

Hi Debra,

Just heard you on 5 Live. My son smoked skunk as a teenager, was a teenager from hell for a couple of years, he took his gcse's early then dropped out of education at 14. His first psychosis bout came, like the proverbial bolt from the blue, when he was 17 and a half.

You can probably guess the rest. Several involuntary admissions to psychiatric wards, each for a longer period of time. Total of 20 months in 3 and a half years in hospital, 6 months of which were in PICUs - 3 months in a picu in London because of a bed shortage in Worcestershire. A seriously inadequate local mental health trust partnership and p*** poor provision and care which resulted in us complaining, resulted eventually in involving the Mental Health Act Commission and our Trust being severely reprimanded for its p*** poor care. Cannabis being openly sold on the wards, my son being written off (he'll never go more than 6 months without an admission). No care and treatment, no sensible drugs education and awful side effects of the anti-psychotic meds regimes they tried to keep him on.

It took a Jamaican mental health worker in the PICU in Becton, London, to challenge my son about his drug use. Since then he has thought about it, cut dope out of his life but still had a psychotic episode when he stopped taking his meds once again. It's believed that he had so many episodes in a short period that he has triggered/developed the longer term condition of schizo-affective disorder. We believe that research will eventually prove that cannabis can cause (not just trigger) mental illness.

So where now? Some hope for you. Our son is 24 now. Coming up to 3 years since his last discharge and slowly rebuilding his life as a thoughtful, serious young man with a long term mental condition. At last we accessed proper treatment, Carers' training, CBT, BFT, other talking therapies that came out of his long term appointments with an excellent psychologist, gradual rebuild of confidence, NO MORE HOSPITAL ADMISSIONS!! He even got involved with Worcestershire Mental Health Network which is a service user/carer organisation and he has been involved in delivery of mental health awareness training, talking about his own experiences to people to break down barriers. He has also talked to younger people about the role of drugs in his illness.

Some hope for you - he applied through UCAS and got a place on an applied science foundation year at Plymouth Uni. He is nearly through the course now and has had such high marks he is assured of a place on the chemistry degree course starting in September. He still rejects cannabis though there are people around him who do smoke it.

You said that your son quoted the classification as reason why it was not dangerous. My son also said exactly that. ("David Blunkett would not be declassifying it if it was dangerous"). He used this as an excuse rather than a justification. He enjoyed the whole process and experience of smoking the stuff and did not want to hear otherwise. He used to say it was his religion to smoke it and deluded himself that he was a white Rastafarian. It was only when challenged on his own ground by the Jamaican worker that he began to really think about it. He would not accept this view from us. Looking back on it, he would have used any excuse as his justification.

The Government needs to spend much more money on re-education of people and should also put much more money into mental health provision to move it out of its "Cinderella Service" status. To a certain extent the genie is out of the bottle, maybe they should classify skunk as a class 2 to make the point. I'm not sure that a blanket reclassification will hit the spot, it needs to be much broader than that - you only have to look at the QCA schemes of work on PSHE to see how little time is spent on discussing cannabis in school. That's as much part of getting the message out to young people.

Good luck with your campaign. Take some hope from me, as my son has worked through this, things have very slowly got better. It still takes a lot of support for him at Uni - daily phone calls from him and support from the Uni for some aspects of his condition, but it is now positive instead of the awful, relentless, dark days of the last few years.

Best wishes