



Dundee Service User Network

Independent Inquiry into NHS Tayside Mental Health Services

100 people in total participated in focus groups

10 focus groups were held

42 men participated in focus groups

58 women participated in focus groups

16 ethnic minority women participated in a focus group

Thank you to all of the organisations that allowed focus groups to be facilitated by Lynsey McCallum (Co-ordinator of Dundee Service User Network)

Dundee Association for Mental Health (DAMH) x2

Lochee Hub x2

Chrysalis (SAMH)

Hearing Voices Network

Dundee SUN Drop In x2

Rainbow House Drop In (Health Minds East End Network)

Dundee International Women's Centre

Amina

Themes	
Awareness	People in our communities need to know what is out there in terms of mental health services and supports. People have expressed a lack of awareness of where to go for help with their mental health and distress when they need it
	Professionals need increased knowledge of what mental health services and supports are available in Dundee and how to make referrals and to sign post appropriately
	GPs need to be proactive in making referrals to mental health services. For example, psychological services, talking therapies, CAMHS and community mental health groups.
	GPs need to be knowledgeable about the full range of mental health services and supports available in Dundee. Including, third sector mental health organisations and support groups. GPs are the first point of contact and should help people to make connections by giving them the appropriate information and making referrals
Waiting Times	Waiting times for appointments are too long and people can deteriorate while waiting. “It adds to the sense of hopelessness”
	It would be helpful for people to be linked with help or support, while waiting long periods for appointments
	People want shorter waiting times for appointments
Substance Misuse	Some people who use substances have reported stigma from professionals “they only see the addiction” and assume that people want access to more medication rather than help with their mental health and distress
	Some people who take methadone and other substances said they have been actively denied access to mental health services
	Mental health is often overlooked when people are taking methadone and or other substances
	Trauma and its impact over the life course is often overlooked when substances are involved

	Mental Health Services and Substance Use Services need to find better ways of working together to treat the whole person
	People self-medicate in the absence of meaningful help and support with mental health and distress
Information	There needs to be clear pathways for mental health services widely available
	Existing information resources, need to be pulled together and made widely available
	There is not enough promotion of current, existing services
	People should be able to access information in a variety of ways, not just online. Not everyone has access to technology or knows how to use it
Resources	There needs to be more mental health supports for people in communities. In particular, to benefit those who face barriers to accessing mental health services and supports
	There needs to be more paid and unpaid mental health and substance use peer support roles created in Dundee. Clear pathways for peer support are required to progress this
	People would like to see mental health nurses do locality based working in the form of drop ins. Taking place in a variety of community venues; such as hubs, community centres and third sector mental health organisations. Nurses could give people practical information and support and make referrals
	Mental Health community drop ins are valued as you don't need to wait long periods for appointments and don't have a complicated referral process eg: DAMH, HVN, Dundee SUN
	Dundee needs a 24/7 safe place, which can be a crisis centre. This could serve people in distress, who may be suicidal
	People would like more opportunities for support and social activities during evenings and weekends. People recognise that social isolation contributes to poor mental health

	People have identified a lack of help and support out of hours. It is difficult to get any help or support in the evening and weekends
	There are major staff shortages in mental health services. Including; psychiatrists, nurses, community nurses and psychologists. There is a high use of locums, which means people do not experience continuity of care and have to tell their story over and over again
	We need more access to psychological therapies, talking therapies, CBT and psychotherapies. People identified that this may prevent people from becoming more acutely unwell
GPs and surgeries	GPs should have additional mental health training
	People want a mental health nurse or mental health specialist attached to each GP practice or a small cluster of GPs within a locality area
	There have been GP surgery closures in Dundee and surgeries are running short staffed. GPs are struggling to meet demand, which means long waits of up to 3 weeks for GP appointments
	People have said it feels like a postcode lottery for access to services. People have highlighted an inconsistent approach to GP surgeries in relation to booking appointments. In some GP practices, you can pre-book appointments, but in most, you can't. In some practices, you can book online. Some do a drop in. Some you have to call in the morning for an appointment and when the appointments are gone, you need to try again the next day. Where you live determines the service you receive
	GPs tend to give you medication, rather than link you with mental health support. GPs should make more referrals to psychological and talking therapies
Services lacking empathy	People feel that there is a lack of empathy in mental health services. In particular, clinical mental health services and crisis response
	People want to be treated with respect and dignity
	People want a caring compassionate response
	People want to be listened to non-judgementally

	People identified with the challenges faced by nurses and other mental health professionals due to staff shortages. People felt that staff morale is likely very low. People felt this might impact job satisfaction and could translate to a lack of empathy, poorer quality of care and complacency in interactions with patients
Early Intervention and prevention	Children and young people need timely access to mental health services and supports
	Children and young people should not be turned away from CAMHS. Particularly, without a proper assessment of the child or young person
	Mental health awareness raising is required to normalise mental health and reduce stigma. This should happen in nurseries and schools
	Mental health awareness and training should be mandatory for school teachers, nursery staff and early years practitioners
	There should be mental health training and awareness raising widely available for everyone in our communities to access
	People need timely access psychological therapies, CBT and talking therapies. This may prevent people from becoming more acutely unwell
	Mental health awareness raising within ethnic minority communities is required. In order to reduce stigma surrounding mental ill health. Mental health is not discussed, carries stigma and is a taboo subject in the Asian and South Asian community
	Isolation in older ethnic minority population is predisposing them to mental health conditions. Some intervention in relation to this would be welcome
Language barriers	People have identified communication barriers with nursing staff at Carseview. When English is not the first language of the nursing staff
	There needs to be adequate access to translators in GP and other health appointments. When English is not the first language of the patient. Family members should not be used to translate in appointments due to confidentiality
	It would be very helpful to have confidential, culturally sensitive counselling and mental health services

	specifically within the ethnic minority community. People want to have access to psychological therapies, CBT and counselling in their own language. In this instance, Asian and South Asian
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Independent Inquiry in to NHS Tayside Mental Health Services Focus Groups

Focus Group Lochee Hub 19.09.18 8 participants (2 female, 6 males)

What are the challenges facing someone trying to access mental health support and what needs to change?

Speaking up and finding the right help at the right time.

Trying to get past the receptionist in the GP surgery to even get an appointment is really hard

The language barriers of nurses in Carseview is an issue. My friend who is really quite ill was discharged from Carseview hospital when he should not have been. A Polish nurse could not understand him when he was talking normally in his Dundonian accent. When he said he lived in a "closie" among other things, the nurse just couldn't understand him. Maybe they should have got translators in for the nurse if she could not understand patients well enough. The nurse was obviously frustrated by the communication difficulties and she just turned it around that he, the patient, was doing things wrong or not being compliant. This is really wrong. This was not the case, she couldn't understand him, it's not that he was not being compliant.

I know the guy who cut the woman's hand off in the Charleston area of Dundee some months ago. He is mentally unwell. He tried to get help with his mental health but services didn't help him when he needed it. They actually failed him and someone else got seriously hurt. That Carseview are useless. They didn't help him at all. He was looking for medication to medicate himself and actually help himself. That's why he was at that women's house, she had a lot of medication, but not mental health medication. She had physical health medication as she didn't keep well. I think she was diabetic or had heart problems and stuff. So, when he couldn't get the medication off her, he was that unwell and agitated, he cut off her hand. Now, if he had got the help that he clearly needed, that poor woman would still have her hand and that wouldn't have happened.

There should be more information about mental health available for normal people, for professionals and more. People need to know what help and support they can get. Clinical and informal support. Workers need to know how to refer people for help.

Mental health and other professionals need to know what is out there in Dundee. What are the referral pathways? What groups there are available in the community.

Staff need to be able to access continuing professional development and training. This should be financed by the health board and not self-financed. Mental health workers of all kinds need to be able to keep up with the latest advancements as well as refreshing existing skills that can become complacent over time. Staff must be quite bogged down with all the shortages. Morale is probably quite low and nurses probably don't feel valued. They might feel like they are being invested in, if they can get time to do more training.

You are treated differently if you are on Methadone. You just can't get access to mental health services at all. You are completely written off from getting any kind of mental health treatment. They just think you want more drugs.

The waiting times are a huge issue. It adds to the sense of hopelessness. It stops people from seeking talking therapies and counselling because what do they do in the mean time? There should be something that can be offered, some kind of informal support or groups while people wait. Something is better than nothing at all.

If people do want quick and easy access they need to pay for it privately, but this is out of reach for most people in Dundee. There is a lot of poverty and social problems in Dundee.

People get shoved from pillar to post. No real communication or help between anybody. It is a case of get them out of here and off our hands. Especially if you are on methadone or self-medicate with other drugs or alcohol. They don't want anything to do with you, even if you are suicidal

Mental health services are not advertised well enough. People don't know what help they can get.

I have been sanctioned and pressured into getting a job. I have HIV, Hep C and I have extremely poor mental health. I lost my wife less than

a year ago. All of this is making me feel suicidal. No one, no worker has tried to talk to me about my mental health, even though I'm suicidal. It is pretty obvious, with all I have got going on that my mental health is really bad. That TSMS or ISMS or whatever it is called now are not interested. I'm not entitled to any help, because I'm an addict. I have got to take lots of medication because of my HIV and Hep C. They can give you medication for other illnesses if you are an addict, but not your mental health. It is madness. It is someone I need to talk to, not more tablets. The medications are knocking hell out of me.

People say they will get back to you but they never do. There is no follow up.

You can mention you are struggling with your mental health to your support worker at TSMS but they don't do anything about it. They don't even mention it again if you don't. They don't really want you to be sharing with them if you are struggling with your mental health. They are not interested. They don't want involved, but they also don't tell you where you can get help. I don't think there is any help with your mental health if you are on methadone

You need to keep telling your story over and over again, which is horrible and still no help. Can you imagine what it feels like, to tell people how bad you feel mentally and for it to make no difference. They think you just want more drugs. It makes you feel like you are worthless, like you don't matter, like you don't deserve help and that you deserve to feel bad. You are just another junky

People do try to talk to their GP but the practice in Lochee isn't very good.

Social work should be able to spot things and refer people, but they are not doing this. There is no help or guidance about help with mental health

Adult social services should take account of people's mental health issues, especially if acting as someone's support worker. No sign posting is happening

People go and try to go to get help at Carseview but because they are on methadone or drugs they are turned away. I'm not saying that there are no people in Carseview that are addicts or take drugs, because I know there are. But there are still loads of people who need help that are

not getting it. These are the people who go on to make attempts on their life

There is no analysis for why people are using drugs. What is going on in Dundee that we have the amount drug users that we do? What is going on that we have the highest number of drugs deaths in Europe? That's how we have got that drugs commission in Dundee just now. Things have been allowed to get this bad. It didn't happen overnight. The rot has been allowed to set in.

Even when you speak out and tell people you are feeling suicidal, this still does not result in any type of support

Not enough informal support groups for people. Is there even any groups in the community for mental health, for addicts? You might not get into mental health groups for normal people.

Your mental health is totally overlooked if you are an addict

In the Lochee doctor's surgery, they won't examine you, even when they should

If you on methadone or using substances, they look at you like that is what you are there for. They only see the addiction. They do not try to connect you with any mental health support. They just think you are there trying to get 'vallies' or opiate painkillers off them

We don't have any place that is easy to access for mental health support

When seeking support for mental health, they just tell you it is drug induced psychosis. But 9 times out of 10 the person has suffered trauma in the past. Why does no one try to help you deal with the trauma, you'd maybe actually have a chance of getting off drugs if you got help

It is like you are getting flung from pillar to post. Nobody knows what to do with you

When you use again, your problems are solved, because you are not getting helped elsewhere. So you are actually self-medicating

The time span between going to asking for these services and anything happening is far too long. I waited from Christmas time to September for a CPN. I met my new CPN last week and I had to fight for it. During this time, I had a relapse in April whilst waiting for help.

I was supposed to get help from TSMS telling them I had relapsed in April but didn't start getting help till the end of August. If had got that help when I needed it, I would have been sorted out back in May. Having to wait cost me about £8k - £9k but emotionally and physically it cost me far more than £8k – £9k.

A 16 year old waiting 6 months for counselling is no use. They are at a crucial development stage in life. Time is of the essence; long waiting times can have detrimental effects on anyone and in particular, young people. Including fatal ones. If you don't get help with your mental health when you're young, you are going to go on to have mental problems when you are older, for sure.

There is not enough help out there. My sister had to put her husband in to Carseview to get help and he was coming off alcohol.

All you can do is go to your GP and then you are stuck on a long waiting list deteriorating the whole time

There are 3 or 4 GP surgeries shut down in Dundee. How can people access help and support if they don't even have a GP? This is kinda where you need to start I think. With your GP

The use of locums in Dundee is ridiculous. People have to tell their story over and over, there is no continuity of care and it is far too expensive and taxing on our health budgets. We should stop paying locums such high wages

What works well and what services are valued?

An active mind is a healthy mind

Addaction is a valued service, if feels like the staff care about you

The mental health drop in (Dundee SUN) at the hub is valued. We know more about some of the things out there in mental health and Lynsey gets your voice heard. We need that, people in positions of power need to start listening to normal people and people who experience problems

SAMH are very good, they give some 1:1 support in your own home. This helps the families of those affected by mental ill health

The police are more empathic and respectful than mental health nurses and psychiatrists

The housing and ASBO team are getting a bit better

It is hard to say, most people who come to the hub are engaged with substance use services. This means that they are not likely receiving any on-going help or support with their mental health. ISMS are not able to handle the work load that Addaction were dealing with before. ISMS are not giving people help with their mental health, despite having mental health professionals attached to that service. Addaction are a valued service because they actually try and help and support people. It seems Addaction try to make sure that people have support in place, in comparison to ISMS over the years.

The walking football group are a valued group. We are on the road map to recovery. It is set up for people with mental health problems. You don't have to jump through hoops to access this group.

Community health teams. The fact they have people engaging out in the community is very valuable. It has to happen a lot more, not enough of this is happening.

Mental health practitioners, such as nurses, psychologists should try working in the community, in community hubs and drop ins. Go where people who have need and face barriers to accessing mental health services are. People wouldn't need a referral if it was a drop in style.

When people who have multiple health issues (such as using substances, physical health problems and mental health problems) go to the GP to discuss their mental health and wellbeing, they are not being taken seriously by their GP. Even if they specifically tell the GP about poor mental health and ask for help or to access any type of therapies. People, feel like they are actually being judged by their GP and not linked with services.

GPs need additional mental health training. They are not specialised in mental health. It seems they often do not know what mental health services in Tayside look like.

What kind of support is missing?

In services, there should be more peer support, people helping you that have been in your shoes

Personal and life experience are valuable, and can help others get on a recovery journey. There is more of a connection. You can find out what

helped them on their recovery journey and it's just easier to speak to people if there have been there

More funding for both clinical service and community services. But, I would say, more money needs to be spent on community mental health services. There is more people with mental health problems in the community than in Carseview

There is not enough help out there for families and carers of those with mental health issues. People don't know where to go to get this help.

Help with getting people into gyms as keeping active and physically well promotes positive mental wellbeing. More people should get access to the gym, like a prescription. A gym membership on prescription

Get people into walking football

ISMS which was TSMS do not have good communication with their service users. They are meant to be support workers but don't listen to what people are asking for. People just can't access the mental health support even within that service. They just put peoples Methadone dose up. This is not helpful. That's just killing you at the end of the day, upping your dose. Either that, or you kill yourself by accidental over dose or suicide. It feels like that is what society wants, drug users to just die off

For people coming out of prison, you have got to jump through too many hoops to get any help. People need mentoring when they get out of prison or you are at great risk of going back in again

There are a lot of people in prison who just shouldn't be there as they are mentally not right. They should be in a mental health hospital

Dundee needs its own rehab centre to bring people off drugs. People are asking for detoxes and not getting them. That's how you have got people getting themselves the jail. To get on a detox programme. But then you have got people who have just been cut off their methadone by TSMS and start using again because they are rattling and its gonna be months and months to try and get back on a script. So then you have got people getting themselves the jail to get back on to a stable drug programme. It pretty bad what's going on in Dundee. That must be how there are so many drugs deaths. People getting cut off their methadone and going back to using full time and injecting. They are not used to it

after being on methadone. Their body can't handle it so they overdose and die.

There are no clear pathways for people into clinical mental health services and community mental health services.

People should just need to pick up the phone and get help easily. It should be as simple as that

In the absence of help, support, services, therapies, all there is, is medication. People are often over medicated and under supported.

People need positive encouragement from support workers at ISMS to engage with services. This does not happen.

Gym memberships should be given on prescription. A lot of people can't afford but could benefit from it. Poverty is really bad in Dundee

There could be a mental health nurse that comes in to hubs and other community centres. It is in these places nurses might come across people with mental health challenges who face so many barriers to getting any kind of support with their mental health. People could see the nurse and get advice, and could be referred into services or support.

All kinds of support. There is no support if you are on methadone

I would like to see people not being ignored for a change

I want to have more people who have got life experience, who have got mental health challenges and have used drugs. These are the people who can help to plug the gaps in services.

More mental health support groups for people who face barriers to accessing mental health services.

If it wasn't for some of the groups of people running groups, like the walking football, more people will have committed suicide.

Dundee Association for Mental Health (DAMH) Focus group

19th September 8 Participants (8 males)

What are the challenges facing someone trying to access mental health support and what needs to change?

Phoning up and trying to get appointments is difficult. You need to go through many people before you get anywhere

Having the confidence to get out the house to speak to the right people, It's difficult if you don't know who to talk to. Most people don't know who to talk to

Taking the first step, is quite hard. Getting an appointment with your GP to take the first step is even harder. There is a real problem in Dundee's GP surgeries at the moment. They are struggling with demand and some are even closed. Many are running short staffed with several doctors down in certain practices.

Waiting lists are terrible. I waited for a long time before I got any support. Things were going ok, but then my wife took seriously ill last year. I couldn't keep up with things I had to do to help her, but there was little understanding or empathy from my CPN about what I was trying to deal with at home. I was actually discharged, there had been some miscommunication somewhere. I shouldn't have been discharged, but this is being investigated presently. Because of all my problems, my GP made a re-referral. I was really struggling with all the issues with my wife being unwell on top of my mental illness.

The receptionists in GP surgeries are a barrier. It's hard to get an appointment. Their manner on the phone is terrible. They shouldn't ask you about your medical information, that needs to be confidential. It's like they are grilling you to see if you deserve an appointment. They come across as quite rude.

There are long waiting lists for mental health services. There are long waiting lists even see my GP. I called this morning and can't see them till the 27th of September. That's 8 days. It's no use at all.

Actually knowing what is out there is a barrier. I had no idea what was out there. After I left Ninewells, someone from first contact team helped

me to get linked in with Dundee Association for Mental Health (DAMH). This has been a good thing for me

Very long waiting times for appointments is a barrier. People can deteriorate even more while waiting to be seen or assessed.

Seeing locum psychiatrists is a huge problem. It seems to affect lots of people in Dundee. You need to tell your story over and over. You are given conflicting information, advice and more.

You need to have a good GP that listens to you, some don't listen. Some don't even look at you when you are talking, they are just typing into their computer. GPs need more mental health training. Mental health is usually not a specialism of a GP in a practice They just tend to give you medication, rather than help you make connections to mental health services and supports

I have seen 7 nurses put down (restrain and take to the floor) 1 person when I was in Carseview. This was unnecessary force to use on 1 person.

Communication is quite poor, someone official needs to help you to make connections. Not just the nurse in your ward. When I was in Ninewells hospital as a patient myself. It was almost a week before anyone told me my sister had been admitted to Carseview. I should have been told sooner.

What works well and what services are valued?

I valued having a CPN, but then that support was withdrawn after 6 months. I still see my psychiatrist. But I wasn't ready for my CPN to be withdrawn. I am not alone in this situation. When support is withdrawn too soon, you are at risk of going backwards again.

I know I'm the minority, but I have had the same CPN and psychiatrist for the last 2 years. Its positive in relation to medication changes as I'm quite sensitive to medication. Continuity of care is very important. You need to build a therapeutic relationship, which can take time

DAMH is valued service. It has a good central location in town. The staff are committed. We are looking forward to the move to the new premises. There are a good selection of groups and they are improving all the time. It is also a good way to meet new people. It is well managed.

Psychological services are valued. However, there are long waiting times. The problem is that it is for a limited amount of time they can work with you. It can take a long time to establish a therapeutic relationship as has already been said. Sometimes, it should be an extended period, for those who could benefit from it. There also needs to be follow up and this doesn't seem to happen.

The first psychologist I saw, he was great. We had a good connection. However, the second time, I just didn't take to it. I have done group Psychology at Dundonald Centre and that was a good experience, that helped a bit.

The veteran's services such as Rosendael and Veterans First Point are great for veterans.

Andy's man club at Tannadice is extremely valued. This is a group for men living with suicidal thoughts. It is on Monday nights at 7pm.

Its only DAMH I have used in the community, but the staff here have been brilliant with me. It's a different, more caring experience

Psychiatric services are needed. Alloway has not been too problematic for me, apart from always seeing locums, which isn't the best. You just cannot get the trust built when it's a different one you see each time you go

GP services are valued, if you get the right type of doctor. One who listens and knows what is out there in the community

The deaf hub is valued

Penumbra are wonderful, they listen to you. They are on your side. They work with carers as well as people with mental health problems.

Dundee Service User Network (Dundee SUN) is a valued service. It's a good way to meet people. You get to sit on committees and in meetings and have a voice and influence. This helps you build confidence and improve your wellbeing. Trying something new, with support, can be an important part of your recovery

Mental health drop ins, like Dundee SUN, DAMH pop in and the Hearing Voices Network are valued. Drop ins are important, you don't need to go through a long waiting list or difficult referral process. You can get help

when you need it. You can just drop in and be with other people, which is important if you are lonely or isolated

Art Angel is valued. They do some really fantastic art projects

The third sector community mental health organisations are all valued, helpful, respectful and empathic. This is what is lacking in statutory mental health organisations.

My stay in Carseview was ok. I didn't have many problems personally. I saw other patients having a bad time there though. It is still awful to see other patients have a horrible time in there. It is horrible seeing people being restrained. It can be frightening watching this happening, it must be awful if it's you who is being restrained.

What kind of support is missing?

Peer support is something that is missing. Peer supporters should be valued, trained and be able to access the wards to speak to patients to help them

A consistent approach across GP services. The GP surgeries in Dundee are doing different things. Some you can book online, some you can't, some you can make a bookable appointment, sometimes you can't, some are doing a drop in, some you need to call that morning. You are experiencing a different service depending on where you live. That's not right. It's a post code lottery for access to health services

There should be more going on at the Tay bridge which is a suicide hot spot in Dundee. There could be an office, or space, where people can go if they are feeling like they want to jump. This has to be manned by people who have had training, not necessarily medical people, but trained people, as interventions have to be safe. There needs to be more signage on the bridge and emergency phones so people can call Samaritans and breathing space or other help lines

There should be a 2 - 4 paid roles for police or mental health trained people to patrol the bridge, 24 hours a day. This could be police or NHS or both. There was a documentary about the Goldengate Bridge in America. It has police who patrol the bridge 24/7 every day. This has dramatically reduced the amount of suicides on the bridge. Why can't we try the same in Dundee. The bridge is regularly closed due to people in distress on the bridge. It's like we only act after the event of someone

going on the bridge. If there were constant police patrols, this would be a preventative measure

It would be helpful if you could self-refer to see psychology, rather than a referral coming from the doctor. Not all doctors seem willing to suggest a psychology referral. It seems most people have to ask to be referred. Some people just aren't forthcoming with their GP

There could be mental health nurses that go around community places, to do drop ins.

Nurses going around mental health drop ins would be invaluable for people who face many barriers to accessing mental health supports. Such as, people who are homeless, people who use drugs, methadone and alcohol

There should be mental health nurses in doctor's surgeries.

There should be mental health specialists in doctor's surgeries, that cover a surgery or a small cluster of GP surgeries. Mental health affects so many people. The numbers of people with poor mental health seem to be increasing

You could perhaps try to model mental health support on other clinics, like diabetics clinics. You are seen every 6 months minimum about your diabetes. This is done in your own GP practice and hospital. There is little to no follow up on your mental health. Perhaps you should see someone every 6 months minimum to hear how you are, review your medication and connect you into other mental health supports in the community, if you need it.

There are major staff shortages in mental health services. There should be more psychiatrists, psychologists, nurses. However, there should also be more peer support roles, and support worker roles. They help you with the more practical ways to recover and can build a good rapport with you. That's important, there is a real lack of empathy and understanding in mental health services.

The pedestrian barriers on the Tay Bridge to stop you crossing the road and making an attempt could be raised if structurally possible. They are not tall enough. On the new Queensferry crossing the barriers are much higher, above head height. This would make it much harder to make suicide attempts from the bridge.

Focus Group at Dundee International Women's Centre with DIWC participants and Amina participants (Ethnic Minority Women)

25th of September 16 participants (16 ethnic minority women)

What are the challenges facing someone trying to access mental health support and what needs to change?

Young people might feel like they can't share much with their parents, this can feel isolating for younger Asians

There are so many young people working in their parents/families shops. They don't get the chance to just be a child and play.

One woman's son was trying to commit suicide. The son was emotionally unstable. The mother had gone to work. The son had asked for something from the mother. She said I will give you it when I come back. When she returned from work, her son was trying to hang himself. He had left a note saying my parents don't have time for me.

There was another Asian family who have had 2 suicides. 2 of the sons have killed themselves. It is not something that gets discussed in the community. Mental health problems and suicide carries stigma. More could be done to address stigma in minority ethnic communities.

Confidentiality is important. People don't want others in the community to know about mental health problems.

Emotional support is hard to find. People can be unwilling to talk about things in case there is any gossip. That is why it is important that there should be professional people that you can talk to. They have to keep things confidential

Because of my mental health issues and depression the last few years. I was able to get help from GP, this was ok. But because of confidentiality issues, I can't talk to anyone from my own family or my community. Mental health carries stigma and is a taboo subject.

Because of my previous life experiences, after my daughter and husband's death, I have depression. I have started on medications. I have had some counselling. In the community Amina and DIWC have been helping me. Community groups help a lot. Community groups help more than clinical mental health services. They can't really understand

what you are saying. The community groups provide some emotional support and allow me to be around other people, which stops you from being so lonely

Some of the women have issues, like housing, living in the family in which you marry, with kids and elderly relatives. It is putting women under so much stress and strain. Women are not finding their own space and independence, by living with family and extended family. Husbands and wives have little space and privacy. This can cause arguments between the husband and wife. Looking after the whole family and the home is a big responsibility and you have little time for yourself as a person

What works well and which services are valued?

In the community Amina, DIWC and Mitchell Street have been helping me. Community groups help a lot. Community groups help more than clinical mental health services. People either don't go to clinical services because of self-stigma or not knowing how to go about getting help with mental health or the language barrier just causes too much problems. The community groups provide some emotional support and allow me to be around other people.

Most people are happy with GP. However, there are communication barriers. Family members attend appointments to translate. This is not a very comfortable experience as it is not confidential. There is no other option. A dependency has been created with family members. There should be more interpreters available for medical appointments. Sometimes relatives who translate for you don't actually tell you exactly what the doctor is saying, they give you their version of it. There have been instances of people not knowing exactly what is wrong with them and what their relatives decide they can know.

DIWC is valued because when we come here, there is someone you can talk to and importantly have someone who is listening to you. They provide information and support in relation to whatever our needs are.

What kind of support is missing?

There should be someone unknown that you can talk to. That you can go and see or phone. If you have something on your mind. You can talk to them because you can't discuss these things with family of the community.

A counselling service specifically within the ethnic minority community. We don't want to talk to people that we know. A professional who will be confidential.

Counselling and CBT or therapies in our own language would be very helpful

We need shelters, for Asian and South Asian women. If there were shelter specifically for Asian and South Asian women, maybe more women would leave bad situations knowing they could get the right kind of support that is meaningful to them

There should be health visitors for older women, who can speak their language. For women, in particular, who can't go out on their own. Many South Asian women are very old. They come here in the 60s. Due to the language barrier they are very isolated. Women are not aware of many community services. I only go out once a week for shopping with my husband. I don't get the chance to speak to many other people

Women are only really aware of DIWC, Amina, Carers Centre and that's it, apart from the GP.

Befriending services would be valued. A befriending service for ethnic minorities, aware of the cultural issues and speaking the language.

A dependency has been created with parents to their children. There should be more interpreters available for medical appointments. Sometimes, their children are not explaining things as best they can. They are explaining what they want their parent/grandparent to know.

There could be a health visitor for older people, someone that they can build a trusting relationship with, who can help to attend appointments and more. This should be a trained person.

Some of the older women are being mistreated at home. For example, when their husbands have passed away. They have no one to talk to. They can be seen as and feel like a burden. Sometimes family are not taking best care of the older generation. Sometimes their physical needs (personal care) as well as mental and emotional needs are not being met by family members. We are finding this is quite a common experience.

Older people can be pushed out in families and the family grows and children are born. Older people are not the priority. They aren't taken to

the hair dressers. They aren't getting much physical contact, like touch. For most older women, if there is a language barrier, who do you tell that your bra is ill fitting or if they need help with cutting their toe nails. Some older people have not had their hair cut for years. As people get older, they find it difficult to express their needs. Because they are made to feel a burden, they don't speak out about these things.

Some women suffer from incontinence, who do they tell?

Women are not aware of their rights. There should be awareness raising of this.

Older people need to know they can have their needs met, not necessarily by family members. There is a big knowledge gap in the community about this.

Isolation is putting people at increased risks of poor physical and mental wellbeing.

There should be awareness raising among the families of isolation and emotional needs. There should also be some awareness raising of what services can come in to support elderly family members.

Healthy weight and healthy diet is lacking. This impacts mental health and wellbeing. Older people may experience more aches and pains if they are overweight. So, someone to raise awareness of this in Asian and South Asian community

We come to DIWC once a week. Perhaps, if there was more funding for more groups to run at DIWC, we would get out of the house more and reduce social isolation and have more emotional support and awareness of what is out there.

We are dependent on our sons giving us money, we don't have access to income at all. We rely on husbands or sons giving us a little money to do things. We don't have our own financial means. We rely on doing any activities in community centres like DIWC or Amina. So, we are limited on what we can do. This can affect your mental wellbeing and worth, when you have no financial independence

Financial abuse exists within families. Sometimes older men's/women's pensions are being used in other areas by family members. It is not being spent on the individual. There should be someone who checks on this. People don't know what their rights are.

Focus Group at The Hearing Voices Network

28th of September (11 participants - 3 females, 8 males)

What are the challenges facing someone trying to access mental health support and what needs to change?

The budget needs to change. They need to spend more on mental health services. It has always been more spent on physical health services. Mental health services are under resourced and in huge demand

There has been money misspent in Tayside by health services, that's nothing new. People should be taken to task for this

Trying to access mental health support full stop. Trying to access help is difficult. Even if you are suicidal. You are often just turned away and not told where you can get any on-going help with distress and living with suicidal thought and urges

It is a challenge being listened to and taken seriously. Sometimes the doctors fob you off with rubbish. If they don't know what to do with you, they should be referring you to mental health professionals who do know how to help you

Fear is a big barrier. My uncle George was hearing voices. He was locked up for over 30 years. I started hearing voices when I was 14 but I kept it to myself for fear of being locked up.

The waiting lists are huge. I have waited for 6 or 7 months. I have needed to keep on at them to find out if I am still on the list. When you eventually do see someone they make you do stupid things. If you cannot cope, and you are self-harming, they make you do bizarre things, like IQ tests. After it doing something like that, it leaves you thinking what was that in aid of? Maybe if they actually took the time to explain to you why they are asking you to do things that seem strange, you would have a better understanding of what is going on or what actually wrong with you

There is a lack of choice when it comes to accessing mental health support. Mental health support is not a one shoe fits all. It should be person centred.

You should be able to access your psychiatrist and get a second opinion from another psychiatrist if you want one. I have had conflicting diagnosis and conflicting advice from psychiatrists. I have not had a chance to ask for a second opinion. I wouldn't know how to go about it

There is not enough psychiatrist and the ones we do have, have too many jobs. They work for the NHS and do private consultation as well. This shouldn't be allowed. This is putting further strain on the NHS. This allows people to jump queues, if you have the finances to pay for it. This is not quality of access to mental health services

It is discriminatory to have psychiatrists working in both private and public health services. This must mean they pick up their wage from the NHS and then get paid again for their private work. This is not right.

The Alloway Centre is kind of out the way and awkward to get to, in particular if you have physical health conditions and mobility issues

Wedderburn is not very accessible either for the same reasons as Alloway

I get my medication on a Friday at Alloway. It is grid locked between 3pm – 5pm in the rush hour traffic.

I was in Carseview, they told me I was getting out of hospital the following day. I wish they had told me on the day. I absconded as I couldn't bare waiting any longer.

When I was in the IPCU at Carseview, there was unnecessary restraints. They were restraining people for the slightest thing. The power had gone to their head in that ward. They put you in a wrist lock, put your arms right up your back and it hurt a lot. When they restrain you, they drag you to your room, throw you on the bed and forcibly give you an injection every time. They leave you on your bed. They don't speak to you at all afterwards or try to calm you down or comfort you. It feels like a punishment. It shouldn't feel like a punishment in a hospital, a place where you are meant to go to be cared for and get better.

When in the IPCU, I said to one of the nurses that you are just like the staff in the sea gate. I was restrained, and injected with medication. They didn't have to do that. That was excessive force. I was not being aggressive, a risk to myself, a risk to staff or other patients.

Restrain should be a last resort and least restrictive. That is not the way things are up there. People are restrained for the slightest little thing and I bet you it's not recorded.

I have never had a CPN or support worker and don't see a psychiatrist as often as I should. I feel I have been deflected from services. No help, no nothing. They only put your meds up when you are struggling. After waiting for a decade, I had access to psychotherapy, but this was not effective for me. They didn't try me with many things or for long enough. It doesn't inspire confidence in mental health services in Tayside

At Taybank medical centre, I have had to wait 3 or 4 weeks for an appointment. This has become a regular thing. It could be an emergency, they just tell you to call NHS 24

There is still a lot of stigma of mental health challenges. People self-stigmatise, but there is a lot of stigma within mental health services too. Especially for people who self-harm, live with suicidal thought and distress. There is a really poor attitude, where mental health staff view you as an attention seeker, time waster and not worthy of help.

What works well and which services are valued?

The Hearing Voices Network (HaVeN) and the Willows Centre are helpful

Angel is quite good

Mental health drop ins – HaVeN, Dundee SUN drop in, Willows pop in

Social workers are valued, they help you with budgeting, shopping and that kind of support

My experience is the opposite, I have never had a social worker or support worker. I have had little support at all from these types of services, that's why I need drop in places like the HaVeN and the Dundee SUN drop In for emotional or practical advice

I think that occupation therapy is valued. They can be quite helpful

Pet therapy at Richmond Fellowship trust is really therapeutic

SAMH is a valued service. The gardening group at Dawson park is well thought of. I know people that go to it but I have never been

I have got a good GP at Hawkhill medical centre

The police are valued. They treat you with more respect than people who are meant to be helping you within mental health services. The female police officers are the best the calm you right down

The police try to help you. It is hard for the police too when Carseview refuse to take people in for assessment. People end up getting put in the cells which is not the right place for someone in mental health crisis

The willow centre is quite good. I've just started there a week and a half ago. Coming to the HaVeN it helps ease my anxiety a lot. You do need to get out of the house to mix with other people, but this can be a hard thing to try and make yourself do when you suffer from bad anxiety

What kind of support is missing?

Housing and housing support. I was forced out of my old house, and ended up getting myself in debt to get myself into safer accommodation than what I was in. I was being bullied and picked on from neighbours. I asked for help and someone from the council turned round and said it was all in my head and I was making it out to be worse than it was. I had witnesses, but they didn't investigate it. It was actually hate crime what I was going through. It was reported to the police. I was attacked in the close. I was arrested on self-defence. I had to get myself in debt to get a safer house. Not one person in the housing took me seriously. My family members witnessed this as well. There should be housing allocated for people with mental health problems. You get a lot of housing stock for disabled people. Mental health issues is also a disability. Some mental illness like mine is very debilitating.

I have had 10 years of bother in poor housing. I had 70 medical points (that disappeared) I was lied to for 5 years. I've had a couple of hundred physical attacks. For 5 years, I was told I would be getting a new house it didn't happen. My house it is declared not fit to live in. I was flooded by M-gills. My insurance has not paid out. The council are not allowing me to move as repairs that were started about a year ago are not finished. I lost 40 anti-social points the very next day after my CPN was withdrawn. I lost the 40 points as basically there were not enough attempts on my life in the last 6 months. And the CPN is no longer there to be a witness.

Care in the community, there should be more CPN's. There are lots of people needing them, but cannot get access to them as there aren't enough of them

Talking therapies need to be invested in and GPs actually need to make referrals for people to try them instead of just medication

The crisis team are absolutely useless

Weekend services and out of hours' services, all the worst things happen out of hours. There is very little support out with Monday to Friday office hours. There should be a variety of support available

If you are suicidal and you are in crisis, there should be a safe place you can go, other than the cells or Carseview. When you are in crisis the Bell street cells is not a good place to be, you feel worse. You are in a confined place, you can't leave, you don't get emotional support, they have to basically just lock you in and leave you and its awful. Carseview shouldn't be turning away as many people as they do. There are so many people who have gone on to kill themselves after being turned away from Carseview

The doctors and nurses have got their favourites, not everyone gets the same the same level of help or support

The crisis team do not come out to see you after 8pm. The crisis team are pretty awful. They are really abrupt and sometimes cheeky with you. It's like you are a total nuisance to them. They make you feel like a burden

There should be more peer support opportunities in mental health services

Psychiatrists are control freaks

There should be more counselling services for people. If people could access counselling and psychology, that might stop some people from becoming more acutely unwell

It would be better if there was more access to CBT and different psychotherapies. There have been lots of advances in psychotherapies but you never hear of any of that going on in Dundee

Spiritual counselling should be more available to people. Even that has a waiting list now I hear

More advocacy workers, there is not enough of them. People are not really aware of their rights in mental health services.

I am going to have to wait for a long time to attend an Asperger's group. This is not ideal for me

The ASBO unit told me not to call again, this was not a good service. I was going through a lot of abuse from neighbours and in the Lochee area. Lochee housing office, Dundee West didn't take it seriously. If you have severe and enduring mental health problems as I do, they should be taking me seriously. They could probably be doing with more training on mental health. But again, there should be housing set aside, in decent areas for people with mental health problems. Poor housing in unsafe areas makes your mental health worse if you don't feel safe at home. In Lochee, the situation is dire, people are throwing themselves out of the multis all of the time. You hear it a lot.

There should be more care in the community. Some people are kept in hospital far too long

Mental Health nurses should do drop in's in the community

Sometimes my CPN is quite arrogant and me and my dad have had to challenge my nurse a few times on his attitude. He was a bit cheeky and talked down to me, my dad heard him be like that to me too

Being treated with respect and a caring compassionate response

Doctors are quite condescending, everything gets put down to smoking or being overweight. They don't actually listen to you.

Staff morale is very low at the moment. Some of the nurses take a lot of abuse. They can become complacent and think that all patients are going to become aggressive. They treat all patients like they are a threat to be restrained. Nurses will treat patients badly because they feel bad underpaid and undervalued at work. If nurses weren't so over worked and underpaid, they might do a better job with the patients.

There are no services at the weekend or evening. This is when you are likely to feel worse or have something happen that tips the balance and you feel bad

There should be drop ins open with different activities. You can get a tea or coffee and have a chat with someone who wants to listen to you. If there were more safe, supportive ways for people to do activities in the evening, people wouldn't be so lonely or isolated. This might keep more people well and stop people from feeling hopeless and suicidal

There is not enough promotion of services. I only heard about the HaVeN recently and I have used mental health services for many years. More medical people need to know about community groups and community supports

Focus group Dundee SUN Drop In

4th of October 8 participants (3 females, 6 males)

What are the challenges facing someone trying to access mental health support and what needs to change?

A lot of people, if they are over the age of 64 or over are getting told to leave the mental health services and being discharged. It is wrong. If you have mental health problems, you still have them after 64. This might see those people's mental health deteriorate again. I know that there needs to be room freed up in services to let new patients in, but there should still be something out there for 64+

When in in Carseview, people are not getting all of their medications, which may have been prescribed by their own GP. I have seen some patients throw their medication back at the dispenser, because he was not willing to give out medications prescribed by their own GP. This is not a good thing for patients who may require other medications as well as mental health medications

People are struggling to get access to psychiatrists and CPNS. My psychiatrist has left and I have a new locum coming. I don't see them till November.

There are not enough psychiatrists and CPNS to support the people who need them. There is a real shortage of mental health professionals. So, there is a big back log of people needing help and treatment

A lot of people are scared to make the first move, to go to the doctor, to actually be referred to a psychiatrist. The don't want to admit they have mental health problems. Mental health problems still carry stigma and it can be a frightening experience

Sometimes you can be shunned by nurses. They don't listen to me as well as they could. I am quite quiet and soft spoken. I think their perceptions of me are wrong

Making the first phone call to your GP. The receptionists just try to fob you off. The receptionists should be better trained to deal with phone calls. Sometimes they are so rude and have no people skills

New mothers face the fear of speaking up about Post Natal Depression and can be frightened their babies are taken away from them. This can be a very frightening thought.

It is getting the right communication when you do try to touch services. People need to truly listen without judgement and empathy.

Knowing the right places to get contact numbers or even just where to start

The fear of contacting the right people or the wrong people

Lots of things are digitalised online now, for example information. lots of people are fearful of technology. There should be information about mental health services in a variety of ways. Not everyone has access to technology or knows how to use it.

Services aren't open when you need them. Out of hours, evenings and weekends and over holiday periods like summer and Christmas, services don't run as people need them to

Difficult to know which channels to go down. Who to speak to, which service to access and you seem to approach a person A, to be passed to person B, to person C, to go back to A. Getting hold of or referred to the right person is very difficult. It takes much longer than it should. The referral pathways or pathways in general are not clear for people and professionals, but especially for service users. Service users need the most guidance and advice.

There is a push towards care in the community. However, not many people are aware of community mental health services or organisations which can be very useful. Not necessarily crisis services, but prevention or anticipatory care which can prevent people from reaching crisis level. There are many groups who provide activities and support. There could be more awareness raising and promotion of such groups and organisations and the development of more of these types of groups and organisations. Because when the word gets out, these services may become inundated. So, there is need and demand which needs to be met. More anticipatory care and care in the community is required.

Sustainability for community groups and services is required. Community services and groups could expand and help more people, if there was more funding available to them.

Carseview wasn't a good experience for me. It challenges your freedom. Sometimes there are lock ins. Every time they brought new people in to the ward, they would lock the doors. If you wanted to go in the garden, you couldn't. You couldn't go for fresh air. You only had the lounge or your own room, so I would pace the corridors. This is not good if you are a voluntary patient and meant to be able to go out. I felt trapped, I couldn't do much at all and this was bad for my mental health.

There is very little to do that is therapeutic in Carseview. There are not much activities. You can go to the gym in the morning or afternoon if you are well enough. There is a small room that has music or jigsaw puzzles or scrabble. These are not really well used as they are not well stocked with much resources.

When family visits you at hospital it is awkward and doesn't feel good. There is no privacy. You get put in the dining room and you might not be the only family in there. It is too clinical. There should be a homely space.

Budget cuts will be a challenge for services providing support

There needs to be additional training for people supporting people with mental health challenges. So, they can help people in the recovery phase. How to communicate well with people with particular mental health challenges, how to help people recover, how to help people to make plans for moving forward, how to help people to make plans to keep themselves safe when distressed

What works well and what services are valued?

The Samaritans are easy to get through to. The NHS should be the same.

Group counselling, there should be more of this offered

The willow centre is valued. They have got a support worker for each person now. I have got a new CPN there now and she is very nice. There is quite a good range of activities for people to get involved with

The SUN drop in is valued. You get to know people and to make friends. It feels very accessible and there is a friendly approach. You can just drop in when they are open. Lynsey is good at getting your voice heard and this is important for everyone who uses services

Psychiatric services up at Alloway and Wedderburn are valued. You can see your psychiatrist every 3 months or whatever your own personal arrangement is

The Hearing Voices Network (HaVeN) is valued because of some of the activities, such as pool, arts and crafts, walking group during the summer. You can also volunteer there too in the kitchen or get involved with the committee.

Chrysalis is a good organisation. They are non-judgemental. They are supportive.

Mental health drop ins in Dundee are important. Drop ins like Dundee SUN drop In, The HaVeN, Rainbow House are important. There is no difficult process, you can just drop in, no big waiting lists. The drop ins are an olive branch for people suffering mental ill health. They acknowledge everyone that is there. This makes the people who use the drop ins feel valued. You also get the value of the input from everyone else. The trips that we go on with the drop ins are fabulous and enjoyable for everyone. You get the chance to try new things and go new places. A lot of people really struggle to go new places when you are mentally ill, you don't have the confidence to do it alone

The Dundonald day centre was alright for me. I was able to do some games, like chess, scrabble, play pool, cooking classes. The activities are therapeutic.

What kind of support is missing?

There should be mental health nurses attached to each GP surgery. They could help to triage people who really need it, who are more severely unwell

More CPNs are needed

There should be more purpose built inpatient settings, which should be designed according to the needs of people with mental health conditions. This can aid people's recovery better. More access to

therapeutic connections. Proper spaces to meet with their family, this helps in the recovery process.

Carseview should be more homely

Make best use of the funding available

There should be private spaces or family rooms for visiting in Carseview. Everyone has the right to privacy and family life. There should be nice, non-clinical, spaces with some toys for kids, comfortable seats

Carseview should have an occupational therapy department. Like back in Liff, you were able to get involved in the gardens, there were art therapies, music and different things for patients to get involved with. They didn't learn any lessons from Liff hospital in terms of what was good about that place versus what little is on offer at Carseview.

It shouldn't be all about the medication. Not everyone acts the same way on medication. People need more education to help people to figure out what is wrong with them. The first thing they did was put medication in my mouth, without actually figuring out what was wrong with me. Care and treatment should be more person centred. I felt frightened when I first went into Carseview.

You should talk to people first, make the diagnosis after assessment. Diagnosis should come from a doctor as opposed to a nurse in most cases.

It's not a comfortable environment in Carseview. The chairs are very uncomfortable, which gave me a sore back. The environment wasn't conducive to me wanting to mix well with other people. There weren't positive therapeutic opportunities to communicate well with other people, which meant I kept myself to myself, which also lead to me having a diagnosis based on my lack of interactions with other patients. However, in the community I have much less of a problem engaging with others.

When you are accessing community mental health support, you are less isolated than when in Carseview.

You only have access to physical health doctors once a week when in Carseview. This is not enough. Everyone should be able to access a GP if they want to or need to see one

When you are in hospital, you have to go to them if you need support. The nurses don't check on you. They don't ask if you are ok. They seem really tied up doing paper work. There is a lack of communication.

For professionals and other workers. Mental health has not been as attractive as other health professions, like surgery, medical, GPs. There should be more funding, career progression and raising the profile of the mental health field, that it is going to change people's life for the better.

What is missing is that services need to be better funded. A lot of the services have not previously been funded well. Mental health services have suffered the most. More funding should be allocated to mental health services by the authorities.

It is clear that 24/7 support is missing. There needs to be a place that is safe for people in Dundee to visit when is in distress; having difficulties; experiencing mental health challenges. People are most lonely or more likely to feel bad out of hours.

There should be trained people who walk to bridge. Patrolling it as a paid job. This might reduce the amount of people making suicide attempts on the Tay Road Bridge.

More people should be trained in ASSIST (suicide prevention training) teachers, police, community workers, health workers, taxi drivers, car park attendant, bus drivers. Everyone should be able to ask, are you having suicidal thought and feelings? Do you want to talk about it? If suicide was discussed more freely, then people might be more inclined to speak out.

There needs to be earlier intervention, in schools, in nursery, so that everyone knows it's alright to talk about your mental health from an early age, it will help to prevent mental ill health

There should be mindfulness and meditation in school for children. For all children, and in particular, for those having difficulties.

There needs to be more mental health awareness training for everyone.

There should be more funding for food and refreshments within the mental health drop ins.

There should be better environments and building spaces identified for running mental health drop ins. The drop ins are valued and would like to run in much better community venues

There should be more support for people who are providing others with mental health support. If people are stressed and not feeling valued, then they don't do as good a job as they can. There is a lot of emotional content working with people who are distressed and mentally unwell. All staff need to be cared for as well, in relation to their own emotional wellbeing

Dundee Association for Mental Health focus group 2

5th October 17 participants (6 males, 11 females)

What are the challenges facing someone trying to access mental health support and what needs to change?

A lot of organisations are losing their funding. People have needed help and support to attend meetings and welfare appeals. However, this has resulted in people losing benefits and appeals and people just accepting it. People don't know where to go for help, or you have to go through 4 or 5 different places. By that time, you are so stressed out and ill you can't articulate yourself well at all.

DWP have also started sending you appointments at the weekends, when people can't support you to attend. So, then you need to be sent another appointment. This happened to me, I was sent an appointment twice. First of all, it was a Sunday. I asked for another day, then they sent me for a Saturday. Again it was no use. It took weeks and weeks to get anywhere or get any help. You lose everything, our homes, our transport access to phones, you are hungry. It's very frightening.

At one point I heard that Dundee had handed out the most welfare sanctions. Is it any wonder that people commit suicide at the rate they do in Dundee. Universal credit is going to see many more people die. People don't have money to eat or to heat their home. This is the basics in life.

I have never seen so much poverty at soup kitchens. I had to go along due to having little to no money. Needing to access this type of food aid, impacted my confidence. It feels degrading. The benefits system has totally penalised the mentally ill and disabled.

Mental health support could mean a lot of people looking for support at a particular time, some of them live alone.

It's really difficult to get help out of hours. After 4:40pm there is little help for you

I would like to see more CPNs and for it to stop being so hard for people to get involved with the CMHT.

It is going to take me at least 18 weeks to see a Psychologist.

The waiting times are far too long. I was 6 months to see a Psychologist.

I had to wait years to see a psychologist

For children, there is not a place of safety.

Children are being turned away from CAMHS. Children need help at the right time, when they need it

There needs to be a 24/7 safe place for people in Dundee. There is only Carseview which turn most people away or the bell street cells. There needs to be someplace you can go and have a coffee and a chat. You can be listened to and people can try to start helping you or letting you know who can help you. People struggle for all different reasons, debt, poor housing, bereavement, domestic abuse, being a carer. If someone can listen to your problems, they might help you get help with some of it

You can call Alloway at the weekend, they can put you through to a duty worker. But that is not well known among service users. However, most of the people using community mental health organisations are not attached to the CMHTs

There is a real shortage of mental health and medical staff. The NHS are on their knees and patients are being badly let down

I have heard from some people, the staff in Carseview and the crisis team can be quite off putting and quite unprofessional. They have no people skills. Why do people like that go into these jobs?

It's hard to find someone to listen and communicate with you effectively

Everyone is an individual, people need the right kind of support at the right time. Some places are suitable for some but not for others e.g. DAMH, HAVEN, Chrysalis etc.

A friend of mine tried to commit suicide down by the water and it was the police that saved her. They put her in the cells overnight. The cells are not the right place for someone who is highly distressed and suicidal. They need a different type of environment.

Stigma is problem for some people

No GP access. Dundee has a real problem with GPs at the moment. It can take a long time to get an appointment. It then depends on the surgery that you are with.

My GP referred me to DAMH, they don't all make referrals to places like this though

Other people just don't understand about mental health. More should be done to educate the workforce, people in our communities, and starting young with nursery and school children.

Information about services isn't clear enough

What works well and what services are valued?

I love coming to DAMH. If it wasn't for here, I would have done something silly a long time ago.

DAMH is my oasis, it is my safe place.

I have made a lot of close friends by coming along to DAMH.

The only thing is DAMH is not open all of the time. But you can just phone up to be clear on when it is open.

DAMH and community organisations is a start to things, building confidence, a stepping stone for moving on to other things, to better or improve you or your situation

Dundee SUN drop in is also very valued. You can go and have a cuppy and a blether. They have guest speakers, they have a pool table, arts and crafts, information, they do trips every year, which you can look forward to. The staff and volunteers are friendly, they really care about you. You can talk about your experience of being a service user there and Lynsey tells people about it, who make decisions in mental health

The HaVeN is a good place. You can get a cheap dinner. It is self-referral. No long waiting list

The bi-polar group is great. I have been going now for about 2 years. I only knew about it because I come across a leaflet for it. Once you get into the swing of it, it is fantastic and well organised.

The mental health drop ins (HAVEN, Dundee SUN, DAMH pop in) are valued. There is no long waiting list or complicated referral process. You can be seen when you need it

My CPN is excellent. Every morning I get a nurse to visit me to make sure I'm safe, keep me on track for what I have to do that day and to accompany me to appointments. (another persona wanted to say the same thing again X2)

The support workers in DAMH are great, they see you if they need to see you.

Greenbuds, conservation project (DAMH) is great fun

The music group at DAMH is therapeutic

People get a lot of information from libraries

What kind of support is missing?

More research needs to be undertaken into what is the best ways to deliver information about services out to people in communities

Support of any kind during evenings and weekends

Funding is missing for us to have access to help and support during evenings and weekends

Psychologists, the waiting lists are phenomenal. I waited a year and I got a lot worse while I was waiting

There needs to be more Psychiatrists, again, long waiting lists

There needs to be more permanent posts in mental health, including psychiatry. Because you can't build up confidence and trusts if you see a different one every time.

The foreign accents of the Psychiatrists / consultants are difficult to understand

It feels awful if they (locums) want to change your medication when they don't actually know you. It is actually frightening

There should be more CPNs for people who need them. Many people could benefit, but don't get them because there is not enough to go around

It is ridiculous, I need to wait for 3 weeks just to see my GP

It's a post code lottery, you have a very different experience of accessing health due to the area in which you live. GPs are doing things different at every practice, even down to how you can arrange appointments

Most GP surgeries don't have a GP experienced in MH issues. There should be a mental health specialist in every practice

GP surgeries should have an experience mental health professional at each GP practice.

Funding for Westgate surgery, they did have a psych nurse but they paid her off.

Some people retire in psychiatry and they don't replace them. They end of being filled by locums

There are a lack of counsellors. We need to train more people to do this. It was help prevent some people from tipping into crisis.

Peer support gives people confidence to go on and to better yourself, your confidence, you may go on to try more challenging things.

Befriending services, prevents social isolation.

People need to be able to ask for a second opinion if they feel that they need one. This should be people's rights and they need to be aware of this and how they can progress with getting a second opinion.

Rainbow House – focus group

15 participants – 15 women

What are the challenges facing someone trying to access mental health support and what needs to change?

Trying to get an appointment is difficult

GPs should have more mental health training

Arthurstone medical centre is terrible. It's impossible to get appointments. For someone experiencing extreme stress, who comes down to make an appointment because they are ill, and they can't get through on the phone, they call the police on you.

I took my grandson who was extremely distressed, had been self-harming to Arthurstone practice. I asked for a private room as he was in such a state. They said they couldn't do this. I said well I was going to just go and knock on a door, any door, to ask a doctor, any doctor, If we could be in a private room. Eventually, they reluctantly got me a room. They got me completely stressed by being difficult in what was a frightening situation. They could just have got me access to a private room in the first place, without distressing me any further.

I'm having a carry on at Ryehill GP practice. The new pharmacist is the problem. He is taking everyone off all their medication. My daughter was in such a state, she ended up in Carseview and then Wedderburn the following day as Carseview turned her away. No one listens to you. I tried explaining to the pharmacists that taking her off her meds was unhelpful and was going to make it worse. He didn't listen to us. He should have changed or reduced down her medication in stages, not abruptly.

My friends mum was in Carseview for 6 weeks. She was in because she was highly distressed and was suicidal. She had taken all of her tablets while in the ward. She took an overdose, and then she pulled the cord. The nurse came into her room and said to her, "if you wanted to kill herself, you wouldn't have pulled the cord" and walked back out again. That's a terrible way for a nurse to speak to a patient.

Lack of resources, Psychiatrists, psychologists, CPNs. There is not enough staff

Out of hours is a huge problem. It's really hard to get help out with Monday to Friday office hours

We need a 24/7 safe place. People need some place to go to be listened to and have a caring compassionate response. A place where people can go and have a cuppy and get some support.

At CAMHS, you are not listened to as a parent. I have been told numerous times that they are only there to treat ADHD and if my son doesn't take medication given to him then he gets struck off from CAMHS. I have been trying to fight for my son to get CBT for about 7 years. It took 2 and a half years of fighting to get him to see a psychologist. He has been self-harming since he was 9, he is now 12 and no one has dealt with or spoken to him about his self-harm.

My daughter was turned away from Dudhope (CAMHS) because she had only self-harmed twice and they said she wasn't high risk. She is now 19 and has been put on Prozac. She has to get her medication weekly prescription because now she is saying she is high risk. If she has had the help at the right time, years ago. It might have been a different outcome now. CAMHS need to stop turning kids away and give them help at the right time

I think that you need support. No one has ever helped me. When my son went to Arthurstone to try and get help and get an appointment (the lines were constantly engaged – I tried them too). The receptionists were being horrible to him and quite antagonistic. They called the police and he was taken to Bell Street and put in the cells. He had taken his dog with him who was waiting outside the GP practice. He tried to tell the police that his dog was outside the surgery, they took him away anyway and left his dog unattended. I had to go and get his dog from Brown street kennels and it costs £77. They took him to the cells, took him to Carseview but they wouldn't take him, they took him back to the cells and sedated him with Dopamine or something. Then they let him out and his friend took him to my house to come and see me and to get his dog. All this because my son who is unwell was trying to get a GP appointment.

My son is 42 and I have been fighting for him and his mental health since he was 3 years old. We have had a truly horrible experience of mental health services over the years.

What works well and which services are valued?

All of the mental health services are valued, but none of them seem to be working well at the moment

Psychiatrists are valued

I do nothing by myself, I worry, I'm scared and I could be doing with some help to attend things in the community

Community drop ins for mental health, like Rainbow house, are helpful

The work that Lynsey does with Dundee SUN and coming to speak to us today and getting people's voices heard is very much valued. Its important people can have their say about services

Peer support is very important. People with lived experience sharing their stories and helping people to get on to their own recovery journey or to hear about what has helped other people

Buddying services are important. There could be more of this

The HaVeN on the Hilltown, I've heard so much about it the last month, it sounds good.

Mental health drop ins are valued as it is easier to get using them, no long waiting lists and no long referral process. The staff are great in the drop ins as well. They are really approachable and kind and listen to you

Community mental health organisations

In mental health drop ins, you can do the talking and people will listen

Hydrotherapy, but there is very long waiting lists for this. Its years long.

Psychological services and therapies, but the waiting lists are very long

CPN nurses are good, there is not enough of them and the waiting lists are very long

I'm one of the lucky ones that have had the same psychologists for about 20 years. If it wasn't for her I wouldn't be here. The continuity of care was so important.

What kind of support is missing?

There needs to be more peer support in mental health services.

Hearing about the different places you can get help and support. There needs to be an easy way to get all this information out to everyone in the community

There needs to be more publicity of the groups that are out there in Dundee. The medical people need to know more about it so they can refer. If this information was gathered, people will know where to direct people for help and support.

A bridging service – while waiting on appointments – things to get involved with while you wait

A befriending/buddying service specifically for mental health. To help people to connect with mental health organisation and the community

There should be more complementary therapies for people with mental health challenges

There should be relaxing therapies for people with mental health challenges. This can be helpful, while waiting for clinical appointments. For example, massage, reiki, relaxation, tai chi, yoga

You need to be able to get out, get some fresh air, for people that can't get out of the house, it can really impact your mental health. Someone people can't get out by themselves. People need encouragement and to start off with a bit of help to motivate yourself to get up and maybe even go out. This support could be provided by peer supporters, with lived experience.

There is no support for carers. I have my daughter 24/7 but it feels like there is little support.

Training is important, training of different kinds, peer support, mental health awareness, first aid mental health training, assist, suicide prevention training

People who have lived experience of mental health should be getting training so they can help themselves and help other people. It's a mutually beneficial experience

24/7 safe place where people who need help, who are in distress, who are suicidal can go

Building trust is so important

You need the change to build a rapport. There is no continuity of care as there is a lot of locums rather than consistent psychiatrists. You need to tell your story over and over again.

It's too much for the mental health staff too. They are overworked and overwhelmed. No wonder people don't feel like you are getting a caring compassionate response.

Chrysalis focus group 5 participants (3 female, 2 male)

10th October

What are the challenges facing someone trying to access mental health support and what needs to change?

When I went for counselling at Insight, I had a couple of sessions and they said that they had seen an improvement. They said I didn't need it anymore.

The time you have to wait on for appointments is a big barrier

The lack of knowing what help is out there

Better understanding from GPs about mental health, my GP for my physical health is not as knowledgeable about mental health

We need more psychiatrists

I disagree, I feel that we need less psychiatrists and more informal support

We need more CPNs, it seems that lots of people are told they don't need them

GPs are your first contact. They don't let people know about the choice of services out there, in order to link people with mental health support in the community. This must be because there is a knowledge gap about what is going on in the community for mental health. If your GPs don't know about what is out there, they can't refer you

There is a lack of joined up working and thinking. Services are meant to be integrated but there is still silo working.

There is not enough GPs in Dundee. People can't get appointments when they need them. If you are having difficulty accessing help from the first point of call. This is a real problem.

Social prescribing needs to be within each GP surgery, they need to know about everything that is going on out there. The GP also needs to know when to refer someone on to social prescribing.

Location, your post code depends on what help you can access. If you are in Angus, there is less choice available for mental health. If you are out with the area, even slightly, then you can be excluded from being referred in to services in Dundee. People are willing to travel to Dundee to access groups and support but you are excluded from doing so. It's a funding thing.

Self-stigma is a big thing that stops people from seeking mental health support. We need to reduce stigma and self-stigma. We need to start early in educating people about mental health and wellbeing. Early intervention is key, a lot more mental health services for children are needed.

Young people experiencing mental health challenges need to be able to access support quickly and effectively

Employers need to be more educated and understanding about mental ill health. Before I was signed off work, I had a terrible time at work. They wanted me to seek help for my mental health but then continued to lumber overtime on me. This was unhelpful, as I was struggling. This made my mental health worse.

The job centre staff also need to have more training and education about mental ill health and its impact on your life

At the job centre, in the ESA work related group, you need to tell your story over and over again. This is a horrible experience, it's like they don't have a clue. This makes you feel worse, especially in the environment in the job centre. This can increase your feelings of anxiety and stress and hopelessness

There needs to be support for people to attend meeting in the job centre or appointments relating to your benefits or appeals. Attending these appointments alone are too much for vulnerable people

There is no support at the weekend, if you need someone to talk to and you don't want to call 111. From 6pm Friday till Monday morning, there is nothing for you. Out of hours is a big problem.

When anxiety is high and confidence is low, to even get across the door, to go and get some help, someplace new is really hard. There needs to be more help to buddy people along to new services in the short term

What works well and which services are valued?

Being able to speak to someone on a one to one basis during counselling is helpful. You can get to build trusts with that person over time.

Chrysalis is a very valued service. It's a support service. If you have got problems, they can listen to you and give you some emotional support. It's really meaningful. It's an informal place when you can relax and work alongside other people (staff and service users). It's like a conversation rather than a client/professional traditional relationship. You can get the chance to really talk about the things that are really important to you.

Peer support is really important. It really works and has a huge impact on what you get out of your time at chrysalis. Peer support is a big part of what we do at Chrysalis.

Being able to do activities outside; walking, cycling, tennis, gardening. Has so many positive effects, it's hard to quantify it.

Being able to work together with people in groups, is a sharing experience and mutually beneficial. People can share strategies and coping skills. Sometimes advice from professionals is not as helpful. Peer support is sharing what has worked for you in the past.

Art Angel is a good place. You are able to go and you don't need to talk about anything, but you can go and do something therapeutic is important, it feels like you are achieving something. If you do need to talk, they will make time for you. Keeping your mind busy over an enjoyable activity is beneficial. You get to know people and make friends that you can converse with

Greenbuds is a good support as well as DAMH. You can go on trips and residential which is a really enjoyable experience.

Having choice is really important. Being able to go along and access different groups to learn new skills and meet more people. Ongoing learning and education is really important for peoples wellbeing. It builds your confidence and esteem. You need the opportunities to continue to develop and go on to try more things, to better yourself.

Taking part in adult achievement awards has been really good. I didn't realise I could actually have the confidence to write and learn

There is something about having options that aren't just for short term. Things are often time limited; counselling, penumbra. Recovery takes time and people aren't going to be better after 6 sessions.

Greenbuds, is like a moving on stepping stone within DAMH.

I used to lock myself away and didn't talk to many people. Coming to these groups over the years has helped me to make friends and actually talk to people.

What kind of support is missing?

There is a lack of knowledge about what is out there, when you just come out of Carseview. If you go to one support place and you are referred to a place which takes a while, there nothing between when you leave and that first support. Once you get there and you are a little bit better, you should then be encouraged to progress on to other groups and opportunities to keep you well and progress through your recovery journey.

There needs to be help and support and organisations and activities open in the evenings and weekends.

Social groups in the evening and weekends would be really helpful. This is informal support.

A lot of people need informal support, people who are isolated and live alone.

There is no crisis centre in Dundee. We need a 24/7 place where people can go to be listened to and get support.

It's like you have to have to commit a crime to get help. You get put in cells because you can't get admitted to Carseview.

The way organisations work, is one solution or the way they want to do things has to fit everyone, then you can't go there. Services need to be flexible and person centred.

Crisis support when people feel really bad.

Knowing what to do or who to call when you are in crisis.

Housing has been a real issue for me. I had terrible neighbours, which was further impacting my mental health issues.

When people are suicidal, they don't always actually want to die, they just feel like they have no other option at that time. They need a really personal, empathic, understanding response.

When people are in crisis and suicidal looking for a way to get help, online, there are somethings that are pretty awful that are coming up. Sometimes it comes up with things telling you how to do it. When people are looking for a way, not to kill themselves, there should be an intuitive system that gives people knowledge about what help is there in your local area and national help too.

There has to be more than recommending breathing space and the Samaritans for people living in distress and feeling suicidal. But that's often where it starts and stops.

The informality and anonymity of being able to go to a safe place for support is really important, for people who may not be engaged in services. It is about speaking to people. It shouldn't be being asked 100 questions before you are allowed to speak. It shouldn't have to be all fully documented and registered. Health and local authority are in the habit of documenting everyone. This can put people off.

There needs to be big campaigns in the media about mental health. We need to educate Scotland about mental health.

I have called Breathing Space and I didn't get an answer.

Build another mental health hospital. There doesn't seem to be enough beds, too many people are turned away who need help.

There is a lack of value put on the third sector services out there, by statutory mental health services. It stops people being sucked into the whole stigma of statutory services. Third sector services are not seen

and treated as equals. Third sector organisation are in fact, where the recovery work is happening.

Lochee Hub focus group
7 participants (3 females, 4 males)
15th October

What are the challenges facing someone trying to access mental health support and what needs to change?

People on methadone are just not allowed to access mental health services. It is ironic as no drug user has good mental health or they wouldn't be doing what they are doing. Most drug users have faced a lot of trauma in their lives. A lot of historical sexual abuse, physical abuse, neglect, being brought up in chaos witnessing domestic abuse, being taken in to care. Trauma after trauma, but still no one wants to touch people who are on drugs with a barge pole.

We don't know how to access mental health services apart from showing up at Carseview. If you go to your GP they don't tend to refer people like us to mental health services. It's a barrier straight away if you are on methadone or other drugs

There are really long waiting lists to be seen about your mental health

There are language barriers up at Carseview. If you happen to speak quite broad Dundonian, there are a number of foreign nurses who just don't understand what you are saying and pick things up wrong. You spend your time trying to explain yourself like, explaining what a 'closie' is or a 'multi' and things like that. If they can't understand you, how can they help you?

Why do they let people out of Carseview who are still ill? Are they that pressured for beds that they just chuck people out before they are better? I know of a guy who committed a serious crime, who was let away from Carseview when he was still ill.

There is no planning when people are discharged from Carseview. I know a couple of people who were told they same day they were being

discharged that they had to go. They weren't ready to be discharged. One of them just ended up back in again only a day or so later. They shouldn't have had to go through being put out with no warning if they weren't actually well enough.

It is almost impossible to get help. My brother went up to Carseview to try to get help. He didn't know what else to do. He is only getting about 3 hours sleep a day, which is having a bad effect on him. He is a carer, his mental health is really bad, he is actually suicidal and I'm worried about him. At Carseview, they just turned everything around on him and told him to help himself. They accused him of giving his Mirtazapine to other people because they feel he should be sleeping better if he is on Mirtazapine. It doesn't matter if you are desperately needing help, they will still just turn you away. They should be telling people where they can go to get help with mental health if they can't help them at Carseview. When he went to his GP for help, the first thing he felt he had to say was, I'm not here for more drugs. Turning things back around on the person and blaming them and accusing them is not good enough. You go for help and feel like you are being made out to be a liar. Sometimes people don't know how to help themselves and end up with no help at all and go on to do something silly. It's not easy to ask for help with your mental health, there is still a lot of stigma. So, to ask for help and to get a horrible experience where you are being judged is terrible. My brother is no further forward with any help, even though he feels suicidal. That's after going to Carseview, going to his GP and ISMS knowing he is struggling with his mental health and suicidal thoughts.

It is the hardest thing ever to access mental health support. I was in hospital for 3 weeks after taking an overdose. My kidneys failed, I had to go to Aberdeen for a procedure that they couldn't do in Ninewells. It was poor psychological health that led me to take an overdose. No mental health assessment was made and no mental health worker came near me for 3 weeks. They come to see me briefly the same day I was being discharged from Ninewells. I told them just to forget it as I was so pissed off that no one had come near me till I was about to be discharged. They have done nothing for me, I still feel suicidal every day.

If you are in hospital after making an attempt on your life or with serious self-harm injuries, you should see a mental health professional quickly. Your mental health should be assessed quickly as well. Ok, your

physical injuries need to be treated, but your mental health is still bad and needs to be an equal priority. You might feel as bad or worse when you are in Ninewells being treated for physical injuries because you didn't actually manage to kill yourself. It is actually your mental health that leads you to be hospitalised for treatment, so to not come near you about your mental health is crazy

I tried to commit suicide twice before they took me into Carseview for any kind of assessment. I actually died twice but was brought back to life. That was back in 2014 and 2015. They transported me straight from Ninewells to Carseview. They took my baby from me, that's why I was feeling suicidal and tried to kill myself. It was completely traumatic

I tried to access mental health services via NHS 24 on Sunday night and I basically got a telling off. How dare I feel mentally ill on a Sunday night. They asked me, if you were going to kill yourself, how would you do it? I told them I would probably take a lot of pills. I was advised that I needed to go to my doctor the next day. I went to my doctor the next day and the information that had been passed over, said that I had been selling my Mirtazapine. This is not the case. I had said, if I was going to kill myself, I could go and buy pills from my neighbours. The doctor apparently got these notes from my phone call from the night before but they were not right. My doctor was making accusations about me selling my Mirtazapine. I protested, that these are not drugs that would sell on the street and that I was not selling mine. He said to me, don't try to kid me, I know they are worth money on the streets. He stopped my prescription for a week until he had test results. He took a urine sample from me, which showed that I was taking my mirtazapine. The doctor actually followed me to the chemist (you can ask my pharmacists Lochee) my appointment was at 9am. He spoke to the pharmacists (Ryan) who did say that the GP had said something about me but he couldn't say what. I had no apology from the doctor after accusing me of selling my Mirtazepine, after my urine sample showed I do actually take my medication. As soon as you mention methadone, they can't see past it. I tried to access mental health support in good faith that someone would try to help me, but no one cares, they just see it like you want drugs. I want help, I don't want to feel suicidal and have intrusive thoughts every day. I wanted to be assessed. I want to know what is wrong with me. I don't want to feel like this. No one wants to help so I have resorted to taking street Valium. This experience has just put me back ten steps.

To actually see someone, a psychiatrist, would be good, to actually help you find out what is wrong or why you are feeling the way to you. To link you with some kind of help or treatment

What works well and what services are valued?

I have tried to get help once, and it made me feel worse. I didn't get any help and was accused of various things. I was made to feel like a liar and accused of selling drugs. It made me feel like shit. It feels like there is only one way out for people like, me overdose or suicide and they don't care which one it is

If I went up to Carseview and I wasn't on methadone, I know I would have had a different experience of services. I probably would have got admitted or assessed at least

Andy's man club for men who are suicidal and live with suicidal thoughts. I have still not been along to this yet, but I do want to go. It's just difficult making yourself go to something you haven't been to before for the first time

My neighbour who is not on methadone was treated better than I was treated in my chemist and I should be just as valued as a customer. I am in Boots chemist every day. Everyone treats you differently if you are on methadone. It is a huge stigma

GPs and mental health workers can't see past the methadone, so you don't get any help

Nothing is working well about mental health services. The suicide rate in Dundee is very telling

The HaVeN are a good place, they take people away on trips and have a wee cafe

It is valued that you (Lynsey McCallum, Dundee Service User Network) come along to the Lochee hub do to a mental health drop in. We know that you are actually listening us, you ask us what it is like and what matters to us. You trust what we are saying about our experience and make our voice heard. You give us information and we know more about mental health service because of you, but we still can't use them. You try your best to give us a voice

What kind of support is missing?

Support for people who use substances, methadone or drugs

If you are on methadone, you get treated differently

It is really difficult to get an appointment with your GP in Lochee. If you do get through to on the phone the receptionists try to ask you too much personal information and they are quite cheeky on the phone. If you say it is personal, they take it personally you don't want to tell them your business.

If you call the GP practice at 8:30am and the appointments are gone, you still can't make an appointment there and then, you need to call back again the next day and go through it all again. Not everyone has a phone to make the appointment or enough credit to make lots of calls

The access to services full stop. It so hard to even get to the first rung on the ladder. You just can't get your foot in the door.

It's like a fight every day, trying to step out of the door because of anxiety. There are drug dealers waiting at the chemist every morning. It's hard to stay off illicit drugs when they are in your face every day.

There must a be lack of money or funding in the first place. But it is the most mentally vulnerable that suffer. You just get fobbed off instead of helped

Someone to go and speak to if you are feeling down or if you are in that frame of mind that you can't trust anyone else. Having someone you can trust to talk to can make all the difference

There is no support or help in the evenings and weekends

There should be a place for people who come out of prison. A place where people can go and have visits with their family.

There needs to be a safe place where people feel like they can talk about things. My brother Darren tried to get help at Carseview 8 years ago and again 5 years ago. 8 years ago he jumped off the Tay road bridge and sustained injuries. He had broken ribs and was bruised head to toe. He hung on to the big rock to get his energy back. He swam to Broughty Ferry where he was found on the beach. 5 years ago he went to Carseview and they refused to help or assess him properly. He just got told no and was turned away. He then went on to commit suicide 5 years ago. He tried to jump from Lansdown Court multis. He was going

to jump off the top of the roof, but he was stopped from getting access to the roof. He then took himself down to the Tay Road Bridge and jumped off it. His body has still never been recovered and that is horrible. He had been staying with my other brother, he had lost his job, his house, everything. This had a big impact on him. I think this affected him greatly and added to the suicidal feelings

There needs to be a safe place for people who are suicidal. This needs to be there so that when people are turned away from Carseview, there is someplace safe and non-judgemental they can go and speak to someone face to face. Being sent away from Carseview without being told where else you can get help is dangerous.

I don't know what it like to access mental health services as I have always been prevented from getting any help. There is always an excuse or barrier put in front of me.

There needs to be friendlier spaces in Carseview for families to have visits. This should be comfortable and non-clinical.

There needs to be access to gym memberships, people need opportunities to be active with other people, this promotes mental health

There needs to be more informal community cafes, where people can go and get informal support with their mental and physical wellbeing.

There needs to be places where you can get 1:1 support

The multi stories are full of people who are unemployed, drug addicts. The council don't want to give people like this decent housing. A lot of the people who live in these multis are actually classed as high risk. A high suicide risk and are at real risks of jumping. People kill themselves by jumping out of multis in Lochee all the time. Does that not tell you things need to change?

There should be a food bank in Lochee, the poverty is concentrated in this area and the nearest one is in Menzieshill

There needs to be volunteers in Carseview, to plug the gap of what nurses aren't doing. Actually talking and listening to people. Volunteers would have to be tested to see that they are of sound mind and body first.

There should be more peer support in mental health. There needs to be peer supporters in Carseview and informal community groups

People who come out of prison need to have better support. Like having a volunteer or mentor with them. To help them to get reintegrated back into the community. You become institutionalised in prison

Believe it or not you actually get more help and quicker in prison than on the outside. However, you should get more support when you just come out of prison.

People have been committing suicide because they have been cut off their methadone by ISMS. This is shocking and someone needs to do something about this. Cutting people off and forcing people into withdrawal is really dangerous. I can't believe this is actually being allowed to happen. There have been lots of suicides linked to being cut off

People have been actively getting themselves put in prison as a way of getting help, to either get on a detox programme or back on a stabilising methadone programme after being cut off.

There is a lack of respect in the way that they speak to people who need help with their mental health

Actual support, there is no point calling themselves services if they don't actually provide a service for EVERYONE. People shouldn't be allowed to be excluded from using services. It shouldn't be a selective process of who gets help and who doesn't. Who deserves help and who doesn't

Even though there are psychiatrists attached to ISMS, people still can't access them because you are on methadone or drugs. ISMS is a substance use service and they should be helping people with their mental health but this is not actually happening. The same exclusions still happen in substance use services as normal mental health services

There needs to be more informal mental health support that people with substance use issues can access

There needs to be access to psychological therapies and talking therapies. Most people who have problem substance use have experienced a lot of trauma in their life, starting in childhood. If people do not get any help or treatment for trauma and what they have been through, how are they ever going to manage to get off drugs?

Dundee SUN drop in focus group

2 participants 4 participants (2 females, 2 males)

16th October

What are the challenges facing someone trying to access mental health support and what needs to change?

Connecting and communication is key

When you are not involved in conversations about you

It is hard to know who you need to connect with to get help

Actually waiting in places for appointments fills me with anxiety

Long waiting lists are a big problem

There needs to be clear, concise information about mental health services available for all, and make sure it is given to all

People in Angus and Fife don't have access to all services available in Dundee, even if you are willing to travel to use them. You can be excluded from services depending on where you live, it must be to do with funding

In Monifieth you can live on one side of a road and be classed as living in Dundee. You can be on the other side of the road and be classed as living in Angus. Then you can have difficulties in accessing things in Dundee

I don't know where to go to get the right kind of help after 20 years of trying. I know I need help but I don't know where to get it

I just always seem to be in a period of waiting. People go off on holiday and conversations are had without you, which is really unhelpful

Stigma and fear of being stigmatised. Self-stigma is also a barrier

Once things are written down about you, they are there forever. I have had things said about me that aren't factual or accurate. This follows you and adds to the stigma. If people see any notes about you before meeting you, you can be pre-judged.

Getting a proper diagnosis can be difficult

You can't get help out of hours, so evenings and weekends are difficult

I used to be supported at home from SAMH, before changing my support to Richmond Fellowship. I saw a woman that used to support me from SAMH in my local chip shop. I was 10p short for the food I initially ordered, I changed my order slightly as I was short. The woman who used to support me said she was going to give me 10p, then she said, "no, you don't need 10p you are on lots of benefits", she said this in front of everyone. I feel that this was unprofessional for her to do this and embarrassing for me, in my local chip shop. Now the people who work there and customers know my business. Confidentiality and professionalism in mental health services is important

Continuity of care is very important and that is not something that many people in Dundee seem to have. There are too many locums being used

Long waiting lists for appointments and assessments, People deteriorate the longer they are waiting

What works well and what services are valued?

Someone who can help you voice things, like an advocacy worker or Dundee SUN. You can see an advocacy worker one to one and you can voice things together as a group to create a louder voice about issues in mental health

Keeping the same person or professional along your journey. This doesn't seem to happen for many people

Lynsey (Dundee Service User Network), you have been helpful and proactive in giving me information about services and trying to point me in the right direction. You have also just listened to me when I have needed to talk to someone and things have been tough

The churches that open their doors for people. You can go and have a coffee and chat and play dominos. The steeple is open a few days a week. It is somewhere you can offload

The Dundee SUN drop in is a valued place. They don't record any information about you. It is confidential. You can speak to others in the group. You can get a one to one chat if you need one. You can get

information about where you can get help in relation to different issues such as mental health, welfare issues etc

There is a parish nurse that visits the steeple. She drops in to do health checks and to link people to information and support. This seems to work well. There should be more of this. There could be mental health nurses who do something like this in mental health drop ins or community places

DAMH is a valued service. It gets you out of the house. It gives you a purpose. You can feel accepted and get to speak to others in the same boat as you. You can try nice activities

If you struggle to get out of the house, apart from going to your groups, the trips we go on are so valuable. The trips we do at the SUN drop are fantastic. Going to new places can be difficult, most of us just wouldn't be able to do anything like that by ourselves because of low confidence and esteem, anxiety and not having anyone to go with us. Doing trips as a group is a wonderful thing. You get to know each other better and make friends. They are something to look forward to. A change of scenery can make you feel better for a little while

Listening services

Wellbeing centres

Tayside Health Arts trusts has been really beneficial for me. They offer music, art and crafts programmes

What kind of support is missing?

Information, help and support for family members, carers or supporters as well as the person with mental health problems. Family need help to understand the illness affection their loved one. It should be more of a family approach. Knowing more about what is helpful and what is unhelpful

Lots of things are missing, the clinical part of mental health services is not a supportive system. There is no empathy. It can do more harm than good for people

Somewhere to go for social activities in the evenings and weekends. I wouldn't mind even paying a few pounds to attend groups at the weekend

A safe place or crisis centre is missing in Dundee. Too many people end up doing something silly, because they feel like there is no other way out

There should be more informal support groups / community groups. You can get support, you can meet other people. You can get information. People who are socially isolated have poorer mental and physical health. Creating welcoming places where people can go is important

When you don't know where to go for help that's when the pressure builds up and people are likely to do something silly, like jump off the bridge

People need clear concise information mental health services. People don't know what to expect from services, no one tells you what you should expect from services. People don't know what good mental health services function like. Things have been bad in mental health services in Dundee for a long time, we have nothing else to compare it to

When people are in distress, they might need support and encouragement to get help and support

We need more people trained in suicide prevention training. Some of us have done the eCPR training and that was great. We can do more to help each other if more training is available. I enjoyed taking part

Taking account of people's spirituality or cultural needs is important

We need more people training in mental health professions in all areas of mental health to come and volunteer in community mental health organisations and drop ins, like you do here at the SUN drop In. We get psychology students coming for voluntary work and student nurses coming for visits, and that's great. The volunteers are bringing skills they are learning in their degree to their role here. The volunteers benefit from being able to work with people with mental health problems. I imagine they also know more about mental health community groups and what is out there in Dundee. They get to build experience working with people while they are studying. This will make them a better worker at the end of the day