



**Remarkable Lives: Robert Lawrence in conversation with Jerome Carson.**

Journal:	<i>Mental Health and Social Inclusion</i>
Manuscript ID	MHSI-11-2019-0036
Manuscript Type:	Case Study
Keywords:	Schizophrenia, Recovery, Counselling, Education, Medication

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Manuscripts

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3 Title: **Remarkable Lives: Robert Lawrence in conversation with Jerome Carson.**  
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6 Authors: **Robert Lawrence and Jerome Carson.**  
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12 **Abstract.**  
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15 **Purpose** – *The purpose of the paper is to provide a profile of Robert Lawrence.*  
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18 **Design/methodology/approach** – *Robert provides a short background to his life and is then*  
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20 *interviewed by Jerome.*  
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23 **Findings** – *Robert talks about the slow onset of his condition, his hospital admission and subsequent*  
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25 *long journey of recovery.*  
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28 **Research limitations/implications** – *Case studies are of course only one person's story. The world of*  
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30 *someone experiencing psychosis is so different that we can only really understand it fully through the*  
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32 *accounts of sufferers like Robert.*  
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35 **Practical implications** – *Robert makes a number of points about how services could be improved, such*  
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37 *as through quicker and better treatment and a commitment to promote positive mental health.*  
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40 **Social implications** – *Robert talks about "benefits you can live off." He notes that some governments*  
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42 *have not fully appreciated the reality of mental suffering and its effects on trying to live a "normal"*  
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44 *life.*  
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47 **Originality/value** – *Robert's story has seen him embark on a long journey. He has now managed to*  
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49 *study for a qualification which will hopefully bring him employment as a counsellor.*  
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53 **Keywords** *Schizophrenia, Recovery, Counselling, Education, Medication*  
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56 **Paper type** *Case study*  
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## Introduction

I remember meeting Robert when he started on the first year of our Psychology, Psychotherapy and Counselling degree. I think I taught him in each year. He then decided to do a Master's degree in Counselling and Positive Psychology, and I taught him on this as well. He asked if I would be his research supervisor for his MSc thesis? It was during one of his supervision sessions that he told me that he had been diagnosed with schizophrenia. "Didn't you know? Couldn't you tell?" No. I had no idea. "Schizophrenia" is such a loaded word that even the Schizophrenia Commission said that clinicians had to be very careful in giving some people a schizophrenia diagnosis (Schizophrenia Commission, 2012). Apart from Professor John Nash, the subject of the film "A Beautiful Mind," perhaps the next most famous person with the condition, Professor Elyn Saks, said in her Ted talk that she wished she never had the condition (Saks, 2007). Yet unlike so many people with this diagnosis she has done exceptionally well in life. However in a co-authored paper looking at occupationally high achieving individuals with a diagnosis with a diagnosis of schizophrenia, it is not surprising that their sample size was only 20, even though their study was a qualitative one (Cohen et al, 2017). Peter Chadwick once said to me that he thought that only eight per cent of people given such a diagnosis had a positive outcome (Chadwick, 2008). Robert' story is therefore one to admire all the more. Let him tell it in his own words...

## Brief biography by Robert

I've had schizophrenia for just under 20 years which has been both a blessing and a curse. A friend asked me a couple of years ago whether the positives that have come out of my diagnosis have been worth the trauma I experienced during my initial break, later breaks and road to recovery, which really interested me. I had never asked myself that question before. It really made me think and the answer however more complex than just a yes or no boils down to..... Well yes. The breaks, the paranoia, the bad days and the disconnect I feel from family, friends and society however big or small, depending

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3 on the day is all worth it. I don't really remember who I was before I was diagnosed with paranoid  
4 schizophrenia. I don't think I was a bad person, in my eyes I was just a normal kid growing up and like  
5 some kids the world seemed to revolve around them and how they were misunderstood.  
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13 I do however remember the very time first time it started. My partner asked me how I can be so sure  
14 it was the first night I experienced psychosis. It's a fair question. How can I be so sure? I explain it in  
15 the only way I can. That it was the first night the weirdness began, and it has not stopped since. It was  
16 a time when the most outlandish thoughts and questions would come into my mind that I had to  
17 somehow address because of what I was "hearing". I was 100% sure that I thought my trusted family  
18 and friends were in a conspiracy with the local community where I was staying, to destroy me. For  
19 what reason you might ask, I couldn't tell you then? Looking back, I think it was a subconscious  
20 mirroring of my own thoughts masking my sexuality. It wasn't other people hating me for reasons  
21 unknown, it was me hating myself because I wasn't being true to myself and this was being reflected  
22 onto other people but in more of an extreme representation. My initial break carried on for about a  
23 year after that without me being diagnosed. I moved home thinking that I had "escaped" the bad guys  
24 and that all would be well after that, but the voices started again and then came the delusions that I  
25 had been "found" by the same people who were after me. It started off small, but the delusions grew  
26 bigger until one night they were too big for me to deal with, so drunk, I took an overdose. Fortunately,  
27 the gravity of what I had done hit me quite quickly. Embarrassed, confused and broken I went to my  
28 parents to tell them what I had done. Subsequently I was admitted into hospital (not sectioned luckily)  
29 and diagnosed a couple of weeks later with paranoid schizophrenia. I often referred to it as my own  
30 James Bond film years after. This was purely because I didn't have the tools to be able to deal with the  
31 gravity of what had happened or even the ability to acknowledge the reality what had happened, so I  
32 dressed it up in a glossy box.  
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3 This event was the game changer for me and although at the time I couldn't express it. I was truly  
4 broken in every way but as the old saying goes when you're at your lowest the only way is up and so  
5 for the next decade that's what I focused on. I felt such a need to make up for the fact I was  
6 schizophrenic that I was determined to become the nicest person I could be. The main factor on this  
7 journey was how well I adhered to my medication. For most of the time I stuck to my meds well but  
8 back in the day there were a couple of times a year where I would question that, because the voices  
9 had gone was I cured? Obviously the answer was no and after learning the hard way on a good few  
10 occasions I started to religiously adhere to my medication. This hasn't been the answer to all my  
11 prayers, but medication has been a big part of my recovery and still is. The other major factors which  
12 have led me to where I am now have been the people I have surrounded myself with and my journey  
13 back into education. It was because of my friends that I chose to go back into education. I had failed  
14 numerous times to get a degree, but after a throw away conversation with a friend suggesting that I  
15 go back to learn a new trade I decided I would. So I enrolled on a beginner's course in Counselling.  
16 This was just under six years ago and I can't describe how much my life has changed. I completed  
17 College, completed my undergraduate degree in Counselling and Psychology and I'm currently in the  
18 last year of my MSc in Counselling and Positive Psychology, where I'm training to be a counsellor.

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43 I love my life, I love my chosen vocation and I'm good at it as well and this is purely down to where I  
44 have come from. Education has provided me with the tools to be able to not only understand others  
45 but to understand myself. It's a passion professionally and personally and it effects how I'm able to  
46 relate to others on a professional basis but also how I interact with my partner, friends, family and the  
47 outside world. I'm able to empathise and show compassion to others because I truly know what it's  
48 like to be kicked to the ground and need that one person to hold your hand (figuratively speaking) and  
49 tell you things are going to be ok. I now have an identity that I can be proud of, not only in what I  
50 present to the world but I how I look upon myself. I feel I was meant to go through everything that I  
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3 went through so I could help others and I'm ok with that. I really do feel lucky and blessed to be where  
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5 I am because it could have been so much worse.  
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11 Robert in conversation with Jerome  
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14 Jerome; The diagnosis of schizophrenia conjures up an image of madness in the minds of the general  
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16 public. Have you ever faced negative reactions from others on account of your diagnosis?  
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19 Robert: It's always been a mixed reaction to be honest. On the one hand I've not had many negative  
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21 responses said to my face, but I've heard a lot of negative stuff that has been said behind my back.  
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23 Admittedly though for many years after my diagnosis my mind wasn't at its best, so I was probably a  
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25 lot harder to deal with but as it has gradually gotten better over the years people have become more  
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27 welcoming and responsive to me. I'm not so easily "Dismissed" these days so my accounts of situations  
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29 and opinions on matters are taken more seriously and credibly.  
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36 Jerome: The mention that you have had your diagnosis for just under 20 years. How have your family  
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38 and friends reacted to your diagnosis?  
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41 Robert: My mother was a psychiatric nurse back in the day, so she understands mental health and my  
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43 brother doesn't really get mental health "stuff", so I find it difficult talking to him about my illness. So  
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45 apart from my step dad and nephews who are too young to understand mental health issues I don't  
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47 have any other family that I'm in contact with. Being honest though we have a strange dynamic in my  
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49 family in that there are some things that are just not talked about ever and this is one of those things.  
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53 The situation with my friends however is a very different matter and for various reasons I only keep in  
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55 contact with friends that I have made after my diagnosis. In the mist of my initial break I was so difficult  
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57 to deal with it was near enough impossible for me to make or maintain any sort of friendship apart  
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59 from with one person who I met at university and 20 years later the relationship I have with that lady  
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3 is the one I hold dearest to my heart. My other friends in Manchester all know of my disability and  
4 they handle it as best as they can. They understand when I'm having a bad day and need some space  
5 and they understand when I need a good "kick up the arse" so act accordingly. I couldn't ask for a  
6 better group of friends.  
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16 Jerome: You talk about trying to make sense of your voices. Have you had any contact with the work  
17 of the Hearing Voices Network?  
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21 Robert: No, I've never heard of that organisation.  
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27 Jerome: What does the concept of hope mean for you?  
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30 Robert: I had real difficulty thinking about the idea of hope in this question, so I apologise if it comes  
31 across a bit muddled or not answering the question directly. I have hope for my life to carry on in the  
32 same way it has been doing for the past seven or eight years. I seem to have become so much better  
33 at handling my schizophrenia and I hope that continues so I can continue to experience life in a happy  
34 and fulfilled way, so I guess hope to me lies in having a positive attitude.  
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44 Jerome: What changes would you most like to see in mental health services?  
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47 Robert: I would like to see a huge investment into the promotion of positive mental health. Not only  
48 financially by the government and charities but by other sectors too. I wish the media wouldn't paint  
49 such a bad picture of mental health as this contributes so much to the stigma and discrimination  
50 around the subject. If there was a genuine dedicated investment into mental health services I am  
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56 100% sure that we would see lasting improvements such as:  
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- Quicker and better treatment for those with mental health issues, which has been shown to limit the lasting damage from the initial diagnosis of whatever mental health issue.
- A quicker recovery period for those with mental health issues.
- A more accepting and empathic attitude towards those with mental health issues by health services in general.
- A commitment to the promotion of positive mental health through the NHS which would have a lasting knock on effect on institutions such as the media and educational system.

Jerome: What are your views on the use of medication for mental health problems?

Robert: For me personally, the use of effective medication has been vital to my recovery. Without it I wouldn't have been able to accomplish anything that I have done and apart from having to deal with the severe side effects of my medication which are not nice I do view it as simply as swallowing a pill..... Nothing more nothing less. I do also understand medication might not be the only option in treating mental health issues. In some cases, talking therapy works for people, others might find that holistic therapies are beneficial. I think treatment should be tailored towards the individual and their unique set of circumstances in relation to the type of mental health issue they have and their life situation.

Jerome: How do you think mental health services can best help promote recovery, which is said to be the goal of many services?

Robert: Like before, I think the initial meetings with the patient could be handled better. I think health professionals need more training on how to deal more empathically with the patients to limit the damage of the assessment and treatment phase. I think the NHS should be allowed to tailor treatment to the person without having to focus so much on local services available and cost. They should be also given the correct aftercare to promote recovery as well which could mean access to



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3 complementary medication or treatment, adequate access to housing and benefits (which you can  
4 live off) and providing a culture promoting recovery instead of just focusing on dealing with the  
5 negative effects of mental health..... or punishing people which some governments seem to want to  
6 do.  
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21 Jerome: Have you been inspired by any mental health or healthcare professionals you have come  
22 across?  
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25 Robert: I have to say I have had not had much interaction with any mental health care workers for a  
26 long time. I have check ups every six months to make sure everything is ok but that's it. With  
27 healthcare professionals in general however my partner amazes me with the job he does. He's a nurse  
28 in a trauma ward and there is no way I could ever do his job. He deals with situations that I just  
29 wouldn't be able to function in.  
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41 Jerome: In terms of people with lived experience of mental health problems, have any specific  
42 individuals impressed you?  
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45 Robert: I have had encounters with people that have told me stories of their mental health journeys  
46 which have been far more catastrophic than mine and I'm amazed they have managed to come out  
47 the other end relatively unharmed. There are a couple of people I follow on various social media  
48 platforms that deal with mental health problems such as autism, and their zest for life and "just get  
49 on with it" attitude inspires me all the time.  
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3 Jerome: What challenges lie ahead for you? What do you most want to achieve in the future?  
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6 Robert: The main challenge professionally is completing my master's course and moving from being a  
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8 student of six years to full time employment as a counsellor. I have a hope of opening a private practice  
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10 and that being successful and maybe some day carrying on my educational journey..... but not just  
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12 yet.  
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18 Jerome: What would you most like to be remembered for?  
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21 Robert: I want to be remembered as a good uncle, brother, son, partner and friend..... Someone who  
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23 was there for others when it mattered. I really want to progress professionally with my counselling  
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25 career and be a promotor of positive mental health in general. If I could give people a few surprises  
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27 on the way I'd be happy with that.  
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### 33 34 Conclusions

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36 Robert certainly surprised me with his disclosure that he had been living with a diagnosis of  
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38 schizophrenia for almost 20 years. Yet, it can be a long and lonely journey. He notes how he now has  
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40 few friends from the start of his period of being mentally unwell, though one university friend has  
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42 remained with him throughout. He hints at how hard it can be to "live" on benefits and how  
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44 governments are perceived as uncaring in their attitudes towards mental illness. The solution can  
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46 seem so simple. Dr Rachel Perkins describes it as "Somewhere to live, someone to love and something  
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48 to do." Thankfully Robert is achieving success in all three areas, after many years of struggle. His is  
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50 indeed a remarkable journey.  
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39 About the authors  
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