

New Government figures out on June 12 suggest public attitudes towards mental health are finally taking a turn*. After 15 years where we have seen attitudes deteriorate and deep-seated prejudice, ignorance and fear thrive, there are now signs of improvement. Time to Change, England's biggest anti-discrimination programme led by charities Mind and Rethink, believes that the public are now open to change and this is undoubtedly the time to act to end mental health discrimination.

The Department of Health survey shows improvements including:

- ★ 77% agree mental illness is an illness like any other an improvement of 3% on last year and up 6% since 1994
- ★ 73% think that people with mental health problems have the same right to a job as everyone else, up 7% on last year
- ★ 78% judge the best therapy for people with mental illness is to be part of a normal community, up 8% on last year
- ★ 61% agree that people with mental illness are far less of a danger than most people suppose, an improvement of 4% on 2008

However, it also includes some more alarming figures:

- ★ 11% would not want to live next door to someone with a mental health problem, an increase from 8% since 1994
- ★ Almost a third of young people (16-34yrs) think there is something about people with mental illness that makes it easy to tell them from 'normal people'
- ★ 52% of young people agree people with mental illness are far less of a

Attitudes Towards Mental Health Heading for Tipping Point



Image courtesy of David Reece

- danger than most people suppose, 17% less than people over 55yrs
- ★ 22% feel anyone with a history of mental health problems should be excluded from taking public office When the issue is brought closer to home - only 23% feel that women who were once patients in a mental hospital can be trusted as babysitters.
- ★ 65% underestimated the actual prevalence of mental illness and only 13% were aware that 1 in 4 people will experience at mental health problem.

Sue Baker, Director of Time to Change, said: "Attitudes towards mental health issues are finally beginning to move in the right direction. Deep-seated prejudices are starting to shift and it's a further sign that we are heading towards a tipping point in England and that there is a real appetite for change. Our challenge is to turn attitudinal change into behavioural change to reduce the incidents of discrimination that are still so widely reported by people with mental health problems. Nearly nine out of ten

people with mental health problems have been affected by stigma and discrimination, with two thirds saying they have stopped doing things because of this."

"Today's figures are being used as the baseline, against which we will measure the impact of Time to Change over the next three years but this is just the beginning, there needs to be long term investment for a campaign that delivers real behavioural change over the next 15 years."

Mind's Chief Executive, Paul Farmer said: "We have seen some real improvements this year in the tolerance and empathy that people have towards mental health issues. There has finally been a decrease in the number of people who wrongly associate mental health problems and violence. We are also seeing attitudes turning on people's right to employment but we can't be complacent. We have reached a good starting point for the Time to Change campaign and now we need to stamp out prejudice and intolerance once and for all."

Rethink Director of Public Affairs, Paul Corry said: "One in five people still believe that anyone with a history of mental health problems should be excluded from taking public office. This is a shocking statistic on the eve of a general election which will be fought against the background of politicians from all parties being seen as out of touch with voters. If we as voters really want politicians to reflect the constituents they serve, we need to change our attitudes and open up Parliament to the one in four people with mental health problems who will think twice before standing and coming out about their experiences."

“I never expected to feel grief and loss...”

I clearly recall the shock of recognition I had when, some months after my son had been diagnosed, a mental health professional asked how I was handling my grief.

“Grief? Me? But he’s alive...?” And then, “Yes. Of course that’s what it is...” It was almost a relief. Finally I could identify the awful, heavy feeling that had dragged along with me as each day I continued putting one foot in front of the other.

Finally I could begin to articulate my engulfing sadness that my beautiful boy had already lost almost a year of his youth to this awful, awful illness that I found so hard to understand. I grieved that his friends had moved on from him – they didn’t understand either and at 20 they didn’t have a second to waste as they hurried on into their own futures. I grieved at not having been able to prevent this dreadful illness, at not being smart enough, and at somehow being responsible for his pain...

It took a while to realise that some of my grief was for the loss of my hopes and dreams for my son, some of which, if I was honest, were actually quite different from what he’d wanted for himself. I’d wanted him to go on studying and get a good job, then travel the world before settling down (not too far from us!) with a suitable girl who would make him happy... He’d wanted to travel, and said he’d worry about jobs when he needed to and didn’t ever want to settle down, and in any case, he didn’t want to be like us and have no life outside work! Like all parents, we believed we could see his potential, we hadn’t wanted him to make the mistakes we’d made, and we wanted him to ‘go straight for the

gold’. But he’d been more interested in the journey, and wanted the freedom to go off the beaten track and investigate everything along the path...

Yes, I grieved for my beloved son; I ached to see his hurts, his confusions, and his fear. I grieved to see him trying so hard to be brave, only to be struck down by the betrayal of his own mind which couldn’t differentiate between the real and the unreal.

But my grief, my sense of loss, was also for me, for my innocence, for the loss of my perfect family. After years of sharing my son’s triumphs, joys and aspirations with my own circle of family, friends and acquaintances, I could no longer do this. And I was angry that this should have happened to me, who’d tried so hard to do it all the right way.



It helped me to talk about my feelings; it helped me to read books on grief and loss, and the various stages one goes through. It’s true, much of it is not the same, but there are similarities and I knew instinctively that, whatever the course of my son’s illness, we would never be able to go back to those earlier, simpler days. And there was grief in that too ...

Out of my grief emerged the seeds of a greater tolerance, a greater sense of empathy, and an acceptance that what is, just is. I began developing the capacity to treasure each smile, each small moment of pleasure, each little joy. And I came to truly understand that, as much as I could feel my own pain, the pain he felt was much, much worse. From this realisation came a

feeling of genuine compassion for all sufferers of mental illness, not just for my son.

There are some things in life that I cannot change. There are others I can change and I choose to make these my focus. You never forget. I’m not even sure that the pain will ever go away. But you can learn to live with it.

A mum’s story

Lavender Ward Working Group

In early December 2008, I circulated the Lavender Ward Working Group Update* summarising the position as discussed at the first three Working Group meetings in July, September and November 2008. A short summary of this update was included in the RB Mind December newsletter.

The final paragraph of the first page introduction of the update read: *While progress has been made, there is still more work to be done. The Group will next meet again early in the New Year. It will (i) monitor/review progress in the areas listed in this summary, (ii) additionally focus on discharge, and (iii) at the same time, develop an information sharing protocol.*

This update was sent to other members of the Working Group, to those carers for whom I have email addresses and to Kim and other members of the Acute Care Forum. My covering email to carers included the following: *We are making progress but will need to make sure that "it does what it says on the tin".*

The Working Group was originally scheduled to meet again on 27 January, but this was cancelled.

In early February, I requested ward management feedback on various issues, so I could monitor/review progress in the areas listed in the late November 2008 summary, and

then update carers at the Lavender Ward open evening that had been scheduled for 4 March, which was also cancelled.

Based on the response to my request, and on general background work carried out during December, January and February, I prepared an interim second Working Group Update*, summarising my understanding of the latest position with regard to key areas of ADMISSIONS, WARD ROUNDS, ACTIVITIES and DISCHARGE. This was emailed in early March to other members of the Working Group, to those carers for whom I have email addresses and to Kim, with whom I am working closely in all of these areas.

Unfortunately, key members of the Lavender Team have been on long term leave since the New Year and the work, which was progressing slowly before the New Year, has stopped. The Working Group has not met again since November and a number of carers have expressed concern about (i) the apparent lack of progress, and (ii) their exclusion from Ward Rounds.

The problem with ward rounds was taken up at the Acute Care Forum on May 19th and senior management has now endorsed the statement agreed through the Working Group, and published in the December newsletter, stating; *WARD ROUNDS: 'Mondays, Tuesdays and Thursdays. Subject the patient's agreement, the ward team would be glad to make sure family/carers are invited to attend ward rounds. Alternatively, family/carers may phone the ward to make an appointment to see one of the doctors on the ward outside of the ward review and, if necessary, outside of normal hours.'*

I recently again requested feedback on other key areas. I will update you as and when I have further news.

Peter Marks,
Carers Representative
Acute Care Forum & Lavender Ward
Working Group

** If you would like a copy of the first and/or second Working Group updates, please contact Kim.*

Looking for Solutions Together! Richmond Mental Health Carers Consultation, May '09

A big thank you to everyone who attended the Mental Health Carers Consultation on May 29th. The event was attended by 28 carers and 14 professionals and feedback from the event has been extremely positive.

The focus of the consultation was to try and identify solutions rather than focusing on the problems, many issues have been known about for years and yet there has been no change. It was also an opportunity to bring together the different statutory bodies with a responsibility for Mental Health Carers, in order to foster closer partnership working. The feedback from the event will be given to both the Borough and NHS Richmond as well as to South West London and St George's Trust (SWLStG) for their new Carers, Families and Friends Strategy.

However, I was at another consultation event the other day when someone summed up the potential problem in a nutshell for me, *"I've never been consulted more, I've never been ignored more"*. With any consultation it is only successful if there are matching outcomes, which result in real and measurable changes in people's experiences. This is now the challenge, how can the excellent partnership work that we all took part in on that day be turned into actions? How can the good theory be turned into good practice on the ground?

The first step is to finalise the written report from the day and to identify specific recommendations which can then be taken forward. Everyone who attended the event will receive a copy of the report and it will be available on our website, if anyone else would like a copy, please let me know.

The timing is good. SWLStG Trust is moving forward with their Carer's Strategy, the final briefing document has now been launched. There are four working events set up between August and October to create the strategy itself for submission to the Trust Board.

Carers in Mind will be participating in this process and work from our May consultation will be fed into these working events. *But it is also very important that you as Carers are involved in the process*, please let me know if you are interested and I can give you more information about the sessions and the process.

But it is also important that some of the issues that affect Carers are looked at now - we don't need to wait for an 'official strategy' in order to start. There are several pieces of work that are already in progress.

The SWLStG Trust has commissioned staff training from Drew Lindon of The Princess Royal Trust for Carers on the sharing of information. Confidentiality is an issue which can create serious distress for Carers, it can be used as an excuse not to engage with carers, and yet research and good practice shows quite clearly that there are ways to work with Carers even when there are problems around confidentiality. This training will be delivered over the coming months.

Carers in Mind has been working with the SWLStG Trust and the borough on the development of Carers Assessments. This work is still in progress but you should now automatically be offered a Carers assessment as an integral part of the Care Planning process if you have a care co-ordinator.

We have a new Carers Pack for the Acute Ward and new Carers, it is based on Lu Duhig's excellent pack developed for Avon and Wiltshire which will be available by the end of July.

Things are happening, some areas have shown real improvement already, but there is still a lot to do, a lot further to go. Most importantly we all need to focus on actions not just words.

Kim Willson,
Carers Project Co-ordinator

Richmond Borough Mind Launches new Website!

RB Mind's new home on the internet has now been launched, our new website aims to demonstrate the whole range of changes currently taking place within RB Mind. Our new website aims to become a central resource for mental health information for the borough, as time goes by we will be offering more information on mental health and services that are available to you locally.

Carers in Mind has its own section of the website devoted to information for Carers. We see this as the first stage in developing our internet resources for Carers. I would welcome any feedback on what you think of the new site, how it works for you, and what you would like to see included. Visit www.rbmind.org!

Thank you to Darren Vella, our services Manager for all his hard work in developing the new site.

New Families and Friends Support Group for Personality Disorders



The Garden House team is the specialist Personality Disorder Intensive Treatment Team (PSDITT) within the Richmond Psychotherapy Department. As the name suggests they provide intensive treatment, primarily of a psychological nature, for emotional and behavioural difficulties (personality disorders). We are lucky in Richmond to have one of the very few specialist Teams in the country working with new treatment programmes for personality disorders.

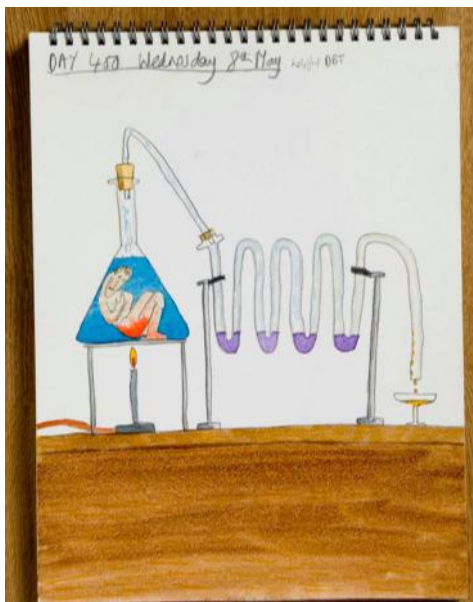
The Garden House team will be piloting a weekly support group for friends and family supporting someone with a personality disorder to provide information and support and, through this, to support the treatment of people with personality disorders. The group will run from 21st September to 21st December at The Maddison Centre.

The group will give you information and education about personality disorders, but also aims to offer carers some reflective space. The content and structure of the group is flexible and open to suggestions from all members of the group.

There will be ample opportunity to ask questions and families and friends are very much encouraged to voice issues or concerns you would like to discuss within the group. Information about the treatment of personality disorder and the treatment programmes delivered in the borough will also be provided.

There will be two Question and Answer sessions on August 17th and September 14th, 6 to 7.30pm, before the group starts so we can discuss what you would like from the group. See Dates for your Diary or talk to Kim for more details.

Bobby Baker's Diary Drawings: Mental illness and me, 1997-2008



Bobby Baker is one of the most widely acclaimed and popular performance artists working today.

She began her diary drawings in 1997 when she became a patient at a day centre. Originally private, they gradually became a way for her to communicate complex thoughts and emotions that are difficult to articulate to her family, friends and professionals.

The drawings cover Bobby's experiences of day hospitals, acute psychiatric wards, 'crisis' teams and a variety of treatments. They chart the ups and downs of her recovery, family life, work as an artist, breast cancer and just how funny all this harrowing stuff can be.

19 March to 2 August 2009. Free exhibition at The Wellcome Collection. 183 Euston Road, London, NW1 2BE. Open most days 10am to 6pm. Tel: 0207 611 2222.

If you have any concerns about any services provided by Richmond Borough Mind, the SWLStG's Trust, including Lavender Ward, or services provided by Richmond Borough Council that affect you as a Carer, please contact Kim on **0208 940 7384** or email: kim.willson@rbmind.org

