Testimonials in support of CAPS' work

The testimonials in this document come from people involved with CAPS, organisations that support our work and staff.

CAPS Independent Advocacy is a Scottish Charitable Incorporated Organisation

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https://capsadvocacy.org/

Testimonial by a person involved with CAPS Collective Advocacy

How are you involved with CAPS?

I've been involved with CAPS Collective Advocacy groups since 2011. I first joined Much More Than a Label, then helped found the Out Of Sight Out Of Mind exhibition through the Oor Mad History project. I then joined the Trauma group and Lothian Voices. I'm currently involved in the Much More Than a Label, Oor Mad History, Arts As Advocacy/Out Of Sight Out Of Mind exhibition, Minority Ethnic and LGBTQIA+ groups. CAPS is now a major part of my life. My friends know not to ask anything of me in September and October because I'll be effectively living in Summerhall working on the Out Of Sight Out Of Mind exhibition and I love every minute of it.

What benefits do you get from Collective Advocacy?

I've gained confidence, self-esteem, a sense of self-worth, a sense of belonging, a found family, and a safe and supportive environment to talk about what's wrong in the world mental health wise and come up with ways to make it right for everyone not just myself. It's given me the confidence to do many things I thought I'd never do. I've volunteered to give speeches in front of hundreds of people without a script! I've done several video interviews and as someone who used to have panic attacks and run away at the thought of doing that, that's a big deal! I've learnt how to organise an exhibition from start to end. I've delivered lectures, presentations, workshops and events. I've presented a poster at a large mental health research event. I've been involved in delivering consultations and conferences. I'm treated like an equal by everyone involved. There's no hierarchy.

What will be the impact on you if CAPS' groups end?

I'm terrified by this prospect. CAPS is my life and saved my life. I've gained and continue to gain so much from being involved in multiple groups all of which are now being threatened. I feel like I haven't done

enough, or what I have done wasn't good enough for you. Please tell me what more I could have done to make this be a good enough return on investment to be saved. I need to know so I can do better in the future as my current input obviously wasn't enough. But that's not true. I've given so much to and received so much from CAPS as a result of my involvement. I will lose so much if they all end.

My self-esteem and confidence will be negatively affected. I'll meet fewer and fewer people who will stop me in the street to tell me that a workshop or lecture or presentation I delivered has helped them in their work. I still get approached by people I taught over 10 years ago who say our workshops were the highlight of their course and they still use what we taught them.

I've exhibited work every year at the Out Of Sight Out Of Mind exhibition since the first one in 2013. Every year, people with similar experiences to me who have interacted with my works tell me, or leave comments saying they feel seen, validated, less alone and better able to talk about or explain their experiences to their loved ones and/or healthcare professionals. All of this will be lost and while those people won't know what they're missing out on, I will. I've also had comments from friends and family of people like me who say my work has helped them understand their loved ones better. I've had people cry on my shoulder because my art meant that much to them. And that's just one artwork out of over a thousand over the years.

I'll meet fewer people like me and may become more isolated. I'm disadvantaged and marginalised in many different ways, e.g. ethnicity, sexuality, gender identity, mental health, physical health, neurodivergent, that make it difficult to find people who understand it all. The emotional labour of explaining how these all intersect to people who don't have my experiences is exhausting. The people I've met through CAPS, volunteers like myself and staff, continue to make a huge impact on my life. I've learnt so much about myself and been introduced to some novel but good ways of coping. Without CAPS I'll miss out on any future connections because there's nothing as safe as CAPS groups out there. While CAPS'

Collective Advocacy groups aren't support groups, they are supportive. We're a very close, but still open and welcoming, community. I use the term family. We're a "found family". That's how safe I feel in these groups. As someone with mental health issues and several other disadvantages, I find it very hard to socialise by which I mean more than just arranging things. I often struggle with understanding cues and context. CAPS gives me a way to socialise with a purpose which makes the rest of it easier. We're making life better for ourselves but mostly for everyone else one workshop or artwork at a time.

The Out of Sight Out of Mind exhibition is the most social I am all year. It's safe because we have a group written document that informs how we work as a collective. It's trauma-informed thanks to the work of our trauma collective advocacy group who helped create those materials. It's not overwhelming and it's accessible as tasks are set depending on what you can and want to do with whatever support you need.

If I lose this and my found family I don't know how I'll cope. CAPS Collective Advocacy saved my life, gives me purpose, self-esteem and confidence in a supportive environment. I thought I was beyond help in those areas. Neither university nor NHS services were able to help me but CAPS did. They also gave me the courage to challenge my previous mental health diagnosis which proved inaccurate. At the age of 41 I was finally officially an autistic ADHDer, the medication for which has changed my life. I worry about the people who could have but now never will have the positive experiences I've had because of CAPS.

Ever since I learnt of the intent to cut all of the Collective Advocacy groups I've ever been in and then some my mental health has been very precarious. Just the thought of losing something that has and continues to help me and so many others has massively increased my suicidal ideation. I'm getting self-harm urges too and I haven't had those since my mother died years ago. I cried almost non-stop for days after finding out and then started dissociating again. Thinking about CAPS now brings up this pre-emptive grief. Something that once was, and, I thought, always would be a comfort is now disturbing me.

I've not had to use crisis services since being involved with CAPS' Collective Advocacy but just the threat of losing this is causing my mental health to deteriorate. I dread to think how much worse it will be if I do lose every single CAPS group I'm involved with. I suspect I may end up using front line services again. I worry about the impact this increase in use, because I won't be the only one, will have on NHS services. Will they be harder to access? Longer waiting times? Less compassion by burnt out staff? All this will impact me. That's not the only impact that will affect me.

Staff will no longer have access to the many varied Lived Experience workshops that CAPS Collective Advocacy group volunteers deliver free of charge. Personality Disorder, Trauma, Minority Ethnic, LGBTQIA+, Eating Disorders, Arts As Advocacy for example. People who have attended our workshops or exhibitions overwhelmingly find them useful. I once gave a police officer a copy of a book I wrote for the 2014 Out Of Sight Out Of Mind exhibition after an interaction I had with them. I'd been explaining to him the best way to approach someone like me who was in crisis. He took it and a few days later he phoned me to say he'd read it and found it informative. He'd been called out to someone with bipolar disorder who was in crisis. He told me he'd used what I'd written in an attempt to de-escalate the situation and it worked. I fear for myself and everyone else with a mental health condition because, if these cuts go ahead, all this learning will be lost.

There's nothing like CAPS' Collective Advocacy groups out there. I've looked and tried some. They weren't right. I could join the Edinburgh Collective Advocacy group but that's having its funding reviewed too. So is that even safe? How will that one project cope with an influx of all the other group members? Especially given how different we all are. We won't have the same level of understanding because it will be so diluted. And there will be much more emotional labour required again. We won't be able to do all the things we've been doing. All that educational material and expertise will be lost.

As someone who is in five different CAPS Collective Advocacy groups which are all under threat I’m feeling an overwhelming amount of what I can only describe as grief. I feel like I’m about to lose everything that has helped keep me well.

Testimonial by a person involved with CAPS Collective Advocacy

I have been a member of the Oor Mad History group for four years, as part of this group I have been involved in a range of activities. I have helped to write and deliver workshops on the history of mental health, and the impact that has on present mental health services.

Helping with the afore mentioned activities has helped me in a number of ways. The fact that I have been able to research the history of mental health has increased my belief in my ability to undertake new ventures, something I had thought I could no longer do.

It has given me the opening to gain a lot of knowledge, particularly as a result of group visits to the Lothian Health Service Archive. I have been able to examine a number of documents there, and work with an historian.

My self-esteem has been bolstered by the opportunity to write up my research, and present it to others. This is partly, because I feel that my time has been spent productively, but also, because I have been able to impart the information I have learnt to others.

At the end of one of the workshops, as one of the presenters, I was able to tell me to talk about my own experiences. Writing this meant that I was able to looking back to see if I could identify any pattens in my history of mental health issues. It also gave me the opportunity to hear the experiences of others, and gain a greater insight into how other people have experienced services for mental health issues.

If the For Mad History group closes, I fear that the impact on me will be adverse for several reasons. Firstly, I feel that my mental health will deteriorate. Whilst it is not a support group in the conventional sense, it does allow me to mix with people who have shared experiences. This means that they understand if I am feeling low, and do not try to cheer me up, or, make me talk. They allow me to be myself and accept me

depression and all. In other words, it my safe place. If I lose it my feelings of isolation will increase.

Secondly as I have mentioned helping to present workshops has increased my feeling of self-esteem. If I am no longer able to take part in such activities that feeling will decrease once more, which will make my depression worse.

Thirdly at the moment I feel that I am playing a part in educating people about mental health issues. If the group end, so will be opportunity to do so, and my self-confidence will drop to its previous low levels.

Fourthly the group is important to me, because it offers long term support. In the past I have had several forms of therapy, some of which have been useful in the short term. They do, however, all have something in common in that they are time constrained. Once the, for example, the six weeks of counselling ends the patient is left with nothing more. This is regardless of whether I have improved, or, not. In the past this has led to me feeing abandoned.

Lastly, but by no means least the Oor Mad History group gives me I reason for going out. When my depression is bad it is very easy for me spend days at home alone. The group gives me the motivation I would not otherwise have to leave my flat, thus stopping me from becoming more reclusive.

Testimonial by a person involved with CAPS Collective Advocacy

There have been multiple aspects that I'd mention briefly during Amy's time. She'd always listened to us, making each and everyone very welcomed and more importantly relaxed. I'd felt empowered, learned a lot, grown gradually in personal confidence and rebuilt trust in her safe care amongst our small community. Amy has been incredibly very effective in facilitating both open and focused discussions, a true enabler!

Thanks to her depth of work experience, great collaborations, myself and the rest of her LVs team members had been made to know meaningfully in time what's been happening within and outside CAPs including many events / themes updates, the CPG in the Scottish Parliament being one of the examples (to me at least).

Indirectly Amy had taught me (impacted most positively on the rest too) very valuable communication skills, how to understand varied/complex information.

People's Conference in Nov 2024 was so amazing in my view. Amy's yearly patient detailed planning together with my group and sessions time management had assured me an unforgettable learning journey.

Testimonial by a person involved with CAPS Collective Advocacy

1. My involvement with Caps has now been five years, plus. They have supported me with Collective Advocacy in my whole time with them. I've been involved in many critical and peer lead projects that encourage engagement through peer sharing in a safe space. I've been involved in the publication of "Oor Mad History" book with many of my own lived experience quotes that have resonated with others, which was very important for me during my own mental health crisis and feeling my own identity whilst processing my own trauma. I've submitted Art to Caps "Out of Sound Out of Mind" exhibition, had opportunities to present to wide audiences throughout Third Sector mental health events and develop relationships with institutions such as University of Edinburgh (leading me to be involved with training of Clinical Psychologists). I've been involved in Policy reviews which bridges engagement between peers and service providers. And a whole lot more.

2. Collective Advocacy has been an integral part of my own recovery journey. The importance of peer reflected spaces are integral for those who experience challenges and difficulties of a familiar nature. Collective Advocacy is allowing others to have shared space that ultimately gives them an opportunity to share, listen and contribute if they choose. These are crucial in developing the models and understanding of creating trauma informed pathways. A peer sharing a similar experience eg. issues accessing mental health services or benefit and social security challenges. Peers benefit from others lived experience and at points in life where trust may be low and anxiety may be high, peers create space for others to relate. A space of empathy when they may not have it from home/work/family/friends and mental health professionals.

3. Collective Advocacy is an important opportunity for those with lived experience to connect. Meaningful, insightful, purposeful and inspiring conversations happen when peers share, hold space and work collaboratively. Personal experiences can leave people feeling captured. These groups create connection through the said, unsaid and

perspectives of how and why we can create better. A collection of voices is stronger than a single voice and these types of groups revitalise individuals through safe and overseen engagements. If you take that away, you demolish pathways to collective hope, solutions, reflective spaces and common resources that people pull together. When we find it difficult to hold ourselves together, the relatable voices in the room, or through a computer/phone if online, seals gaps and creates reassurance. We volunteer our time and energy because we care.

Testimonial by a person involved with CAPS Collective Advocacy

1. I've been involved for 7-8 years with CAPS in various projects over the years e.g. trauma group, EL CA, Art as advocacy and LV

2. It helps keep me in touch with myself a bit, makes me feel I am doing something constructive, and it gets me out of the house

3. It would lead to more social isolation. It’s important to see and realise you aren't alone.

Testimonial by a person involved with CAPS Collective Advocacy

1. I'm involved in the EL CA group and have come along to Lothian Voices meetings sometimes too.

2. It's nice to be listened to and listen to others with similar issues, it makes you feel less alone and that you are possibly helping others too.

3. I would feel more lonely and not have a voice.

Testimonial by a person involved with CAPS Collective Advocacy

Since 2018, I've been involved with Out of Sight Out of Mind exhibition (OOSOOM) in many ways — as a visitor, exhibitor, planning group member, and as the exhibition assistant.
And yet, I sit here now struggling to find the words to explain what this exhibition truly means to me. How do I summarise something that has been a job, a creative outlet, a lifeline, a place of growth, a community, a family? It is all of those things — and so much more. And that's exactly the problem.

I'm autistic, dyslexic, and live with long-term health conditions and mental health challenges. Words are difficult. I struggle to find the right ones, the ones that fit, the ones that carry the weight of what I feel. They often slip away, get tangled, or fall short of expressing the depth of my experience.

And yet, here I am — trying to use words to save the one thing that saves me.

Art.

This exhibition gives me a voice in a world where I often feel voiceless. It's not just about creating or showing work — it's about being heard. OOSOOM gives space to the kind of expression that can't be forced into neat sentences or diagnoses. Here, I don't need to explain myself in ways I can't. Through art, I speak. Through this exhibition, I am understood.

Without it, I spiral — into silence, into isolation. Art is my connection to the world. OOSOOM is the only place where that connection feels safe, supported, celebrated. In this space, I'm not just tolerated — I belong.

It's a window into lived experiences that are often overlooked or unheard, but that matter. Experiences that hold value, beauty, insight, and truth — and speak to the universal human need to connect and be seen.

Nowhere else have I found a community like this. Nowhere else have I felt so wholly accepted. Here, I have friends. A mad, loving family.

OOSOOM is the only place I feel able to be my full, authentic self. It gets me out of the house. It brings meaning to my days. It gives me something to look forward to, to work toward, to hold on to.

Please don’t take it away.

This exhibition doesn’t just support artists — it saves lives. It saved mine.

Testimonial by a person involved with CAPS Collective Advocacy

1. I am a member of the following groups:

Experiences of Psychosis,
Lothian Voices,
Community Voices.

Recently I got an Arts Grant towards the publication of my Memoir. CAPS organised everything.

2. I get the following benefits from Collective Advocacy:

a. We share our ailments and realise we are not alone.

b. We are able to gather people's opinions and pass them on to the powers that be. The 2023 people's conference was on housing and homelessness. We passed our findings on to the minister who came to visit us and to receive the findings.

c. I gain in confidence when we do workshops. My public speaking is improving.

3. My life would change. I rely on CAPS for the following:

a. To meet like-minded people.

b. To be able to influence mental health policy.

c. To get to know our staff.

If CAPS groups close, I would not be able to function properly. I usually have at least two meetings a week.

Testimonial by a person involved with CAPS Collective Advocacy

1. I'm involved in CAPS Experiences of Psychosis group, EOP.

2. I feel better and more open about my illness thanks to collective advocacy. We are not a support group but learning from other's experiences has made me accept mine more. I have learnt a lot through this group and found what I am here to do. To take something in my life which was so negative for me and use it in a positive way. It's made me a happier person and a person with purpose.

3. If CAPS were to end, I don't exaggerate when I say I would be devastated. I'd feel a terrible identity crisis without CAPS. I feel we make such a difference to others life's by sharing our experiences. I don't know what I am meant to do without collective advocacy. It is genuinely a lifeline for me.

Testimonial by a person involved with CAPS Collective Advocacy

How are you involved with CAPS?

I am involved with CAPS Much More Than a Label which is a collective advocacy group for people who have lived experienced of personality disorder.

What benefits do you get from collective advocacy?

As a CAPS volunteer, I have delivered training on lived experience of personality disorder to a wide variety of professionals including psychiatric nurses, student occupational therapists, art therapists and psychology graduates. These experiences have improved my ability to speak in public and deliver training which has helped me professionally, were I not in employment these skills could potentially help me gain employment. Through interacting with CAPs volunteers, I have developed a greater sense of what my own recovery means, built a sense of community with people who have similar experiences and have felt more able to sustain my own employment as CAPs makes me feel I am doing something positive to help others and gives me the resilience to keep working in social care.

What will be the impact on you if CAPS groups end?

My personal circumstances will not change if CAPS groups end, I am in the very privileged position of having secure employment, a home, a supportive wife and two young children and I have come a long way from the very unwell person I was in my teens and twenties. I have all these things because I grew up at a time where we resourced services properly and while things were not perfect, I had access to treatments and care which are not available to people in my shoes in Edinburgh in 2025.

The impact of CAPS groups ending for people less fortunate than I will be acute and devastating. The messaging from the EHSCP and IJB is that the Medium-Term Financial Strategy (MTFS) aims to protect the most vulnerable of our citizens. Many of the decisions which form part of the

MTFS have involved no meaningful consultation with our most vulnerable citizens, and the failure to produce an easy read version of the IJB strategy, a strategy which is supposed to align with the MTFS, demonstrates the complete lack of thought being put towards communicating with the most vulnerable. Cutting collective advocacy services will be another step towards eroding the ability of our most vulnerable citizens to engage with and influence decisions being made which will have devasting consequences and lead people to live shorter, less dignified, and more difficult lives. The message which the EHSCP on behalf of the IJB have delivered to support services is that we have made people to dependent on services, how can we enable people to be more independent by removing services which allow people to engage less with statutory and more costly interventions like Housing Support and Care at Home? Everyone who works in mental health in Edinburgh knows the REH is overflowing with meeting rooms being used as bedrooms, a "surge" ward having been created in the old CAMHS inpatient unit and discharges taking place (and failing) due to a lack of planning and resource.

How do the EIJB suggest someone (for example) with severe and enduring mental illness who volunteers at CAPS, attends the Stafford Centre and receives 5 hours of housing support per week will cope when CAPs is gone, the Stafford Centre is gone and their support is reviewed (in a very person centred way obviously...) and reduced to 2.5 hours per week?

So the impact on me will really be that I will know that I live in a city where we do not value the voices of our most vulnerable citizens, where we pay lip service to including people in decisions we make about them, where we gaslight people experiencing mental illness into thinking they are not doing enough to help themselves and where people who have built communities and done immensely valuable work to influence policy and support EHSCP colleagues in their work will be more alone, less supported and all this in a climate where every other mental health resource in the city is being cut to the bone. This makes no sense, and it is dangerous, and it makes me ashamed to live in a city where so many people have so much and we are taking from those who have so little.

We are all acutely aware of the financial position of the EIJB, however, the solution is ambitious and bold change with all involved recognising there will be reductions in many services, but this must be proportionate, safe and give us some foundation to build on so that we do not continue to fail our most vulnerable.

Testimonial by a person involved with CAPS Collective Advocacy

How are you involved with CAPS?

Through CAPS LGBTQIA+ Advocacy

What benefits do you get from collective advocacy?

It gives me a voice to make a difference in queer accessibility to mental health support. Especially now, transgender folks need more help than ever.

What will be the impact on you if CAPS groups end?

The positive changes they are making for those involved, as well as those who use our services and attend our workshops.

Testimonial by a person involved with CAPS Collective Advocacy

How are you involved with CAPS?

I was part of their ‘Lothian voices’ group, I sometimes pop in if I am available and can make it. I was a member of Lothian Voices in 2023 when they were discussing the housing crisis impact on mental health.

What benefits do you get from collective advocacy?

I feel really welcome, comfortable, listened to and listening to others. The support and the creativity is really valuable and important. Community is supportive and you feel much less alone. It raises awareness and developing knowlegde.

What will be the impact on you if CAPS groups end?

There will be no place that is a safe space for expressing yourself and being understood and sharing and opening our minds. It is a vital support network for wellbeing, reducing isolation and builds connection, reduces stigma and reduces inequality.

Testimonial by a person involved with CAPS Collective Advocacy

How are you involved with CAPS?

Out of Sight Out of Mind exhibition

What benefits do you get from collective advocacy?

As a family support worker I have clients who benefit from Minority Ethnic advocacy, and those that are empowered in their wellbeing through participation in the out of sight, out of mind exhibit.

What will be the impact on you if CAPS groups end?

The service landscape would become less person centered as advocacy informs best practice

Testimonial by a person involved with CAPS Collective Advocacy

How are you involved with CAPS?

Been aware of and involved with CAPS for many years as I worked in mental health

What benefits do you get from collective advocacy?

Support, enables positive change, provides feedback to providers/commissioners-increases individuals skills, confidence and sense of belonging.

What will be the impact on you if CAPS groups end?

See answer to 2 but the opposite! Lack of support, lack of feedback, increased isolation etc. Would be self defeating as likely to result in increased demand in already under resourced and full to capacity services.

Testimonial by a person involved with CAPS Collective Advocacy

1. How are you aware of CAPS' work?

I was introduced to the exhibition when a local art group I'd joined put a group submission into the exhibition a few years ago, then have put in an individual submission a few times and have helped with the volunteer Planning Group the last couple of years too.

2. What benefits does Collective Advocacy bring?

As many people experiencing mental health issues can find it difficult or impossible to communicate or express themselves through conventional means such as spoken or written language, being able to be part of an exhibition which showcases the artwork and creative output of a diverse group of people from varied backgrounds and walks of life who have/do struggle with their mental health issues is incredibly significant. It highlights their struggles and personal stories in a way that I've never encountered before. It is hugely valuable as a means for others to peer into the turmoil of what living with severe, long term mental health is like for some people, and I think without that then too often people are stuck with often unhelpful labels, terminology, concepts and theories, but those things barely scratch the surface of what it means to live with these struggles, and yet they say "a picture paints a thousand words" for good reason! The OOSOOM exhibition literally gives these marginalised people a voice through creative expression. It is distinct, unique and trailblazing in its approach!

3. What will the impact be if CAPS' groups end?

It is blatantly obvious that with all the cuts going on in the health, care and charity sectors in particular, that there will inevitably be a significant increase in loneliness, isolation, and an exacerbation of various symptoms for many people. We will see an overall decline in people's health. Some are bound to need more care via their doctors, community psychiatric team. Some may end up needing hospitalised. Tragically, I have no doubt, that if all these cuts go ahead as they have been proposed, then some people will take their own life as a result.

You who do not know or understand the reality of mental ill health, who have been lucky to never experience the overwhelming darkness, the despair, the pain, the misery, the fear, the draining of energy, of joy, of hope, should recognise your own good fortune and give others who have drawn the short straw a chance! You may not understand that in many cases mental ill health is caused by huge traumas in people's lives, horrific experiences that often precede their decline in health and the horrendous aftermath of living with these things. Constantly trying to pick up the pieces, but finding it's like sand falling through your fingers is endlessly draining and frustrating. You have no idea how important community groups are, including many charity organisations and their activities. Shame on you if you are ignorant and have no heart for those who have endured suffering you cannot imagine!

Testimonial by a person involved with CAPS Collective Advocacy

1. How are you involved with CAPS?

Experience of Psychosis group

2. What benefits do you get from collective advocacy?

-Using lived experience insights to impact mental health care and social understanding of psychosis-its not just a personal benefit but a wider social benefit.

-Friendships and social connection

-Shared sense of purpose

-In a landscape of individual mental health services, collective advocacy provides something special-it builds social connection, a sense of purpose and more impactful change and training

3. What will be the impact on you if CAPS' groups end?

-Loss of the opportunity to improve mental health services and social understanding of important issues.

-Diminished voice of lived experience.

-Loss of the legal right to individual and collective advocacy, both of which are important parts of independent advocacy.

Testimonial by a person involved with CAPS Collective Advocacy

I should like to express my strong support that all proposed funding cuts to Caps Advocacy be reversed and funding be retained in full.

I suffer depression anxiety and ocd and have accessed and hugely benefited from caps, particularly the arts advocacy and oor mad history training. These enabled me overcome severe isolation and self destructive self harm behaviours and to connect with others and learn and heal. I've moved from a place of chaos and worthlessness to a situation where I now undertake several volunteer roles helping others and myself, which without help from caps and others would not have been possible.

In my previous paid employment history I worked with numerous caps service users over the years who avoided homelessness and poverty because of caps interventions. If these funding cuts go ahead it will not only cause extensive suffering to already vulnerable people but also prove counter productive and expensive by increased homelessness, accident and emergency and other hospital admissions and other impacts upon statutory and third sector agencies

Please, please act ethically and professionally and fully reinstate funding

Testimonial by a person involved with CAPS Collective Advocacy

1.

I'm a member with CAPS and have been for 10 years.

I've done varies projects with them and it's been a lifeline for me.

2.

Collective Advocacy has made me very knowledgeable on people's needs and being there for them and myself.

3.

The impact of CAPS being scrapped is shameful on those whom don't understand the Great Need for CAPS ADVOCACY and the work they have done and continue to do for People's Voices to be HEARD.

Testimonial by a person involved with CAPS Collective Advocacy

1. I have been in touch with CAPS since about 2007. I've always defended CAPS when it was under threat of reduction of funds, loss of contract etc.
2. The OOSOM exhibit has been an annual challenge to produce artistic work. The Experiences of Psychosis group has been a wonderful benefit to me and my contemporaries.
3. People will lack means of promoting their mental health.

Testimonial by a person involved with CAPS Collective Advocacy

1. How are you aware of CAPs work? I am aware of CAPs work because my twin brother has been involved with the Out Of Sight Out Of Mind exhibition that is on yearly at summerhall for the past 4 years and I have attended every year, and was hoping to also make a piece to put forward myself. The OOSOOM exhibition is literally the most moving exhibit I have ever been to, i will never forget the first year I went and i cried my way round the whole thing, it is so rare to see humanity on full display in its most painful, real, tender and vulnerable state - just so special! words really cannot express what it means. All the peoples art, every piece is so unique, SO special, so breath taking! I struggle every single day with my mental health and have for decades at this point and getting to see this exhibition every year is so important to me and for my twin brother to be apart of. He too has struggled for decades and i know being apart of this group has been one of the best things in his life, he has struggled to socialise or make art, and he is really an artist at heart - so this exhibition really pushed him to try! in a way he hadnt in many years. So this is how i know about CAPS.

2. What benefits does Collective Advocacy bring?

The benefit collective advocacy brings is that it allows us to know we are not alone, becuase struggling with our trauma is so isolating - so to have a place where you can come together with others is the most important thing around. It brings people together, creates community, it empowers people, inspires people, challenges people, brings awareness and helps others to get involved who maybe wouldnt. It also just gives us a space to exist in a world that basically wants to pretend we dont.

3. What will the impact be if CAPs groups end?

I think the impact could be truly devastating, people with mental health and trauma are struggling desperately and for some people this is the only thing they might have that helps them cope or feel like their life has meaning. Taking that away from people is very dangerous. One of the major feelings of being unwell is feeling completely powerless, hopeless and oppressed - and to take this space and these groups away from people could be detrimental to people who are already hanging by a thread. The world is an extremely difficult place to be, we need groups like this now more than ever. There is NOTHING more important than

helping each other, and that’s what you do, and whoever is in charge of funding should be doing everything in their power to support you.

L in support of CAPS

I've had the privilege of working with CAPS Advocacy on a Discovery Session in partnership with the Oor Mad History (OMH) group and the Lothian Health Services Archive at the University of Edinburgh. The session stemmed from a community workshop led by the OMH group, where they shared insights on the biomedical model, intersectionality, and the history of mad activism. Having worked in a health archive for several years, I can tell you that the history of psychiatry is rarely told from the perspective of the service user. In fact, the OMH group filled this problematic gap almost a decade ago, by depositing their archive with us, giving the collection new life and amplifying voices that often go unheard. During the workshop, the members of the OMH group spoke bravely about their struggles with mental health and their complex relationships with the healthcare system. Their stories were profoundly impactful, evoking deep emotional responses. I still reflect on the workshop today because the stories shared resonated so strongly—they left a lasting impression, and that was due to the unique perspective they offered. A perspective that is often invisible to the wider world: the rich, nuanced lens of lived experience. Lived experience is invaluable in challenging traditional narratives and reshaping our understanding of mental health. It's not just about individual struggles; it's about the collective strength of people who have navigated the mental health system and found ways to persevere. **We need** these voices carry the wisdom, resilience, and insight necessary to guide us toward a more compassionate and equitable healthcare system.

I left the workshop feeling inspired and galvanized to continue supporting the OMH group in their mission to highlight the importance of lived experience in understanding mental health and healthcare - which led to the delivery of the Discovery Session.

We need organizations like CAPS and groups like OMH, which empower people to take ownership of their own histories. Their work is vital, and we must continue to support and amplify these voices to better understand mental health, activism, and the transformative power of lived experience. I am concerned that by removing groups like OMH, we risk losing access to these invaluable voices. The members who have found much solace in being part of a community group will have nowhere to turn, and the essential dialogue on lived experience could be silenced.

Professor Jon Jureidini Research Leader, Critical and Ethical Mental Health (CEMH), School of Medicine, The University of Adelaide in support of CAPS

‘some of the most dramatic changes I’ve seen in my patients has been when they have found a role in advocacy. Taking away an opportunity to do that will deny a pathway to recovery’

See Me in support of continued investment in CAPS and Arts as Advocacy

CAPS Independent Advocacy, and collective advocacy is a lifeline for many people in Edinburgh and the Lothians. Continued investment in CAPS is critical to ensure people who face the most challenging inequalities are engaged, heard, supported and empowered to contribute to community and influence policy and practice change based on diverse lived experience.

Their Arts as Advocacy projects have a proven track record of breaking down barriers that people who experience mental health problems face, alongside other forms of marginalisation and discrimination. Through creativity they platform individual and collective experiences of marginalisation; sharing the reality of prejudice, stigma and discrimination and the impact it has. They challenge the status quo, rebalance power and make a clear call for fairness, equity and human rights for all.

Engaging people with diverse lived experience is central to public service delivery and reform, without effective advocacy the voices and contribution of those most marginalised will be lost.

Queen Margaret University in support of CAPS Collective Advocacy

1. How are you involved with CAPS?

As an education provider we have been involved with CAPS for over ten years. CAPS have created and delivered meaningful inputs about living with eating disorders and living with psychosis. These have been very well received by our learners who may be working therapeutically with persons with an eating disorder or psychosis. The insight that CAPS advocacy bring can support trainee therapists to consider how they can co-create meaningful therapeutic pathways.

2. What benefits do you get from collective advocacy?

It is essential to the learning of any health professional to include perspectives that come from lived experience. CAPS have created accessible resources that help to share complex personal experiences and ensure that our students learn to see the whole person beyond a pathology.

3. What will be the impact on you if CAPS' groups end?

If CAPS groups end we would struggle to engage our learners with lived experience perspectives in a meaningful way.

Lothian Health Services Archive in support of CAPS Collective Advocacy

1. How are you involved with CAPS?

Lothian Health Services Archive (LHSA), based at the University of Edinburgh, holds the historically important local records of NHS hospitals and other health-related material. We collect, preserve and catalogue these records and promote them to increase understanding of the history of health and for the benefit of all.

As the LHSA Manager, I am involved with CAPS through the work my team has been doing with the Oor Mad History project. This has specifically involved the exploration of mental health and activism, especially through the prism of the historical records of 19th Century asylums and more recent activist archives, including CAPS own archival material.

The CAPS archive, donated in 2011 and 2013, contains a substantial number of oral history recordings and a paper archive collection generated by the project and is a testament in itself to the breadth of work with which CAPS have been involved.

Most recently, LHSA and CAPS have collaborated with the OMH group on two initiatives: the Understanding Oor Mad History course, a four-week community Mad Studies programme and a public Discovery Session. The LHSA team worked closely with Azra Khan (Collective Advocacy Worker, OMH) to include allow participants to look at their lived experience of mental health through the lens of our archival collections. This was an enriching experience both from the participant perspective and for LHSA. The course was booked at capacity, and will be running again in the late summer.

The Discovery Session, held in April, was a participatory research event based around items from LHSA collections. Participants from the OMH group joined a number of research workshops where they selected archival material that chimed with their own experience or was of specific interest to them. The event gave the OMH group participants, a means to voice and to explore their own lived experience in a way that more traditional research style workshops would not have done. Putting

participants front and centre of this type of event made it much more powerful and attracted a wide range of attendees from the interested general public, heritage organisations, the University community, researchers into healthcare, and the voluntary and arts sectors.

2. What benefits do you get from Collective Advocacy?

LHSA, as the institutional archive for NHS Lothian focuses very much on the development of health and health care in our regions, as well as health activism and advocacy. The CAPS archive is a unique example of collective advocacy work and has added much needed balance to both LHSAs collections, but also to the understanding of mental health services, especially since many of our collections relate to hospitals and residential mental health care, rather than capturing the voices of the patients or service users.

Researchers across many disciplines are increasingly interested in these alternative narratives, exploring the history of mental health from the non-professional, non-clinical perspective. The historical record has been dominated by the voices of doctors, a profession that only permitted women to practice medicine in the mid-19th Century, so working with people with lived experience of mental health issues and capturing their history is vital to ensure that our key stakeholders, the residents of Edinburgh and the Lothians are properly represented.

3. What will be the impact on you if CAPS' groups end?

The impact of CAPS groups ending would be significant for our community engagement activity. One of the University of Edinburgh's key strategic aims is to work locally and nationally to deliver change for communities. Our work with the OMH group so far has brought new communities into our study and research spaces. For those who have not encountered the University environment before, libraries and archives can seem intimidating, so collaborating with Azra and the OMH group has allowed LHSA to work with participants inside a framework that is familiar to them, whilst also enabling them to explore material at their pace and from their vantage point. We have seen how we can adapt our services, facilities and methodologies to make our spaces and events more

accessible and to use collective history as a way to inspire change and make our archives more representative. Without the CAPS team’s enthusiasm and expertise in working with lived experience of mental health, LHSA would find it difficult to fulfil our community goals.

Second statement from Lothian Health Services Archive in support of CAPS Collective Advocacy

Participatory research is a massively growing field in all areas – with funders and policymakers pushing for change. By participatory research, I mean any research in which non-professional researchers play an **active** role. For example, bringing lived experts into research as collaborators – having a say in the research directions, methods, interpretation, or outputs. Within the research sector, funders are pushing increasingly for this kind of involvement – for example, the health funder Wellcome has increasingly built in "involvement" as a core component of its funding mechanisms. UKRI/MRC has equally demanded involvement in non-clinical research.

From the process of developing the Library's "Outwith" efforts - https://library.ed.ac.uk/research-support/participation - I've got to see first hand the changes wrought on research, and have had researchers coming to me explaining their greatest challenges. Third sector organisations such as CAPS, and projects like Oor Mad History and the community surrounding it are an essential part of this participatory future and can help researchers to address these challenges – while raising the profile of their partners and potentially securing overlapping funding opportunities. While sometimes researchers work directly with their lived expert partners, often it is far more fruitful for everyone involved to work with third sector organisations to help bridge the gap. This may be informally, through in-kind support in both directions, or increasingly frequently, in direct partnership with co-submissions in funding bids with sustained applications (ideally seeking "win-win" outcomes).

Regarding those challenges I mentioned – one example found towards the top of most lists concerns relationship building with diverse participants. Participant recruitment and retention is always difficult – but it's even more so when it comes to ensuring that the participants come from diverse backgrounds (an ethical duty of research – but also – fundamentally – an important methodological and practical one). Research has a chronic problem – particularly participatory research – of reaching the same demographics (white, cis, straight, middle aged, and middle class). Reaching outside those demographics and building a

trusting relationship can be extremely difficult – if not impossible. Working with third sector groups to mutual benefit can enable new avenues for research.

Another challenge is that of “Impact” – something that is, I imagine, the same challenge for CAPS! Getting the research – the voices from participants and the outcomes of their involvement – heard and listened to can be very tough. Whether that’s visiting Holyrood to inform MSP’s of the outcomes, consulting with journalists, or collaborating with policymakers – this is a key challenge for researchers today. Again, collaborating with third sector groups who have shared objectives can streamline this process for both parties.

Put simply: I wanted to highlight the reality that with the growth of Participatory research brings with it new opportunities for collaborations with third sector organisations that can be win-win situations. Most often the “wins” will be an extra boost towards overlapping outcomes. Sometimes there will be space to negotiate shared resourcing (though, honestly, this is rare and contingent on projects and funding calls!). But having witnessed the exceptional work CAPS has done with the LHSA, it really shows the potential here in the future. CAPs occupies a unique space as it exists currently – it’s a long history within the community in its various incantations, a trusted group of members, and active work to capture intersectional and diverse groups within the space of mental health – they are all richly important areas as a potential research partner. The game is identifying opportunities for future mutually beneficial collaborations!

Statement in support of CAPS Collective Advocacy

As a historian of medicine and mental health based in Edinburgh, I've had the immense privilege of working with members of CAPS Independent Advocacy over the past several months on a deeply meaningful project exploring mental health-related archival collections at Lothian Health Services Archive (LHSA). This collaborative journey culminated in a powerful exhibition curated by lived experience experts. The archival sessions leading up to the exhibition were very much led by the curators, who selected materials based on topics and themes they were particularly interested in. This included women's experiences and treatment in nineteenth century asylums and in more recent mental healthcare systems, the ways in which different illnesses were diagnosed and conceptualised or talked about in the past and the legacy of art as activism and advocacy in mental health. Everyone brought their own perspectives, expertise and experience together to explore, interpret and ask questions about the materials and to talk about the stories contained within them.

This project was grounded in a belief that participatory, inclusive research, an engagement with archives and the past and an acknowledgment that all forms of expertise- including lived experience – are valid and equal. Participatory research is not just academically valuable—it is essential. It challenges conventional hierarchies of knowledge, centring the voices of experts by experience. Through their insights, we can access deeper truths about the complexities of care, identity, and advocacy, past and present. Participatory projects like this matter because they foster inclusion, build community, and open up space for constructive dialogue and change. They show how engaging with archives and history can support healing, understanding, and empowerment. This work has shown me that lived experience brings emotional nuance, cultural context, and narrative depth that traditional research methods often overlook.

CAPS' work—whether through projects like this recent collaboration, or through their annual Out of Sight Out of Mind exhibition—does more than support individuals with lived experience. It enriches the broader cultural and academic landscape. Personally, attending a CAPS exhibition in

2015 sparked the entire trajectory of my academic career, from my undergraduate dissertation to my PhD exploring creativity in psychiatric settings.

The value CAPS brings to individuals and society cannot be overstated. They create opportunities for people to be seen, heard, and meaningfully involved in shaping how mental health is understood—historically and today. Their work fosters equity, informs better policy, and drives social change.

That is why ongoing, secure funding for CAPS Independent Advocacy is not only justified—it is urgent. If we care about inclusive research, social justice, and transformative advocacy, we must invest in the organisations that make it possible.

Third statement from Lothian Health Services Archive in support of CAPS Collective Advocacy

1. How are you involved in Collective Advocacy at CAPS.

I am involved with CAPS through my role as Archivist for Lothian Health Services Archive (LHSA), NHS Lothian's archive inside the University of Edinburgh. LHSA collects archives from local hospitals and historic material about healthcare in the Lothian region. We are the largest health archive in the UK.

LHSA has been involved with CAPS since the first Oor Mad History (OMH) project exploring the history of the mental health service-user movement in Scotland. In 2011 and 2013, CAPS donated a substantial number of oral history recordings and a paper archive collection generated by the project to LHSA. Since then, OMH group members have visited LHSA to research records of both the service-user movement and of nineteenth century psychiatric institutions ("asylums").

In 2025, LHSA and CAPS collaborated more closely with the OMH group on two initiatives. During February, we hosted the Understanding Oor Mad History course in the University of Edinburgh's Centre for Research Collections, where LHSA is based. Understanding Oor Mad History is a four-week community Mad Studies programme. In partnership with Azra Khan (Collective Advocacy Worker, OMH), we added an archive component to the course, and participants have accessed collections from both the service-user movement and asylum records held in LHSA. The course was booked at capacity, and will be running again in the late summer.

In April, CAPS and LHSA hosted an extremely successful public Discovery Session in the Centre for Research Collections. This participatory research event was based around items from LHSA collections selected by members of the OMH group after a number of research workshops. The event demonstrated the power of lived experience voices in research around the history of mental health care, with OMH group members interpreting their chosen archive material with the perspective of their lived experience. Attendees came from the interested general public, heritage organisations, the University

community, researchers into healthcare, and the voluntary and arts sectors.

2. What benefits do you get from Collective Advocacy?

As an institutional archive (that is, the archive for NHS Lothian), we have gained an enormous amount from our involvement in the OMH programme over the last 14 years. The collections that CAPS have deposited with us as an output of their collective advocacy work have added enormously to the public memory of the history of mental health services, and provided a much-needed counterpoint to our hospital-centred collections (where the primary voice is that of the physician). Archives donated by CAPS centre on voices that have been marginalised in more traditional psychiatric hospital collections and in the history of mental health services more generally – that is, the opinions and perspectives of the individuals receiving treatment. This service-user history is of increasing interest to researchers from a range of backgrounds, from more traditional academic research to innovative participatory research programmes. Most importantly, both the collections donated by CAPS and the education and outreach work in which we have partnered work to ensure that the main stakeholders of NHS Lothian are represented in the collections – that is, the residents of Edinburgh and the Lothians.

3. What will be the impact on you if CAPS' groups end?

The prospect of CAPS groups ending will have a significant impact on our community programmes, which are key components of strategic planning within the University. Our work with the OMH group so far has brought new communities into our spaces, which can seem intimidating to people outside the University's staff and student body. Collaborating with Azra and within the structure of the OMH group has allowed us to work with participants inside a familiar framework, and has meant that we are exchanging knowledge with OMH group members to make our spaces more accessible and to use collective history as a way to inspire change and make archives truly representative.

Statement from Mental Health Network Greater Glasgow in support of CAPS

1. How are you aware of CAPS' work?

I have in the past reach out to CAPS to promote the uptake of Advance Statements and other proactive ways people with a lived experience can build a 'care partnership' with their mental health services that better reflects their needs. I have used CAPS materials in relation to Advance Statements many times with people who wish to make an advance statement as I find them accurate and accessible.

2. What benefits does Collective Advocacy bring?

Collective Advocacy enables a more holistic view of the current social context our mental health system operates within. The interaction between the social and the medical is often very nuanced and no one individual service has all the answers in terms of addressing mental health crises and responding to severe emotional distress. It therefore makes sense for strategic partnerships planning to address these issues to have as up to date and comprehensive a picture of local services and issues as possible.This seems to me to be essential in order to maximise the impact of the already limited funding available at this time.

3. What will the impact be if CAPS' groups end?

Your planning partnerships will be less informed regarding the social/medical context that services operate within and therefore be less able to respond to issues in a proactive, creative or localised way. There will knowledge 'gaps' in the planning and evaluation of services, this will lead to a diminishment in quality and ultimately make services less effective. In the medium-long term this will lead to an increased demand for services and support, therefore I feel that any financial savings gained from these cuts will be self-defeating, leading to an increase in demand for services and support, a lowering of quality of service and support and distancing of the relationship between people with a lived experience and those who plan or provide support and services.

Statement in support of CAPS from Dr Autumn Roesch-Marsh (she/her), MSW, PhD, SFHEA Senior Lecturer in Social Work

Out of Sight, Out of Mind has become an important moment in the yearly arts calendar in Edinburgh for so many people. It raises awareness and connects people, helping people to empathise with themselves and others around themes of mental health, mental illness and stigma. The way the exhibition is curated is also ground breaking – using peer advocacy as an approach to co-creation means that there is a congruence between how the exhibition is made and the themes it explores. This means it really reflects the values that people with lived experience feel are important. For my students at the University of Edinburgh it has been a privilege to learn from the Out of Sight, Out of Mind Team over the last three years as they have provided a guest lecture on my course Creative Social Work and the Arts. Students are challenged and inspired by the work of the project and it grounds their theoretical learning with a successful and inspiring real world example. This project has such an amazing history and so much local support and love behind it, we cannot loose this, if we do it will not be easy to re-create. And now, more than ever, these conversations and connections are needed.

Statement in support of CAPS from VOX Scotland

CAPS Advocacy have been a cornerstone of mental health collective advocacy in Scotland for over 3 decades, enabling marginalised groups to have their voice heard in a way that is led by them and supporting people who often have no other safe place to turn. They are an invaluable group member of VOX Scotland, contributing to important research, awareness and local mental health issues, helping to change service provision for the better and, thus, the lives of those they support.

Collective advocacy is a statutory duty and is recognised as such in the Mental Health Care and Treatment Code of Practice, and by the SIAA and the Mental Welfare Commission, along with local authorities in Scotland. Budget constraints cannot justify cutting these vital collective advocacy groups, without consultation or consideration of the gap they will leave, silencing the voices of those who attend and lead them.

We support CAPS advocacy wholeheartedly in their campaign to challenge these proposed cuts and stand with them in support of the collective advocacy movement in Scotland.

Statement in support of CAPS from Dr Sean Harper, Director of Psychology, NHS Grampian

1. How are you aware of CAPS?

I worked with CAPS experience of psychosis group for many years in my previous role in NHS Lothian. The group consulted, co-produced and co-delivered a training programme for psycho-social interventions for psychosis in which I was involved from the outset. This training programme has become a key part of the national training programme run by NHS Education Scotland for key mental health staff and is highly regarded at a national level. The unique contribution of the CAPS group from the outset in terms of true co-production sets this programme apart in terms of expert by experience collaboration.

I also continue to have the fortune of interacting and consulting with members of CAPS in other aspects of my work through the Diana Manson Research Collaborative, which is named after a former CAPS member with respect to the legacy of her work in this context, which speaks to the high level of regard with which we hold the opportunity to engage, consult and collaborate with the psychosis expert by experience group.

2. What benefits does Collective Advocacy bring (to you/others/services)?

The benefits are as described above, but in summary from my perspective, the group offers real opportunity to collaborate on multiple aspects of clinical service improvement, training and research, which otherwise is not available in my experience.

3. What will be the impact if CAPS' groups end?

We would lose the most effective group of experts by experience consultants that I have been fortunate enough to work with for the benefit of improvements in our clinical services.

I am aware the group provides much wider function in terms of the support and empowerment of people who may find it difficult to be heard.

Thus I think it is a major risk to lose such valuable collective forums as we look to try to maintain and indeed improve our services especially in the current challenging context.

CAPS Collective Advocacy staff statement

1. How are you involved with CAPS?

I was a member of several of CAPS' collective advocacy groups for three years before becoming the collective advocacy worker for the Oor Mad History Project in 2023.

2. What benefits do you get from collective advocacy?

Quite frankly, collective advocacy is the only service that has consistently come through for me as someone who uses mental health services. Over time my trust was earnt and I was able to feel at ease with the workers and people involved in the projects. My positive experience gave me the motivation to apply for the worker role as I truly felt a sense of solidarity, connection and empowerment by being involved in the projects. Now I have the privilege of amplifying the voices of marginalised people and helping them campaign for tangible and meaningful change in mental health policy and services. We've achieved some wonderful things and grown together over time. It still surprises me to this day that many people do not know what collective advocacy is, because it's a truly powerful practice that puts people first.

3. What will be the impact on you if CAPS' groups end?

The collective advocacy groups at CAPS provide vital work which recognise intersectionality and the importance of upholding marginalised voices. I would personally be devastated if this organisation's groups, which have done such a remarkable amount for me, both personally and professionally, ended. CAPS' work is built on thousands of voices striving for recognition, equality and fair treatment in the world and it would be an incredible loss for those voices, that work, that community, to end. The knowledge amassed from these groups details how we might improve society through advocacy and activism and it will be valuable for years to come.

CAPS Collective Advocacy staff statement

1. How are you involved with CAPS?

I am the collective advocacy worker for the LGBTQIA+ and Experiences of Eating disorders groups.

2. What benefits do you get from collective advocacy?

Collective advocacy is more than just a space to speak- it's often the only space where people feel truly heard. Working at CAPS, I've seen how transformative it is when individuals share their experiences to lead change. Our groups provide a safe space where people can speak openly without fear of judgement, where their voices are not only valued, but central. For many, this is the first time they have been treated as experts in their own lives.

3. What will be the impact on you if CAPS' groups end?

As a CA worker, I've developed strong relationships with group members and have seen firsthand the importance of having a space where people feel listened to and understood. I have heard from group members the impact that these cuts will have and I feel incredibly helpless knowing that something so vital could be taken away. I see the positive changes these groups have made delivering workshops, doing research, writing books, making resources, creating art- and I am sad that their voices and work are not being prioritised. Collective advocacy is not just a 'nice to have'- it's a vital part of building a fairer, more inclusive mental health system. Ending these groups silences voices that need to be heard.

CAPS Collective Advocacy staff statement

I have been working for CAPS for around four years. People with mental health issues have been organising and agitating for better treatment since the 1980's and before.

On an organisational level CAPS holds a significant amount of all this knowledge and experience and has been built on the efforts of people with mental health issues over the decades.

CAPS is a lifeline to people with experience of mental health issues, often people who don't find what they need from other services find a home in CAPS. It's really quite radical for people with mental health issues to be able to pass on the knowledge and experiences of various conditions to health professionals and others to improve services and protect human rights.

I don't want to see all this work and effort, and the benefits that people derive from CAPS go to waste, it's a truly unique service. From a personal perspective as someone with experience of severe mental illness and hospitalisation I have found in CAPS a wonderfully purposeful and inspiring organisation. I feel I'm doing good work and I don't want that to end.

CAPS Collective Advocacy staff statement

1. How are you involved with CAPS?

I am the Arts as Advocacy Manager at CAPS.

I came across the first Out of Sight Out of Mind exhibition in 2013 and I was blown away by its strength, beauty and rawness. I could see that its power was driven by the people involved and not by an institution. At that time, I was struggling with my own mental health and work situation. I was welcomed into the Planning Group in 2014, and since 2017 I have been employed as the worker for what is now ‘Arts as Advocacy’.

Having been in involved in several ways, I can attest that Out of Sight Out of Mind’s exhibition’s power comes from providing arts for people with mental health issues, underpinned by CAPS Independent Advocacy principles and approach.

2. What benefits do you get from collective advocacy?

I have had my life changed and improved by this work. I have been included, seen, heard and employed by it. I have had a unique opportunity to develop a method of using arts as a form of advocacy in Edinburgh, and to contribute to the lives of people who struggle with their mental health and who face marginalisation for many reasons. I gain a huge sense of personal satisfaction and achievement from this work.

I have seen over a thousand people speak and be heard through their art via Art as Advocacy and Out of Sight Out of Mind.

I have experienced first-hand what can be achieved by a small group of people with mental health issues when they are given choice and control, and how that can impact thousands of others.

I hear how people are empowered personally, process difficult issues, have improved relationships, and how attitudes towards oneself change. I hear how workers, relatives, colleagues and the general public respond, and how their attitudes and understandings shift. And, how people make change, work, study or undertake their own projects as a result.

I benefit from being part of what is now a large and diverse community of people who have mental health issues, and who face marginalisation for many other additional reasons. From this community I continue to learn and grow as a human being, and as an advocacy worker.

3. What will be the impact on you if CAPS' groups end?

Arts as Advocacy is a unique project and I have dedicated 13 years of my creative and working life to it.

I will be affected knowing that the Planning Group and hundreds of people will lose a project they reply on, invest in and believe in.

I will personally lose my ability and power to use my skills and knowledge, built over 25 years in total, to do meaningful work that contributes to the lives of vulnerable people.

These are challenging times for the third sector which see decision makers devalue the work of staff and volunteers who try to meet the needs they know exist, and which see decision makers promote the narrative that economics define societal success. Therefore, it will be extremely difficult for many workers in Edinburgh affected by EHSCP cuts to find new employment in the third sector.

Testimonial in support of CAPS Collective Advocacy

In support of Arts as Advocacy at CAPS

If Scotland as a country denies access to the arts to empower people to improve their health literacy and health and well-being to prevent inequities in health, the barriers of injustice and inequalities will increase in Scotland and Edinburgh as a City.

Health Justice through the Arts

The art of the spoken word and the arts, as a form of advocacy, enable people to express their humanity and creativity as both individuals, and as a collective community, and helps to improve people’s health and well-being.