



<p>Project: 'Reflections of trauma, challenges, and healing: An oral history' Respondent: CC Jill Year of Birth: 1977 Age: xx Connection to project: Respondent Date of Interview: 22nd August 2022 Interviewer: Rachel Kelly Recording Agreement: Yes Information & Consent: Yes Photographic Images: No (Number of: 0) Length of Interview: 1.05.05 Location of Interview: EDVA Kirkintilloch Recording Equipment: Zoom H4n (internal mics)</p>	 
--	---

Time (from: mins/secs)	Description	Transcribed Extract (from- to: mins/secs)
00.27	Respondent states that she was born in Fife. Her home town is St Andrews. She lived for a short time in the Scottish Borders and England and now resides in the Southside of Glasgow.	
1.04	Interviewer asked the respondent about her life prior to experiencing trauma.	
	<p>"I had an elder brother, myself and a younger brother. And we lived in St Andrews and my parents had their own business. And childhood was good, childhood was great. You know, parents worked hard for everything. And then at the...That changed quite considerably when I was eight years old. That was the first trauma. Being my...Where we lived in St Andrews we looked right on...We were at the, sort of, golf course and we looked right on to it. And there's not been on before or since but there was...It was Easter Saturday and the boys were out playing. Which...it was our playground it was quite normal. And Noel and Lewis, that was my elder brother, and my younger brother were out. And they were going around the road and a twenty foot tidal wave swept my brother Noel into the sea. And Lewis got stuck on the pole. There was a hole in the fence and Noel went through it. He was then missing and was found along the Eden Estuary between ten and fourteen days later. So, as children it was matter of fact what had happened. I can pinpoint where a lot of my people pleasing came from at this point; now later in life to look back on. Because I thought it was all my fault that Noel had died. Because I...as a child it could have been like yesterday. But I know as an adult it may not have been. But I felt it was my fault because GOD had listened to me. Because I'd said-'I hate you, I wish you were dead.' Now, I never told anybody that. Certainly not my parents, because I thought it was all my fault. And that God had listened to me. And I then went about my business. I was always a sensitive soul but I always went about making sure everybody else was alright. So, and like, overcompensating, I think, for that. And never really being able to articulate what was actually going on for</p>	1.15-4.31

	<p>me. And, thankfully, I've always had a bond with animals. Animals have continued to save my life. And I spoke to the animals. And I was fortunate to have horses growing up. You know, fortunate with that but it was about the bond I had and animals made sense to me, people didn't. But, there was never really room for emotions and feelings. Now, on one respect I have so much respect for my parents. I've not always had an easy relationship with my mum. However, I've always known that I'm unconditionally loved. And for me that's huge."</p>	
4.32	<p>Interviewer asked the respondent about her bond with animals</p>	
4.33	<p>Respondent said she had a close bond with her Airedale dog called Hamish and as a child she had no interest in toys like dolls. And her love animals continued when the family moved to The Borders and the family had some horses and she started riding around the age of five. Through her love for animals she became a veterinary nurse at worked at this profession for a long time. Her love of animals continues to this day. She currently has two cats.</p>	
5.59	<p>Interviewer asks the respondent about the role animals have in helping people with trauma.</p>	
6.07-7.03	<p>"It depends on whether you like animals and nature to start with I guess. But for me, it enabled me to make sense of the world when everything else was really confusing. And that sensitivity knowing it was like conditioned out of me whether right, wrong or indifferent, the old...-Don't be so sensitive or come on pull yourself together. That kind of narrative where I thought that my depth was something to be scared of or there was something wrong with me. But now I understand today that it's probably quite empathetic, empathy rather. And it doesn't confuse me anymore. It's my greatest strength if anything else. But I had to navigate that one as well. And then, you know, throughout later in life, you know, in terms of recovery and stuff. Again animals and nature are always...They're just part of, yeah..."</p>	
7.06	<p>Interviewer asks the respondent if society's attitude towards people who are sensitive have changed.</p>	
7.19	<p>Respondent says she thinks that perhaps society has changed in their attitudes towards sensitivity. But she said she doesn't let this bother her now and doesn't conform because she has tried doing everything that people thought she should do and today she does things for herself and not as others expect of her.</p>	
	<p>"I've been there. I've done all that. I've been everything everybody thought that I should be. And today I try and be my authentic self. Because, you know, pretending, or the mind over matter, or the stiff upper lip, life goes on...You know, that can be quite... quite harming as well in terms of a barrier for seeking or asking for help. And it probably got me into a heck of a lot more problems I would say."</p>	7.45-8.17

8.19	Interviewer asks the respondent what defines who she is.	
	<p>“Me, me today, I am... I am me. I like to... You know, I am a person who today I am in recovery for mental health and also for alcoholism which is chicken or egg; which, all comes part and parcel of the traumas and the characteristic, symptoms. All of that kind of stuff. And I live a simple life today because I have to. I have to keep it simple. I’ve learned through illness that I have to keep it simple in order for me to be able to function today. It’s all about manageability. On a good day. On a bad day that can go out the window. But I still have to bring myself back to the here and now and live in the day.”</p>	8.24-9.18
9.21	Interviewer asks the respondent about her understanding of the term trauma.	
	<p>“I think there’s...I think it can be quite broad. For me, not only did we lose Noel in the circumstances, my actual PTS...Complex PTSD (Post traumatic stress disorder) and trauma actually comes from when my second brother passed away. Which was the result of a house fire and it was me that went home to find it. So, and again, if tragedy was to hit a family once here it was twice. But, again, we still dust ourselves off, get up. The family stability was there. Now, I probably went to the other extreme of I was very highly functioning and achieving. And I wouldn’t have recognised myself as a. vulnerable or b. traumatised. It was just something that I, kind of, lived with and got on with. It took ten years for the...for the trauma to actually develop in the manner that it did. But, until then, you know, I gave up my veterinary. I went on to do...I worked with the young homeless. I then became a project manager working in a residential unit in Manchester or Oldham just outside of there. And kind of understood what it was like to kind of have nothing. But knowing that I still had everything because I had my family. And it was very much...That was probably when...As I say I didn’t...It took me a long time to realise just the significance of both events in my life. Because it had just, you know, been something. But, then when have the diagnosis and, you know, being really, really unwell. I was then able to understand that there was a lot of childhood trauma that...And then there were a lot of layers that went on top of that. And each person’s trauma is individual and important to them. Mine is neither greater nor any worse. If it affects that, you know...for that person then that’s true for them.”</p>	9.26-11.39
11.45	Interviewer asks the respondent her opinion on the main causes of mental illness.	

	<p>"Again, that can be quite broad. It can be a clinical mental health, you know, that can be genetically, physiology, it can be an event from trauma, it can be environmental, it can be educational. It can...You know, I guess it depends on that person's life. Understanding my own mental illness has been somewhat difficult because having to accept that I do have this illness, despite trying everything not to have an illness has at times been quite frustrating. But I've always been committed to recovery. But even... And I think for me in order to live a life that is worth living that's where I have to be centred today. In the solution. I don't like a lot of it. I do feel that the depression, the PTSD and everything else has taken so much from me and left me...Well; sometimes I could say left me with little. But then on the other hand I could say my life is richer today beyond any monetary value. But, it depends, sometimes I can get very frustrated with that because I was so highly achieving and was doing really well. And was...Three and a half years ago I was managing a live music venue after going back to, sort of, education. I was doing that, really, everything was going okay and then stress came into my life again and an accumulation of that tipped the PTSD symptoms back over. And then I got a real understanding. Nine and a half years sober and I picked up a drink. It wasn't planned. One minute I was buying vegetables and the next, you know, it was game over. And I could have lost a lot but what I've learned from that is about dual-diagnosis about having, you know, chicken or egg as they say alcoholism as well. As a binge drinker because I was trying to escape what was going on in my head, the PTSD symptoms, being Lewis's anniversary, December time.. So, I have firework season before that. Usually that calms down. This time it wasn't. So the stresses were there, the people that I was working for were not conducive to my health and wellbeing and I had to, you know, kind of, really look at all of that again. So, it was back to the doctor, back to the Twelve Step Program, back to the professionals. The professionals in Edinburgh did a hand over to the professionals in Glasgow. Back on to medication, all that kind of stuff. Which, most likely my ego was in the way before then because I didn't want to be back on benefits, I didn't want to be... You know, I enjoyed what I was doing although it wasn't necessarily the profession that I had picked; I was happy enough to do that. And then, you know, sort of, becoming unwell again.. to having that acceptance and acknowledgement about that. Thankfully I was able to access more treatment."</p>	11.51-15.14
15.15	Interviewer asks the respondent if she had previously been diagnosed.	
	<p>"I was living and working in Manchester and it was the end of 2009 when I became really, really unwell. I, kind of, went to the doctor with migraines and insomnia and came out with a heck of a lot more. And I just thought I would maybe be off for a few weeks, a few months and then I would be back. But, as time went on I became really, like, really unwell. And I was going through the assessment process with the psychiatry crisis team in Manchester. And then, I was like-I just can't cope. So again, that family stability was there which allowed me to come back to Scotland to my parents which are...They're on the Fife coast. And I returned in the March of 2010. And that's when the psychiatrist in Manchester had heard of The River</p>	15.19-19.04

	<p>Centre in Edinburgh which was a centre of excellence for trauma. And I am so fortunate that I was accessed into them because they absolutely saved my life to this day, you know, they have just gone above and beyond. And yeah, I was with them probably for about four years. One of those years I had a horrendous wait. My symptoms were just...just off the wall, but they were...they were able to support me through that. And then we did some arts as therapies and that was like-I can't paint. But that wasn't the point of it. But, I enjoyed that because it did help to alleviate some of the symptoms. And then my trauma treatment started. And I have had a whole multi-disciplinary approach to all that. So from the EMDR (Eye Movement Desensitisation and Reprocessing) treatment that maybe wasn't so successful. And that's when they were able to diagnose the Complex PTSD because it had been prolonged and chronic. And that's when they did a...you know between CBT (Cognitive Behavioural Therapy) DBT (Dialectical Behavioural Therapy) the EMDR everything. And they realised that I have residual symptoms that no amount of treatment is going to shift. So, that was a biggie. And I was with them, like I say, for one to one every week for about three years and they really did...And then I've had contact with them throughout the years when, maybe, certain situations arose or something came up I was still able to be in touch with them. And they were fantastic. And then in the last, sort of, few years I'd got in touch with them again. And then that's when they liaised with Glasgow and they did a full hand over. So, they weren't repeating any work. Cause, it wasn't the trauma...Like, thank fully the psychologist/doctor in Glasgow had obviously seen...And it wasn't...Sometimes it wasn't, necessarily, the PTSD. They were quite separate but they were linked. So, I've done a lot of work around the traumatic grief and traumatic death. And, you know, really, kind of, looking at that, sort of, stuff which is part of the PTSD but it's also separate, But, it was continuing to.. Whatever it was doing. Causing me trouble, causing me issues with that so..."</p>	
19.05	<p>Interviewer asks the respondent if the health care professionals introduced traumatic grief as a concept to her.</p>	
	<p>"Well, yes. And I think that I probably came from myself... And because I can rationalise life and death. I get that. But it was the... you know...With having the PTSD and the symptoms that I was experiencing. It's very hard to get away from that. So, although this happened in 1998 and before that in '85 I was never getting any respite from it or any peace within my head. Because I think...And as a child I didn't grieve, you know. So, it was very...It was just matter of fact and, you know, and keep going. And I understand today...You know, I'm grateful that my parents...they didn't just... If our behaviours were not right then we would be told. It wasn't, you know-Oh, dear it's because their brother's died, you know, there was none of that. And I'm grateful for that because, you know, self-pity wasn't an option. Although, the extreme of that. You know, somewhere in the middle would have been quite pleasant but hey...But, I also understand that my parents were doing their best. And have continued to do their best. And my much...two younger brothers...None of us missed out on a childhood because of it. You know, and that is, really,</p>	19.13-23.15

	<p>where I can see that. So yeah. So that was sort of...Because I was going from different anniversaries at different times. And for me, as I said, the firework season was difficult and that leads into Noel's birthday which is in November which then leads into Lewis's anniversary which is December. And that kind of... and then his anniversary or his birthday in the February. And then Noel's anniversary in the April. So, I felt there was six months of the year where I was just, I don't know, going along a tight rope I guess. Or, it was like one thing to the next. I wasn't really living my life in the middle of that. But, I didn't know how to overcome that. And that was the where then...Where the depression would...And I would just feel quite a totality of- this is it. You know. So, thankfully, the professionals identified that and I was willing to do the work. And I was willing to you know...Because I just want...I do... that is what I've said all along. I just want peace. I just want contentment and peace. And to be able to have some sort of peace of mind today or peace in my own mind is something that I've managed to gain. Not all the time but by managing my life I'm able to function within that...And I'm not as self-loathing, self-despairing and self-hating. And, you know, and understanding that this was an external thing. Things that have happened...But, it's an internal job because times that I've thought-I'm besieged by the Devil or some kind of...You know, something going on. And, again, The River Centre were phenomenal with being able to do that. And Brand Street in Glasgow but I do owe my life to The River Centre absolutely. Because I did go towards the edge. I did end up in a mental hospital. Because I wanted peace in my head and I wasn't getting it. And, you know, I always said I would never cross the line with something because of my family and I did. And, again, sort of having to realise, you know, that my life was for living. Is for living. And that I had to get busy living because dying clearly wasn't an option."</p>	
23.16	Interviewer asks the respondent about mental health care as an inpatient in hospital.	
	<p>"For me to gain my own, kind of reducing stigma I called it my NHS summer retreat. Which was you know...Which was far from that. However, I did feel safe in that period of time. I think I was in for about two weeks. What I'd put my family through...But I didn't... I couldn't hold on to it as guilt because it wasn't guilt. I was just really, really unwell. My insomnia was like crazy. I was crazy as in my routine wasn't back to front. I was awake six or seven days at a time. And my insomnia was my... probably one of my biggest, biggest symptoms that plagued me for years; about five years in total. And even after treatment and stuff, any particular week, I would have forty eight hours of being awake. No real pattern to it but I would be awake. And it wasn't routine but I was awake. I couldn't have sleep aids because they wired me to the moon. They also don't recommend that within trauma patients and that's again where the River Centre were amazing. And I was put on to a drug that was off-licence. It was on a trial. Anyway, it helps with the REM (Rapid Eye Movement) part of your sleep and, again, that saved my life. Because it wasn't necessarily... If I was only getting one or two hours which was the norm at the time. Any more than three I was either having nightmares or I was just awake. So what that allowed was the REM part of</p>	23.35-27.39

	<p>my sleep. So I was able to...The quality of my sleep was improving. Therefore the quality of my life was a little bit better. Wasn't so debilitating. Fatigue, lethargy all the rest of it...And so, yeah, that, kind of, subsided about four years ago now. Touch wood...Yeah, I get periods of it but I wouldn't say I suffer from insomnia today. You know. But, the particular drug that I was on did help with that. Because, it wasn't mind altering. It was to do with lowering the blood pressure and to do with why it helps the REM sleep. But, it sure did help. And the hospital were... I don't know, it was very institutionalised. It was a conveyor belt. It just, you know...I don't think...I didn't...Because I was under The River Centre in Edinburgh. I...They were, they were...Like, they were just keeping me there. But, I was there for about three weeks and I didn't need to be there any longer but I was worried about going out because I felt safer in there. But, I also realised that that would probably be quite reactive rather than proactive. And, yes, it was another defining moment in my, kind of, recovery and I...The professionals and others didn't necessarily see it...I can be quite...With things I can take so much and then it would be-that's it, that's it, off. Or, you know, quite instant. That wasn't necessarily like pre-planning. It was just like- no. I've had enough of all this now. I just want peace in my head. And I'm going to try and seek it. Of sane mind I would know that those things that I was seeking out wouldn't achieve that. But I was just that desperate and I was just driven, as I say, absolutely to the brink. And I just wanted the symptoms to stop."</p>	
27.44-	Interviewer asks the respondent about how The River Centre helped.	
	<p>"Oh, well and truly (The River Centre, Edinburgh). Well, first of all the diagnosis and the team there with the psychiatry and the psychologists. And the person that I was very fortunate to have most of my treatment with was Gill Moreton and she just happened to be the lead person on blue responders. On your fire safety and all that. So, she was very good in terms of understanding. I felt listened. I felt that I wasn't like...they totally got what I was saying. I wasn't trying to explain it or that it was this fictitious thing or it was...You know... these things were very real. And I did know that a lot of what I had been experiencing for all those years was the manifestation of the PTSD or the Complex PTSD. And they listened and then they were able to support me the best way that they could. So, the years waiting from when I'd had assessment until the actual treatment I'd say that was difficult. But they tried their best one hundred percent. And they also did like an information sort of how to manage your symptoms in the meantime sort of thing or an awareness of that. They were... Yeah, they just...And quite...And quite maybe externally with either my work in Manchester the organisation I was with...Occupational therapy, going all through those things...A lot of people didn't get it but I realised that that's ok because I don't necessarily get it myself so I don't expect others to get it. But do you know what between me and the hospital they get it. So I'm alright with that. And I'm going to listen to the professionals not listen to other people's maybe opinion and-'you don't need to be talking about that. It's all in your head.' That's the problem. That there that is the problem I can't just escape it. I can't just get over it. I can't just do something about it. I've been trying to do that for as long as I've been</p>	27.48-29.56

	trying to do that. And it just wasn't working."	
30.00	Interviewer asks the respondent about society's attitude towards grief.	
	<p>"Yeah, I think, again, It's a personal thing. Again, I'm not... I wouldn't put anybody's grief any lesser or any greater. It's still grief to that person. However, understanding the enormity and how tragically both my brothers had died was something that I really had, to kind, of look at the enormity of that. And as life has gone on I realise that is quite a unique story. But, I didn't realise, maybe, how unique. But that's not meaning that I have terminal uniqueness either. And a lot of...Yeah, a lot of times people have mistaken... Because I'm what I describe as a civilian with trauma. Rightly or wrongly people sometimes assume that I've been in the armed forces. Or that I've been a...Or, that I'm a survivor of some sort of abuse. And then it's explaining sometimes that -Oh, no it's not those but yet the symptoms are the same. So, the actual condition, you know, the symptoms that you experience...So, you can take the story out of it but you still have the universal symptoms for everybody. I think there's more discussion these days about these sort of things. Or, You know, sometimes you would hear somebody say-'Oh, they've not been right since their mum's died. Or, not been right since forever. And I think there's so much in society to...Like, I've had to eliminate the words like could, should and would out of my dictionary. Cause that just puts myself under more pressure. Shoulda, woulda, coulda....You know. It's just like, nup that's not helpful for me today. Because that can be something that I would probably pick up the bat and hit myself with, you know. And then, I wouldn't place on how or what people you know...when to deal with grief. I found myself with the traumatic element to both was difficult because I wasn't able to rationalise it, I wasn't able to...I could understand the grief part or the death part. But, the actual circumstances...I couldn't just get on. Whereas if I was, maybe, to relate that with my grandmother that's passed away or, more recently, a friend that's passed away through illness. I can conceptualise that a lot better. Whereas sometimes I'm not able to necessarily do that. Or, I've not been able to do that."</p>	30.19-33.07
33.13	Interviewer asks the respondent if she has ever felt stigmatised by her mental health issues.	
33.21	Respondent said she was absolutely stigmatised by the benefits system and goes on to describe being refused benefits unfairly and how she was told if she appealed it would be overturned. It took a toll on her mental health.	
38.11	Interviewer asks the respondent if she thinks that there were any prejudices against people when seeking helping for their mental health issues.	
38.29	Respondent said she has been fortunate with experiences with GP and her own understanding of her issues. She points out that without disrespect to other services the threshold with some services is to treat you as if you are stupid and if you prove otherwise they don't know what to do with you.	
40.10	Interviewer asks the respondent about arts as therapy at The River Centre.	

	<p>“The arts as the therapy (in The River Centre, Edinburgh). I think they had a student who was on placement. And, you know, it was about, sort of, doing that. And at that stage I would have been quite happy if you’d of told me to hop on one leg because it would improve my symptoms. I would have done it. And that was...that really helped. And what, actually, was produced out of that I was quite surprised at. One from embracing the inner child... I was like...just looked at this sandpit-I just want to put my hands in it. Do you know what? I want to go back at nursery. I want to put my hands in paint. ‘Go on then.’ So, it was having permission to do that. And then some other stuff that came out of the usage of both my hands into painting of some description. Or, you know, that kind of stuff. Yeah, it was very powerful. Very powerful. And it really did help whilst I was on the wait and things were really bad.”</p>	40.24-41.32
41.34	<p>Interviewer asks the respondent if she has looked for any other community support.</p>	
	<p>“Now I’m in Glasgow I’ve been involved with something called NHS Restart and I’m part of a writing group which hopefully is going to become more peer led. So, a group within a group. I think that’s, kind of, in the motions right now when we’ve done some stuff with a playwright called John Binnie. And we’ve done two, sort of, performances but quite different. Which was really...Which has been brilliant. And I’m also a peer mental health mentor. Yes, peer mental health mentor. And I’m currently one of the volunteers that facilitate the peer mentor training. And, again, at NHS Restart I think there’s a lot of things, kind of, opening up around where that peer stuff sits within Restart which is quite exciting. So, I’m currently in the transition from service user to volunteer.”</p>	41.38-42.47
42.52	<p>Interviewer asks the respondent her opinion about the benefits of peer support regarding mental health.</p>	
	<p>“I think it’s paramount (peer support). You know it really is because when I was referred to Restart (NHS creative writing programme) was through the CPN (Community Psychiatric Nurse) but I had to ask them. That was another kind of shambles in itself because one CPN left to go somewhere else then I was left with nobody. And then that was...Yeah... that continued for quite a few months. So, I then said to the CPN at the time-‘I need some form of meaningful occupation here. You know, I’ve gone from achieving and doing again to like nothing. And now I’m feeling very stuck. And very what is actually going on?’ And then the referral was made for me. And then I was...I went to the writing group and I met a few others there. And it was the first time in my recovery that I actually felt-This lot get it they get it. You know you didn’t necessarily have to say your condition or what’s going on for you or what you’re...You know just knowing that everyone was under that particular umbrella for a mental health condition. That that in itself was empowering. Like I say we didn’t need to know ins and outs. But, just saying if you were able to say- Oh, I’m having a bad day. Then nine times out of ten people would be able to see that and go-Yeah we know what a bad day’s like</p>	42.55-45.20

	<p>regardless. And then from the writing group a lot came out of that because in the manner that, that yeah...And then not only have you been able to peer within that, you know, sometimes you can actually go on to have friendships with people within that as well. You know that's just a bonus. Because you know understanding that people are there...And there's different...Folks are at different stages in their recovery as well. But, just having the common denominator being mental health. And knowing that you're there because you want to have a better life. That you want to be part of recovery. You know, that you're seeing that. That has been truly, truly something that I've ,yeah, really thrived from I guess."</p>	
45.21	<p>Interviewer asks the respondent if she started in the writers' group after the Covid pandemic.</p>	
45.22	<p>Respondent said she had been referred to the writing group at the start of the pandemic and received a telephone call saying you've been referred to us but we're shut down. The first time she attended was in November then she caught Covid herself. This was followed by online contact through zoom and teams with a catch up once a week . Respondent felt it was important that the weekly contact was maintained throughout the pandemic, it was a lifeline. Now the group is back working within the restrictions. She had one to one through the pandemic with Brand Street and also had 24/7 access to the AA through zoom. She was grateful to have had access to these things through the pandemic.</p>	
47.16	<p>Interviewer asks the respondent what sort of things is done in the Restart writers' group.</p>	
	<p>"This is in conjunction with Glasgow Life (The Restart Programme). So, the guy John Binnie, he's a playwright and he believes that everybody has a story to tell. So, the first time we did it which we then did a production at the Euro Fanzone in '21 and that was, like, facilitating a workshop which we'd done through Zoom. Now, we had...The sort of thing John...It was in Covid times so it was, sort of like, the view from your window. So, maybe you would take a picture and then write about it. And it was always like time limited. So, you've got ten minutes to do that. One of my poems or stuff that was up. Or, writing that was up that I opened my window up one day and there was two cruise ships at the end of my street (laughs). Where did they come from? So, I'd written about that. Or, out and about because it was coming up for, kind of, springtime. Some others pictures were used and other people would write about them. And then it went into as part of the artist in residence it went into a booklet. And, so, the workshop john, Tina and Robin did with us... We were performing that on stage but we were reading out some of our own writing if we were able to do so. So, that was huge. And then we were part of The Merchant City Festival this year. Which was a play that we'd written, or, our writings had influenced it for John to write it. And that was phenomenal because it was proper, real, paid Equity actors acting. And it had been our writing. And you could see where the characters had come from. We had a part in it. You know, we were like this...It was set in the Ramshorn</p>	47.25-50.40

	<p>Cemetery and we were the ghost chorus. But, it had all been our, kind of, stuff. And that was, that was quite profound. Cause I thought...Of course he's doing his job. But I thought-Isn't he nice, Isn't he pleasant. So kind to us all. But, no, no. It was true. We did actually do a lot of the work which allowed him to then go and write it with NHS Restart and also a writers' group. An elderly writers' group in Castlemilk. So, again, this was through Glasgow Life. And then we were at The Merchant City Festival for the few days that was on for that whole week. And that was great. And what was also good about that was there was six of us from Restart and, again, John was very good at encompassing everybody. So, even if you didn't want to be in it you were still...You know, you came along. But, some of those conversations that happened outwith of that about recovery or about getting to know people a little bit more. That...It was really powerful. It was really special. Cause all what...I think, most of us that are within that group, all we want is for everyone to get well and stay well. You know, we're not interested in any of the dynamics other than- this is what we're here for. And we've all got a responsibility towards that."</p>	
50.41	<p>Interviewer asks the respondent if the publications can be accessed by the public.</p>	
50.50	<p>Respondent replies that she is sure that Glasgow Life will have something about that. They did a booklet last year and there is a postcard project. She hopes the group will continue. She says that the group is called NHS Restart writers' group at the moment. It's based in Bridgeton. She reiterates how powerful having their work performed by professional actors was for everyone.</p>	
53.19	<p>Interviewer asks the respondent if she thinks there has been any long term impact on her family and friends as a result of the trauma.</p>	
53.27	<p>Respondent replies that her parents cope the way that they cope. She is very open about what happened with her younger brothers. She has good friends from all over the country and a partner.</p>	
58.38	<p>Interviewer asked the respondent if she believes there is a cure for mental health illness</p>	
	<p>"Is there a cure? It's a broad spectrum. It depends on the condition. Cause, see, I have always been committed to recovery. But I also as I've moved along on my own journey, not everybody is. There's a lot of people In terms of what model you're using if you're using the medical model their objective is quite different to something being holistic. If it's just about managing somebody's symptoms then they're not necessarily looking at treatment and recovery. But sometimes people can't get beyond that because they are so unwell. So, it's about- Well, is there any scope there for any stability to then be able to look at the primary cause of what's actually the underlying all of that. And I think is more people had the hope for knowing that recovery can be anything for what it means to you. Recovery for me today means that I can get up out of my bed, I can feed my cats, take my medication, have my</p>	58.44-1.00.52

	<p>coffee, check my levels, get on a bus into town, get two buses , say goodbye to the cats and get here. That's what recovery can look like. It can be a simple thing. To be part of today rather than less than I think is also big. But not everybody has those...that access or not everybody can articulate sometimes what's wrong with them. Or they don't know or they're so caught up in the illness and the symptoms they don't necessarily see that recovery is possible. Yeah, recovery might not be what my perception of what recovery should be. However, I am where my feet are today on the stepping stones. I don't necessarily know what that looks like but I know that I'm stepping along the way, hopefully."</p>	
	<p>Interviewer asks the respondent about the lessons she has learned that she would like to pass on to others.</p>	
1.00.47	<p>"I think the more people go forward into their trauma informed approach. I think it is going to be much better. But, also, that recovery is possible. Ok, I'm not doing what I used to do but I don't need to be. Because the quality of my life today is the most important. I'm able to have a relationship, you know, with friends, with family and, you know, and feel that I am worthy of that today. Trauma doesn't define me. There are incidents in my life where trauma has influenced a heck a lot of my life. But, today it doesn't control me. It doesn't paralyse me today. It doesn't paralyse me in fear. Of course I get fear. Of course there's things I have to look out for. Of course there's things that I'm never going to be able to do. But that's ok. Because there's a heck of a lot of things that I can do."</p>	1.01.01-1.02.03
1.02.06	<p>Interviewer asks the respondent if there are any objects or songs which remind her of her journey through trauma.</p>	
1.02.13	<p>Respondent replies that music has always been a big thing for her and that her tastes are eclectic. She mentions a song called I Don't Feel Amazing now by the Guillemots as having particular significance. Also songs that are relevant to the era the traumas happened.</p>	
1.02.54	<p>Interviewer asks what word the respondent would use to describe her experiences with mental health if any.</p>	
1.03.31	<p>Respondent replies that there is the word fear which is f everything and run away or f everything and recover. She says that she doesn't think it can be encompassed in one word. She says it's a journey for sure.</p>	
1.03.52	<p>Interviewer asks the respondent about her hopes for the future.</p>	
	<p>"Continue to live a day at a time with my health and wellbeing being part of that. Knowing that life gets in the way of life and it's how I respond to that or within that. And as I say a stepping stone onto other things with the peer mentoring and hopefully in the next few years that may actually come to some sort of paid work again. Because I do know that I have got a transferable skill-set from a lot of stuff that I've done. But I'm also very aware of my capabilities today and, again, the manageability with that. So, becoming a peer mentor volunteer is something that the next part of my</p>	1.03.57-104.46

	journey.”	
	Interviewer thanked the respondent for sharing her memories with the project.	
