

Thanks for that, Annie.

I wanted to share briefly with you a couple of examples of how useful the training has been even in the short time back at work.

I had an existing client come in to see me on Tuesday, a chronic self-harmer, who has repeatedly been told by health professionals to 'just stop'. She had a panic attack in our session after being triggered by a siren, and actually self-abused in the session by opening an old wound. She was mortified and ashamed, but thanks to the training I refrained from 'OMG!', and stayed calm and reassuring; but more importantly I was able to say to her that I understood that her Self Abuse was a coping strategy that obviously worked for her short term (possibly not so well long term, and she nodded in agreement) and that I was not going to 'tick her off' or deprive her of this strategy. Her relief was palpable, and she really opened up after that.

The same day I was able to reassure a new client that suicide was not the logical end point or intention of her friend, another chronic cutter; that actually self-abuse is about willingness to live. She found this very reassuring. We also talked about the dangers of cutting too deep, possibly resulting in accidental suicide, of course.

Then a few days later, I got an email from a friend of mine whose son is on the path to self destruction. I had shared all the workshop information with her - that is where I stayed whilst doing the training and she has been using some of the strategies with her son, anything was worth a try in her eyes. Well her son turned around to her and said "Well Mum, it looks like you have finally got it. Now you can help me to kick the shit". She said it's the most communication she has heard from him for at least 2 years. So she is very excited and wants to come to the training herself.

Thank you for the wonderful work you are doing. I am very keen to undertake the next part of the training, the 3 day workshop. I work on my own, and my current employer does not finance training but I will finance it myself, especially now that I have experienced it in action! I would like to do this program mobile as I believe that public transport is a massive issue for so many people who have no vehicle to begin seeking help. They wither in their own isolation.

I have to commend you on the quality of your newsletter. It is a living resource.

Thanks again, KT

Thanks Annie.

I was able to use some of the stuff from the workshop the very next day at work.

A lady came in to the ED having drunk a lot and feeling "suicidal". She got quite stroppy and defensive initially but I was able to tell her I understood she needed to do what she was doing at the present time, for whatever reason, and that she was not "psycho" and didn't need to be locked up in the psych ward. She melted almost immediately. When she asked why I cared what happened to her I told her it was just one human being seeing another human being in pain and wanting to help. It was almost like she'd never heard that before. After talking for nearly an hour (fortunately the ED was quiet so there was time to do so) she went home feeling a bit more positive and agreeing to establish a relationship with a counsellor, which she had not done previously despite a long involvement with Alcohol and Drug services. I don't know whether there will be any long term good for her from that one contact, but it was really warming to see her leave feeling positive when she was so negative on arrival.

Thanks again for your work.

M K - Specialist, Emergency Medicine,