Volume 19: Issue 1 Summer 2018

First Person Plural — dissociative identity disorders association

"Rainbow's End"

Charity Registration Number = 1056602 (formerly 1109464)

First Person Plural...

- *is pioneering, being one of the longest established (1997)complex dissociation specialist organisations in the UK;*
- *remains the only UK national survivor-led membership charity working exclusively for and on behalf of people affected by DIDs*
- *works in collaboration & co-operation with ESTD-UK, TAG, The Survivors Trust, The Pottergate Centre, The Clinic for Dissociative Studies, RAINS & other groups with a similar ethos, for the purpose of achieving shared aims.*

Final Reminder
2018/19 Membership Renewal

Thank you to those who have renewed or newly joined for the current April 2018 to March 2019 membership year.

Forgotten to renew? - you can download a form from http://www.firstpersonplural.org.uk/wp-content/uploads/2018/06/Membership-Form-2018-2019.docx or click on the link in the menu on the right of the front page of FPP website.

Don't know whether you have renewed? contact Lesley admin@firstpersonplural.org.uk

Removal from Members database - if you haven't renewed **by 31st August** your details will be removed from our database until you re-join. If you don't intend to renew or want to end your membership let us know and we will remove your details immediately.

Being an FPP member is very important. As a membership charity without our members we are nothing. Your membership helps financially support our work (but that's not the best bit and we'll never refuse membership to those who can't afford to contribute). The best bits are your membership helps to motivate our volunteers and staff and to earn the respect of those we want to listen to us. **More members, louder voice!**

Inside this issue

Melanie Goodwin,
Chairperson, F.P.P.

Chair's Letter

Dear All,

British Empire Medal - Ms Kathryn Angela Maria Ann LIVINGSTON Founder, First Person Plural Charity. For services to People with Dissociative Identity Disorder

Whoever thought we would see the words Dissociative Identity Disorder in the New Years Honours List but we have. Kathryn has been awarded the British Empire Medal in the Queen's 2018 New Years Honours List. Over three years ago Kathryn was asked if she was agreeable to being nominated for an honour, she very tentatively said OK but it was clearly on the understanding that her name would be on the application but it was representing other survivors and FPP. The wheels were put in motion and a collection of really beautiful letters from both survivors and clinical professionals were gathered. I was disappointed when after two years we had heard nothing but three years later the official letter drops through Kathryn's door.

Kathryn and FPP have received many letters of congratulations and larticles have been printed in both the ISSTD and ESTD newsletter and TAG. Whatever your views on these titles this has given credence to the work Kathryn and FPP have done over the last 21 years, opened doors including Kathryn being asked to join a ESTD/ISSTD task force of eminent international clinicians to look at the developmental trajectories of DID.

"….. she supported service users to become involved in the planning, development and delivery of mental health services and the training of mental health professionals. ….. "

Below is a little bit from the ISSTD article about Kathryn that you probably do not know.

"Kathryn Livingston, a long-term member of the ISSTD, has been awarded the prestigious British Empire Medal in the Queen's New Year's Honours List for her 'Services to people with dissociative identity disorder and founder of First Person Plural'. This award is for 'meritorious service worthy of recognition by the Crown' and is an extremely important recognition of Kathryn, and through her, trauma and dissociation work in the UK. First Person Plural is the UK's only survivor led organisation for persons experiencing DID, their carers and associates

Prior to founding FPP, Kathryn worked for Mind and Rethink, two of the leading UK national mental health charities, where she supported service users to become involved in the planning, development and delivery of mental health services and the training of mental health professionals.

Showing great foresight at a time when such service-user involvement was in its infancy, Kathryn encouraged service users to acquire knowledge of the policies, strategies and theories that professionals referred to. This enabled them to go beyond sharing their own personal experience of living with a mental health condition, to using their lived experience to illuminate and exemplify the points they wanted to make about policies, theories etc in their discussions with and training of professionals. In turn this gave the involved service users a more powerful collective voice to influence changes in mental health services. They became experts-by-experience.

Chair's Letter continued

Kathryn's definition of the term is:

> *'someone who has personal experience of living with a mental, emotional or physical health condition and uses that experience to illuminate and exemplify their own acquired knowledge about the condition, in order to help professionals and others respond effectively to the condition when they come across it in others.'*

This background work became the foundation of the work of FPP."

I cannot think of anyone whose name could better represent all the work of not only FPP but the many other organisations with whom we have a good working, collaborative relationship that together has enabled so much to be achieved.

It is not only Kathryn's professional approach at all times to the wide ranging work we undertake but her ability to be a role model for us survivors by being open about how difficult and complex her everyday life often is, at times preventing her from really functioning. She demonstrates how it is all about 'what you can do' not what you cannot do. I would like through this newsletter to thank Kathryn for being an inspiration and role model to many and my friend.

"…..it is all about 'what you can do' not what you cannot do….."

Kathryn will attend an investiture ceremony in Birmingham to be presented with her medal from the Lord Lieutenant of West Midlands on 12th September.

In June she attended a Royal Garden Party at Buckingham Palace hosted by Prince Charles and Camilla.

Warm wishes, **Melanie**

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British Empire Medal

Civil Division

Central Chancery of the Orders of Knighthood

St. James's Palace, London SW1

30 December 2017

THE QUEEN has been graciously pleased to approve the award of the British Empire Medal (Civil Division) to the undermentioned:

B.E.M.

Ms Kathryn Angela Maria Ann LIVINGSTON

Founder, First Person Plural Charity

For services to People with Dissociative Identity Disorder.

Inside and Outside Children *By Alwayshope*

Before my son was born I had developed a very strong and loving relationship with my inside children. I had (and still do have) so much gratitude for them for protecting me and saving my life so I could become the adult I am today. For me loving my inner children came very easily and I spent a lot of time with them trying to give them the things they needed. My husband was hugely supportive of them and would also spend time with them. He helped one of my child parts build a nursery for her toy animals, set up Easter egg hunts for a 7.5-year-old part I will refer to as Free and gave my boy parts Lego he still had from when he was a child. They could openly be themselves at home and my husband knew all of their names. We were like a family.

Having a child (an outside child) was something I had wanted for a long time so when I discovered I was pregnant I was delighted, but at the same time I worried how it would affect my inner children and the relationship they had with both myself and my husband. The biggest worry my little ones seemed to have was that they did not want to share their toys with the baby. So, I reassured them that was ok, they didn't have to, the baby could have their own toys. I bought my part Free mother and baby Barbie dolls to help her to feel included and a very young part wanted a family of rubber ducks to go in the birthing pool!

"...biggest worry my little ones seemed to have was that they did not want to share their toys with the baby. ..."

My son's birth marked the beginning of an incredible journey and the beginning was very hard. Despite my best efforts to avoid hospitals and highly triggering medical procedures by having a home birth, I had a very traumatic birth, ending in an emergency C-section and my son being transferred to the neonatal intensive care unit (NICU) in another hospital. How we got through those early days we are not sure; it was about survival, but we also fought. We fought to transfer to the same hospital as our baby and later on we fought to bring him home as it reached a point where we felt he was being kept in unnecessarily. It felt like a lifetime, but was actually only 10 days when he finally came home.

I was so relieved to have my baby boy at home with me, but those early months were very hard. Adjusting to being a mother and realising just how much babies need was hard in itself, but I also needed to heal from the trauma of the birth, as did my son. I realised within the first day of being home from hospital that my son was not going to do what the books said he would, or follow the standard advice for sleeping and feeding. This was hard to begin with as I had to let go of expectations and advice, instead letting my instincts and son guide me. As my son and I settled into a routine that worked for us, I discovered that much of what we did (i.e. co-sleeping, carrying him in a sling and breastfeeding on demand) is referred to as attachment parenting. I liked this name as I knew how vitally important attachment was from my own healing. My son wanted to be in physical contact with me at all times and I wanted that too. Together we were forming that vital connection and also healing from the trauma of the birth.

I found becoming a mother was the most amazing and natural transformation; I loved my son and being a mother to him so very much. For my inside children, however, it was a very different story to begin with. Our entire focus was my son, there was no time for anything else. My child parts were used to having time to play and do all the things they enjoy, but for around the first eighteen months there was no time for anyone. What I find amazing was how my parts accepted this with very little complaint. They realised I was the happiest I had ever been and I felt their love for me so strongly. Therapy was also hard with a baby in toe, sometimes we would spend most of our session trying to rock our son to sleep or work out why he was crying. Other times when he was more settled, my parts would get to talk to my therapist but they couldn't relax and be themselves in the way they could before; there was always a baby whose needs came first. My inside children also experienced a big loss in the one on one time they had with my husband. It was a very hard time for them and utterly exhausting.

After the first eighteen months or so things slowly began to get easier. We had some time in the evenings when my son was asleep and when he was awake my inside children started to play with him. As my son learnt to talk he began to build relationships with many of my inside family and shortly after he turned 2 years old he began to call my parts by their names. Free is the part my son talks to most of all. My sons favourite toy to play with is his train set, but with Free he will play all sorts; from fairies and dolls to discos and scooting in the park! Sharing toys turned out to not be a problem after all. My son also loves to play with my boy parts, building Lego together and he collects and swaps stickers with one of them. Something I feel was important for my son to understand is that he can call me (his Mummy) back at any time he needs to. I am fully co-conscious when my son plays with my inside children and do sometimes have to step in and help if my son and inside children are struggling to work something out between themselves. I also feel it is important for me to stay grounded as my adult self when we are struggling internally with memories, feelings and so on. During these times I explain to my son that the parts are struggling at the moment and that they need to stay safe inside so I am able to look after him.

".this stage of my life is hardest for my teenage parts as much of what we do….can be quite uninteresting for the teenagers…."

My son has also formed relationships with my older parts. He knows to ask my very efficient part to help with the clearing up as she is quicker than me and means we will be able to start playing sooner. For fiddly things, like if he can't get some pieces of Lego apart he knows to ask my very domestic part to help as she has better eye sight than me and one of my teenagers has told my son he is not allowed to call her out until after lunch as she likes to have a lie in inside! In many ways, this stage of my life is hardest for my teenage parts as much of what we do for my son appeals to my child parts, but can be quite uninteresting or dull for the teenagers. Making separate time for them to do the things they enjoy has been important.

Inside and Outside Children *By Alwayshope cont..*

Something my inside family used to worry a lot about was my son talking to other people, who didn't know we had DID, about them. While we are completely open at home with my husband and son, there are very few other people who know – just a few close friends. I didn't want to ask my son to keep secrets, but we were also worried a lot how we would explain (or not explain) if my son said something that made people ask questions. There was a short period when my son would ask for Free to play when we were out and about, but no one knew what he was talking about and very quickly my son seemed to understand that my parts would only come out openly when we were at home or on our own with him. Once we were at the park and Free was playing with my son, she explained to him how she would play but if lots of other people came into the park she would probably go back inside. My son asked why and Free explained that not many people know about parts and she only likes to talk with people she knows well and feels comfortable with. We haven't said any more than that to my son and he seems to completely understand and accept it.

My son is now 5 years old and we are home educating him. This is something I feel very passionately about and there are many reasons why I chose this option for my son rather than sending him to school. What I didn't realise when making the decision was how much my inside children would benefit too. I feel we missed so much when we were at school as our focus was on surviving, we were dissociated most of the time or trying to cope with trauma related feelings. Now we are safe and healing, my inside children love to learn just like my son, joining in with learning we do both at home and the groups we go to with other home educated children. It really is a very healing and freeing experience for them.

"...my son seemed to understand that my parts would only come out openly when we were at home or on our own with him....."

I feel that being completely open with my son about my DID and allowing him to interact and form relationships with my inner family has had so many benefits for both my son and my inner family. My son loves to play with other outside children, but when we are at home on our own he has my inside children to play with. I feel he has learnt a lot from my inner family as they can often relate to him in ways the older parts cannot, but have a lot of wisdom to share from being in the world longer than outside children of the same age. For us it has been so healing for my little ones to have someone to play with and for us to be able to be completely ourselves.

Parenting and DID is one of the commonest topics Melanie and Kathryn get asked about. It would be very interesting to hear members thoughts on this topic. What has been your experience? What strategies have helped and what has not? Everyone will be different. Thank you Alwayshope for sharing your experience. It would be great to hear what others think about your article. Great to hear others views on parenting and DID? Please let FPP know your thoughts on this very important topic.

Poetry

"MANY OF US" by Sarah

A day in the life of a multiple
Is like an adventure unstoppable
Regardless of mind splits
Ive gotten through life twist
And here is my character list

Barry has a sacred life
When inside he sings to his wife
Then comes his freaky stress
He runs around in ladies dress
And Barry becomes his Irene

Irene is good at everything
She sails through the sunset with wings
Theres never been a problem
Too big for her handle
Because Irene is the illuminous candle

Bob comes forth when its time to play
He's bored of problems everyday
So he jumps in his sports car
Riding the world, far and far
Coz life too short to sit all day

Mic is the workaholic
His boss gives him a lot of stick
Even though he is meek
60 hrs for $500 a week
Mic feels he needs to up and leave

So here comes his creative genius
Wade reigns and starts a new business
Tapping into his passion
His music is the fashion
What more could there be to living?

Hello, my real name is Berrly Bong
Ive learnt I'm not Cheech or Chong
Even though I may sound confused
I have found that my only muse
is to dance and sing with you's!

"HOLLOW INSIDE" by Anon

This clinical white hall I find myself in,
Papered from floor to ceiling.
Starting to walk I want to look at something.

This was to be a gallery I believe,
A sort of history telling:
Beginning, middle… an end?

I thought I would see pictures of me.
Joining my hands together, I know I exist…
But where have I gone?

Considering the constitution of my time—

Were I a linear agent,
My steps could chose an ending to the white:
Test failed

Am I going in circles?
A consequence of some failed propellant,
Driving me inwards rather than out?

Or could this be a trick?
Am I some pivotal constant that if moved
Would shatter other halls?

I am going mad

Music in my mind adding other layers-
Won't the wall fall down if it's too heavy?
Panic swelling I might be crushed

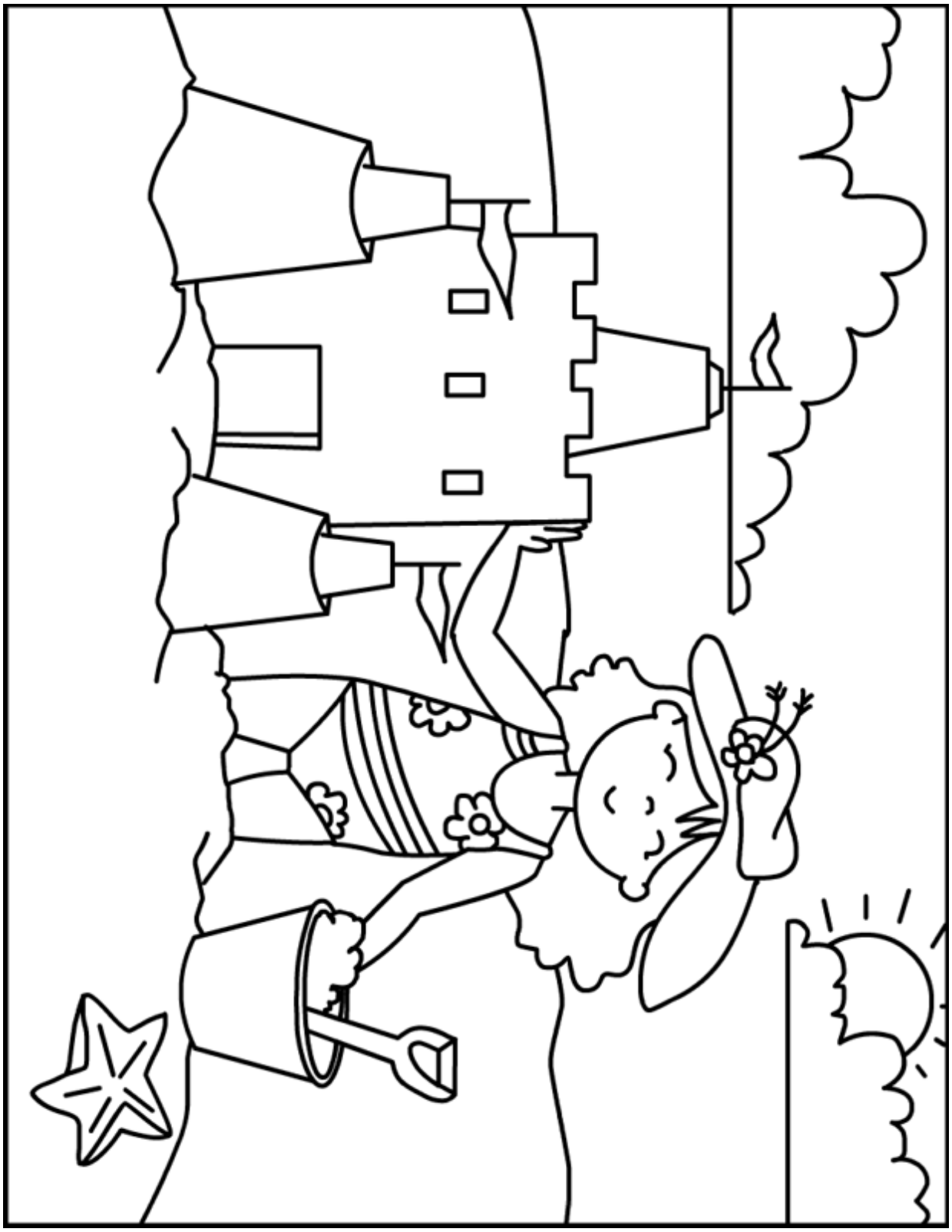
Running running
Like an animation strip my speed
Linking indentations hidden in the white

She is hurting me hurting me hurting me
Hurting me hurting me hurting me
It's everywhere and nowhere…

I stop to catch my breath,
the animations fade

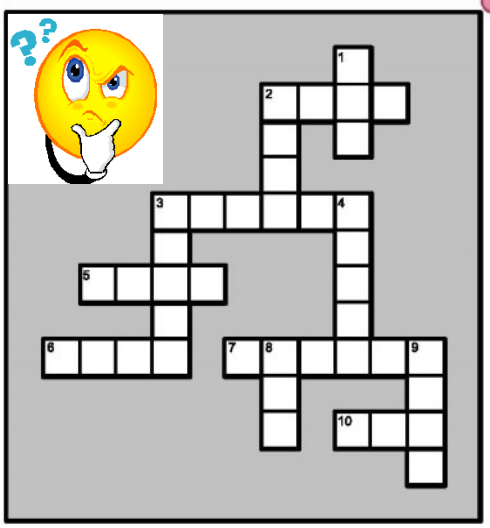
A Picture to Colour

PLAY



CENTRE

Seaside Crossword



Across

2. It may have a sail or oars
3. Perhaps you could collect water in this?
5. Watch him scurry down his hole
6. They swim in the sea and have scales and fins
7. She sells sea_ _ _ _ _ on the sea-shore
10. I hope this is out for your holiday

Down

1. Carry your beach things in this
2. A good read!
3. The strip of sand along the sea shore
4. Dry yourself with this
8. Wear one of these to keep the sun off your head!
9. It feels funny under your toes

www.ActivityVillage.co.uk - Keeping Kids Busy

ANSWERS:-
Across - 2. Boat; 3. Bucket; 5. Crab; 6. Fish; 7. Shells; 10. Sun
Down - 1. Bag; 2. Book; 3. Beach; 4. Towel; 8. Hat; 9. Sand

Make Cake Pops

Ingredients

For cake	For buttercream
100g butter	75g butter
100g caster sugar	150g icing sugar
½ tsp vanilla extract	½ tsp vanilla extr
2 eggs	1 tbsp milk
100g self-raising flour	200g white choc
	Rainbow sprinkles

Method

Make cake

1. Pre-heat oven to 190C/gas 5
2. Grease and line the base of a 20cm sandwich tin.
3. Place the butter, sugar and vanilla extract into a bowl and beat well to a creamy consistency
4. Slowly beat in the eggs, one by one,
5. Fold in the flour and mix well.
6. Tip mixture into the cake tin
7. Place in oven and bake for about 20 mins until risen and golden brown
8. Set aside to cool completely.

Make buttercream

1. In a large bowl or using an electric mixer beat the butter and icing sugar together until smooth
2. Add the vanilla extract and milk and beat again

Make the pops

1. Once the cake is fully cooled, crumble into large crumbs
2. Add the crumbs to the butter cream mix and stir together
3. Line a tray or plate with greaseproof paper
4. Take chunks of the cake mixture and roll into balls and place these onto the lined tray or plate
5. Push a lollypop stick into each ball, then place into fridge for about 1 hour to set.
6. When cake pops are set melt the white chocolate in the microwave, blasting it and stirring at 10 seconds intervals until smooth.
7. Place the sprinkles into another bowl.
8. Take each of the chilled cake pops and dip into the white chocolate, allowing it to drip off a little over the bowl.
9. Dip into the sprinkles, then stand each pop upright on a lined tray or plate
10. Place into the fridge for a further 30 minutes

Continued left

My GP surgery gets my DID needs

by anon

I'm fortunate enough to have a GP Practice in a rural part of England that is respectful, responsive and understands my needs and therefore gives a bespoke, patient-centred approach service to someone with D.I.D. After hearing so many stories of unhelpful GP Practice's to patients with D.I.D, I wanted to share my positive experience/s……

As I walk into the surgery to my monthly afternoon appointment with my GP. Yes my GP sees me every month to make sure everything is going OK. You see in my surgery you can queue outside at 8am to see any doctor, but the afternoons are appointments only…. If I had an emergency and needed to see my doctor in a morning appointment, I could.

All the surgery staff from receptionist, to pharmacy staff, nurses, GP and Practice Manager know about my disorder. The surgery has both the D.I.D dvd's from FPP, which is very helpful. They don't pretend to know all about D.I.D but at least they try and listen. The surgery knows the contact number of my therapists, so the GP can liaise with them at any time. When I walk into the surgery and up to the reception desk, I don't even have to say my name - they say hello and if I'm there for a morning appointment which is very rare, I can just say, can I go into a side room, so I'm not waiting in a surgery cramped full of unwell people, which upsets some of my alters. And when I go for my afternoon appointment there is hardly anyone in the waiting room, but if I/We wanted I can still go into a side room.

"…The Practice Manager sits and calms my alter and gets me back….."

If a blood test is needed, I see a nurse - the only thing is if she doesn't get any blood from her first attempt, one of my alters appears and she then calls for the Practice Manager to come into the room. The Practice Manager sits and calms my alter and gets me back… the nurses know that this can happen if it takes them more than one attempt.

Within the surgery is the pharmacy - I have to collect my tablets every week - this is so I/WE don't overdose. Again I just walk into the pharmacy and I don't even have to say my name - they know the routine, which is good.

It would be really beneficial if there was a similar baseline service for all patients with D.I.D when visiting their own GP Surgery.

The Runaway Helpline

by Amy

I had a very good experience of using a helpline I had not heard of until very recently: The Runaway Helpline. It is a free service run by the charity Missing People UK. It is open 24/7 and 365 days a year. Anyone of any age may call, although there is an instant chat service for under 18's.

I was pleasantly surprised by my call to them, and I am aware from my supporters that my younger parts have used the service in times of risk and distress to equal good effect. They are for people who are struggling with urges to runaway or go missing, who are missing and those who have returned from being missing and may be struggling with the aftermath.

I rang with very few expectations, and I suppose experiences will vary based on who answers your call, but I found the service extremely beneficial. I spoke to a lovely and intuitive woman, who after I explained a little of my difficulties, actually came straight out and asked me if I had DID! I was taken aback, but felt more understood than I had expected immediately. We had a 45-minute chat and it was very useful, she listened and made some helpful suggestions about practical things I could do to help my situation, and also spoke about different services or professionals who might be good to take various difficulties to, that were effecting my situation.

"...for people who are struggling with urges to runaway or go missing, who are missing and those who have returned from being missing ...."

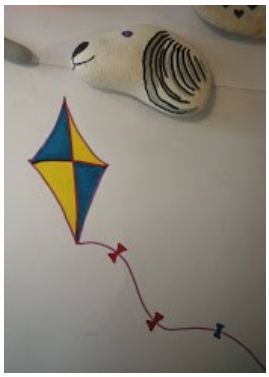
If you were to call, they cannot see or trace the number you were calling from and it does not show up as "The Runaway Helpline" on a phone bill. Additionally, they cannot and will not contact emergency services on your behalf, even if you ask them to. Although they do offer a service where they can set up a three way call between your safe people or supporters or the emergency services, and you and the call taker can all discuss what might help at that time. Equally even if you are missing, you can just chat to them and then choose to not seek any help at that time. It is a confidential service.

If you think it might be a helpful tool for you or your system:

You can call or text on: 116 000 – you can even text this number if you have no credit left on your phone.

You can email on: 116000@missingpeople.org.uk

Further information about the helpline can be found at this link: http://www.missingpeople.org.uk/how-we-can-help/missing-adults.html



Recovery Colleges

By Anon

I recently discovered – by chance – that as a mental health service user, I'm eligible to attend up to 10 free courses a term at my local Recovery College.

They offer a variety of short (mostly one-day) workshop-style courses; this term my local one has courses covering things such as 'making plans for the future', 'dealing with hoarding', 'making friends', 'dealing with anxiety', 'overcoming panic attacks' 'improving sleep', 'from surviving to thriving' – as well as learning skills such as comedy, art, money management, mindfulness/relaxation techniques, and courses on understanding statutory benefits, the law relating to mental health, and how to go about getting a job. The courses run each term vary, and of course, vary from college to college.

"...supplementary to any therapy treatment... designed to be therapeutic but not therapy ...."

They are supplementary to any therapy treatment – indeed, are designed to be therapeutic but not therapy – and there's no feedback from the courses to your medical records so you can attend and take from the course what you find helpful without worrying that it will affect any other treatments you are receiving.

The attendees (I've found to be generally 5-10 delegates per course, although sometimes as high as 20) are a mixture of service users, carers and NHS mental health staff (and they are very clear that you don't say which of these you are), and the courses are presented by a mental health professional together with a person who has lived experience of both mental health issues and the topic in hand. You can share as much or as little about your own experience as you feel comfortable to.

Recovery Colleges *cont*

By Anon

As far as I can find out, they are run across the country – put 'Recovery College' plus your town into your internet search engine to find your local provider – as they (bizarrely) don't seem to be generally well publicised to the very service users and their carers and supporters – ie us - who might benefit.

A useful briefing about Recovery Colleges has been published by the Centre for Mental Health. It can be downloaded at https://www.centreformentalhealth.org.uk/recovery-colleges-paper

AGM and Members Arts/Crafts Meet

"...they (bizarrely) don't seem to be generally well publicised to the very service users.... - who might benefit..."

First Person Plural held its 2018 AGM in Norwich on 7th July. At the meeting the Trustees Annual Report and Accounts were presented. Both were accepted by the members attending with unanimous votes. Only one nomination was received for the trustee vacancies. As this did not exceed the number of vacancies for elected trustees a motion was proposed to elect the one nominee unopposed. This motion was also carried unanimously. The elected nominee was Carol Broad who was an existing trustee standing for re-election. Thus the full Board of Trustees who hold office until the 2019 AGM are as follows:- Melanie Goodwin, Kathryn Livingston, Kim Sparkes, Carol Broad (full members) and Sarah Kelly (associate member). During a brief meeting of the Board immediately after the AGM Melanie and Kathryn were re-elected as Chairperson and Treasurer respectively.

Much more fun than the AGM was the Members Arts/Crafts meeting which followed in the afternoon. This was enthusiastically hosted by the Norwich support group. Many thanks to them. Members participated in fairy cake decorating; beach stone decoration; a shared art project; jigsaws and sculpting sand. New and old friends connected and chatted over the activities. Photos of some of their works from the day are scattered through the pages of this issue.

FPP in Slovakia.....

By Melanie

Early in 2017 Hana Vojtova who has been an ESTD Board member representing Slovakia contacted First Person Plural to discuss which books on DID we felt would be most helpful in a country that had none in their native language. This led to an invitation to go to Slovakia and do three days training. We were delighted to accept the invitation and May 2018, at that time, seemed a long way off! We designed the training around a journey starting with 'simple' trauma, laying a foundation through considering the effects of a one off trauma and then moving onto the long term consequences of enduring childhood abuse including DID.

Although there is little recognition of DID in Slovakia we found a natural understanding of complex trauma gained through their own difficult history. For each person attending this felt like their own personal foundation. I found this was one of the most powerful aspects of our three days; a sense of 'knowing at a deep level'. Kathryn and I had never worked through an interpreter before, this offered a challenge but quite quickly became natural, we had a wonderful lady doing the translation who really understood the subject. We had prepared a lot of slides and papers and these had all been translated into Slovakian by yet another wonderful lady prior to our visit.

"... hard to put into words what a special three days these were. It was indeed magical....."

For many attending there was a growing recognition that they had clients who were probably DID and the training was helping them to make sense of some of the situations they were experiencing in their therapy room. There was also an acceptance that organised, ritual abuse is often an integral part of many of their clients' stories, allowing us to talk quite openly and honestly about the impact this has.

Hana and her colleagues made us so welcome. It is hard to put into words what a special three days these were. It was indeed magical for us from the beginning until the end but also extremely hard work. I genuinely feel we gave the delegates something they found positive, many commented on how helpful it was using our own personal experiences to enhance their understanding of the theory.

.....and at TAG conference

By Melanie

Two weeks later Kathryn and I ran a workshop at the TAG conference held at the beautifully situated Hayes Conference Centre in Derbyshire. This was a very friendly weekend meeting up with old friends and making new ones. Many people attending were new to working with DID so Suzette Boon's plenary presentations were a big help to their growing understanding. The other plenary speaker was Renee Marks talking about her work with children who is always a joy to listen to.

At the opening session of the conference representatives from FPP, the ESTD–UK, RAINS and TAG formed a panel to share the work we are doing as individual organisations and importantly showcase our collaborative projects. I feel there are some exciting times ahead with collaborative working becoming truly embedded in all our thinking.

"..."This was a very friendly weekend meeting up with old friends and making new ones..."

Carol, who is a Trustee of FPP presented a workshop with Mike Lloyd, a Clinical Psychologist and ESTD member who she has completed DID therapy with. They were pleased how it went and are going to present it at the ESTD-UK and FPP conference next March. Kathryn and I facilitated a workshop talking about what integration means to us, the challenges and importance of this stage receiving ongoing therapeutic support. Ruth Cureton another FPP member ran a workshop on traumatic attachment, again very well attended and received. The expert by experience voice is becoming ever stronger and increasingly well respected adding a dimension to others learning that we know is genuinely valued.

tag trauma and abuse group

estd EUROPEAN SOCIETY FOR TRAUMA & DISSOCIATION UNITED KINGDOM NETWORK

FIRST PERSON PLURAL FPP dissociative identity disorders association

R.A.I.N.S. Ritual Abuse Information Network and Support

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Contributions can be sent anytime

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About this publication

Rainbow's End is an information and mutual support newsletter for FPP members, back issues are also available for viewing by anyone visiting the FPP website. It is not a substitute for individual therapy or professional supervision, nor is it a replacement for other networks of support. Unless specified contents do not necessarily reflect the views, opinions or endorsement of the charity, its trustees or the editor.

Goodbye to regional support groups

The two pilot regional mutual support groups which FPP established are both closing as FPP groups during 2018. The Chester group held its final meeting in July. The Norwich group ends in October.

The decision to close the groups was a difficult one for FPP Trustees. Both had been successful for people who had attended. However, it had proved impossible to continue to marshall the resources (time, energy, stability, knowledge and skills mostly) to provide enough support from FPP for the groups to grow as they wished. For similar reasons, we haven't been able to establish new groups in other areas. That said, the decision to close the groups was also significantly influenced by board discussions following risk assessment exercises with the groups. These discussions brought to light that, without much more support from FPP than we were able to provide, possible risks arising from any infiltration of the groups by active abusive cult members could not be adequately managed by FPP. We had no indication that such infiltration had occurred but the risks from the likelihood and consequences of such infiltration were just too great.

The good news is current members of the Chester and Norwich pilot groups will continue to meet as groups of friends, independent of FPP.

At this time, FPP will no longer be directly supporting or establishing its own regional mutual support groups. However, we will share with any enquirers looking to start their own groups the lessons we have learned from our pilot groups and the guidelines under which the FPP groups were established.

FPP will continue to offer access for our full members to our online non-moderated mutual support forum. Those members who use this service regularly tell us how helpful it is and how safe it feels, with problems that do occur (as problems will in any community) being managed well by forum users, guided by the forums Terms and Conditions of Use. Only rarely is intervention by an administrator required.

As you may have read in previous issues, FPP are also in the process of working with a digitally skilled volunteer to develop a support app for mobile phones. The project is a long term one but we hope that before too long it will be at a stage when we will be looking for members to trial an early version.