Getting Help and Support
The Scottish Recovery Network is not able to offer direct assistance. However, for help and support please try one on the following:

Breathing Space
A free confidential phoneline service aimed particularly at young men.
Phone: 0845 90 90 90
Email: info@breathingspacescotland.co.uk

The Samaritans
Available 24 hours a day to provide confidential, emotional support.
Phone: 0845 79 09 09 9
Email: jo@samaritans.org

Scottish Association for Mental Health (SAMH)
Information on a wide range of mental health issues including treatments, services, benefits and legal advice.
Phone: 0141 557 8983
Email: info@samh.org.uk

National Schizophrenia Fellowship (Scotland)
Information for those affected by schizophrenia and all mental health problems.
Phone: 0131 557 8983
Email: info@nsfscot.org.uk

Bipolar Fellowship Scotland
Provides information, support and advice for people with Bipolar Disorder/Manic Depression and their carers. Promotes self help throughout Scotland.
Phone: 0141 560 2050
Email: info@bipolarscotland.org.uk

Depression Alliance Scotland
Provides information, support and understanding about depression. Campaign to raise public awareness of depression.
Phone: 0131 407 3050
Email: info@depressionalliance.org

Stories of hope and recovery from long term mental health problems

This booklet is dedicated to all the people who have shared their story and inspired hope in others.

The stories presented here are in their own words about recovery from long term mental health problems. This highlights various examples of recovery and does not encourage any one of these experiences as the “right” approach to recovery. Recovery is an individual and unique process, everyone will find the approach which is right for them. Please carefully consider any decisions you make about your own recovery and talk to someone you trust if you feel unsure.
Recovery

Every person’s experience of mental health problems or illness will be unique, as will their recovery. Some individuals may experience only one episode of a mental health problem or illness and never experience another for the rest of their lives, but others may have multiple experiences, of varying degrees, throughout their lives.

Recovery is being able to live a meaningful and satisfying life, as defined by each person, in the presence or absence of symptoms. It is about having control over and input into one’s own life. Each individual’s recovery, like his or her experience of the mental health problems or illness, is a unique and deeply personal process. It is important to be clear that there is no right or wrong way to recover.

A number of key components are important to recovery, with hope being one of the most important. Without the hope and belief that a better life is possible and attainable, recovery is unlikely.

With this selection of stories from the SRN Narrative Research Project we aim to highlight the diversity of individual recovery experiences, to show that recovery can and does happen, and to inspire hope in others that recovery is possible.
Scottish Recovery Network

The Scottish Recovery Network (SRN) is part of the Scottish Government’s National Programme for Improving Mental Health and Wellbeing. The National Programme’s vision is to improve mental health and wellbeing for everyone living in Scotland and improve the quality of life and social inclusion of people experiencing mental health problems.

The National Programme has four key aims: raising awareness and promoting mental health and well-being, preventing suicide, eliminating stigma and discrimination, and promoting and supporting recovery.

SRN works to achieve the fourth key aim of the National Programme, to promote and support recovery from long term mental health problems. We work across Scotland to:

- raise awareness of recovery from long term mental health problems/illness
- develop understanding about the things that help and hinder recovery
- support local action and highlight and encourage innovation in services

We are a network of individuals and diverse organisations that all have an interest in the development of recovery. Network membership is open to any person or organisation with a similar interest.

For more information about the National Programme for Improving Mental Health and Wellbeing visit www.wellscotland.info

For more information about the Scottish Recovery Network or to join the network visit www.scottishrecovery.net or call 0141 240 7790.

SRN Narrative Research Project

The 12 stories contained in this booklet were collected as part of the SRN narrative research project. To learn more about the things that help and support recovery we travelled across Scotland and interviewed 67 people with long-term mental health problems about their experience of recovery.

We worked with participants to write an anonymous story based on their interview. Each participant had full control over content and editing of their story and was able to, at any stage of the research, withdraw their contribution. Since collecting the stories we have shared 64 via our website at www.scottishrecovery.net

We have selected 12 of these stories to share within this booklet because we feel they represent the diversity of experiences shared during the project. These stories highlight the main themes that have emerged from all the stories collected: meaningful activity and contributing, relationships and support, services and treatments, identity and self, turning points, and finances and housing. These themes have been further explored through the analysis of the interview transcripts and will be detailed in future reports.

For more information about the SRN narrative research project and to read the rest of the project stories visit www.scottishrecovery.net or contact 0141 240 7790.
“I don’t let it control me. And it is an ‘it’. It’s not the whole of my life, it’s just part of my life now.”

Journeys of Recovery

Bring on Las Vegas and the pink Cadillac!

“I let the symptoms of my illness become the centre of my universe, and I realise now that the symptoms of my illness are not the centre of my universe.”

The house that recovery built

“I feel my experiences over the past few years have made me a better person, a more understanding person for having come through that.”

It’s never too late

“The biggest change for me has been awareness, actually having an awareness of where I am as a person, in my family, in life, and in my health as well.”

There is more to me than my mental health

“I began to realise that there were people who believed that there was more to me than my mental health.”

Paving my own way

“The route to recovery is not a straight line. And in my experience this may mean going off in directions that might not look all that productive at the time.”

JR and Sue Ellen

“For me recovery feels a lot better. I think I had to go through everything that I have to truly appreciate it.”

Tracky bottoms and trainers versus make-up and heels

“You’ve got to make that decision to ask for the help, and I found that quite hard at the beginning.”

Coming out of the fog

“It was in a fog for a long time, but I’m now seeing more clearly, hearing more clearly and feeling more clearly.”

Psychotic and proud

“Recovery for me is a discovery of self, or an ongoing spiritual journey to find who you really are.”

The evolutionary jigsaw

“For me, being allowed to take risks and being in charge of keeping myself well has played a major part in my recovery journey.”

Doesn’t time fly when you’re depressed

“I do feel that I’m a stronger person for having the experiences that I’ve had.”

To hell and back

“Since I’ve recovered, I’ve found that in spite of my illness I can still contribute and have an input into what goes on in my life...”
Bring on Las Vegas and the pink Cadillac!

Me. That’s what’s changed. Me! It was a control thing. For 20 years there was an unconscious release of control on my part. I let other people control what I was doing and what I wasn't doing. I let the symptoms of my illness become the centre of my universe, and I realise now that the symptoms of my illness are not the centre of my universe.

When I went in to hospital I was really ill, I think it was the sickest I’d been in a long time, and I was dangerous to myself and to other people. The turning point was when I was in hospital and I was really upset and angry and doing some harmful things to myself, and a nurse came through and said, “You’re really upsetting your friend.” Something in my head just broke and I went, “That’s not right!” A nurse, in what’s supposed to be a supportive environment, will turn round and say to me, “Don’t do that”, not because I’m hurting myself but because “I’m upsetting my friend?” And I thought: “No, this is not right. This is about me; it’s not about my friend!” It wasn’t about what the nurse said but about what I thought and felt, and that I had to take control!

It was hard at first, for about the first six months after getting out of hospital, but then I got the right support. I went to a housing support project that helped me to find my own home, so for the first time in my life I had my own home! And I had my own furniture and my own television; the fact that I stayed in there for a year and didn’t go out was beside the point! I was attending a day unit and it was then that I saw a psychologist for the first time and started cognitive behavioural therapy. There was a combination of that, the day support and the individual support I got from a voluntary sector organisation. I think that’s what did it. This set of circumstances, instead of having one at a time I had them all at the same time, plus I consciously wanted things to be different. I didn’t want to be miserable, I didn’t want to be unhappy, I didn’t want to be stuck in my own head.

Was it surprising that I became mentally ill? Probably not, considering what I had experienced growing up. Having a diagnosis helps; it gives it a name. Having a vague set of symptoms like, sometimes I can be psychotic, and yes, I suffer from clinical depression, and I can be fairly manic. I have all of these symptoms so does it have a name? No. For me it’s just a mental health problem. They call it personality disorder because it doesn’t fit into one box.

I don’t think the diagnosis they’ve given me is fair because of the assumptions made about people that have personality disorders, that it’s all a behavioural thing. For most mental health problems you can say there’s some kind of chemical imbalance in the brain. I actually have a scar on my temporal lobe which was discovered by accident. Could that have something to do with any chemical imbalance in my brain, is it important? No, not anymore. I have taken ownership of my illness and I take responsibility for what I do and do not do. I don’t let it control me. And it is an ‘it’. It’s not the whole of my life, it’s just part of my life now. It’s about taking ownership instead of always blaming it on the fact that you’re
ill, or blaming it on the fact that someone hurt you or someone did something. The past’s not going to change. The past won’t go away! It’ll just remain very firmly in a little box somewhere. What my problem is that sometimes the box lid becomes a little loose, something will trigger off giving the box a shake, and that’s when I start to get the symptoms. But I’m more aware now of what my triggers are, and I tend to stay away from the big red buttons!

I have found personally that cognitive behavioural therapy is what’s worked for me. It doesn’t work for everyone but I think if you’re receptive and you’re open and you really want to try it will work. It is hard work and it takes a long time, but it gives you that sense of ownership over yourself again. I think that’s what people need. I agree with the principles of recovery that you live well, and you live with or without your symptoms, that’s the way I see it, it’s an individual thing. Some people don’t do well with their symptoms and have more extreme reactions to their symptoms, whereas now it’s just an everyday part of what happens with me.

What’s helped me to get well and to gain control is to be non-compliant usually. You have to fight. I don’t feel it’s right but you have to absolutely fight for everything, you need to fight for your rights, to make people realise that you’re a human being; you’re not just a set of symptoms! For me it was that combination of things that gave me the confidence to be able to say, “No, I don’t agree with what you’re saying to me.”

“I have a diagnosis helps; it gives it a name.”

I no longer take medication and that’s my choice. I wouldn’t advocate that you don’t take your medication, because for some illnesses you do need medication to control the symptoms or you can’t function. I would never tell anyone to stop taking his or her medication. My first advice would be, “You need to talk to your doctor, don’t make any hasty decisions.”

I have good and bad days. Bad days are one voice in my left ear and two in my right, loudly, all the time. That would be a very bad day. And on good days they’re just speaking quieter! But I deal with bad days by going to work. It’s just a sheer force of will. I get up in the morning, I go to work, I come home from work, I walk my dog, I watch television, I go to bed. I don’t sit and stew. It’d have to be some extreme circumstances for me to take that much of a backward step. Everybody has good and bad days; I don’t think it’s anything abnormal, it’s just that mine can be quite extreme!

The thing that has hindered me the most on my recovery is mental health services, as they are. Services are geared towards care and containment and to prevent you becoming a danger to the public. It’s not about making you a fully functioning member of society; it’s about making you

“It wasn’t about what the nurse said but about what I thought and felt, and that I had to take control.”
compliant. So you won't do the bizarre things in the street, you won't be threatening, you won't appear anything apart from normal. The fact that your feet are stuck to the floor and you're bright yellow from jaundice because of the medication is beside the point!

Currently, services aren't geared towards you getting access to education, training, or employment, unless you want to do the three Fs: filth, food, and filing. These are your choices, you can be a cleaner, you can be a waitress, or you can file stuff. I'm too bright for that! But what medication and the services do is drain all of that out of you.

All your get up and go has got up and gone because you're so flattened down by despair. The people that working in these services are so, don't get me wrong, some of them are really nice and are really good to you, and others, well it's a wage packet for them. They don't care; they just go home at the end of the day. But it's like this is my life! It's all right for you to come into my life and tell me, “Oh, you need to get a grip, just take your tablets you'll be fine.” But that's not recovery!

I never had a life before, but I've taken more chances in the past two years than I've ever done. I always swore I'd never ever live with anyone again, I'd never ever go out with anyone again, never have sex, never do anything! Just be a boring old maid, the spinster of the parish! But I did, I fell in love, got a job, a full-time job mind you! Straight off benefits, DLA, everything, straight into full-time employment. I work the full hours, I do everything I'm supposed to do and I do it really well. I'm not being bigheaded, I know I do it really well because people keep telling me.

I couldn't do what I do every day if it wasn't for my partner. If it wasn't for that unstinting, unswerving loyalty that I'm always right and everybody else is wrong! I couldn't do what I do everyday because it's hard sometimes. I couldn't do it if I didn't know that she believes in me. She knows that I can do it. Nobody had ever done that for me before, they always wanted to change me or change something, but she likes me the way I am.

I never ever thought I'd be 40. I never ever thought I'd get past 30 and I did. I always firmly believed that I'd be dead by the time I was 40 because that's just the way it was going to be. I thought that was me being in control and not letting anyone else control me if I was dead. For the future I want to be happy, want to be settled, I want to go to Las Vegas and drive down the main street in a pink Cadillac! I'd like to be able to retire at some point, live somewhere quiet with lots of animals and no kids, no grandchildren, no nothing, just me and my partner, quite happily plodding along with our dog.

“Everybody has good and bad days; I don’t think it’s anything abnormal I don’t think, it’s just that mine can be quite extreme!”
“...you have to be prepared to make the first step yourself and be prepared to work from then onwards.”

The house that recovery built

I was never ill, never had anything wrong with me. Then suddenly I wanted to go to my bed, pull the covers over my head and just stay there. I couldn't figure out why this was happening. In some ways I feel I must have led quite a sheltered life – you knew that there were people round about you with mental health problems, but it never came into your mind too much until you were involved in it. The first time my doctor said to me that he was going to send me to see somebody at the local psychiatric hospital, it was shock, horror, panic – hang on a minute, I don't need to go there, I'm not going to kill myself. Before I became unwell I was quite sceptical about stress-related illnesses; the old attitude of well, he just needs to give himself a good shake, it's just an excuse for two weeks on the panel, that kind of thing. But when it hits you as an individual you realise that it is real and you sit wondering, how did I get like this? It's easy enough to get there but it's a long climb back.

I ended up so unwell that I was signed off work for quite a while. One day when I went out for a walk with the dog we saw a wee house in somebody's garden. Just using stones, they'd built a house with wooden window frames, perspex windows and slate on the roof. For the next few days I kept thinking I could do something like that because I've always...
made things and been creative. Eventually I spoke to my wife and she suggested I give it a try, so I did. You can only do so many rows at a time because you've to let the cement set. So I started that and then I would do wee bit of something else and the next thing there would be a knock at the window with my wife saying that the dinner was ready. I couldn't believe it; I'd go out there, close the shed door, and for maybe two hours I was in my own wee world and time seemed to disappear.

I feel that was my turning point. Gradually from there I then started taking a wee bit more interest in the garden again, and I started to enjoy going back to a bit of reading. Then after a couple of months something came into my head that maybe I was moving in the right direction, this is maybe going the right way.

One afternoon I saw an advert in the local paper looking for volunteers to help with clubs for people with mental health difficulties. I thought okay, I'm going to try this now that I'm feeling a wee bit better, I might as well put my life to some purpose. I applied, and was taken on as a volunteer. After I had been there a few months I was asked if I would like to do some paid sessional work. I went along to my regular check up at the doctors and spoke to him about it and he said, “If you think you can handle it have a go.” I started to do sessional work up to the 16 hours I was allowed to without affecting my sick benefit. And, as these things tend to do, it grew and other parts of the organisation started to get in touch asking if I'd do work for them.

At that point I had to make a decision, because anything over the 16 hours affected everything, so I went back and had another lengthy chat with the doctor and again he encouraged me to give it a go and any problems, to come straight back.

That led onto full time work with the same organisation and it's developed into a complete career change, even at my stage in life! I've now done my first aid course, attended all sorts of other courses and lectures, and I'm possibly starting to do my SVQ shortly.

Every day my job is different and I enjoy my work. Realistically, at my age, I'm not planning to become the director or anything like that, but I'm pleased with where I have got to from where I was. If I keep on going, earning a living, and helping somebody as I go along the way, I figure that it's probably as good as it's going to get. If I'm contributing just a wee bit to somebody getting back to where I am now, I'm quite pleased at that.
I’ve learned that you really have to look for support to recover, you can’t just go to the doctor and get a magic pill and be better. You have to be prepared to go half way and meet the people who are trying to help you. Whether it be medical help, friends and family, counselling whatever, you have to be prepared to make the first step yourself and be prepared to work from then onwards. Other people can’t cure you, and you can’t cure yourself, but the two sides working together can help. In my case, it’s not that my problems went away completely, but I learnt to cope better with the stresses in my life. When I was low, if something simple went wrong like the TV breaking down, that was a major disaster. But now I just think okay, phone somebody and get it fixed.

I think I learned the capacity to cope rather than instantly panic and get myself back into a state again. My recovery hasn’t been about one individual aspect; I think that it’s been a series of things coming together that have allowed me to recover. I’ve had a huge amount of support from my wife, the kids, friends. I had the counselling, access to a psychiatrist over a period of time, medication, my hobbies, the garden and my new career. I think that all of these combined to help me to recover.

I feel my experiences over the past few years have made me a better person, a more understanding person for having come through that. You don’t want to come through it but, now that you have, it does give you a better understanding of what is happening to some people and how to support them.

“I feel my experiences over the past few years have made me a better person, a more understanding person for having come through that.”
It’s never too late

“I now realise that I have to respect myself; I am a valuable human being who has had problems, but I can give something back.”

The biggest change for me has been awareness, actually having an awareness of where I am as a person, in my family, in life, and in my health as well. I think perhaps because of the nature of my illness I didn’t have that awareness before. I was completely blanked out. I couldn’t move forward and I couldn’t recover since I wasn’t actually aware of what was going on or how I felt. Gaining that awareness has enabled me to make choices and to take responsibility.

Before that I think I was really just buying time, although I didn’t really know it, I wasn’t moving forward. If anything, I was moving back. My experience with services wasn’t something that actually created independence in my life. So often, hospitalisation and dependency actually add to the issues rather than solve them. There comes a time when you don’t know, especially if you have a long illness, if where you’re at is because of the original problems or because they have all been compounded by the problems created by being hospitalised or institutionalised. The thing that prevented my recovery was that I didn’t know anything else. I had a mental illness and there’s some safety in being ill; even though I hated every minute of it, there was still some security in that. I think that if you don’t actually have that awareness about where you’re at and what you’re trying to achieve,

Key Words
- Communication
- Contributing
- Control/autonomy
- Education
- ‘Giving back’
- Hope
- Hospital
- Mental health professionals
- Mental health services
- Respect
- Responsibility
- Self acceptance
- Self awareness
- Self employment
- Trust

you then don’t have the power or the control to actually make changes in your life, and sometimes other people can take that power from you.

Initially I did feel very disempowered, that I had no control over my life, that I wasn’t able to control how my body reacted or how I reacted, so I fell into things rather than actually making choices. If you’re not actually actively making choices, you’re not taking responsibility, and you walk into the victim’s role. I felt many professional people were quite happy for me to be in that role, because in some ways it’s easier for them to cope with me like that. In some ways it’s much easier just to group people together and say, “Right, you have this illness, and we’ll treat you in this way with this medication.”

The problem with that is human beings are individuals with very different feelings, emotions and expectations.

Communication with key professionals has been important to my recovery. It’s essential that they don’t say one thing and then write down something else. Unfortunately that does happen and it can create difficulty. Now I make sure the key people that are in my life in a professional way are all honest with me. Knowing that they’re aware of where I’m at gives me confidence that if I were to get into real difficulty, people would know it. Just having that confidence sometimes helps keep me at a good level. The consultant I’m working with is really aware of what’s actually working and what’s not working and is tinkering with it rather than constantly adding more medication. So that’s been a huge help in my recovery.

You can’t have awareness if you’re drugged up and I think that for many years when I was drugged up, I just didn’t know what was happening. Maybe if I hadn’t been on so much medication I would have known what was going on. It helps that my current consultant has been prepared to take chances.
She’s prepared to trust me and I’m beginning to trust her, so we have a partnership and that helps to build respect between us.

There’s also something about having other things in my life away from mental health issues, away from support workers and hospitals and actually finding a different channel to outlet my energy. I’m looking into self employment and thinking of perhaps making hand made cards and things like that. I get a lot out of creating and actually being able to give to people something that I’ve spent time on. It’s something that I can do when I’m well and when I’m not well I can leave it and then pick it up when I feel better. So it’s something that I can work at within the limitations of where I’m at in recovery. I think that the hardest thing about having mental illness is feeling that you’re constantly taking, that people are always giving to you and supporting you, whereas partly for me recovery has been looking at ways that I can actually give back to the people that I care about and to the people that I want to help. To actually give back rather than to constantly take gives me self respect, much more than a pill will ever do.

“To actually give back rather than to constantly take gives me self respect, much more than a pill will ever do.”

“There’s also something about having other things in my life away from mental health issues, away from support workers and hospitals and actually finding a different channel to outlet my energy.”

About 18 months ago I started doing some Open University work, which gave me another focus initially. I was very aware of being able to do the two introductory courses, just to see, because I haven’t actually studied for a while, how I would manage. I got enjoyment out of the courses; it was really good to have something different to focus on. Now I’m on to the first year of the Health and Social Care course with Open University. I get immense satisfaction out of being able to meet deadlines for assessments and things like that, and knowing that even with the limitations that I have, that I can meet these targets.

The most important thing in my recovery is that I’m alive! If I’m not alive, I can’t do anything. I think that maybe sounds a bit corny to some people but it’s actually very much a reality in my life. Recovery for me has meant that I can actually choose where I want to live to a certain extent, what I want to do, and how I want to live. Also, having the knowledge and actually knowing the systems a wee bit has given me power, and I think that’s important because it has put me in a position to make decisions and choices. I now realise that I have to respect myself; I am a valuable human being who has had problems, but I can give something back.

I recognise that recovery is ongoing; it’s not something that comes to an end, and it’s ongoing for me certainly. I have to accept that I have mental health problems and get on with it. If I can’t accept that then how can anyone else? Some times are more difficult than others. At times I can see it as being
a symbol of just exactly how bad things were, which is OK
I suppose, but at other times I don’t want to remember, I just
want to get on with life but I know I can’t just leave it behind.
What it comes down to is accepting my circumstances and
accepting myself as I am. I’ve been lucky too that I’ve met
people who I regard as being true people, they have a heart
and are genuine, and they are people who respect me for who
I am, not because I’m service user, or I’m a mentally ill patient,
they actually respect and accept me for being me, warts
and all!

I hope that the people I meet go away and think about their
own lives. I’ve tried to show people that, just because you’ve
been in the system for a good number of years doesn’t mean
that you can’t break free. I want people to know that there
is actually something outwith mental illness that can be
worthwhile for yourself and for society. I want people
to know it’s never too late.

“I have to accept that I have mental health
problems and get on with it. If I can’t accept
that then how can anyone else?”

“Challenging my thoughts and
experiences was
difficult, especially
as I didn’t quite
believe that it was
the right thing to
do. Thankfully the
pay-off has been
worth it.”
There is more to me than my mental health

As a student 15 years ago I found myself struggling with life. I became increasingly unable to continue with my course, complete my work and interact socially. My sense of reality was changing and I couldn’t make sense of my experiences. I was eventually signed off sick, but things didn’t improve for me.

I was referred to a psychiatrist attached to Student Health who, after trying medication, gave me the option of a short assessment stay in a psychiatric hospital. The ten days became three months and it was quite a shock, both being there and to find I couldn’t leave or even, at one stage, didn’t want to leave. I became aware that I had a real problem that I couldn’t make sense of and that I didn’t feel I had anyone to confide in. My hallucinations and paranoia were leading me to become very scared and I trusted no one.

“I’m very hard if you find other people are making decisions about your life and that they think they know best. I couldn’t accept this was to be my life.”

Over time I became the revolving door type of patient. The all time low point came when I was transferred, or as I viewed it dumped, on to a longer stay ward. On this longer stay ward I felt I was shown little or no respect. It was the most awful place and I hated it. Rehabilitation was a joke. In desperation I signed a lease on a flat, which worked in terms of persuading the consultant to discharge me. I was on a section and he had always refused my previous requests or challenges. But my challenge was granted on two conditions: that I met with a member of a newly formed ‘resettlement team’ and also with a social worker – considering my options I reluctantly agreed!

This social worker recognised a troubled person, but also my potential, and provided me with the space and continuity to actually build up a relationship. I was still experiencing auditory hallucinations and was very depressed. I was still in and out of hospital and various supported accommodation. In one hostel I began to challenge myself, my situation and how I might gain control over my experiences and life. I kept asking myself, “Is this it? Is this how life is going to be for me?” Initially, the manager was considering that his service was not meeting my needs as I had, apparently, refused to engage! Gobsmacked, I challenged this, and explained how difficult it was for me to be around people and to interact. Overcoming the communication barriers between the staff and myself enabled me to build up a relationship with some of the staff. These relationships were to be really beneficial for me in my experiences of recovery and finding myself. I eventually moved into my own tenancy, and five years on I am a very different person.

“Recovery has made me believe that I am someone who is worthwhile.”
My relationship over this time with my social worker has been the key thing for me. I began to realise that there were people who believed that there was more to me than my mental health. In my experience, one of my biggest bugbears of the mental health field has been the low level of expectation of people who have mental health issues. I challenged this whenever I could, sometimes out of fear that I really had lost my intelligence as well as my mental health. The emotional support I received helped and encouraged me to understand myself and my experiences in the context of everyday life.

For a long period I went through a hellish time, no one had shared with me my diagnosis of paranoid schizophrenia. I found this out by accident and at the time I thought the diagnosis was a life sentence. I knew nothing about my illness and felt that I had no control over it – I felt that medication was the only thing that could help. Thankfully I have overcome this and now see that medication is not the only answer. One of the major things I struggled with was this thing called ‘insight’. The attitude of ‘you should have insight about what is going on’ use to confuse and frustrate me. I had no idea what this meant or how to gain it. How could my reality be anything other than real? I tried to sort through things with a combination of reading, talking, and linking past life experiences to present distorted reality. However, understanding didn’t come easily and, at times, I felt it would be easier to accept and stay in my distorted reality.

Challenging my thoughts and experiences was difficult, especially as I didn’t quite believe that it was the right thing to do. Thankfully the pay-off has been worth it. I am extremely grateful to those who gave me the space to explore myself in the way I did. For me it was much more valuable than some form of formal interaction/therapy. I needed to feel that I was a whole person rather than a bunch of symptoms that had to be managed or controlled. At one point I had a life ahead of me; I was a student about to step out into the world and make my mark until I was horribly stopped by mental illness. Recovery has made me believe that I am someone who is worthwhile. I’m not going to be a person shuffling along on a long-term rehab ward where not much is expected of you. I’m embarrassed to say that I used to think that this was the prognosis for people with my diagnosis.

It’s very hard if you find other people are making decisions about your life and that they think they know best. I couldn’t accept this was to be my life. Having that attitude was really important, combined with other people believing in me when I didn’t believe in myself.

The past couple of years, I have found myself able to both challenge and contribute to the provision and development of services. As I have found my voice I have taken opportunities to use it, thanks to the ‘user movement’ and collective advocacy. I’m not sure where the next few years will take me but it will be interesting and challenging and I know I can handle it.

“I needed to feel that I was a whole person rather than a bunch of symptoms that had to be managed or controlled.”

“As I have found my voice I have taken opportunities to use it, thanks to the ‘user movement’ and collective advocacy.”
Recovery to me feels like a process that began long before I became ‘unwell’. I had been having some difficulties remembering things and I was seeing a therapist. I was getting on with life. Then suddenly one day I was at work, and the next I was living a horror. My life turned upside down and a long, deeply harrowing journey began. I feel it’s important to say this, because often the background to recovery is not told.

From the outset I was keen to avoid conventional psychiatric approaches. Psychiatry tends, I believe, to focus mostly on symptom control and suppression. Though distressing and disabling, I have always thought of my symptoms as ‘allies’ even when things are most difficult. The symptoms, which arose from systematic and prolonged childhood trauma, gave me ‘clues’ – like a kind of road map – towards recovery, alongside staying involved with what is good in my life.

I knew that I needed to work with my symptoms in order to get better. As my needs and strengths evolve over time, I feel I am becoming much better at knowing how to manage those times when things are difficult.

Key Words
- Advocacy worker
- Alternative therapies
- Choice
- Confidence
- Consistency
- Continuity
- Control/autonomy
- Creativity
- Employer
- Employment
- Employment support worker
- Finances
- Friends
- GP
- Herbal remedies
- Homeopathy
- Housing
- Massage
- Partner
- Peer support
- Positive attitude
- Progress at own pace

“I just try to trust myself. I have brought a lot of strength, courage and creativity to my own recovery and I think this is true for everyone who embarks on a similar journey.”

Paving my own way

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I knew that I needed to work with my symptoms in order to get better. As my needs and strengths evolve over time, I feel I am becoming much better at knowing how to manage those times when things are difficult.
My route to recovery has primarily been through a combination of talking therapies and massage. I have also accessed other kinds of complementary remedies at different times, for example, homeopathy and herbal remedies. For me, paying attention to what’s happening in my body is very important to becoming well again. After a while, I also read people’s personal stories and I used a range of self help guides. I sometimes still do, but with a different focus now.

I first became unwell about twelve years ago and I was unable to work for two years. Since then I have been able to work part time, despite ongoing symptoms. At first I was jittery, sensitive to noise, light and easily startled, and I felt the last place I needed to be was a busy psychiatric ward. My GP was my only contact with the NHS and he has been very supportive throughout.

I think sometimes there can be confusion between getting better and being symptom free. It is often during the times when I have had the most PTSD (Post Traumatic Stress Disorder) symptoms that I have achieved greater gains in recovery. For example, when new memories are surfacing my speech may be affected, but once I get through the difficult patches I am better than before. My long-term recovery has been a stepwise process.

“Controlling the pace of my recovery has meant I have been able to take things forward, then draw back a bit and have some space and time to absorb things and not feel pushed.”

Relationships of trust have been central and it takes time for trust to build up. It has been important to be able to do things at my own pace, to have choice and continuity in those I work with for therapeutic reasons, and also to make changes if something isn’t working.

I know from previous nursing experience that some of the doctors in psychiatry tend to move on every 12 months or so. Controlling the pace of my recovery has meant I have been able to take things forward, then draw back a bit and have some space and time to absorb things and not feel pushed. This has enabled me to stay in work and gradually build up my strength and wellbeing.

Being able to access skilled support from people who know about the kinds of experience I have had has helped me to manage and plan my journey over the past twelve years. Working with people who believe that we have a natural capacity for self-healing has fuelled my confidence, along with my own belief in my recovery. But I think for me what has been most important, absolutely without question, was the person who was my partner at the time I first became unwell. This person was, and still is, hugely supportive, beyond any words I can say. I don’t think I would have been able to avoid the psychiatric system if I hadn’t had such a high level of support. My close friends have also been very consistent in their support and friendship even when my symptoms have gone on for a long time. Being able to see friends and continue to be recognised and met with respect has meant a great deal to me.

“In the early stages I thought that the answers to my recovery lay outside of me. But now I see recovery more as a personal journey of discovery...”
Because I have chosen a path outside of mainstream mental health services I have had to pay for all of my therapy. I lived on benefits for two years and I had to sell my home. The person who was my manager when I became unwell was very sensitive and supportive and that helped enormously. I now work nearly full time again as an advocacy worker. An employment support worker has helped me negotiate my working hours so that I can still attend counselling sessions when I need to. I find it helpful to work in an environment where it's okay to be 'out' about having experience of mental health difficulties and where there's a positive attitude. I think personal experience and insight can be a powerful asset and I believe I have been able to bring valuable awareness and openness into the work that I do. I hope people may take something from this.

In the early stages I thought that the answers to my recovery lay outside of me. But now I see recovery more as a personal journey of discovery and I am much better at trusting my own instincts and paying attention to feelings instead of suppressing or trying to contain them. The route to recovery is not a straight line. And in my experience this may mean going off in directions that might not look all that productive at the time. But I don't give myself a hard time about this anymore; I just try to trust myself. I have brought a lot of strength, courage and creativity to my own recovery and I think this is true for everyone who embarks on a similar journey.

“I am an occupational therapist (OT) and mental health nurse and through experiencing mental health problems myself, I feel like I’ve now got a lot more to offer clients. I can bring a totally empathetic understanding of what they’ve been through.”

“Working with people who believe that we have a natural capacity for self-healing has fuelled my confidence, along with my own belief in my recovery.”
I am an occupational therapist (OT) and mental health nurse and through experiencing mental health problems myself, I feel like I’ve now got a lot more to offer clients. I can bring a totally empathetic understanding of what they’ve been through.

I became ill with anxiety and depression in 2000, but for quite a long period I was in denial that I could actually get mentally ill. My doctor put me on anti-depressants and Diazepam. When I was coming off the Diazepam my problems accelerated. I experienced paranoia and depression and I was quite psychotic for a while – I actually thought I was Sue Ellen from TV’s Dallas, and my ex-partner was JR! It seems quite funny now but it was pretty scary at the time. When I was admitted to hospital, I felt I got more support from the clients than the staff. I just wanted somebody to talk to, but I felt the staff were there just to assess me and give me medication, which I didn’t want. I made friends with some of the other clients and they were with you 24 hours a day, whereas the staff changed. Clients would know if something was amiss with me quicker than the staff. They could also tell me what to expect from particular medications. I was quite lucky in that I had actually done my nurse training with two of the staff, so they were able to say, “She was like this when she was well” and would recognise when I was getting better.

The main thing that has brought me through is having somebody to talk to about how I’ve been feeling. The occupational therapist at the hospital was the main support, although she said that she never thought that OT’s could have mental health problems! She realised there was a problem and was quite understanding and would talk about it with me. I found her the most helpful and she actually spent time with me.

Advocacy was good because it was helpful for me to talk to somebody who I didn’t feel was judging or pigeonholing me, and I found the Advocate really approachable. They’ve also got a ‘what will happen to me when I’m ill’ programme where you can say which things you’d like and which things you wouldn’t, ahead of time. I’m against having anything more to do with Diazepam for example, and that was particularly useful.

My ex-partner was very supportive because he’d been through it himself with manic depression. A few of my friends helped as well – just by being there when I was feeling down or needing someone to talk to. When I was ill I found out who my real friends were, they came to visit me in hospital and supported me through it. I had lots of phone calls from various friends checking how I was and I was really happy about that, knowing that they were there.
An NHS hypnotherapist helped me with my anxiety. She was a counsellor so I also talked to her quite a bit. She was really approachable and I got on with her very well. An understanding psychiatrist was also a support and I’ve been lucky with my GP who has been with me throughout this period.

When I left hospital I was supported by an organisation that organised work placements – I had a job for three months, but I felt they were supporting the employer more than me, so it was really more of a hindrance than a help. During my illness I found that the people I was working with in health had very little understanding of what I’d been through. I was speaking to the occupational therapist in charge of mental health, and she felt that I’d be a risk to other clients if I was on medication. That was really upsetting because I had never been a risk to others or myself. I felt she was being quite judgmental. If anything, I believe I can now be more empathetic to clients and can understand more where they are coming from.

Since leaving hospital I’ve been involved with quite a lot of voluntary work. Keeping busy stops me dwelling on things and gives me a purpose for the day. I’ve now got a better understanding of networks in my local area that can support me in my recovery. My voluntary work includes working with people with learning disabilities and mental health problems which I find really rewarding and enjoyable. I’m going to a job club as well to look for a job, as I want to get back into OT and mental health. I would like to do work that I enjoy doing, as opposed to doing something because I feel I have to, which was how work used to be for me. The extra money that a job would bring in would also help me do more of those things I enjoy, like Ceroc dancing and travelling. I’m still on medication but I’m hoping to reduce it further in the future. For me recovery feels a lot better. I think I had to go through everything that I have to truly appreciate it.

“About two years ago I realised that I really could recover. I find that quite an amazing fact, because over the years no one has actually said, ‘You can recover.’”
Tracky bottoms and trainers versus make-up and heels

About two years ago I realised that I really could recover. I find that quite an amazing fact, because over the years no one has actually said, “You can recover.” I thought once you had mental health problems you were just going to be stuck with it. I hid it for many years. Looking back now I don’t know how I managed, widowed once – my husband committed suicide when we were both very young – and two divorces. Depression, agoraphobia, and later two overdoses; I just tried to keep it well hidden and closed up. One of my sons in particular was quite distressed that if his friends knew, it would stigmatise him. To be honest, I was also terrified that social services could come in and take the children away. Especially when I was hearing voices and things were moving about the rooms. I was frightened in case they would come and step in, although I know I was never so bad that I didn’t look after my sons.

I should have asked for help a lot earlier. There were times when I thought, “I am too tired, and I can’t keep going on.” Something always sprung back up telling me, “You are a fighter, keep trying.” My body and my mind were saying no and this wee thought would come from somewhere, “Keep trying, keep trying.” I’ve had depression all my life but I seemed to get to a stage where I thought, “This can’t keep going on.” For many years I tried to cope on my own and I realised I was getting worse and worse. I realised that I had to admit to myself how far I was going down, and that I was past the point where I could help myself. You’ve got to make that decision to ask for the help, and I found that quite hard at the beginning.

After my divorce I had moved to a different district and didn’t really know where to go for help. I remember picking up the phone book one day – at the time I couldn’t read or write, I was so stressed out – and I thought, “I don’t even know what I am looking for, what am I looking for?” If I was an alcoholic I could find AA (Alcoholics Anonymous), if my car broke down I could find RAC, but where do you go for mental health? In the end I decided to go to my GP practice thinking that they would be able to at least point my in the direction to find help. All I was told was, “Sorry we can’t help you”, but I didn’t give up and was finally put in contact with our local mental health association.

I have been quite lucky. The organisation really pushed me towards helping myself. They put me through cognitive behavioural therapy for a good year and a half, I had a community psychiatric nurse (CPN) in place and a social worker, and then I did an anger management course.

“I have been quite lucky. The organisation really pushed me towards helping myself… They gave me a bit of choice. Realising that there are choices out there was a big step forward.”

“Realising that my mental health could affect my physical health was a big step.”
Their approach was just amazingly different from what I had experienced up to then. They weren't saying, “Well what do you think you need?” because I just didn't know. They were putting things in front of me and saying, “We think this could be beneficial, what do you think?” and that made a big difference. They gave me a bit of choice. Realising that there were choices out there was a big step forward. Realising there were different things apart from just a psychiatrist which, don't get me wrong, I found very helpful over the years for various things, but I felt I'd got to a stage where I needed something a bit more than that. I needed coping skills, life skills, because over the years I had just hidden in the house and it wasn't working. So I had to learn how to speak to people again. I needed skills for getting through life basically, ordinary everyday things. Even going to Tesco could be an ordeal at times.

I have learned to talk myself through situations that are difficult for me. My psychiatrist and my CPN have been extremely helpful in this regard. In bad times I found myself going back to their voices. I could actually hear my CPN saying, “You are ok, just stop that thought now”. It took me a couple of days to work up to being able to go to the anger management course. Being on that course with other people really helped me turn things around, to look at the other side of the coin and see that the other person could be the same as me. The anger management course helped me to stop beating myself up when I didn't achieve what I thought I should have achieved. My muscles used to seize up and I would get lumps and I was constantly tense because I wasn't reaching or wasn't achieving the goal that I thought I should have achieved. Realising that my mental health could affect my physical health was a big step.

A number of people offered me extremely valuable support on the way to recovery. My social worker was just fantastic, very understanding. He supported me in such a way that I could start to believe and trust in myself again. I also joined a support counselling group for about a good year and a half. What I liked about it was that after twelve weeks we personally would revise ourselves and see how far we had come; if we had only come a little bit that was OK, and if we had taken a step back that was also OK. Sometimes some of us made big leaps and we were quite supportive of each other.

I found talking to people again quite difficult. It took me a long time just to go to our local drop-in centre. For years I had been isolated because nobody seemed to understand what I was talking about, so I didn't speak about it. I thought, “Well I am in a wee shell here” and then I realised that there is help out there and it is all over. I have two good friends that now know when I am sliding downwards. That keeps me on the balance, knowing that I'm not so isolated. I realise now and accept that I also need a lot of time on my own. Whereas before I thought, “If I am on my own, I am scared of sliding, or what if something happens to me?” I stayed in two bad marriages thinking it’s better to be with someone, just in case. Over the last year I have realised and accepted that for me personally I need a lot of time on my own.

From then onward I gradually joined various groups and am now an advocate and representative for service users. I am even giving talks and managing meetings. I have been on a few training courses and hope to continue particularly with the suicide prevention work.

“There are still bad days, but it's about accepting that it's gonna be a tracky bottom trainer day and accepting that you are gonna have your down days.”
Starting to do voluntary work has made me feel valued again as a person. I can't physically work anymore and I used to beat myself up about that, but then I discovered that I have got a brain and that I can use it.

That really makes a difference to put back in, from a service user point of view, what it is like on the other side 'cause it's not nice. Sometimes you see the professionals and you think, "Oh, well they've learnt it all from a book", but people like myself have learned it through hard experience. You can't have one without the other; it's like talking therapies for me are no good without my medication, I need both. Trying to help people understand that what might suit one person might not suit another.

I still take it day by day and week by week. I've got a big black diary and I put down whatever I've got on that week and my world is that week. I actually moved on from day to day, I am now going from week to week, which is a big step for me. I could not see me going over that hurdle for a long time. There are still bad days, but it's about accepting that it's gonna be a tracky bottom trainer day and accepting that you are gonna have your down days. If you can't accept yourself as you are how can you expect anybody else to? My advice is to surround yourself with people who are positive, who understand, and not necessarily just in regard to mental health. People, who, if you are down, don't nag at you, don't push you, but let you go at your own pace. It's a learning curve, but I am still here, I am still kicking, I am still alive.

“I gradually joined various groups and am now an advocate and representative for service users. I am even giving talks and managing meetings.”
Coming out of the fog

“What I am trying to do is just take gradual steps because that has been working so far.”

My recovery started when I ended up in hospital after having taken an overdose. I was in a job that I wasn’t coping with anymore and I had been given one month’s notice. Fairly soon after the actual end of my contract I took an overdose. I was in hospital for four and a half months. It took me a very long time to get the confidence to be in the outside world again. They said it looked as if I had been depressed for the whole of my adult life, which is probably true. Probably since I was 14 or 15 years old.

The thing about being in hospital was that the people were nice to me. That may sound really simplistic, but I didn’t have to try. I didn’t have to put on a front because they just seemed to understand how I felt. I could just be myself without having to pretend. It also meant I wasn’t on my own anymore. With the anxiety I’d had terrible problems being on my own. And I finally found an anti-depressant that worked. That’s what helped to put me on the way. The hospital was very close to my home and that was very helpful. I couldn’t be in my flat on my own to begin with, but I have a cat I wanted to take care of. Pretty soon I had to go there twice a day, morning and evening, whether I liked it or not. So looking after my cat was a major factor in my making my first steps towards recovery.

Key Words
- Anxiety
- Depression
- Connecting with the wider community
- Coping strategies
- Employment
- Hill walking
- Hope
- Hospital
- Medication
- Patience
- Personal development course
- Pet
- Photography
- Self awareness
- Self belief
- Self confidence
- Supportive counsellor
- Volunteering

When I was discharged I suddenly had to face the facts again what had happened, and what had put me in hospital in the first place. It was very difficult to begin with, but I had realised I didn’t want to be in hospital anymore. I think I had naturally reached the point where I wanted to move on. There were then a number of things I did that built up to being in the outside world again. I had a counsellor who gave me a lot of support when I was first discharged. I have been doing a personal development course for a while. It has really helped me to build my confidence and helped me to progress a great deal. The community that I feel I belong to has become much wider. It’s now pretty much the whole city. I am currently doing two voluntary jobs, I joined a hill walking group and I’m in a women’s photography group. I actually started photography when I was in hospital. I feel it’s a way of seeing the outside world. You have to look much more carefully and you have to engage with it if you are taking a photograph. That’s been very important to me, to see more clearly and focus on the outside world.

There was a real change in me about a year ago. I called it ‘technicolor vision’ because that’s how it seemed. Everything was much brighter and it came and went for a while, and then roughly about a year ago it was there all the time and it’s still there now. I felt very much I was coming out of a fog. And I am much happier than I was. I am happy a lot of the time now, which wasn’t the case before. I’m much less anxious than I was. It can still go up and down, I get more anxious, less anxious, but overall my anxiety is still going down and I am gradually getting more confident.

Before my recovery I had been shut off in a world of my own, doing things to expend the minimum energy and just doing things in a routine because that was the easiest way. After
being discharged from hospital I though, I’ve got to do things differently. Now one of my recovery strategies is trying to do new things. Now it’s like ‘changing things for change’s sake.’ For example, I go a different way home just to do it. Or I’ll go and try out four different types of Scottish tablet just to decide which one I like the best. Changing things for the sake of it was really important to begin with; to establish the fact that I wasn’t going to go back into hospital.

I had a lot of really quite bad anxiety attacks and it took me a while to see what was happening. Now I say to myself, “It’s OK to be happy.” I had to learn that it was actually all right to have happiness as a goal in itself. I’ve tried to put some of my energies into things that have made me feel happy even if they are not very exciting things, like tidying up my flat. Retail therapy is important. I try and spoil myself the whole time, give myself lots of treats.

“There was a fog for a long time, but I’m now seeing more clearly, hearing more clearly and feeling more clearly.”

“…what has been working is just building on things that happen. I try to take opportunities that present themselves and move on that way.”

There are a number of strategies that I follow in order to stay well. Keeping busy is one of them. I don’t like being on my own for long periods. I like human contact. Setting myself challenges, I do that consciously. Yet, I know that I can’t push myself too hard. It’s important for me not to have too much on because if I get tired my mood starts to dip. What I am trying to do is just take gradual steps because that has been working so far. I also have a book where I write things down, particularly when I get anxious. Sometimes I can see from what I am writing down that I am just winding myself up. And I always have a list of achievements, a list of achievements since my discharge from hospital. I started it at that point, because I was lacking a lot of confidence about staying well. I still use it. I have thought, oh it’s OK – I don’t need that anymore but then my confidence goes and it’s really very good to see, “Oh look I’ve done this, this, this.” It’s really quite a long list by now.

At the moment I’m trying to work at friendships again. I still have to overcome quite a lot of barriers when it comes to friendships. Also one of my biggest worries is still paid employment. What I’m trying to do, I suppose, and what has been working, is just building on things that happen. I try to take opportunities that present themselves and move on that way. Time has made a huge difference. Things have been continually getting better and better and I don’t think I could have coped with having that happen much more quickly. I’m going onwards and upwards but it’s on my terms and it’s at my speed. I can’t single out one thing that has brought about this process of recovery. A lot of things have changed in my life. I was in a fog for a long time, but I’m now seeing more clearly, hearing more clearly and feeling more clearly. I am really enjoying myself for the first time in long time.
“One of the major things for me since my recovery started was feeling integrated and part of the wider community...”

Comments added by the Narrator a few months after the interview:

I have been re-reading my story a few months after I first told it and I can see that I’ve moved on again – for example I’m now doing paid work, which was a huge hurdle for me. And I would tell the story a little differently now. But you have to finish the story somewhere even if it’s only half way through, otherwise you couldn’t share it with other people. And I do want to tell my story, because I am so pleased with what has happened.
Psychotic and proud

“I feel confident that I won’t have another full-blown psychotic episode because I get plenty of warning when it’s going to happen... I pay attention to this now and stop it going any further.”

One of the major things for me since my recovery started was feeling integrated and part of the wider community, society, or whatever you want to call it. I could even go so far as to say feeling part of humanity again, because part of my initial reaction to having a psychotic condition and psychotic episodes was to think that I was some kind of freak.

I had the first psychotic episode when I was only 15 and still at school. I couldn't really relate to anyone around me and I didn't actually get formally diagnosed until about 15 years later, so I went through quite a weird adolescence. When I did get a diagnosis of manic depression and paranoid schizophrenia I looked into psychiatry in a big way. Obviously, it’s a big school of knowledge, so I'm not saying all psychiatry is crap, but I do feel that it’s limited in terms of helping people to recover. But it did give me a possible identity, something I could relate to. I could meet other people that have also had this label put on them. I’ve been sectioned five times and found that the most help I got was from the other people in the ward who had gone through similar psychoses.

Recovery for me is a discovery of self, or an ongoing spiritual journey to find who you really are. I believe that essentially I am a spiritual being, and I feel that I’m still recovering because I still haven't really found the level of realisation or identity I would like, but I’m getting there. So I still am recovering, but I feel that everybody is recovering because we are all spiritual beings, so we’re all technically on a journey of recovery, even ‘normal’ people. Because of this I think medication can be useful, but only in containing someone. I have not taken any psychiatric medication for at least ten years.

For many, many years I had no psychotic episodes, but just over two years ago I had a minor relapse and was sectioned. Within three days I had rationalised myself through it as part of my spiritual journey. Various people have said we actually create the way that we perceive reality so if I am in a very depressed, paranoid state my hallucinations will be fearful, threatening, hellish, and could lead to a psychotic episode. If I’m in a calm, collected, centred space, believe in God and that there is something greater than myself, and everything’s okay, even though I don’t understand what the hell’s going on at that moment, I can rationalise myself away from or out of psychosis. I feel confident that I won’t have another full-blown psychotic episode because I get plenty of warning when it’s going to happen. My sleep patterns goes out of sync two or three days prior to really going out and I pay attention to this now and stop it going any further. I don't drink alcohol, I very rarely drink coffee and I don't smoke, all of which helps me to stay well and keep my sleep patterns stable.

I think an important hurdle for someone like myself is employment and meaningful activity. I set up my own charity, and I go round to peoples’ homes who have had or who are...

“...sometimes I don’t have the energy to do anything, but because I’m self employed, I work when I can and I have total freedom not to work when I can’t.”

Key Words
- Bipolar disorder (Manic depression)
- Compulsion
- Contributing to the wider community
- Coping strategies
- Diagnosis
- Discovering self
- Hospital
- Meaningful activity
- Medication
- Paranoid schizophrenia
- Peer support
- Psychiatry
- Psychosis
- Self acceptance
- Self employment
- Self management
- Spiritual journey
- Stigma
coping with mental illness and I record their poetry, what they feel, what they think. I record their life stories. I give them a means to empower themselves, because if they are not being listened to I can make a film, and in a sense I can then help to facilitate their recovery. I'm basically a priest in plain clothing providing peer support and a voice to those who need it. I still get fatigue which is related to the depressed side of my illness, and sometimes I don't have the energy to do anything, but because I'm self employed, I work when I can and I have total freedom not to work when I can't. For me that flexibility is very important because I don't think that I could cope with a nine till five job. My therapeutic work is very important to my recovery because I can turn round and say, “No, I'm not a waster”. I do actually try and give back to the community in my own small way.

Through my charity we made a film about people who have psychotic episodes. The message of the film was that having psychotic episodes was not something to be ashamed of. Part of my recovery has been about accepting and celebrating that this is part of me and helping other people to do the same through my work. I don't lie about my psychotic experiences; I don't believe in denial, because if you deny who you are, that's harmful. People like me need to come out, we need to stand up and say, “Yes, I am psychotic and I'm proud.” My friends and I joke about making ‘psychotic and proud’ tee shirts, but that's how I feel, and I don't think I would be able to recover if I didn't feel this way.

“My therapeutic work is very important to my recovery because I can turn round and say, “No, I'm not a waster”. I do actually try and give back to the community in my own small way.”
The evolutionary jigsaw

I have been in hospital 13 times. It took seven years before I got the correct diagnosis, seven years before I was at least given a chance. I’ve got bipolar disorder which can mean I am sometimes in hospital, but now the fact that I am ill holds no fears. For me, recovery is an ongoing process. What has made me more confident about the future is that I know I’ve got an illness, but I can do something about it.

Getting a diagnosis helped. It at least gave me the chance to say, “I agree with this diagnosis”, and it gave me a starting point to work forward from. What held me back most of these years was inappropriate medication. It kept me trapped. Finding the right medication for myself was a huge step in my quest to live a productive life, although simply taking the medication wasn’t enough. I had reached a level where I realised that I needed to do something to move on. It was as if a spark of life had finally broken through.

For me, being allowed to take risks and being in charge of keeping myself well has played a major part in my recovery journey. Many things, and many people, have helped me on the way. For example, my community psychiatric nurse (CPN) was supportive throughout and encouraged me to apply for benefits, which took away the pressure of having to find work while I wasn’t really well enough.

Key Words
- Benefits
- Bipolar disorder (Manic depression)
- Bipolar Fellowship Scotland
- Calculated risks
- Commitment
- Community psychiatric nurse
- Diagnosis
- Exercise
- Hill walking
- Hope
- Hospital
- The Internet
- Knowledge/information
- Medication
- Peer support
- Physical wellbeing
- Self awareness
- Self determination
- Self help groups
- Stigma
- Volunteering

In the early stages I didn’t feel as if I could contact other people about my illness. The accepted way to behave seemed to be not to mention it to anybody and to pretend it just didn’t exist. A big step towards getting in touch with people again was joining the Bipolar Fellowship and a local self help group. Being able to see others live productive lives and sharing ways of coping with the condition has really made a difference. You begin to think, “Well I am just another human being, I might be able to do that, I can do that.” Besides the help and encouragement that I’ve received through being in touch with these user groups new avenues of information have opened up to me. Before I was diagnosed, lack of information was part of the problem. In this regard the Internet has also been a big boost.

Exercise has become one of my main coping strategies: it’s not just the exercise, it’s the freedom of the outdoors as well. A big step in my recovery process was joining a hill walking club. Nobody knew that I’d been in hospital about a dozen times and I was just accepted as one of the other hill walkers. That experience helped me realise that perhaps other people don’t have such happy lives, even though they don’t have a mental illness or anything like that. It’s not us and them; it’s more that everybody has good and bad things in their life.

“Over the years I’ve realised that support services can do too much as well as too little. I have learned to recognize when to stop my reliance on the support of professionals.”

“...being allowed to take risks and being in charge of keeping myself well has played a major part in my recovery journey.”
I am also seeking mental stimulation in a variety of ways – taking on something new certainly provides mental stimulation. For example, I play a major part in running the local self-help group and I am on the management board of a Scottish mental health organisation. But I have no plans to go into full time employment just now; I’m happy to be well, to be able to think and to be able to do what I want to do. There was a point last year when I was thinking about declaring to the Department of Work and Pensions that I wouldn’t need benefits anymore, but I ended up in the hospital about two or three weeks later. Although the voluntary work I am doing right now is new and rewarding and I can see the impact it’s having, I think I need to keep a lid on the amount of work that I’m doing. I feel every setback gives me tools to tackle what’s thrown at me in the future. It’s like pieces in a jigsaw that I can make use of the next time.

Over the years I’ve realised that support services can do too much as well as too little. I have learned to recognize when to stop my reliance on the support of professionals. If I hadn’t taken risks to get well in the past, I might still be in a sort of low-level state. I might have had only one spell in hospital rather than a dozen, but I doubt I would be where I’m at today. Staying well might be an ongoing struggle, but I am committed to making it happen.

“For me, recovery is an ongoing process. What has made me more confident about the future is that I know I’ve got an illness, but I can do something about it.”

“Learning about what trigger signs were, about what the early warning signs were, and also about some of the traits of the illness armed me to form a sort of self management style for myself.”
Doesn’t time fly when you’re depressed?

Initially the main thing, especially on diagnosis, was learning about the illness. I didn’t particularly find out from whom you might expect. I attended self help groups, run by the Manic Depression Fellowship (now known as Bipolar Fellowship Scotland) and I suppose I just found it helpful that, surprise, surprise, I’m not the only one with manic depression! And I’m hearing their stories, their experiences and relating really well to them. Whereas in other situations, for example, with my psychiatrist, I wouldn’t be getting that at all, I would be getting quizzed about my symptoms. I found it a very refreshing way to learn about my illness. Basically, I managed to go to one self help group about once every two weeks, and occasionally some extra ones. And I think it was just my thirst for knowledge about what was up with me because I got a late diagnosis and it caused quite a lot of concern, a lot of upset and chaos.

Learning about what trigger signs were, about what the early warning signs were, and also about some of the traits of the illness armed me to form a sort of self management style for myself. To be aware, you know, that if I’m up, I’ve got loads of energy and I’m going to go into town to buy, say, a pair of jeans, I don’t come out with five pairs of trainers and a jacket. So I would second guess myself and check myself. It gave me more awareness of myself in different states of my illness.

I got immersed in self help groups. I started joining local link clubs and local mental health organisations to such an extent that when I had the energy and I was feeling well, I would utilise my energy to that end. I ended up volunteering for the organisation and a few other local organisations. I either became a committee member or director and that actually continued until I got full employment. As my energy came back, my knowledge, enthusiasm and my confidence came back, and I didn’t have so many dips. It was a relatively smooth road through voluntary work, to employment and having quite a full and active life.

But it’s scary when I start losing my energy, and I try to limit myself. I try to utilise my positive energy and urges in a positive way, whether it be charitable work, extra curricular work in steering groups, working groups to try and develop things for mental health or reports or whatever. But whatever my tools are they are not infallible, and neither is my illness.

“The thing that keeps me going is the knowledge that I’m going to get better. The one thing I do know about my illness... is that I bounce back. And when I bounce back the trick is to bounce back and stay well.”

“As my energy came back, my knowledge, enthusiasm and my confidence came back, and I didn’t have so many dips.”
The thing that keeps me going is the knowledge that I’m going to get better. The one thing I do know about my illness, if history tells me anything, is that I bounce back. And when I bounce back the trick is to bounce back and stay well. The fact is, that I have manic depression, I don’t care whether it’s genetic, I don’t care whether it’s a chemical imbalance, or how I got it. The fact is I have it, and to a certain extent I will have lesser or greater degrees of manic depressive symptoms till the day I die. I try to utilise and enjoy the times when I’m well, and try and avoid and minimise the times of being low through self management, in terms of being aware of my illness, being aware of my trends, being aware of triggers.

My advice to others with manic depression would be to watch your highs but to hang on to your healthier times because I think we can all agree that depressions sucks, there’s no doubt about it. I do feel that I’m a stronger person for having the experiences that I’ve had. I have had very good experiences and although it’s been scary, a bit depressive, and it’s been a bit up, a bit down, I do think I’ve benefited as an individual from the entire experience. I tend to forge on and just hope to get back in there because I enjoy the work, and I think it’s valuable to try to make a difference for other folk.

“I started joining local link clubs and local mental health organisations to such an extent that when I had the energy and I was feeling well, I would utilise my energy to that end.”

“I do feel that I’m a stronger person for having the experiences that I’ve had.”
To hell and back

“Through my experience at the psychiatric hospital as a day patient I gained knowledge and a number of coping skills to help me deal with my mental illness.

For me, recovery means that I’m not in hospital and I’m not sitting in supported accommodation somewhere with someone looking after me. Since I’ve recovered, I’ve found that in spite of my illness I can still contribute and have an input into what goes on in my life, input that is not necessarily tied up with medication, my mental illness or other illnesses. I’ve been able to overcome my illnesses and in spite of them have a quality of life that I didn’t have before. I had a great deal of supportive help from my GP, community psychiatric nurse (CPN), psychiatrist, and the local psychiatric hospital. They have helped me to explore some of the emotional and behavioural problems that were troubling me. Medication helped in my recovery and, after juggling pills at the start of my treatment, they found out which pills were beneficial and which ones had an adverse effect and we were able to get a balance and find something that suited me. Through my experience at the psychiatric hospital as a day patient I gained knowledge and a number of coping skills to help me deal with my mental illness.

When I was coming out of the day hospital I tried to access a drop in centre in my local area. You had to fit into a criteria in order to attend their drop-ins and by this time I didn’t fit the criteria so I was thrown to one side. The lady came in and wasn’t able to tick all the boxes, so that was me considered better as far as they were concerned. I felt that I’d been pushed back under the stone that I’d just crawled out of. It seemed then that to re-access that level of service I would have to go back into the system. It was suggested that I go along to a different mental health organisation which might be able to help, and they did.

Through them I got a befriender and he had a big input into my recovery. When I felt well enough I became a befriender to give something back, as having been there myself I know what it’s like. I still volunteer with the same organisation and I’m a member of the board. The people at the organisation have been very helpful and supportive and I get a lot of encouragement from them.

Another big aspect of my recovery has been Alcoholics Anonymous (AA); I’m a member of that and I’ve got 16 1/2 years of total abstinence thanks to their help, and my drinking was all tied up with my mental illness of course. I started using alcohol at 13, I had all these emotional and growing up problems that were never addressed and alcohol allowed me to squash it all. When I sobered up, all these problems were still there of course because they’d never been dealt with, and I had to start that process. Now that I was sober, I was able to go to the doctor and the psychiatrist and tell them the truth for once in my life, which I hadn’t been able to do when I was using alcohol. I was finally able to be honest about my sexuality and that lifted a huge weight off my shoulders. I was aware of it at 12 years old, but I couldn’t talk about it because when I was young you went to jail for it.

“When I felt well enough I became a befriender to give something back, as having been there myself I know what it’s like.”
When I got honest, I was able to say to people, “Right, that’s what I am and if you don’t like it you can lump it.”

Spirituality played a big role in my recovery. I’m a practicing Buddhist. The philosophy of Buddhism appeals to me because there are no dictates on your diet or your habits, or anything else, you’re just allowed to be a human being.

Every problem and every hiccup was necessary for me to arrive at where I am today. The experience was required to give me the tools and knowledge to keep going. I maintain my recovery by attending AA, I’m quite involved in that obviously. Helping other people at AA and my volunteer work, I find most helpful because it takes my mind off myself. I feel as if I’m doing a little good somewhere. I still pop my pills as suggested. I also have a lot of good friends. I’ve found a mix of people from all walks of life and there are the family attachments as well. My goal is to just to enjoy my retirement and my life. My advice to others in a similar situation would be to try to be honest and open-minded. For anybody who is struggling, try and find a way of expressing what you need mentally and physically. The most important thing is to realise that recovery is possible. Everybody has mental aberrations, behavioural problems and emotional problems which don’t necessitate medical or psychiatric intervention, but they’re still there. The so-called “normal people”, I’ve yet to come across one! At the end of the day I can turn around and say, well thank goodness I’m not normal!

“AA did not open the gates of heaven and let me in – it opened the gates to hell and let me out.”

“The most important thing is to realise that recovery is possible.”