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Daniel Fisher and Laurie Ahern
N.E.C. - 20 Ballard Road
Lawrence, MA 01 843-1018

Dear Daniel Fisher and Laurie Ahern,

I was very pleased to receive your package of info + Summer Newsletter, and have been passing it around in my very interested and active cons/survivor network. It's exciting to see an outfit of people "who have been there" pulling together all the best and most positive stuff that is contributing to recovery - and I'd be very pleased to contribute my angle and flattered if you respond to my movie idea.

However - we were all jarred some by the "Mental Illness is a Coping Mechanism" article by Laurie Ahern. It struck us all as a really irresponsible step back to what seemed to be a fading philosophy/mind set that blamed the root of mental illnesses on "wrong thinking." Although we all realize and are finding there's much more we can do than gobble pills till it gets better, many of us have found that medications have been very helpful and are a critical part of our care program. Many of us who attend a mood disorders support group can attest to a few disastrous attempts to ease off the maintenance program. With that support we can get on with the rest of the program. I see repeaters every week when I set up and run my movie event at the hospital who chuck their meds as soon as they are out and in a few weeks they're back.

Statements like "those who know that drugs will only fend off the pain for so long and then it comes back again" are in my opinion dangerous and irresponsible. They dump the blame again back squarely on the shoulders of the person and family suffering the illness.

"Some would say mental illness runs in families" - *bloody right some do!* You'll find most of us have outrageous family histories and most responsible clinicians will understand that and help a client understand the fact of genetic propensity. I find it hard to believe that your article is suggesting that family history is just an excuse. I consider that understanding my family's dark track record is a useful tool in *accepting and working with* my illness.

Daniel, I know you said on the phone you knew and respect Fred Frese but disagree with his acceptance of the medical model. **I hope you'll take care not to mess up all the positive advances that science is making and the difficult, but positive moves many of us have made to accept medications that have turned our lives around to a point where we can use the other valuable tools and hope-by-example your organization is offering.**

Here's my sign-up money - appreciate what you're doing and look forward to a rich relationship with N.E.C. but please be careful! or you'll lose credibility with many of us who've also been there.

Yours sincerely,

Bruce Saunders

Movie Monday

P.S. Some other points from my friend, Ingrid, with whom I am presenting at IAPSRS in Vancouver in June/97. She is as med-free as possible in her own case, so I was curious how she would react to my take.

Empowerment is not what's happening when you take away options that people are trying and finding helpful. In sexual assault counseling a rule is not to force your approach, what worked for you (say, confronting your family in the case of incest). To preach my way or the highway is to *dis-empower* the person. It's their call when to make those steps. If they don't, it is destructive to say that's not OK. Same with the issue of gay people coming out - it's got to be their call.

The same approach should be taken when influencing people about their psychiatric recovery. Support. Show by example what works for you but don't undermine, blame or shame!

She pointed out your phrase, David, "Unlike the dependency fostering medical model..." It's loaded - "you're an addict..." is the message.

We're anxious to hear your response!

B.S.