

It began with Peer Support and now I'm a Writer, Activist and Campaigner

I'm now 60, a mother, grandmother and psychiatric survivor, having worked in community development since 1980, in a variety of settings. My own mother, father, 2 younger sisters and 3 sons have also been in and through the psychiatric system, with psychoses. Labelled, drugged and forcibly treated. My mother had many courses of ECT against her will in the 50's and 60's. I managed to avoid ECT in 1978 as a psychiatric inpatient for the first time, following the birth of my second son. Escaping from the hospital in my pyjamas with my husband after an evening visiting, I was a voluntary patient. I had to go back in because of chlorpromazine withdrawals. There was no need for more grabbing and jugging as I swallowed the drugs, resisting inside, recovering after a year by tapering then getting off the medication.

Another puerperal psychosis in 1984, a few days after the birth of my 3rd son, more rapid tranquilisation, separated from baby, soon was compliant, out again to look after my 3 sons drugged up on chlorpromazine, recovered after a year. Then in 2002 I experienced a menopausal psychosis, went voluntarily into local hospital, detained for 72hrs, told I had to take the drugs. I knew the score, swallowed them, resistant inside, it took 2yrs to get out of the system because of the schizoaffective disorder label and psych drug cocktail. But I did recover and got back on with my life, working first in a library, in 2005, then applied for a FT job in an FE college, 2006, that involved setting up a student mentoring project.

In December 2005 I attended the SRN PS conference in Glasgow with guest US speakers Gene Johnson and Lori Ashcraft from Meta Services, now Recovery Innovations, Arizona, and Larry Fricks from Georgia Certified Peer Specialist Service. Lori led a workshop on peer work and I was impressed by her delivery, the message and the opportunities of PS in bringing about change to mental health services. I spoke to Lori later and mentioned being interested in doing the PS training, in Arizona if possible. She gave me her business card and we began an Email conversation. I saw in the PS model and movement something different to what was going on in Scotland, mental health wise. It looked like the community education model of empowerment that I'd been used to. And so I began to get involved in PS.

I kept an eye on SRN and Meta websites, noticed a PS training in Edinburgh, Nov 2006, organised by Penumbra, a Scottish MH organisation but didn't manage to get a place. In 2007 I decided to organise a Fife conference 'Celebrating Recovery' in April 2008, and SRN agreed to sponsor it, 120 people attended. Meanwhile the PSW pilots were starting in Scotland but Fife wasn't included so I set up Peer Support Fife in Jan 2008 to promote the PS model. I then was accepted on to the WRAP Facilitator training in Jun 2008. In the August I began facilitating WRAP workshops along with a co-facilitator, in different Scottish areas, and introductory peer support training sessions.

And it was at this point, midway through 2008, that I experienced resistance in the mental health world as a person with 'lived experience', to my community development approach and leadership skills. It came as a surprise. There seemed to be an expectation that I would fall into line, do as I was told, by the other experts by experience in the recovery movement. I call it hierarchical shenanigans. Something like the patriarchal or paternalistic psychiatric system. I didn't recover just to be put into a straitjacket in the community. In early 2009 matters came to a head, after I had attended the March Brisbane IIMHL, International Initiative for Mental Health, conference in Australia with an exchange in Auckland, NZ, a carer place funded by Scottish Government. I came head to head with Scottish user leaders at the Brisbane event, about the cronyism and hierarchy, and it made me seriously consider whether I wanted to continue promoting PS and recovery.

I decided to keep going even although I was getting excluded from a number of key PS developments nationally. Instead I got funding through PS Fife and we began to run a number of user/carers networking and training events, also local PS workshops. I did this voluntarily alongside my role as a carer, advocate and peer supporter for my youngest son who was coming through the psychiatric system. Mary O'Hagan, NZ activist and consultant, came to Fife twice in 2010/11, facilitating workshops on service user participation and leadership. I instigated the visit of Shery Mead (creator of Intentional Peer Support) and Chris Hansen, and Bob Whitaker (Anatomy of an Epidemic, Mad in America) to Scotland in late 2011. Other PS Fife activities are on the A4 flyer. By the time that our funding had dried up in 2012 I had become a writer, survivor activist and campaigner.

Shery Mead with Cheryl MacNeil in the article '[Peer Support: What Makes It Unique?](#)' says:

"Peer support in mental health however has a more political frame of reference. Whereas some support groups form around the shared experience of illness, peer support grew out of a civil/human rights movement in which people affiliated around the experience of negative mental health treatment. (eg coercion, over-medication, rights violations, as well as an over-medicalised version of their "story"). In other words, the shared experience has had more to do with responses to treatment than the shared experience of mental illness."

This quote sums up the reasons as to why I first got involved in Scotland's peer support agenda. It also explains why I am still a passionate believer in the potential of the peer support movement to bring about real positive change in mental health services and a paradigm shift in the psychiatric system.