

NEWSLETTER

DECEMBER 1997

At the A.G.M. in York Barbara Vigar was elected to the chair of our Association. Barbara has been the chair of Croydon Branch until recently and we welcome her to her new post. More details of the A.G.M. and of the National Committee Members will be in the next edition of the newsletter. Jeremy Boutwood was thanked for his dedicated leadership of the Association for the last six years, and for his spirituality, support and friendship.

THE RETIRING CHAIRMAN'S REPORT AT THE ANNUAL GENERAL MEETING

During the last year it has really felt that the Association is part of an expanding and exciting movement of interest in the whole arena of pastoral care, mental health and the partnership between professional agencies and church-based resources. As an organisation fired by a strong bias towards training and development, we can see our work as an important element in all this.

The Archbishop of Canterbury gave an important lecture to the Royal College of Psychiatrists, highlighting areas of mutual suspicion and ignorance which need to be overcome if the holistic needs of mentally-ill people are to be properly met. In the Mental Health Foundation recent survey and Report "Knowing Your Own Mind", a national consultation with users of mental health services, there is a whole section on "Religious and Spiritual Beliefs", unusual in the context of their work. The National Schizophrenia Fellowship has run a number of conferences, ending with their 25th Anniversary Celebration on the theme of "Religion and Mental Illness", where our principal patrons, Bishop Stephen Sykes and Professor Andrew Sims, were two of a panel of speakers. There are signs that "pastoral coordination" is on the agenda of a number of NHS Mental Health Trusts around the country, as they grapple with the full implications of Care in the Community, when there are no longer discrete Psychiatric Hospital Chaplains to minister to the specific needs of the many very vulnerable "immigrants" from hospitals to local communities who are frightened by the lack of compassion and understanding around them.

It is difficult to quantify how much of our own work has acted as a catalyst in all this energy; but without doubt the itinerant role of the Secretary and the many important ecclesiastical contacts of David Walters, our development guru, certainly bring "pastoral care in mental health" into new places. Awareness-raising events have been held in Southampton and Northampton, and although only a few enthusiasts were attracted, it has alerted the local churches and their leaders to the vital importance of our mission; they are now clear about the many parishioners and others who experience mental illness, and can begin to find ways of addressing their needs.

When it comes to awareness-raising, we know we have to improve our communication outlets in terms of publicity, regular newsheets and good leaflets. We are working to make ourselves more professional in all these aspects. The Newsletter is vital in letting people know what we are about, as well as what is being done by others, and also giving space to the insights of sufferers and carers themselves; John Rawson, who has taken over from Simon Thorburn as chair of the Merton Branch, has begun the process of updating our publishing capability. It is also good to know that a video commissioned by Bishop Sykes will soon be available; it will be an excellent visual aid to make local presentations more alive. We also want to use the existing material from the Branches to develop training packs on themes as "Starting a Drop-In Centre", "Running Friendship Schemes", "Putting on a local Training Course", etc as well as an exploratory booklet on "Spirituality within Mental Health experiences".

When we had two in-house self-analytical evenings for the National Committee, helped by a perceptive facilitator from NCVO (National Council of Voluntary Organisations), the message was clear- Training and Development for churches at a local level should be our distinctive selling point. But you can't help others to develop good facilities unless there are good models to point to. So the continuing example of the Branches is so important, not only for showing that we can do what we say, but also that what we say can be done.

Continued

Croydon, with Mary Hillier as the paid Development Worker, becomes more and more an important player in the local networks of support. The same can be said of Hastings, where Claire Jowitt continues as the Befriending Coordinator; of Merton, where they have a smaller but successful Befriending Scheme without any paid staff; of Forest Hill, where the Tuesday evening Drop-in is an established feature in the lives of many people with severe and ongoing mental health problems in that part of South East London; and of the Forest Branch where Mike Pritchard, as the chaplain of Claybury patients now living in the community, has managed to find funding for a paid coordinator for a strong force of volunteers.

In Guildford, an effective core of highly committed members, including musicians and poets, mental health workers and compassionate friends, manage to bring a spiritual dimension into the midst of all the resources around. In Aberdeen we know that Friendship is high in their priorities - we have seen published an important article by a community psychiatric chaplain involved with their work. And in York, where we are so pleased to have the AGM a Social Programme provides sufferers with an opportunity for an occasional change of lifestyle that raises them above the drab ordinariness of a life of unemployment, low income and a lack of any sense of direction and importance.

So **THANK YOU** to **ALL** who put so much of their lives into this enterprise - to the workers, the management committees, the volunteers and members at local level; to our friends in other organisations and groups who want to be associated with our aims; to our patrons and supporters who can carry the message to wider and more influential "power lines"; and to the National Committee who struggle to find a more permanent solution to our fragile base, who look for new avenues of development, and who make sure our limited resources are best used. As I hand over to a new Chair, I still feel it has been a long transitional period in the life of the Association; now we must be in the business of sustaining and building on all the achievements of the past eleven years. There is so much potential all round the country, and people are crying out to find support from the pastoral resources of spiritually inspired organisations. APCMH is in a unique position to lead the way.

Jeremy Boutwood
Retiring Chairman

ASSOCIATION for CARE in MENTAL HEALTH

A Report on the National Annual General Meeting by Edna Hunneysett

The **National Annual General Meeting** took place on Saturday, 1 November 1997 at **The Retreat, Heslington Road, York**. The Association is the only National Charity - Ecumenically based - that offers denominational churches help in developing service for those with mental health problems.

The National AGM is usually held in the London area because most of the branches are in the South but the management committee chose to come up North this year to support the only branch in the North of England, that of York. There is a branch in Scotland at Aberdeen.

The first speaker was **Mary Lea**, from Rotherham Priority Health Trust, who spoke about the programme "**Beyond the Cuckoo's Nest**". This is an informal and interactive programme which strives to demystify mental illness in the minds of young people. The programme is designed for 15+ students and is used by teachers as an adjunct to their personal and social educational curriculum. Sessions are approximately 2 hours long and between 15 - 30 students attend each session. A variety of teaching methodologies are used, relying heavily on the Social Learning Theory - Tell, Show, Do. Persons with mental illness and professionals work together to educate the students about mental illness. The aim is to reduce the stigma associated with psychiatric illnesses. Comments from students reflect their changed attitudes, such as:

***I've learned that mental illness is a disease like any other.
I won't use the words 'psycho' or 'loony' again.***

The second speaker was **Edna Hunneysett**, a Middlesbrough Carer who firstly spoke of the need to help give back dignity to people with mental illness by referring to them as persons and not as an illness. Edna quoted from an article published in June, 1997 in the journal "Psychiatric Care".

To stereotype people or to stigmatise them, is to take one part of them, in this case their illness, and to make it the whole of them. No longer do people suffer from, for example, schizophrenia, instead they become schizophrenics. Once stereotyped it becomes possible to devalue and disempower the individual, who is now no longer a person, but a problem to be cured or a research area to be developed - which is wholly at odds with a professional outlook which seeks to develop a holistic methodology of care What is called for is ... an approach which accepts and respects the individual as a whole person with physical, emotional and spiritual needs, an approach which focuses on the 'resurrection of the person'.

Edna then gave a brief history of the setting up of Spiritual and Pastoral Support for Carers of People with Mental Illness in Newcastle, where Carers come together at St Nicholas Hospital to share their stories and information as well as having a time of quiet reflection and prayer. Edna then reported on the progress in Middlesbrough and specifically on the Scripture-based Support Group which meets on a regular basis in St Thomas More's Church Hall. Edna also reported on the Whitby Christian Mental Health Fellowship which is just starting out and meets monthly to provide an opportunity to talk, listen and pray together. It is for people, and run by people who have or have had mental health problems, or 'mental illness' and those who share an interest in the fellowship.

Edna told the gathering about the publication in 1995 of the NSF survey into the needs of carers of those with severe mental illness in which 1,923 carers took part. Its title is **The Silent Partners** because (quote) :

The laudable attempts to treat sufferers more humanely in the community have been undermined by a lack of an infrastructure and a lack of resources. In the meantime, the carers go on caring - now it is the carers who are isolated - the SILENT PARTNERS in community care.

Edna concluded with a quote from Dr Enoch Powell in "**Schizophrenia : Voices in the Dark**" (1990) who says that :

The unique contribution of the Christian faith to the illness is its ability to see over and above human limitations and disturbances, the image of God ; and to apply the indefinable yet unique contribution of Christian love to make community care a reality in our society.

The gathering was also informed of statistics from the Department of Health :

At any one time there are 25% of the adult population (18-65), 13% of elderly (65 and over) and 1% children (0-18) suffering from some form of mental illness. 6 out of 10 mothers who give birth have an experience of post natal depression and 1 in 10 develop a chronic illness. These are National Statistics.

It would seem therefore that :

No parish nor any other church can claim that the problem is not well and truly present in their flock.

Branches of the Association reported on their activities. **Croydon**, with a paid Development Worker, has amongst other ventures, two Drop-ins, where friendship and support is offered on a regular weekly basis to people who have, or are recovering from mental health problems. Training Courses of 8 evening sessions, plus one Saturday are run for people who wish to become volunteers in order to develop awareness and understanding of the needs of people with mental health problems. **Hastings** also has a paid Worker who is the Befriending Coordinator,. Other branches include activities such as Befriending Schemes : Drop-in Centres : Days Out : Training Sessions and Conferences.

Anyone wishing for information on any of the above mentioned may contact **Edna Hunneysett on 01642 818 332.**

John Vallat, Guildford Branch **The Next Step Forward**

John Vallat's new job is based at the Maudsley Hospital as part of their Chaplaincy Team. The formal job title is the Aileen Kerr Fellowship. It is a half-time post for a fixed three year period so John will still be seen around Guildford and Godalming and intends to continue with APCMH and the Wey Valley Housing Association Group Homes. The Fellowship involves research and study into issues of religion, spirituality and mental illness. He will also have a pastoral role and lead some of the public worship at the Maudsley and Bethlem Hospitals. He hopes that some of the experience he gains in this job will be able to be used locally. For example, he will be involved with the forthcoming course - "God Be in My Head and in My Understanding".

Depression ? - Don't Let it Get You Down.

by Peter Perryer (February 1997)

Hello! my name is Peter and I've suffered from mental illness. It was two nervous breakdowns if my memory serves me well. The second was severe depression, and I'm told by friends that the nursing staff and doctors were worried. My good friend Ken Baker asked if I'd write about my relationship with psychiatrist Dr Browne. Well with the help of hindsight and lots of reflection here goes.

I guess I first became really aware of Dr Browne because of, and I remember this well, mercifully short meetings with the said doctor; a calm, polite, extremely well mannered man in, if I may say, a comfortable suite. As I said, the meetings were short with the onus on me to talk, chat away, given an account of oneself, of one's feelings. My illness was such that at one time I withdrew completely, became officially mute, struck dumb - and so the words, my fears, frustrations, explanations, remained within; remained thoughts and feelings. But this dear man, Dr Browne, would end each meeting with the words, "Well! Keep playing that guitar Peter" and be gone. I'm sure the seeds of friendship were sown at this time, and I subsequently would see Dr Browne on the ward, as if to keep an eye on us, be seen and be gone. A man of purpose, of direction, a man with a job to do. Now in a world of medication, of corridors, or no appetite, and yes, a smoking lounge, this man impressed me greatly although I didn't fully understand why. Subsequent meetings, consultations, remained the same; yes and "Keep playing that guitar Peter".

Now the guitar was something that leaned against a wall in my room. Occasionally, I think, I would move it, perhaps even pick it up, then put it back; nothing more. But to explain: when I arrived for the second tour of duty in Brookwood Hospital, I could play the thing. OK three chords but yes, play it and sing songs.

Oh yes, those meetings with Dr Browne, along with his message on leaving, became very important to me. On reflection, Oh so important. Just a few years down the road, as an out-patient at the Royal Surrey Hospital, my appointments with Dr Browne became an eagerly awaited day out. At Dr Browne's request, I would take my guitar. Hey! a brand new one now, and play him my latest song. And you know still not a sign of an in-depth conversation with this gentleman in the comfortable suit. Nothing imposed on me, but room to be; to be myself? And if there was a delay in my appointment, why "Entertain the good people in the waiting room, Peter, if you would be so kind".

OK, now psychiatrists come in for an awful lot of flak, not least from patients - "I don't like Dr Shrunk!, he doesn't understand me. etc" - but if we could pick and choose, what on earth would we look for? The mind boggles. Indeed our minds are already boggled; there, on the other hand, aren't. That's the important thing, I think. Sufferers, old and new must try to learn to trust, even to bear with, their doctors who have after all, a colossal task on their hands. Trying to fathom out and help us, each of us. They are, after all, psychiatrists; not football pundits, or plumbers or politicians. Well not unless they're holding down two jobs. Mind you, I know a great plumber who's a mine of information on Bonnie Scotland. But that's another story.

To finish, we are all unique and special, God bless us, and a sense of humour is part of my make-up. I was hoping the title of this piece would spark something off in me. Well if I may, I'll just repeat it - Depression? Don't let it get you down.

I hope you can relate to this story. And if your talent is guitar, whether you play on the right or left wing, or indeed are an expert on Moroccan bongo drums, remember what Dr Browne would say. Thank you for your time, go steady and God Bless.

From the EVENING STANDARD 27.10.97 :

London 'bottom of world league' in caring for the mentally ill

LONDON is at the bottom of the league among industrialised cities in its care of the mentally ill, having fewer hospital beds, fewer psychiatrists and far less cash available for treatment.

The capital is lurching from one crisis to another, bereft of innovations that would allow care in the community to work, according to Professor Sir David Goldberg of the institute of psychiatry.

Professor Goldberg, research director at the Institute, produced damning statistics at a conference today to show the gap between the UK and the rest of the world.

Comparing London with 10 other cities worldwide, Professor Goldberg found that only Teheran, capital of Iran, and Bangalore in India have fewer psychiatrists per 100,000 people than London.

Experts met today to discuss how new ideas have helped other cities close hospital beds and support patients in the community. Professor Goldberg earlier this year headed a commission which found that no area of London offered a full range of services for the mentally ill, despite all the efforts to extend care in the community.

HEALTH PROFESSIONALS and CARERS GROUPS are seeking much closer cooperation with churches as they call for a great understanding of mental illness.

Professor APC Sims, Professor of Psychiatry and Behavioural Sciences at St James's University Hospital, Leeds has said that an uneasy relationship still lingers between the Church and the mental-health profession. He was addressing members of the clergy, among others, at the National Schizophrenia Fellowship's (NSF) 25th annual conference which was held on World Mental Health Day. The theme of the conference was "Religion and Severe Mental Illness". "In some quarters there is still distrust, and that's unfortunate," Professor Sims said. "Some people with a religious background think psychiatry is likely to undermine people's faith, while some psychiatrists would see religion contributing to the symptoms of people who are guilt-ridden."

The evidence of new research from the Mental Health Foundation was presented at the conference. It suggests that religious or spiritual beliefs can be profoundly important for many people with mental-health problems. It can provide a source of comfort or a sense of meaning in their lives. Spiritual belief, much of it Christian, played a part in the lives of more than half the 400 sufferers surveyed. A smaller survey conducted by NSF suggests that ministers of religion often feel that they lack training in this area, and that their congregations could do with training in mental-health awareness.

Misunderstanding and disparagement are rife, said the Bishop of Ely, the Rt Rev Stephen Sykes, another speaker at the conference. The issue is close to the heart of the Bishop, a long-standing member of the NSF and a campaigner against the stereotyping of mentally ill people. "More than 50 per cent of media coverage concerning mental illness involves criminality," he said. "That is a heavy burden to bear, as it's quite unfair and quite untypical. Mentally ill people are much more likely to be the victims of crime than the perpetrators."

Making a reality of care in the community by understanding the "roller-coaster of emotions" which families and carers go through is the Bishop's priority. A video he has commissioned will be released in the New Year, and is aimed at "straightforward lay audiences" and parochial church councils. The video is being made with the help of Professor Sims, and is designed to "encourage people to think of themselves as making a difference to the lives of the users of mental-health services, through just ordinary kindness, sensitivity and the appropriate responses. The good thing about the Church is that it is found to be positive by mental-health service-users. Local and national research confirms that a high proportion look to the Church for help and are not dissatisfied", the Bishop said.

But churches should not be bolstering inadequate statutory services Professor Sims warned the delegates. They would also do best to avoid purely political issues in the community. Their role, he suggested, is strongest in working with carers at local level. "The structure of parishes means that it is an ideal organisation for working to support individuals and to make known the needs of sufferers." "The Church can and should provide a caring atmosphere in the community. My experience has been that members of the Church are often the only people who are prepared to help those suffering from mental illness."

Professor Sims warned against counselling becoming too professionalised and institutionalised, and emphasised the value of simple friendship and neighbourliness from church members. A closer collaboration is also sought between the Church and staff working in mental-health services. "I would like to see the Church having a more active influence here." "There's a real role for chaplains and others" Professor Sims said, "Most would be grateful to have support from the churches in their work, and would like to get away from the conflict that has sometimes been present between the two."

The Mental Health Foundation also recommends that all health professionals take into account the potential importance of religious and spiritual beliefs and make clergy or ministers available to people detained in hospital. Staff, it says, want to work with religious organisations to look at potential areas for joint development. The Foundation recommends that religious organisations ensure that people with mental-health problems have equal access to church services and religious gatherings, and are aware of the valuable part that faith can play. But they must ensure that the message they promote does not perpetuate the idea that people are to be blamed for their mental-health problems, and they must recognise the potential for abuse.

Finally, they should inform themselves of self-help groups and sources to which they can appropriately refer those in distress.

by Pat Ashworth

FROM THE CAIRNS NETWORK

Two words to remember when in a grumpy mood :

'SLUBBERDEGULLION', a seventeenth century word meaning someone who is worthless or slovenly;

'UGSOME', a late medieval word meaning loathsome or disgusting.

Who is the current Ugsom Slubberdegullion in your life?

MENTAL ILLNESS - BEING ILL IS JUST THE BEGINNING!

There are many different problems for those who are or have been mentally ill or have been in contact or involved closely with a family, relative or friend who has been mentally ill.

For example these might be :

- Change and the pressure it produces on people.
- Location of people who are ill and the corresponding locations of people and resources which are provided to help those who are ill.
- Mental illness might affect communication.
- Behavioural problems and changes arising out of mental illness and abnormal behaviour to suicidal thoughts and attempts.
- The consequent effects on close relationships.
- The loss of a job or livelihood.
- The consequences of the loss of job (eg financial pressures leading to strained family relationships.)
- The resulting fall in self-confidence and self-respect.
- The stigma of being labelled as being or having been mentally ill. Why do we need labels anyway - is it administrative convenience or is there another reason?
- The gaps in the underfunded, overstretched resources of the National Health Service.
- The unquantifiable, unrecorded, indefinable value of care by people who have the willpower and the natural talent but do not have the necessary financial or logistic resources or even the time to cope with the workload of being a Carer whether in a professional or voluntary capacity. **It should be noted that Carers can be Users and Users can be Carers.**
- The difficulties experienced when people with different interests, roles and perspectives try to work together.

Problems such as these challenge and affect relationships, whether they are at home, at work, in leisure time or between members of a family, friends, working colleagues, members of a congregation or just in society in general. At times of stress such as when relationships are strained another relationship might be challenged and this is Faith. Faith might have a different connotation or meaning to each of us as individuals. It could be faith in oneself, faith in others or faith in God. Being ill is just the beginning and is a time when faith is needed most.

Guildford Branch APCMH

FROM THE CAIRNS NETWORK

Andrew Elphinstone struggled some years ago with the impossible questions of evil and pain, writing about them in a book called ***Suffering, Freedom, and Love***. He posed this question :

Is this a Word of God?

Forgive me for having created a world
in which so much pain
has to be allowed to happen
if I am truly to be a God of Love
and enable human beings in freedom
to love with a love worthy of the name.

I'm still moved by that, and I want to say, "Couldn't you have done better? (that is, to God, not to Andrew Elphinstone.)

ALAN

Alan has been detained in hospital, against his will, for six years now. During those six years his wife has died, his son become estranged and his home sold. His only visitor is his elderly mother, who, because of the difficult journey, could only visit if offered a lift. The Social Services although promising monthly lifts, were always letting her down. This year she has only visited once.

He lives 70 miles from the little island on which he spent all of his life and whose countryside, marshes and shores he knew like the back of his hand. He is born and bred an outdoor man, the very essence of the natural world he loves to discover - the animals, the birds, the trees, the flowers and grasses, the stones, the very earth. Yet all this is denied him because of his loud, uncontrolled bursts of anger, despair; his indomitable will, refusing to be tamed, demanding his freedom. Freedom the authorities are frightened to give, lest harm should come to himself or others. And so we visit our friend Alan; always delighting in his company, his fund and energy, his generosity, his compassion; but only once a month and in the confines of the hospital. In between times I write, to share with him the beauty and bounteous gifts God gives us.

I found a card about two weeks ago, or did it find me? on it were these words - "Be still, Fear not, God who made the world and all that live in it, will most surely care for you." It was for Alan. But Alan has said, "I am not religious." So the card remained in my bag and in my thoughts. Then last Thursday, after an appointment in London, Gabriel and I spent the afternoon in Regent's Park, beside the water there, watching the ducks and geese and heron and wrens - so many varieties. We sat on a bench and two swans came very close, and stood for a long while preening their feathers, the autumn sunlight streaming through, highlighting the curves, the softness and movements. They were so beautiful! Just before we left to go, one feather dropped to the ground, I reached out to fetch it and thanked them. They deemed it right that I should have it. Perhaps they knew that I wanted it for Alan, that now I could send his card, that somehow their beautiful feather, so clean and white, delicate yet strong, would bring understanding and joy. I hope so, for it is on its way to him now.

Barbara - Guildford Branch

Charlie Bennet - a tribute to a very special person

by John Vallat

I will never forget Charlie and I will never forget his funeral at Guildford Crematorium in early July. Pete Brayne led the service and some seventy or so people attended. It was extraordinary how Pete's words about Charlie summed up exactly my own knowledge of him - and, I suspect, or everyone else there. This in itself is a great tribute to a very special person. There was only one Charlie and everyone saw the same person in him. He was himself and totally genuine, full of life, always bending an ear with a joke or poem, dancing and laughing at every opportunity, a loyal friend, a lover of people and, in particular someone with a special way with children whom he loved to entertain. For example, no-one who knew him will have avoided several renditions of his famous knock-knock jokes.

And yet Charlie lived alone, in some degree of squalor and rarely with any food in his fridge. He experienced more than his share of physical suffering and he was lonely. His pain was obvious from his many tears of gratitude for small acts of kindness which others might have taken for granted. He was usually rather scruffy and dishevelled. But his personality and character shone through. In Charlie I feel we saw something of Christ. We all loved him.

Two special memories :

The day I made a mess of the baked potatoes at our Sunday lunch club and Charlie put an arm on my shoulder and said, "Never mind John, the person who never made a mistake never made anything". I have clung to that saying on many occasions since then.

Secondly, Pete's shared story at Charlie's funeral.

Imagining Charlie knocking at the Pearly Gates and St Peter asking "Who's there?" thereby encouraging Charlie's knock-knock jokes from A to Z!

Thank you Charlie for your genuineness, your friendship, your unique sense of humour and your encouragement. Thank you in particular for helping us draw closer to Christ. May you rest in peace.

KEY CONCEPTS WHEN THINKING ABOUT 'SUPPORTERS'

Key points from the discussion held with members of the APCMH
Executive Committee and Andrew Woodgate NCVO on 14 July

- Think of people as **supporters** not **members** : this broadens the range of people who may be potential **audiences** for your **story**. People may support the aims of your organisation who do not wish either to pay a subscription or give time to it.
- Supporters can be thought of in terms of **concentric circles**, the centre having the closest relationship with the organisation, the outer ones have a less close, or potential, relationship.
- What **benefits** do your supporters want from being in a relationship with your organisation? These could be **tangible** (free gift, cheap subscription to a journal etc) or **intangible** (sense of achievement, belonging, contributing etc).
- How can you encourage your supporters to **climb the ladder of involvement?** ie go to the next level of giving, volunteering, supporting etc)
- What is it that you want your local groups or affiliates to *do*? The answer will show whether you may need a **tighter** or a **looser** structure. (For example, an active campaigning organisation may need a tighter structure to make sure that everyone is giving out the same message at the same time. An organisation providing self-help or support at local level will benefit from encouraging local initiatives.)
- What story, or stories, can your organisation tell about itself? What story would each separate circle of supporters (including funders, the public, statutory authorities) be interested in?
- What image does your organisation give of itself? Does it have a coherent logo, style, tone, message suitable for its audience(s)?
- How can your supporters be encouraged to be champions of your cause or message?

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HOLY DAY FOOD FOR THOUGHT

Aesop, the story teller, was one day walking from Athens, when he met a man from Argos going to the city he had left. As they talked, the man from Argos said, "You come from Athens." "Tell me, what sort of people are they there?" "Tell me first," replied Aesop, "what the people of Argos are like." "Oh, very disagreeable," said the man, "mean and selfish and quarrelsome." "I'm sorry to tell you," said Aesop, "that you will find the people of Athens just the same."

Later, he met another man also coming from Argos, who asked him the same question about what the people of Athens were like. "Tell me first," said Aesop again, "what the people of Argos are like." "They are very pleasant people," said the second man, "kind and friendly and good neighbours." "I am happy to tell you," said Aesop, "that you will find the people of Athens just the same."



The Management Committee send all Members their best wishes for a

PEACEFUL CHRISTMAS AND A HAPPY NEW YEAR



The Association for Pastoral Care in Mental Health

An association which supports those who are mentally ill and their families

Registered Charity No. 327532

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The views expressed in the Newsletter are not necessarily those of the Association