfridscentre.org/residential-project)

### New telephone counselling service

The Sheffield Mind Counselling and Psychotherapy Service has launched a new telephone counselling service which will be available to callers on Mondays. If you wish to speak to a counsellor, you need to call the office between the hours of 9 am -10.30 am and leave your contact details with a member of staff. A trained therapist will call you between 11 am - 2 pm. Sessions will last approximately 40 minutes. If you have any questions about the service, or would like to know more, you can call the office on:

**Tel: 0114 258 4489**

## Your Profiles

Ben Dorey, Recovery Tutor at SHSC, writes about the stigma and isolation of a mental health diagnosis, the value of being an expert by experience and the need for a person-centred approach to Recovery



### **How did you come into contact with mental health services?**

Unfortunately my first few contacts were a rather messy affair, in part due to my time being split between Sheffield and Kent, where my parents were living at the time. I had always been quite imaginative and sensitive as a child and I had a tendency to drift off into fantasy realms in my head when things in day to day life were tough. I was very ill when I was young with consecutive infections that eventually led to pneumonia, so I had an early encounter with my own mortality that shook me up. My parents also moved about a lot, so there were teething problems in new schools and a constant need to make new friends until I was 11 or 12. These fantasy realms gradually evolved into a quite personal spiritual framework and experiences within this might be described as psychotic; one such example was feeling like I was levitating above the chair at my desk, lifted there by an invisible hand. However, as these weren't distressing experiences I never thought of them

as particularly worrying, and though I had a tendency to be sensitive and often found myself tearing up at situations, I never felt like that was because something was wrong with me. However, moving away from home for university, and from a bucolic countryside location into the city, overwhelmed me.

In the cut and thrust of the hectic student social life I felt I couldn't be my eccentric self without being left behind, yet trying to fit in also made me unhappy. I began to get more and more isolated and eventually became quite depressed and sought help from my GP who prescribed me Prozac. This had a desired effect of lifting my mood, but on returning to university after the Christmas break I wasn't sleeping and felt elated. I spent all my student loan in weeks, buying expensive rounds of cocktails, flashy clothing, club tickets and drugs and going from a previously quiet and chaste young man into a rowdy and sexually disinhibited one. I made a lot of friends but also caused havoc with my behaviour.

Eventually, after a fortnight in which I didn't really sleep at all, it all came crashing down. I was broke, shattered and didn't really know who I was anymore. I tried to retreat into my imaginary world as I had done for resilience in the past, but that too had become harsh, and the sensation of blessing and oneness I had with the world turned to a feeling that I was evil and cursed. I became terrified, helpless and suicidal, and checked myself into A&E. I was seen briefly by the crisis team, and then I was withdrawn from university back to my parents. It was back there that I was first referred to a psychiatrist and thus had my first real contact with mental health services.

### **What was your experience of mental health services?**

My initial experience was of a strange sense of relief. I was at a horrendous dead end in terms of where to turn and contact with services initially seemed like it might be a way to make sense of what had happened to me. Receiving a diagnosis of bipolar disorder meant I could explain some of how I had behaved over the preceding 6 months to my parents, friends and course mates. I tried to educate them about the condition, using leaflets I received from the psychiatrist and articles I downloaded off the internet. However, this backfired on me somewhat; I was innocent of the stigma surrounding such a diagnosis but the more I explained my 'illness' to people the more wary they became of me. Initially I was offered nothing other than drug treatments, which had little effect apart from making me put on weight so fast it put considerable strain on my heart and led to a couple of scary physical collapses. I was unable to participate in sports, which I used to really enjoy, and was gradually getting distanced from my friends.

This fed a growing sense of paranoia that there was something seriously amiss with me. This sensation was rooted in truth but eventually ballooned and again I believed that I was cursed and that I was responsible for a great deal of the evil in the world. My thoughts were out of my control, and images of the most horrific scenes of war, violence and torture would flood my mind every time I tried to relax. I locked myself away in my room so I had as little human contact as possible, yet the more I isolated myself, the more I was absorbed by this alternate reality, which was essentially a hellish version of the one I used to turn to for comfort. I was harassed by voices in corners of my room and beneath my pillowcase telling me how terrible a person I was, telling me that I was the antichrist and was destined to do evil. Eventually I resolved to destroy myself, collecting drugs, weapons and just about any method you can think of. Just in the nick of time, someone checked on my room for the first time in a long while and saw that something was seriously wrong. Though what happened in the following period is a bit blurry to me, I ended up in hospital.

This hospital admission probably saved my life, but it was also the lowest point of it. As I had no CPN or support worker at the time I was initially just dropped outside the nursing station, terrified and disorientated. All the interactions I had with staff seemed to be to do with assessing the risk I posed to myself and others. Seeing what happened to other patients on the ward who were more vocal about their strange beliefs made me close up completely to staff about my own. I felt very alone, lost in these terrifying thoughts. However, in time, a combination of high doses of medication and the unquestioning kindness displayed by some of the staff meant that I did feel a little better. Though a significant fear that this was my life now persisted, I took steps towards leaving the ward.

The best thing which happened was being introduced to a fantastic CPN called Cathy, whose response to me no matter what state I was in was to treat me like a normal human being. Our conversations centred around getting to know each other, not my diagnosis. For the first time in a very long time I started to feel normal. Having someone who knew me as a person and with whom I could collaborate on planning for the future, rather than having what my expectations should be dictated to me, made all the difference.

#### **What aspects of your life were affected by contact with mental health services?**

After leaving hospital I felt a deep sense of self-imposed shame and was fairly isolated, in part my own doing. EIS (Early Intervention Service) used to run activity and sport groups and these were an excellent way to re-enter a world of socialising and get active in an environment that was very supportive, in terms of staff and the group members who had often come back from similar experiences. Having staff to support me in making job applications, sorting out benefits, volunteering opportunities and more was an important step. Later on, Cathy retired and was replaced by another fantastic CPN, Ian, who helped me get the confidence to go back into academia, even managing to make me realise that a lot of the thought processes I had been told were symptomatic of my illness were actually strengths I could draw on and maybe channel effectively in that area.

#### **What projects, or work, are you involved in today?**

These days I keep myself very busy. Ian is now my colleague at the Recovery Education Unit in Sheffield and our team works to spread the word about Recovery based approaches. I use a mix of academic knowledge and my lived experience in the role as I think there is an expertise that can only come about through experiencing

things yourself. I also run music and poetry nights and write and play myself, and occasionally get to travel to do this around the country.

#### **What is your proudest achievement?**

I have just finished a Masters degree in literature with Distinction, which I am very proud of as I was certain a few years ago that this would be an impossible thing to do, but probably my proudest achievements are my music and poetry which have been critically acclaimed. This is particularly sweet as I was once told by a psychiatrist in Kent that the belief that I was going to be a poet was delusional!

#### **Is there anyone in mental health you particularly admire?**

I've always been fascinated by R. D. Laing and David Cooper and, more recently, Richard Bentall, Rachel Perkins and others who champion Recovery based approaches. However, the people who most inspire me are the people I work with. There are so many people working in mental health with a huge and indefatigable desire to help, even despite the challenges of the current financial and political climate. People whose attitude to life and work buoy up my own reserves of hope every day.

#### **Is there anything else you'd like to say?**

The most important lesson I have learned through my own experiences and working in mental health is that we need to focus on what's actually distressing someone having problems rather than on a list of 'symptoms'. I still regularly experience things that might be described by many as psychotic yet I have come to realise that it was the stigma and isolation that came with relating these experiences to people that was the bulk of my problems, not the 'symptoms' themselves which I now find manageable. Having spoken to a lot of other people who have used services, this seems to be a common thread and I think it's important to acknowledge.

## The Zest Centre

Jean Kirby on the many health, employment and leisure services for people with mental health issues

The Zest Centre at Uppertorpe is a unique healthy living centre which offers a wide range of health, employment, learning and leisure services to improve mental and physical health and wellbeing.

One of the services we offer is an exercise referral service. Exercise has been proven to help people with mental health issues and we support clients with many differing mental health issues. Lack of confidence and low self-esteem can stop people from getting into fitness. At Zest we understand how hard it can be to start and our friendly, qualified staff provide support and guidance to develop an exercise programme that suits each individual. As Zest's exercise referral co-ordinator, I have helped many people with mental health conditions to become more physically active and to improve their mental health and wellbeing. The exercise referral service is open to anyone in Sheffield. There is a small charge which can be tailored to suit all pockets.

On the NHS Choices website, Dr Alan Cohen, a GP with a special interest in mental health, says that when people get depressed or anxious, they often feel they are not in control of their lives. "Exercise gives them back control of their bodies and this is often the first step to feeling in control of other events," he says. People with depression can benefit from doing regular exercise, but it is especially useful for people with mild depression. "Any type of exercise is useful as long as it suits you and you do enough of it," says Dr Cohen. "Exercise should be something you enjoy, otherwise it will be hard to find the motivation to do it regularly."

We also offer our new Working Well employment support programme which assists people to manage



their health condition, including mental health, to get back into employment. This free service offers one-to-one guidance and information from an employment coach; personal action planning; access to a health trainer service; a 6-week Steps to Excellence cognitive behavioural therapy (CBT) course; support to address barriers; and intensive employability coaching. The service is open to people registered with GPs in Arbourthorne, Broomhill, Burngreave, Central, Darnall, Firth Park, Hillsborough, Manor Castle, Richmond, Shiregreen and Brightside, Southey and Walkley.

We understand that it can be daunting coming to a new venue or activity and that you may not be sure which service is right for you. Just get in touch with me and we can have a chat about your needs or arrange a visit to the centre. Please contact me on:

**Tel: 0114 270 2040 ext.125**

**Email:**

**[jean.kirby@zestcommunity.co.uk](mailto:jean.kirby@zestcommunity.co.uk)**

For more information about Zest's facilities and many other services, please visit:

**<http://www.zestcommunity.co.uk>**

## Mental Health Action Group Sheffield is looking for new members and volunteers

As Mental Health Action Group Sheffield (MHAGS) prepares for the official opening of their new venue on 31<sup>st</sup> July, the groups' officers Scott, Stephanie and Keith took some time out to meet with *Your Voice* to tell us about the many benefits group membership offers and encourage others who might be interested in joining to get in touch.

MHAGS, which is open to anyone with experience of mental health issues, offers a friendly and informal drop-in service from 10.30 am - 4.30 pm, Monday to Friday. Activities at the group include arts and crafts, games' days and a walking group. There is also internet access, charged at 20p per hour, and lunch, cooked daily by Stephanie, is available for £2.50.

According to Scott, the key thing about MHAGS is that it helps people who might otherwise be isolated because of mental health issues to get out and do things with other people, which in turn helps build confidence. Keith, who was very isolated for 7 years before coming to the group, describes MHAGS as "a life-saver".

MHAGS is looking for volunteers with admin skills to help with the day to day running of their office. Although direct experience of mental health issues would be preferred, it is not essential. MHAGS is also looking for individuals who are able to offer a one-off 'taster' session in subjects like relaxation, mindfulness, creative writing, or any other activity aimed at enhancing wellbeing. For more information about these opportunities, or about becoming a member, please contact:

**Scott Milnes**

**MHAGS**

**46 Creswick Street**

**Sheffield S6 2TN**

**Tel: 0114 234 1705**

**Email: [admin@mhags.org.uk](mailto:admin@mhags.org.uk)**

## Life history and mental illness

Service user NVQ Trudge writes about the long-lasting impact of childhood trauma and denial on mental health

Alec Jenner was born in Fulham; Dorothy Rowe in South Australia. They were of the same generation. Alec looked back to a father who was generous of spirit. Dorothy felt harshness and rejection within her family and left, eventually becoming a qualified psychologist. At around the same time these two people were working at the University of Sheffield, Alec Jenner having become Head of the Department of Psychiatry in 1967. By the end of his career, he had taken the view that the symptoms of the people he had met as patients, such as manias, hallucinations, and compulsive behaviours, were not, as his medical training's normative view held, caused by brain chemistry malfunctions or genetic defects but originated within each person's particular life, and that meant family history.

For Dorothy Rowe, insights about the effects of family relationships, especially in childhood, combined with the personality typing tools of psychology (primarily whether a person is introvert or extrovert in their relating) as causes of disturbance and illness were perhaps arrived at more directly and relatively unscathed by her profession's need to disprove theories of causation.

Dorothy Rowe's casework and her ability to communicate in 'plain English' resulted in what became a series of 'self-help' books; some of which have sold in great numbers as proof that people have found her explanations fitted with their own experiences.

How did I meet Jenner or come to be introduced to Rowe in the late 1980s? I had my own breakdown, of course, and I'd come to look upon the upbringing I'd had as being central to that breakdown; that is a hard thing to explore and achieve a different and more balanced view of.

Reading Dorothy Rowe's case notes and illustrative material is also very hard because of its uncomfortable reminders. It isn't an easy read. Some people find it too hard and blank it out, as we do with traumatic experiences, until we are fortunate enough to find someone who accepts our own truth; someone, a listener who validates us.

We idealise and sentimentalise babies and childhood, often being 'overprotective' at the same time, perhaps, as not listening and responding carefully enough. It is worst of all when 'things aren't talked about'. Can any abuse of power - sexual, physical or emotional - be passively denied? It takes effort to deny, to keep quiet. That is active denial. It runs through our whole society, unconfined by class, social standing, religion or culture. Hence we have the appalling spectacle of people in professionalised public serving roles being seen as complicit with abuse.

These things stay with us; they are the raw source material of subsequent mental illness, the reasons for it and those who find themselves taken over by it. In my experience, the prevailing social attitude is, at worst, to demonise mental illness or to not want to talk about it. Such individuals are all too often written off and ignored; the abuse and mental illness continues. A stifling and confusing silence descends; a darkness. These responses are based on our fears; fear of confronting the most hidden parts, the parts of our complex selves that we don't like. Mental illness is not something which can only happen to other people. Alec Jenner and, especially, Dorothy Rowe are rare in their relative positions of power choosing to question the orthodoxies of their chosen professions whose dominant motives can too often be a maintenance of the status quo.

## On Balance

The importance of looking after yourself

I was first diagnosed with depression almost 30 years ago. It can be difficult to deal with and the support that you're offered by other people isn't always that helpful. I've come to realise that the most effective and reliable way of managing my condition is to do my best to help myself.

I've come to see that it's important to find the right balance between engaging in different activities whilst not forcing myself to do too much when I'm feeling low. This involves recognising that I need to include time to rest and slow down when I'm planning my days. Keeping a routine can be useful and it's important to sleep as well as I can, eat as well as I can, and to engage in some form of exercise.

For me, achieving balance involves making choices, taking small steps and not taking on too much at one time. It can also involve limiting the amount of time I devote to similar types of activity and adjusting the demands I make of myself depending on my mood or energy.

I've found that talking to someone I trust can help me get perspective or deal with my fear. I've learned a lot about depression and effective ways to manage it through talking to people with similar experiences and it's been useful to prime my partner and friends to be on the lookout for early signs of distress and to encourage me to talk about how I'm feeling.

Not everything about looking after yourself has to be intense or very demanding. In the past, I've found it possible to focus away from my distress through reading an absorbing book, watching television with my children, or going to the cinema. Ultimately, what really matters to me is maximising the control I exert over my own life, however trying it might become at times.

## Your Reviews

Service user Steve on "A Straight Talking Introduction to Psychiatric Diagnosis" by Lucy Johnstone

(PCCS Books ISBN 978 1 906254 66 7)

Lucy Johnstone is an eminent British psychologist who has been consistently vocal in her criticism of mainstream psychiatric practice. This introductory text outlines why she believes psychiatric diagnosis should be made redundant and replaced with a more open and less deterministic approach.

Johnstone points out that any professional in the field should be wary of perceiving those undergoing severe mental distress as "lacking insight". Her contention is that anyone taking a dogmatic approach can potentially blind themselves to working in a more nuanced and constructive way. In essence, Johnstone believes all professional knowledge is limited, and a better way of working includes the acceptance of this, and that service users have expertise in their own individual suffering.

After asking those in mental health to recognise the need to work collaboratively with service users, Johnstone addresses what she believes are the failures of psychiatric classifications and diagnostic approaches. There are two central works that outline diagnostic criteria and

classifications in psychiatry; the International Classification of Diseases (ICD), under the auspices of the World Health Organisation, and the Diagnostic and Statistical Manual (DSM), which derives from American psychiatry. As Johnstone points out, the DSM tends to be more prominent in UK usage. Her view is that because the US has a health insurance system whereby people need a formal diagnosis to receive imbursement for talking therapies and medication, it has led to a system that purports to be far more based on medical science than is the reality in mental health.

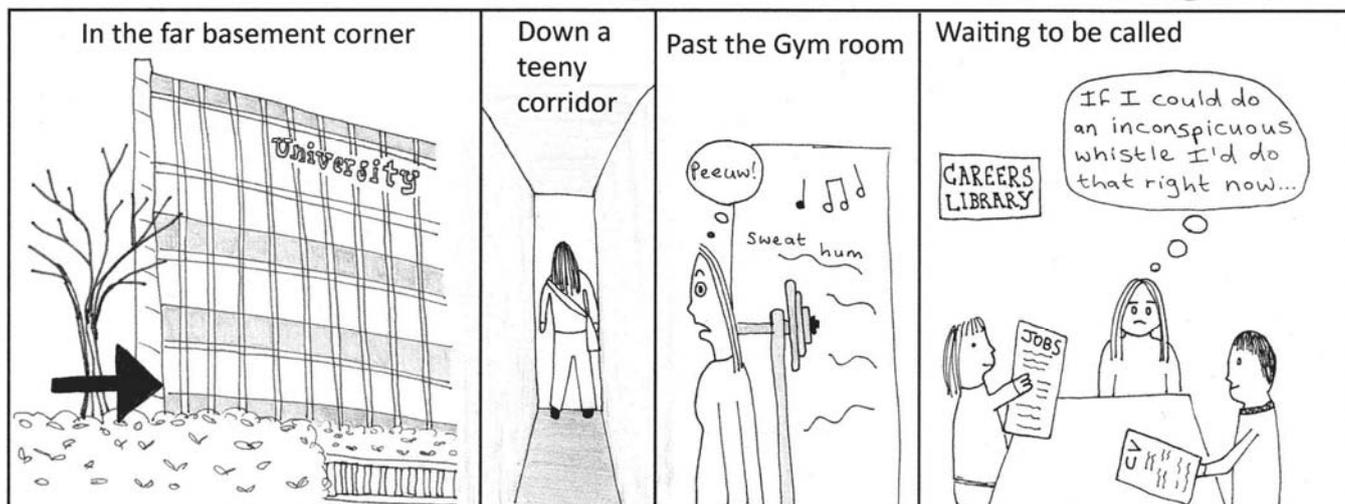
Expanding her critique, Johnstone rejects bio-psychiatry and its notions that mental illness is the result of brain disease and personal pathology. Also mentioned are the poor reliability rates of diagnosis, suggesting the diagnostic approaches are less embedded in science than adherents would claim. An honourable mention goes to Suman Fernando's point that the DSM is based on Western thought and values that do not translate well to other cultures whilst claiming to represent a universal way of diagnosing mental distress. Johnstone presents her own

alternative framework which she says emerges from service user concepts of recovery. Formulation should emerge from the personal narratives of the service user and the help and support they believe they need rather than derived from a category based agenda. Indeed, Johnstone notes how so-called third world countries tend to experience higher recovery rates from psychosis and that the Finnish model of Open Dialogue, with its less medical focus, has the most impressive recovery rates for psychosis in the Western world.

Overall, I found much to admire and stimulate thought in this brief text. I certainly concur with Johnstone's view that mental distress relates to the social and environmental factors that a person experiences in their unique way. However, I do believe we live in a world in which people and professions struggle for pre-eminence, and ultimately any understanding of a concept as complex as mental distress is open to relative tyranny. To conclude, this book is recommended as an entry point to the debate around diagnosing and treating mental distress.

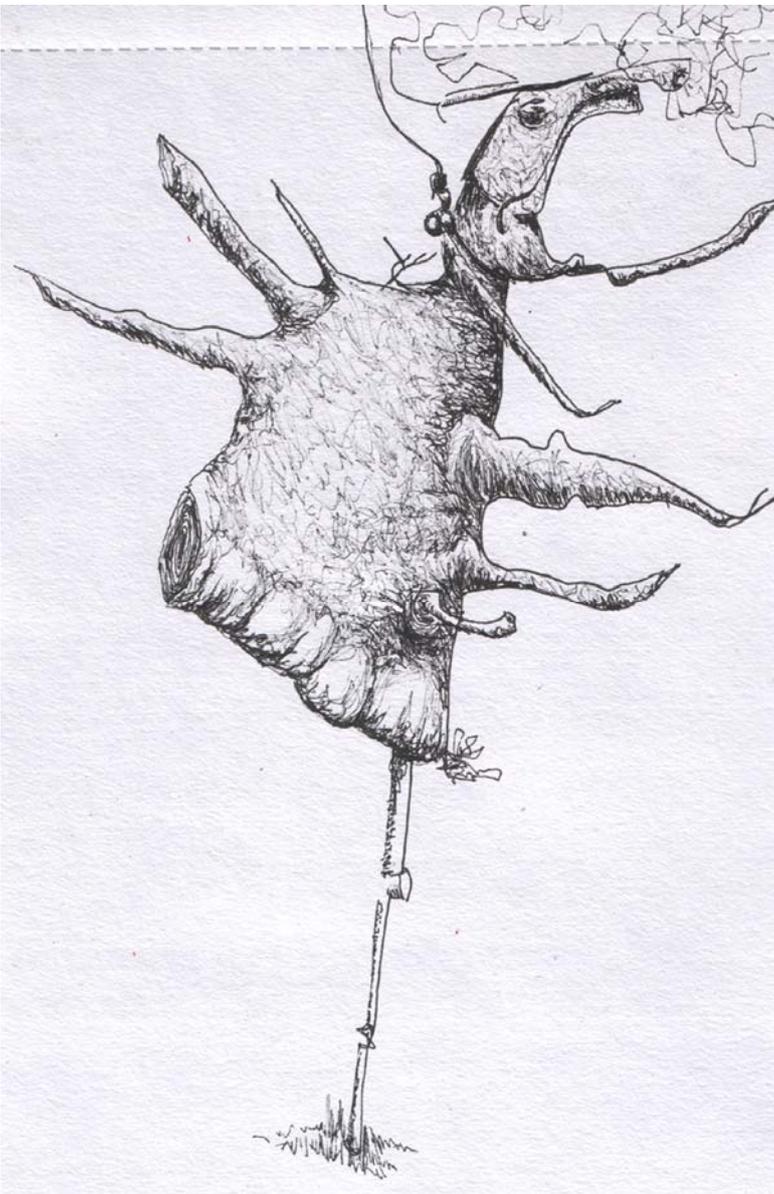
*Your Voice* readers can buy this book at the specially discounted price of £7.50 (postage included). Simply enter this code at the PCCS Books website checkout: yourvoicedx Offer ends 30<sup>th</sup> August 2015. [www.pccs-books.co.uk](http://www.pccs-books.co.uk)

## adventures in counselling : location = afterthought?



Your Artwork

'Floating man in a wire landscape' by Kay Aitch



'Smoking tree' by Kay Aitch

Your Verse**Time is going by**

The clock is ticking, time is going by.  
 I am wasting time.  
 I am thinking and wondering.  
 The clock is ticking, time is going by.  
 I wish time was going slowly.  
 Tick tock tick tock,  
 Time is going by.

Take time and take care.

**C.M.**

**Words on life**

It's a battle and temptation  
 It's victory and glory and celebration  
 It's confession and redemption  
 It's divine comedy and love  
 All rolled into one

**Matthew Sweeney**

**Don't worry**

Don't worry mother and don't worry sisters  
 Just sleep tight and say your prayers  
 Don't cry just laugh

Don't worry mother will teach you right  
 You will be alright  
 Don't worry

And don't worry you will be alright  
 Just sleep tight and don't worry

Don't worry mother and don't worry sisters  
 Just sleep tight and say your prayers  
 Don't cry just laugh.

**C.M.**

**Win a £10 book gift card**

Write us a letter or send us your artwork or poetry and you could receive a £10 book gift card. The Your Voice editorial group will send the prize to the person who contributes our favourite poem, artwork or letter in each issue - not including items from current members of the Your Voice management committee and editorial group. (Joanna Shevlin receives a gift card for artwork in issue 75).

# YOUR NOTICEBOARD

## Walking football

Walking football is a version of the beautiful game where any player caught running concedes a free kick to the opposition. FAD FC offers walking football sessions to men and women aged 50+ who experience or have experienced mental health issues. New players are welcome regardless of fitness and ability level. Come along and have some gentle fun!

**Date:** Every Friday

**Time:** 4 pm - 5 pm

**Cost:** £2.50 per session

**Venue:** Lucozade Powerleague, 3 Stadium Way, Sheffield, S9 3HL

For more information, contact Caroline Elwood-Stokes at:

**Email:** [chairperson@fadfc.org.uk](mailto:chairperson@fadfc.org.uk)

**Mobile:** 07880 965 609

## SUN:RISE Service User Network

SUN:RISE aims to improve the range of ways that service users can become informed and actively involved with the Trust. Meets on the 2<sup>nd</sup> Wednesday of each month. Forthcoming dates are:

- 12<sup>th</sup> August
- 9<sup>th</sup> September
- 14<sup>th</sup> October

**Time:** 1 pm - 4 pm

**Venue:** Conference Room 2, The Circle, 33 Rockingham Lane, Sheffield S1 4FW. For further information please contact:

**Noelle Riggott**

**Tel:** 0114 271 8789

**Email:** [sun.rise@shsc.nhs.uk](mailto:sun.rise@shsc.nhs.uk)

## Mental Health Carers Group

For carers of people with mental health problems. The group meets on the third Thursday of each month, 10.30 am till 12 noon. Dates for forthcoming groups are:

- Thursday 20<sup>th</sup> August
- Thursday 17<sup>th</sup> September
- Thursday 15<sup>th</sup> October

**Venue:** Sheffield Carers Centre, Concept House, 5 Young Street, S1 4UP.

Booking is not necessary, but if you want to talk to someone in advance, please ring Jan or James:

**Tel:** 0114 278 8942

## Carer's Toolbox course

A 5-week course open to anyone who is a carer.

**Start date:** Friday 28<sup>th</sup> August

**Time:** 10.30 am - 12.30 pm

**Venue:** Sheffield Carers Centre

For more information and to book a place, please contact:

**Tel:** 0114 258 4489 ext.108

**Email:**

[mindandbody@sheffieldmind.co.uk](mailto:mindandbody@sheffieldmind.co.uk)

## SAGE Greenfingers Open Day

**Date:** Tuesday 8<sup>th</sup> September

**Time:** 11 am - 2 pm

**Venue:** Grimesthorpe allotments

Try taster sessions of our gardening and arts activities. Help make and eat pizza in our clay oven. See our plans for allotment development. Enjoy a free lunch. Take a tour of our beautiful allotments.

For details, contact:

**Tel:** 0114 274 3651

## Emotional Wellbeing Practitioners Service

Are you isolated, lonely, over 50? Sheffield Mind may be working in your area, offering free, one-to-one counselling in your home or at a local, convenient location. You can talk in confidence to a qualified counsellor about how you feel, why you are isolated or lonely and how you might like to start re-connecting with people and your local community. If you would like to find out more about the service, including which areas of Sheffield the service is available, please phone:

**Tel:** 0114 2584 489

## Recovery in the Community Conference

Sheffield Alcohol Support Service hosts the annual national Recovery in the Community Conference – the event that brings together everyone involved, interested and inspired by addiction recovery. We welcome delegates from a diverse range of backgrounds and representing a diverse range of organisations. Everyone from commissioners, senior managers, CEOs, health officials, policy makers, support and care staff, flock to Sheffield to bring their experiences and findings from the field of recovery.

**Date:** Monday 9<sup>th</sup> November

**Time:** 8.30 am - 4.30 pm

**Venue:** The Crucible, 55 Norfolk St, Sheffield, S1 1DA

Book by 31<sup>st</sup> August to take advantage of our £90 early bird rate. For more details, please visit:

[www.sheffieldalcoholsupportservice.org.uk/conference/](http://www.sheffieldalcoholsupportservice.org.uk/conference/)

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**Your Voice, Office 27, Woodbourn Business Centre, Jessell Street, Sheffield, S9 3HY**

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**Please send contributions for the Autumn issue by 28<sup>th</sup> September 2015**