

A Service User's Perspective

'A Journey Of Souls'

Jacqueline Stott

My personal experience

During the Spring of 1994, when my sons were of primary school age, we attended the celebration of a friend's life. We had all shared many moments of peace together before she passed in to the spirit world due to cancer. At the service, Rev. Neil spoke of her skills and knowledge, yet 'thoughts' appeared in my mind, which seemed to be myself in conversation with Rev. Neill. Were the pressures of lecturing at a local further education college while enjoying life as a mother and wife perhaps causing excessive stress? I grieved, listening to music during calm, brief altered mind-states.

Autumn arrived; time to commence the new term of teaching and my thought patterns were increasingly 'between worlds'. My behaviour became out of character and at the same time my sons each spoke of a young girl with a round face who was talking with them (later we found out that a girl had died of epilepsy in the bunk beds that had been handed on to my sons). Tom, who was then aged 5 years, also experienced a recurrent dream of a house fire. He stated constantly that there would be one charred body.

A local GP was called to speak with me at a friends' house where I had taken sanctuary from many more odd happenings in our home. He later arranged for an ambulance to arrive at my home on a Sunday morning, having given no advance warning to myself, my husband, or my parents who had travelled from Norfolk to provide support for us during the strange series of spiritual experiences. My sons had been peacefully riding their bicycles outside on the pavement as the emergency services arrived (before the GP). Both were distressed by the intrusion on our family privacy. A police car accompanied the ambulance, but was asked to leave when the duty social worker agreed with a personal friend of mine that I was not sectionable.

Further informal contact with mental health professionals necessitated a five-day admission to a psychiatric unit in Hertfordshire. I arrived home exhausted by the ward, taking Chlorpromazine and was informally advised to read the text 'Dead Happy' by Lance Trendall. By coincidence he was signing copies of his book in our local W H Smith store! The house fire occurred locally while I was in hospital, a couple of weeks after Tim's premonition. The friend of the person who had lost his life was admitted, one of several 'coincidences'.

My line manager at work was instrumental in requesting that the phrase 'stress episode' was placed on my college records for a half-term of enforced leave rather than 'psychotic episode'.

My return to lecturing was stressful, dealing with the stigma of being placed very briefly in a psychiatric hospital, which was known to many colleagues and students.

My marriage slowly broke down as 'higher sense perceptions' continued and by 1996 my sons were residing with me in a tiny Hertfordshire cottage. Due to the responsibility of becoming a single parent, my lecturing post became part-time agency work, as time was needed to focus on parenting through the range of stressful life transitions, leading to legal divorce.

I gratefully accepted a temporary NHS contract as a nursing assistant in an inspirational mother and baby unit in a Hertfordshire mental health directorate. Working alongside service users confirmed my theory that many of us experiencing voices and visions were in fact experiencing 'clairvoyance and clairaudience'.

Through regular attendance with a development group in a local spiritualist church, my own higher sense perceptions were confirmed as accurate. October 1999 necessitated admission for psychiatric support, as I was not coping with an experience of 'spirit attachment'. A young male who had taken his life on a local common was determinedly channelling as part of a soul group. My mind became an interface for photons of inspiration far too complex for me to understand and come to terms with!

Two psychiatrists, Dr. Alan Sanderson and Dr. Simon Belderbos, supported my perspectives on spirituality, but unfortunately the concept of a 'mind as an interface for photons made visible and audible through our sense organs' was not perceived by my allocated psychiatrist as an alternative diagnosis to paranoid schizophrenia. However, Dr. Belderbos provided a second opinion, which confirmed that my belief system is deemed 'reasonable by others who hold the same beliefs and in keeping with the ideas held by others of similar education or social or religious backgrounds'.

My thanks will always be with Dr. Sanderson and Dr. Belderbos for their support and guidance. Unfortunately, my medical labels and experience of being sectioned gave a solicitor opportunities to question my abilities as a parent, and through divorce proceedings my home and regular contact with my sons, as their main carer, were lost.

Medical notes give reference to 'paranoid, psychotic, delusional, fixated, hypomanic, paranoid schizophrenic and manic depressive'. Labels have frequently haunted me when I have filled in application forms for jobs. I was sent home from my shift on a psychiatric ward when a medical report was received. Luckily the senior medical officer requested I continue the contract offered to me after discussing with me my spiritual perspectives of mental distress.

The stress of loss of career, home and time with family led to admission to hospital in 2003 and again in 2005. Section 3 with semi-sodium valproate in 2003 was very stressful. My refusing to take Seroquel in 2005 resulted in an injection of Haloperidol and Lorazepam, but I am now informal, off medication and lucky to have access to the hospital gym for regular 'grounding and centering'. I am presently in an in-patient hostel but hoping to return to private or rented property in Hertfordshire.

My conclusions

I believe that many patients in hospital who are considered by psychiatrists to be 'schizophrenic' are in fact 'Intuitives' experiencing higher sense perceptions. Many patients/service users are experiencing such higher sense perceptions during frequent 'altered states of consciousness'. In hospital, we share personal insights concerning a whole range of ASC experiences – light-workers, light-beings, guides and guidance are frequently discussed on the wards - but these are seldom documented by psychiatrists. I have personally found the work of Dr. Pim Van Lommel (www.thelancet.com) Vol. 358 Dec 2001 number 9298) inspirational and am learning the language of science and the language of the soul with a view to giving others support when they experience higher sense perceptions and channelling.

In my view, a Care Plan Approach suited to spiritual emergency is an essential route to progress. Spiritual perspectives of emotional and mental distress need recognition. Being a medium in an acute ward has been an enormous challenge as the spirits in the soul world are keen to communicate with their loved ones! Many of us service users in the NHS system are very vulnerable in the hands of psychiatrists who have very little knowledge of higher sense perceptions and altered states of consciousness. Rather than introducing immediate medication, meditative strategies need to be allowed and encouraged, facilitated by mental health staff knowledgeable about higher sense perception.

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