NEWSLETTER

JANUARY 1999

A MESSAGE FROM THE CHAIRMAN

John Vallat was elected chair of the National Committee at its January meeting.

I wanted to take this opportunity of thanking David Walters who stepped in as acting chairperson last year. He said at the time that he would fill the role until the AGM. He has now requested that he revert to his Development and Training role and he did not seek re-election as chair. During this past year David has shown great energy, determination and skill in extending the Association's network and encouraging potential new members and branches. I am very pleased that David will continue on the Committee in the Development and Training role.

Many members will not know me at all, so I thought I would briefly introduce myself. I am currently working half-time in the Maudsley Hospital chaplaincy team. The title of the post is the Aileen Kerr Fellowship which was established to enable the holder to study issues concerning mental illness and religion and spirituality. I began my three year tenure in November 1997. My main role in the chaplaincy team is to act as the community chaplain at the Shore Centre, which is a day centre run by the Maudsley Trust in Brixton. Previously I had been employed for almost five years by the National Schizophrenia Fellowship, firstly as an advocacy worker and then as an area/district manager. I have been a member of APCMH since 1987 and have been active in the Guildford branch, mainly involved in conferences, seminars and awareness-raising. I joined the National Committee only last year and am still finding my feet. My interest in mental health started as a result of my own personal experience as a patient. My mental ill-health and hospilisation led to an enforced retirement from my practice as a lawyer, which I had pursued for almost 20 years until 1986.

My own experience led me to believe, as I still do, that faith and church involvement may be crucial factors in the restored well-being of many people who, like myself, have suffered from mental ill-health. It may also be crucial for their relatives. The church reaction and response may make an enormous difference. I am also aware that it is not easy for churches to know how best to respond. The churches and their ministers may feel unsupported, or even fearful in their efforts to help. On the other hand there is enormous potential amongst church and other faith communities to provide "pastoral care" including friendship, meeting points or "drop-ins" and even more formal befriending schemes. It was my belief in the importance of "Pastoral Care" emphasised in the title of the association that attracted me when I joined APCMI as it then was.

The potential of APCMH is great and varied. That is one of the difficulties which I think needs to be addressed! The problem is that the concept of pastoral care in mental health is not easily defined. there are also many different ideas as to what APCMH, and the national committee should be doing. APCMH undoubtedly has many strengths, in particular the work that is being done by branches at local level. The strengths and opportunities need to be identified and developed. My initial aim is to find out the expectations and aspirations of members, branches and the national committee. As an organisation I think it is important to know, and to be able to state, what we stand for and what we are trying to achieve. I hope that we will be able to reach agreement on these aims and objectives or, as some people say, a "mission statement". I also hope that the national committee will be a welcome support to the local branches rather than be seen as either an irrelevance or a bureaucratic burden.

I look forward to working with you. If anyone has any thoughts about APCMH or the role of the national committee I would be delighted to hear them. Please contact me via Edward Wilson House or telephone me at home. My telephone number is 01483 428131.

Annual General Meeting Report

The 1998 AGM of the Association was held at the beautiful refurbished church, St John's, Waterloo, reopened in the autumn by Princess Alexandra. Apart from the sound system, which made it difficult for the speakers and for people to hear clearly, the day itself was very successful. Fifty-one people attended and were treated to an excellent talk by the Rev Dr John Swinton, from Aberdeen University and previously at Aberdeen Hospital, as a chaplain.

He spoke about the importance of befriending - caring for strangers. As Christians we follow the example of Jesus, witnessing our faith by our presence. Human beings are made for relationships and by our love and friendship we can so often make a lot of difference to people who are suffering great anxiety and stress. His very challenging and uplifting address was warmly received by all those present.

After an excellent buffet lunch the participants divided into three groups to discuss aspects of the work of A.P.C.M.H.

1) One-to-one befriending

2) Establishing drop-ins

3) Starting a new branch

A short Annual General Meeting followed during which the National Committee was elected. Pam Freeman who has retired as Secretary of the Association was presented with a pair of vases as a memento and appreciation for all her very hard work. We are now desperately seeking a volunteer to be replace her as Secretary and also somebody who will help with the administration. Please contact Pam on 0181 764 9725 if you feel you are able to give some help.

STOP PRESS! John Swinton is writing a book on aspects of befriending. Members and friends will be notified when it is published.

The next APCMH Annual General Meeting is to be held on Saturday, 9 October in Leeds.

APCMH NATIONAL COMMITTEE 1998 - 99

Chair	John Vallat	Guildford
Treasurer	Neil Mackenzie	Croydon
Acting Secretary	Pam Freeman	Croydon
Development Officer	David Walters	Hailsham (New Group)
Co-opted	Jeremy Boutwood The Rev Mike Pritchard Jamie Summers John Rawson Peter Sommers	Guildford Wanstead Wandsworth Merton High Wycombe

There are three vacancies on the committee and we would welcome anyone who would like to offer their services to be co-opted as a committee member. Meetings are held about every six weeks at Edward Wilson House. Please give serious consideration to this invitation. Contact Pam Freeman as above.

From Pam Freeman

IN DECEMBER I attended a Daily Telegraph lecture given by Lewis Wolpert on Depression - a book and TV series will be coming out in February.

He described depression as "malignant sadness" when the sufferer is totally self-involved, feeling totally negative. He quoted words from Coleridge which fitted very well with his theme:

A grief without a pang A void dark and drear A drowsy, stifled impassioned grief which finds no natural outlet or relief In word or sigh or tear.

He felt there were many possible causes - genetics - early life experiences - loss, grief. He felt that the sadness becomes pervasive, very difficult to break out of. Remedies such as anti depressants and cognitive therapy can help, but often cures are very hard to find. I feel sure that Lewis Wolpert's series will be of great help to sufferers and carers alike.

Just a Thought

Disappointments touch every life. They are usually connected to the creation of expectations instead of acceptance of possibilities. When we create a need for a certain outcome, we forget the pleasure of the journey. There are times to set goals and desire a specific outcome - for example, dieting to lose 10lb or saving for a special item - but it's important not to make our whole life a gridlock of expectations. Life has more joy if you can:

Foresee a variety of outcomes to any experience;

Accept change - the only constant is change!;

Try to be realistic about what will bring joy into your life;

Expect some disappointments and setbacks (they happen to everyone);

Take care of yourself every day;

Look for an average that is good - not the highest expectation of every event and every person;

Seeing only one way happiness, "tunnel-vision wishing" means only one acceptable outcome, so it sets you up for disappointment and loss. Happiness is not a single person, job or event - it's your life.

BMH newsletter

Tired Grammar

"Are your father and mother in?" a caller asked of a small boy who opened the door.

"They was in," said the child, "but now they is out."

"They was in! They is out! Where is your grammar?

"She's went upstairs," said the boy, "to have a lay down."

DAI DAVIES

Dai Davis was a little Welshman. Although he was only forty-two and his hair was still black, he looked older than his years. His unnaturally florid face, with its excuse for a moustache, was covered in blotches. And his pallid blue eyes, to me anyway, were looking towards a point somewhere within. They were "dead". Also he had a marked limp, which I'm sure was a constant worry to him. But he used to wink at you whenever you passed him in the corridor. Everyone else seemed to take it as being a sign that he was happy-go-lucky. However, I knew differently. I mentioned my concern to a colleague, but he just shrugged his shoulders. I didn't know who to turn to. It was no good going to the Personnel Officer. She was, I felt, too glib a person to really understand. Once I challenged Dai himself, and he said "Why are you worried about me?" Another sign was that, at break-time, he often used to drink sherry. Once after everyone else had gone, I was left alone with him. And pointing to his desk, he suddenly came out with, "You'll have to finish this, Pete!" And I knew what he was trying to tell me.

Sure enough, I came in one Monday morning and there wasn't a sound; there wasn't a word. Each one was away into his or her own thoughts. Then my colleague said to me, "You were right, Pete - Dai committed suicide on Friday night!". It seems that he'd taken a half a day's leave in order to do it. He'd done the same on the Friday before, but I suppose that he couldn't face it. It came out that he'd wanted to see his brother who lived in South Wales, but his brother didn't want to know. And for Dai that must have been the last straw. It seems that he'd left a pub when it had closed at 10.30pm. The next morning he'd been found dead in the car park, slumped over the wheel of his car. There's no doubt that he intended to kill himself for he'd run a hose from the exhaust in through the window, and stuffed the opening so that no air could get in after he'd turned on the engine.

All this had quite a shattering effect upon me, especially my attitude towards life itself, both in this world and in the next. And I was perturbed that, out of all the people there, I seemed to be the only one who had any inkling of what might happen, but at the time I was just living in a bedsitter and my resources were pretty limited. All that I felt I could do was to pray for him.

Peter Sommers

Chaplaincy Guidelines for NHS Trusts providing Mental Health, Disability and Community Health Services

Published by The Chaplaincies Council, Fielden House, Little College Street, SW1P 3SH (Tel 0171 222 5090) in March 1998.

Abstract : The Document outlines the possible pattern of pastoral care for elderly people in acute units, community day units and long stay units.

It is proposed to adopt a new title of Community Health Chaplaincy to cover services in community settings. A fairly comprehensive and demanding job description is proposed. New appointees are required to review existing services, make recommendations within three months, and then implement the policies agreed by the Trust Board.

Page 7 states "NHS Trust Chaplains are <u>not</u> expected to provide a peripatetic visiting service to residential homes. This work must essentially rely on local voluntary effort, in conjunction with church and other voluntary initiatives. The priority for NHS Chaplains is to ensure that for all types of residential accommodation, pastoral coverage is organised, available and acknowledged by the sponsoring body responsible, whether this is a Housing Association, private agency or joint-funded enterprise."

Chaplains can invite referrals from BPs and multi-disciplinary health teams, for individuals needing personal, pastoral care, who are not attached to local churches or faith groups.

It is envisaged that GPs and primary health care teams will have an ecumenical liaison pastoral worker attached to the health centre, co-ordinated through the chaplaincy.

Abstract prepared by Dr GM Craig FRCP of Northampton.

RELIGION and PSYCHIATRY

by Daphne W Cowan

The conference on Religion and Psychiatry held at the Institute of Psychiatry on the 16,17 and 18 September last year was the fourth such conference in a Biennial; series, organised jointly by the Institute of Psychiatry and the Maudsley Chaplaincy. The theme for the September conference was "Multicultural Psychiatry in a Multi-faith Society".

Looking back to 1991, when the first such conference was held, my strongest impression is of the narrowing of the gap between Religion and Psychiatry. For many decades now, religion and psychiatry have seemed to occupy two different domains and each discipline viewed the other with a lack of understanding, if not to say, suspicion. But we have come a long way from the days when Freud wrote his well-known treatise called "Religion: The Future of an Illusion", and the fact that conferences such as this one bring psychiatrists and religious people on to the same platform perhaps marks the dawning of the realisation, well described by Professor Bill Fulford this:

"Religion and psychiatry occupy the same country, a landscape of meaning, significance, guilt, belief, values suffering and healing".

But while most psychiatrists do not hold the same view of reality as do religious believers, they have become increasingly aware that spiritual/religious factors are important in treating patients. Paradoxically perhaps, it seems that the presence in our society of diverse faith communities has sharpened the awareness among mental health professionals that the spiritual dimension is important in treating the whole person.

The Rev Wesley Carr, Dean of Westminster, who gave the opening speech at the Conference, illustrated this point vividly with his story of a woman from Trinidad who had emigrated to Britain. Miss F. was compulsorily admitted to hospital after refusing food and drink for several days, because she believed a witch had placed a curse on her. A diagnosis was made of severe psychotic depression and treatment was commenced. But response to the treatment was poor. So a traditional healer was consulted and he lifted the curse. She began to eat and drink, and in two days was well enough to leave hospital. Thus, when the relevant belief system was invoked a cure was effected. Dr Wesley Carr said that there is increasing recognition that cultural factors have to be considered in psychiatric treatment, and in the attempt to develop culturally sensitive psychiatric services.

This was obvious from the sub-heading of the Conference viz "Multicultural psychiatry in a Multi faith Society", and in the papers and workshops presented which included contributions concerning the interaction between Judaism, Buddhism, Hinduism and Islam, with psychiatric treatment. Although the major world faiths have much that is different from each other, the spirituality underlying these faiths tends to have common ground; it is concerned with the interaction of human beings with their own selves and with the trans-personal, and eventually arrives at union with the Creator.

The major religions seek to locate and hold the human sufferer within larger frameworks of meaning. Religion provides a framework through which we can seek to interpret suffering. Spiritual traditions provide contexts within which human experience can be interpreted in a way that encourages hop, and contains anxiety. (If we pause for a moment and recall any one of a number of conversations we've had with people suffering in one way or another, I think it will be clear what we were doing.)

A delicate and beautiful embodiment of these ideas was arranged by Mark Sutherland in a Multi faith reflection which took place at the Salvation Army Training College (borrowed for the occasion) at the end of the conference. Participants listened to the celebration of God presented in the words and music of all the faiths represented at the Conference, ie Judaism, Islam, Christianity, Sikhism, Hinduism and Buddhism.

"Finally, however we picture God, there is a symmetry in our search for God. God is the One we encounter when we journey within to the deepest levels of our heart."

I LOVE YOU ENOUGH TO

Allow you to find the God of your understanding - however, whenever, and if ever you choose...... Allow you to make what I perceive to be foolish mistakes...... Never possess you and never let you possess me. Allow you to maintain your dignity and never let you take away mine...... Allow you to seek help in your own way - wherever and whenever you choose...... Leave your responsibilities in your hands and to assume my own...... Allow you to hurt when you choose..... Never apologise nor cover up for you...... Be your best friend or never see you again...... Miss you but not be destroyed when we are out of touch...... Drop all of my expectations of you...... Become so serene and at peace that I don't "need" you...... Let go of jealousy and anger...... Allow you to have your secret space and to have my own...... Listen to you with an open heart when I can...... Never tolerate your unacceptable behaviour - forgive your unacceptable behaviour when and if I am ready...... Allow you to grow faster or slower than I do without resentment...... Allow you to take magnificent care of yourself, your spirit and those things that are yours...... Allow you to become the beautiful person that your are.

After a while you learn the subtle difference between holding a hand and chaining a soul. And you learn that love doesn't mean leaning and company doesn't mean security. And you learn that kisses aren't contracts and presents aren't promises.

And you begin to accept your defeats with your head up and your eyes ahead With the grace of a woman or man. Not with the grief of a child And you learn to build all your roads on today because tomorrow's ground is too uncertain for plans.

And futures have a way of changing course in mid-flight.

After a while you learn that even sunshine burns if you sit in it too long So plant your own garden and educate your own soul Instead of waiting for someone to bring you flowers

And you learn there is a part of you that really can endure - that is strong, and has worth And you learn with every disappointment - every joy you learn.

Anonymous

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

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

Take time to read - it is the fountain of wisdom:

Take time to think - it is the source of power:

Take time to dream - it is hitching your wagon to a star:

Take time to laugh - it is the music of the soul:

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

Disraeli

LONELINESS - SOCIETY'S LAST GREAT TABOO

In death, lain Mills achieved more recognition than ever he had in life. He made the front pages. In spite of more than 20 years of public service, he will be remembered not for the way he lived but for the way he died. - Alone, on his bed, where he lay undiscovered for several days. Surrounded by empty gin bottles. From acute alcohol intoxication, according to the coroner. He was the Member of Parliament for Meriden in the West Midlands.

But this is not the lain Mills I knew and much respected. In the Eighties we worked closely together, helping Norman Tebbit privatise British Telecom and push through his reforms of the trade unions and the City. Iain was always enthusiastic, cheerful, ebullient. Perhaps I never truly knew him, or perhaps he changed, but, like all his friends, I feel guilty. At every general election he had steadily pushed up his vote. He was popular. A man in the public spotlight. Yet he died alone.

Nowadays, help is available for a huge variety of maladies. If you are an alcoholic, fill your nostrils full of cocaine or shove needles in your arm, you can turn to any number of the anonymous foundations and support groups. But where do you go for help if you are simply alone and desperately lonely? By the time you turn to the Samaritans it is almost too late.

Yet more and more we are being pushed into loneliness. More of us leave home early, or get divorced, or live too long. Almost one in three of all households are single adults. The image presented in the media is of a gregarious, fun-loving youth culture or, at the very least, a society where everyone gathers at the Rovers Return or Queen Vic in one glorious happy-scrappy family. But real life doesn't quite work like that. We have developed a society which pushes people away, particularly men. Talk to strangers in a bus queue and they will turn their back. Sit next to a single woman on a train and she is likely to rush away. Try to make friends with a child and someone might well call the police. Yet the image of the macho, funloving male is contagious. Except that, while you may forget your problems at the night club, you can't leave them behind with your underwear. In the morning when the lover of a lifetime whose name you never quite caught has gone, you're still left with the headache. And alone.

There are few groups for whom the fear of loneliness has not increased. Not just the young but the elderly, who used to rely on their children for support. Now they often don't even have a milkman for company. If they fall ill, no-one may hear about it for days. And it's not just the anti-social or shy but even people in the public spotlight, like lain Mills. While we are encouraged to 'come clean' about almost any condition our emotions, our diseases, our sexual appetites, even our drug habits - no-one wants to admit to being lonely. In our fashion-driven world, loneliness is one of the last great taboos. The lack of love that dare not speak its name.

Yet there is such a ready cure for loneliness. It needs no miracle drugs or massive investment. It doesn't need the National Lottery. It needs US. It's easy to load the blame on to others. Politicians who promise that they can do it all for us, build a society which gives us all rights but requires little individual responsibility. The media, particularly glossy magazines which fill the first half of their pages with impossible sexual role models who encourage to bonk 17 times a week, while filling the second half with endless agony letters from people who discover they can't. The Church, which seems to have all the time in the world to preach about the politics of the nation but which seems to have ever less time to seek out the elderly or infirm in their own parishes. But mostly it's our fault.

Greta Garbo used to plead "I vant to be alone". She probably never meant it. Iain Mills used to give the impression of being self-sustaining and assured. He didn't mean it either.

But in lain's case, perhaps I could have done something about it. A phone call, a letter, a lunch. Just keeping in touch. So that's what I shall do today. Pick up the phone. Write to a friend. Send flowers. Show some concern. And hope that when it comes to my turn, as inevitably it will, there will be someone there for me.

..... Sorry, lain.

I.C.C. OASIS DAYS

Wesley's Chapel, City Road Rev Dr Leslie J Griffiths MA Superintendent Minister

In association with

St Giles Church, Cripplegate Rector: Rev David Rhodes BA Curate: Rev Sue Nightingale BA

A day of quiet - prayer - reflection for people who are weary, heavy burdened, weighed down with responsibilities, feeling jaded, spiritually dry, or just need a day of renewal and uplifting!

WHEN:

SECOND TUESDAY of EVERY MONTH THROUGHOUT 1999 10.00

10.00am - 4.00pm

WHERE:

ST GILES CHURCH, CRIPPLEGATE - THE BARBICAN

COST:

£15 (unwaged £10) TO INCLUDE LUNCH AND ALL COFFEE/TEA BREAKS

TOPICS and SPEAKERS FOR 1999

9 February

"Towards Lent" (Growing Deeper in the Life of Faith)

Dr Peter Graves - Methodist Minister at Westminster Central Hall, Broadcaster

9 March

"On Stony Ground"

Jim Cotter - priest and well known writer and international speaker

13 April

"Loving God - Loving Ourselves"

Doug Hiza - author, lecturer, retreat leader in the UK and abroad Muriel Huntley, author of "Windows of Hope", counsellor, trainer

11 May

"How Important Are Dreams?"

Dr Eileen French, Analytical Psychologist practicing as a Jungian therapists

8 June

"Mad, Bad, Sad" - (A therapist looks at how Christians handle strong emotions)

Canon Ian Ainsworth-Smith, Chaplain, St George's Hospital, teacher & psychot herapist

13 July

"Justice, Mercy and Humility"

Dr David Spencer, Medical Director of Prospect Hospice, Swindon, well-known

lecturer and teacher

*Tue 17 August

"The Upside Down Kingdom"

Doug Hiza and Muriel Huntley *Note change of date

14 September

"Playing With God"

Roly Bain - priest, professional clown, leads workshops on clowning worldwide

12 October

to be confirmed - hopefully

Sister Lavinia Byrne, lecturer in spirituality at Westcott House, Cambridge,

well known writer and broadcaster

9 November

"Waiting Expectantly"

Dr Martin Deahl, Consultant Psychiatrist, St Bartholomew's Hospital

14 December

"A Close Look at Celtic Spirituality"

Ray Simpson, Guardian of The Community of Aidan and Hilda, retreat leader

writer of many books on Celtic Spirituality

The Association for Pastoral Care in Mental Health

An association which supports those who are mentally ill and their families. Registered Charity No. 327532

National office: Edward Wilson House, 26 Queen Anne Street, LONDON W1M 9LB

The views expressed in the Newsletter are not necessarily those of the Association. The Editor welcomes contributions for the Magazine. Please send to:- John Rawson, 20 Lindsey Close, Mitcham, Surrey CR41XQ or Fax 0181 679 9991