# ARC Newsletter

June 1996

### **Editorial**

### **BEFRIENDING SCHEME AT FOREST**

A grant has been obtained for a paid co-ordinator through CREST an inter-church organisation well known in the area. The paid co-ordinator arrived in November and is in the process of organising the scheme. Sister Veronica Loire, one of our members, has appealed for volunteers in Wanstead R.C. Church and 14 of these are halfway through training and 14 await training. The St Georges Befrienders will probably come under the wing of the new co-ordinator.

There may be possibilities of a new drop in centre in the future, with APCMI involvement.

### APCMH - THE ASSOCIATION OF PASTORAL CARE FOR MENTAL HEALTH

At the AGM in September 1995 the members voted to change the name of APCMI to APCMH. In late May the Charity Commissioners approved the decision. The name change will be officially launched at The Southwark Cathedral Service in October.

Considerable work has taken place within the National Committee and we feel it is important that the change of name helps to benefit those with whom we come in contact and helps to improve, innovate and develop existing work.

Innovation, growth and consolidation all form the key to the survival of the association and we feel that very positive things are happening in our work. <u>But</u> we could do with more help and offers to do short-term specific tasks in the coming weeks. If you feel you would be able to assist in any way please contact Pam Freeman on 0181 764 9725.

## MERTON APCMI - CHAIR'S REPORT APRIL 1995-MARCH 1996

Thankyou

I want to start this year's report with the 'thankyous'. Thank you to each and every volunteer involved with Merton APCMI, whether committee member or befriender. Of course some of you are both.

Particular thanks go to Dorothy Pearce, and also to Elaine Miller and her husband David, who have been involved with the scheme as befrienders and supporters since its inception until last year. I am also very grateful to Naomi Whittle, who as well as being a befriender, gave time to recruitment and publicity. In Naomi's case the additional work of training for ordination in the Anglican Church has necessitated a reduction in other activities!

At the start of the year we were joined on the committee by Tim Nichols, and a bit later, by Marion Ferguson. Tim has tried hard to find us substantial funding, and Marion has used her resources to help us produce new publicity material. I would like to thank them for joining us and for the hard work they have already done on our behalf.

**Socials** 

We have had two social events during the year for all those involved with our work. Both were very enjoyable and well attended occasions and I think particular thanks should go to Jane Norton for the part she played in organising these. These occasions are important in our relationships and we look forward to this year's summer 'do'.

Fund-Raising

I leave it to others to comment on our figures and our attempts to raise larger sums, but in addition to the latter we have only taken a couple of opportunities to raise money for our day-to-day expenses locally. These were during Mental Health Action Week in April, and at Mitcham Carnival in May. Sheila Chamberlin and Rena Phillips in particular put in a huge effort at the carnival and were quite successful. It did though require a great deal of time. For the coming year I suggest we try to combine some modest fund-raising with awareness raising and volunteer recruitment. This might be achieved by running some local coffee mornings in the homes of supporters.

Development

This has taken place in two or three areas of our work, which are all inter-related. We have found it difficult to attract volunteers over the last couple of years and felt that we should look again at our publicity. The production of new posters has been the outcome of much deliberation and I am very grateful to Marion Ferguson for all her efforts in this regard. The poster is naturally aimed at potential volunteers and we realised that we would need an APCMI dedicated telephone number as part of this. As we do not have our own premises, Merton MIND kindly offered to house our telephone and help us to respond to callers. In the near future we hope that this will also mean a place from which we can carry out the essential administration of receiving and processing referrals to the scheme. This will also make it possible for this work to be shared by members of the co-ordination and support group.

Looking Forward

We continue as always to receive regular enquiries about referrals through the year. Sadly, we are often not in a position to take referrals largely due to the size of our volunteer pool. We are in no doubt about the need for what we have to offer, and both statutory and voluntary agencies recognise the importance of this concrete care in the community.

Merton's Community Care Plan's second point in its Value Statement for Mental Health services says "Fostering social integration and independence is important". Included in the section on 'Longer Term Aims' are listed "improved practical support to families and support in every day living".

The Merton Mental Health Joint Strategy document put together by users, voluntary organisations, Health and Social Service officers, again emphasises the need for support in ordinary living. It goes on to include in its section on 'Leisure and Social Life' the recognition of the need for and desirability of having befrienders. It recommends that a specific worker be appointed to develop the work done by APCMI in this way. The need for more resources for a broad range of mental health needs is clear. Not the least of these needs is a supportive local community in which people are able to participate and enjoy life. I trust we will go on playing our part in this provision and call for further resources to enable us to more fully develop our particular contribution.

Simon Thorburn - Chair Merton APCMI March 1996.

# DID YOU KNOW

## Mental Illness

- \* Mental illness is as common as heart disease
- \* Mental illness is three times as common as cancer
- \* Mental illness affects 1 in 4 of the UK adult population at any point in time
- \* 12 million adults attending GP surgeries have symptoms of mental illness
- \* Anxiety and depression amount of 80% of mental illness
- Mental illness accounts for approximately 18% of certificated sick leave from work
- \* Between 250,000-300,000 people in Great Britain suffer from schizophrenia
- \* Of all people diagnosed as mentally ill, 55% are women and 45% are men
- \* 2% of the child population (under 16 years of age) suffer from severe mental illness

# Mental Illness and Suicide

- \* Suicide accounts for 13 deaths a day in the UK approximately the same number of people who die in road accidents
- \* 9 in every 10 suicides involve mental illness
- \* 77% of suicides are male
- \* 23% of suicides are female
- \* 10% of people with schizophrenia commit suicide
- \* 15% of people with manic depressive psychosis, personality disorders and alcohol dependency problems commit suicide
- \* The rate of suicide has fallen since 1980

### Mental Illness -costs

- \* Treatment and care of mentally ill people continues to represent the largest single item of NHS expenditure
- \* In 1991 the official 'cost' of mental illness was more than £4000 million. This includes all statutory treatment and care services, sickness and invalidity benefits
- \* If 'hidden' costs of lost working days and payments to carers were added to this, the total cost would rise to nearly £18,000 million
- \* The number of community psychiatric nurses has risen by 290% between 1981 and 1991
- \* The number of consultant psychiatrists has risen by 40% between 1981 and 1991
- \* The number of day hospital places for mentally ill people in England has risen from 15,300 in 1981 to 22,500 in 1991.

### CONSUMER FORUM

Held at Mind Headquarters in Hammersmith. Reported by Pam Freeman.

Jeremy Boutwood and I were invited to speak one Sunday afternoon recently at The Consumer Forum organised by Jaimie Summers, one of our members. The client base has reached an astonishing 495, quite a large undertaking for a staff complement of one and a half. More and more people help Gabriel and Jaimie with keeping the centre up to scratch. Pressures still abound though as people diagnosed mentally ill have spent so long not being listened to; their needs not being truly addressed that often the chance to let off steam amongst their fellows is eagerly taken.

On Sundays members come for lunch and during the afternoon a large group meet together for an hour of reflection with a speaker followed by discussion.

Extracts from the Annual Report written by Jaimie and Gabriel.

### Sundays

Sunday continues to be our most popular day with between 55 and 99 visitors over the three month period. Guest Speakers on Sundays have been:-

Ronnie Lopez - Mental Health Lawyer at Charing Cross Hospital Janet Dare - Herbalist/Alternative Treatment Practitioner Gloria Gifford - Information Officer at Survivors Speak Out Madeleine Chapman - Co-Ordinator, MINDLINK.

For New Year's Eve we rearranged our usual opening hours and opened at 5.pm, closing after midnight. Despite having no electricity for three and a half hours (candles coming to the rescue), the record total of 99 revellers had a buffet supper, and the music and dancing continued until 1996 arrived! Despite the odd squabble as drink and depixol do not mix too well (!) things went smoothly enough and much help the following morning restored Consumer Forum to its former glory.

### Weekdays

Attendance between Monday and Friday continues at around the 200 mark, varying between 157 and 221. Daily numbers have ranged from just 21 of us on Christmas Day up to 57 one Wednesday, but usually about 40 people will drop in on an average day. Little has changed to our format in the last three months; partakers in the Thursday art afternoon have dwindled somewhat but the relaxation group thrives. More people are using the computer and our selection of books has grown.

Having made enquiries with local services about their Christmas and New Year opening it was decided that we should remain open throughout the holiday period. Our rooms were festooned with balloons, streamers, bells, holly and a couple of beautifully decorated Christmas trees adorned the hall and the no-smoking room. Attendance picked up steadily after Christmas Day reaching normal levels by the Thursday and Friday. Staying open when most other services closed their doors was deemed worthwhile.

### **Outings**

It makes a pleasant break in routine to organise the odd outing. On 18th June we decamped to Chiswick House and grounds for a picnic lunch. Difficulties with Sunday buses led to a reduced turn-out. Previous years have always featured a canal barge trip but growing numbers led to the decision to take the river boat from Putney Pier to Hampton Court on 30th July. Other outings have been made midweek to 'Me and My Friend' at an Islington fringe theatre and to 'One Flew Over the Cuckoo's Nest' performed at the RADA theatre. From time to time, free tickets become available through MIND for shows at the Lyric, Hammersmith and these are distributed on an ad hoc basis. On 20th August we held a rounders match against Chiswick Oasis on Chiswick Common and adjourned for tea at their Bridge Street venue - deemed a great success by all who took part.

It is our opinion that good community care can appreciably diminish mental distress. Neither we nor any other project can hope to have all the answers - mental illness is not going to disappear. I suffer personal anguish when visiting the wards to discover Consumer Forum people ensconced there, feeling that somehow we have failed them.

Perhaps with more home support, increased employment opportunities and a local Crisis/Safe House linked to rural respite the revolving door can decelerate. As users of services we trust we are showing a novel yet business-like approach to care.

# Community Care?

### by Daphne Cowan

What comes to your mind when you hear the words "Community Care"? Perhaps you think of grim newspaper stories of patients being discharged from psychiatric hospitals with nowhere to go and no supervision or, worse still, patients who have been discharged and have harmed themselves or other people.

These are the tales that make the headlines, but there are also hopeful stories which tend not to get reported. Right here in Dulwich, in Upland Road there is an example of good practice emerging as the Maudsley and Bethlehem Trust begins to implement its Community Mental Health Programme. Number 10, Upland Road is an end-of-terrace Victorian house which has been converted to provide a Day Care Centre for people who have been treated as in or out-patients at the hospital.

It is light and bright with fresh paint and new curtains and is open each week-day from 9am-5pm. From 35-40 clients come to the centre each day to participate in groups offering relaxation, drama, current affairs, art, music, etc. The writer runs a once-weekly "Faith and Doubt" group at which clients can raise issues which they feel are important for themselves and for their lives. Clients are also linked in to a network of evening clubs running at various centres in the area which provide social support and entertainment.

What actually does "Community Care" mean in the ideal sense? For people who have suffered from some form of mental illness, it means they will be treated, as far as possible in the community, i.e. outside hospitals, and will be encouraged and helped to live as normal lives as possible. But what is this thing called "the community" into which such people are being discharged?

In the minds of the planners of Community Care, there seems to have been a myth that, outside the hospital walls, there existed a network of caring unselfish people who would shoulder the task of caring for the people coming out of hospital. And there was the further myth that the place where such unselfish caring people would most likely to be found was in the congregations of Christian churches.

The fact is that people outside the hospital walls, whether in Churches or not, are just people with their own problems, their own fears and prejudices and above all, a lack of knowledge about mental illness. Therefore

it was necessary for paid professionals to set up structures like Upland Road which would accept the responsibility of caring for the medical and social needs of discharged patients, while encouraging them to lead as "normal" lives as possible, which meant being accepted by the community.

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Could the Christian congregations around the hospital help in this rehabilitation? About two years ago, the Chaplaincy at the Maudsley began to work on setting up links between the new Day Care Centres and the churches situated around them. The first churches to be involved were those in Nunhead, around the lvydale Centre, and there are now regular meetings between Church representatives and the mental health professionals at lvydale.

In the Camberwell (Dulwich) sector there have now been two meetings between the staff at 10 Upland Road and churches such as St Stephen's, St Barnabas, St Clement's, Copleston Centre Church, Christchurch Barry Road and several others. The meetings were well attended, and it was clear that Church representatives want to play a role in this work. But clergy and other Church members often feel ill-equipped to deal with mentally ill people especially those who appear quite disturbed. So the first step was to provide practical links in the form of a professional with a telephone number who could be contacted for help or advice. It is much easier to ring if one who knows whom one is ringing!

Church representatives also found it useful to have mental health professionals to provide background information on forms of mental illness, and on how the system of medical and social care works. Church congregations, too, need some teaching about how to receive and welcome persons who may have been out of touch with society for some time because of illness.

All this is, of course, slow and patient work, but it is to be hoped that we can eventually create a community in which mentally ill people can find respect and understanding; a network of care which will help them feel like persons, not patients. There can be few better ways of demonstrating Christian caring. "Inasmuch as you have done it......"

This article was written for the Parish Magazine of St Stephen's Church, Dulwich

### Martin's Story

### LIFE'S PROBLEMS AFTER THE AGE OF TWENTY-SIX

### Chapter One

IN MY OPINION the age of twenty-six can be taken as a good marker for the onset of life's darker side and accompanying problems. Although, of course, before this age one can experience difficulties and traumas, one is more is more able to shake them off in an ethos of youthful abandon and naievety. Also, of course, puberty brings commonplace emotional changes to all children's lives. As with all rules there are exceptions, and serious blows, the worst of all being one's own death, are always catastrophic.

However, in my own case, a nervous breakdown at the age of twenty and the resulting abandonment of a degree course of higher education and admission to a psychiatric hospital, both in 1973, has in my judgement, ironically, nothing or very little to do with the problems I experienced in January 1978, and continuing until the present day. Strange but true, the timing of change from a youthful life ethos to a much worse state of affairs was very clear cut and really did begin, to the day, January 1st 1978.

A few background points are relevant at this stage. My mother died in November 1976. Therefore, a stable core figure in the family was removed, which was to affect future life for myself, my father and my sister. My sister got married in April 1978. Relations with her had become strained by her enmity towards me after meeting her fiancé, a local police constable.

After April 1978, the only two remaining members of the family to be living in the family home were my father and I, someone I had never communicated a great deal with.

Family disintegration is however a commonplace thing, but a mother's early death at the age of fifty-five, probably due to smoking related illness, and unreasonable sibling enmity are less common factors.

My life's problems commencing in 1978 are broadly divisible into two areas. A useful distinction to make in life, I think, is to divide one's life into two areas: the indoors and the outdoors. Generally speaking, the latter has always been for people the area of most conflict to varying degrees from, for some, negligible to, for others, extreme conflict, eg assault and death. The majority of people fall somewhere between these two extremes, and the important thing is to know where to draw the line between an acceptable and an unacceptable level of personal "hassle".

It is necessary, at this stage, to point out that this level of outdoor conflict increases dramatically on a worldwide arena, and one can hardly speak about one's own problems with certainty of their harshness while living in England when the TV evening news shows daily scenes of violence around the world, including human atrocities of the worst kind. The troubles in Northern Ireland are a prime example of this on our own doorstep.

In spite of these important facts, however, one's own problems always have a dreadful nightmarish quality to them, and a strange irony is that the saying "There is always someone worse off than you", has very little consolation value in it when one is beset by one's own problems.

Chapter Two will appear in the September Issue.

### WELCOME CLUB

This is an outreach club run by Emmanuel Church, South Croydon, on Wednesday mornings from 10.00.am to 1.00pm.

Joyce Goertz took over as Manager from Simon French who deserves full credit for his unstinting and unselfish efforts in arranging many interesting activities.

There are several long term members from local hostels and new folk are coming along and integrating well into the group. Tea, coffee and biscuits are freely available until 11.30.am and then orders are taken for a subsidized light lunch such as soup and toasted cheese sandwiches. Members are encouraged to participate as much as possible by serving drinks and helping to clear up. Board games, snooker and darts are available as well as art and craft activities.

Members like to sit and chat and enjoy each other's company and there is a friendly and sociable atmosphere.

The Club went to Eastbourne last summer on a coach enjoying the scenic route through Ardingly. After a picnic lunch on the sea front the group broke up into smaller units.

Other activities have included a jumble sale and Christmas party.

We are indebted to the volunteers who help at the Club and are always pleased to welcome new members.

APCMI National Committee wish to thank Emmanuel Church for their enterprise. We hope and pray that this will be repeated in many churches as that is what community care is all about.

Grampion Branch held their AGM on Wednesday 13th March 1996 when Mrs Margaret Rosie M.B.E., a C.P.N., well known in Scottish circles for her pioneering work with both Schizophrenia and Huntingtons Groups, spoke on "Community Care - The Reality". This provided us with a most successful meeting. APCMI - Grampion - is a small but dedicated branch; we are hoping that membership may receive a gradual boost as a result of the yearly series of public meetings we plan to hold.

April 1996.

Take time to think - it is the source of power

Take time to play - it is the secret of perpetual youth

Take time to read - it is the fountain of wisdom

Take time to pray - it is the greatest power on earth

Take time to love and be loved - it is a God-given privilege

Take time to be friendly - it is the road to happiness

Take time to laugh - it is the music of the soul Take time to give - it is too short a day to be selfish

Take time to work - it is the price of success.

Following the publication of Andrew Poulson's Testimony, we have received several letters from interested members.

Andrew has published several leaflets under the title:

### Bethel Publications

More details can be obtained from:

A T. Poulson Bethel 74D Boscombe Road Southend on Sea SS2 4JP.

Another member, Pastor Ken Bunting, has produced many books, leaflets and recently a video on how to cope with depression. For a full list of publications please contact him at:

103 Devonshire Drive Mickleover Derby DE3 5HE.

Pastor Bunting is doing invaluable work in the Derby area helping many in distress.

Our next newsletter will be produced in September. We welcome any news or views from readers. Could these by sent to Pam Freeman, 66 Norbury Court Road, Norbury, SW16 4HT by 31st July.

Items for next issue also please by Wednesday 31st July 1996.

APCMI NEWSLETTER is published on behalf of the National Committee; opinions and points of view are those of the contributors only unless stated otherwise.

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