**Film Transcription**

**Rewind - Leonard Cheshire Disability, supported by the Heritage Lottery Fund.**

**Film Title:**A Home For Life

**Duration:**21 minutes 54 seconds

**Transcription Date:**8th July 2016

**Archive Number:** AVF/129

**Summary of Main Points**

0:31 - A man discusses his decision to move into a Leonard Cheshire home and members of staff explain how the homes operate

6:54 - A married couple discuss their decision to move out of a residential home and begin to live independently

9:13 - The story of a man who was diagnosed with Multiple Sclerosis and subsequently given respite care by the charity.

11:03 - A member of staff explains the importance of disabled people being allowed to act independently and take risks

12:19 - The advantages of residential care for those with profound disabilities are explained

14:29 - A young woman explains how she was able to gain confidence and take back control over her life after leaving a psychiatric hospital

17:34 - Leonard Cheshire speaks about the spread of his charity's work abroad and his hopes for its future

19:23 - Previous two sections repeated

**Start of Transcription**

0:14 [music] to 0:32

0:31**Male Narrator:** No, they were not easy days. In fact, they were hard days. Well, for me they were hard. Great things were happening in the country then. Big changes were taking place. For people with disabilities, we were still being called cripples... pitied.

0:54 **Man:**What are you doing down that hole?

0:56 **Leonard Cheshire:**We're trying to make that old house there habitable, actually trying to get some patients into it.

1:02 [music] to 1:36

1:36 **Male Narrator:**I've heard of Cheshire homes, but I thought they were for ex-servicemen, or, people in Cheshire. Something like that. When I was asked if I wanted to go to a Cheshire home, what could I say? A home? For me, young man?

1:55 [music] to 2:21

2:21 **Male Narrator:**I don't know what I expected to find, but it wasn't this. It seems a long time ago. I've changed a bit since then. Mind you, so have attitudes.

2:35 [music] to 2:44

2:44 **Female Narrator:** Our residents sit on management committees so they have a say in all the decisions that are made within the home. They also run a bar here and they have a little shop.

2:54 **Woman:**I was in the position where I had Multiple Sclerosis, I had no family left and my friends were scattered round the world. So Mote House has been a wonderful release for me because it's introduced me to so many things that I would never have had the opportunities to do before. I was able to go sailing on the Lord Nelson last year, which is a square rigger, and now I have a beautiful room in which to do artwork which I couldn't have done at home. So they are very positive ... pluses.

3:28 **Male Narrator:**That's one thing I didn't expect. Nor to have a say over who comes to live with us, but we do ... through the admissions committee. Who you live with. That's a choice most people take for granted isn't it?

3:46 **Female Narrator:**Each home functions individually, we all live different ways. But it is basically a home for young disabled people. Just because they sit in a wheelchair, people assume they're sitting on their brains as well but that's not true. You know, they're alright up top, it's just they can't use their limbs, their legs, and that's why we need to be here to help them. We like to think of it as a home for life, and that's how it should be. And ... they feel secure in the knowledge.

4:16 **Male Narrator:**As you get older, change doesn't come easily. You need that kind of security. I wouldn't want to finish their days amongst strangers, do they? Listen to me, I'm getting maudlin. These homes are about living, not about dying.

4:39 **Female Narrator:**We live in a lovely house, I mean how many people can afford to live in a listed building, you know? It's absolutely wonderful, but it's not practical. We've got a lift here that's 15 years old, which constantly breaks down. Now can you imagine if you live upstairs, and you're in a wheelchair, how do you come downstairs when the lift packs up? And that happens frequently. We've got to change, but you're very limited what you can do in a listed building. We're situated in the middle of a park, with a beautiful lake outside my window, and everyone says 'what a lovely view you've got there'. I said if you had to live here 365 days a year, you wouldn't think like that. They're isolated in the park; our residents must not be isolated. They must get out into the community and start living, like the rest of us.

5:30 **Female Narrator:**We're actually situated in the middle of a residential area. We're about 100 yards from the local shops. I think it's very important that err a home is actually in the middle of a community so that we can actually be a resource to that community, and not a drain on it. It's important that there's a 2 way interaction. The community support us with all the fundraising events we hold at the home. They also help us with any voluntary work that needs to be err done. People come to err help the residents in various ways, and just to err give the residents friendship and a sense of normality. Disabled people themselves are becoming far more assertive of what they feel their needs actually are, and they feel very strongly in general that they would actually like to live as part of the local community and not be ostracised from it, and so I think independent living units will actually be something that err, we'll see a great deal more of in the future.

6:48 [music] to 6:54

6:54 **Female Narrator:**We met in a Cheshire home, fell in love there as well.

6:58 **Male Narrator:**It was quite a wedding. But a residential home isn't really the place to run a married life. We were encouraged to move out of the home by the foundation and try independent living in one of the new houses. Of course there was the insurance that you could move back at any time if things didn't work out.

7:19 **Female Narrator:**We'd been married for ten years before moving here, and when we moved in it was like getting married all over again.

7:26 **Male Narrator:**It's difficult to explain the difference, it's ... small things that suddenly matter. If something needs to be done, I dunno, perhaps ... changing a washer, it's down to you. If you don't organise it, it doesn't happen.

7:40 **Female Narrator:**Perhaps the biggest difference of all is having your own front door key. For us, mobility is the key to living independently. And fortunately, with a little windfall, we were able to afford transport. This is our link with the world. We've even been on holiday to Park House, the Cheshire hotel in the Royal Estate Sandringham. It's wonderful.

8:06 **Male Narrator:**Strange, isn't it? We can go all over the country but we can't go into our neighbour's houses for a cup of tea. None of them! It's steps! Ridiculous, isn't it?

8:17 [music] to 8:22

8:22 **Female Narrator:**We live our own lives, but we do need some help. Getting up in the morning and going to bed, bathing and personal hygiene, that sort of thing. And that's where the family support services come in.

8:41 **Female Narrator:**We could go in as many as 4 times a day, if we're keeping that person at home living by themselves. And we might even go in just once a week to help give a bath, and so every home is different. You would be erm high one day if you had MS, and you would be very very low the next day so they have to adapt to peoples err temperaments and moods, and so we do an awful lot of counselling.

9:13 **Male Narrator:**I think I'd almost hit the bottom. Being told you've got Multiple Sclerosis isn't easy. Perhaps I didn't handle it too well, I don't know. But there didn't seem much point in even trying. I don't blame Sandra. She tried her best. I know she really tried. I could see it in her eyes. She wanted me to try harder, perhaps too hard. Anyway, she left, took our children. I don't blame her. At least, not all the time. Anyway I looked around one day, there was just me, a bottle of scotch and not a lot else. I couldn't even be bothered to get dressed.

10:03 **Female Narrator:**He really desperately needed some form of respite care away, so he used to come in erm, every week, for two days a week. And then he, once a month he used to come in for a week's respite. And we could keep him at home on that sort of pattern, so that we could build him up, psychologically as well as physically.

10:28 [music] to 10:31

10:31 **Male Narrator:** I don't know what makes the difference between seeing no future at all, and being able to look forward to tomorrow. Perhaps in the end it comes from inside. Perhaps it takes someone else caring about you to make you care for yourself.

10:46 [music] to 11:03

11:03 **Female Narrator:**I think that generally, people don't expect people who have a mental handicap to be able to, to be able to live, erm, a normal life, if err that's the right word to use. The general consensus of opinion is that, that they need to be looked after, and they need people to actually think for them. The biggest problem that arises from over-protectiveness is the fact that people don't have the confidence in themselves. They are able to grow as people once they become capable of making their decisions, of feeling confident in going out into the community or ... it gives them a great sense of achievement. And also the confidence to tackle another job. There are risks for everybody in life. I think that's, that's general. And people with, erm, a mental handicap need to be able to take risks as well, and certainly we facilitate all our people to enjoy taking risks.

12:07 **Female Interviewer:** Tell me what you like about it.

12:08 **Man:**I like erm putting style kits in and everything in and everything in and lots of things in and err and everything I don't mind and I like it so much.

12:15 **Female Interviewer:**Even when it's freezing cold?

12:16 **Man:**No, it doesn't bother me at all!

12:19 **Male Narrator:**With the current trend towards care in the community, we are likely to, errm, be receiving people into residential care with far more profound physical disabilities.

12:30 [unclear background conversation] to 12:38

12:39 **Man:**The main advantage of residential care is they care regularly.

13:01 **Man:** I think some of the more positive aspects of residential care that are often overlooked, is that errm, our residents do not suffer from sort of social isolation that a lot of people living in the community have to contend with. I think they can also avail themselves, err, to some services that would not be readily available to them outside the community. Things for instance like the physiotherapy.

13:24 [music] to 14:26

14:29 **Female Narrator:**Stigma. It's still there. Say you've been in a psychiatric hospital and ... you can watch the fear. The apprehension in people's faces. But you can't hide forever. There comes a time when you have to come out and face the world. When you want to come out. Only a few pounds in your pocket. No job. Maybe no friends. And a need to start from the beginning again. Yeah, almost from the beginning. The ability to do simple things. Even like caring for yourself can just desert you. So what do you do? Go back home? That's not always a choice. A bedsit somewhere? That can be disastrous. And if you forget to take your medication ... well you can be back in hospital again before you realise what's happened.

15:37 **Female Narrator:**They've lost confidence by being in hospital so alone. And that's really one of the biggest jobs that we have to help them with to actually boost their self-esteem, their self-image, so that they believe they can do these things. The staff will usually plan an individual programme for that particular resident, and will look with the resident at what skills need to be worked on. The key element is to set attainable goals. If we try to be too adventurous, then the resident may fail and they'll be less likely to try the next time. So you do it in simple steps.

16:22 **Female Narrator:**You know you're not here forever. But 6 months, a year, 18 months, it's all time. Time to think. With a bit of luck, a bit of help. Time to find yourself.

16:40 **Female Narrator:**Our ultimate aim, from the hostel point of view, would be to help the resident move into employment, if that were possible for them, and to move on to more independent living.

16:58 [music] to 17:02

17:02 **Female Narrator:**I don't expect to wake up tomorrow and find all my problems gone. I'll settle for waking up and believing that I can do something about my problems. It's about taking charge of your life again. You've got to start somewhere, just so long as you start.

17:19 [music] to 17:27

17:28 [music] to 17:34

17:34 **Leonard Cheshire:**One country sparks off another. Err, it was Hong Kong that gave me the invitation from China, and then the same happened with the Soviet Union. But it is growing 1 or 2 countries a year. I hope they'll go on developing numerically where there's need, but more important I just hope that we'll always be flexible, that we'll always be open to criticism and listen to it, and that err ... we'll lead the way. As you travel through the world you see these huge unmet needs and you think how little I'm doing, and you realise that if you give your whole life to it you still will only do ... very little. But then you think of the missed opportunities ... so, but it's no use thinking about the past, better to get on with today.

18:30 [no speech] to 19:23

19:23 **Female Narrator:**charge of your life again. You've got to start somewhere, just so long as you start.

19:30 [no speech] to 19:45

19:45 **Leonard Cheshire:**One country sparks of another. Err, it was Hong Kong that gave me the invitation from China, and then the same happened with the Soviet Union. But it is growing 1 or 2 countries a year. I hope they'll go on developing numerically where there's need, but more important I just hope that we'll always be flexible, that we'll always be open to criticism and listen to it, and that err ... we'll lead the way. As you travel through the world you see these huge unmet needs and you think how little I'm doing, and you realise that if you give your whole life to it you still will only do ... very little. But then you think of the missed opportunities ... so, but it's no use thinking about the past, better to get on with today.

20:41 [no speech] to 21:54

**End of Transcription**