

## #BehindTheNumbers – Caroline’s Story

### How would you describe your son Kevin as a person?

**CB:** Kevin was a very outgoing kid. From the time he was born he came out kicking and screaming, and he kicked and screamed for most of his life! He was a loving son and we loved him dearly, the whole family loved him dearly. Although, you know, we didn’t like his behaviour. We didn’t like what he went on to do. But yeah, he was good.

### How did you support Kevin?

**CB:** Well my husband and I supported him really through love. We always told him that we loved him. That you know, we would try and do everything we could for him. Sometimes that was impossible because some of the things he did...he would be committing crime and things like that so obviously he was punished for the crimes he did commit. He was sent to prison in many an occasion, but we always supported him. We never condoned his behaviour obviously. We supported him by trying to get help for him which back then was quite non-existent.

We went to the GP and he was totally horrible. He more or less just said ‘well there’s nothing I can do’ or ‘it’ll pass, it’s a phase’. In fact at that time, where I lived, there was quite a lot of mothers we got in touch with and they were all having problems with drug-related issues in the areas. So we all went and had a meeting with one of the councillors and we said we were quite worried about what was going on in our communities and that something really should be looked at and done about it. And we were told that they didn’t really see a problem and that things would probably just pass, it was a passing phase. Which as it came to be, it wasn’t a passing phase, and it was a horrible thing to happen.

So yeah, but we did support him. The whole family supported him through love and letting him know we were there for him.

### What has been your experiences of the different services involved with Kevin?

**CB:** Well, I mean, because it was so long ago there wasn’t really a lot of services to tap into. I didn’t actually know there was a Drug Action service, which is AD now but back then it was just Drug Action. And it was just by chance this mother said ‘oh, you can go to Drug Action’ I didn’t even know where it was.

My experience going there was I was met by a worker, Kevin and I, but I was excluded from the initial interview. I did say I would like to be with him because I want to know what’s going on – ‘oh no he’s an adult and we need to see him on his own’. So it was an experience for me of exclusion that I didn’t like. Not that I was going in there to say ‘I want this, I want that’ but I just wanted to know what was available, how they would treat him with his problem. But as I say I was excluded from that.

And I never really came into contact with other services other than that apart from as I say my GP, and that wasn’t very helpful either. Nowhere else to tap into. And I kind of decided that I was going to look after Kevin myself as well as I could. I didn’t know really how to deal with it and the only way I could really deal with it was I decided I would learn about addiction and how addiction affected

people and I think that helped me enormously. I wouldn't say I had any services to tap into at that time.

### **Have there been times when these services have put Kevin or yourself at risk, or caused harm?**

**CB:** Yeah...I think we were both put at risk, Kevin especially so because I think they put unrealistic actions onto him like you know to turn up for an appointment say at, 9 o'clock in the morning and if you didn't turn up then his script would be scrapped, he wouldn't get it. So that was putting him at risk and also myself at risk because he would then contact me. And I would be at risk because I then would have to say to my employer 'I can't come in today because my son's ill' and this is how it went on. And I think these unrealistic limits, and I think they still go on today actually and that's something that somebody should be looking into, because if anybody knows what the chaos of addiction is, there's just nobody in their right mind going to think that somebody is going to turn up at 9 o'clock in the morning.

And I know that you need rules and regulations but you know, they have to be looked at, there's a time for them once somebody is in a road to recovery that they can actually carry out these things, but the risks involved at that time are great because it acts as a barrier to somebody to say 'well what's the point in going?' or somebody to turn around and say 'your methadone, you can't get a script' how is that helping anybody? And that is something that I complained about bitterly at the time. Shot down in flames in usual, my say didn't come into it, it didn't matter.

### **Are there things that could have been done differently?**

**CB:** Well I believe that if people that are working within services...start looking at people with a bit of empathy. That they understand what that person is going through. That it's not a choice in life, it's something that can happen to anybody, any aspect of life. And that people show a bit of dignity and respect to other people.

The thing for me is, we'll have to humanise health care. If you try and humanise health care, get somebody...even somebody going into the pharmacy for their methadone...I spoke to one of the pharmacists where I live and I said 'if somebody comes in for their methadone, do you actually speak to them? Do you say hello, good morning, how are you this morning?' because that's a great thing for somebody. For somebody to look at you and think my god, that person just said to me how are you? Because a lot of these people they just you know, people just ignore them, they hand over the methadone and away they go.

So no for me, you need to start respecting people.

### **How are things for you now?**

**CB:** Things for me now is...after obviously our loss I decided along with another lady that we would start up a group for parents that have - and siblings of course - that have lost somebody through alcohol or drugs. So we decided to set that up and actually when it first started, we must have had about 20 people at that particular time. As in all groups, it fluctuates, you could have more, you could have less. But as it is now we have about 10 ladies and we've got 1 gentlemen. And what they

get from it is quite invaluable because we all know what it is we've went through, we can speak about it, we feel comfortable, we don't feel judged, and we've had good reports back from everybody. In fact we've made lifelong friends really.

**What would be your message for other families in a similar situation?**

**CB:** I would say just to seek all the help that you can. To make sure you are included in your loved one's care because that is your basic human right, to be included. Just love. Just love them. Make sure that you get the correct care. I can't think of anything else really, just be there, and be supportive. That's what I would do.