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# The Doctors' Support

Spring 2014 Issue 122

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#### **DSN** stigma survey

Firstly, thank you to everybody for

your response to the DSN stigma survey. We had an excellent response rate with many valuable stories contributed. The results provide a wide ranging picture of your real world experiences without conveying any personally identifying details of individual members. The overall information will be very helpful for informing my responses on the expert panel at the forthcoming London deanery's Professional Support Unit's 'Destigmatising Healthcare for Doctors' study day. The survey abstract has already been submitted to the International Conference on Physician Health (ICPH) as well as the UK Association for Physician Health (UKAPH) meeting in London in June. We also hope to achieve journal publication. I note the recent BMA stigma survey and would urge you to contribute to this if you feel able to do so.

#### **Editorial**

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Dr Louise Freeman

(Senior editor)

## Mental health disclosure and medicine

The stigmatisation of psychiatry and mental health within medicine is well documented, but the effect of this stigma on doctors with mental health problems is only just beginning to be more openly discussed. It is very tempting to avoid disclosure in professional or social situations alike; however, I was recently assured by an eminent psychiatrist that honesty about one's diagnosis is much healthier in the long term. I think that the reason for this is probably that lack of honesty to others is interpreted as shame by oneself, even when the lack of disclosure is for the most pragmatic of reasons.

# Member help needed to publicise DSN

The committee would be very pleased to have some help with the following events. DSN has already arranged to Page 2 ISSUE 122

## Editorial: continued... By Dr Louise Freeman

have a stand at the <u>ICPH</u> conference (15-17<sup>th</sup> September 2014 in London) and we would welcome volunteer members to assist in manning the stand during this event. No specific expertise is required — just the willingness to explain what DSN has to offer to interested delegates.

Similarly, DSN has booked a stand for the <u>BMA Careers fair</u> (17-18<sup>th</sup> October 2014 in London). Having helped on the DSN stand at the BMA Careers fair and the RSM study day last year, I can personally testify that it is tiring but very rewarding.

DSN will refund reasonable travel expenses to members who would like to help for one or more days at either of these events. In return, you would be expected to spend the majority of programme breaks manning the DSN stand at the ICPH event.

Please email editor@dsn.org.uk if you are interested in helping out at either of these events.

#### **Next newsletter**

In the next issue of the newsletter you can look forward to the following articles:

'Destigmatising Healthcare for Doctors' report

Review of Rachel's book 'Sober is the new black'

Best wishes louise

# **DSN** newsletter writers wanted

Have you attended any interesting medical meetings?

Learnt about mental health from an unusual experience?

Do you do any activities which increase your well-being?

... Would you like to write an article for other members to read?

DSN aims to publish all members submissions either in the newsletter or on our website. Further guidance is available on the DSN website.

The next newsletter deadline will be 19th May 2014.

Please email any contributions to:

editor@dsn.org.uk

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## Sponsor Oliver in the Virgin Money London Marathon for DSN!



effort during the dark days of winter, and will spur me on to doing my very best. I have recently completed a half marathon, which went very well. All I need now is to be sponsored...!

I would be immensely grateful if you could spend just a few moments to click onto my *JustGiving* page at:

## http://www.justgiving.com/ oliverquantick

and donate to help DSN, a cause that is dear to us all.

#### **Oliver Quantick**

I am delighted to have the honour of running the Virgin Money London Marathon in aid of the Doctors' Support Network in April 2014.

I am a keen participant in sports, and find running a brilliant way to find peace of mind. In 2008, I qualified as a doctor and have been practicing overseas with the Army for the last three years. I am now back in the UK, embarking on a career in Public Health.

I am immensely thankful for the opportunity to participate in next year's event – especially for such an important cause as DSN. It will be a huge personal challenge but your support will definitely help the training

Like Olympic gold medallist Mo Farah, Oliver will be be running in his first London marathon in April. <u>Please donate now if you can</u> Page 4 ISSUE 122

## Transcultural Psychiatry in the Heartland of the World: Part 2 of 2

## by Ahmed Hankir

One of my closest friends is a Jewish man who has transformed my life with his limitless philanthropy and altruism. He travels frequently to Tel Aviv and shares intriguing stories about his experiences in Jerusalem and Haifa. I wanted to see what it was like for myself. Are the reports about the maltreatment that people receive over there accurate? Is it true that I will be detained, interrogated, searched and even harassed in Ben Gurion International Airport because of my ethnicity?

The World Psychiatry Association event is an educational event; it is an opportunity to showcase research and share knowledge with counterparts from all over the world. It was my intention to travel to Tel Aviv, to present my research findings and, my main goal, to deliver the peaceful message of co-existence.

And so there I was, at the mercy of the heat (both literal and metaphorical) in the cross roads of the world, the Kingdom of Heaven, the Holy Land itself. Was I anxious? Of course I was. But what was to happen would have a profound effect upon me. At the airport, a smartly dressed man was holding a placard with my name on it. He graciously extended his hand, spoke with the security in passport control, and without any questions or laying a finger on me, gently ushered me into Israel. I was astonished; I had not expected this level of courtesy and respect.

The conference itself was a resounding triumph. Tel Aviv was full of academics from all over the world. It was truly a spectacle to behold. The conference organiser Professor Greenberg actually embraced me and I could feel his sincerity in that embrace. I couldn't have been made to feel any more welcome. I was truly humbled and inspired. Every single member of the organizing committee made me feel at ease and

ensured that I was comfortable throughout my stay.

There were fascinating talks on suicidality in Israel, ultra orthodox Jews, the Kabbalah, issues of identity from Arab citizens of Israel and the migration of Jews from Somalia to Israel. The conference was punctuated with social events and we had ample opportunity to network. I met the transcultural psychiatry team from McGill and they invited me to present in Montreal, Canada. Two months later, I was there, up to my knees in snow, delivering the same lecture to the McGill transcultural department.

Overall, it was a pleasure and privilege to have given a keynote lecture in the WPA TPS event in Tel Aviv. I have learned to challenge negative stereotypes and prejudices, to approach all matters with an open mind and an open heart, and to foster a curiosity towards other cultures and ways of existence. This experience has inspired me to deconstruct and reformulate my views on the 'other'.

Most importantly, I learned that we should never give up hope and that we should believe in the power of humanity.



Dedicated to Charles Salmon QC and Professor David Greenberg

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## The Depressed Cake Shop By Alison Holt



#### The Depressed Cake Shop

No, not the title of a Stephen King or Dean Koontz novel, but a very real movement being propagated via social media. The concept is simple — a series of pop up shops, now world-wide, run by individuals or local groups to (very) gently raise awareness about depression and other mental health issues in their local communities.

#### How? ... By selling grey cakes!

Spreading the idea via a Facebook and Twitter (as #depressedcakes), shops have popped up from London to Kuala Lumpur via France, the USA and Canada. Cakes and biscuits are baked, often by those who use baking as a way of coping with their own illness, and are then decorated in unusual ways. For example barely decorated cakes represent how depression can affect your ability to work or a grey colour scheme could show how all the fun can disappear from life. The shops are appearing at church fêtes, farmers' markets, and even taking over real cake shops. Those

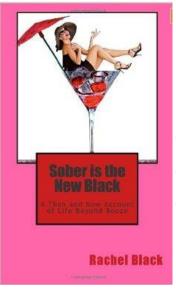
manning them are able to talk in general terms about mental illness and to signpost people to local services. The money raised is donated to a charity chosen by the individual shop organisers often local mental health charities.

#### How can I take part?

DSN campaigns to reduce the stigma around mental health problems can help: I am a firm believer that cake is a great way to do this!

If you would like to set up a local Depressed Cake Shop, or are just interested in following the story of the brains behind the project, Miss Emmylou Cakehead, information can be found at <a href="http://depressedcakeshop.com">http://depressedcakeshop.com</a> or you can search for "The Depressed Cake Shop" on Facebook.

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## Banishing the Booze By Rachel Black

#### I don't drink

Never.

Not at all.

None.

One year ago things were very different, and a set of circumstances led to me

deciding I had to make this change. Basically, I was drinking too much, too often.

I embarked upon a path that I thought would be all about giving up, doing without, and suffering from self-deprivation. I thought alcohol was the solution, rather than the cause of my problems and discontent.

I did not consider how much I would gain when it was removed from my life.

#### Life seems relaxed now

One of the biggest differences is time. I have loads of it. Now that my evenings are not truncated at 6pm, my productivity disappearing along with the wine, I can reliably concentrate to do online banking and shopping. I have started a Spanish class, as I am no longer reluctant to drive. I have started my life long ambition to learn piano, with lessons on Sunday mornings no longer wiped out by hangovers.

As my brain kicked back to life I started to write and published my first book: Sober is the New Black. I have a lot more time and space in my head too; life seems so much simpler now I am not pre-occupied with drinking or its effects.

There is a lot of planning when drinking most nights, including organising nights out, taxis, getting to the cash point, buying wine for nights in, deciding how

much to buy. I had to calculate how hung over could I afford to be given my commitments the following day, requesting annual leave or 'not on call' as required, and dealing with monster hangovers, which left me fit for nothing. It's a cliché but life seems relaxed now. There is no rush to get to wine time. There is no anxiety if things run late. Life just happens.

#### **Better family and home life**

My mood and personality have improved considerably. Eighteen months ago I considered leaving my home and family as I was making their lives miserable with my constant irritability, antagonism and over-reaction. I was 'stressed' about everything from making packed lunches to putting up the Christmas tree.

Now I am calm, measured, and pleasant, and my moods are appropriate. I am a better wife, a better colleague, and a good mother who happily drives her kids to clubs and has the time for a chat at bedtime.

#### I choose not to drink

I need to continually remind myself that my life is now as good as it always looked on paper, only because I continue to choose not to drink.

I was so reluctant to give alcohol up, worried I would miss all the fun; yet here I am, relieved to be free from its clutches, knowing I need never drink again.

Why would you?

Contact me:

soberisthenewrachelblack@gmail.com

Follow my blog:

soberisthenewrachelblack@blogspot.co.uk

Sober is the New Black is available on Amazon:

http://www.amazon.co.uk/dp/1495304396

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## Historic European Martial Arts or 'Stick them with the pointy end'

## By Malcolm Kinnear



#### **Martial Arts in the West**

It might come as a surprise to learn that our European ancestors also practised martial arts, so completely has the East dominated this field over the last century. The Western sword arts were completely forgotten in the mid to late 19<sup>th</sup> Century as an officer's usual sidearm became a firearm instead of a sword and duelling finally died out. The First World War also contributed as the new enthusiasts of the late 19<sup>th</sup> Century died on the battlefields or lost their taste for combat. The advent of the swashbuckling movie then unexpectedly created a new need for swordsmanship and only sport fencers remained to provide instruction.

However, many historical documents had survived, the earliest being the 12<sup>th</sup> Century English I.33 on sword and buckler, with Middle Ages treatises on longsword, rapier, and backsword, then later manuals on sabre, broadsword, and smallsword. These texts have been the primers for the re-discovery of skills and techniques over the last few decades.

#### **HEMA** vs re-enactment

Historical swordsmanship is not the same as reenactment. Re-enactors wear historical costumes, which do not offer sufficient protection against blows or thrusts, so their techniques resemble those of stage fighting in that they are dramatic but safe. Historical swords folk use modern protective equipment to ensure safety so do not look authentic. In brief, reenactors look right but do the sword stuff wrong, while historical swords folk look wrong but do the sword stuff right.

Safety is a priority; so all weapons are blunted and have caps on their points. Protective equipment comprises heavy padding, thick gloves, and Olympic standard 1600N fencing helmets. Serious injuries are very rare as a result.

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## Historic European Martial Arts or 'Stick them with the pointy end' contd

By Malcolm Kinnear

# European sword arts are not inferior to Eastern

Pervasive myths about European sword arts are that they are simple, reliant on brute strength, and inferior in skill to the Eastern arts. These are quite untrue. In particular, two-handed longsword techniques are highly complex and difficult to do well. Reliance on strength alone will therefore result in failure.

There is a related myth that European swords were 'just great lumps of metal', inferior in every way to elaborately folded and tempered Japanese swords. This too is untrue. A well-made European sword was a carefully balanced light composite weapon, typically combining a sharp hard steel cutting edge bonded to a more flexible body. These were quite capable of sustained use against armoured foes.

Japanese swords, although hugely complex in construction and very sharp, were optimised for rapid blows against lacquered armour rather than metal. The reason for these misrepresentations is that the Eastern arts have maintained historical continuity and a tradition of sword manufacture whereas the Western arts have not.

#### Why should I try HEMA?

So why should anyone consider taking up the study of the Western martial arts? There are several reasons.

It's very good exercise, but does not require extraordinary fitness or flexibility.

It's more interesting than jogging or the gym.

It gives a sense of connection to our ancestors.

The teachers are unpaid enthusiasts who welcome the

chance to share their hard-won skills.

There is much scope for study and improvement of recovered techniques, so there is a real possibility that even newcomers can contribute to the field without having to spend decades acquiring status.

As a martial art, it promotes self-discipline, focus, and physical mastery, but without the competitive ethos often found in the Eastern arts.

#### Isn't it all very macho?

And it's not just a bloke thing — there are many women in HEMA, with a recent campaign by the international women's HEMA group Esfinges to 'give a girl a sword!'

On a personal note, my involvement with the Edinburgh Dawn Duellists Society was a factor in my own recovery and return to work. I remain involved with the EDDS, the Black Boar Swordsmanship School (of which I am secretary) and the many friends I have made through HEMA over the last seven years.

#### How can I join in?

There are now organisations in most parts of the UK, USA, and Europe dedicated to studying, learning and sharing these skills, with recognised instructor qualifications under the aegis of the British Federation for Historical Swordplay.

Further information can be found on the BFHS website www.thebfhs.org.uk

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## **Useful Resources**

## **Sources Of Support**

#### **GENERAL:**

#### Doctors.net.uk

#### www.doctors.net.uk

UKs largest and most active on-line medical community. Contains \_ the couch\_ providing emotional and

professional support through on-line discussion forum and peer-to-peer support

#### **BMA Counselling Service**

#### Tel: 08459 200169

24-hour support with immediate access to trained counsellors.

#### Support4Doctors

#### www.support4doctors.org

Website run by the RMBF – aims to put doctors and their families in touch with a range of organisations who can help. Covers: Work & career; Money & finance;

Health & well-being; Family & home

#### **BMA Doctors for Doctors**

## www.bma.org.uk (click on doctors health & well-being)

Web based resource pack intended as a self-help tool to aid doctors in accessing appropriate help for any difficulties in which they may find themselves. Also contact

with doctor-advisers through BMA Counselling service. For BMA members only.

#### **The Sick Doctors Trust**

Tel: 0870 444 5163

#### www.sick-doctors-trust.co.uk

Undertake to provide early intervention and treatment for doctors suffering from addiction to alcohol or other drugs, thus protecting patients while offering hope, recovery and rehabilitation to affected colleagues and their families.

## **The British Doctors and Dentists Group**

Tel: 0870 444 5163.

Monthly group meetings for doctors recovering from chemical dependency.

#### **Independent Career Assessment**

www.medicalforum.com

#### **HOPE for Disabled Doctors**

#### www.hope4medics.co.uk

Help in obtaining professional equality for those with a disability or chronic illness.

#### SPECIFIC GROUPS:

#### **Medical Womens Federation**

## www.medicalwomensfederation.org. uk

Aims to advance the personal and professional development of women in medicine, to change discriminatory attitudes and practices and to work on behalf of patients.

#### **Psychiatrists Support Service**

http://www.rcpsych.ac.uk/member/psychiatristssupportservice.aspx

A confidential telephone advice line for members of the Royal College of Psychiatrists covering all subjects

including health, career and problems at work

Telephone 020 7245 0412

psychiatristssupportservice@rcpsych.ac.uk

#### **Anaesthetists**

Tel: 020 7631 1650

#### www.aagbi.org

An alternative contact for anaesthetists seeking help

#### **NON-MEDICAL**

Mind Tel: 0845 766 0163

#### www.mind.org.uk

The leading mental health charity in England and Wales. Work to create a better life for everyone with experience of mental distress

#### **Samaritans**

Tel: 08457 90 90 90

www.samaritans.org.uk

## **Financial Help**

BMA Charities Tel: 020 7387

4499

Including the Cameron Fund

**Royal Medical Benevolent Fund** 

Tel: 020 8540 9194 www.rmbf.org

The Royal Medical Foundation

01372 821011

www.royalmedicalfoundation.org

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# How to save money on your professional subscriptions while unemployed / on long-term sick leave / working reduced hours By Dr Louise Freeman

## General General Medi-Medical cal Council (GMC)

If your **total gross** income (from all sources) is below a set threshold for the relevant year, you can apply for a 50% discount on the annual GMC retention fee - see link below:

#### **GMC** lower incomes



The Medical Defence Union, the Medical and Dental Defence Union of Scotland and the Medical Protection Society all offer deferred membership for members who are having a career break. This is offered at no cost but each organisation has slightly different rules on what they are able to offer.



The BMA offers a salary link scheme to allow members with limited **professional** income to pay a reduced subscription fee see link below:

BMA subscription rates



Colleges

All of the medical colleges should consider an application to their treasurer for either deferred membership or a reduced subscription rate due to straightened financial circumstances of whatever cause. It is worth addressing this as early as possible as fee reductions are unlikely to be applied retrospectively.

# Tax allowances for professional subscriptions

Professional subscriptions are allowable against tax if you are still working as a doctor. Unless you normally receive a significant untaxed (and taxable) income from other sources such as cremation form fees, it is likely that you will profit overall from declaring your professional fees against tax. If you wish to claim professional subscriptions against tax, you will need to provide the Inland Revenue with the relevant details via a Self Assessment tax return.

The advice on this page is offered in good faith but it is the reader's responsibility to assess whether it is appropriate to follow the advice in their own situation. Neither the Doctors Support Network or the author can be held responsible for any consequences of following this advice.

## We are on Facebook!

Come and join us and show your support...



If You have received this newsletter via email, simply click the logo. If you have received a paper copy, then please visit Facebook, sign in, and search for us.

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## Continuing Professional Development

Some ideas of where to start with your own CPD:

#### Journal reading

Obvious, but where most of us begin if only to reduce the mountain of unread journals awaiting our return to work.

#### Internal teaching sessions

For employed doctors: If feeling well enough, it is possible to ask if you may attend relevant formal teaching sessions at your place of work.

#### **External paid for courses**

For employed doctors: If your medical advisers agree that you are well enough to undertake some CPD while on long term sick leave, then it may be worth asking your employer if they will consider funding relevant course fees.

#### **Deanery**

Your local deanery may offer a variety of learning opportunities for doctors within the region. If you are on long-term sick leave from an NHS post, you are likely to be able to access some valuable learning sessions for free or at reasonable cost.

#### **BMA library**

The BMA has a full medical library service for members with access to books and journals. Books are posted out to you by the library and returned at your expense. It is also possible to request copies of journal articles.

BMA library services

## BMJ Learning BMA mem-

**FREE** for

Excellent website with hundreds of online modules on clinical and relevant non clinical career development topics

**BMJ** learning

FREE for BMA members

#### **Colleges**

E-learning: Your college may offer free e-learning modules via their website. N.B. The Royal College of General Practice has some excellent free (for anyone) modules including the e-learning session for the Health for Healthcare Practitioners course.

Courses & conferences : Colleges may offer a reduced rate for retired members and it is worth asking if you could be treated as retired for the purpose of paying conference fees if you are on a career break due to ill health.

#### **Medical Protection Society**

The MPS offers an excellent series of risk management workshops which are free to members

in-

cluding those with deferred (free) membership.

MPS courses and workshops

FREE for MPS members

#### IT training

If you are not working and in

receipt of a government benefit such as Jobseekers Allowance (JSA) or **Employment Support Allowance** (ESA) you should be able to access relevant IT training without cost. There are many different providers, each with their own specific funding criteria in this field. One example of the type of IT training available is the European Computer Driving Licence **ECDL** which is widely recognised by the NHS as a badge of proficiency in the use of Microsoft Office. The ECDL qualification counts as 40 hours of CPD and, depending on the provider, may often be followed online at home. Your local Jobcentre Plus may be able to provide you with suggestions of appropriate local IT training providers.

FREE for JSA or ESA claimants

#### Tax allowances for CPD expenses

If you are still employed or working as a doctor in some capacity, expenses incurred for CPD events may be allowable against tax. You will need to inform the Inland Revenue of your claim for adjustment of your tax allowance.

#### CONTACT THE DOCTORS SUPPORT NETWORK

General: info@dsn.org.uk 0871 245 8376 Newsletter:

newsletter@dsn.org.uk

DSN is a thriving community of doctors with mental health problems. We offer a range of services from regional support meetings and social events to the more involved such as our flagship service the doctors support line (DSL) - doctors for doctors and entirely confidential. We would love to offer this for free but due to running costs and lack of funds, that would not be sustainable. Free online support can always be reached via our website.

PO BOX 360, STEVENAGE, HERTS, SG1 9AS

WEB: www.dsn.org.uk (login: members@dsn.org / password: bluesky)

DOCTORS SUPPORT LINE: 0844 395 3010 4p/min

#### **SUPPORT MEETINGS**

London & SE Support meeting are at Sally's house in Ealing, West London. Contact membership@dsn.org.uk

York Please contact Rosemary on either 01142305537 or lethem@doctors.org.uk for details

**North West** Regular support meetings or day trips run on an ad-hoc basis. Please contact astrid@dsn.org.uk to attend.

North East First Monday of the month at 18.00 near Haymarket in Newcastle. Contact Louise@ffzzz.plus.com

South Take place in Southampton; please call Helen on 07811 360 880 or email hj.plowman@googlemail.com

Midlands Please contact either Ruth at ruth@dsn.org.uk or Joy at joykdz@yahoo.co.uk

Scotland Often take place at Malcolm's flat; contact malcolmh@doctors.org.uk

Wales Take place in Cardiff; contact Clive at wales@dsn.org.uk

IF YOU ARE INTERESTED IN SETTING UP A SUPPORT GROUP IN YOUR OWN AREA, OR YOU WOULD LIKE TO ATTEND ANY OF THE EXISTING MEETINGS PLEASE CONTACT US AS ABOVE

#### THE DSN COMMITTEE

The committee has changed slightly for

2013, with Fiona stepping down as

chair at the 2012 AGM.

We would particularly like to thank the volunteers of the Doctors' Support Line,

who are not mentioned here.

The committee is now as follows:

Angelika: Chair

Louise: Vice Chair & Senior Editor

Howard: Treasurer

Ajay: Secretary

Sally: Membership Secretary

Rob: Chief Editor (Newsletter & Web-

site)

Ahmed: Junior Editor & Student Forums

Fiona: GMC Liaison

Matilda: Conference co-ordinator

Alison: Committee Member

Helen: Committee Member

Clive: DSN Wales

Malcolm: DSN Scotland

Other regular volunteers:

**Declan:** Forums

Richard: Fundraising

Tanya: DSL

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Come and join us and show your support...



If You have received this newsletter via email, simply click the logo. If you have received a paper copy, then please visit Facebook, sign in, and search for

## HE DOCTORS SUPPORT NETWORK

## WWW.DSN.ORG.UK

Contact us at info@dsn.org.uk

Peer support for doctors suffering from mental distress











**DOCTORS** FOR **DOCTORS** 



Anxiety







Personality





Depres-



- - Liaising with the GMC, NCAS and PHP
  - Expert advice to those undergoing GMC procedures on health grounds
  - **Anonymous email forum**
  - social outings and support meetings
  - The Confidential Doctors Support Helpline (see below)
  - **Regular informative newsletters**

Support Line: 0844 395 3010