Recovery in Moray: Collective Voice Report living/lived experiences in mental health inc. alcohol/ drugs use Covering October 2024 to March 2025



"A&E is a missed opportunity for supporting and signposting those with A&D challenges and self-harm. It's not the right place people in distress but could be used better."

"I want more support to be in Ward 4 the doctors and nurse can only do so much and that just seems to be medication. I want more of things like this (peer-support ".

"I volunteer more hours than a full-time job and it financially impacts me".

Selected quotes from community members and the context of their views.

This report shares stories from people in our community about using local services. Some parts talk about tough topics like unfair treatment and difficult experiences, which might be upsetting. Please read carefully, take breaks if needed, and talk to someone you trust if you feel upset.

Overview

Since 2022 the Moray Drug and Alcohol Partnership (MADP), and Moray Health and Social Care Partnership (HSCM) until April 2024, have resourced Moray Wellbeing Hub (MWH) to support the vital role of lived and living experience in the ongoing delivery and development of local services. This resource is used in parallel with direct funding MWH has leveraged for active citizenship, self-management and peer-research, with the ambition of making lived and living experience core to delivery of improving the mental health of Moray.

The aim is to gather collective voice in Moray around mental health and drug and alcohol recovery supports and services, placing MWH as a 'critical friend' to statutory services and aiding evaluation of delivery. Since February 2023 this information is then shared directly through HSCM and MADP to partners via a bi-monthly collective voice report and verbally in strategic groups. In 2024 steering partners moved to include Community Justice and the reach of the reports widened further. Alongside these strategic reports the ambition was to also create a version for use by the public via the MWH website. This is the third of these reports.

How collective voice was gathered for this report

MWH Delivery Team members operate an 'always on' listening ear for feedback from community members in the activities they host or attend, alongside specific surveys and social media feedback. Occasionally, other partner organisations contribute to reports with the voice of those who use their services as well. The approach in these spaces focuses on gathering data (mostly qualitative, i.e. the life stories people share about themselves) on how effectively services and supports in Moray achieve CHIME (Connection, Hope, Identity, Meaning, Empowerment) as a framework for measuring recovery and wellbeing impact.

Privacy and ethics process

MWH is an organisation that was set up to share lived experience voice. We do this as peers and always look to balance the needs of privacy and ethics for individuals with the need to share experiences to create positive change. When we hear people's experiences through conversations, we try to remove identifying information when writing our reflections. Next, we summarise these in full reports and check again for identifying factors, partners who monitor the collective voice activity review this as well. These are then shared with strategic groups for Moray in mental health, drug and alcohol recovery. We may also share with other groups like justice and children's services. For this public report, our team took the fuller reports and further removed any data that may impact privacy at a community level. We are working hard to improve this process, including with academic partners from other projects, and welcome feedback and ideas to improve this.

Collective Voice: October 2024 to March 2025

1. Report summary:

- Key themes: Recurring themes around recovery from alcohol and drugs and the associated services and stigma. Winter and access to support over the festive period, FND (Functional Neurological Disorder), realising human rights, parenting, recovery in mental health / alcohol & drugs and around crime and justice. There was significant feedback from work around the Community Justice Strategy. Pressures on peers to volunteer and expectations from services around this, families and supporting young people who are neurodivergent or have mental health issues, access to community support spaces, sexual exploitation and Community Justice (following events for both), stigma from GPs around mental health, importance of connection in community venues and access to digital resources.
- This report's reach: 127 people over 134 events (number of people Moray Wellbeing Hub (MWH) Champions spoke with in their communities of place and interest).
- Event types where the data was gathered: The main sources for gathering information around services/ supports for mental health and alcohol drugs recovery in October 2024 to March 2025 included an extension to the digital inclusion project, training courses such as Trauma Informed practice, as well as twice weekly ward 4 visits brought rich feedback from diverse community members. This report also pulls voices heard via our Justice project; to gather these voices we used our always-on online form to gather this hence the spike in online form collection. The voice of lived experience was also captured following reviews of the Alcohol and Drugs Partnership Strategic Plan Feedback and MAT Standards Experiential feedback.
- Services & supports mentioned: Ward 4 support, A&E, peer support groups, Arrows, Moray Wellbeing Hub as
 well as Goldster who had been appearing in the area in partnership with the MH & W Practitioners marketing
 their online platform for health and wellbeing. Justice partners, neurodiversity and lots around support for
 children.

2. Responses from strategic statutory partners

"The Moray Alcohol and Drug Partnership deeply values the time, energy, and openness of everyone who has shared their experiences of substance use and related services. Your voices — expressed through the Collective Voice Report, contributions to the Lived and Living Experience Panel, and feedback on our MAT Standards — have had a meaningful impact. They have shaped our three-year Strategic Delivery Plan and Outcomes Improvement Plan and continue to influence the development of services that are co-designed and co-created with those who use them. Your insights are essential in helping us build more compassionate, inclusive, and effective supports for people across Moray."

ADP Coordinator, Moray Alcohol and Drug Partnership, Moray Council.

"The Moray Community Justice Partnership appreciates the time people have taken to share their experiences. We discuss justice-related comments from the collective voice report within our partnership to agree on actions. Engagement on our strategic plan was conducted by Moray Wellbeing Hub on our behalf during this reporting period, this engagement informs our ongoing work.

Key points raised in this report include challenges in travelling to prisons for visits and meetings. We have been highlighting this issue nationally and will explore local actions. Concerns about employment barriers due to criminal records were also mentioned. We are collaborating with local employability partners to ensure both affected individuals and staff understand disclosure processes, especially with recent changes in Scotland. Youth justice was highlighted, and we are working with youth justice colleagues to try to prevent young people from entering the adult justice system. Our involvement in multi-agency work supports this effort. Additionally, we recognise that volunteering more than being paid and the emotional toll of sharing lived experiences were raised as concerns. It is essential that all our justice partners understand this and strive to create meaningful opportunities for individuals. We are committed to continuing this important work and ensuring that the voices of those with lived experience are heard and valued in community justice work." Community

Justice Coordinator, Education & Social Care, Moray Council.

"Mental health services continue to value the contribution and feedback from those with lived and living experience. The work undertaken through the Collective Voice both encourages us and gives us pause for thought regarding people's experiences and we look forward to working alongside our communities in the future to support ongoing improvements and ensure that everyone feels listened to and valued". Interim Service Manager, Moray Mental Health and Drug and Alcohol Services, Health & Social Care Moray.

3. Direct quotes from community and qualitative data analysis

On the following pages are full quotes from community members either directly or indirectly linked to specific services or supports, which are organised under CHIME (Connection, Hope, Identity, Meaning and Empowerment) framework. The CHIME coding has been applied by MWH Delivery Team members to help breakdown the range of comments. This process is being further developed with support from partners in health data research.

- Each is split by what worked well (green) and what could be better (orange).
- The context for each conversation is given along with a code for where this conversation was held.

Connection:

- Conversations at community drop-in around loneliness and how even if you are going to groups the evenings when at home can be very quiet so finding things to keep occupied (Community drop in)
- "I didn't realise that others were actually feeling so similar to me" (Staff session within Moray School)
- "I regularly advocate and share my lived experience but that's not for everyone and sometimes people just don't
 want to share their recovery with others, it's personal to them for whatever reason or out of fear." (Champion
 feedback)
- "These groups always cheer me up. it's good to talk with each other" (Ward 4 drop in)
- "We have a connection to each other in here, even if we don't speak, we know we are connected." (Ward 4 drop in)"
- Update on the Foggies pub drop in: 3 attended week 1 and 8 attended week 2, feedback around a very relaxed space with no fear of being shamed due to location. (Champion feedback)
- Connected with staff member (excellent feedback for them from inpatients who say they is 'a saint') (Ward 4 drop in)
- "You've (peers) really helped me today I feel much better" (community drop in)
- "Feel more connected in this safe space knowing everyone in here is experiencing the same as me" (other)
- Some people are not looking forward to the festive period. We spoke about K's coffee shop and how they are open on Xmas day along with N4H doing a Xmas day walk in Forres. (Champion chatting to others in Elgin drop in)
- Young person struggling to find support and had no support from G.P. We worked through mental health pathways and looked primarily at the anytime support, the have been in touch with psychological therapies and are awaiting an assessment from them, explained that Breathing Space are open late at night, and encouraged them to come along to Foggies drop in on Friday, they did not want to go into too much detail with me at the time but said they would be happy to talk at Foggies on a 1-2-1 basis. We used CHIME again and how we can start to incorporate this into daily lives which they really liked the idea off. (Champion reflecting on conversation, other)
- Moray Men Talk 3 men from the Foggies drop in are going along to an event there on Sunday and shared with me how they enjoy meeting up with each other (Champion reflection from Elgin drop in)
- "Great energy from the receptionist and very positive and happy to put out the announcement for us being here." (feedback from Forres Drop in from MWH team member)
- "Getting everyone together is good getting better understanding and from different localities" (Champion feedback from training course)
- "We need more of this; we need to be in the room with people who have come along for the same information" (Champion feedback from training course)
- "A parent had shared their experience leading to another parent sharing their feelings around diagnosis. The two
 parents decided to stay behind and connected, shared experience and knowledge for an hour after the course was
 finished." (Feedback from training course)

- "To make change we need to bring communities together to support each other, the only way to make change happen now is by power in numbers and making a stance" (Champion feedback on how to make change)
- "Connecting our services to improve and identify everyone's human rights" (feedback from Advocacy Training)
- "Had connection with lots of likeminded people who were excited about the projects and working in the community. Hope that we all can work together to make a difference. Meaning from the evidence that our efforts are resulting in more empowerment and hope in our communities." (feedback from Advocacy Training)
- "Just meeting others and having fun without loss being at the centre of conversation. You know but them understanding their response to asking why a group trip had helped them. Is looking for local connections" (feedback from Foggies Drop In)
- "I have tried to access mental health (support) but have been passed to point of being lost in the many subcategories of services." (Online Form)
- "You don't always have an understanding or awareness of what is on offer in community/org groups." (Champion feedback)
- "EConsult, not available at Linkwood medical and you can only phone for appointments before 10am." (partner drop in)
- "I arrived at an NA (narcotics anonymous) meeting and was told that this meeting was not for me. I'm unsure what meetings are for. I was embarrassed I was turned away," In discussion with an MWH Delivery Team member it was clarified that the community member arrived at an arrows NA meeting and was kindly asked why they were there and reminded that NA is for people who are recovering from narcotics challenges and that this group might not be the best for them. Delivery Team member had a chat, and the outcome was that they were told that this is maybe not the best base for them because it could potentially be more harmful to their mental health challenges than it would be helpful (Community drop in)
- "Identified Gaps in provision: peer support ante-natal and post-natal, Support for fathers, Support for couple parents together, Mobility friendly parent support, Parents needing grief support after death of a child to substance use, Parents with young person in ward 4, parents with teenagers, More support needed for Neurodiversity in the family, Limited support for Foetal Alcohol Spectrum there is a FASD Grampian FB page" (Champion feedback)"
- "You could be sitting next to someone struggling and you sometimes would never know"" Discussing men's mental health and anxiety in males (Community drop in)
- "I respond this way to get extra attention that I feel it do not get as a mentally unwell person" (community drop in when discussing conversations and direct suicide talk)
- One Lady who will lose the use of her legs had been speaking to carers to get support in place for when it happens (Self Directed Support) and was told that for a bedtime visit she wouldn't get the chance to pick her time and it could be from 7pm - 10pm, her words were, "I want to be able to choose when I go to bed just because my legs don't work doesn't mean I still don't want to live my life." (Elgin drop in)
- "Would like more Groups for parents/carers to connect with in moray" (other)
- "The BOW cafe is no longer a recovery cafe, when I host my group, I feel like I am actually in the way of the cafe, I don't like using the space anymore. It needs to be recovery focused, great if there is a food cafe element as long as is recovery focused, space that recovery organisations can use, also for workforce wellbeing activities, it's no use getting closed last minute for private functions this needs to be consistent". Champion feedback about available spaces and support for recovery.

Hope & optimism

- "We definitely need this, good to see something happening." (Champion feedback around work with Community Justice)
- "The mental health practitioner at my GP really speeded things up and got me to the psychiatrist for the support I needed much faster than it would have been through the GP." (Training Course)
- "My family are finally getting help" (online form)
- "I already feel like a weight has been lifted knowing there is things out there". Individual also shared they don't really have any friends they can offload to, and was keen to try out the drop ins. (Forres Drop in)
- "Whilst sitting having a chat is amazing, there are people that are struggling but still want to move, laugh, dance
 and connect this way too in a place they feel safe with people they feel they can connect with this way too."
 (Champion feedback at walk and talk)
- "Hopeful that with these short trainings happening, people are more aware, understanding and gain more knowledge to find support for women." (feedback from commercial Sexual Exploitation and Violence Against Women)

- "it's important that peer support is available, working together in Moray and supporting each other that are offering peer support and how people are also looking for more upbeat events to make them smile, move, dance, sing and connect with people they feel they connect to this way too." (Champion feedback from Walk + Talk)
- "Hope that recovery is possible from conversations, Identity as active champions and as people actively involved in improving mental health, meaning that we aim able to hold a safe space for others, Empowerment from taking action to improve our lives." (Other feedback around support needed)
- "Can SIPP (Suicide Intervention Prevention Planning a 4h community course) be tweaked and adapted to be delivered to younger children 7-8yrolds? Our young people are far more intelligent than we give them credit for. See Me is a great programme and this can be delivered throughout schools to staff and pupils but what is the best age can this be primary schools? " (feedback around support needed for young people at Action Group on Suicide Prevention)
- "Proud that MWH has been asked to look at this document it validates their efforts to make a change" (feedback at Action Group Suicide Prevention)
- "Learning that great spaces can help people chat to one and other every week and have something to look forward to." (Feeback from Foggies Drop In)
- "We also spoke to a teacher who was really keen to find out about what support there was locally for parents. This was really positive." (Other feedback around support needed for Neurodiverse families)
- "There is help out there and support networks that are as passionate as they are. They are supporters and absolutely doing their best to support and advocate for assistance, they are taking active action to find support and their children are amazing." (Other feedback around support needed for Neurodiverse families)
- "Can you tell me what supports are offered for when I get out." (Outreach opportunity at ward 4)
- "Getting my devices back and being able to get outside has really helped my recovery I get why sometimes they are taken away, but I can also see how they help in recovery especially mine." (ward 4 outreach)
- "Hopeful things will change for the better. A parent spoke of the lack of support in school and that a number of
 parents in their school had offered their own time to support pupils with additional support needs -a proactive
 step and I wondered if this could be adopted in other schools to ease the pressure on staff. (Other feedback
 around support needed for Neurodiverse families)
- "Finding the right leaflet can help just at the right time its needed" (Other feedback around support needed for Neurodiverse families)
- "We spoke about the positive traits of being neurodivergent and people were pleased to see that we were focussing on this instead of the negatives." (Other feedback around support needed for Neurodiverse families)
- "Great to have some showcasing from other organisations on what they can provide for your wellbeing." (Foggies Drop in when Get on a Bike came alone)
- "The staff on the ward have been amazing but it will be good to see some new faces and get other support from them." (ward 4)
- "The more our services connect with one another the more we can support people find out where they stand when it comes to their own human rights!" (feedback from Advocacy Training)
- "Always room to improve our services." (feedback from Advocacy Training)
- "Speaking to a specialist about health conditions who took the time to listen and explain more about conditions and how the medications work and how best to take them, they posted leaflets rather than email " (feedback at Foggies Drop in)
- "Met someone who holds a safe space for anyone who needs. They have been working hard to keep their space open for anyone who needs. Seems to attract LGBTQ+ community as they themself is a member. Has realised that many young people cannot be themselves at home and encourages them to be themselves there. They don't mind if these users are from the college or not, wants to be a safe space." (feedback from someone holding a space at UHI)
- "X's concern was when working with children and neurodiverse children if they refuse to do something how do we
 work round that, does it depend on the setting we are in, we discussed what others would do in this situation and
 it was really dependant on what they were doing, but all said they would hope that they could take the time to
 talk to the child and find out what their concerns were." (Other feedback around support needed for
 Neurodiverse families)
- "CHAT!" (Other feedback around support needed for Neurodiverse families)
- "More Activities needed after school directed at Supporting Neurodivergence." (Other feedback around support needed for Neurodiverse families)
- "If the GP opening hours were at least longer, we might have a chance at better outcomes" discussing GP appointments and lack of resource. (Community drop in)

- "It's too long to wait for an assessment when in crisis and decision is made it needs to be a fast turnaround before you revert back to using substances as a coping mechanism." (Champion feedback)
- "There is not enough investment in peer led organisations." (Champion feedback)
- Two women had attended the Goldster event around pain management, there was nothing to do with how to manage pain they took it as they were getting blamed for being in pain and it was down to their life choices and found it very much a blame game. The host spoke about lots of events online and when a member of the audience said that some of the older generation can't use online, they just said that was their fault and it can't be helped. (Community drop in)
- We had conversations around our families and how different they can be and how we can feel judgment from them as our lives are not the same as theirs (Elgin drop in)
- "I went to a drug and alcohol group in Glasgow when I lived there and all they done was put me in a group with other junkies" participant speaking about drug and alcohol services they have used (Ward 4)
- "I want more support to be in Ward 4 the doctors and nurse can only do so much and that just seems to be medication. I want more of things like this (peer-support) I want to be able to speak to people, people that really understand how I feel". (ward 4)

Identity

- "Men do talk, they just need a certain of type of environment to start the conversation" (Event participant)
- "Young people don't really engage with services, they engage better with people who they relate to" (Community member drop in)
- "I decided for myself I don't identify as that person anymore. This is my chance for change, and I am going to do this. " (Champion feedback)
- "It's time to share our recovery loud and proud. " (Champion feedback)
- "We are all wired differently but we still get from A to B our own way, this might just take others longer to get to." (other)
- "I really am thinking about others' reactions in the past and how I could have supported them, I am much less
 confused now." Discussing our own approach to reactions and how it can feel confusing to see others react in a
 hostile way. " (Champion feedback at Training)
- "Doing something like this and being creative can really improve your wellbeing" (feedback from Champion vision board session)
- "Connected with the person who said they were distressed at beginning of event to see if there was anything we could do, X explained currently is trying to find out who they are and where their purpose is in life, said about having panic attacks and how they thought they were dying so we looked at ways to combat having the attack, reading anything, 5 things you can see, feel hear etc. Looked at Discover Pathways and what supports can be found in there along with Wellness College, X likes being out in nature so signposted to N4H and when and where their next walk is, also looked at Moray Men Talk as well, gave leaflets and cards for discover pathways, sport in moray, Champion card and Mikeysline. X had changed to be positive when we checked in at the end of the event" (case study from Champion vision board meet up)
- "We spoke about Voiceability as (individual) is looking for someone to help them with things and they can't express themself when talking to others." (Foggies drop in)
- "We looked at if you have a broken leg people are happy to give that the time it needs to heal, so why is our wellbeing any different this also needs the time giving to it to heal, they had never thought of it like that and really understood that it is okay to give yourself time" (ward 4)
- "They can't fix my (body) but my heart is more important. If I Don't have my heart, I don't have nothing" (Foggies drop in)
- "They are going to a rehab centre to help with living skills, X has been on the ward for about 18mths and the staff feel like this would be a great achievement for them to give them the skills needed for living out of the ward, they will learn how to cook, clean, pay bills and manage finances, as the session went on their mood around this changed they said "I'm going to fail at this like I fail at everything" we spoke to them about being kind to ourselves and how it is not something they can fail at, if they can come away with 1 extra skill then that will be a success, had conversations about remembering to see ourselves through someone else's eyes." (ward 4)
- "The power of lived experience but also the importance of keeping self well when giving testimony, can be retraumatising, draining, as well as replenishing." (Feedback from Justice Celebration Event Film Screening)
- "When looking at discrimination one participant had told their family member not to put anything on job application around mental health as they didn't want it to affect their chances of getting interview. They said X

doesn't have a diagnosis so they didn't think it would help but can now see that you can have a mental health challenge without a diagnosis and how this might have helped with their employer. Another participant had said that they had disclosed they had mental health challenges and got good support from this. " (feedback at training session)

- All participants stated that it was good for themselves to look at their own window of tolerance and all have recognised the fact that children can have a much smaller window and then when you take the neurodiversity into this as well this can be much smaller. " (feedback at training)
- "Young people who are in the cadet's or military style hobbies are much less likely to engage in drug taking, they
 could be an example to the other children in school" Opinion of a parent with adult children with addiction
 challenges. (Community members drop in)
- "There is lack of support and books for those going through trans surgery. The doctor has even called me in to ask
 me questions that another patient he had had asked. They spoke about the lack of peer support locally. " (community drop in)
- "We are discharged from hospital after my daughter harmed herself, it was midnight, and we were told no support
 was available to get us home to (rural Moray). I asked for a taxi, they said no, I explained I had no money or means
 of getting us home, we were told to get a bus. I explained the next bus was not until 5:30am. We had to walk about
 Elgin from midnight until the bus came where luckily the driver allowed us on without paying." (Community Drop
 in)
- "I took (illegal substances) for 12 years to deal with my ADHD." (Training Course)
- "I really struggle with the idea people can't be helped (and choose suicide) as an optimist." (Training Course)
- X wants to be able to get their own medical records to see what has been communicated between the professionals for the treatment they have been receiving, before taking this further to have their voice heard. "To be told it's all in my head and you just have anxiety and depression." (Elgin drop in)
- "G.P. didn't seem interested in helping with other supports just offering me tablets, I needed to be able to connect and get support from other services. I know it doesn't help me being alone" (Elgin drop in)
- "They hate to talk to the GP as gets fobbed off with back pain, so if they won't listen to them for that they feel like they won't take him serious about mental health." (Foggies drop in about GP)
- "They have missed appointments, and the surgery keep saying they won't give them anymore they don't understand they are struggling to leave the house." (Foggies drop in)
- More expectations, working for free, feeling slightly undervalued, "I volunteer more hours than a full-time job and it financially impacts me". (Champion feedback about using lived Experience to support local services.)
- "I never thought about how I might be traumatising myself by not advocating for me in medical appointments" (Champion feedback from training)
- "Not many groups for widows in Moray where they can go and have a chat with common interests. Mostly all online if any." Would like to find out if there is any groups or thing to do with other widowers in more that are of a certain generation. which is close to Elgin" (Foggies Drop In looking for support for widowers)
- "Being told that once you have treatment for a trauma that you will be over it, but that is not always the case." (Foggies Drop in on trauma)
- "Block charge for yoga classes this is not good for me due to gastro flare up's and sometimes not being able to go I need pay as you go classes." (Foggies Drop In)
- "My 15yr old got diagnosis for ADHD but they didn't want to give medication for this, instead they wanted to give an antidepressant to see if that would help." Parent fought for 9 months saying that drugs can cause suicidal reactions, but they ADHD medication is what they need to try first. (feedback at training)
- "Mental health is anxiety, stress, not being able to cope with day-to-day life, never thought of mental health as mental wealth" (feedback at training)
- Many have had the stigmatisation of looking physically well and being told "you're fine you just need to keep busy"
 A few had been too scared to go into details with friends and colleagues about how they are really feeling due to getting comments like this." (feedback at training)
- "Waiting time for assessments around ADHD and autism is too long of time so I have gone private." (foggies drop in looking for support)
- "There's just not much out there for some young people, they don't realise how low they are until they do." (feedback from when handing leaflets out at college)
- "Getting a hold of anyone at Arrows takes so long and you don't have that support when you need it the most it can take 2-3 days for someone to get back to me." (ward 4 outreach)

- "The impact of just everything on young people it's a tough world for them, what stereotypes are in the media
 for them what messaging are we giving to them, how can we help them make smart choices without dictating,
 or terrifying." (Feedback from Justice Celebration Event Film Screening)
- "Hard to find Support for young children under 16 for mental health and where can help support other than a therapist with it being a long waiting list." (Forres Drop In)
- "Spoke with a GP Regarding a young person for support, they are not suicidal, but the doctor would think they
 would benefit from talking to councillor or therapist, but they are unsure on where to point them as more things
 are pointed for adults and not children." (Feedback from Drop In)
- "Had a circles worker then they just left, nobody told me what happened or who to turn to, I can't get paying service charges they are raising all the time, and I don't know if I am getting all the benefits that I should be getting." (foggies drop in)
- "One person service charge is going to be increased to over £300, this is paying for offices, hallways, electric, maintain office equipment etc. "This is going to leave me with £50 of my PIP what am I supposed to live on." (foggies drop in)
- "Arrows is not the right service to support the ADP Strategic plan, they don't have the right experience in recovery
 or the expertise, the workforce is inconsistent, and communication is poor, they don't look after their own
 workforce either. Wait times can be excessive and cause people to relapse or hit crisis point. " (feedback Action
 group)
- "It feels like who is deserving of support and rehab gets it... who makes these decisions (there is) no clear guidance.
 " (feedback action group)
- "There is a lot of corruption happening in our services, this needs to stop and be tackled" (feedback action group)
- "Where is the money coming from to do all this? money and poverty is a huge route cause for using substances."
 (Feedback action group
- " At what cost to the community, rich get richer and poorer get poorer." (feedback action group)
- "Services expect the parents to do all the doing, we can't do it all and were not always the right person, my child couldn't get help in the community, so has ended up back in jail because they get the support there." (feedback – action group)
- "Expectations on parents/families/carers is too high." (feedback action group)
- "PPD (correct diagnosis was unclear) a condition that effects your balance that not many people know on what it
 is. Not Many professionals can point me in the right direction with this." (feedback looking for neurodivergent
 support)
- "Parents need support but instead they have to wait." (feedback looking for neurodivergent support)
- "They spoke on the language barriers which they find cause people to take longer to trust. People don't like to use language translators either as it means another person hearing their stories they don't want to share with." (feedback looking for neurodivergent support)
- "I don't know what a wellbeing toolkit is" (ward 4)
- "Lack of access to social security benefits and support services, workplace discrimination, or other support." (feedback from Sexual Exploitation and Violence Against Women training)
- "As individuals, communities and services face the multiple pressures from the Cost-of-Living Crisis, there are
 increasing numbers of women faced with difficult financial situations and reduced options. The risks for
 exploitation are growing and numbers of women and girls involved in all aspects of the sex industry are increasing
 across Scotland." (feedback from Sexual Exploitation and Violence Against Women training)
- "There has been a concern over the number of primary school children who have taken their life and the worry that sometimes this can be unintentional and can be influenced by social media, they feel that early intervention needs to be happening in schools and possible within primary schools. There are lots of pressures on staff and pupils in schools so how are they going to be supported to implement this with in schools, there are teachers that really do care but others that don't seem to bother or are not equipped with the right knowledge to support those in crisis. "(feedback from Action Group: Suicide Prevention)
- "Women usually enter prostitution due to poverty "(Other from webinar about sexual exploitation) "you're just a piece of meat to the guys." (Other from webinar about sexual exploitation)
- "I didn't choose prostitution. Prostitution chose me"(Other from webinar about sexual exploitation)
- "I just couldn't continue with work and felt there was little support around me. I got medication and it helped but I needed more support". (Champion feedback)
- "We tried our own group, but it fell apart." (Other feedback around support for Neurodiverse families)

- How to sustain staying off drugs while living on own "getting a hold of anyone at Arrows takes so long and you
 don't have that support when you need it the most it can take 2-3 days for someone to get back to me." (feedback
 ward 4)
- "All my friends drink and take drugs so breaking that habit can be hard." (ward4)
- "Stigma around screen time when it comes to Neurodivergent children" (feedback at Foggies Drop In)
- "No conversation allowed in appointment, what being told to kids can cause more harm than good as they don't get a chance to have their own voice. Freedom to say no." (champion feedback at training)

Meaning

- "My GP is really good he really takes the time to listen to me and understands and lets me explain how I feel" (Partner drop in)
- "I WANT to talk about all this, I need it out of me" (Ward 4 drop in)
- "I go home on Friday; I will miss next week's groups but the 2 I have attended have been amazing! They have been so helpful" (Ward 4 drop in)
- "Trying to get a CAMHS appointment was faster through the school not GP. People don't know about this, and everyone thinks it's the GP, but a great guidance teacher can be a brilliant help. They speed this up and it was very supportive process." (Training Course)
- "My peer support group is getting momentum, the other parents are starting to support one another, and I don't need to do it all myself." (Champion feedback)
- "You make people Smile" (Other feedback to MWH rep around support for Neurodiverse families at event)
- "They are an ex-music teacher and has wonderful ideas about using sound and instruments for therapy" (feedback on neurodiversity)
- "I can make a difference even by listening, I am able to hold safe spaces and help others" (feedback at National Autistic Society Charity Event on how they feel can help)
- "While discussing what it takes to support someone a participant did say that they were scared to support as they are not a professional and would others just judge them as being nosey. Someone made a good point about when covid hit everyone want to help each other there were online chats and groups started for helping with shopping etc, this is how they want things with mental health, "if we all do a little bit, we can all help each other, some people don't have friends and family they can turn to" (feedback from training event)
- "They seemed to really like being asked and listened to and not just the usual how are we okay we're all good let's go." (feedback at training session when participant tried chime with their football team)
- "They wanted to find out more about Peer Researchers, they are involved and supports within a pain management group and can see both working well together." (foggies drop in on wanting to know more about Peer Researchers)
 - "Once you have seen a psychiatrist at MIDAS your GP will no longer support you as you are "under care" of a psychiatrist. If something is urgent this makes people lose hope or medicated because it can take months to years to see a psychiatrist after initially seeing one due to having to ask/convince your mental health worker that you aren't coping, then another 1-2 months for a space the psychiatrist has available. If I didn't have the support of my family just now, I would have ended it long ago. I last saw my psychiatrist at MIDAS over 5 years ago, I see another at the end of this month up at MIDAS. I know what my problem is but the fact there is a barrier between the GP and MIDAS (they should work really close together) has made me give up on my own "success story" so many times. This is the last chance I have at any hope in the system we have at the moment I am not strong enough to keep banging heads together and doing the work of "professionals". My mental health worker has told me I "played the victim" in life due to not "manning up", nobody can judge something unless they have lived a life they are judging of. The stigma is horrible, I walk around with my head down scared to speak up because of the way people over power ones with anxiety or depression. I don't have the tools (I have asked for help) to use my voice to be heard but when I use it to be heard it comes across as malicious in some way when I just needed to be heard. Discrimination within the social work sector needs to be addressed, people in authority should go by factual evidence, what was proven or there is a record of not going by the possibility of what could be by going from someone else's history or a matter like "baby P" for example... Everyone is different so mental health in everyone will be different. Too much time is prolonged by professionals just by prescription medicating patients instead of investing time to show/tell them where/how to get help, this just brings the patient back a month later as they are tolerant to the medication and need it increased or the medication which 99.99% of the time has horrible side effects so the patient is tried on another. If the patient has any medical issues after trying the second medication or while trying it, medication no.1 is put to blame disregarding the patient's physical being. I have been passed round and round this merry go round with no stop sign or exit door. It feels like I and many others are just used to fuel statistical databases for reference but never actually taken seriously. I have slept on the couch for the past 5

weeks with knives in each hand as my paranoia is too extreme to feel at ease in my own home. I have complained about my area as there are a lot of "activity" happening, but nothing has been done about it. Another person missing in the news, but nobody sees the picture of who is taking these kids/young adults #countylines!!" – (Online Form)

- "We need commitment and resource for the workforce, raising awareness and embedding LE this needs to be priority for the ADP investment to community peer led orgs." (Champion feedback)
- 1 young person attended with a parent had visited A&E 3 times within last week following suicide attempts was discharged home to family as expectation that they would look after them, but this is not always possible and physically and mentally draining need support, fear that this will happen again, do have a plan to try again. (Community drop in)
- "Although I have a long-term condition the GP focuses on my previous drug use. My shakes are not withdrawal, they are a symptom I need medical support with." (Training Course)
- "Because I have a criminal record lot of organisations don't want me involved, but I am a different person, and I want to inspire others to make change. I'm ready to get involved, volunteer and help." (Training Course)
- "I was waiting 6 weeks for my assessment and ended up using in the time, if I had not had friends support picking me up and taking me to meetings I wouldn't of went." (Champion feedback)
- Themes discussed around the time of the year and how that people's mental wellbeing can suffer, spending Christmas alone and not wanting to celebrate so looking at other things that people can do, what is there in the community. How it can be good to spend time with family but can also make you feel even more alone, it's not for everyone. Making plans and looking forward to things in the new year. (Champion Feedback on community conversations with peers.)
- "(community health event run by private company) speaking about how food can impact your life and said that if you have 1 of these following conditions you would be likely to get more the conditions were Cancer, CVD, Asthma, Diabetes, Anxiety, Depression, Chronic Pain, Arthritis, HPB, Obesity, Liver Disease, Stress. Also stated that these conditions were all food related and due to poor diets, followed on to say that treatments can't help these conditions. They said, "It's nurture that the body needs". Processed foods cause us inflammation and infection and when talking about whole food everything has to be organic including what the cattle are eating if they are fed anything that is processed then this is not good for us, also went on to say if we ate whole foods we would have reduced our risks of covid and that the first people who died due to covid all ate processed foods. There was lots of advertising pics from the 50s and 60s where they were advertising full fat cheese and butter and how it was all good for us to have full fat then talk of what we are being told now the full fat isn't good for us and how that doctors and nutritionists are still getting it wrong. went through slides quickly and never gave anyone the chance to question anything would often refer to native tribes and how they are so health compared to us. When speaking about the whole foods spoke about vit D and how we are not getting enough and should be taking supplements of this, and that G. Ps recommend 800 units, but they would recommend 2000 and how we can only get levels checked once a year from GPs, but the company (named) can do Vit D test at a cost of £30. During the talk the only way in which we could enhance our wellbeing was through eating whole foods no other suggestions from them on wellbeing. I was still waiting for some tips on improving wellbeing without food and ways to help but unfortunately this didn't come. Later I watched one of their info videos for depression and anxiety, and the presenter has just said "I don't recommend any medications for anything", I couldn't watch any more. I just keep thinking if this was someone that really needed medication but was reluctant to take it this could very well make them more unwell" (other)
- "Was using the bow drop in and sad to see that go but was looking for more 1 to 1 peer support. Felt the Bow was too busy for real connection." (Feedback from walk and talk on peer support)
- "How can this link in with parents? There are families that need to be involved and be able to know where to turn to for support, there can be a stigma amongst parents of children with mental health issues that they feel like they have failed as a parent, and it is their own fault, and they will be judged for a child having challenges. The main thing though that all agency's need to be working with each other we are all striving for the same outcomes so more working together needs to happen."
- "Trauma informed/skilled training opportunities to know what services should be offering. Often find this is a tick
 box exercise and services don't actually implement into practice, depends on the individual worker". Champion
 feedback about opportunities for lived experience

- "Everybody needs a little bit of help, but they can't do it for you. You need to be ready." (Champion feedback)
- "It's so much better than it used to be, talking about mental health When I was 12, I was told I was 'a nervy girl' it was always swept under the carpet" (Ward 4 drop in)
- "Men do talk, they just need a certain of type of environment to start the conversation" (event participant)
- "Ward 4 has helped me a lot, I feel a lot better! " (Ward 4 drop in)
- "Going through recovery with other people who are in the same position is a game changer. It inspires you and makes it possible to change." (Training Course)
- "I think these visits (external organisations) have really helped my discharge happen" -Discussing the supports available while working toward discharge from ward 4
- "Arrows group did support my recovery no one made me do it I done it for me, I went to them all." (Champion feedback)
- "(person) from Arrows as an individual goes above and beyond (more than their role)." (Champion feedback)
- "I have had brilliant peer support from Bipolar Scotland for coming up to my quota of 12 weeks video calls. I can get another 12 if I have some other issue or stuff to work through." (online form)
- Lady came in to speak to us she was looking for something to help her, her mood always starts to drop around Feb/Mar time and she wanted to try and have something in place before hand to see if this would help, gave her information on health and wellbeing practitioner, we looked at Foggie's drop in, The Midlife Mingle and Nature for Health walks as she enjoys walking as well, gave her information on Wellness college and spoke about digital quiz and how connections with others can help, she did say she doesn't really have any friends she can offload to so keen to try out the drop ins. (Forres drop in)
- "The LLE panel (Lived and Living Experience of Alcohol & Drugs Panel) is great, people are so supportive, and we have different experiences, it's friendly and fun, we have made as real difference as well." (Champion feedback)
- Community member sharing their experience on referrals -"Midwifes are good and helping to fill in forms alongside parents for the referral of diagnosis." Social Security Scotland can help parents with Child Disability payments forms and can do this over the phone or can come to your home to do this. "a lot of people struggle when it comes to filling in all the forms for this". (other)
- "a lot of meeting with consultations are difficult for kids (age 14), not able to receive what's being said at this age and harming them. Always make sure I have contact with doctor prior to give details of what will be discussed talked about to protect my child and sharing with them what works for them beforehand. Creating a safer place for my child." (feedback at trauma informed training on their experience at GPs for themself and child)
- "Parents had concerns about children and what was next for them. Explained that they can always get in touch if
 overwhelmed by the information today. Introduced ICON and what they do."(Individual looking for neurodiversity
 support from MWH team member)
- "They felt like their improvement came from being able to get out for short periods of time and being able to use
 his devices to connect with family and friends, they can see where they needed to change things and be able to
 take the time to listen to what others are saying as well as being able to advocate for themself in a controlled
 manner. " (ward 4)
- "If you don't step out of your comfort zone you don't grow." (Foggies drop in stepping out their comfort zone to go along to drop in)
- "Missing the Mark on Facebook is a great page to have a look on." (feedback on looking for support for neurodiversity)
- "GPs don't know what resources there are or don't tell patients. Why are we being sent away without being told these things are available in the community?" (Event Participant)
- "If I want to go to rehab, I want to go now." (Champion feedback)
- "I only get to see my psychiatrist once every six weeks there is no in between contact and I have no idea where else to turn" (Community Drop in)
- "The receptionist had never heard of mental health and wellbeing practitioners at my GP. I really had to push them for a self-referral, they are kept quiet and need to be prompted more."- (Training Course)
- "Sleeping tablets don't work for me at all, I've tried loads. They're not good for me but I've never been offered anything different" lack of alternatives offered emerged in discussing the online tool Sleepio being NHS approved (community drop-in)
- "Sometimes Arrows as a service is too slow, need help when ready not weeks down the line." (Champion feedback)
- "We need consistency from arrows but there has been lots of challenges, big staff change over, they don't have enough time and have too many clients at once." (Champion feedback)

- "A&E is a missed opportunity for supporting and signposting those with A&D challenges and self-harm. It's not the right place people in distress but could be used better." (champion feedback)
- "Long waiting lists and very little support for ongoing mental health assessments and conditions "(Online Form)
- "Crisis DBI referral from custody made but heard nothing. it has been over a month and having to chase this up". (Champion feedback)
- Two individuals came in to speak to us both with FND. One of them has been back and forward to GP with complaints of a painful liver to be told, "Oh you just have a fatty liver", and they won't look any further into it. When their FND started they were told that they had a stroke and just sent home from hospital, then had woken up one morning with what I can only describe as tics and jerking arm movements. Was finally told it was FND, now anything they goes to GP with is told it's your FND. Told them both about Care Opinion, also due to seizures with FND they could possibly get help with fall aids. The only thing they have seen for fall aids was through Moray Council, but advertised for elderly so were unsure if they could call, gave the number for SDS Moray as one is really struggling and wanting some support. Also said Voiceability as they can make sure they are getting right benefits and advocate for them as well. (Forres drop in)
- Individual having trouble getting a car through adult disability payment not supporting their needs, directed them to get in touch with Voiceability to help support with this. "They are taking away my Independency" (Elgin drop in)
- Talk around FND and the struggles to get the right treatment, shared leaflets on FND Action. "Having a lot of support from someone I only met a month ago and has helped my wellbeing a lot" (Elgin drop in)
- "Lived and living experience need to be nurtured, trained, valued, for their work and financial recognition should be optional to individual, should never financially suffer". (Champion feedback about using lived experience to support services)
- "Do not feel we have consistent mentoring and training opportunities across the services and supporting
 organisations. Some offer more than others MWH are always sharing training opportunities don't feel I get as
 much information from Arros, and none from MIDAS". Champion feedback about opportunities for lived
 experience.
- "We need more men groups; men need to be able to open up more (feedback at trauma informed training)