Hello and welcome to the Summer 2006 edition of Reflections.

Again, the last few months since our last edition of Reflections have been extremely busy and challenging for everyone at the Forum, as our services and projects have continued to develop and expand. Whilst these are demanding times, they are also exciting ones as the Forum continues to become more involved in ways that make a real difference.

With this edition we continue with our bigger issue of Reflections, packed with lots of information and articles that we hope will be interesting and inspiring to our readers. Included are details of recent developments in mental health services, an article on "Social Inclusion" (the phrase everyone is hearing!), information for carers, our usual personal experience article taken as extracts from a new and inspiring book by Simon Heyes entitled Art of Recovery - A Pocket Guide to Recovering from Mental Breakdown, plus reports from some of our projects and local clubs and much more besides.....

At the time of going to press with the last edition of Reflections, the Forum was about to hold its Annual General Meeting at the Corn Exchange in Dorchester. It was a particularly wild and unpleasant night, weatherwise, so numbers were down, but the business went on. The most significant event of the evening was the nomination of John Eveleigh as Life President of the Forum, following his standing down from the position of Chair. This position is now ably filled by Andy Pask, formerly Vice-Chair to John. Read his report on pages 8 and 9 and hear more about John, the AGM and the work of the Forum.

If you would like to make a contribution to Reflections, you can contact the Forum at the address below. Please keep sending in your articles, experiences, letters and anything else you would like included in a future edition of Reflections. Other readers have told us that they find your views and experiences inspiring and profoundly helpful and supportive.
Mental Health News

Hotline for Crisis Help
People who have an urgent mental health problem can now turn to a crisis response team ‘out of hours’. People making contact could be service users, carers, health care professionals, NHS Direct, the police, A & E Departments or the local authority’s out-of-hours’ service. The crisis response worker provides support over the telephone and may carry out face-to-face assessments. Run by the North Dorset Primary Care Trust, the service is based at Forston Clinic, near Dorchester, but also has a presence at Dorset County Hospital’s treatment centre.
Contact the crisis help service via Mintern Ward, Forston Clinic, 01305 361269.

Help to be Drug and Alcohol Free
CADAS – the Community Alcohol and Drugs Advisory Service is a friendly and confidential service for people in West Dorset affected by alcohol, illegal drugs and/or prescribed drugs.
It offers help and support to people who feel that they cannot be drug or alcohol free and those who choose abstinence as an aim. The service has been developing and expanding over the last year.
There are now more GP’s involved in prescribing for CADAS clients and a number of prescribing clinics are now based in GP surgeries. Instalment prescribing of medications other than Methadone, such as Diazepam, has been introduced and is helping CADAS to monitor and provide safer dispensing for clients where appropriate.
A pilot project has been set up in Dorchester prison aimed at enabling clients with drug-related problems to receive specialist assessment and the provision of opiate substitution therapy where appropriate. This has resulted in improved communication and a move towards seamless care for prisoners.
CADAS has been instrumental in setting up a local drug intervention programme, aimed at addressing drug-related offending. This has included the appointment of a specialist substance misuse nurse, who works in a multi-disciplinary team based in Weymouth. Clients have continued to be involved in developing the service and consultations have led to a drop-in session in Sherborne, which has been well supported and is seen as a great success.
There are plans in the next year to continue to build on the GP shared care prescribing clinics and to set up further drop-ins for service users in rural areas in West and North Dorset. Several specialist nurses are taking courses in nurse prescribing, which it is hoped will revolutionise the way CADAS delivers substance misuse services.
For further information, contact CADAS on 01305 265635

West Dorset Mental Health Forum in partnership with the Dorset Drug Action Team will shortly have in post a Substance Misuse Participation Worker. The purpose of this post will be to promote service users' participation in decision making across Dorset's substance misuse services. The DAT Participation Worker will be based at the Forum office in Dorchester, covering the whole of Dorset and working with substance misuse service users. Part of the worker’s role will include the development of the substance misuse service users’ forum. If you are interested in becoming involved with this work, then contact the West Dorset Mental Health Forum on 01305 257172.
Online Check for Council Tax Benefits

www.dorsetforyou.com/benefitscalculator leads you to a new web service which has been launched to help people in Dorset who may be struggling to pay their rent or council tax. The service is confidential and gives an instant on-line benefits estimate. The benefits calculator is just one of the features on www.dorsetforyou.com, an award-winning website for Dorset County Council, Christchurch Borough Council, East Dorset District Council and West Dorset District Council. Through the main website you can also search for and apply for council jobs; search for, reserve and renew library items; make a complaint; report a problem or contact any council department; view planning applications and comment or apply online; apply for a school place.

Home Library Service

This service has been running for more than 30 years, delivering books to people who are unable to visit the library because of disability or frailty. Library staff visit new readers to draw up a profile by finding out what kind of books they enjoy, and whether they prefer to read standard format books, large print, or audio. The reader is then matched to a volunteer, from a pool recruited and managed by the WRVS – rather like the meals on wheels service. The volunteer delivers a selection of books every three weeks or so, and up to 18 items can be borrowed at any one time. The service is completely free, with no charges on ordering particular titles and no penalties for late returns.

Anyone who would like to sign up for the home library service can contact their local or mobile library, the county library H.Q. in Dorchester, on 01305 224655, or go to www.dorsetforyou.com/libraries

FAB Team

The FAB (Financial Assessment and Benefit) Team offers an integrated range of services to all pensioners. Visiting Team officers deal with all aspects of care, from assessing the amount of benefits the customer should be receiving to the amount they are liable to pay for home help. They can also give guidance on other local services.

Based in Weymouth, the FAB team was created by the County Council and the Pension Service. It is one of only a handful of similar teams across the country.

The team have links with all the major welfare organisations and, in addition to their direct help and guidance to individuals, talks can be arranged to local organisations to give information on all aspects of benefits and local services. Information points are provided in most county libraries, mobile libraries, and in some Age Concern and CAB offices.

Over the past year, the team has visited thousands of customers and as a result many of them have received increased benefits—which really is a FAB record!

Phone Number problems

Many people complain that local/free phone numbers 0845/0800 etc., such as those used by the benefit agencies, are actually more expensive to call from mobiles than from standard landlines. Many people, particularly people in vulnerable housing, only have mobiles so—as usual—the worst off get the worst deal. Most of those numbers actually have an equivalent (geographical) number you can look up the alternatives via www.saynoto0870.co.uk.

It’s all perfectly legal and above board! The direct line for the DWP disability helpline for DLA etc. is 01253 598900.

HOPElineUK, a telephone helpline staffed by professionally qualified advisers who can give support, practical advice and information to anyone who is concerned that a young person they know may be suicidal, has been set up by Registered Charity, Papyrus.

HOPElineUK is at 0870 170 4000.

Further information about Papyrus or promotional material for HOPElineUK from Rossendale GH, Union Road, Rawtenstall, Lancs BB4 6NE. Tel 01706 214449. Email admin@papyrus-uk.org. Website: www.papyrus-uk.org
Finding a way back after mental breakdowns.

I only discovered later that people around me had experienced similar suffering.

Breakdowns did not happen out of the blue.

This edition’s “Personal Experience” feature comes from Simon Heyes and is brought to Reflections in extracts from his new book, entitled

**Art of Recovery**

*A pocket guide to recovering from mental breakdown.*

This is a wonderful book full of inspirational stories, quotes and suggestions. (See page 7 for details of how you can get a copy of Simon’s book.)

**Introduction**

This is a guide to recovery from mental distress written by someone who has had two mental breakdowns. I found a way back to leading a meaningful life and want to share my experience along with the accounts of others who overcame similar obstacles and turn their lives round. My aim is to offer a path back to leading a full and healthy life.

**Inactive**

I had my first breakdown in 1988, when I was twenty-three. I was in Australia on a working holiday and playing rugby in my spare time. I felt out of sorts to begin with. Then came a creeping sense of unease, which I couldn’t shake off. I could not sleep, lost all sense of fun or vitality and became preoccupied with the past, lost interest in the present and saw no hope for the future. I was consumed by negative emotions of guilt and panic. My consciousness had altered from relatively normal to troubled, which left me feeling disorientated.

Deep down, I hoped for a miracle. Something to bring back my old self. But my distress only grew. It became so intense I could hardly function. Why couldn’t I just pull myself together? I could cope with rugby, people and work but not my mind. Nothing had prepared me for this experience. I went to see a doctor who gave me some pills. I took them all at once and my flatmates found me the next day. They took me to hospital where I was injected with a high dose of medication to calm me down. Within hours I had been admitted to a psychiatric hospital. The first thing I remember clearly is waking up miles from home, feeling tormented. I had broken down in mind and spirit but I tried to blot out what was happening. I refused to accept that I had been admitted to a psychiatric hospital. I wanted to keep my identity intact at any cost.

I returned to England with my confidence in tatters. The thought of social interaction was daunting enough, let alone talking about what had happened in Australia. I felt embarrassed about what had happened and the stigma attached to being mentally unwell made me want to hide away. I only discovered later that people around me had experienced similar suffering. Mental distress had also cast a shadow over members of my local rugby club, fellow school pupils, friends and family. We shared a common sense of shame, which left us feeling isolated.

I put my problems on hold in the hope that one day they might disappear of their own accord. That day never came and seven years later, I had another breakdown. I was about to qualify as a general nurse at a hospital in Cheshire. Once again I ended up in psychiatric care.

(Continued on page 5)
downs did not happen out of the blue. The warning signs had been around for some time. I had been an anxious child, uncertain of myself. I had struggled to live up to the expectations that I had set myself. I suffered from phobias and spent most of my teenage years convinced that I had cancer.

Feeling mentally unwell is like having someone place a heavy weight on your mind and soul. The pressure is unbearable. I have never forgotten this feeling. Giving up my career in nursing was a painful decision to take. Perhaps my breakdown was my mind’s way of telling me that the path I had chosen was not for me. I pushed myself beyond my abilities. Perhaps my breakdowns were the only mechanism that my body could use to rein in my persistent nature.

Life can lose its point. Anyone who has had depression will know the feeling. Left unchecked, it can lead to suicidal thoughts. Some people appear to treat suicide as a taboo subject. Perhaps they are unwilling to engage with it for fear of encouraging deeper introspection and making the situation spiral out of control. I found it more helpful to try and tackle the question of why live. I turned to literature and sought out fellow souls who had stared into the abyss. I found solace within the pages of books such as Leo Tolstoy’s autobiographical A Confession, George Eliot’s Daniel Deronda, Daphne Du Maurier’s I Will Never Be Young Again and Albert Camus’s The Myth of Sisyphus. In each book, I met characters who had stepped back from the brink of suicide. They answered yes to the question, is life worth living? This helped light up a path out of the darkness and put my trust back in the living.

Creative

As the sharp edges of my mental breakdown softened, I became aware of the old “Simon” returning. It was time for me to create a new life rather than simply react against my situation. I decided to plough my energy into creating a sustainable recovery. I told myself that I wanted a joyful life like everyone else and I set about making it happen.

I started to find my identity and place in the world. I produced a diary that I hoped others would find helpful. I began to play cricket again. I also found the courage to travel. In 2004, a trip to the US gave me an opportunity to go back to Australia, the place I had left ignominiously some sixteen years before. This time I returned feeling mentally and physically well. It was cathartic, like the unicycle trip across the UK.

It took me two breakdowns to accept the gift of my character with grace. After my second breakdown I decided to question the social and economic assumptions that underpinned my life. I searched for alternative ways of living and working that would suit me better. I reined in my expectations, accepted that I had a finite reserve of physical and mental energy and discovered the art of pottering. My solution won’t suit all but there are many other alternatives out there.
The Self-Help Page

Help/Support/Information Lines:

Bristol Mind Helpline. 0117-983-0330
Cruse Bereavement Care.
(Western Dorset) 01305-262016
MIND Helpline. 08457-660-163
(Mon—Fri, 9.15am to 4.45pm)
Mindline. (Somerset) 01823-276892
(Fri & Sat 8pm to midnight)
NHS Direct. 0845-4647
ParentLine Plus. 0808-800-2222 (Free confidential helpline, for anyone in a parenting role)
Relate. (Dorset) 01305-262285
(Yeovil & District) 01935-472485
RETHINK Helpline. 020-8974-6814
(Mon to Friday, 10am to 3 pm)
RETHINK. (Dorset area) 01308-459762
Samaritans. (National) 0845-790-9090
(Weymouth) 01305-771777
(Yeovil) 01935-476455
SaneLine. 0845-767-8000 (12 noon to 2am)
Victim Support. 01258-453100
Wand. Support Line (N. Devon). 0808-800-0312
Youngminds. FREE Helpline. 0845-766-0163
(Mon & Fri 10am—1pm, Tue to Thur 1-4pm.)

Domestic Violence:
Dorset Women’s Outreach Project.
Freephone. 0800-5877-480
North Dorset Outreach. 01747 858555
Christchurch & East Dorset Outreach.
0800-3284457
National Domestic Violence Helpline.
24 hrs. Freephone—0300-2000247
Police. (in an emergency dial 999)
Eastern Domestic Violence Officer.
01-202-226647
Western Domestic Violence Officer.
01305 2266547
Women’s Aid Advice Line. 01305-262444
Women’s Refuges:
Bournemouth. 01202-547755
North Dorset. 01747-858555
West Dorset. 01305-262444
Weymouth. 01305-772295
Yeovil. 01935-427584
Rape Crisis Line. 01202-547-445
Elder Abuse Response. 080 808 141

Drugs & Alcohol:
Alcoholics Anonymous. 01904-64-40-26 (to find local group)
ADFAM 020-7928-8900 (confidential support & info for families/ friends of drug users)
Al-Anon Family Groups. 020-7430-0888
Battle Against Tranquillisers. 0117-966-3629

CADDAS. 01305-265635 (Community Alcohol & Drug Advisory Service)
Dorset Drug & Alcohol Advisory Service.
01308-427195 or 01305-760799
Drinkline. 0345-32-02-02
National Drugs Helpline. 0800-77-66-00

Self-help/campaigning groups:
Carers National Association. 020-7490-8818
N. & W. Dorset Carers Forum. 01305-251772
Depression Alliance. 020-7633-0557
Eating Disorders Association. 01603-621414
First Step to Freedom. 01926-851608
Hear Voices Network. 0161-834-5768
Help & Care (Pokesdown). 01202-432288
Manic Depression Fellowship.
020-7793-2600
National Self Harm Network.
PO Box 16190, London NW1 3WW
No Panic. 01952-590545
OCDF-UK. 020-7226-4000 (For people affected by Obsessive-Compulsive Disorders)
Pax (for anxiety) 0208-3185026
Prisoners Advice Service. 020-7405-8090
Shelter. 0808-800-4444
Triumph Over Phobia. 01225-330353

Advocacy / Mediation / Advice:
Citizen’s Advice Adviceguide.
www.adviceguide.org.uk
Consumer Credit Counselling Service.
0800-138-111
Dorset Advocacy. 01305-251033
Dorset Mental Health Advocacy. 01305-261483
Dorset Family Mediation. 01305-751781
Shaftesbury Advice Centre. 01747-855822
Children:
Childline. 0800-1111
Children’s Legal Centre Advice Line.
01206-873-820
Children’s Society Waves. 01305-768768
(Advice and Info. for young people under 25)
Kidscape. 0845-1205-204
National Youth Advocacy Service.
0151-342-7852
Outlooks—NCH Action for Children.
01303-823794
Routes (Dorchester). 01305-261318
Connexions. (Dorchester) 01305 260600
The Shaftesbury Young People’s Project (TOBYS).
01747-850860
Tides (Weymouth). 01305-780563
Treads (Young People). 01258-455449

Contact the Forum Office between 9.30 am and 3.30 pm on 01305 257172
Contact the Forum’s Advocacy Service on 01305 2612483
Ask for Catherine Bramble (West of the County)
Or Sarah Sherran (East of the County)
Dorset Social Care and Health (out of hours) 01202 668123
Ten Tips to Prevent Panic

• **Reduce your exposure to unnecessary stress.** Find ways to express your needs and assert yourself more successfully.

• **Change your life style.** Take regular exercise. Avoid stimulants such as cigarettes and alcohol. Eat regular meals and avoid processed foods and drinks, to keep blood sugar levels stable.

• **Don’t bottle up your emotions.** Find someone to confide in, such as a family member, friend or counsellor.

• **Develop coping strategies.** Look in cognitive therapy, or other talking treatments; consult self-help books; ask about anxiety management courses.

• **Join a support group.** This allows you to share feelings and discuss strategies.

• **Learn to breathe from your diaphragm.** With hands on stomach, slowly breathe in through your nose whilst counting to four. Your stomach should rise (not your chest). Breathe out, to a count of four, and your stomach should collapse. Repeat four times.

• **Learn a relaxation technique.** First close your eyes and breathe slowly and deeply. Locate any areas of tension and imagine them disappearing. Then, relax each part of the body, bit by bit, from the feet upwards. Think warmth and heaviness. After 20 minutes, take some deep breaths and stretch.

• **Focus on positive aspects of your life.** If you feel an attack coming on, try to distract yourself with a pleasurable task.

• **Don’t depend on others for reassurance.** Tell yourself you’re not dying or going mad. It’s better to rely on yourself and your own coping strategies.

• **Accept and face your feelings during an attack.** They then become less intense.

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**Concluding Simon Heyes’ Experience of ‘The Art of Recovery’**

(Continued from page 5)

**Relapse**

Confidence is crucial in dealing with setbacks. The belief in yourself to overcome whatever the world throws at you. I realised that it was not in my best interests to interpret one mistake as total failure and give up. My mistakes were opportunities to learn. With each mistake, I learned a little more about myself. That gave me more confidence until finally, I felt able to fully re-engage with the world.

So how am I today? I still struggle with depression and panic attacks but I live a relatively normal life. My experience has taught me that recovery starts when we hit rock bottom. From there we can build our lives on stronger foundations. I am no longer embarrassed about my mental condition. In the past, I wasted a lot of energy keeping it hidden. Now I see my breakdowns in a different light. They forced me to look at myself and make positive changes. I can now congratulate myself for achieving what I do in spite of my mental state. I count my blessings and make the most of my life.

Recovery is about possessing that true self again. We should not feel ashamed about who we are and what we have been through. Recovery is realising that we are not abnormal; that we are in good company. Recognising the shared patterns in our mental breakdowns can help forge a renewed spirit of community and reduce feelings of isolation and loneliness.

This guide is about facing up to where you are in your life, deciding for yourself what recovery means for you and inspiring change to achieve it.

Recovery has no finite end. It is ongoing and needs nurturing.
It was Shaun who gave me the idea for this title and, as it is also a line from one of my favourite bluesmen, Robert Johnson, I picked up on it straight away. Summer is a time for new beginnings and fresh starts and the Forum continues to face new challenges and opportunities yet is proud in the knowledge that it continues to represent the voice of service users across the area. Before I look at what the future holds, there is one change at the Forum that I feel that I must mention first.

At the AGM in November last year it was announced that, after having been with the Forum for 10 years, our Chair John Eveleigh decided to stand down in that capacity and accepted the position of Life President. As a service user himself and often being in poor physical health, John has nevertheless spent a huge amount of his own time and energy in representing the Forum and its members on numerous groups and committees. Indeed he still continues to do so, in addition to years of sterling work at 5 Carlton Road, with the Befriending Scheme, at Abilities and with the Stroke Club. John has a passion for philosophy, is widely read and is acutely aware of current issues in many fields making him a very interesting person and very good company. He is, moreover, a personal friend of mine, sharing a common interest in music (particularly jazz) that has led to many a joyous visit to concerts far and near. I am delighted that he will be staying with the Forum in his new role and I hope that he will be around for many years to come.

On John’s departure I had the honour of being voted your new Chair and I hope that I will be able to be as effective an officer as he so proved to be. To be able to do that means that much of the work that John carried out on his own is now carried out by a whole team of people, our Service User Representatives (SUR’s).

This dedicated group have gone from strength to strength, gaining confidence in themselves and their ability to both hear and speak on our behalf which has led to them becoming respected as experts in their own right through their professional approach and effectiveness. This also means that their services are called upon even more to act on our behalf. I am absolutely delighted to hear that, thanks to a successful Comic Relief bid and to other small one-off funds we have received, the Forum will be able to offer a part-time post to Sue Forber to enable her to fulfil this demand.

One of the cornerstones of the Forum’s work is that of our Advocates. Catherine and Sarah, more than ably assisted by Christine Carley (who has taken over where Des Smale left off), have continued in many cases to achieve great results on behalf of people who use the service and we should feel proud to have them on the team.

As I have said, this is a time of change and the Forum has many challenges ahead of it. Not least of these is its role in representing service users views in opposing the Mental Health Bill. As part of the Mental Health Alliance we feel that we have proved that the government must embrace the reality and not just the concept of acting upon the views of the people who are actually going to be affected by their actions. Please continue to let the Forum know what your views are on any of the mental health services that you come into contact with. This after all is
New Forum Chair, Andy Pask, Reports

exactly what we are here for, to represent as many service users as possible and to get their opinions listened to and acted upon.

Across the country, the whole way in which services are to be administered is going to be radically changed very shortly and Dorset is to be no exception. Basically, the current system of several Primary Care Trusts is to be replaced by one Countywide organisation. The government have placed quite a tight schedule for this to take place yet there still seems to be a degree of uncertainty on how this will actually work in practice or what scope this new organisation will have and exactly what form it will take. Once again, thanks to the hard work put in by all the staff and workers at the Forum, we have been included from the start in consultation with the service providers and we will continue to speak out for the rights of all service users and in their best interests.

Why "standing at crossroads" you may ask. Two reasons really; firstly, so much of the good and thorough groundwork done over the last few years is now paying off and this has allowed the Forum to branch out and be effective in more and more areas. Secondly, we are proud that we have not forgotten our roots, our original road, and we must continue to do so to make sure that whatever directions we pursue we stay on the right track. I strongly feel that the Forum has it right: we have stuck to our ethos and represented you, our members and sufferers of mental distress, and have gone further in staying independent and embracing service user involvement and representation in the fullest sense.

By implementing such a pure model and employing service users (as opposed to health or social service professionals) to act as SUR's means that the Forum is far less likely to blur issues or suffer from any conflicts of interest. Being a service user myself, I am particularly pleased that the Forum has chosen this way of operating the scheme. The SURs have proved their worth through their hard work and dedication and have earned the respect of both other service users and the many committees and groups that they attend.

There are some awkward changes ahead, but I am certain that we are more than capable of standing up and getting our voices heard. We have proved that we are a professionally presented group of people that deserve to be respected; this is a source of great pride to me and, I hope, to many of you.

On a lighter note, this is my favourite season of the year and I wish you all every good health and hope that you enjoy a beautiful summer. Andy Pask

Forum Membership: To get your FREE Membership card, please return this form to the Forum

Title

Forename:

Surname:

Address:

Telephone Number:

Type of Membership:
(See reverse of form for details.)

Full ....................

Associate ...............  

Would you like to know more about Service User Involvement? Yes ..........  

Would you like to know more about joining our Executive Committee? Yes ........  

Signature: ........................................................................................................

Date: ...........................................

We have not forgotten our roots, our original road ...

We are more than capable of standing up to awkward changes ahead.
It’s Your Forum ...
It’s Your Voice

Membership of the Forum.
You can become a member of the West Dorset Mental Health Forum, free of charge. It is open to anyone who wishes to join. Members will be informed of meetings and relevant events taking place in and around Dorset. They will also be sent a copy of our Reflections newsletter regularly. A 24 hour telephone answering service is available when the office is not staffed. To apply for your free Membership card, cut out and complete the form on the back of this page and return it to the Forum.

TYPES OF MEMBERSHIP

1. FULL MEMBERSHIP: Open to users of Mental Health Services in Dorset. Members will be entitled to take part fully and have voting rights.

2. ASSOCIATE MEMBERSHIP: Open to anyone interested in mental health. Members will be entitled to take part fully but have no voting rights.

The information you send in will be completely confidential at all times and will be subject to the 1998 Data Protection Act.

To get your Free Membership Card please complete and cut off this form and return to the Forum at:
29-29A Durngate Street, Dorchester, Dorset DT1 1JP

In the last few years, "user-led" movements like the Forum have become widely accepted as the best way of putting forward the interests of members, sufferers and "service users" - in this case, mental health service users and their carers. Over the years, we have all worked very hard to persuade those who provide our services, to listen to us and what we say we want, rather than let them decide what's right and wrong for us without asking. This has been successful and now service providers are committed to working in partnership with the people who use their services, in order to provide the best service possible.

The Forum continues to make this happen, but we always need to find more service users and members to join the Forum and become involved in its work, in order to provide a loud enough voice and ensure that service users' views are well represented. As a member of the Forum, you would be able to share your views and hear those of others. Your views will help to shape the services that are available to all mental health sufferers. As the Forum has grown over recent years and with the successful establishment of our Service User Representation Project, we are able to develop more ways of gathering people's views about services.

If you are interested in becoming more involved and you would like to become part of a wider group of people who we consult about specific issues, who represent us at meetings and conferences, who help to train mental health professionals, who are involved in setting up peer support groups and the shaping of specific services, then please join the Forum and tick the "service user involvement" box on the form below.

Please think about offering your help. This could be anything from just filling in the membership form to add yourself to our mailing list, to being willing to talk to us about helping as a volunteer or as a service user representative. You don’t need experience – we will help, train and advise you.

Join us if you can. It’s Your Forum. It’s Your Voice.
Problems with Stelazine (Trifluperazine)?

Some people have experienced problems with the changes to Stelazine and getting prescriptions filled. Research and discussions have resulted in the two following suggestions:

1. As the 5mg tablets seem to have been withdrawn and have to be replaced with 1mg tablets, pharmacists need to carry more stock. It is suggested that contacting your GP for your prescription earlier than usual and leaving it with your local pharmacist for a couple of days, before you go back to collect it will enable your pharmacist to complete your prescription request in full. Using the same local pharmacist who can get to know your needs could make getting prescriptions filled in this way easier in future.

2. Although many people have found Stelazine helpful over the years, there are modern drugs coming onto the market that have fewer side effects and are more focused in the way that they work. It is suggested that discussing other options with whoever prescribes your medication may be useful, with a view to gradually changing over to newer drugs that are more readily available.

Mental Health Awareness in Pregnancy

A new strategy for helping women with pre and postnatal depression has been launched in Dorset. Between 10 and 15 per cent of women are known to be affected by post-natal depression. Early detection and treatment safeguards both the mental health of mothers and babies.

Over the past year, health professionals in North and South West Dorset have been trained in a new care ‘pathway’ that aims to raise awareness and improve treatment for both antenatal and postnatal depression. This was launched recently at a special event at Dorset County Hospital in Dorchester, attended by GP’s, psychiatric services, primary care professionals, school nurses, health visitors, practice nurses and midwives, amongst others.

Key speakers included a service user, consultant clinical psychologist Peter Thorne and consultant psychiatrist John Mann.

Important work is also being undertaken between North Dorset Primary Care Trust’s Women’s Mental Health Strategy Group and Dorset’s Midwifery Services to look at how the antenatal and postnatal mental health needs of women can best be served. This work is advised by women who have used services and further input is always welcome.

If you are interested in sharing your views on these issues, please contact Sarah Battersby, Women’s Mental Health Development Worker, or Becky Aldridge at the Forum in Dorchester.

OCD Support Group

OCD in Mind is a support group for people who experience Obsessive Compulsive Disorder (OCD) and related problems, and their friends, family and carers. OCD is the name given to a condition in which people experience repetitive and upsetting thoughts and/or behaviours. The group provides a safe space for people of any age with OCD to talk to others dealing with the same problems. There is a regular guest speaker as well as informative videos, books and tapes brought in by members. This is an open group and anyone who feels that it might be helpful will be made very welcome. There is no need for a referral from a health professional.

OCD In Mind Support Group meets monthly at the NHS Training and Development Centre, Shelley Road, Boscombe.

Another OCD support group is run by Obsessions Together. This meets at 7 pm on the first Tuesday of the month at the Winton Resource Centre, 528 Winton Road, Winton.
The phrase “social inclusion” is one of many examples (along with “recovery” and “care pathways”) of jargon that seems to be in just about every document about mental health which you pick up these days. But what does it actually mean?

And, just as importantly, what doesn’t it mean?

A visit to the government’s Social Exclusion Unit website (www.socialexclusion.gov.uk) tells us that there are two main questions to be answered:

“What more can be done to enable adults with mental health problems to enter and retain work?”

“How can the Government ensure that adults with mental health problems secure the same opportunities for social participation and access to services as the general population?”

So, the government’s focus seems to be on identifying two main elements to social inclusion, a) employment and b) social participation.

If we look at employment first, there is a recognition that, “although many people with mental health problems want to work, fewer than a quarter actually do”, and in the absence of a job, often people “do not have other activities to fill their days and spend their time alone”. The website states that “More than 900,000 adults in England claim sickness and disability benefits for mental health conditions” and that this group is “now larger than the number of unemployed people claiming Jobseeker’s Allowance”.

So – is the government trying to force people with mental health problems into work, simply to reduce expenditure on Incapacity Benefit, or is the picture more complex than that?

In fact, the government’s Mental Health and Social Exclusion report includes much evidence, and many examples of good practice across the country, to show that people with mental health problems can benefit hugely, both in terms of increased self-esteem and social interaction, as well as an independent income, from being able to access and hold down a job – but it needs to be the right job, and the right number of hours, for the individual, and crucially there needs to be support readily available to help people through the process of finding and keeping work.

With the stigma and discrimination factor thrown in (the Social Exclusion Unit website states that “Fewer than four in ten employers say they would recruit someone with a mental health problem”), clearly there can be no simplistic equation that social inclusion means employment, whether we are ready for it or not. Not everyone with a mental health problem will be capable of employment (and the government recognises this in the Mental Health and Social Exclusion report, which says that the development of day services should include “access to supported employment opportunities where appropriate”), but for those who are, the right type and level of work can and does contribute enormously to social inclusion. What we need is help and support to access and then maintain that employment, as well as services which make life meaningful for people who cannot work.

What of the other main focus, social participation? There are several factors included within this. The first is the government’s recognition that “Adults with mental health problems are one of the most disadvantaged groups in society”. Another is that “Social isolation is an important risk factor for deteriorating mental health and suicide. Two-thirds of men under the age of 35 who die by suicide are unemployed”. A third is that “Mental health problems can have a particularly strong impact on families, both financially and...
emotionally”. So people with mental health problems may well be living alone, on benefits, and without family support.

Given all these factors, government policy now recognises that it is vital for mental health services to assist service users to participate in ordinary, everyday community and social facilities. The government’s agenda is that it is no longer enough simply to provide specialist mental health day services, which can have a tendency to be separate from the community and do nothing to tackle (or even worsen) the exclusion of service users from wider social participation. This is why there is so much emphasis currently on re-designing day services to shift the focus on to providing access to mainstream services in the community, including employment, adult education, leisure facilities and social activities. Across Dorset, service users are being asked to participate in re-designing day services so that they contribute to social inclusion, rather than social exclusion.

But this doesn’t mean an end to specialist mental health services – social inclusion doesn’t mean we will be forced to lose our dedicated, specialist services and be thrown out into an uncaring wider community with no support. What underpins the policy is a recognition that there is still a requirement for specialist services that can provide us with a haven and refuge when that is what we need, but that those services should also act as a bridge across to the wider community, helping us to participate in ordinary, everyday social interactions within our local community, so that our havens don’t become ghettos which institutionalise us and reinforce our exclusion from society.

Sources:
Social Exclusion Unit website, Office of the Deputy Prime Minister (www.socialexclusion.gov.uk)
Mental Health and Social Exclusion report, from the Office of the Deputy Prime Minister (this report can be downloaded from the Social Exclusion Unit website)

Busting all that Jargon!

Second in our series explaining the meaning of terms that are heard all too often!

AFTER CARE. Services provided for people discharged from various institutions. Whilst varied, the services aim to help people to settle back into the community, and may include help with housing, employment, or benefit claims.

ASSESSMENT. The process of objectively looking at the needs of an individual and deciding what help, if any, they should get through the Social Services Department. Assessment is a joint process involving the applicant, their carers and other relevant agencies.

ASW. Approved Social Worker. A mental health social worker specifically trained and approved by the Local Authority to use powers under the Mental Health Act 1983. An ASW is involved in situations where someone needs to be admitted to hospital ‘compulsorily’, against their wishes, because of the effects of their mental illness.

CARE IN THE COMMUNITY. This term describes the policy which has led to the closure of large hospitals for people with mental health problems. It aims to encourage and support people to be cared for in their own home, or other ‘homely places’ in the community, rather than in institutions.

CMHN. Community Mental Health Nurse (may be referred to as CPN Community Psychiatric Nurse.) Psychiatric Nurse trained to work with people with mental health problems living in the community, or with their families.

CSO. Carer’s Support Officer.

DOMICILIARY CARE. Domestic and specialist care arrangements or services which support an individual living in a private household either alone or with a carer.

DSS. Department of Social Security. Also known as the Benefits Agency, this is the Government Department responsible for financial support of people who are sick, unemployed or eligible for welfare benefits, such as income support, disability living allowance or attendance allowance.

GENERAL PRACTICE FUNDHOLDER. A doctor’s practice that has accepted responsibility for funding to purchase health care for their patients.
Information and News for Carers

Carers Allowance and WFI's

Carers claiming Carer’s Allowance will no longer need to attend Work Focussed Interviews (WFI’s) following a campaign by the charity **Carers UK**.

Since 2002, carers claiming the allowance have been required to take part in WFI’s as a condition of their claim. Many were worried about the compulsory interviews and having their benefits stopped if they did not attend. **Carers UK** raised their concerns with ministers at the Department for Work and Pensions and now regulations relating to WFI’s have been changed. They will no longer be a condition of the claim and carers no longer face a potential sanction for refusing to attend a WFI.

Instead, carers will be offered the opportunity to attend a voluntary WFI, which they can take up at any time in their claim.

“This change recognises that for many of the UK’s carers going out and finding paid work isn’t a realistic option. The interview is now voluntary and can focus on more than just supporting someone back to work and should include a full benefit check and a discussion about other options which carers might not have considered, such as learning or training. This could provide essential support to a carer who is thinking about returning to work, perhaps because their caring role has changed or is coming to an end.” [Chief Executive of Carers UK]

This change in procedures demonstrates that carers’ voices are being heard by the government.

Carers Strategy

A new Carers Strategy has been produced which describes what needs to be done to develop support to carers in Dorset. This is a joint piece of work involving Dorset County Council Social Care and Health, the Primary Care Trusts in Dorset and relevant voluntary sector partner agencies. Carers were consulted on what they perceived to be main themes for developing services and thirteen areas for action have been identified. The strategy has set out a vision for the future of carers’ services in Dorset, which is: For carers in Dorset to feel they have become valued partners in the provision of the care to the person they are looking after, and that their own needs to maintain health and independence are acknowledged.

Evidence has been gathered from a number of sources to identify and describe carers in Dorset and their characteristics. Across the County, 11% of the population are providing care, which amounts to 42,000 people. This figure is higher than the national average of 10%. Almost a third of carers work full-time. Around 20% of carers provide care for over 50 hours per week. Many carers, particularly those providing a high level of care experience more ill health themselves than non-carers.

A significant increase in funding available to Dorset from the government has enabled the Social Care and Health Directorate to develop new services, including the appointment of a number of carers’ caseworkers to work specifically with some carers.

If you care for someone with a mental illness a new online service may be useful for you at: www.mentalhealthcare.org.uk

Dorset County Council’s new and updated website: www.dorsetforyou.com also provides information for carers and details of information and services available.
Four Leaf Clover Club

An exciting new feature appeared in our Clubhouse during the winter. Thanks to a £300 grant from Faith In Action, we were able to buy some SAD Light Therapy Units which were installed on the wall where they can cast their beneficial ‘sunlight’ on members. These ‘Light Boxes’ (as they are often called) are found to be very helpful for people who suffer from Seasonal Affective Disorder during the dull dark days of winter. To benefit from the light therapy, people need to sit where the light from the lamps can fall on them for at least one or two hours a day (depending on the distance they are from the lamp) for at least 7 consecutive days.

One of the additional benefits from the grant from Faith In Action was that they allocated enough money to cover the purchase of the Units and something towards the cost of running them. We all appreciated this thoughtful generosity very much.

The Light Therapy Units will be a permanent feature of the Clubhouse and we are sure they will be a real benefit to members in the future. SAD sufferers will be able to start their light therapy early in the winter before the loss of natural sunlight can take effect. A Committee decision was also made that they should be made available, at a small charge, to members of the public who come along to enjoy our regular ‘Saturday Café’. (Of course—the lamps are available freely to Club members.) Members of the public can also use our computers on a Saturday at a small cost and these are some of the ways in which we make sure that we are a regular part of Sherborne ‘Town Life’!

The Willow Tree Group

The Willow Tree Group meets every Wednesday from 10 am to 2pm for lunch and social support, at the Castleman Bungalow, Peel Close, Blandford.

We have one member of staff and a service user volunteer. We have coffee and biscuits in the morning and everyone has a chat catching up on the latest news. Everyone gets involved in some way with the preparation, cooking, or clearing away of the lunch.

Once a month we join The Mulberry Tree Group who are based in Gillingham and meet at the British Legion in Shaftesbury. Here we have a picnic lunch, and have the opportunity to chat with members from that group, also there is time for shopping and with Tesco being very close, our members find it very helpful. We occasionally go on outings, which can be a trip to a Garden Centre or the Sea Side. We are planning to go to Swanage quite soon and go on the steam train.

In the summer we have barbeques or eat our lunch outside, thanks to WISH for donating us garden picnic tables and benches, and also to Teamforce for making the outside of our bungalow so pleasant with pretty pot plants decorating the patio area.

We always celebrate birthdays, one of our members keeps a note of all the dates and the members contribute a small amount each towards presents and cards. We have double celebrations at Christmas, we all go out for lunch to a pub or restaurant, and on the final Wednesday before we break up we either have a buffet or roast turkey, everyone brings something towards this event. A raffle prize is organised by members each bringing in a prize.

The Willow Tree Group members are very supportive of each other and get on well with each other, there is a lot of laughter and fun had by all, most of the time, which makes it a very pleasant group to be part of.

If you would like to join us, please ask your Care Co-ordinator for a referral.
**SEałF-HEłLP GROUPS, SOCIAL CLUBS + DROP-INS**

**Saturday Social Group**  
5 Carlton Road North, Weymouth. Open each Saturday 7pm to 9.30pm. Contact any member of staff, on 01305 771494

**Green Art Group**  
The Library, Weymouth. Meets weekly, Thurs. 1pm to 4pm. Contact Ros Copson on 01305 257172

**Weymouth Carers Group**  
Castleman Bungalow, Blandford. Meets Wed. 10am to 2pm (includes lunch). Contact Florence Spencer on 01747 825400. Mob. 07979 437076

**Bridport Self-Help Group**  
5 Downes Street, Bridport. Meets every Friday 10am to 3pm. Contact on 01308 459762

**Bridport RETHINK Relatives and Carers Support Group**  
5 Downes St, Bridport. Meets on 4th Mondays of the month (except Bank Holidays), 3 pm. Contact Sally Montague-Johnstone on 01308 459316

**Willow Tree Group**  
Meadowland, Shaftesbury. Meets Wed. 10am to 1pm. Contact Florence Spencer on 01747 825400. Mobile: 07979 437076

**Mulberry Tree Group**  
Queen Street Bungalow, Gillingham. Meets Mon & Fri 10am to 4pm, Thurs. 10am to 1pm, Alt Thurs. 7 to 9pm. Also on 2nd & 4th Tues at British Legion, Shaftesbury. Contact Florence Spencer on 01747 825400 mobile: 07979 437076

**The Lantern**  
2 Ranelagh Rd, Weymouth. Open Monday – Friday. Support Centre offering advice on Benefits, Housing, Advocacy and Counselling. Contact Mick Bramham on 01305 787940

**Oak Tree Clubhouse**  
Crossroads Centre, Weymouth. Meets weekly, Fridays 7pm to 9.30pm. Wed. 6pm monthly for outings. Sunday lunchtimes once a month. Contact Andy Court on 01305 362094

**First Tuesday Self-Help Group**  
(Manic Depression Fellowship) Monthly, 1st Tuesday, at Friends Meeting House, Holloway Rd, Dorchester. 7 to 9 pm. Contact 079 0555 0768 (National MDF; 08456 340543 or 020 7793 2630)

**‘Tuesday Drop-In’**  
5 Downes Street, Bridport. Open Tues. 10am to 3pm. Contact Caroline Gamble On 01308 459762

**North and West Dorset Carers Forum**  
Meets on last Thursday in the month, 6pm to 8pm, at the Forum offices: 29—29A Durngate St, Dorchester. Contact Richard Peacocke or Paddy Radford through Forum office on 01305 257172

**Lyme Regis Social Club**  
Woodmead Hall, Lyme Regis. Meets every Wednesday 10am to 1pm. Contact Caroline Gamble on 01308 459762

**The Lantern**  
2 Ranelagh Rd, Weymouth. Open Monday – Friday. Support Centre offering advice on Benefits, Housing, Advocacy and Counselling. Contact Mick Bramham on 01305 787940

**Four Leaf Clover Club**  
1 Abbey Road, Sherborne. Open Mon. to Fri. 9.30 am to 3.15pm. Sat’ 10 am to 4 pm. Contact Liz McGaw on 01935 389192

**Club 57, RETHINK Drop-in Group**  
Quaker Meeting House, Holloway Road, Dorchester. Meets Monday to Thursday, 10am to 2pm. (Tuesdays Art Sessions; Thursdays Lunch Club at £1, members take turns to cook) Contact Rose Verney on 01305 267851

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