

BSMHD brief history

A chat with, our President - Herbert Klein.

Roger:

Hello Herbert, I haven't seen you in a long time. You are the President of the BSMHD, and you were involved from the beginning, would you be able to tell us about the history of BSMHD?

Herbert:

Thank you for asking me, in 1988 when I started work, I was the first Deaf person allowed to work in the NHS, and I realised that we needed to improve how Deaf and hearing people get on with each other. While this was all happening, we had Deaf mental health services in London, Birmingham and Manchester, but we did not have time to meet and discuss how we could all work together. The first step was a conference in London in 1991 at St George's hospital. This was the first time we had all met and we realised how important it was for us to work together, sharing research, lectures, information and how to improve which were all useful. Following this we decided to set up the British Society of Mental Health and Deafness, and to keep in contact with a conference every two years. This was because some members were based far away and some areas needed to improve, so we held conferences there, such as Glasgow, Edinburgh, Manchester, London, Cardiff and Bristol. These conferences helped spread awareness regarding Deaf mental health throughout the UK.

As the numbers of Deaf people working in the NHS increased there was a realisation that it was very hard for them to get the right training, so BSMHD helped in campaigning for things like Registered Mental health Nurse training, this took 10 years but really opened opportunities once it was achieved in 2004. Now when we look back, we can see the information spreading in the number of Deaf people qualified as RMNs. In Psychology again, specifically clinical psychology it was hard to bring around change and took BSMHD a lot of campaigning and a long time, 15 years, to demonstrate that Deaf people could have the same qualifications as hearing people and that it was only communication and use of interpreters that was different. Once this was achieved this also improved opportunities for Deaf people.

We then wanted to help people to understand the Mental Health act as it is very difficult to understand. BSMHD have fundraised and made a film involving roleplay and acting, it is still on YouTube now for people to watch and is called Mental Health Act.

As we moved forward obviously it was important that Britain was doing well but joining our European counterparts and supporting one another was also important. In Manchester in 1997 we hosted a conference with the European Society for Mental Health for Deaf People (ESMHD) and we shared resources, lectures and information to have more Deaf people involved. The first ESMHD conference was in Holland in 1988 and had three Deaf people there including myself going forward to the last ESMHD conference in 2014 in Belfast there were 200 Deaf people involved so you can see there's a massive change and massive

growth, more Deaf people are accessing mental health training and accessing the services which gives great variety and is very positive.

Now going back to discussing the beginning of BSMHD when there was no Sign Language within mental health care provision for Deaf people, BSMHD supported by paying for research, photographs publishing books and monthly discussions on specific mental health terms and their signs. For example, depression when we look at this term we made sure the sign created articulated the key points of the definition. Schizophrenia is another example, there was there was a sign that had negative connotations and was not appropriate, so we created a much more positive sign for that. As there is a great deal of terminology and as the signs we created grew, we published a book that shows the sign for each mental health term. The book has been converted into a CD rom, it's an old-fashioned format but it is still available.

There were also regular regional meetings that I would attend, I would visit an area and explain best practice, give advice and discuss how to network, I would travel around the UK doing this but eventually there wasn't enough time to continue this and it was very difficult to maintain so stopped recently.

An important event I remember was the GP survey, we had a big argument with the Department of Health because they're responsible for 8000 GP surgeries across the UK and they didn't include Deaf people in their research. They realised they had made a mistake and that they needed to change their survey to include Deaf people, they made a change and posted new letters with a link on the bottom directing people to a BSL version of the survey. Following this change the response highlighted that there were 102,000 Deaf people that use sign language in England, and the survey could be used to evidence this. I didn't realise until recently that this survey occurs every year and is still there now, so the data they will have will be from when we campaigned for the change to now.

Later the government also made a change to the NHS system and set up a new service called IAPT, Improving Access to Psychological Therapies, because so many people were ill and under stress. With regard to Deaf people, the Department of Health agreed to a BSL version of IAPT which would be called Deaf IAPT. This has resulted in 25 Deaf people being trained in IAPT at John Moore's University in Liverpool, to become Psychological Wellbeing Practitioners. This is another example of the growth in this area for Deaf people. As a result, we now have SignHealth for IAPT and Deaf4Deaf for counselling, and both have great reach and offer better access to psychological therapies when compared to the past, which is good and positive.

For BSL interpreters wanting to learn about mental health, Robert Pollard from Rochester University in America was invited to teach interpreters about mental health coping strategies for stress. For instance, if someone were to disclose information that is distressing to an interpreter or sign something that is horrible, Robert teaches how to manage the distress that may occur as a result of it, to ensure interpreters look after themselves and to avoid taking anything personally, this is something that is very good.

More recently BSMHD applied to the Lottery for funding regarding MHFA in Wales, this is Mental Health First Aid, BSMHD was successful and has been awarded £240,000 to cover training across the whole of Wales over 3 years.

I have tried to remember as much as possible, but I am sure there is more to tell, the points I have mentioned are the important events that helped make change happen. When we look back and compare, access is much better than it was, so I am very proud of BSMHD as it has done so much

Roger:

Thank you! Keep safe.

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