



HAPPY TO HELP: Staff at The Haven Project, Colchester, from left, chief executive Heather Castillo, social inclusion assistant Tracy Davidson, administrator Helen Boyden and social inclusion co-ordinator Inez Davies
Photos: ANDREW PARTRIDGE

Breaking the cycle of quiet desperation



A FEW weeks ago, Heather Castillo, chief executive of The Haven Project, gave a public talk in Colchester on her area of expertise: personality disorders. The condition is much misunderstood, she told her audience, yet it is estimated that up one in 10 of the population could be affected by it in some way.

Traits such as self-harm, mood swings, eating disorders, depression, acute anxiety, drug and alcohol abuse, even anti-social behaviour could all be mechanisms used by sufferers to cope with the intensity of their feelings.

Of course, there are degrees and Mrs Castillo admits she is only likely to see those at the severe end. The rest are out there in the population, struggling on with day-to-day life, maybe never discovering the true cause of their problems.

And that is the irony of this condition. Few of us have any idea what it actually is, yet

It's five years this summer since a project in Essex, one of 11 national pilot schemes, was set up to find a new way of helping people diagnosed with a personality disorder. Sheena Grant reports on progress so far

millions of us could actually be affected.

For years, even psychiatric services have struggled to know what to do with those who have a personality disorder. They don't always respond to medication and there was a notion among many that they were, effectively, untreatable.

That's where The Haven comes in. It was one of 11 community projects set up five years ago as part of the Government's new national personality development programme to pilot new ways to help a group of patients often reluctant to accept help or dismissed as attention seekers.

The Haven, housed in a former rectory in Lexden, provides care and support to more than 100 clients who have made little recovery despite psychiatric medication or repeated hospital admission.

Mrs Castillo, the author of *Personality Disorder: Temperament or Trauma* and a former advocacy worker for Colchester Mind, believes the term 'personality disorder' – defined as deeply ingrained behaviours ranging from alienation to dependency, obsessiveness, narcissism and violence – in itself is unhelpful.

"It doesn't help people understand what it is

about," she says. "Complex post-traumatic stress disorder may be a more appropriate name for the condition."

She describes The Haven as somewhere people can safely explore and reveal the extent of whatever trauma they may have suffered.

And, she says, everything staff have learned in the five years since The Haven opened has shown them that personality disorders are treatable. They just need a different approach to that taken by traditional mental health services.

After all, if the condition is so rooted in traumatic life history, every client needs to be treated as an individual, taking account of their past experiences. There is no one-size-fits-all treatment programme here.

Staff did an analysis after their first 50 clients in 2006 and found there had been a drop in their hospital admissions of 85%.

"Personality disorders are treatable. Everything we do is proving that," says Mrs

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A TYPICAL DAY: Left, Heather Castillo, talks to clients Rachel and Isobel, above, Clients relaxing in the shade

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Castillo. "But it is not a quick fix. It takes time to make headway.

"Most people who have received a diagnosis have had a very difficult start in life. We are talking about unresolved trauma, childhood abuse, sexual or emotional. Trust has been destroyed. Ability to relate has not been developed properly.

"There is incredibly low self-esteem, a sense of 'who am I?' In an effort to try and address that there can be behaviours such as self cutting, overdose and anti-social behaviour.

"Sometimes people are very good at putting up a front and hiding it but sometimes it spills over. Life is not lived in a very effective way. The whole thing becomes compounded as they get older. They may not be able to hold down a job or form relationships.

"Some people we have here haven't been able to contain it and they have ended up in a psychiatric hospital and may have been hospitalised for years before they have got to us. These are people living life in quiet desperation."

The Haven offers a crisis service running 24/7 and a small number of residential beds for short stays. Then there are day services, friendship groups, complementary and talking therapies as well as a social inclusion unit, which helps people plan for life outside the Haven.

Binding these elements together is something called the acceptable behaviour policy. It stipulates that clients are not able to cut, abuse substances or engage in disruptive behaviour. If they break that policy there are consequences.

"There is a big learning experience there," says Mrs Castillo. "It really works. Not only does it keep the place safe it helps people to change their coping strategies.

"They have to learn to trust, feel cared for and part of a community or family here."

And for many of the clients, that is a crucial part of The Haven's philosophy.

Isobel, 26, was abused by three members of her family as a child and raped at 15 by her friend's father.

"In school I couldn't concentrate and I couldn't make friends easily," she says. "I became quite distant from people. There was always a constant urge to run away.

I started to self-harm when I was nine.

"When the abuse came out I actually only spoke about one of my brothers. I did not know until I told someone that what he was doing was wrong."

Isobel was diagnosed with a personality disorder at 16 but she did not immediately get the help she needed.

"I was acting up quite a lot because I couldn't contain what was going on. I couldn't see a way out from everything that had happened to me," she says.

"Self harm took the evil away and for a while I couldn't see there was a problem. I was in denial.

"Nobody wanted to help treat the cause. They just wanted you to take your medication and go to bed."

She was involved in the planning stages for The Haven and when the project opened she finally began to get the help she needed.

"You are treated like a person here and respected.

We are treated like part of a family. It is a family for people who did not have a stable childhood.

"The Haven is my safety net. If you are having a bad day you can come in and touch base. I haven't self-harmed for nearly two years."

Isobel plans to go to college in September and has a long-term goal to work in mental health nursing with children.

"There are so many issues I need to work

through and look to accept what has happened and take away the blame from myself," she says. "I know I cannot be ruled by my past, which I still struggle with sometimes."

Rachel, 32, another client, says she does not know where she would be without the support she has received at The Haven.

Her father committed suicide when she was very young and although she had some mental health problems in her teens she held down full-time jobs and coped.

But when she was 26 her mother died and Rachel fell apart.

"It tipped me over the edge," she says. "I had problems as a teenager. I didn't complete my degree because of stress and depression but I got myself back on track and wasn't on medication for seven years.

"I was very close to my mum and when she died my previous illness came flooding back. It was a real shock to the system – a body blow to lose her. I fell apart. I had severe depression and was self-harming. I made suicide attempts and had muddled thoughts.

"I was in hospital nine weeks but I did not get much support. You are there to keep you safe. It did not address the problem.

"I have been coming here for five years and have used all the services. I use the day service primarily now. I like the fact that I have got a structured week.

"I hope to get back to full-time employment eventually. I have been out of work for six years with mental health problems – the stigma is huge.

"People don't understand personality disorder yet there are people out there who don't even know they have it too; people who haven't been caught yet, who haven't had that thing happen to tip them over. Sometimes nothing will happen and they will just continue to have mood swings, and drink too much and do dysfunctional things and get depressed."

■ To find out more about The Haven Project, whose clients come from within a 25-mile radius of the Lexden centre, visit www.thehavenproject.org.uk

■ Some names have been changed in this article.

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Personality disorders
are treatable.
Everything we do
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have your say on services

THE NHS is developing new services for people with complex or severe personality disorder and inviting members of the public, service users, carers and staff to help determine what type of services are needed.

It has come up with four different options that might help to meet people's needs – ranging from outreach support in the community that will help provide additional support to people in their home area and also specialist facilities for people to live at for

a period of time.

Jo Scott, Project Manager of the Tier 4 Personality Disorder Consultation, encourages everyone to have their say.

"This is a great opportunity for people to make a real difference. So far, we have received feedback from over 100 people and encourage more to help us know what types of services are needed and if we've got the balance right," said Jo.

The consultation started on April 20 and runs

until Monday across London, East of England, South Central, and South East Coast regions.

■ You can participate online at using the 'Have your say' section of www.westkentpct.nhs.uk and by registering your comments under 'Tier 4 tell us your story'. Also, contact Shola Oke on 01732 375200 ext 5401 or shola.oke@nhs.net for more information or write to Personality Disorders, Freepost RRJX JYUC UYAC, West Kent PCT, Medway Wharf Road, Tonbridge, TN9 1RE.