

## inform, represent, respond and highlight

Welcome to the seventh edition of the Klacksun newsletter - a place where you can get information, give your views and communicate on issues and services within mental health. If you would like to get involved with Klacksun or find out any more about the articles contained in the newsletter please get in touch using the details on page 4. We hope you find the newsletter interesting.

A wee crowd of us motored up to visit the Perth and Kinross equivalent of Klacksun. We were warmly welcomed by Susan and Jennifer and exchanged information about what both our groups are doing in our local areas.

PLUS have recently achieved independent status, have a membership of 170 and two workers based at their Perth headquarters.

As you would expect we shared similar views on many of the mental health issues we discussed. We had lunch at a lovely place called The Walled Garden in the grounds of Murray Royal Hospital - we'd highly recommend it! Alas it was raining (lovely Scottish summer rain!) - you can't have it all!

### Making links

It was a really worthwhile visit and there was agreement all round that Klacksun and PLUS should continue to foster the good links made.



### Book review

by Klacksun member, Catherine Stenhouse

*The World is Full of Laughter* by Dolly Sen

I really enjoyed this book and had to read it in a "one". It tells of the author's fight with mental illness and bullying and abuse at the hands of her father. Though he dominated her, she still had the compassion to care and worry about him when he became ill in his later years. As the eldest child, she became the one who endured his mental and physical torture and was the one her mother relied on.

The book also tells of her fight with the mental health system and how it took meeting just one right person, within the system, to have a positive impact in her life.

The book shows how even in the darkest life, help can be found and life can become worthwhile and worth living.

*Klacksun has a growing library of resources—books, leaflets, dvds, and cds. If you are interested in having a look contact us for a written list or pop into the office. You will also find the list online at [www.klacksun.org.uk](http://www.klacksun.org.uk).*

### Giving our views on smoking in mental health services



Many thanks to all those folks who took part in this consultation through the questionnaire or by attending the focus group.

The Government were trying to get some feedback on whether psychiatric wards and hospitals should continue to be exempt from the smoking ban. The accompanying report and questions certainly seemed to be leading us to agree that in the interests of good health for all, psychiatric wards and hospitals should be totally smoke free.

However, we are not a group who are easily led!!!! There were a lot of strong and conflicting opinions, as you can imagine. Here is a summary of the themes and feeling.

There was widespread cynicism in that people felt the decision to make psychiatric units and hospitals smoke free has already been made and, hence, the consultation is a paper exercise. The consultation paper gave the impression of a "done deal".

People are fully aware of the risks of smoking to their own health and given the correct circumstances would like to be supported to quit. This is not usually at times of peak crisis when hospitalisation is required.

A range of support mechanisms would be required should a full ban be implemented. A great deal of the support onus would be placed on staff within wards supervising replacement medication,

increasing the range and frequency of therapeutic activities or facilitating time off the ward to access external smoking areas.

The Government should give considerable thought to the support requirements prior to making any decision about removing the exemption and ensure that support is properly funded and resourced.

There are concerns that a ban would result in people smoking in areas they shouldn't and that behavioural problems resulting from the inability to smoke would make wards even more unpleasant places to be.

External smoking areas are offered as an alternative idea but detained patients would have further difficulty in accessing these without the supervision of staff.

All the comments have been collated and were sent to the Scottish Government by their deadline. If you would like to have a copy of these let us know.

### Scotland's Mental Health and its Context: Adults 2009 - Briefing

NHS Health Scotland has devised 54 indicators which will be monitored over time to identify trends in adult mental health in Scotland. The indicators include measures relating directly to mental health as well as more general well-being, community and environmental measures. Only a relatively small sample of data are available for the last decade. However, this suggests a broad stability in the indicators over this time with more indicators showing an improvement than a decline. There is evidence of poorer mental health associated with social deprivation. If the adult mental health in Scotland is to be improved, these areas will need to be targeted.

A member of Klacksun wanted to share the true and dramatic story of their recovery from a severe mental illness; a recovery which at one time they would not have thought possible. This is their story in their own words. It is both humbling and inspiring.

*I was hospitalised in 2002 and diagnosed as a paranoid schizophrenic. I didn't believe the doctor and thought it was all a conspiracy against me. Everyone was trying to force me into joining the Mafia! It was all a game. I didn't trust anyone. Everyone was out to get me and take my son away from me. I believed that if I didn't join the Mafia willingly, then they would force my son to join. I was severely paranoid, suffered from audio and visual hallucinations. I had voices in my head controlling my actions and sense of reality.*

*Then came the medication. I couldn't understand why I was being forced to take it. I wasn't ill. The other patients were ill, but I wasn't. I took it anyway because this was part of the game. I tried to hide behind make-up and nice clothes but I didn't fool anyone. Other patients who were really ill were allowed day passes and weekend passes home. I wasn't even allowed out of the hospital and I couldn't understand why.*

*I constantly fought with the psychiatrist. How could he know best? This was my life and my freedom he was toying with. After much badgering from me, he finally allowed me to go home but stated I would be back before I knew it! Ha, what did he know?*

*A community psychiatric nurse was assigned to me. It took me a long time to be able to trust her and to allow her to do her job properly, but she was patient.*

*My road to recovery began when I gave up the job that I hated. The stresses and strains of working there had disappeared. I had the time and the inclination to spend on myself and my son.*

*I joined a mental health group after giving up work. It took me a long time for me to trust them as well. I went to the group meetings daily but didn't join in the conversation as I was still too paranoid*

## Recovery journeys.....

*and thought they were part of the conspiracy. After a while though, I made a few close friends and the conspiracy theory died away. I began to laugh and had a few nights out with them. They were all good company. The staff were great as well. I had finally met people I could trust.*

*Approximately 2 years after I was diagnosed, the symptoms were disappearing. I didn't have the controlling voices in my head and the hallucinations had gone. I still took the dreaded medication but it was time to take a step forward. I needed new challenges.*

*I joined a voluntary organisation as an adviser and loved it.*

*The training programme and follow up training was intense but very challenging. I loved it and I was good at it. I felt like the job was very rewarding. I studied and gained a Higher National Certificate in Advice Studies and was chuffed to bits!*

*My life was now moving onward and upward. The birth of my second son was a bolt from the blue but he is now the icing on my cake. I feel so relaxed and content with my life, it's great. I wouldn't say I was completely cured but I am halfway there.*

*I have always had good experiences within the mental health services. My only bad experience was my stay in hospital. I felt like I was just left sitting there to stew in my own paranoia. There was not enough to do.*

I hope someone reading this can see that they can choose to live their own life the best way possible or they can let their illness take over and drain the life out of them. I chose to live. After reading the above you may be interested in the idea of story sharing like this, which is designed to encourage, inform, raise awareness and support individuals on their route to recovery. If so, please contact us for further information and discussion.

## Evaluation Project

Thank you to everyone who has completed one of the questionnaires. The response has been fantastic and the information collected is invaluable. As I previously said, I can't do this project without your input and I've been humbled by people's generosity and support in getting involved. Not least the two kind individuals who designed the leaflets and posters for me. If anyone would still like to complete a questionnaire then please get in touch and I'll get one to you. Otherwise they can be found in the waiting rooms of the various services and on the Klacksun website. I'm looking forward to meeting as many of you as possible either individually, or in the focus groups which will be publicised later in the summer. So, once again please watch this space. *Helen*



*Thanks to Hilary McGrouter for permission to use her design in promoting the project.*



**0800 83 85 87**

Phoneline opening hours  
Weekday: Mon-Thurs 6pm-2am  
Weekend: Fri 6pm - Mon 6am

## Attention all 'Teccies'

The Klacksun website has been up and running for some months now and is proof positive of the growing voice that is Klacksun. There are opportunities for all to become involved with the website: at both the 'front end' and the rather unflatteringly named 'back end'. You might prefer to think of 'the service user interface' or the 'administrative side'. Take your pick of terms and interaction.

For those of you who would rather leave the 'back end' to others - and who can blame you - we hope that the website serves to be informative, interesting but, above all, what you would like to see on such a website. There are opportunities for you to enter into discussion on a range of issues through the 'Forum' and how to 'Log on' is easy enough for even me to understand. And, if the 'back end' is for you, we would be very pleased to welcome you along to assist in generating, up-dating and up-loading information.

The website is only as good as those who are involved in it, whichever 'end' they choose, and Klacksun is here to serve the service user so, make use of the website, bring your ideas, contribute away and, above all, help me because I have not a clue about what I am doing.

*Jude*

## A special Wee County project.

Helen..... greatly enjoyed her involvement with the Wee County Project. When she passed away she bequeathed money to reflect the esteem which she felt for the group. Part of her legacy was used to purchase a bench which was situated outside Carsebridge House for those who, like Helen, enjoyed a cigarette or others who just wished to sit chatting. The group also purchased a bingo board. It was agreed that what was left should be used for an ART PROJECT.



The nature of the project started to take shape in 2007. Ann Donaldson, one of the co-facilitators, sought advice from the then SAMH Manager, Ronnie Menzies. He suggested contacting Kathleen O'Neill of the Council's Cultural and Community Services who pointed the group in the direction of the Aberdona Gallery or, to be more specific, to the Artist in Residence, Margot Winning. Kathleen is still in the background, available for support if required.

The Aberdona Gallery exists to encourage creativity and welcomes different groups and individuals from the Community who can work on their own projects or attend classes.

A core group of about seven members was involved in deciding what kind of an Art Project this should be. Eventually it was agreed that a COLLAGE would be the desired end product. Many photos of the Hillfoots were taken to help get the project off the ground which was particularly fitting having regard to the Project's origins.



Currently the group meet fortnightly. They find attendance very relaxing and

totally different from their usual activities. It has opened new vistas for them. Indeed many of them would never have imagined they would enjoy an art based project. The group and Margot have worked really well and plenty of good ideas are the result. Margot finds the group delightful to work with since they are open to and welcome new activities. Everyone contributes in their own unique way. Ann Donaldson and Garry Jackson, co-facilitators, help to coordinate activities but also muck in with the group sharing ideas and assisting in putting them into practice. Like the group, this gives them much pleasure.



It is hoped that the project should be completed by Autumn/Early Winter. The collage will incorporate some of the groups ordinary activities such as bus trips, dominoes and bingo. The group are experiencing different aspects of Art and finding out through it how views can be expressed.

When completed the collage will be on display in Devon House and will be first available for the public at a special open day on a date still to be decided.

There will also be a print for display at the Tillicoultry Community Centre where the group also meet.

Whilst there are a wide range of benefits to the group from this special project perhaps a principal one has been the increase in members confidence from direct involvement in artistic activities which is reflected by them coming forward and demonstrating initiative in ways they would never have once imagined.

We are sure Helen would have approved of this tribute to her.

## Spotlight on.. Bipolar group

Recently we interviewed Marlene Prentice, a staff nurse at the Day Unit, CCH who was one of the two founders of a group for people experiencing Bipolar Affective Disorder (commonly known as Manic Depression).

We asked Marlene the following questions...

### Q What was the background to the group?

*The need for a group approach was identified after a number of people experiencing bipolar affective disorder were referred for support with their illness. Two members of staff with an interest in this area were asked to develop a group which would help to address the needs of these people. The first group ran in May 2008.*

### Q Who is the group for?

*Any person who has a diagnosis of Bipolar Affective Disorder (Manic Depression)*

### Q What are the objectives of the group?

*To help people to understand their illness and how they can help themselves.*

*The group has been led by the members who have shared information about the signs and symptoms of their illness. Group members found it helpful to keep a diary of mood, sleep patterns, irritability and anxiety levels and medication. As they identified patterns or fluctuations this helped to increase their awareness of their condition.*

*People also identified ways in which they could keep themselves well and were encouraged to involve their family and carers in this.*

*They identified some areas of difficulty, eg family and friends' understanding of the illness so they were given support materials to help, asking their doctor the right questions so a checklist was provided.*

*Other areas covered were healthy lifestyle, including eating (with input from a dietician) and medication (with input from a pharmacist)*

### Q How does the group operate?

*People are referred by their GP or by a member of mental health services staff. Following a meeting with a member of staff at the Day Unit they may be offered a place on the waiting list.*

*When the waiting list reaches 8-10 people, letters will be sent out giving details of dates, times and duration of the group.*

*The group is a six week, 2 hour course, run at the same time each week.*

*There are always 2 facilitators present who provide information and support and encourage participation.*

### Q When will the next group start?

*There is no date identified yet but the waiting list is growing. Any referrals after the start of the next group will be placed on a waiting list for the next again.*

### Q What has been people's reaction to their involvement with the group?

*People say they have benefited from the group. There have been (continued on page 4)*

Got any ideas about what you would like to see in the newsletter? Or have you any views or opinions you would like to raise through the network? Contact us:



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### On the move...

Congrats to Gina Finlay, who has been confirmed as Acting Depute manager of Devon House.



Welcome to Elspeth Worthing, the new Advocacy worker for Forth Valley Advocacy in Clackmannanshire.



Welcome to Paul McShane who will be working as a Community Psychiatric Nurse in Clackmannanshire. Paul is on secondment from the Intensive Home Treatment team.

### You've been Klacksunned!

Sadly Sandy Russell will soon be leaving us and heading south for Wolverhampton. Our good wishes will go with him. Sandy has been a valuable member of Klacksun since its inception. He has become a prominent figure in the "Mental Health" Community of the Wee County. As a swan song Sandy has agreed to be Klacksunned,



*Where were you born?* Stirling Royal Infirmary

*Dogs or cats?* 1,000,000 % Cats

*What inspires you?* My friends inspire me so much as well as my family. I also love to learn things in life

*What famous person (dead or alive) would you like to meet?* I would love to go back to the time of 33 AD and meet Jesus before he died.

*Chocolate or crisps?* I have to say Chocolate but now that I am slimming I will say PASS..... SO bring out the Bananas.

*What would be your dream job/role?* To be a professional Singer and become Number 1 in the Global Charts.

*How would you like to see mental health services develop in Clacks?* I would love to see the day when Service Users get paid the going rate for the work they do.

*What are you most proud of?* All the many things I have done recently such as taking a leap of faith and preparing to move home and country.

*What three things would you take to a desert island?* A yacht (with a lifeboat and oars in case it sank!), A never ending supply of Gourmet Food and "Beverages" (alcoholic and non), A never ending supply of Klacksun Newsletters (not telling you what those are for!)

*Period of history you would most like to have lived in?* 50 BC - 50AD

*Town or country?* The City is where my heart lies

### Bits and pieces

#### Advance Statement

If you have an advance statement we have information about how it should be accessed by those delivering your care. Contact us for a copy.

#### VOX (National Service User group)

Klacksun are now members of this group and hope to be working with them to address issues at a national level.

#### Being involved in your own care

We are working on a quick, easy to read guide to encourage people to be more involved in their own care. Watch this space.

#### WRAP (Wellness Recovery Action Plan)

Are you interested in finding out more? Would you be interested in training? Please get in touch.

#### ..Stop press..

Congrats to our pals at Reachout, for their Exhibition at Scion House, Stirling Uni Business Park and on their invite to the Queen's Garden Party at Holyrood on 29th June. The picture shows Gina and Helen admiring some of the artwork on display at Scion House.



### Remember

We always meet on the last Wednesday of every month. Most other Wednesdays you can just drop in to the Klacksun office between 1pm and 4pm for a blether. If you want to get on our mailing list contact us. Cheers

*(continued from page 3)*

*requests for diaries to continue self monitoring. People say they have used the checklist of questions during consultations with their doctor. There has been mixed response to using a relapse prevention plan.*

#### Comment

This appears to be a very worthwhile initiative which we hope will continue and develop.

### Last Word

A candle loses nothing by lighting another candle. *James Keller.*