



CWMT NEWS



The Newsletter of The Charlie Waller Memorial Trust

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Raising awareness fighting depression



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Letter from the Chairman

Dear Supporters,

Five years ago we co-funded a Chair at Reading University — that Chair is now called the Chair in Evidence Based Psychological Therapies. The aim was to train more therapists and counsellors and bring down the terrible waiting times being experienced by patients needing therapy. Its first Professor was Dr Roz Shafran and what a wonderful choice that turned out to be.

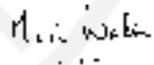
She formed as part of that department the Charlie Waller Institute (CWI). CWI was, and is, committed to training therapists in, and only in, psychological therapies that have been shown to work, and also to ensuring that the training impacts positively on clinician skill and patient outcome. CWI also became a South Central Strategic Health Authority selected training provider for the ground-breaking Department of Health's IAPT (Improving Access to Psychological Therapies) programme, securing a contract through to spring 2013. We hope that CWI is on the way to becoming a hub for training and training trainers to train GPs, practice nurses, persons involved with mental health in schools, employment etc.

CWI, thanks to Roz, runs workshops presided over by world renowned figures and have been a resounding success which we hope to build on and expand. Roz has also given freely of her time to support other activities of the Trust such as going into schools and advising the Trustees for which we are immensely grateful.

Sadly Roz has decided to retire from the Chair for family reasons but we are pleased to say that she has agreed to become a Trustee of CWMT and will keep a contact with CWI so that her advice and influence will continue to be available.

We are immensely grateful to Roz for all she has done, and are so very glad that she will not be completely lost to us.

I hoped to be able to say who her successor was, but the appointment process is still unfinished. This means that Roz will stay in post until January next year.



Mark Waller

Trustees: The Rt. Hon. Sir Mark Waller (Chairman), Alastair Barclay FCA (Treasurer), Robert Beaumont, Mary Bennett (Clinical Psychologist), Gordon Black CBE, The Hon. Sir Michael Connell, Mark Durden-Smith, Charles Lytle, Prof. Roz Shafran, Mrs. Susan Shenkman, Richard Waller

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REPORT FROM THE PROJECT DIRECTOR

At this, the half year point, the work of CWMT is progressing well. Our main focus is to continue to deliver high quality training in the regions supported by the charitable income of the Trust. Each trainer now has a series of targets about quantity of face to face training and target audience. We are also working to produce high quality training products, e.g. downloadable training materials for each type of course we deliver.

The training at the Charlie Waller Institute at the University of Reading continues apace. There is also agreement to investigate whether additional training of GPs and young people can be supported on a self sustaining basis at the Institute.

GP training is a particular focus for this year and we are pleased to report that the pilot work both in the North East and in Berkshire are developing well. We have three objectives: to raise the CWMT profile as a player in GP education, to create sustainable training systems including “train the trainer” approaches and finally to develop high quality materials to support the work.

The first objective is to raise awareness through the delivery of training and Dr Freer has been doing this extensively in her own region of the North East, but also travelling to Berkshire where she is now known within the GP training scheme. We hope that the sustainable approach will be achieved through extending this work to train existing GP trainers to deliver this particular training product. We are in the process of finalising a GP Toolkit and a DVD resource to support the training.

The student depression website now has an exciting new logo which will be used to publicise the site. Visit figures are up to 7,000 a month and showing the usual cyclical variations around the student year. The new analysis package allows us to identify university servers accessing the site. Cambridge University once again topped the list with 126 visits in the first quarter this year and the rest of the top ten were: Edinburgh College of Art (102), Oxford (100), Oxford Brookes (87), Warwick (85), Leeds (83), Cheltenham & Gloucester HE College (81), Surrey (81) Durham (77), Manchester (71) and Lancaster (69). The availability of this information allows us to target the publicity for the website more accurately.

We are always looking for more innovative ways of reaching students and so have explored an initiative called Memory4Students. This organization supplies encrypted memory sticks to students and from this summer the memory sticks will have a well-being channel including information on the SAD website.

Finally the 12S project in Scotland is drawing to a close and we are pleased to report that the project has been picked up as an example of research informing policy and practice. It will be written up and made available by NHS Health Scotland as a good example of partnership working over a challenging scope of work combined with continuing evaluation. There is a full evaluation of this project by the Mental Health Foundation and the report will be available in August. CWMT will be supporting two ongoing student projects managed by NHS Lothian for the next year.

The work of the Trust continues to develop and flourish and we are mindful of the need to evaluate and disseminate the outcomes of each project and training initiative. In this way we hope to reassure you that your charitable giving is well deployed and effective in achieving the aims of the Trust.

Dr Naomi Garnett

REPORT FROM THE TREASURER

Perhaps the most important thing when looking at the financial resources available to the Charity is to see that there are sufficient funds to meet the charitable work for which it was founded. From that point of view we are in a strong position. But we can not be complacent at a time when funds are under pressure and there is as ever an increasing need to continue rolling out the objectives of the Charlie Waller Memorial Trust.

Last year the Charity's income, including Gift Aid of £18,600 and investment income, was £311,000 for the year, compared with £402,700 in 2009. Charitable activities absorbed £287,500, slightly more than in 2009, and the cost of generating our income and running the Charity was £88,000, some £11,000 lower than in 2009. Over the year there was a net outflow of resources of the Charity of £64,500 which was met from reserves.

The Capital Funds of the Charity increased marginally to £993,400 during 2010, as compared with £974,600 at the start of the year. This was mainly because of the recovery in the market value and profits realised from the Charity's investments of £83,300, which covered the net outflow of resources above.

This year I expect that the cost of our charitable activities will be a little higher than in 2010, at about £300,000. As Rachel Waller says in her Fundraising report, we have had extraordinarily energetic and enthusiastic support, but so far this year our income has not reached the level that it did by the end of July 2010. And it seems at present that we are unlikely to see a repeat of the rises in the value of our investments that were significant last year.

As I wrote above, we do have the resources for our present commitments. But we will be relying more than ever on the continued generous support of our donors. There are details of the fundraising events planned for later this year on the inside back cover of this News and on our website (www.cwmt.org.uk). It may be early, but please put us at the top of your Christmas List!

Alastair Barclay (Hon Treasurer)

FUNDRAISING REPORT

We have had a remarkable increase in people achieving amazing individual feats for CWMT – these range from Fay Dellimore finishing her sixth Ironman Challenge to Marathons in London, Paris, New York and Berlin as well as cycle rides, rowing, Three Peaks Challenges and even dyeing hair bright pink! CWMT is hugely grateful for these individual efforts and also for all the many other fundraising events which are held to support the work of the Trust.

This ground swell of support is a testament to the fact that our work is vital, but also that people are happy to talk about and fundraise for depression and highlight the importance of mental wellbeing.

Rachel Waller

REPORT FROM UP (THE CWMT YOUNG COMMITTEE)

The Committee continues to work hard to raise awareness of depression, reduce its stigma and support CWMT with funds raised from our events.

Our focus has been on reaching as many people as possible outside the easy scope of our friendship group. Last year we held the over-subscribed Stand UP for Depression evening in the Union Chapel with Tim Minchin headlining. Our venue choice as well as the excellent comedic line-up enabled us to sell tickets to a wide number of people who otherwise would not have heard of the charity.

This success emphasised to us the importance of staging events with wide appeal and also the importance of social media — after Stephen Fry ‘Tweeted’ about the Stand UP event, when ticket sales rose dramatically. So we have been working hard to improve our website www.lookingup.org as well as planning the creation of Facebook and Twitter pages and feeds.

Event-wise this year we have held the very successful and fun Don’t Grow UP picnic (see separate report), run by children’s party organisers Sharky and George, and are currently planning 2011’s comedy night — Stand UP for Depression 2011 - which will be held at the Union Chapel on Thursday 24th November. Please watch the website for more details including the line-up.

Capitalising on the success of television shows such as “Come Dine with Me”, we will also be launching a large-scale, high profile dinner party scheme in September to spread awareness of depression and raise funds for CWMT at the same time. The first dinner party will be hosted by the UP committee as a reward for the winning team of Don’t Grow UP!

Tor Lansley and James Henderson



From left to right: Charlie Vaughan-Lee, Victoria Lansley, Charlie Astor, James Henderson, Max Shenkman, Katy Wellesly Wesley, Christopher Britton, Amy Macinnes

CHARLIE WALLER CHAIR AND DIRECTOR OF CHARLIE WALLER INSTITUTE

The recruitment process for a new Charlie Waller Chair of Evidence-Based Psychological Treatment and Director of the Charlie Waller Institute began in January 2011. Interviews were not held until July 2011. Unfortunately, nobody was appointed to the post. This raises a number of issues that are currently being discussed. I will stay until January 2012 and afterwards I plan to stay on one day a week as Professor of Clinical Psychology at the University of Reading, funded by the Charlie Waller Institute. I do not have plans to take up a post elsewhere immediately and am keen to ensure a smooth transition to the new Chair. The original funding arrangement for 60% of the Chair by CWMT was until April 2012 and there is an informal provisional agreement for CWMT to continue to fund the new Chair and Director of the CWI after this time.

TRAINING

Certificate, Diploma and Masters' Courses

The current cohort of Psychological Wellbeing Practitioners have progressed well. 25 students are anticipated to graduate this December. Of the High Intensity Diploma students, 16 are anticipated to have met all their course requirements by the end of the academic year and will be able to graduate in December. These are students undertaking their courses as part of the 'Improving Access to Psychological Therapies' programme funded by South Central Strategic Health Authority. Our contract with the Strategic Health Authority has been renewed and we anticipate having 16 trainees on the High Intensity course and 30 on the Psychological Wellbeing Practitioner course in October 2011 subject to recruitment. For our 'standard' course, 7 Diploma students and 8 Certificate students are expected to meet all their course requirements by the end of the academic year, with the remainder hopefully being able to meet requirements by the end of the calendar year. We anticipate 7 Diploma and 13 Certificate students will form the 2011-12 cohort, and the course will overlap significantly with the High Intensity Training.

Of particular note for 2010-11, we were delighted that Jackie Wilkinson, a student on our Certificate Course funded by a donation to the Charlie Waller Institute by the James Wentworth-Stanley Memorial Trust, won a West Berkshire Learner Achievement award for determination. Jackie commented 'The course has given me back my hope that I am not a write off because of my illnessmy achievement helps challenge the stigma and discrimination I and others have encountered because of our mental illness'.

Finally, we have had a great deal of interest in our Masters Course, and anticipate having our first two students enrolling in September 2011.

Short Courses

For the academic year 2010-11, we provided over 1620 days of training to over 500 external therapists and 282 therapists from Berkshire Healthcare NHS Foundation Trust. The training was provided by world experts who came to provide training in their area of expertise. Therapists' clinical knowledge and skills indicated a significant improvement after the training, and the results are reported in a peer-reviewed academic Journal. Our new programme includes a two day training by Professor Steve Hollon in Cognitive Behaviour Therapy for Depression, a day's training on using self-help materials to help at the earlier stages of intervention and further training and supervision in Behavioural Activation for Depression by Professor Christopher Martell. Depression is closely related to other disorders and so we have training by world leaders in a range of interventions, including anxiety disorders in young people, eating disorders, insomnia, health anxiety, pain, obsessive compulsive disorder and body dysmorphic disorder. We have been commissioned to provide 'top-up' training and supervision training as part of Improving Access to Psychological Therapies programme and these begin in September 2011. We will continue to evaluate the impact of all our courses.

Conferences/Meetings

Our conference on Autistic Spectrum Disorders and Mental Health in April 2011 was very successful with 157 delegates and excellent feedback. We also held a one-day meeting in Guildford in mid-July funded by the James Wentworth-Stanley Memorial Fund that aimed to bridge the gap between best practice in suicide prevention and the reality on the ground. The meeting was attended by academics, NHS representatives, charities and families directly affected by suicide. We are in the process of developing consensus statements and recommendations to help influence policy and clinical services directly. Together with Freda McManus from the Oxford Cognitive Therapy Centre, we are planning a conference in April 2012 on 'Self-Esteem and Self-Compassion' since depression is closely related to low self-esteem and there is increasing interest in helping people with mental health problems become more compassionate towards themselves.

Flexible training

These new flexible training courses allow students to accumulate credits at their own pace, and to create their own training courses from a range of modules according to their specific learning needs. The Basic Trauma module was well attended with 19 students, CBT with older people attracted 15 and the other modules totalled 11 delegates in all.

New Initiatives for 2011-12

The main new initiative for next year is the development of training for GPs and others working in primary care. We are doing this in close collaboration with the Charlie Waller Memorial Trust and plan to develop training courses for primary care

workers and ‘train the trainers’ courses. We hope for these courses to be self-financing by the end of the academic year and will evaluate their impact. We have also planned a new module on how to help people with multiple co-existing mental health problems.

NICE guidelines

I have been on the NICE Guideline Development Group for the identification and care pathways for people with depression and anxiety. The guidelines were published in May 2011.

Training clinic

The new training clinic is now up and running with a DVD library with examples of good practice in evidence-based psychological therapies and opportunities for patients to receive therapy. These sessions can be observed by student therapists and students on our courses will be able to do a placement in the clinic.

RESEARCH

The three other Ph.D. students are continuing their studies. Alex Gyani has recently completed his analysis of the national data collected as part of the ‘Improving Access to Psychological Therapies’ programme and the report is published on their website. It has also been presented at meetings and a national conference. Amanda Branson has presented her work evaluating training and Eva Zysk continues to work on improving our understanding of obsessive-compulsive disorder.

FUTURE PLANS

The Charlie Waller Institute has agreed a 5 year strategy which includes increasing the focus on research and expanding training using the internet and web. This will be done in the context of a changing NHS and University system. Although I will not be there to oversee it personally, I am honoured to have been appointed as a Trustee of the CWMT and combined with my day a week at the Charlie Waller Institute, I hope that I can continue to ensure some stability and that the Institute remains focused on delivering CWMT’s charitable objectives.

Prof. Roz Shafran

A NEW DEVELOPMENT IN COGNITIVE THERAPY FOR BIPOLAR DISORDER: THINK EFFECTIVELY ABOUT MOOD SWINGS (TEAMS)

I am a clinical psychologist, cognitive behavioural therapist (CBT Therapist) and researcher at the University of Manchester. In this article, I describe my group's work on CBT for bipolar disorder.

You may have heard about bipolar disorder, either because someone you know has the diagnosis, or someone in the news has recently been diagnosed. People who have the diagnosis of bipolar disorder are very varied, yet what they share in common is that they experience mood swings, sometimes lasting weeks or months, that interfere with their lives. The moods can range from euphoric highs to demoralising depressions, as well as experiences of irritability, panic and worry. Bipolar disorder is known as a severe and enduring mental illness. Certainly, many people are regularly admitted to psychiatric hospitals because their moods have put them at risk and some may tragically take their own lives. Nevertheless, many other people with the diagnosis manage in the community and may lead fulfilling lives. Evidence for this point of view was put forward strongly in a recent report by the British Psychological Society Division of Clinical Psychology. You can access it at: <http://www.bps.org.uk/news/download-free-report-bipolar-disorder>

Traditionally, CBT for bipolar disorder has focused on helping people to identify the signs of a relapse of a mood episode, and worked on teaching coping strategies to manage these signs to try to prevent relapse, or make it less severe. It also often uses techniques from CBT in depression such as scheduling activities and challenging negative thinking. CBT is typically provided alongside medication. Most of these studies have been successful in reducing relapse on average in the group of patients treated. However, there is a consensus that the effects are quite modest, leaving many people with chronic problems unresolved. The effects of current CBT is not in the realm of effectiveness that is achieved by CBT for many anxiety disorders, for example.

Our group has been involved in developing and testing a new cognitive model of bipolar disorder to guide our CBT. It is a model that is unique in trying to understand problematic swings in mood. It brings together information from patients with bipolar disorder from interviews and clinical practice, and integrates earlier theories about bipolar disorder within psychology.

At the heart of our model is the view that people have extreme and conflicting (positive and negative) beliefs about their moods and energy levels which come from their earlier experiences and information with which they have been provided. This means that they are in 'two minds' about their moods. For example, some people with bipolar disorder may believe that 'I need to be extremely active to solve all my problems and overcome my depression' which leads them to do many things to drive their mood upwards such as being active all the time so that they sleep very little. Yet the same people may also believe that 'When I am very active I make a fool of myself and get criticised' and so they then try to suppress their mood and its effects to avoid being rejected by other people, for example

through social withdrawal or overmedication. Our therapy helps people to challenge how much these extreme beliefs still apply to them, and see their moods as normal reactions that they can accept, tolerate and manage, rather than to continue to strive hard to enhance or avoid them. Instead of putting all their efforts into the meanings of their mood, we help people to see their longer term goals in life and the balanced place that moods have in achieving them. We work on present problems and life goals rather than focusing on relapse prevention. The name of our CBT reflects our focus - TEAMS — standing for Think Effectively About Mood Swings.

We have now published over 20 academic papers testing and generally supporting the model, so we are quite confident that it is valid. For example, we have found that people with bipolar disorder report more extreme positive and negative beliefs about high mood states. Yet, people with bipolar disorder who are less convinced by these extreme beliefs have less mood symptoms after a month, even when you account for their earlier psychiatric history. Our CBT aims to help people shift in this beneficial direction, and a recent series of seven patients treated with 12 sessions of the approach showed clear benefits that lasted over the six months that we followed them up.

Although our work is very promising, we need to carry out further research to show that the techniques based on our model are the reason why we find improvements, and that they can last longer. Therefore, this autumn we start a controlled trial to compare TEAMS with usual treatment in services to see if it has significantly better outcomes, and we will be testing whether the active ingredients of our therapy are what make it effective. We are working with a patron of MDF: The Bipolar Organisation to design the study and we will also be interviewing the people who receive the therapy to get feedback on what helps and where it could be improved. In three year's time, we should find out the results of our work.

At present, bipolar disorder is seen as a severe, lifelong illness. Unfortunately, this may indeed be the case for many people with the diagnosis. However, our research has also pointed to the fact that the severity and chronicity of these problems are variable, and that some people learn to manage their moods in a way that allows them to get on with a relatively normal life. Just as in the pioneering work on CBT for anxiety disorders, our research suggests that as people learn to question their worst fears of what their moods might mean, they free themselves to experience more of the normal range of feelings, and with it a more fruitful way of living. Mental health problems like bipolar disorder are often considered as untreatable by talking therapies, but our research, and work like it, challenges this view. This scientific evidence coming directly from service users themselves builds hope for others and confirms that CBT, and related talking therapies, have a valid and increasingly important role in services and in the community. Our team recognises that this theme chimes with the mission of the Charlie Waller Institute and its supporters.

If you would like any further information about our approach, please email me on warren.mansell@manchester.ac.uk. We can only provide our trial to the Greater Manchester area, but we are keen to share our approach with clinicians around the UK and further afield.

Dr Warren Mansell

Reader in Psychology of Psychological Sciences, University of Manchester

EVOLVING SELF CONFIDENCE: HOW TO BECOME FREE FROM ANXIETY DISORDERS AND DEPRESSION BY TERRY DIXON

(Help For Publications, £16.95)



‘The mind is its own place, and in itself can make a heaven of hell, a hell of heaven’, wrote John Milton in one of the most memorable lines from his epic 17th century poem *Paradise Lost*. Milton encapsulates, with wonderful perspicacity and brevity, the tricky hand that we have all been dealt. Whilst there is much joy to be found in our everyday existence, too many people — for a huge variety of reasons - suffer a living mental hell. Their minds

have travelled to an uncomfortable, unsettling place and there seems no way back. It is author Terry Dixon’s bold claim that he can rescue those minds and ‘make a heaven out of hell’. That is setting the bar very high.

Whether he succeeds or not is down to you, the reader. If you approach Dixon’s book with openness and hope, then there is every chance that you will find some answers on the rocky road to inner peace; if, however, you are sceptical, then *Evolving Self Confidence* is not for you. On a personal note, when I first read Allen Carr’s ground-breaking book about giving up smoking, I had no real intention of giving up and his advice was wasted on me. But when I re-read it, desperate to give up, it worked.

So, it’s crucial to be receptive to Dixon’s arguments and to see whether they resonate with you — and it helps that he writes with structure and clarity. He takes us on a journey from childhood, where the role of our parents is seen as absolutely pivotal, to adulthood. He examines the experiences, thoughts and feelings that can lead to the development of inner tension, social anxiety, panic attacks and depression. He discusses how they evolve and grow and which disorders develop and why, how we strengthen them and how they become part of us.

Having pinpointed the genesis of these mental problems, Dixon then tries to solve them (and he is not irresponsible enough to discount medication as a suitable remedy in certain circumstances). Intriguingly, he plays down the role of genetics, arguing that over 99 per cent of our DNA sequence is the same as other humans. It is, I think, important to adopt a mature view about this whole minefield of a subject because, whilst genetics do play a role in our mental make-up, it is hugely dangerous to overstate that role, because that means there is little hope for those locked up in their own

mental prison.

There is a particularly strong passage on alcohol and drugs, age-old refuges for those who want to blot out uncomfortable reality. It rarely occurs to the heavy drinker and the serious drug user that their form of 'self-medication' is making their problems worse, until they are in their very own version of Milton's hell. The author writes: 'Chemical imbalance in the brain, brought on by the excessive use of drink and drugs, does have an effect on both thought and behaviour and physical changes in the brain produce many abnormal thoughts and actions. Chemical imbalance and physical problems in the brain obviously affect the way we behave and cannot help against a background of conflict, fear and self-doubt.' For those with eating disorders, substitute the body for the mind, and the argument holds true.

The key to salvation argues, Dixon, and I am sure he is right, is to build up self-confidence and self-esteem and, having discovered the causes of mental instability and turmoil, confront those causes head on. A good starting point is Shakespeare's 'To thine own self be true', with that truth encompassing everything about oneself, from childhood traumas to stresses at work, through addictive tendencies and egotistical thoughts. It's not easy — and Dixon doesn't pretend it is. But there are plenty of coping strategies, such as surrounding ourselves with genuine friends, getting enough sleep, listening to our favourite music and taking pleasure in the simplest of tasks and pursuits, which make it easier to move from self-doubt to peace of mind. When we learn to be ourselves, and love ourselves despite everything that has happened in our lives, we can then begin to achieve what we previously only dreamed we could.

This thoughtful and sensitive book ends with an excellent exercise. Here it is: 'You are the amazing product of centuries of evolution and experience; one in six billion that can never be repeated. No other on this planet can experience the things the way you do. You are ****, ****, ****, **** and ****. You are yourself; that's all there is; that's all there needs to be, just you for you are unique.' Now fill in the ****s with some of the following qualities which could now, or soon will, apply to you: Intelligent, honest, kind, considerate, friendly, loyal, supportive, strong, wise, sensitive, sincere and good. As things improve, replace 'you' with 'I'. When you can stand in front of the mirror, look yourself in the eye, read the statement and know in your heart that it is true, then you will never need to be anyone else. You will also be closer to making a 'heaven out of hell, rather than a hell out of heaven'.

Robert Beaumont, Charlie's uncle.

AUTHOR JEREMY THOMAS EXPLAINS WHAT IT'S LIKE TO LIVE WITH MANIC DEPRESSION

Twenty years ago, if you muttered the words manic depression, people would dive for cover, as if you'd just lobbed a conversational grenade into the air. These days people are slightly better informed but often still think the subject requires them to start singing Leonard Cohen, karaoke-style.

Manic depression (also known as bipolar disorder) does not mean feeling terribly depressed. It is a serious illness in which people's moods swing between extremes of high, low and normal. I was fortunate that my illness was diagnosed at the relatively early age of 26. Although one or two of my highs had disastrous consequences, it could have been much worse. One in five manic depressives ends up committing suicide.

Having flown first class from New York to London, in 1981, I ambled down the steps of a Pan Am jumbo, delighted to see my girlfriend, brother and brother-in-law standing on the tarmac. Nothing seemed out of the ordinary, barring the absence of a smile on my girlfriend's face. I knew I'd been overdoing things slightly and, at my family's behest, had agreed to come home for a short stay at a health farm, which I was sure would soon sort me out. During the previous weeks, I had rented New York's most expensive hotel suite, hired the city's second most expensive call-girl and attempted to issue a million-dollar writ against American Express. Apart from that, things were normal.

Only when my girlfriend and brother-in-law insisted on sitting each side of me on the back seat of the car, and the locks clicked shut, did it occur to me that something might be wrong. It never crossed my mind to question how they managed to park on the tarmac. It seemed irrelevant that I took home the princely sum of £150 a week, and had spent three times my £7,000 bank overdraft limit.

It took six weeks of being incarcerated in the Bethlem Royal (the world's oldest psychiatric hospital and definitely not a health farm) before I began coming down to earth. I was told I was experiencing a manic depressive psychosis.

Initially I thought the diagnosis sounded rather attractive; something that Dylan Thomas might have had for a while. Looking back, I didn't understand what it really meant or why I had to stay at the hospital.

Nor was I aware of the worry and heartache I had caused to those around me. The overriding feeling was that of being a prisoner: I was trapped, unable to get out and rescue my business. It took another two weeks to fully come down from the psychosis and begin to acknowledge some of the damage I had caused.

"But doesn't everyone take risks like that?" I asked the psychiatrist. "Stall on a mortgage? Bluff a little?" "Yes," he said, "but what about the Middlesex Hospital Cancer Charity? They're asking what's happened to the concert you promised them with Stevie Wonder and Fleetwood Mac, to be televised from Wembley Stadium, to help buy two new scanning machines."

I worked in the music industry and my partner knew the manager of Fleetwood Mac. Did I really promise that? To the same hospital that had looked after my mother when she was dying of cancer? I felt profound remorse.

A month or so later, I came out of hospital and fell into a terrible gloom that even the lithium I was taking could not prevent. Being massively in debt and aware that I was no longer Superman didn't help. After selling my house to settle most of my debts, I bumbled along on a very low voltage for five months, unable to find work and believing that the game was up.

A few weeks later, an old acquaintance offered me an unsalaried partnership in a studio which jolted me back into action. Determined to pull off a mega deal, and aided by the bottle, I returned to New York and nearly succeeded. But the speed of NYC (and the booze) negated the lithium I had been prescribed, and a lesser version of the events of the year before happened all over again. Sadly, this pattern kept gaining in momentum and subsequently recurred in London, Hamburg, Paris and Wales.

I was brought up in a normal middle-class Catholic family. Educated by Benedictine monks, I thought the worst that would ever happen to me was that I might end up becoming a stockbroker. Having a sensitive skin did not stop me joining the music business at 19, and I became immediately successful, running a record label by the time I was 21. Sometimes I experienced brief extremes of mood. A couple of dips had occurred in my teens to do with catastrophic exams and romance, but I was largely able to cover them up. For the six years between 19 and 25, provided I kept moving, things turned out OK: the hits, the house, great friends and girlfriends.

Curiously, I became fond of alcohol rather than the cocaine preferred by those in the music industry. Drink seemed to keep the condition under control. But then, when I was 25, my mother died. We had been very close and it was a great blow. Shortly afterwards, I switched jobs and started a new record label with a friend.

I gradually slipped into my first serious trench of depression. My normally buoyant personality was immobilised by indecision and procrastination, feelings of hopelessness and uselessness. I had little energy, no interest in sex and suffered negative and suicidal thoughts, none of which alcohol seemed to fix. If anything it made them worse.

I had no idea that I might be suffering from an illness, instead believing it was all my fault. After a couple of months, despite my friends' and family's support, I dumped my girlfriend, told my business partner that I was leaving, and planned to top myself asap. There really seemed no other solution: I was so ashamed of my uselessness and failure. There were no books showing me what other people felt, no magazines or television programmes.

Jumping in front of a Tube train seemed to be the quickest method, though the one that required the most guts. I rehearsed it several times on two Sundays, hoping that I'd eventually have the courage to do it, but I didn't.

Instead, I performed a mental backflip, and went back to being me. But once reunited with the girlfriend and the partner, I became gradually more obnoxious, drinking hard and

playing harder: such is the cyclical nature of manic depression. Ergo New York followed by the Royal Bethlem.

Manic depressives don't look like Martians. They do not come out in green spots when depressed and orange ones when manic. They can function extremely well and are often wholly convincing in who they are or seem to be, because they completely believe it. Manics are supremely confident, fearless and believe that they're capable of anything.

As an undiagnosed or untreated manic, there is nothing you will not attempt: stealing trains, eating a dozen sheep's eyes, seducing Ann Robinson, stripping in public for a dare, taking the Pope out for lunch, walking on the edge of a 20 storey building. You take physical, sexual and financial risks that you would never normally take.

At full tilt, your judgment is severely impaired. But importantly, there is often real method in the manic's madness. The idea of the Stevie Wonder/Fleetwood Mac concert, for instance, was original and could have worked. Being manic can be the most wonderful feeling on earth. It can also destroy your life.

In 1982, 18 months after leaving the Bethlem and nine months after the final manic escapades in Hamburg and Wales - which cost me another girlfriend, a house and rendered me bankrupt - I met Tony Hughes, a young GP who became my friend and doctor. He patiently explained that the mood stabiliser worked only if taken regularly. For the first time, I started taking the lithium every day. I then accepted a humble but regular job in the music world. Predictably, perhaps, I couldn't accept the quiet life and, instead, became a fully paid-up member of the Hellfire Club and kept on drinking.

This led to a "breakthrough" of sorts; through the windscreen of my car. I had a horrific crash; asleep and drunk behind the wheel, I'd hit a lamppost. I broke my jaw, nearly lost an eye, and once more another lovely girlfriend exited stage left.

The turning point came when I agreed to do the two things I'd vowed I never would: give up drinking and join a self-help group. Tony helped me through the first rough patches but the group explained many unanswered questions I had harboured for most of my life. The second bus stop on the road to Damascus was to finally say farewell to the music industry before it said farewell to me, and to start writing full time. I was lucky: I landed two commissions - a film script and a novel, appropriately named, *Taking Leave* (published November 16, Timewell Press, £14.99). I moved to Greece, where I was forced to confront things from my past that perhaps should have been dealt with in therapy. And by the time I came back six years later, I had taken the necessary steps to change my life completely.

Although my middle names are not "squeaky" or "clean", I continue to take lithium, and don't drink or take recreational drugs. I'm not exactly normal but nor do I wish to be. I've learnt not to set myself unrealistic goals, to avoid things that can trigger the illness and, most importantly, to try not to take myself too seriously. I am now happily married, and life has turned full circle. Anyone can suffer from manic depression.

Accepting that you have the condition, understanding how it affects you and finding out what you can do about it are the first steps to being in charge of it - as opposed to it being in charge of you.



Prof. Roz Shafran

Robert Beaumont continues his series of profiles of people who have made a major contribution to the Charlie Waller Memorial Trust with an interview with Roz Shafran

Mark Waller, as befits a former senior Appeal Court judge, is not prone to hyperbole. So when he says that the appointment of Roz Shafran as chair of the Charlie Waller Institute of Evidence-based Psychological Treatment at the University of Reading was “one of the very best things that had ever happened to CWMT”, we should take what he says very seriously.

Mark pays tribute to Roz, who is stepping down from her post, in this newsletter and I will endeavour not to repeat all of what he

says. But it is worth putting the work that Roz has done for the Trust into context because that work doesn't just underline Roz's utter professionalism, but also her complete commitment to the cause of treating depression.

The aim of the Charlie Waller Institute was (and is) to train more therapists and counsellors and bring down the lengthy waiting times experienced by patients needing help. Roz was CWMT's first Professor and, as Mark says, “what a wonderful choice that turned out to be”. Another CWMT trustee has described her simply as “the complete package”.

Roz has ensured that CWI is on the way to becoming a hub for training GPs, practice nurses and other professionals involved with mental health in schools and employment. CWI also runs workshops presided over by world-renowned figures, thanks to Roz. She has not just gone the extra mile for the Institute and the Trust, she has gone the extra marathon.

Don't just take our word for Roz's brilliance, though. Last year she won the British Psychological Society's Award for Distinguished Contributions to Professional Psychology. This mid-career award is made each year to recognise and celebrate a psychologist who has made an outstanding contribution to professional practice.

Nominating her for the award, Professor Emeritus Stanley Rachman from the University of British Columbia described Professor Shafran as “an outstanding scholar and a brilliant and extraordinarily productive clinical researcher”.

Roz herself would blush at all this praise. She is unfailingly modest about her achievements, which include an extremely rare Congratulatory First in Psychology at Oxford University (that's when the examiners stand up and applaud the candidate for his or her outstanding work). Indeed, when we met for a civilised and hugely enjoyable

drink on a warm summer's evening in Bloomsbury, she was worried that she wasn't really worthy of a profile in CWMT's newsletter. What tosh.

Born on January 1, 1970, Roz was brought up in the comfortable surroundings of Hampstead and educated at North London Collegiate, the leading independent girls' school. But Roz's childhood was influenced by her mother suffering from a form of obsessive compulsive disorder (OCD), which made her very superstitious.

"I suspect her condition stimulated my interest in psychology, the make-up of the brain and nervous disorders. By the age of 13, I was writing essays on anorexia nervosa and, by the age of 16, I was pretty sure I wanted to be a psychologist," she explained.

After Oxford, which she loved, Roz worked as a research assistant at the University of British Columbia, where Professor Emeritus Stanley Rachman recalled: "Within six months she was planning and supervising the design and conduct of complex experiments."

She then returned to London and completed her PhD at the Institute of Psychiatry. In 1997 Roz won the Society's Award for Outstanding Doctoral Research Contributions to Psychology and in 1999 obtained a doctorate in clinical psychology from the Society. She was awarded two Wellcome Trust Fellowships before taking up the CWI chair at Reading.

Roz has contributed to more than 50 peer-reviewed articles and seven book chapters, as well as being the joint author of the books *Cognitive-Behavioural Processes Across Disorders: A Transdiagnostic Approach to Research and Treatment* (OUP, 2004) and *Overcoming Perfectionism* (2010).

Prof Stanley Rachman said: "Originality is a striking feature of her work, and remarkably this is evident in both her specialities – anxiety disorders and eating disorders. Her publications are so extensive that it is difficult to single out the most valuable, but in my opinion her analysis of the cognitive biases that sustain obsessive-compulsive disorders, and play a part in maintaining eating disorders, are exceptionally fine."

As a psychologist, Roz has always been acutely aware of the pressures of the work-life balance, and now, with three young children growing up rapidly and with a husband who works predominantly in Europe, she feels it is important to devote more time to her family.

Roz admitted: "Stepping down from the chair of CWI is not a decision I have taken lightly, but I have been deeply honoured to be asked to become a Trustee of CWMT, so I will continue to be involved in the Trust.

"As a charity, CWMT is a cause incredibly close to my heart. Sir Mark once said, so bravely, that he would do anything to prevent what had happened to his family happening to another family. That thought has underpinned and driven all my work at Reading. I hope it's been a success."

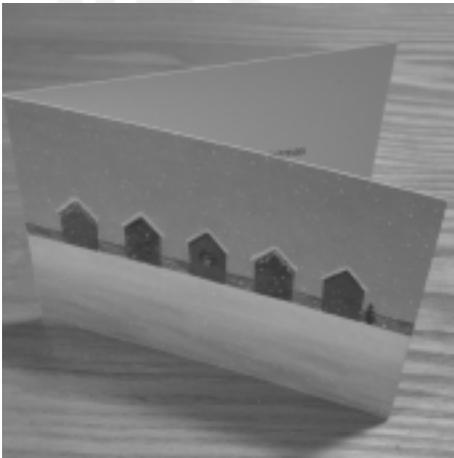
It certainly has, Roz, it certainly has.



MESSAGE TO ALL WHO RECEIVE CWMT NEWS BY EMAIL

This is to let you know that CWMT Christmas Cards are now available.

Cards and prices can be viewed on the website www.cwmt.org.uk where you will also be able to download an order form.



FUNDRAISING

SAVE THE DATE

Monday 12th December at 7.30 p.m.
St. Luke's Church Chelsea!

IRONMAN LANZAROTE

I am pleased to tell you on Saturday 21st May I completed Ironman Lanzarote. My day started at 3.45am when I got out of bed before any of the 4 alarms I set went off!

I had a couple of teaspoons of honey and some energy drink for my breakfast, collected my bags up and left my apartment to get on the 4.30am bus that was laid on to take the athletes the 30 minute journey to the start area. I had racked my bike in its allocated slot the day before along with 2 separate bags with my bike and run clothing, food, tools, etc.

I admit I was feeling very nervous on the morning of the race because I could see how windy it was and with those 10kgs extra I knew I was carrying I was worried! One of my very good friends was right there at absolutely the right moment to remind me of what I have achieved so far and her words "you are the strongest person here!" got me right back into the zone!

At 6.40am, with my wetsuit on, I walked down to the beach start area where many of the 1350 athletes had already begun to take their starting positions. If you have never seen an Ironman swim start it is quite an amazing sight. Everyone was running into the sea wanting to establish a good position, trying not to get kicked, trying not to get boxed in and trying to establish a good line that gives them the shortest swim. In Lanzarote, with over 1200 of the 1350 starters being men, testosterone as you can imagine was running pretty high! I am not a fast swimmer and in the past I have started near the back which has meant that I got stuck in 'traffic jams'. So, I had made the decision to start near the front even though I knew it meant I might get kicked or swum over. My training for swimming the English Channel last year means the sea holds little fear for me and I decided I could cope with whatever the consequences of my decision might be. I wrapped an extra pair of goggles around my wrist just in case mine got kicked off! The start gun went off at 7am and we were off. I stuck to my line close to the course markers and I had a great swim. Yes it was pretty frantic at the start but I gave as good as I got!

The 2.4 mile swim I completed in 1 hour and 27 minutes with a short run to collect my bike bag and into the tent to change. I am notorious for not being the fastest in

transition and in past races I have taken around 20 minutes. I always feel like I am going as fast as I can, but my main thought is that I know I am going to be out there for a long time and want to make sure I have everything and all my exposed bits are covered in sun cream! All that said, knowing I needed every minute, I pushed myself and got through in just over 12 minutes.

The 112 mile bike ride did not go as smoothly as the swim and I knew I was in a race against time when I got to my own personal 'checkpoint' an hour later than I had planned. It was so ridiculously windy that even the slightest incline felt like a mountain. That said Lanzarote is pretty hilly even without the wind. In a conversation I later had with the 6 times Ironman World Champion she said she had never experienced anything like it in her entire career. There were a couple of moments when I really didn't know if I could make the bike cut off. I thought about the amazing support people had given me and that really inspired me and motivated me to push harder. I made up time on the last 40 miles of the course and got back to transition after 9 hours and 2 minutes on the bike well before the 6.30pm cut off.

I did my fastest bike to run transition and with a quick 'powder room' break I was changed and out on the marathon in just over 13 minutes. Off I shuffled at 5.54pm knowing I had not done any run training for fear of upsetting my knees. The cut off time for the race is midnight, anyone who finishes after then is officially DNF (did not finish)! I knew I was going to have to keep shuffling as fast as I could and walking was not an option. That very friend who helped me with her words of encouragement many hours ago before the swim was once again there when I needed her; I said to her 'I don't know if I can do this, it's going to be so tight!' to which she replied, 'you can do it, go on, go for it!'. So that is what I did. I was totally focussed and thought about Charlie Waller and how much I was doing it to honour his memory. I crossed the finish line at 11.46.50pm!

Once again...THANK YOU SO MUCH TO EVERYONE FOR ALL YOUR SUPPORT OF ME AND THE CHARLIE WALLER MEMORIAL TRUST.

Fay Dellimore

ANNUAL BRADFIELD CRICKET TOURNAMENT

The tournament welcomed back some of the usual (loyal) suspects: the Tappers, the Elstree Gents, the Wombles, the Waifs and Strays and the Whippersnappers. We also saw the arrival of the ironically-named (I think) "Eventual Winners" (one of only two teams in the tournament not in fact to win a game... although the captain's wife did walk away with the prize for the best cake).

Those of you lucky enough to have been to the Hollycombe Steam Fair will have marvelled at the creaky machines from a distant era still entertaining the masses. The same can of course be said about many of those that graced the green swards of Bradfield on a fine day in July.

The first round began in the dull light of a brightening day. It was not long before the 'Eventual Winners' were forced to start looking for a more suitable team name. Meanwhile, the actual eventual winners proceeded gently enough, until a monstrous six from bruiser Longfield cleared the squash courts and crossed the road. This set the tone for some explosive hitting for the rest of the day.

With the pre-tournament favourites the Whippersnappers (who included ex-England legend Mark Ealham in their ranks) consigned to the plate competition everything was now to play for.

The final saw the Gussets meet their old foes the Elephants, and as the sun had gained strength throughout the day, so it seemed had the Gussets. Longfield, Barker and Jardine -Brown all did their bit - these names are beginning to take on the same sepia tinged feel of Compton, Dexter et al, certainly for the younger generation that have grown up around the edges of these fields. However, it was Arbib with a magnificent 72 and Arscott with a blink or you'll miss it 37 that were the match-winning performances; by the end an unassailable 178 was on the board. The old master West could have just sat back on his heels defending a total that big, but the effort that went into his stumping attempts (several successful) had to be seen to be believed. Others flung themselves about the field and boundaries to prove to their children that there was still life in the old Gussets yet. All in all an unstoppable force that reclaimed the trophy that has been absent from our mental mantelpieces for too long.

The Elstree Gents triumphed in the plate final. The great David Cooper, who sadly passed away earlier this year, would have been proud to see his Elstree charges (three of whom were playing for the Gussets) secure all the silver-ware.

What a day. As ever the cricket was supported by an army of catering and logistical support that would do the Olympics proud next year. Let us hope that the bodies are still willing and we can continue to have such fun while remembering why we are playing.

Burt Reynolds

LONDON MARATHON — SUNDAY 17TH APRIL 2011



Kiri Summers

On a glorious sunny early summer morning, Ed, Lavinia and I made our way to Horse Guards to set up camp as the meeting point for the 7 runners.

The excitement and sense of anticipation were tangible. The crowds were building and I was concerned as to how we would ever find our runners in the enormous throng of people. We set up the banner right by the C/D post in the hope that we would be visible.

Almost as soon as Dottie had set up her massage table, the first of the runners appeared through the crowd. Ian Newland (3.29). He was followed very shortly by CWMT Henry Watt (3.45). Then Tim Gill appeared (3.46); followed shortly by Kiri Summers (4.21).

Dottie set to work on them one by one and she worked tirelessly and, as she does not wear a watch, she treated each of the runners until she felt that she had done what was necessary. Each one looked much relieved by and very appreciative of Dottie's care.

As each of the runners took their turn on the massage bed, we were asked numerous times by very tired looking runners if massages were available (note for other charities to follow our lead).

It was great fun to meet these runners, they had incredible courage and they all seemed to be in very good shape despite gargantuan effort of running 26 miles on a rather humid and hot morning.

Arriving next was Steven Johns (4.13) closely followed by Jon Busby (4.34) and Tim Burton (5.17).

There were so many sights to inspire us — the blind runner, the elderly gentlemen who has run 30 marathons, the soldier running in combat kit and helmet ... Everyone had a story and motivation and it was really wonderful to be part of it.

It was fun to meet the runners' families and to celebrate their success with a toast of champagne (note: for next year — some ice for the champagne, water and some folding chairs).

We strolled back across St. James's Park in what was almost a carnival atmosphere. There were loud cheers and applause for the few runners pounding down Birdcage Walk. London was bathed in late afternoon sunlight and seemed prepared for the next celebration. Did someone mention a wedding?

Anna Gage

UNIVERSITY X FORD ROW TO LONDON

Arriving in Putney at 8.45 on Wednesday evening, I think all eight of us had no doubt that we had just completed the greatest physical challenge of our lives to date, which is significant due to the presence of a couple of varsity sportsmen in the boat. The previous two days had been a painful experience for us all; even the Cox was starting to get sore!

We started out in fine weather from Oxford — indeed the excessive application of sun cream meant we left about twenty minutes late. Even more delayed was our encounter with the first lock merely 2km away from the University boathouse. With an arts student failing to get to grips with the opening of the lock, we were eventually on our way again after enlisting the help of our Engineering *doctorial* candidate sitting in the four-seat. The first morning was predictably the most pleasant: sunshine, beautiful stretches of river and high spirits. By the time we reached Wallingford to stop for lunch at about 1.00 at the Oxford University boathouse (which incidentally was a last minute change from Wallingford boathouse —somehow we had managed to overlook its existence!) we were all starting to feel the ache in our legs, and this was not even a quarter of the way to Putney.

The afternoon came with rain, but also with a new focus. In our summer eights competition we had always referred to racing as ‘business time’ and the same can be said for Tuesday afternoon. At one point we rowed about 8.5km in 36 minutes, which is almost twice the speed of the Thames (motor) speed limit! By the time we arrived in Caversham at about 5pm for a quick afternoon break, cramp had already kicked in, along with the realisation of the task ahead of us. Stopping for the night at Henley about two rowing hours later, everyone was truly exhausted, with an even longer day ahead of us. The afternoon rain had also nicely softened our hands, which is perfect for acquiring blisters! Keeping us going through the afternoon was the thought of the money raised and the lives it will help.

Waking up the next day sore but better for a night’s rest, we got going an hour earlier from Henley, enjoying the historic rowing sights the town had to offer. After about 10km, however, we had accepted that the stiffness and aching was not only not going to go away but would only get worse. We powered through some further beautiful parts of the river to lunch at Dorney Lake, the site for the Olympic rowing, at midday. While lunch should be a high point, this was not the case for us as we realised that although we had done 30km that morning we still had another 60km to go. I had had some problems with my footplate: the left shoe had ripped across the middle and was becoming impossible, not to mention uncomfortable, to row on. Fortunately, the kind boatman at the Army boathouse at the lake lent me a new footplate. In fact, as the day went on it became increasingly obvious (to me at least) that my seat was cursed: the support under the slide was dislodged and interfering with my stroke. To add to all this, after we

had landed at Putney I discovered that my oar was filled with water, weighing about 3kg more than it should!

On the afternoon of the second day, it is fair to say that we were all in agony, just counting down the locks and kilometres. In fact, for the majority of the second day we rated at about 29 strokes a minute, which is really quite a pace. Having passed under the M25 at around 4.30pm, we were confronted by a severe headwind and several white horses, which meant we had to row with six people at a time, two balancing the boat. A break at Walton Rowing Club at 6pm was needed but we were all but done with another 30km to go. At this point, the pain had reached a plateau with several members of the crew surviving on Ibuprofen! We rowed hard, with the thoughts of reaching the Tideway firm in our minds. Finally, we made it to the last lock at Richmond at about 8pm with only 15 kilometres to go. We rowed that last section, the last 7km of which is the boat race course, without a break and even noticeably increased the pace. By the time we reached Putney none of us felt remotely like celebrating and a couple had to be helped out of the boat.

Now I have had time to recover, I can look back on the experience as one of my most worthwhile achievements. The pain has subsided but the money raised for these two incredibly deserving charities remains, and this is a testament to generosity of everyone who donated. As much as it may sound like an advert from the TV, it really was the thought of this money that kept us all going. And for this support. I cannot thank you enough.

Toby Fish

Row to London in aid of Rape Crisis & CWMT

TENNANTS PRIVATE VIEWING

The private viewing of the Summer Catalogue Sale at Tennants is a major event in Yorkshire. The charismatic Rodney Tennant invites over 300 people to his most impressive Auction Centre in Leyburn. This year Anne Gloag arranged for CWMT to be the chosen charity on the night. The evening was a great success. Anne's granddaughters Emily and Sophie and grandson Charlie sold raffle tickets very efficiently. I made a brief speech about the objectives and achievements of the Trust.

These events are very beneficial in that not only do they raise much needed funds, but they provide an opportunity to talk openly about depression, which all helps to reduce the stigma of mental illness.

Gordon Black

MEXICAN SCRAMBLE AT HEXHAM GOLF CLUB

Organised by Colin and Di Dickinson, Tony Dixon, Ann Herbert and Freddie Hoult, all old friends of Mark Waller, this was the first major fundraising event for CWMT in the North East.

The Committee not only managed to raise 16 teams and generous prizes for both the Ladies, and Gentlemen's teams but secured sponsorship from local companies for each of the eighteen holes.

Situated in part of the grounds of an ancient leper hospital, with its Club House built on the site of the old St Giles Hospital (founded 1114 in the depths of the Northumberland countryside), the course offers players the opportunity to glimpse mature, gracious trees and wide views of the county towards Hadrian's Wall between shots.

The day began with delicious bacon butties in warm sunshine, although, a few of the later starters did get a bit wet by the time they finished the 18th and were able to return to the Club House for a well earned lunch after which came the prizes.

The winners of the Ladies Team were **The Angels of the North** (Helen Holmes, Maureen Leighton, Michelle Shallcross Ros Reay) with **The Brewin Battlers** (Campbell Maclachlan, James Little, Nick Lee, Ian Nagel) claiming the honours for the Men. Other awards went to:-

Team Runners Up **The Woodpeckers** (John Bishop, Richard Bridges, Warwick Milne, Kevin Walsh)

Ladies' Longest Drive **Carol Southern**

Men's Longest Drive **Nick Lee**

Nearest The Pin **Jonathan Brown**

From beginning to end this was an extremely enjoyable occasion

Peta Hoult



Freddie Hoult, Peta Hoult, Anne Herbert, Di Dickinson

Members of the Committee missing from the picture are Colin Dickinson (Chief Organiser) who was so busy never staying in one place long enough to be photographed and Tony Dixon who perhaps is camera shy



DON'T GROW UP 2011

On a warm and sunny July evening, 100 late twenty-somethings emerged from the City and into Hyde Park, dressed head to toe in neon, to take part in the second annual Don't Grow UP! event.

Organised by UP (the CWMT Young Committee) and hosted by Sharky and George, the best children's entertainers in London, ten teams lined up for hot dogs, cocktails and Firefly drinks to fuel them for some of the most spirited children's party games ever seen in the Capital.

The prize was a dinner party for the winning team, hosted, cooked and served by the UP committee so, after some serious team talks, warm ups and psychological warfare





amongst the teams the fun commenced.

Everyone returned to their childhood with Tug-of-War, Sock Wrestling, Grandmother's Footsteps, Catapulting Waterbombs, Sharks and Lifeguards and many more classic party games.

No children's party would be complete without a few grazed knees and bruised elbows and the evening didn't disappoint as a healthy competitive spirit began bordering on aggression to win the coveted prize! Amy Macinnes and her band of purple neon warriors were victorious and will be the ones looking forward to a gourmet meal served up, with just a little bitterness, by the rest of the UP committee!

The revelry continued at Kitts nightclub on Sloane Square where everyone retired to lick their wounds, have a drink and a dance and reflect on what could have been!

Charlie Astor and Tor Lansley



THE KINSKY TRIO

Martin Kasík (piano) Lucie Sedláková Htlová (violin) Martin Sedlák (cello)

There was an air of excitement and anticipation as the audience, friends of CWMT, music-lovers and gathered for drinks served by Charlie's two brothers, before the concert. Few of us had heard of the Kinsky trio, but we knew from the family that they were young and exceptionally talented. In the event we heard performances full of exuberance, skilled playing, emotion and musicality.

The evening started with a fine rendering of Haydn's Trio in G Major with its romantic and beautifully played poco adagio slow movement. One had the feeling that this was the sort of music that the majority of the audience were used to and liked. The applause at the end of the Haydn signified 'This lot are good' - how good we were about to discover in the Debussy and especially in the Dvorak.

The Debussy was a piece from the composer's youth showing the influence of Beethoven and Schubert. Lovely harmonies, nothing hugely novel, and your correspondent would not have guessed it was Debussy from his (rather limited) knowledge of later Debussy.

There was a short interval before the highlight of the evening: Dvorak's Piano Trio in E Minor (Dumky). We immediately felt that the players were completely at home with this major and technically demanding piece. The contrasts in the six sections of mood and texture were brilliantly drawn, the playing crystal clear and full of charm, and the players in complete, almost uncanny, harmony. I say brilliantly as this was playing of the highest calibre (no surprise that Martin Sedlák, who had attended master-classes of Rostropovich, was warmly recommended by the great master). The intuitive rapport between the cello and the violin was central to this performance

Trio playing of the highest class and an unforgettable evening for all those present.

Hamish Aird

OTHER MAJOR FUNDRAISING ACHIEVEMENTS

James Acheson-Gray & friends – Cycle Ride to Paris

Covering an incredible 211 miles in 48 hours J A-G & friends were met in Paris by their wives

Callum Thompson – Three Peaks Challenge

Thomas Woodcock, Peter Warman, Andrew Thorpe & Naomi Warman – Three Peaks Challenge

Tara Craig – For dyeing her hair candy floss pink

Ruth Barber – Paris Marathon

HELP CWMT BY MAKING US MORE EFFICIENT

An ongoing challenge Marigold and I face is keeping our database up-to-date so we would be grateful if you could take the time to inform us if:-

(a) any of your details are incorrect. The information required is given below

Change of Address

Change of Name

(b) I/we would like to receive future editions of the Newsletter by Email

(c) I/we would like to be removed from the mailing list

Bronwen Sutton

MAKING A DONATION

There are various ways to make a contribution to the Trust all of which would be greatly appreciated:-

REGULAR DONATIONS

A Banker's Order form (including a Gift Aid Declaration for UK taxpayers) can be found on the reverse of this page

ONE-OFF DONATIONS

If you simply wish to make a one-off donation please enclose it with the completed Gift Aid section on the reverse of this page, if you are a UK tax payer

JUSTGIVING

In 2006 CWMT embraced the 21st Century and became part of the virtual world by registering with the Charity Website JUSTGIVING.

The site is extremely convenient as it allows you to donate securely online, using a credit/debit card (www.justgiving.com/charliewaller/donate) JUSTGIVING can also be accessed by using the link on the CWMT website.

THE IMPORTANCE OF GIFT AID

The Gift Aid scheme, covering charitable donations made by UK income tax payers, is becoming increasingly significant both to charities and donors. Our Gift Aid tax recovery alone covers a considerable part of the annual support costs of a Waller Mental Health Trainer, as we are able to recover 25p on each £ donated by a UK tax payer. But equally important, providing the donor declares the donation on his or her tax return and is liable to income tax at the higher rates of 40 or 50%, the higher rate tax will be refunded by Her Majesty's Revenue and Customs to the donor or, alternatively can be paid by HMRC directly to a charity; and the refund itself would qualify as a further donation for Gift Aid tax relief. A virtuous circle indeed!

If you have not already lodged a form with us and would like to make your past or future donations under the scheme, please complete the form overleaf and send it to us.

BANKER'S STANDING ORDER FORM

Please complete your details below in block capitals, sign and date the form then return it to:

Mrs. B. Sutton, Secretary, c/o Charlie Waller Memorial Trust, 16a High Street, Thatcham, Berkshire RG19 3JD

Name & address of donor(s) To.....

bank in full: of

Please pay to:

National Westminster Bank (56-00-13), Aldwych Branch, PO Box
221, Connaught House, 65 Aldwych, London WC2B 4EJ for the
credit of the Charlie Waller Memorial Trust (Account
No.86310232)

The sum of.....

(in words).....

Date when payments should start: Every month Every quarter Annually

Starting on the(day) of.....(month).....(year)

Please allow at least one month from the date of sending this form to CWMT.

Signature:

Date:

Full name in capitals: Title.....

Name.....

Account to be debited:

Account No.

Sort Code:

This instruction cancels all previous instructions in favour of the Charlie Waller Memorial Trust (Registered Charity No.1109984)

giftaid it

Simply sign below and for every £1.00 donated CWMT can recover an additional 25p from the Inland Revenue.

Please regard this and any future donations to the Charlie Waller Memorial Trust (Registered Charity No.1109984) as Gift Aid. I confirm that I am a UK taxpayer and will have paid sufficient income tax or capital gains tax during the current tax year to cover the tax reclaimed on this donation.

Signed:

Date:

Name:

Address:

Postcode:

NOTE: You must pay an amount of income tax or capital gains tax equal to the tax which the Charity claims on your donations; you must remember to notify the Charity if this ceases to be the case.

FORTHCOMING EVENTS 2011

SUNDAY 6 NOVEMBER

New York Marathon. Good Luck and thanks to Henrietta Morlock

TUESDAY 8 NOVEMBER

Recital - Gray's Inn Hall, South Square, London
Damian Falkowski violin - Paul Wee piano

THURSDAY 24 NOVEMBER

The Union Chapel, Islington 'Stand UP for Depression'

Following the success of last year's sell-out of the comedy night 'Stand UP for Depression', UP (our junior committee) have decided to hold the event again this year. Put the date in your diary now and keep an eye on the UP website (www.lookingup.org) for details of the bill and ticket sales

MONDAY 12 DECEMBER

Carol Service, St Luke's Church, Chelsea

2012

TUESDAY 24 JANUARY

Quiz Night - St Columba's Hall, Pont Street, London

TUESDAY 28 and WEDNESDAY 29 FEBRUARY

Aga Cookery Demonstrations
Contact Diana Wainman, Tel: 01256 770253, E-mail: diana@wainman.net

SATURDAY 17 MARCH

Concert Dorchester Abbey

THURSDAY 19 APRIL

Shackleton Lecture

Berkshire venue to be confirmed

SUNDAY 22 APRIL

Virgin London Marathon

Anyone interested in running please call or email the CWMT office

SUNDAY 8 JULY

Annual Bradfield Cricket Tournament.

ROOFTOP LUNCH - BABYLON

Date to be confirmed

To keep up-to-date with future events please visit our website www.cwmt.org.uk or contact the office, Tel: 01635 869754; E-mail: admin@cwmt.org

SOURCES OF HELP AND ADVICE

CWMT is not in a position to offer advice. If you or anyone you know is feeling depressed, then medical help must be sought. However, listed below is a small selection of organisations where help may be obtained. The services offered by these agencies are intended to augment, not replace, medical advice.

NHS DIRECT 0845 46 47

NHS STRESS LINE 0300 123 2000

SAMARITANS 08457 909090

YOUNG MINDS PARENTS HELP LINE 0808 802 5544
(For parents with a concern about their child's emotional problems or behaviour)

PAPYRUS HOPE LINE 0800 068 4141
(For practical advice on suicide prevention – particularly teenagers and young adults)

MAYTREE 020 7263 7070
(A residential sanctuary for the suicidal, for adults)

STUDENTS Visit www.studentdepression.org

We hope this short list proves useful. For further information go to *Sources of Help* at www.cwmt.org.uk

Inclusion here does not mean that CWMT recommends or endorses any of these agencies above others working in the same field, nor can we guarantee that the organisation will have a solution to your particular problem. It should be remembered that information on the Web is not always reliable and some of it must be treated with a touch of caution; special care **MUST** be taken if consulting sites claim to offer medical or pharmacological advice.

All details correct at time of going to press.

