

The Association for Pastoral Care in Mental Health

# *Being Alongside*

*Spring 2021*



## **Bishop Guli gets involved**

**A dynamic new patron  
for Being Alongside**

**PLUS**

*Being sectioned...  
what it felt like for me*

*Love & community...  
in a lonely time*

*and surviving and  
thriving in Croydon*

# Being Alongside Spring 2021

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## **Association for Pastoral Care in Mental Health**

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Patrons: Professor Andrew Sims and The Right Revd Dr Guli Francis-Dehqani

Being Alongside is the working name for the Association for Pastoral Care in Mental Health (APCMH), a faith-inspired, voluntary association of individual members and affiliated groups who recognise the importance of spiritual values and support in mental health.

It has a network of supporters throughout the United Kingdom. It welcomes and encourages people whatever their faith or belief system. Governed by its National Committee, Being Alongside is primarily concerned to promote and encourage 'being alongside' people experiencing mental or emotional distress.

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# Not giving up



Having helped with Being Alongside's web and print media for several years now, I recently realised that I'd never actually read its official entry in the

Charity Commission's register. So I looked it up. Our charitable object turns out to be: "To promote the relief of persons suffering from the problems of mental illness and their families by the provision of pastoral counselling and care appropriate to their individual needs to enable them so to develop their spiritual, physical and mental capacities that they may realise their full potential as individuals and participating members of society and so that their conditions of life may be improved." (*A-a-a-a-and breathe!*)

It's a laudable object that dates back many years. And, despite its necessarily legal tone, it stands the test of time.

The register also contains a more recently formulated plain-spoken description of its activities: "(a) the provision of drop-in facilities and befriending schemes through its own branches (b) the encouragement of others to provide similar activities and appropriate pastoral care and (c) awareness and the provision of a forum for sharing experiences and ideas through its newsletter and web-site."

Despite the squeezed resources and ebbing activity of recent years, now compounded by the cruel effects of the pandemic and the requirement to limit human contact in an already isolation-inducing society, it's inspiring to see this thing called Being Alongside – its local groups, affiliates, supporters, officers and trustees – simply refusing to give up trying to deliver against the aims it has set itself.

*Trevor Parsons, editor*

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# Getting ready for the challenge

Our outgoing chair **Richard Allen** reflects on a year like no other, and how we're setting ourselves up to face the challenges ahead

**W**hat a year we've just lived through. As I've gone to sleep at night, I've sometimes wondered if I shall wake up one morning and discover it was all a dream. Then I do open my eyes.....and find that it's all been real!

Trying to keep a charity, indeed any enterprise, afloat this year has been a challenge. But Being Alongside is still here. Even if it's shipped a little water in the choppy seas of the pandemic, we've scooped it up, thrown it overboard and stayed upright; and we now have a direction in which to go.

Back in the early days of the pandemic, we delayed our 2020 AGM until the last possible legal minute, still thinking that at the end of May we might be able to meet in person. In the end we had to hold it by videoconference of course. That was a first, but certainly not a last, as part of the purpose of this issue of *Being Alongside* is to invite you to join us at our 2021 AGM on Saturday 24th April 2021, and we will again be holding it online via Zoom videoconference.

Others may disagree but, as chair, I found our first online AGM surprisingly good. There was a lot of energy and some lively debate around three visions

for Being Alongside / APCMH's future.

In the end, the assembled members backed the ideas that the trustees had been working on for the previous 2½ years. That felt like a vote of confidence, even though it wasn't portrayed as that. For me, the exciting thing is that we have new blood at the national level. Three new trustees and one new support member.

Many of you will know that Jamie Summers has been involved with APCMH for many a year. After a short break, he's back; and the content of this issue is in large part down to his hard work together with fellow commissioning editor Lowenna Waters. It's a relief to have his energy available to us again.

Also joining the ranks of trustees at the 2020 AGM is Clive Timehin, a consultant psychiatrist and Methodist lay preacher, who brings a wealth of experience, wisdom and thoughtfulness. He and Andrew Wilson, for many years at the heart of the Croydon branch, are spearheading our drive to engage with local community and church groups in south London.

Our third new trustee this year is Marissa Lawingco. Marissa is a nurse and a Roman Catholic. She has a passion for

Please join us online for the 2021

# Annual General Meeting

of the

## Association for Pastoral Care in Mental Health



to be held via video-conference on

**Saturday 24<sup>th</sup> April 2021 starting at 2pm**

All members and supporters welcome

Zoom meeting ID: 867 4394 4940

Please call or email us for meeting password

pushing spirituality into the heart of healthcare in general and mental health care in particular. She has contemporary experience in the area of safeguarding, something that has come to the fore in the last decade. So, she is shaping our national policy in line with current legislation, good practice and Charity Commission requirements. It's a big task.

Alongside the new trustees is Geoff Shorter. Geoff is the chair of Merton & Sutton branch. He has a background in business and HR/recruitment. He says he's retired, but he always seems to be fully occupied. Geoff has great energy and his business background is fast becoming invaluable in the areas of our governance (which needs a bit of updating), marketing and fundraising. Geoff has a skill set that we have needed for some time.

Since the AGM, we've moved ahead on all these fronts. It takes time and it doesn't

always seem as if the results are evident. But Rome wasn't built in a day, and even the world took six. So, if we have to take our time, we must ask you to trust us that we are using the lockdowns to get the Association ready to meet the post-Covid challenges. There will be many in the mental health field, not just in the usual areas, but across the whole of society.

We've said for a long time that our "unique selling point" is the blend of spirituality and mental health. Now we are regaining our confidence to speak out on these two issues; to speak in a public forum that is crammed with voices on mental health, but still very few on what it is to be human.

Thank you for your continuing support. It means such a lot. If you feel you can contribute anything at any time – practical or financial – do please let us know.

**Please see page 2 for contact details.**

# Let's meet Our new trustees



**Dr Clive Timehin**

*"I am a consultant psychiatrist and spiritual director with an interest in the interface between psychiatry and spirituality. I worked for many years with Croydon's mental health services and with South London and the Maudsley. I have always promoted a holistic approach to the care of people with mental health problems and I embrace input from carers and contribution from the voluntary sector. I believe that Being Alongside is an opportunity to bring a value based mission to those who require it most. Being Alongside will take its place among other local mental health charities to advocate for resources that can make a meaningful difference in the lives of people and carers."*

*"In the 1980s and lastly in 1992 I endured several admissions to mental hospitals. Psychiatry diagnosed me as manic depressive but I knew the cause was cannabis psychosis. From 1992 for about 5 years I worked running an open non-referral mental health day centre in Hammersmith called Consumer Forum. I became involved with APCMI back then, and returned in the mid 2010s. Because of my personal experience in the field as a patient - indeed my 'illness' manifested itself as a spiritual journey - I hope I have an empathetic touch with fellow sufferers. My values echo those of our charity, namely that Christian love and kindness go a long way to heal the tormented. These days I volunteer with an Oxford homeless project and continue to help at the Royal Hospital for Neuro-disability up in London. I was also the 'shepherd' for an embryonic Faith and Light Oxford group for people with learning disabilities."*



**Jamie Summers**



**Marissa Lawingco**

***“I joined APCMH as a trustee in order to support its vision and mission in mental health and spirituality, taking the opportunity to contribute to the success of APCMH in pastoral care. I have been actively working as a general nurse for 33 years, which has included spells in countries like – Riyadh, Saudi Arabia, Dubai, UAE, my own country the Philippines, and in England for 21 years in health and social care. These were significant years in learning, teaching, sharing and nurturing myself and,***

***especially, the people around me. In pursuing our aims, I hope to work on getting Christian churches involved with the work of APCMH in more inclusive efforts for people living with emotional and mental health conditions in their local parishes. A person experiencing some form of emotional stress or any type of psychological disturbance no matter how small is in need of pastoral care. Pastoral care in its modern meaning has become extensive, based on how one person sees or interprets its meaning in a sense of ‘faith.’ I hope to show others the compassion of Christ through the works of the charity with the help of everyone in the team.”***

**Will you help them achieve  
our aims in 2021?**

# Croydon hangs on

Photo credit: "Croydon sunset, and cranes!" by David Pearson. Used under CC-BY-NC-SA licence

 [apcmhcroydon.co.uk](http://apcmhcroydon.co.uk)

## KNOWING HOW MUCH THIS PANDEMIC

has threatened our peace of mind, we have tried to maintain contact with all our members and volunteers over the last year, *writes Andrew Wilson, vice-chair of Croydon APCMH.*

From the outset of lockdown a year ago, our kind volunteers set about contacting our members on a regular basis. We knew that many people did not have access to a computer or online facilities, and so a regular phone call was the only way forward, and those calls have been much appreciated and anticipated.

Our weekly 'Creative Writing' group, which like all their other creative groups, and the four weekly Drop-Ins, could not function. Instead, our volunteers have continued to work with individuals each week providing people with a theme or

idea each Tuesday afternoon for them to work on, and then phoning later in the day to hear the results of their exploration and creativity. This session has proved so popular that we have several new members.

In September, Jane, one of the volunteers, suggested that we might take advantage of government guidelines which allowed outdoor therapeutic meetings of up to 15 people, so that we could try to break the isolation that many of our members were feeling. Jane already led similar group-walks in a local garden and woodland area, which also offered the vital toilet and the opportunity of take-away refreshments in the café there. Each fortnight we have continued these very popular "Wanders into Wellness" throughout the winter, taking in the

beauty and quiet of the garden and woods, spending some time in a clearing in reflection and silent meditation, and sometimes bringing a poem

**“One of the great joys of technology is that news of Croydon APCMH has spread far and wide”**

or piece of writing that has helped us. We hope to make these walks a weekly feature of our programmes as things move ahead.

The ‘Spirituality Group’, which used to meet for a communion service and discussion, now meets via Zoom each Friday. At the moment we are looking at some wonderful images by artist Michael Cook, (hallowed-art.co.uk) and accompanying poetry by Ros O’Melia, in a reflection on the garden of Gethsemane - *A Garden in Darkness*.

Again, this regular catch-up and sharing has proved immensely important for people. One of the great joys of technology is that news of APCMH has

spread far and wide, and now we have people from as far apart as Warminster and Romford joining us!

The current financial crisis has hit our local authority hard, meaning that the core funding we always relied on from the borough is no longer. Like so many small charities providing invaluable support in the community, our future is now in the balance.

**We face the task of searching for funding elsewhere, but our resolve is not only to survive, but to thrive!**

## Bishop Guli becomes a patron of Being Alongside

**We are delighted to announce** that the Right Reverend Dr Guli Francis-Dehqani has accepted our invitation become a patron of our association, joining Professor Andrew Sims in the role.

Guli was recently confirmed as bishop of Chelmsford, a diocese which covers a diverse population of Essex and East London, and is in the process of transferring there from Leicester diocese where she served as bishop of Loughborough.

She writes: “Over the past year we have become acutely aware of the rise in the number of people struggling with poor mental health. The strain that the pandemic has put on people is enormous. In our churches we have



Bishop Guli gets stuck in at a night shelter in Leicester

*“The need to demonstrate our care for one another has never been greater”*



seen the importance of both pastoral and spiritual care provided by clergy and others at a time when meeting physically has not been possible.

“As we emerge from lockdown,” Bishop Guli continues, “it’s great to know that Being Alongside is there to support those most profoundly impacted by mental, emotional and spiritual difficulties by providing resources, developing networks and promoting good partnerships. The need to demonstrate our care for one another has never been greater. Often what people lack is somewhere they can talk and someone who will listen. As a society we need to develop our soft skills and find time for one another, and we need also to invest in the expertise required for those who need professional help.”

As a church leader, Bishop Guli has been making a special effort to care for

the carers during this time of crisis.

“Probably the most important thing I’ve done as a bishop during lock down has been to stay in touch with clergy and lay ministers, to phone them up from time to time and listen to the challenges they have been facing. I’ve been amazed and humbled by how much this simple act has meant to people.”

Being Alongside was established and remains rooted in Christian communities. In a diverse nation, can we really meet our avowed goal of extending pastoral care to all, irrespective of faith and belief system, we wonder? Bishop Guli replies: “We are all human beings and we share far more in common than those things that separate us. Reaching out and working in partnership is now more important than ever and my hope is that in developing relationships we don’t emphasise divisions but find ways of overcoming barriers.”

What is it actually like to be sectioned? When your mental health is deemed to be beyond what's healthy and could potentially put your life, or even others, in danger?

Well, this is what it felt like for me...

Aisling Jago

*finding myself*

*sectioned*





“Are you sure about this?” he said, as I slid the white gold band adorned with a diamond from my ring finger, and passed it back to him across the café table.

“Yes I’m sure.”

Little did I know that in that moment, Pandora’s box had been well and truly ripped open, and goddamn it, no matter how hard I tried, I just couldn’t get it shut again. It was an otherwise innocuous June day in an upmarket, pedestrian borough of South-West London, famed for its yummy mummies, posh smoothies, and chain restaurants. However, despite the suburban setting, this small action was about to set the wheels in motion for what can only be described as complete and utter hell on earth. Charles Dickens’ *Hard Times* had nothing on the next few months of my life. I remember I was dressed in my workout gear: I’d just left a class at my new gym, and had come to see him for this last, final, decisive action over a coffee.

Passing back the engagement ring in itself was such an easy thing to do. It wasn’t so very hard to call curtains on a life that had barely just begun. What I hadn’t bargained for was everything that came next. We walked back towards the train station. He was on his way to a band practice: he was a pianist in a jazz band. I clutched his arm, but let him go as I took a different path towards my new apartment with two new housemates.

I woke with a pain running through my body, and sweat drenching my bed-clothes. The severity of what had occurred was only just rearing its ugly head. By this stage, I was beginning to behave a bit erratically. I was no longer sleeping in my bedroom, nuzzled in a small and compact townhouse with a view across neighbouring rose gardens and surfboards. No, by now I’d migrated to the sofas. When one feels uneasy, it’s easier to sleep somewhere that doesn’t require the commitment of a bed. You can fall asleep as and when you wish: you don’t have to decide on a time to enter into oblivion.

“What are you doing here?” asked my puzzled yet drunk housemate as she entered the apartment, alongside her slightly sozzled friend. “Oh nothing, sorry, is this weird!?” After a brief chat about her ex-boyfriend in the kitchen, I slunk back to my bed, embarrassed and ashamed. When I woke in the morning, the routine was exactly the same. Clip open the back door, walk down to sit near the jasmine plants, which were in full bloom at this stage, and light the first of many cigarettes. Click. The lighter’s flint catches on the gas, and poof, the flame shoots upwards, like a signal or a genie in a bottle. This was just the beginning. Six months later, after two psych wards, and an ill-fated move to the Persian Gulf, I’d find myself sectioned.

## *Getting sectioned*

I grabbed my toothbrush, some clothes, underwear, my MacBook and a hairdryer and stuffed them into an overnight bag. They'd come for me! Two burly ambulance ex-servicemen and a psychiatrist were in the sitting room of my grandfather's apartment, where I was staying. A psychiatrist had come to see me earlier in the day and it was obvious that they thought I was manic. I think my proclivity for picking up knives and holding them to my arms had also contributed to the general atmosphere of panic and trauma in those around me. I still maintain that my sectioning occurred because of a very high-stress environment and my attempts at dealing with it, but again, that's just my assessment of the situation. Finally, they bundled me into the ambulance, and drove me to a hospital in the suburbs of a university town not so far away. I remember on my first evening I found being there, and out of my previous environment, somewhat relaxing. I lay down in the 'resource room' – a pale green, airless room that looked like a children's soft play room, with bean bags, soft chairs and mats on the floor like those you'd use for gym at school, and watched a movie – with little insight into how disturbing I'd find the whole experience further down the line.

It was January 11<sup>th</sup>, so I'd managed to hold it together, just about, through New Year. I had a favourite thing to say to my parents and family, that was: 'You've ruined my life!' and then I'd just scream it and repeat it over and over. I didn't care if it was 3am on Christmas Eve and I'd gone into my parents' room in our holiday cottage in Wales and shouted it, or whether they'd popped over for afternoon tea – I'd scream it then, too. I'd also scream that I wanted to commit suicide. I didn't care who was listening: I'd scream it. I even once went to a Bible Study at a family friend's house in the village and walked in in floods of tears screaming that I wanted to end it all. Not very palatable for the three elderly women enjoying reading scripture on Gideon in Judges and trying to have a rich tea biscuit.

I'd been behaving a bit more erratically before the sectioning, but nothing completely out of character. I'd been smoking lots of cigarettes. On one occasion, I went back to a man's house who I'd never met before and spent the afternoon drinking beer and smoking roll-ups. He was Polish and cooked me some sausages, bread, and onions as I told him that my family wanted to lock me up in a psychiatric ward. We listened to Lizzo's 'Boys' and kissed.

On another occasion, and I'm not proud of this, I turned up at my parents' house in a taxi, went in and started to smash things up. I picked up a knife in order to cut my own arms. I smashed bottles in the pantry: thick globules of tomato ketchup covering the floor. I smoked cigarettes inside their house (they're non-smokers). I told them in text messages that I wanted to kill them for what they'd done to me. And what they'd done, in my mind, was completely and utterly ruin my life.

## REAL LIFE STORY

Earlier in the year, I'd come downstairs from my parents' bedroom holding a Stanley knife to my wrist when some of their friends had come round for afternoon tea. They'd managed to calm me down, take the knife away, and make me have some chocolate cake and a cup of tea. I don't think I ever really wanted to hurt myself, and I only ever did very superficially with a razor blade. I made some small cuts on my forearm and watched as the blood seeped through the small wounds. Each one had two distinct stripes as they'd been made with a leg razor. They stung for days afterward. Nothing dramatic: but I was trying to get a message out to my family: I ain't happy with what's going on, people.

### *What was it like in there?*

Lorazepam. Aripiprazole. Zopiclone. Olanzapine. Lorazepam (again). Yep: an average day in the nuthouse. "You alright my love? Harry and Sally have gone now. You'll have to chat with the apples and pears and Lisa. Lisa's wearing pink gloves. That's her." That's Katie: she talks in a strange way that mixed an old cockney and pop culture: a bit like Lily Allen mixed with Rodney from Only Fools and Horses.

First things first: the walks. I had my special walks that I'd take each day just to break up the time. Walk number one: perhaps at about 8am, or approximately 10am after the 'morning meeting' (more on that later). I'd get dressed, have my 'meds' – I'd be sharply awoken each morning at 8:30am by a nurse banging on my door and announcing: 'Aisling, come for your meds'. Then I'd head out after my bowl of cornflakes and my first shower of the day (yes, there were potentially many showers in a day, just to get through the day). I'd put on my snuggly bright red Hades jumper of lambswool, which proudly said 'Joy Division' across the front. Of course I didn't tell anyone that 'Joy Division' were actually a cult pop-rock band whose frontman committed suicide, but instead tried to pull it off as a jovial sartorial choice. Then I'd head out, coincidentally down the street where my mother lived as a student, and pass all the well-heeled students on their way to lectures. Pretty sure I came off as a student myself, in my white sneakers, and long black coat, I stuck in my iPhone headphones and headed down the hill. Once I reached Coop, I'd buy three things: a newspaper (because friends worked there and I was keen to see what they were up to); a packet of chewing gum (Wrigley's peppermint); and a Costa coffee – usually a medium white Americano. After paying for them with the credit card I acquired in the Gulf, and attempting to appear as normal as possible, I'd then head all the way back up the leafy suburban street.





The area of town I was interned in was really rather pretty. But, as I said, it was very student-focussed. The houses were terraced and Victorian. Tasteful. If you walked past a residence, you'd often see a stand-up or grand piano in the front room; maybe some nice artwork on the Farrow and Ball-painted walls.

I'd arrive back at the top of the hill at the hospital and make my way back to the ward, which had a little black cat on the door that let you in. No ordinary door: a heavy, metal, door that you had to ring a doorbell in order to exit or enter. As well as this, each time you wanted to leave you'd have to 'sign yourself out' or 'get signed out' by a member of staff. This entailed someone signing in a booklet, to say what you were wearing, and where you were going, and how long you'd be. You also had to say if you were getting any smoking materials from your locker, as most people at the hospital appeared to smoke (I'd managed to simply stop by this time).

Activities! Oh, what a way to be made to feel like a woman old beyond her years. Knitting. Watching the television, maybe Bargain Hunt. Listen to the radio. Radio helps. Radio offers a window to the outside world. Lunch: same each day. Medication. Medication. More. More. Creative writing was a good outlet, but I found that sometimes I was so distressed I'd be literally writhing on the floor, and unable to focus on the writing tasks we'd been set. There was also an expressive dance class that I enjoyed frequenting: think Peep Show crossed with a psytrance night and you might be just about onto what it was like.

People's stories about how they've ended up in here are very interesting. One woman, young, with bright, big, blue eyes and an inquisitive face (she asked me about myself – why I was there / what was wrong with me) said that she'd taken an overdose when her son was just 12 weeks old. She didn't have post-natal depression, but things had fallen apart for her when her partner wouldn't support her and her son meaning she subsequently lost her home and her job working in human resources. Another had attempted to kill herself by slicing her own arm. She was constantly in pain and asking for painkillers from the nurses.

One woman had schizophrenia and always walked around talking to herself, saying "she said this, she said that, they told me this, they told me that" etc etc. She had bright pink hair, and tattoos all over her body, including one that read 'cunt' right across her back. One day, she disappeared, only to return to the ward a few days afterward. There were also patients who seemed quite normal. One, who kept getting mistaken for a nurse (this happened to me regularly, too), said she'd been sectioned now over a series of 23 years. She would get better, and then she'd somehow be forced back to the wards. Another had a hard, pinched face, and she'd stalk the corridors with her headphones in, constantly listening to music. She loved music so much ran her own radio show, I found out. She'd also dropped out of a philosophy degree, never graduating.



Then, there were the pure nutty ones. The ones who you couldn't have a conversation with, the ones who were so angry they screamed and shouted non-stop, the ones who talked about God a lot (many of them talked about God). Another woman kept herself wrapped in a blanket the entire time, which she used to cover her head, and only dashed out of her room occasionally to go to the toilet. She never showered. Rather darkly, on regular occasions, a whole group of nurses would gather outside her bedroom, with blue gloves on their hands, and I knew what they were doing. They were going to forcibly inject her with her medication as she refused to take it.

A lot of people wonder what it's like in a psych ward. Let me tell you this: there isn't that much to do and the day has to be meticulously spread out and broken up, I guess a bit like if you're in prison.

## *The chaplain*

How to explain the raw, deathly, painful, jagged punch of grief that cuts through you like a knife? How to capture that feeling of genuinely wanting to die at what's been lost, and the sweat-inducing, writhing feelings of regret, of pain, of suffering that shoot through you like a knife cuts through butter. Like molten lava is being poured down your spinal chord. I'm sure others on the planet will have felt the same levels of pain and suffering and loss, but when you're experiencing it, it's as if you're the only one to ever suffer as much. You can't comprehend how someone else could ever have felt as bad and sad as you do at that exact moment.

At my lowest points, I reached out to the Psalms for comfort. Out of everything, Psalm 27, 'The Lord is my shepherd, he lays me down in fields of green' – that's the only thing that could console me and make me feel whole again. Other psalms – which all seem to deal with loss and the hope given by Jesus Christ, also consoled me. Alongside reading these in the Bible, I also had weekly meetings with the hospital chaplain, who comforted me in my loss, and explained to me that she couldn't understand how bad I was feeling, and how it must be to lose so much at the age of just 30, but she said that, like Job, I'd get everything back – but more than I could have dreamed.

The chaplain was a kindly, loving, and matriarchal figure, who offered me great comfort each time we met. She had a snappy dress sense, often wearing rich reds and purples, which were interlaced with a great hairstyle and a thoughtful way of speaking. Whenever she saw me, she lifted up my spirits.

Job, of course, went through it. Man, he went through it – but he also came back from it. For him, just when he thought it couldn't get worse, it got a bit worse. However, all Job said was – the Lord giveth and the Lord taketh away. In other words, why accept it when the Lord gives gifts, but why then abandon the Lord when he takes away those good gifts?

### *Psych ward, Gulf style*

This wasn't my first rodeo, however. I'd actually experienced not only a mental health hospital in London (for a two-night stay at my own volition), but also a hospital in the Persian Gulf that I'd admitted myself to voluntarily, where a group of young women were being kept. I was there for five nights all in all. It all happens so quickly. Before you know where you are, you're being stripped and electrodes are being placed on your breasts and legs. One strikingly intelligent young woman really caught my attention. Among some other really profound things, she told me: "This is my holiday camp!"

A particular feature of life on the psych ward in the Gulf was smoking. But this time – I was involved. Yep – I enjoyed the smoking. I relished the smoking. I'd sit in the smoking room with a rather obese woman whose son was a famous singer, but who had sadly been killed in a car crash, and it had sent her somewhat crazy. She'd spark up, wearing her hijab, and thick-rimmed spectacles, and I'd join her. Alongside her in the ward was my roommate, who was fat and always asking for more food. Alongside asking for more food, she'd request I give her massages, which I always politely refused to give her.

I moved to the Gulf for a job as a journalist. However, things didn't quite go as they should have. It had only been about two or three weeks when events started to take a sour turn. I'd moved into a five-star hotel, which, on all accounts, was nice. I was earning a lot of cash which was equally nice, and spending it on room service each evening – whether salmon pasta; or pizza; or a veggie mezze platter. I was making friends, too.

One of my main friends was Alice, a slightly older woman in her early thirties. I knew her from my previous job in London. She had once worked with refugees in Africa, and now was changing her trajectory bunkered down making lots of money in the Gulf. It was a truth well accepted that this oil-rich state as a place was boring, but what it offered was high salaries, so people went all the same. In the summer months, for about 4 or 5 months of the year, you can't even step outside it's so hot – reaching approximately 50 degrees. Other groups of good friends were a foppish culture journalist, a cool girl from Lebanon and Beirut who'd honed her edge living in Paris; and an Indian guy who'd lived there for most of his life with his parents. These were my crew, and I loved them for who they were. However, things didn't last that long.

## REAL LIFE STORY

To begin with, I spent my evenings lying by the pool in the five star hotel. But something went awry, and at work I ended up going outside for smoking breaks – lots and lots of smoking breaks. Then, of course, Alice got involved and made me go and see a psychiatrist, who promptly said I needed to go to a psych ward. And boom: there you have it. As I said, all of a sudden things become inverted. You move from up to down, left to right, forward to backward, colour to discolour, torsion to distortion. I'd entered the nether world of the psych ward. At that point I was still totally obsessed with my failed engagement, and that was constantly at the front of my mind. I remember one man in the assessment centre saying: 'You know, life continues'. However, I couldn't understand how to continue it, if that makes any sense at all. So, I was ushered into the nether regions of well-off Arab society. The part that us ex-pats weren't supposed to see.

### *After release*

Since being released, I've focused on gardening with my dad, which has taught me the peculiarities of tending a garden. I'm sure I'd never have learned these things otherwise. I now know what mulching, deadheading, pruning and all these other gerund terms mean.

After release, I focussed on gardening with my dad, which taught me things like how to deadhead roses, how to prune, and what mulching means. I was completely ignorant of all these things before that, so it was a great experience to have the chance to learn more about these skills. Further, it was interesting to see what my father does for a living, and to follow in his footsteps for a while. On one occasion, I found a beautiful bird's nest filled with gem-like bright blue eggs. Other duties included edging lawns, and scaling many ladders to remove deadheads from roses. It was mid-summer, so the Cotswolds landscape was lush and green.

Interestingly, this period also coincided with the first coronavirus lockdown. I lived with my grandfather in a retirement village, watched the daily coronavirus updates on the television, and drank copious amounts of sweet sherry. I also had to have weekly catch ups with the mental health teams, which, if I'm being honest, did help to break up the monotony, but also were very frustrating. I didn't see any benefit from them, and found the whole process constrictive.

## Life now

Since then, I've re-entered journalism, and am now working full-time and living in London. Despite not having exactly the job I'd like, it's definitely good to be working again and to have that focus back. I'm renting an apartment in North London with two other young women, and we have a black and white cat for company. We also have a small garden, which we share regards tending duties, although, I have to say, I probably contribute the least to this! I suppose this is a little beacon of hope. What I'm trying to say is, getting sectioned isn't the end of the road. There is light afterwards, and you can get things back on track again.

My life doesn't compare to the halcyon days of my twenties, to the trips I used to take across the States with my now ex-fiancé, to tending the tomatoes in our shared garden to our lovely little flat, or to the hope that I used to hold for the future. I do feel like those youthful hopes and dreams are now, sadly, a thing of the past. But, I still hold out hope to move abroad again, but this time for a longer extended period of time, and to build a happy and productive life once again.

The only way to combat this whole situation is to do the things you love in life. Keep writing. Keep reading. Keep drawing. Keep seeing friends and enjoying. Life is a beautiful gift that needs to be celebrated. Things might have failed to work out how I'd have liked them to work out, for one reason or another, that even I'm not completely sure of.

*The cigarettes still make an appearance,  
but there are times when it's less now.*

*Learning to love oneself and one's life is key,  
and to be grateful for the small things...*

**Aisling Jago**

# Lucy's Coronavirus Poem

Sweet memories of our freedom  
Touch our thoughts,  
Whisper in our dreams  
Our world, changed beyond our control and recognition  
Now living in a timeless zone.  
We took so much for granted -  
A touch, hug or kiss,  
even a simple coffee with friends  
now out of bounds.

We ache for our former lives, our freedom of movement  
Our choices, our voluntary work, our closeness with others  
The day to day of our being alive,  
Going on the bus without fear of infection  
Or connection with strangers who might be coughing.

Masks and plastic gloves, symbolic of our new boundaries  
Our new distance and lack of trust,  
Keeping everyone at arm's length,  
Cautious about ringing the bell on the bus, or holding onto any surface  
Even surfaces are carrying possible invisible infection.  
Not feeling safe, on high alert and anxiety  
Every time we go out. Is it safe? Are we allowed?  
Even Time has become meaningless.

But Spring is helping us cope, with  
beautiful flowers -  
purple irises, scent of roses  
Mauve, pink & white Lilac blossom  
pink Rhododendrons, red Camellias  
a sundial in a garden, telling the time  
Our allotted time for walking  
Agreed by the government  
I'm watching from my window, at people running, cycling  
Smiling at last, clasping at freedom. Some joy  
Within the confines of our new lives.  
Feeling the fresh crisp air and wind  
The bluest skies  
Talking with friends on the phone,  
Getting through it together.

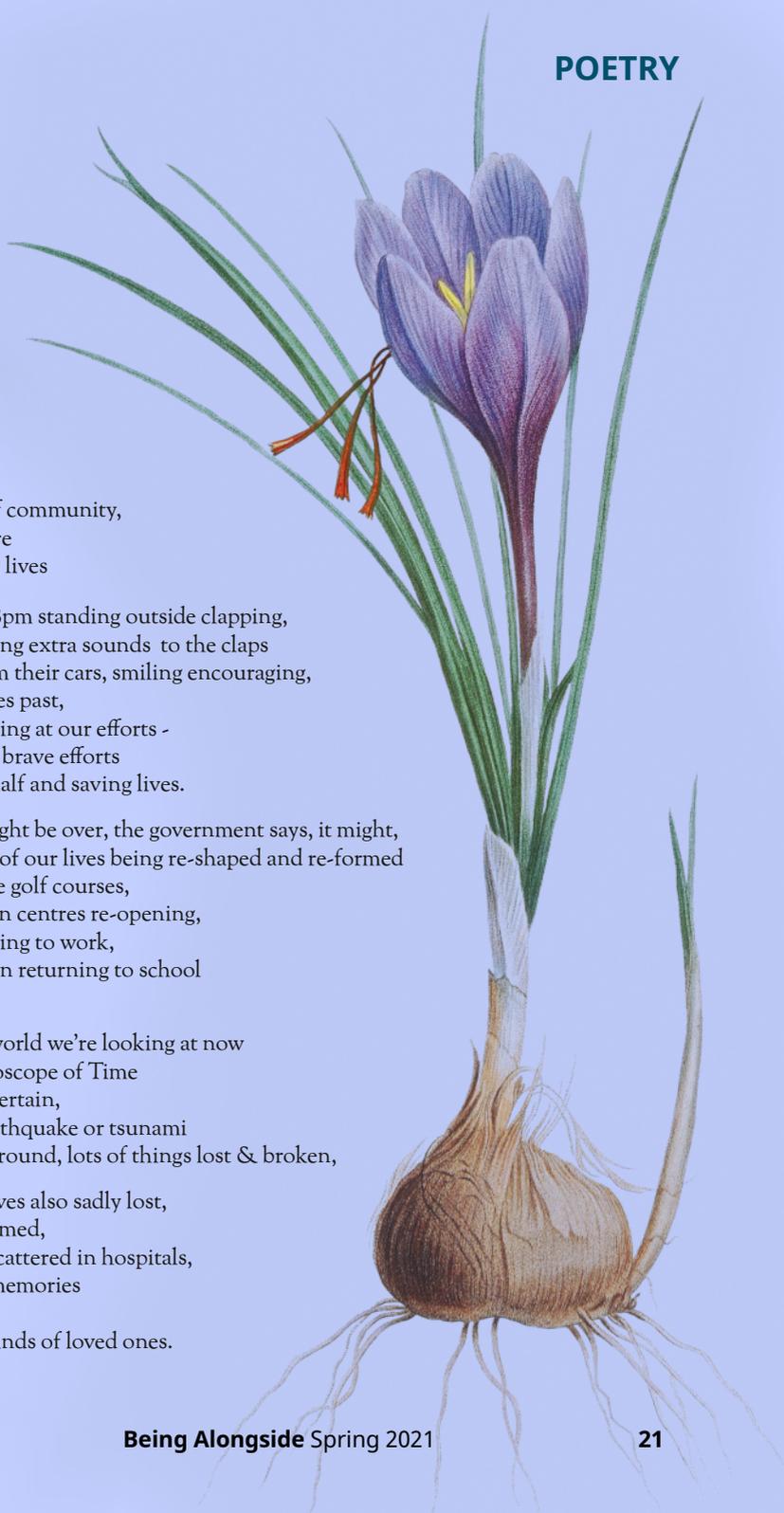
Even a new sense of community,  
 Definitely lost before  
 With our busy busy lives

Every Thursday at 8pm standing outside clapping,  
 Buddhist bells, adding extra sounds to the claps  
 Drivers tooting from their cars, smiling encouraging,  
 An ambulance drives past,  
 The lady driver waving at our efforts -  
 But their incredibly brave efforts  
 Fighting on our behalf and saving lives.

One day soon, it might be over, the government says, it might,  
 The bits and pieces of our lives being re-shaped and re-formed  
 A bit at a time, some golf courses,  
 tennis courts, garden centres re-opening,  
 Some people returning to work,  
 maybe some children returning to school  
 But it depends . . .

It's a possible new world we're looking at now  
 through the Kaleidoscope of Time  
 Everything still uncertain,  
 Like life after an earthquake or tsunami  
 Everything tossed around, lots of things lost & broken,

So many peoples' lives also sadly lost,  
 Unable to be re-claimed,  
 Their possessions scattered in hospitals,  
 But their precious memories  
 Living forever  
 In the hearts and minds of loved ones.



# Our struggle with loneliness

In response to an increasing number of people arriving at Southwark Cathedral complaining of loneliness, the cathedral's day chaplains asked **Andrew Wilson** to lead them in a group discussion on the problem. Here he shares his contribution to the meeting.

*Supper at Emmaus by Caravaggio*



I based my contribution to the discussion around two books I had been reading in lockdown. By way of introduction I suggested that the experience of loneliness was universal, whether it be in the playground perhaps, or the workplace, or sadly even within the circle of family and friends. One commentator writes *"The experience of loneliness is as universal as hunger or thirst. Because it affects us more intimately we are less inclined to speak of it. But who has not known its gnawing ache?"* Jesus himself shared in that anguish, as Gethsemane and Calvary lay bare. *"Alone, and in silent tears,"* he endured betrayal and stigma.

The two books I had read both explored the anatomy of loneliness. The one a novel long-listed for the Booker prize, *Real Life* by Brandon Taylor, a black, gay American writer, and the other *The Shattering of Loneliness*, by Dom Erik Varden, formerly the abbot of the Cistercian abbey of Saint Bernard in Leicestershire, and now returned to his native land, to become Bishop of Central Norway.

Of course this vulnerability and openness is costly and risky. Sometimes it seems too much of a risk, encouraging us to close in on ourselves. The loss of loved ones, betrayal in our relationships, abuse, can move us to distance ourselves, unable to bear more pain. For some it is historical and social stigma that forces that distance on us. Perhaps it is our gender, or race, or sexual orientation, or mental illness that in the eyes of others sets us beyond the pale. Poverty, mobility issues, deafness, or blindness, simply being a carer, with all the limitations and frustrations that entails, can exclude us from any sense of belonging. And now the pandemic lays isolation on us.

In his novel Brandon Taylor deals with the issues of solitude, sexuality and race. Wallace, the central character, is a black, gay biochemist, who builds a life-style based upon self-preservation. Reflecting on the racism he encounters in his university department, Wallace says to himself,

*"The most unfair part is that when you tell white people that something is racist they hold it up to the light, and try to discern if you are telling the truth. Racist or not. And they always trust their own judgement. They have a vested interest in underestimating racism, its amount, its intensity, its effects. They are the fox in the henhouse."* But Wallace chooses to keep schtum. Most people who suffer stigmatization will identify with that. One of his colleagues tries to get closer, and comes up against the wall that Wallace has constructed against intimacy, and self-disclosure.

When he does begin to open up to Miller, his friend, he is still kidding himself. *"I have sealed it all behind me. Because when you go to another place you don't have to carry the past with you. You have to keep going, if you're going to survive."* ( In 12-step terms this is called 'doing a geographical'.)

In denying his reality Wallace risks losing any sort of real relationship. Finally, after powerful tussles, the relationship between the two of them culminates in a moment of physical aggression. Miller and Wallace both face their own personal demons, their denial and fear. Somehow this struggle unites them, and they begin to lay bare their past, sometimes with terrifying honesty. Finally Wallace decides to stay in the present, and not to flee reality any more. After their explosive encounter

## FEATURE

Miller decides to cook supper for them both, and as they eat, unable to battle with words any more, Wallace begins to see possibilities and hope, and thinks to himself: *"This could be my life. Eating fried fish together in the middle of the night. This could be life together, each moment shared, passed back and forth between each other to alleviate the pressure, the awful pressure of having to hold onto time for oneself. This is perhaps what life is, the sharing of the responsibility of anchoring oneself in the world. People can take hold of each others hands and hold as tight as they can, they hold on to each other, and to themselves, and when they let go, they can, because the other person will not."*

This novel sums up for me so much of what loneliness does to us. What is it that creates possibilities for hope, renewal and wholeness in those who struggle with loneliness? Sometimes is it simply the fact of being with an other, (not necessarily with our mouths full of fried fish!), even if we are lost for words, too exhausted to talk. Simply being present. We underestimate the depth of what we offer simply by *being there*.

Dom Erik looks at the spiritual journey that all of us must take towards human wholeness and fulfilment, and he hints at the raw materials we will need, and the stopping off places that we will encounter, as we become aware of our vulnerability and longing. To take that journey, and answering to that longing will asks of us a readiness to be open to others, and to God. In his meditations on the breaking down of isolation Dom Erik begins to look at the resources people of faith can access. He urges us to make a habit of reflection—remembering God's mercy, and the longing it awakens in us. Our second remembrance is a realisation of our own vulnerability and limitations. He recalls the cry of God in Eden to fallen humanity. *"Remember that you are but dust."* But Bishop Erik sees this not as judgement, or a curse, but as the way forward into hope, planting our feet firmly in reality, and on the ground.

This acknowledgment of our own vulnerability should awaken in us our need and our compassion for others. A remembrance of our own suffering and hardship should inform and strengthen our own resolve to help others. Dom Erik says that *"if we are divested of illusions, we will be both fragile and free."* Realizing our own common humanity and shared messy history turns our faces outwards, to accept that we need others.

Dom Erik assures us that we are not left to our own limited devices. God will provide! Those two mindful memories of God's mercy, and our humble self-acceptance will empower us as we serve as listeners and soul-friends to those come to our door. We journey together. For Dom Erik his monastic community is the *'tent of meeting'*; and our own local communities will strengthen us and equip us. We are called to construct an increasingly inclusive community, a nourishing community.

Dom Erik remembers being haunted his in his childhood with the notion that if we try believe and try hard enough we ought to be able to make everything better. He comes to realize that it is only by accepting our powerlessness that others can grow. Before an addict is able to reach out for help and change it may need them to arrive at the lowest point in their life; to the place where they have lost everything, damaged everything, and the road runs out. This is often described as a Gethsemane ex-

## After Jean Vanier...

Members of our organisation are among the many, many people who were profoundly inspired by the late Jean Vanier as a person, as well as by L'Arche, the worldwide community he founded to enable people with learning disabilities to live alongside people without disabilities as equals.

So we were stunned to read the findings of an independent investigation commissioned by L'Arche which revealed that, over a period of decades, Jean Vanier had engaged in a pattern of manipulative and emotionally abusive sexual relationships with nuns and other often vulnerable women who were working at L'Arche.

We commend the courage of the women who came forward, “without any hatred or desire for revenge”, wanting to tell their stories and help L'Arche to avoid any similar events in the future.

In the next issue of *Being Alongside* we are planning a special focus on the issues raised by these revelations. We will lead with the testimony of abuse survivors and with their views on what needs to change; find out about safeguarding and how abuse can be prevented; and reflect on how we come to terms with such devastating discoveries about people we admire.



perience, the necessary fall before their spiritual awakening. Addiction is just one face of our common human longing for fulfilment. It is this *'longing'* that in Dom Erik's words *"defines the human condition."*

Varden points out the realism of the scene at that table in the inn at Emmaus, so vividly painted by Caravaggio in a canvas that rests in the National Gallery. *"Here the pilgrims are men of a certain age, dishevelled and fragile looking, hardly daring to believe the vindication contained in Christ's assertive blessing."*

For me this encapsulates the work we are called to as people come to our groups and drop-ins—unsure, searching for some sort of meaning, connection, fellowship. Jesus' guests at that table haven't made the connections, but at least they have invited and entertained his company. For Dom Erik, and for us, this is enough. Whatever longing for love and connection has people arriving at our doors we believe it bears the marks of at least a half-forgotten memory that we might be loveable, even perhaps even made in the image and likeness of God. We dare to hope.

**“We underestimate the depth of what we offer simply by being there”**

# Freed From Shame

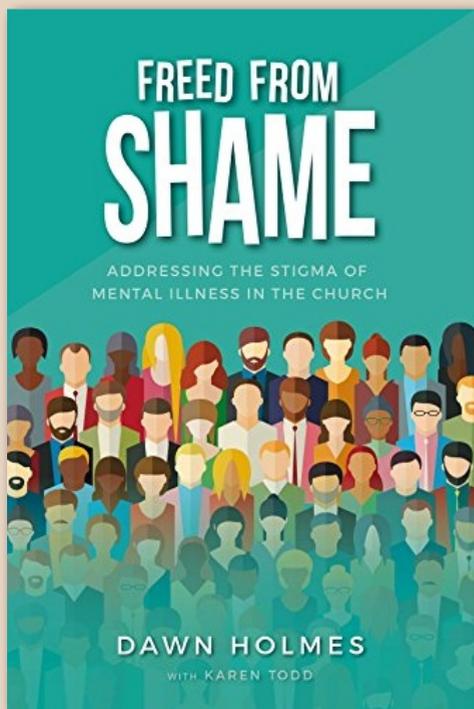
by Dawn Holmes

**I**n the April 2020 issue of *Christianity* there was a book review of *Freed from Shame* which gave Dawn Holmes' work the same 4 stars as Justin Welby's latest. Its subject matter was of particular interest to us at Being Alongside / APCMH, subtitled as it is 'Addressing the stigma of mental illness in the church', so I immediately ordered a copy online. You can buy it direct from the author via [freedfromshame.co.uk](http://freedfromshame.co.uk), and if you prefer to read it as an e-book, it's available on Amazon Kindle.

With help from Karen Todd of Simplicite, a digital agency with a track record of working in church contexts, Dawn has produced a book that is easy to read, only 100 pages long all laid out creatively and clearly. It is aimed at

anyone interested in mental health issues in the church, be they leaders, people with problems, their friends and relatives. It comprises three sections. Part I 'Understanding mental health' deals with all the diagnoses people are given, Part II 'Being understood' contains the real-life stories of nearly 20 sufferers and Part III 'Equipping the church' gives practical advice to churches on how to help.

To be honest I found Part I a little dry but that's just my personal perspective and probably the information there will educate the layman – when in Part II we learn that Michelle was diagnosed with 'Emotionally Unstable Personality Disorder' which used to be called 'Borderline Personality Disorder' I wonder



if these labels really help anyone – are we not just people?

The testimonies in Part II derive from Dawn’s survey questions. Each one moved me. I’ll share a few with you now. Michelle says: “I just want you to walk with me, like Jesus does in the poem ‘Footprints in the Sand’.” Peter says the most important advice is to “listen properly – look behind the mask that a person puts on to protect themselves.” Heather pleads: “Don’t judge me ... be practical but patient but above all loving.” Deborah, whose daughter has had traumatic teenage years says: “I believe it’s time churches did more to support people struggling with mental illness. Don’t let more people suffer alone, get hurt or misunderstood – it’s time for a change.” Amen to that.

Dawn’s practical suggestions in Part III include setting up drop-ins, quiet zones, prayer spaces and befriending sufferers one to one. I particularly liked one of her bullet-point charts which mirrored the ethos of our little charity, but were all taken from comments in her survey.

- *Be real.*
- *Don’t look down on people, it could be you one day.*
- *Listen, listen and listen some more.*
- *Don’t push for more information than the person wants to give.*
- *Keep information confidential.*
- *Be respectful.*
- *Love them like Jesus does.*
- *Walk into services with the person and sit with them.*
- *Show support rather than a “fix-it” approach.*
- *Listen, pray and be a friend.*
- *Don’t give up on the person.*
- *Tell people it is OK not to be OK.*
- *Be more accepting and less shocked.*
- *Stop any gossip or negative comments about the person.*

All in all an excellent publication, written with empathy and love. As churches, we need to step up to the plate and end the stigma and shame says Dawn. May God reveal His heart to you as you read this book and bring His hope, grace and peace to all.

**Jamie Summers**

*Get your copy of Freed From Shame from your favourite bookshop  
or direct from the author via [freedfromshame.co.uk](http://freedfromshame.co.uk)  
Also available as an e-book on Amazon Kindle*

# Slightly Bonkers Jamie

a memoir by Jamie Summers

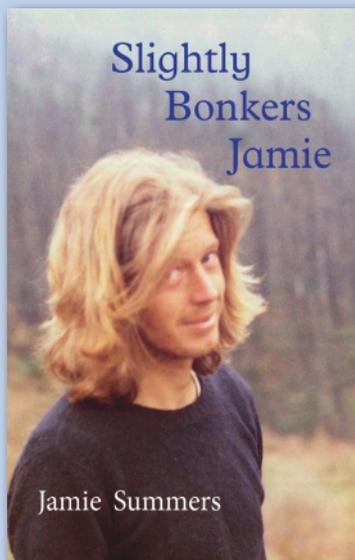
This is a well written coherent account of what it must be like to have been born with a silver spoon, suffered the slings and things of outrageous fortune, fallen heavily, recognised one's own plight and, with belief, compiled the many memories to chronicle a 'you couldn't make it up' succession of extraordinary events. The fact that it is done with clarity and honesty makes it compelling reading.

The memoir starts off with the horrific ordeal of slipping through the mental health net, even as a voluntary patient, and reads at this stage rather like a verbatim account outlining the events after they had happened. The logical, well argued in hindsight, rant against widespread chemical coshing by the seemingly non-sensical overstretched unconcerned authorities and the Catch-22 patients can find themselves so easily sucked into make for disturbing reading.

Yet with perseverance, and some broad ideas about faith, the author survives and goes back in time to explain the rarified world of inherited wealth into which he was born. He reflects on his, often idyllic, privileged upbringing telling of fascinating ancestral anecdotes up to the point of his arrival within the strange family dynamic. His evocations of the lifestyle alongside the rigours of an elite private education are most illuminating as is his devastation on the, at the time, unexplained suicide of his mother.

Persistent bolter behaviour by his philandering father can't have helped much in the feelings department neither can a complete lack of emotional attachment between father and son; the matter seems to have been emotionally swept under the carpet of respectability as was so often the behaviour in days gone by.

Suffering in silence yet conforming to the norm he continued indulging in pastimes and pleasures; playing the game, at that stage of the performance, was considered the important thing in life and playing hard was admirable. To be seen to rebel and yet retain class conventionalism was indeed a tricky balancing act. Mostly manageable but when wrong, disastrously so.



Despite the increasing personal knockdowns; some hugely unfairly financial, some marital, many self-inflicted due to his regular cannabis consumption, the prose is never delusional and doesn't sentimentalise the sheer unfairness of the experiences. The pain is described as are the fun times and it is these which seem to keep him going throughout the tribulations by which he is beset.

Sections of the memoir alternate between diary accounts of his travels, his musical tastes and his descents into the depths of mental trauma. This pendulum-like progress (?) keeps up a steady momentum eventually enabling him to overcome his illnesses by seeking solace within worship. The need to communicate his experiences and assist those less fortunate is now very much uppermost within his aim and set firmly in his sights. More descriptive travels (interesting destinations, now alas, mostly unrecognisable from his adventurous era) follow as does a gradual understanding of why he perceives he was put on the planet.

It is by meeting the charismatic Jean Vanier several times, followed by Holy Land wilderness travels, that the dilemma of life is further questioned. As the personal considerations get more profound and less diary-like, so the accommodation, lists of names and food price criticisms decrease and the internal journey of personal faith increases.

This is a book with both a beginning and a contemplative end that unfolds unexpectedly. It is told throughout with an honesty and conviction that is unflinching. One can only hope that, with further undoubtedly difficult forthcoming trials and tribulations, the author now has the wisdom to depend on his faith and resilience. Not only to retain his sanity but find true happiness and contentment. Given the therapeutic value of 'telling it like it is'. I have a feeling there are more stories to come.

### **'A pal of fifty years'**

**A** number of chapters of Jamie Summers' autobiography were particularly touching. For me, his pained admissions on and into Springfield Hospital in South London, where I have worked, stand out, as well as his time at Eton and the loss of his mother to suicide at such a young age.

His story reminds us what many of us will have felt from time to time about how a wealth of physical resources does not protect us from a poverty of mental and emotional ones. Jamie's story strikes me so, as a boy and a man he was handed blessings in one hand and lemons in the other, and left to find his own right way through a maze of mind and mental healthcare that was, too often, not caring enough.

Lemons indeed. This book is their process. Jamie adds the sugar of his writing style and charm to the acid singe of his suffering to make something special: homemade lemonade.

**Jonathan Iliff** (first published in the newsletter of the Old Etonian Mental Health Society)

See [shirtyletters.com](http://shirtyletters.com) for how to get a copy

# Finding Jesus in the storm

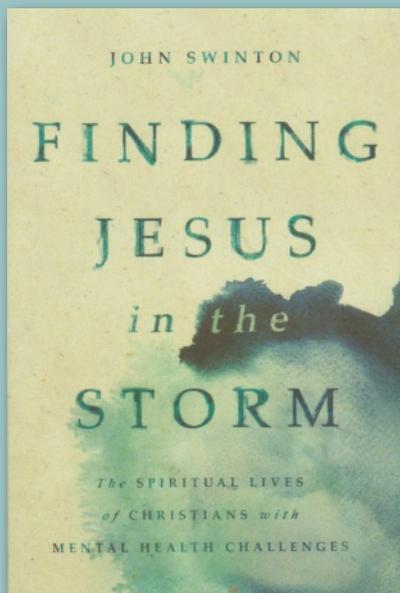
by John Swinton

Subtitled “The spiritual lives of Christians with mental health challenges, this is the 14<sup>th</sup> book by John Swinton, a name which will be familiar to many of you as a leading light in the spirituality / mental health arena. Indeed, we include a quote from the 2014 book he co-authored with Jean Vanier, *Mental Health: The Inclusive Church Resource* in our blue information leaflet. He has a distinguished role as Professor of Practical Theology and Pastoral Care at the University of Aberdeen and founded the university’s Centre for Spirituality, Health and Disability. His career included time as a mental health nurse and later as a mental health chaplain. “The chaplain should take the side of the patient” says Janet Foggie, a Scottish mental health chaplain.

Virtually every chapter includes testimony from people with ‘lived experience’ of problems although there is plenty of medical and philosophical padding gleaned from some 150 publications. John interviewed me at length in a Marylebone café back in 2017 but sadly all my thoughts and feelings hit the cutting room floor. Nevertheless, some thirty others have their words sympathetically recorded.

John leads us through editions of that US diagnostic bible, the DSM. Up until 1972 homosexuality was defined as a treatable mental illness and the DSM-5 issued in May 2013 dropped ‘Asperger’s syndrome’ as a definable mental condition moving it to become ASD-Level 1 on the autistic spectrum, although DSM-5 still listed some 600 types of mental illness. A young man told John after a conference in Atlanta, “the last time I met you ... I was a wild, wild Aspie!! Now a committee has healed me of that, but they have given me autism again!” A diagnosis of schizophrenia is particularly troublesome; here is Allen speaking: “When I was a student I always used to see this woman on the bus, because she went home at the same time as me. We used to talk from time to time, but after she found out I had schizophrenia she stopped speaking to me and kept away from me ... That’s why I tend not to tell people unless I know they’re going to be OK.”

My favourite contributor is ‘Alice’. This is her take on diagnosis: “I kind of got diagnosed with everything. I mean my last



major diagnosis was early onset schizophrenia, but I had been through bipolar, I had been through borderline personality disorder, I had been through manic depression. I had run through the whole gamut really, because no one understood what was going on with me ... They still say I have PTSD and anxiety issues and stuff like that.”

Helpfully, John describes some types of experience linked to psychosis: voices and visions (hallucinations?); holding strong beliefs that others don't share (delusions?); disorganisation in thought, speech or behaviour; disordered thinking and difficulty concentrating; feelings of emotional flatness; unresponsiveness (catatonia).

He tells us that up to 28% of any general population may hear voices. Famous people are not immune – Gandhi, Churchill, Muhammed, Martin Luther King, Jesus, Socrates, Moses, Margery Kempe, Joan of Arc and Virginia Woolf to name a few. Dutch psychiatrist, Marius Romme was influenced by Patsy Hague and Eleanor Longden both ‘voice hearers’ unhappy to be called schizophrenic.

The ebullient ‘Alice’ continues: “My life seemed like the surface of the sea in a storm, but God was the undercurrent that was peaceful ... everyone was telling me you're nuts.” Then after many years of wrestling with schizophrenia, when she was in her early twenties, Alice's voices and other accompanying unconventional mental health experiences left her. She put the disappearance of her voices down to a group of elderly women in her church who gathered together regularly to pray for her. Her psychologist told her she had been misdiagnosed.

John then moves to Bipolar Disorder and states that it is the one mental health challenge for which there is strong evidence for a biological origin. I would disagree as I imagine would ‘Miriam’ who has seen angels, sunbeams suddenly shining on a group in Sheffield Cathedral and who reckons a lot of the saints and prophets of old would nowadays end up in the psychiatric system.

Sometimes the author comes across as a tad ‘medical model’, unable to embrace the anti-psychiatry movement these days epitomised by Peter Breggin's *Toxic Psychiatry* epistle. If he had been on the receiving end (like many of us), he might sing a different tune. I struggle with his definitions of thick and thin diagnoses and spirituality. He introduces stories of the demonic to be found in the synoptic gospels but not elsewhere. Neither John nor Paul mention demons, and John Swinton soon dismisses their relevance to modern thought. Long words and difficult concepts often cloud the text, for example “Theological healing requires epistemic healing and epistemological generosity”. Perhaps most disappointing is the fact that the book's Amazon blurb promises us “it is a call for the church to be an epicentre of compassion for those experiencing depression, schizophrenia, bipolar disorder and related difficulties” but this is barely touched upon. For me the book's redemption is the interviewees' participations. The last word shall go to one such: “I think it's probably easier to come out as gay or LGBTQ than to come out as mentally ill.”

**Jamie Summers**

# MEMBERSHIP FORM

## for membership of Being Alongside / APCMH

Please complete this form  
(photocopy is acceptable)  
and return it to:

BA/APCMH Administrator  
c/o St Paul's Centre, 5 Rossmore Road, London NW1 6NJ

I hereby apply for membership of the Association for Pastoral Care in Mental Health, a charity registered in England & Wales under number 1081642 and company limited by guarantee and incorporated in England and Wales under number 3957730.

I understand that, by becoming a member, I am undertaking to contribute up to a maximum of £1 to the Association's assets if it should be wound up while I am still a member or within one year after I have ceased to be a member and that contribution is required to pay the Association's debts and liabilities.

### PLEASE COMPLETE IN BLOCK CAPITALS

**Name**

**Address** (including postcode)

**Telephone/mobile** (optional)

**Email** (optional)

Please tick the membership category that applies:

**Standard £20**

**Concession (unwaged or under 18) £5**

Please consider adding a donation to our funds with your membership. Please make cheques payable to 'APCMH'.

### Gift Aid Declaration (for tax payers)

By ticking this box, I confirm that I am a UK tax payer and would like BA/APCMH to treat this, and all future payments, as a Gift Aid Donation (in any tax year, you must pay an amount of income or capital gains tax at least equal to the amount that we reclaim on your payment).