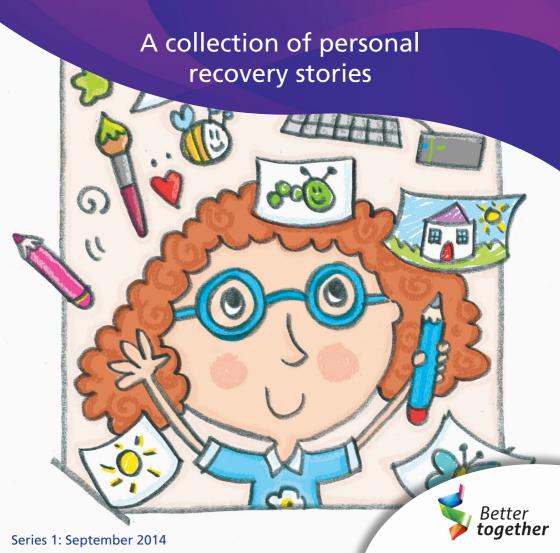
Opportunity

Derbyshire Healthcare NHS Foundation Trust

Recovery Personal strengths Optimism Hope



Introduction

Recovery is about building a meaningful and satisfying life, in whatever way that is defined by each person. The principles of recovery not only apply to patients, but to families, friends and carers. We can all relate to the themes of recovery and identify what it is in our lives that gives us hope, confidence and opportunity. For recovery and wellbeing to work, we need to move away from focusing on deficits and problem-focused services towards identifying and building upon personal strengths and assets to accomplish personally meaningful goals.

This approach uses the concept of peer support. We know that a person (who may still be in recovery themselves) who has walked the same or similar journey, is truly able to **empathise** and understand the thoughts, feelings and behaviours that others are experiencing. This first-hand insight means they can offer advice and guidance on how to regain control of a situation and how to **rebuild** a life that is meaningful.

When people share their recovery journeys they inspire others to think about the **assets** that they have within themselves and within their networks and communities. By hearing about another person's journey people can start to feel less isolated and start to realise 'I am not the only one going through this'.

The more stories of **encouragement** we can portray the easier it becomes for people to talk about their own experiences and, talking about our experience reduces anxiety and fear.

Hope is central to a person's recovery journey, and, as such, hearing stories from people who have lived and are living with daily challenges helps us all think about how we can overcome our obstacles and live a fulfilling life.

Recovery and wellbeing is a very personal thing. Each person finds help and solace from different things in life and these stories convey, beautifully, just how unique and interesting each and every person's recovery journey is.

A Bake

Sara Bains Recovery and Wellbeing Lead



Foreword

Welcome to Derbyshire Healthcare NHS Foundation Trust's first ever booklet of recovery stories, fully created by people who have used our services and wanted to share their experiences.

Recovery means different things to each person, and everyone has a story to share. These personal recovery stories are written in the persons own narrative, reflecting the things that are of value to them, and convey powerful messages of hope, self-determination, resilience, inclusion and choice.

Personal stories, or narratives, are deeply important in our lives and are usually the first things we describe to others. In short, we know ourselves through the story of our lives. This is why when people come to our services we should ask, "what has happened to you?" and not "what is wrong with you?"

Listening to people, and formulating their story, is a crucial step in helping people feel heard, understood and believed.

The Trust has great admiration for each individual who has shared their experience with us in this way and hope this collection of recovery stories inspires many others to do the same; helping us all to break down barriers, address stigma and make the most of their strengths and dreams.

Hilary

Here's the 'skinny' on me...

I've been asked to write around 1,000 words. Oh dear. If only I could restrict words like I can restrict food... No. If only I could allow myself to eat, the way I allow myself to ramble.

I have anorexia. It's difficult to say, because of the stigma.

But that's one of the things the illness thrives on, so I'm determined to share my story.

I think I always carried it, like a virus waiting for the right set of circumstances to 'flare up'.

I was never fat, but when I lost a little weight and started exercising, I became addicted. Compliments from others and modern life encouraged the behaviour.

Gradually I did more and more exercise and began restricting food. Not only did I restrict types of food like bread and potatoes, I avoided 'high fat' foods and began to restrict my calorie intake. I counted everything.

The anorexia had got me, an intelligent, professional woman. I falsely believed I was just really fit and healthy and that there was something at least that I could control. In fact, it had control of me. It wasn't about not wanting or not liking food, or thinking that life would be better if I was thin.

As you starve yourself, your brain stops functioning properly. I made all kinds of complicated rules for myself: I had to do a certain amount of exercise

and it gradually increased. If I felt I'd eaten too much in general or too much of a particular type of food, I would 'compensate' by skipping meals and certain types of food altogether. The illness was trying to make life impossible.

Anything that interfered with my routine and meant I couldn't exercise, caused me anxiety and I would have to do yet more exercise to make up for it. I was doing upwards of 3 hours aerobics at a time at home, as well as walking, jogging and going to the gym. On one occasion I walked for 10 miles around my local area. All the while consuming only between 500 and 1,000 calories a day.

A meal out with friends would cause me stress as I would have to 'deal with it' before and afterwards, trying to appear normal to others, whilst skipping meals both before and after.

I weighed both food and also myself on a daily basis.

My periods stopped. I felt cold all the time. I couldn't get comfortable in the bath or in bed. My clothes were hanging off me and my hair was falling out...

Colleagues were talking about me. Strangers would comment on my gaunt appearance. I was literally a deathly grey colour.

I finally admitted to myself that I had a problem, when I began avoiding people altogether for fear of their reactions. Anorexia thrives on isolating the sufferer in this way, as they avoid others or push them away.

My best friend, who had worked in mental health, took me to the GP. She

also found the eating disorders charity, First Steps, on the Internet. They were available to give phone advice and we were able to go in and talk to someone very quickly.

The doctors at my surgery are all really good, but GPs can still get it wrong: one actually encouraged me to keep exercising...! You need to persist and having someone with you helps. My friend persuaded my GP to refer me to Derbyshire Healthcare.

I was assessed very quickly by the Eating Disorders service and began individual Cognitive Behaviour Therapy sessions, at least once a week in the beginning.

I was referred for blood tests and a bone scan and referred to see the team psychiatrist and dietician... I knew anorexia was a killer, but I didn't

know about the other complications. I have sinus bradycardia, a slow pulse common in athletes. Not a problem for an athlete consuming a healthy diet, but in anorexia it can indicate wasting of the heart muscle. The bone scan showed osteoporosis, leaving me at an increased risk of fractures. At the age of 35, the illness had turned me into an old woman. I shouldn't have been driving; my BMI was too low. I could barely set the handbrake on my car, or open a door. I would 'wobble' climbing the stairs and honestly wondered at

night, whether I would wake up in the morning.

It was frustrating waiting to see the psychiatrist and dietician, but at least things had started for me. I had confidence in the skills and knowledge of the team and found them to be efficient, open and approachable.

In the CBT sessions, the therapist and I discussed my difficulties and challenged the harmful patterns of behaviour. I was also now having individual sessions at First Steps, in which we looked at the life events that had brought the illness about. The two services complement each other, but it was hard, intense work.



I had been completing food diaries for my therapist and, when I eventually saw the dietician who had been reviewing them, she gave me a meal plan to gain weight.

This was a real turning point for me, now less than six stones in weight and close to hospital. I felt a duty to the health professionals who were doing all this for me and I put my trust in them. I followed advice to stop exercising and treated the meal plan like a prescription, a new set of rules to follow.

It was difficult as I never 'felt' hungry and had to get used to feeling very uncomfortably full. It feels like you're eating far too much, too frequently. But it's not an option. I was afraid I'd lose control and pile on the pounds but truthfully gained weight slowly, steadily. It's very much baby steps sometimes one forward, two back - but if it's gradual I feel I can cope mentally and not be overwhelmed.

I'm realistic: It's a struggle and I believe I will always have some difficulties. However, I know I can get to and maintain a healthy weight and enjoy a better quality of life.

My therapy with First Steps finished last year, though they're still there if needed. And the work with the eating disorders team goes on. I still have CBT, but I now also attend weekly sessions run by the therapists, with a small group of other sufferers. It's called Dialectical Behaviour Therapy and quite innovative. I thought I'd run a mile from group work, but feel lucky to have met some wonderful people, now friends. The therapists take a flexible approach and listen to feedback and we all motivate each other.

It means a lot and makes me want to work harder and take responsibility for my recovery. Honesty is key, along with keeping a sense of humour. One of my strategies is to treat it as a game and try as many different meals and snacks as I can! I'm starting to discover what I really like, as opposed to what I believe I need or should have... Living, rather than barely existing.

Like I said, it's difficult to say out loud, even when it's glaringly obvious to others how ill you are. I was worried how people would react when I admitted my illness, and afraid of losing people. I told my sister by writing her a letter. Once the words are out it's such a relief and I now know how many loving and loyal friends I have. And First Steps and the Eating Disorders service are there to advise and support loved ones, too.

If I hadn't received help when I did, I really wouldn't be giving this story. I went from not knowing how to turn things around, to being so much better already. So if I have gone over 1,000 words I apologise, but end with three more: there is hope.

"I'm realistic: It's a struggle and
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Martin

The image of myself was distorted from an early age starting with being rejected and abandoned as a baby. These early unconscious life events were possibly the seeds of insecurity which became the foundations of my world helping to shape me into the fearful and lonely person I would become.

My experience growing up as a child was one of terror, despair and hopelessness resulting from being the victim of constant abuse and neglect. My life revolved around an endless cycle of traumatic events leaping from one to another.

The earliest and possibly most destructive of these events was when I was about two and half years old and was wrongly blamed for nearly killing my older brother and causing his

permanent disability from his injuries. Although I had no memory of this, the story I've been fed all my life by my mother was my brother was sat on top of the washer with boiling washing in it and with no cover on and it was alleged that I pushed him into the boiler. This was 1965 and he had 70-80% burns which in that day it was life threatening injuries and he is scarred and partly disabled for life. At two and a half I couldn't have had any concept of what had happened but remember being told it was my fault. That day I lost my best friend, my older brother who never forgave me, and sadly the story was probably untrue as my mother was not the most responsible of people.

From that day on and the rest of my childhood I was treated like I was unclean or tainted in some way. Continually shunned by family and neighbours who constantly claimed I should be put in a home for bad children, finally made me believe them.

It was a violent household. I saw my dad batter my mum, break her ribs. I lived under the threat of death, being murdered by my own dad. I didn't sleep very well and my coping mechanisms was to back into the corner of the wall and house my breath so he couldn't find me.

For the next few years I suffered further at the hands of my family especially my father and brother who threatened and attempting to kill me. The gruelling punishment that I received kept occurring and I kept soaking it up like a sponge, even when the crushing and humiliating



experience of being sexually assaulted. This time my perpetrator gained power over me because they knew nobody cared and also the fact that I felt I deserved to be punished. This cruel and vile act along with their threats to kill me continued until I started senior school. This added to my overwhelming feelings of inadequacy and further encouraged my view of myself as being bad and needing to be punished.

However like most kids somehow I managed to compartmentalise it and blocked it out of my mind. In a last ditched attempt to salvage my life I threw myself into my education in the hope that I could gain a good career and escape my world of torment. Sadly,

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as I prepared for my exams I was abused and humiliated by a teacher and it became a perverse subject of laughter with

the pupils in my year where the teacher inferred that I was not man enough. Subconsciously it must have triggered the earlier trauma of my abuse, and the next year I was absent from school playing truant for almost the whole year.

This led me into being involved in petty crime, drugs and alcohol abuse and eventually acts of violence. When I eventually returned to school, I portrayed myself as a tough guy in order to stop others from laughing at me so I became the most disruptive and anti-social pupil in the school. After many acts of violence, absconding and assaults on staff I was expelled.

I suddenly found myself being driven along like a rollercoaster on a path to destruction. I did not possess the skills to change at that time, nor did I want to. I had no support from anyone, as my family had disowned me, and I had no real friends. Alone and angry I found myself getting involved in gangs in order to feel accepted and gain attention which I had lacked. My behaviour became more and more destructive and unmanageable leading to periods in detention centre and prison.

Eventually cracks began to appear in my fragile world and I was propped up with illicit and psychiatric drugs as the years of trauma began to haunt me.

> My Doctor kept prescribing my anti- depressants and valium and was very impatient particularly when I had recurrent panic attacks. He'd give

me 300 valium at a time and tell me to have a couple of beers with them to help keep me calm.

My self-destructive behaviour continued and contributed to the loss of both my children which resulted in suicide attempts, thankfully unsuccessful. Shortly after this several unexplained events occurred which eventually resulted in me becoming a Christian, however I found the practicality of this difficult as some elements of the church were not happy with a former what-ever I was being there.

Thankfully I recovered from drug addiction having successfully became drug free by doing a cold turkey detox,

mainly because there were few drug services in 1989. Having now removed the drugs and alcohol which had kept my haunted past locked away and with a new faith I found myself learning to unravel and deal with my previous life events. It was like undoing a jig saw and putting it back together.

In the early years after becoming a Christian I wanted to make a difference and got involved in the local community. Most people kept me at a distance, often treating me like a leper or something, and my former friends deserted me because of my faith and I faced my enemies alone or perhaps not as I have been able to endure and survive death threats and abuse. My ability to persevere through much adversity has enabled me to be resilient and gain strength, something which those who have suffered with any illness and stigma have in abundance. but perhaps need reminding of and encouraging.

I wanted to keep on learning and developing as I now had hope and self-belief but despite all my life skills I ran into trouble as I had no qualifications, I had convictions, a former drug user and had suffered with emotional and mental health issues. I hadn't been to rehab, school, so didn't fit into their scenario. I've never fitted, ever, and I still don't, I have to be more flexible.

In 1996 I tried to train to be a nurse and had to sit a DC1 test, a bit like a Mensa test! I'd never sat an exam before in my life but it was a walk in the park and I got over 80%. My initial place was withdrawn because of my background. Later I applied again and although the university

placed many obstacles in my way they eventually conceded and let me train although they believed I did not have the academic ability to pass the course. Thankfully I was proved right and three years later I was one of five to get a Degree First Class Honours.

I've had no formal diagnosis but had OCD, panic attacks, multiple PTSD and depression... possible borderline personality disorder. It took 20 years to be accepted and sometimes it feels I still have to jump through hoops, that being said. I believe that everyone has potential within them and can rise up and become the person they want to be and achieve the things they want to. Never give up, never give up, because we are all unique and special and have good things to offer this world. My insight and awareness comes from my own learning and in some ways someone has given me a gift as I can now make a difference to people.

Today I am still a Christian and still don't quite fit, one of my children who was taken from me returned later when I won custody of them in court. Now I am married and have three children all doing well.

"Never give up, never give up, because we are all unique and special and have good things to offer this world"

Tom

I was in my 3rd year at university college Falmouth doing a degree in graphic design when I became ill.

I had always felt uneasy and anxious at Uni. I think there were several reasons for this. Partly it was because I was a long way from home. Also I found the work stressful as there was a lot of writing and I always find this difficult because of my dyslexia.

My way of dealing with this was to try to get rid of the stress by taking drugs as a coping mechanism. This did not work but the answer to me was to take more. Finally I was way behind with my work and becoming paranoid.

I sought help from the counsellor at the university who advised me to take time off the course, so I went home to my family.

I wanted to be at home to feel safe but my paranoid and delusional thoughts were getting the better of me. This was a new experience for me. I had felt anxious in the past but never as bad as this. I was afraid to go to sleep. This made the symptoms worse and finally my parents got the doctor to come out and see me. He phoned the Early Intervention Service and asked them to come out and see me. When they arrived a few hours later, by this time I was sure everyone was against me, even my parents. This meant I was not co-operating with anyone and wouldn't agree to go to hospital as a voluntary patient and the police had to be called to take me.

I was taken to the Radbourne Unit in Derby for my own safety. At first I wouldn't eat or drink, but after I had been given medication and slept I began my recovery.

I spent a month in the unit while they diagnosed that I was suffering from drug induced psychosis and that it would take a couple or more years for me to recover fully if I didn't have any lapses. My medication was changed to one that had less side effects and I was given lots of support when I went home. I had a community psychiatric nurse who visited me every week to begin with, to check I was okay and we worked together on "staying well plans". I also had check ups with the psychiatrist.

I went back to finish my degree 9 months after I took the intermit, and I finished it, but really looking back now it was too early and I fell into the old coping patterns. It was around this time that my driving license was revoked for 6 months and this really hit me hard. I realised that my driving license was more precious to me than carrying on taking drugs. This taught me how to set myself a goal and work towards achieving it. I knew that I did not want to risk having my license revoked again and this was the real start of my recovery. This was very important because I had worked it out for myself and used will power to achieve it. It was me telling myself what to do, not someone else telling me.

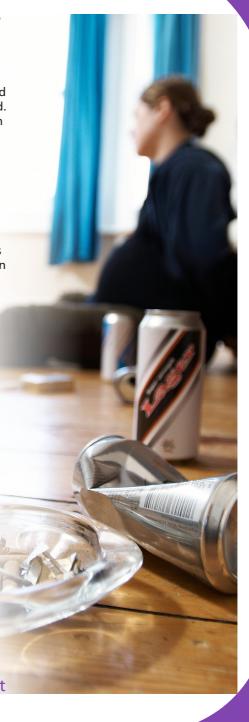
I was back home again and after a few months I began to take advantage of the groups and courses the Early Intervention Team had to offer. I particularly enjoyed the photography course which was based in Ilkeston and I was pleased with the work I produced. We exhibited the work in an exhibition at the end of the course and opened it to the public to view. I also went to the All Being Well art group at the Arboretum Park in Derby where I met people with similar conditions to me.

It was good to talk to people and later I joined the making sense group which was held by Dr. Painuly. This was where I learnt most about my condition and general mental health. I think everybody would benefit from this sort of course, even if they don't have mental health problems.

I also did a one to one CBT course to look at my behavior and thought patterns in social situations.

I began volunteering at the trust earlier this year and this has been good to get me back into the swing of things. Being ill, I lost the structure of my days and weeks and my sleep pattern was turned upside down. Having a work pattern has helped me to feel I have moved on a step to full time employment. My recovery has taken me three and a half years to get to where I am now. The road has been long, but with a lot of people helping me I think I have learnt a lot and cherish life more now then ever!

"I had worked it out for myself and used will power to achieve it. It was me telling myself what to do, not someone else telling me"



Michael and Connor

When myself and Belinda first got together she had twin girls three years of age. A few years later we decided to start for a child together and we were blessed with a little boy (Connor). He was a very difficult child from the offset and for years we struggled blaming the terrible twos and so on. There was times when Belinda would say that something wasn't right as we had raised twin girls with far less problems. But I didn't want to accept there was something wrong with our little boy.

As time passed things progressively got worse and worse to the point that we were in a very bad place and we were struggling so much it's hard to put into words. So we booked an appointment with our GP not having a clue what we needed or what support was available to us.

A few weeks later we had an appointment come through the post to see a doctor at the Revive Centre in Chaddesden. We were still unaware of what to expect or where this would lead. Our nurse was also present during the meeting and after a few meetings it was agreed that Connor could have ADHD and that a trail of treatment for it would be undertaken. We had mixed emotions at this point. them being there was something wrong with our son, that he would be taking these drugs and the possible effects of this. We knew very little, if nothing, about ADHD but we were so desperate for help we were willing to try anything at this point.

After the initial meetings with the doctor the regular review meetings were undertaken by ADHD nurse. She checked things like weight, blood pressure and height and general health and how the last period had gone for us all. The level of observations and health checks was a big surprise to us both but has proven to have been a massive key part to our success story.

At the start of the journey we wasn't aware that this service even existed but we were extremely grateful of the help and support. The passion and enthusiasm from our nurse and her team is second to none. The medication has obviously also played a key role giving Connor and us the ability to deal with situations much better and more calmly. The training and guidance given to Connor and us at these meetings has equally been a key part and without either piece of the jigsaw I very much doubt it would have worked for us.

The nurses have always been approachable and able to gain Connor's trust making him feel comfortable enabling him to speak out during the meetings. They are always interested in all aspects of Connor's life home school and social reassuring him he's not different to other children and that he can lead a normal life. Also gaining our respect and trust at the same time.

The review meetings have always been on the agreed timescales and if meds have been altered the review has been adjusted accordingly. There has been times where we have been struggling and needed additional support and moving an appointment forward has never been a problem. Likewise when we've needed support over the phone after leaving a message someone will

call you back which is an absolute god send when you are desperate for support and advice.

After the start of medication we were both amazed at the life skills that Connor had missed out on whilst growing up, things we all just take for granted.

The medication calmed Connor down then enabled him to absorb what was going on around him. It was like a new world for him; he hadn't got a clue how to deal with situations, making situations with other peers and family members very difficult for Connor as they didn't understand the condition this then putting the sole responsibility on to Connor's shoulders which is a big ask for someone with ADHD.

We have also had the benefit of the 123 magic training and after a great deal of time and effort from all parties involved it produced amazing results. For example, we can ask Connor not to do something several times with little or no response and I can say one and he will just walk away, occasionally we get to three, but not very often.

The RAPID training has been another key piece to our jigsaw giving him tools and knowledge of how to deal with everyday life which Connor does use on a regular basis.

Another major benefit to the RAPID training was that we were able to meet and talk to other parents with the same problems and experiences. You wouldn't believe how helpful this was to us.



Connor has now completed his first year of secondary school achieving national average and above grades. He has had some difficult situations to deal with during his first year but he has got himself through them. I can confidently say this wouldn't have been the case without the support and training given by the nurse services. The support from his secondary school has been very good too when situations have arisen they have actively dealt with them. The school have actively encouraged Connor by giving him rewards and acknowledgement for his achievements during his first year. The question you have got to ask yourself is would this had been the case without all the foundations that have been put in place prior to him going to secondary school. I very much doubt this would have been the case.

If it wasn't for our doctor and nurse without no question of doubt our marriage wouldn't have lasted, we were struggling so much.

My relationship with Connor was almost none existent. I didn't even want to be in the same room as him or look at him because he was so irrational and he caused so much upset and pain. We were in such a bad place. We were falling out over situations around Connor and were desperate for help. The effects of a failed marriage. the feeling of not being loved would have had a massive impact on Connor's future too. Him having to deal with all that upheaval with his condition would have been very difficult for him and I dread to think what could have happened to our lovely family.

I'm very pleased to say we now have a very good and close relationship which at one point I would have never thought would have been possible.

But we are proof that with the correct help and support what seems impossible is possible. We are eternally grateful to all that have guided and supported us through these extremely difficult times.

"The nurses are always interested in all aspects of Connor's life - home, school and social - reassuring him he's not different to other children and that he can lead a normal life"

Kate

I am an award-winning children's illustrator and designer, and a workshop leader. I have also been diagnosed with an acute and transient psychotic disorder.

'Acute' means it can happen suddenly; 'transient' means it doesn't last very long – up to 17 days. 'Psychotic' means I always suffer from psychosis.

Stress and anxiety are the main triggers. In January 2005, the company I worked for announced that it was moving to Norfolk, and I had the choice to move with them or be made redundant. At the same time there was a family bereavement and I had a health scare. I became very stressed and couldn't sleep.

In April 2005 I was admitted to the Radbourne Unit for three weeks as I suffered my first psychotic experience. In October 2005 I started to go back to work gradually and in February 2006 I was made redundant as I decided to stay in Derby. In August 2006, we had to sell our house and move into a rented property. This is when I suffered from depression. Ever since being poorly I had been suffering from flashbacks of being psychotic, too.

This is when I got referred to the Early Intervention Service (EIS) and started to get help from many NHS professionals, including home visits from nurses. In November 2006, I was having a chat with an occupational therapist and we discussed the idea of making some cards for Christmas. I sold a few to local florists, newsagents and a library.



This was extremely difficult to do as I had a constant feeling of butterflies in my tummy. Some nurses said that I suffered from post-traumatic stress disorder as I can remember being poorly very well.

I gradually got more confident to sell cards at local craft fairs and design new ranges for seasonal occasions. Then I decided to do a free 'focusing on creativity course', and I got a grant to start my own business. During the course I met a jewellery maker who introduced me to a creative director and I started to get paid freelance work. Having this encouragement, I started up my own company. I'm now represented by an illustration agency and have done freelance work for Moonpig, Igloo Books and Marks and Spencer.

During all this time, since 2005, I have suffered from four psychotic relapses and a few minor episodes. I have been lucky enough to be looked after by my husband and family. During these episodes, I forget how to eat and lose all track of time but I'm highly creative. I get obsessive in mark making on paper, my senses are heightened, colour and sound become brighter and intense. I draw and record every moment with photography and in a doodle diary.

For me, drawing and creating is a release process. When I'm extremely poorly I talk using single letters. I draw pictures with food. I do carvings on the soap in the bath. When I got an intrusive thought, I scribble it down. As I get better, I sit and draw in the back garden. Or I'll sit in the car while my husband goes to the supermarket and

draw the traffic and the people walking past.

In November 2012, I heard there was an art group starting for the EIS with a local artist. I became a volunteer for the All Being Well art and social group that meets every Thursday afternoon at the Lodge in Arboretum Park in Derby.

In April this year, the artist in charge of the group decided to concentrate on her own creative path so handed the All Being Well Group to me. Since then I've been the facilitator of the group. I've also run workshops for CAMHS, at the Radbourne Unit, and with Erewash Recovery Team at Brooklands.

I really enjoy helping and being with people that have suffered similar problems like me, and I want to do more of this type of work. I get so much from helping others and I want to pass on what I have learnt through having this mental health condition to others. And I want to give something back as a thank you as I've been overwhelmed with the support the NHS services have given me.

People ask me why I use blue butterflies so much.

I've loved blue butterflies since I was a child and one of my earliest memories was

seeing them (the Common Blue) on a summer walk with my Mum during a holiday near Padstow. There were too many to count that day as they darted from one purple heather to the next. And have you ever as a child made butterfly shapes with your hands in the sun, creating the shadows? Blue butterflies have popped up at various

times for me and each time it's been a magical experience.

When I was in hospital I had a nervous feeling of butterflies so I began to draw lots of butterflies and give them to the friends I made in the hospital. When I came home I still had the feeling of butterflies every time I went out, so I continued to draw loads of butterflies. The blue helps calm me and gives me focus to create the best possible result for my clients.

And maybe the best reason of all was that from my Grandad's house I was allowed to choose a piece of furniture when it was cleared because he had to go in a home. I chose a bureau and when my Mum cleaned out a drawer, at the bottom wrapped in newspaper she found a tile with 5 blue butterflies on it. So I can honour my grandparents and include my passion at the same time. How lucky am!!

"Examples of my poorly artwork. The teardrops (in the tulip drawing) are a common feature. I started to draw teardrops when I was admitted to the Radbourne Unit; someone had left a bottle of Vosene shampoo in my area, which featured a yellow teardrop on the bottle. I used that to start to get better – drawing the teardrop and re-drawing it. As an alternative to crying I would draw lots of teardrops, some with sad faces and then they would have smiley faces. The colour yellow is a colour of strength for me now too."



Tulips are my favourite flower and a flower of strength and hope for me, my Grandma once told me while arranging tulips to make tulips stand tall in a vase, below the flower head and your tulips will stay tall in a vase.



I would get up really early in the morning and draw turtle doves that were in my back garden, I would watch them eat so that would be a reminder for me to have breakfast.

Claire

When looking back on my recovery story I have only one regret, this was that I didn't get help earlier. However how can you get help for something you don't see as a problem, something you just live with and have been so used to dealing with on your own? I can sit and say that my true recovery began at eighteen because that was when I was diagnosed with borderline personality disorder (bpd). The truth is that my own recovery probably began alone at the age of fourteen. That was when I began to self-harm, an unspoken emotion through a physical form. It was a secret world that no one knew about and one of which was isolating. If you'd ask me at fourteen what mental health was. I would not have an answer, and the same at eighteen.

In fact it was not a family member or friend or even myself that truly realised something was wrong. it was my GP, I would at this stage still be unable to verbalise what had brought me to the point of self harming or feeling suicidal or feeling like the waves of emotions that pushed down me. However somehow the GP saw through me, he knew something was wrong, something I was not speaking about and for me he would be a doctor that would continually support and save my life.

I remember when I was first diagnosed with bpd, I would go to the library and research it, certain statistics of bpd would stay with me and reduce any hope of recovery I had. In fact from the age of eighteen to twenty if anybody would say I would be able to deal with the thoughts, the urges

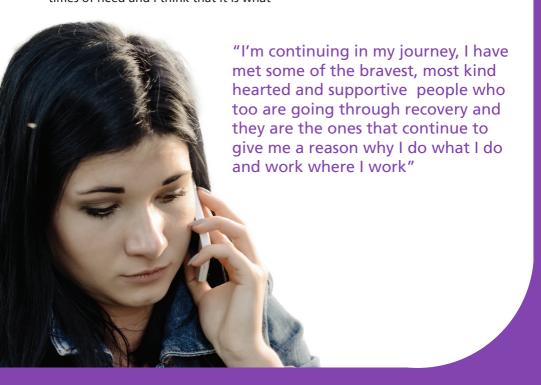
and at times the crushing emotions or even that I would still be in this world. I would have looked at them and said they were the ones who were mad. The truth was that actually there were many parts of my history that would exacerbate my illness but it was something that I couldn't open up to. In my worst points of illness I was selfharming ten or more times a day and attempting suicide three or four times a week. What was going on in my head was pretty difficult to deal with and I probably felt like I was going crazy. The general hospital and the safety of acute wards had almost become my second home.

One of my first experiences of mental health services was with the crisis teams. Even though I did not have belief in me that I could recover or regain control of my condition, they did. The crisis teams were not only supportive but one or two members also encouraged me to take part in volunteering activities. Even though I resisted their belief of hope, they stayed with me and kept trying to give me a sense of empowerment in order to regain control and hope.

The milestone in my recovery was being lucky to enough to be funded by Derbyshire to go to a therapeutic community in York. It was a community for people with borderline personality disorders and there were various therapies like dialectical behavioural therapy and art therapy. The year in York I always say saved my life and words aren't enough for the appreciation to the people that funded the placement. That year was the most emotionally painful and challenging year not only in my recovery but in my

life. You could say that it was like hell trying to move on but a hell that was worthwhile. You could also say that the various therapies were the things that helped me in my recovery as well as the structure and the routine. However I'm inclined to think it was much more than that. As a community of people with the same condition you not only pull together as one but you also support and build up lasting relationships with people you know have gone through similar experiences to you. It's actually like an informal unpaid peer support network and the community itself did not just stand as peer challenging peers or peers supporting peers but a place staff walk alongside, a flattened hierarchy where peers challenged staff and staff challenged peers etc. The point was we came together as one with structures and routines and a place to go to or someone to see in times of need and I think that it is what

helped me the most in my recovery. Six years later since the beginning of my darkest times and the most severe time of illness. I'm continuing in my journey, I have met some of the bravest, most kind hearted and supportive people who too are going through recovery and they are the ones that continue to give me a reason why I do what I do and work where I work. If someone had said to me six years ago I would be working in mental health being a peer support worker, I would not have been able to envision it, but now If I can help one person to see what they see as impossible or get to feel that they not alone and there is a chance of recovery, then that is one way to my job being completed.





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