

# Helping others on the road to recovery

The new chairman of Dorset Mental Health Forum has good reason to be interested in the work of the Dorchester based independent charity.

Former RAF officer Hannah Walker, 53, who was brought up on the Isle of Wight and now lives in West Dorset, had a glowing service history until she suffered the first of many breakdowns in 1990.

After graduating from officer training with the sash of merit and training as a personnel officer, she had many and varied jobs in the RAF, including Royal visits officer in Germany and a member of the operational staff in the Ministry of Defence.

“I travelled widely and represented both the RAF and combined services at sailing” she said.

But after becoming ill, she was eventually diagnosed with bipolar disorder. “It was decided I should be thrown out of the RAF under the same regulations applied to drug addicts and alcoholics and without a pension.” She said. “It took me well over a year to fight that and for the RAF to admit they had made a mistake”. In the end, she was invalided out of the RAF as a squadron leader in 1991. She retrained as a psychotherapist and worked on an acute psychiatric ward for six years until, once again, she had to retire because of her mental health. Hannah describes her road to recovery as long and hard. She is very passionate about the Forum’s work and it’s why she is so willing to be its figurehead. “I must have taken every tablet known to man in the hope of controlling the symptoms of my illness,” she recalled. “I’ve had 24 admissions

to psychiatric wards during the last 20 years. I started my life as a patient on a mixed ward with nothing to recommend about it. There was violence and quite often I didn’t feel safe. The dormitories had four beds in them and there were communal baths. On night shifts it was very difficult to sleep and a search for a staff member was hopeless. The doctors gave orders to the nurses who gave orders to the patients, most of whom paid no attention. The buildings were grim and the food grimmer. The subsequent hospital I went to was very different. I was consulted about my care at every stage and helped to fill in my care plan. Staff were approachable and had time to talk. There were single rooms and the food was better. Now I go there with a very positive attitude that I shall get better quickly and not spend too much time away from home. “

Hannah said the difference between the two units was very simple. The first practised what is called the “medical model”, where, Hannah said “the psychiatrist was God and in any case one never saw him”. The second unit practised a “Recovery model”. “This places patients in the centre of their care and they are looked upon as the experts when being treated.” Hannah said. “Groups of different kinds fill the days and the occupational therapy room is widely used. Staff have emerged from their hiding places and are very willing to help and to talk. “No longer does the psychiatrist hold such power as there are more than enough people with illnesses to tell them what works best for them. I can’t speak warmly enough of the recovery model and the better outcomes it produces.”