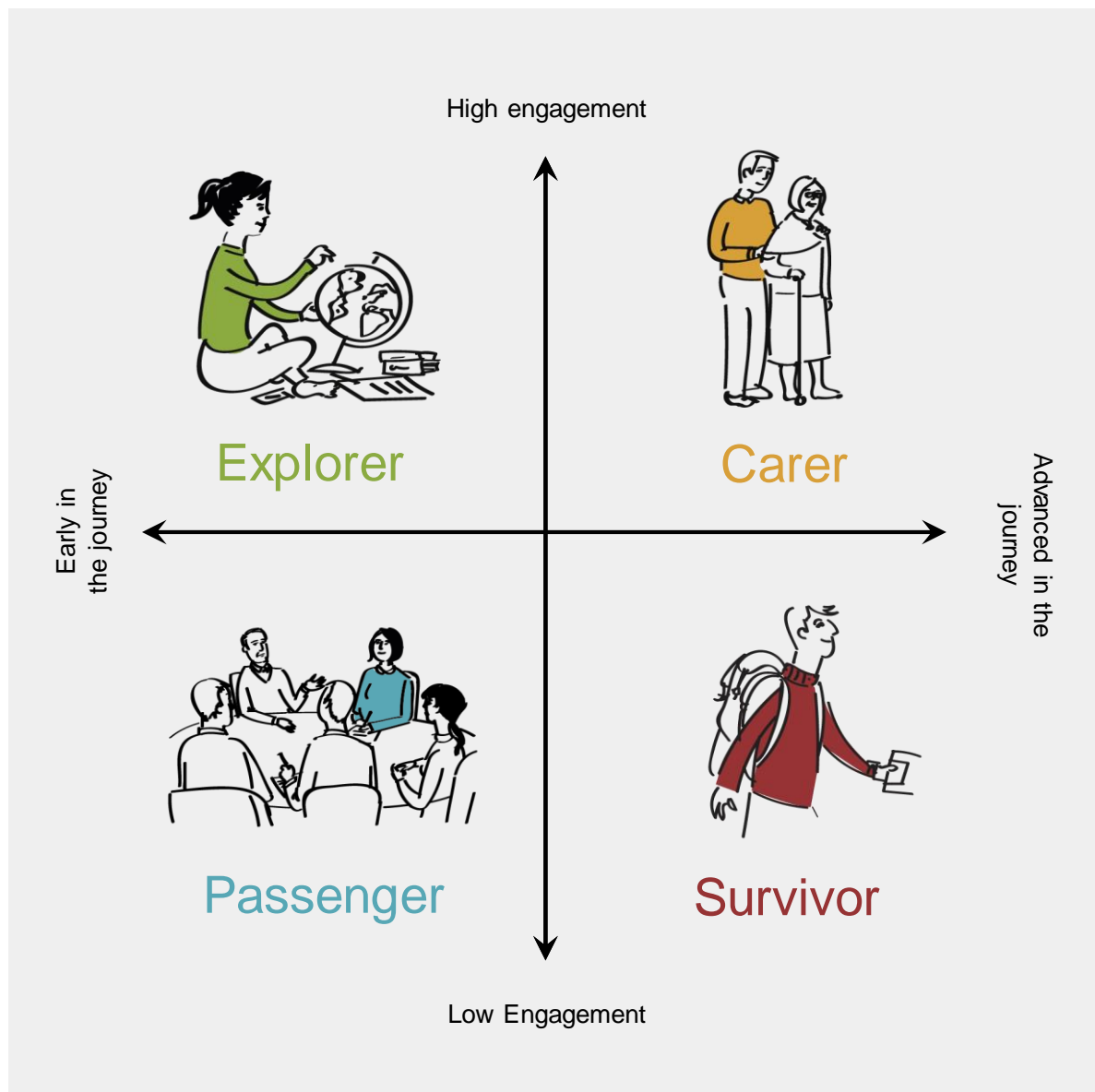


# Londoner's Stories

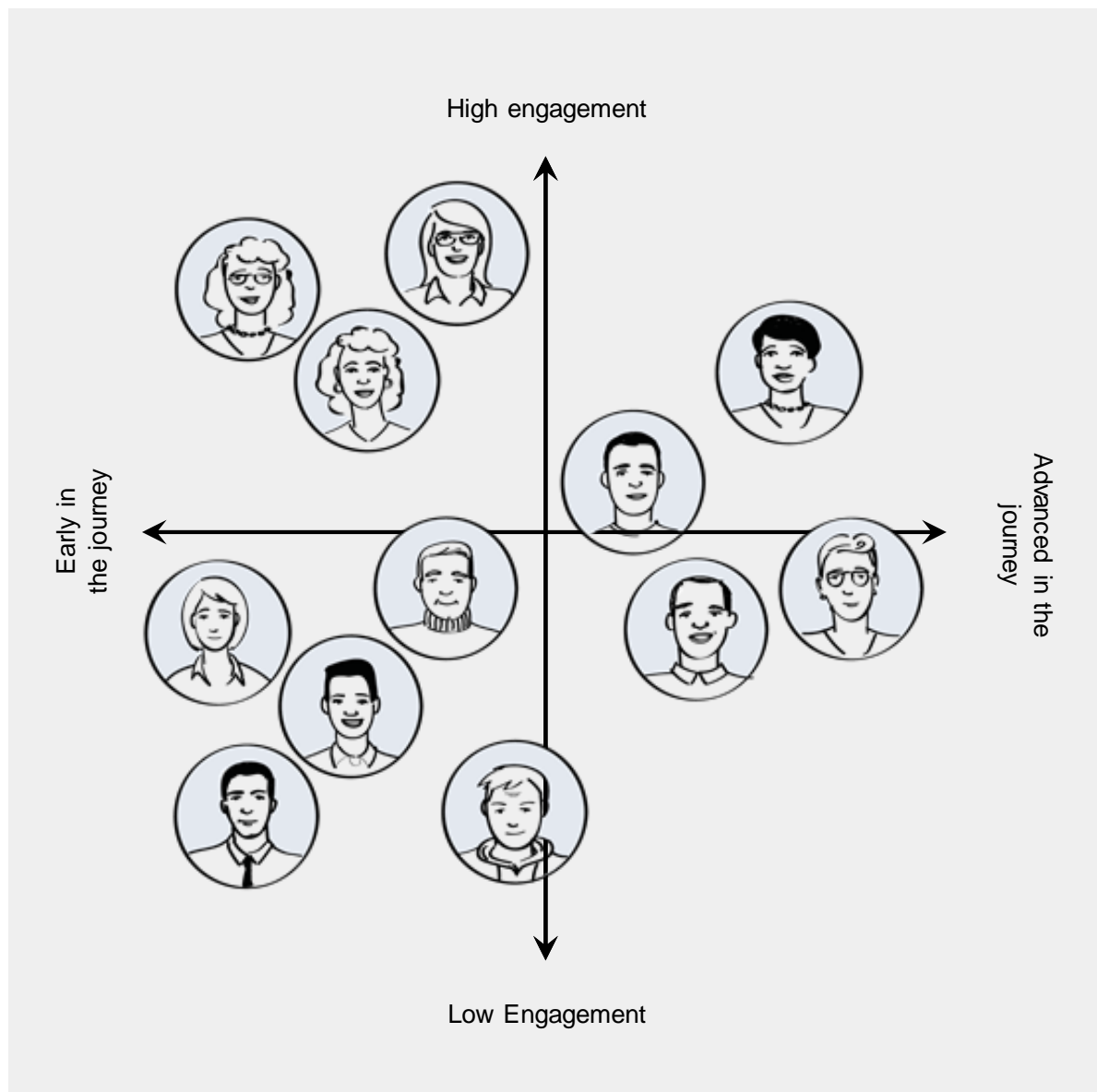
# Typologies

Summary of four typologies



# Interviewee distribution

Location of personas according to engagement and length of experience



“I am open  
to that.”

# Explorer



## Key attributes

High engagement, early in the journey

Proactive

Makes time to explore possibilities for improving wellbeing by engaging with existing services



# Londoner: Christina, 44

## Explorer

**Works** part time in a law firm

**Lives** with partner and youngest daughter

**Likes** being active, seeing her family happy

"I think lack of sleep will make you anxious, and that does make you depressed, and obviously because of the trauma what happened, but I just tried to sail through it and I don't think it has gone away."

"I do find online very helpful though, and speaking to people online is quite good...to see what other people are going through and that might help you, that your situation is not so bad. Or maybe that you are giving somebody advice, that can help them as well, that's a good thing."

## Experience

Christina is experiencing stress, anxiety and sleep difficulties. Her extreme sleeplessness started after a burglary seven years ago. Victim support wasn't helpful to her. She never recovered from the experience and occasionally has panic attacks. She feels physically and mentally exhausted.

## Insights

Despite moving home, and no longer being the main carer of her infirmed mother, she remains in a cycle of anxiety and sleeplessness. Balancing domestic, professional, and social demands makes her feel overwhelmed, which exacerbates her sleeplessness. Not sleeping makes it difficult to balance demands, creating a vicious circle.

## Support

Christina found support in the Netmums online community. It is a place where she can connect to people like her. She gives and receives advice from the other members online and occasionally meets up with a group of mothers for a chat over a coffee. Her GP only suggested medication.



# Londoner: Margaret, 62

## Explorer

**Worked** as a part time publisher of training courses before she cared full time for her husband

**Lives** alone since her husband died from motor neuron disease

**Likes** to cook, socialise, and listen to quality comedy

“I know there is help out there if I want it....I am able to pick up the phone if I need to and call my family for support.”

“I certainly won’t bring people down, I will deal with it myself.”

“I had to push my husband [to socialise] and then he was happy that he had someone to talk to.”

“I need to keep myself occupied, and I need to be motivated.”

## Experience

Margaret suffers from stress, anxiety, and sleep difficulties. She recently lost her husband and is in bereavement. She cared for him and felt intense stress throughout the duration of his illness and suffering. Margaret feels sad and alone when she does things they would have done together. She also feels stressed by necessary legal procedures.

## Insights

Margaret is the kind of person who bridges the gap and helps people to connect. Uplifting activities and social events prevented her and her husband from cocooning. They loved to laugh together, and now she gets comfort from comedians like Ruby Wax. Margaret feels her whole life has changed, and she is trying to get back on track.

## Support

Margaret receives great support from her family, neighbors and social network. She and her husband built a trusted relationship with their GP, who gives her security and comfort. The Motor Neuron Association offered her information and personal support during and after her husband’s illness. Margaret now plans to volunteer to help others.



# Londoner: Rita, 36

## Explorer

**Worked** different jobs and received a Master's degree before becoming unemployed

**Lives** in a hostel, separated from her husband and the traditional Eritrean community

**Likes** design and art

“The reason I'm in a hostel is because I am going through a divorce, which has been going on for three years now believe it or not. It's a little bit complicated but my life has been going downhill since I left him; the relationship itself was really abusive.”

“Avoiding friends and when they come on the scene again I try to make out that I'm fine, I block it and that kind of depresses me....I don't want anybody to feel sorry for me.”

“I subconsciously what to see other people going through the same thing as me and dealing with it better and coming out stronger.”

## Experience

Rita is experiencing stress, anxiety, sleep difficulties, low mood and depression. Her divorce, joblessness, and family conflict leaves her feeling exhausted, alone, and full of self-doubt. She worries intensively and feels her brain just won't wake up, like a constant hangover. Time keeping and social pressure to perform make her anxious.

## Insights

The traditional beliefs and stigma of her family and community prevent her from seeking help within her social circle. She is focused on maintaining appearances, and is in conflict with her parents. Rita worries that being labelled will effect her job prospects. She is also worried about the future and is trying to recapture her past life and successes.

## Support

Rita benefitted from sharing with the Samaritans. She is comforted by stories of people like her, especially those who overcame their struggles. Now she seeks trusted support and information on how to maintain a normal way of life, especially motivation to get up in the morning. Rita Googles anxiety and depression, which leads her to anonymous forums and sites.

“I don’t know  
what to do.”

# Passenger



## Key attributes

Low engagement, early in the journey

Passive

Focused on their personal experience,  
often isolated and not engaged with  
support





# Londoner: Martin, 38

## Passenger

**Works** fulltime as a self-employed ditch digger (for pipes and wires)

**Lives** with mother, is divorced and has two children who live with their mother

**Likes** playing football, mountain biking and supporting Arsenal

“I don't really know what causes it, but I know I sweat profusely when I sleep at night. I don't know why, but it wakes me up.”

“I don't like to let people in, to tell people about myself. I like to keep myself to myself.”

“I got my own house, that I own.... but I'm not living in it since I split with my wife. I get to see my child every weekend, which is not ideal, I used to love going home, helping her with her homework....I'm back living in the room that I grew up in....It's not ideal is it? That could be a contributing factor, I don't know.”

## Experience

Martin experiences severe sleep difficulties. He gets upset and shorttempered when he doesn't sleep. On Saturdays he ends up physically drained and stays in bed all day. At the end of a working day his body is tired but his brain is constantly racing. He has suffered from sleeplessness for 10 to 15 years. He doesn't know what to do.

## Insights

Martin experienced several severe life events. His father died in front of his eyes at the age of 15, he witnessed multiple tunnel collapses, and he is divorced. His work is stressful because it is dangerous and he is responsible for the safety of his co-workers. He finds himself in a cycle of stress and sleeplessness, without knowing any particular cause. Smoking is his relief from work.

## Support

Martin doesn't like doctors due to a traumatic childhood injury and his subsequent care. He also doesn't like authority figures, due to a bad experience with a therapist as a teenager. He prefers to keep things to himself and doesn't talk about his feelings. He does not know where to start and he is not aware of information or services that could support him.



# Londoner: Stuart, 51

## Passenger

**Works** as a financial trader

**Lives** with wife and two children

**Likes** playing tennis and golf, is a social guy

“I can’t keep this going, somethings got to change.”

“We talk about the stress of work but not the stress of life, because there are people in the same line of work as me who handle it better than me I think.”

“When I was at school, people who needed help with these things was a sign of weakness.”

“I get a positive boost if I’m controlling it, which is exactly how I like it and it’s not a good thing.”

### Experience

Stuart experiences low mood, stress, anxiety and sleep difficulties in both his work and personal life. He suffers from mood swings, and often feels stressed over a long period of time without one particular reason. Stuart feels lonely as a result of working at home. He also feels guilty whenever he is not working and making money for his family.

### Insights

Stuart has analysed the variables that affect his sleep: stress, spicy food, work after a certain time, and noise. Though he can sometimes set a good sleep pattern, he often falls back into a cycle of stress and sleeplessness. Little things trigger his anxiety, including a late night of work, messiness, poor timekeeping, failing services, and driving. He feels he absorbs the stress of those around him.

### Support

Stuart feels his family could do more to help him be less stressed, but he does not communicate his experiences or his needs. Playing sports and socialising takes the edge off his stress and helps with sleep. Occasionally he talks to friends about work stress, but only in a joking way. He holds a sense of stigma, and while he is interested in strategies, he endures his experience alone.



# Londoner: Lisa, 23

## Passenger

**Worked** in a shop but currently studies full time in an online university

**Lives** with her mother and brother

**Likes** going to the cinema and spending time with her friends

“I’ve always been a worrier.”

“I went to Roehampton University...it was like a two hour train journey and I had anxiety attacks on the trains and was claustrophobic and so that’s why I transferred my credits over to the Open University. “

“I wouldn’t mind from the comfort of my own home, I don’t know why but its just like your committing to something like a course, I don’t want to do it...so something I could use as and when I feel I need it kind of thing as opposed to a regular thing.”

## Experience

Lisa is experiencing anxiety and sleep difficulties. Her first panic attack was 5 years ago. The attacks are triggered by large crowds and claustrophobia. For the past three months, Lisa has also had trouble sleeping. Her mind goes into overdrive and worries about things constantly. Stress make her panic attacks worse. Uni deadlines increase stress.

## Insights

Lisa’s strategy is to remove herself from potentially stressful situations, namely overcrowded places. She no longer goes to festivals with friends, and she switched to online courses because traveling by train to Uni was too stressful. As a result, Lisa is isolated and doesn’t see or talk to many people. She does schoolwork in her room, and stays up on Facebook and WhatsApp when she cannot sleep.

## Support

Lisa diagnosed herself with anxiety by reading the NHS website, which outlined options she already knew. She hasn’t gone to a GP, doesn’t want medication, and doesn’t want to commit to a CBT course. She prefers preventative strategies she can use when and where she wants. Based on her mother’s advice, Lisa approached student support services, who gave her an extension for her exams.



# Londoner: Nia, 30

## Passenger

**Works** part time as a cleaner and studies accounting

**Lives** alone, her family lives in Trinidad

**Likes** to socialise and to read book series

“I couldn’t breath, I couldn’t speak to anybody.”

“If you tell me to do something, I wont do it today, or tomorrow or the next day. I’m going to look at it months later.”

“I have to find something that will change me.”

“I’m going to stick with the swimming. I felt so free and weightless, everything was not a burden. I made a few friends who can’t swim like me.”

## Experience

Nia is experiencing low mood, depression, stress, anxiety and sleep difficulties, exacerbated by the recent death of her father. She feels sad about being unable to attend his funeral at short notice, at which time she did not sleep for days. Her mind races, she can’t breath, and she gets stomach cramps. She is exhausted, but can’t sleep at night.

## Insights

Nia diagnosed herself with anxiety through online research. She gets easily overwhelmed is admittedly prone to procrastination due to lack of motivation. She is able to accomplish goals when she is guided and motivated by other people. She spoke with a nurse about digestive problems but does not know how to talk about sleeplessness.

## Support

Her boyfriend helps because he had a similar experience when his mother died of cancer. They talk and draw together. Going away for a girls’ weekend also helped to clear her mind. She signed up for swimming classes, which helped her feel weightless and find new friends. WhatsApp is her lifeline to connect with her mother and sister.



# Londoner: Sam, 27

## Passenger

**Worked** in several jobs, is currently unemployed

**Lives** with his mother and siblings, is separated from his wife, and has a young son who lives with his mother

**Likes** playing football

“In my head I just thought it was just me, like being silly, but in the last few years there’s been a lot more awareness about this sort of stuff...still took a while to say wait a minute.”

“Football is where I can let out a little bit. If I didn’t do that I think I’d actually go crazy.”

“So even when you’ve got a new job, you’re still not sleeping properly, still getting up late at night, everything just seems to be like a trudge, rather than actually getting somewhere. So I think if I could just sort my sleep out, then I think I could get past a lot of stuff. They are all connected somehow.”

## Experience

Sam is experiencing depression, stress, and sleeplessness. He is stressed by repeated joblessness, and the resulting financial pressures. At night his mind races, and being unable to sleep affects his mood and his ability to focus on work during the day.

## Insights

Sam finds himself in a cycle of unemployment. The longer he is out of work, the more he doubts himself. In situations of low mood and stress, he needs tools to self-help. Growing up without a father, he had to be emotionally strong and care for others, neglecting his own wellbeing.

## Support

Reading about Robin William’s story made him aware that he is not alone, and gave him a safe space to learn about depression. He connected with a friend of a friend who shared similar experiences. That conversation opened his eyes, and helped him feel less stigma, but he resists taking concrete action due to pride and inertia.

“I don’t  
have time.”

# Carer



## Key attributes

High engagement, later in the journey

Proactive

Trying to self-help, but spending time and energy on others rather than engaging with services



# Londoner: Panvi, 62

## Carer

**Works** as an administrator for the local government and looks after children in care

**Lives** with her mother and children, is divorced, was born in India

**Likes** being a spiritual person, is interested in alternative medicine

"I'm doing too much, and at times I'm not able to cope with it. Sometime my children don't co-operate, or things don't go right. There is all of a sudden so much gets like, accumulated, either it is the work stress, mom's appointment and running around everywhere here and there."

"I find it helpful for myself (to serve other people). I meet lots of people, from all walks of life. It's very therapeutic, it helps me."

## Experience

Panvi is experiencing low mood, stress, anxiety, sleep difficulties and depression. She is recovering from the recent death of her father, and is still recovering from her experience of breast cancer a couple of years ago. Panvi is also consistently exhausted by her extensive responsibilities. Because she does not take care of herself, she suffers low mood and periodically crashes.

## Insights

Panvi puts everyone else before herself. As a single mother she has a lot of responsibilities: taking care of her mother, following up on her appointments, and managing the stress of children, professional work and community volunteer work. Nevertheless, she enjoys social interaction and loves caring for other people. She wishes she had more time to help and talk to people.

## Support

The NHS has been very helpful and supportive, but GP's only prescribe medication, which results in side effects (getting sleepy, addicted). Short term counselling showed her the benefit of caring for herself. She didn't have time for therapy so she tries to help herself. She stopped taking medicine and looked into alternative health strategies like yoga, meditation and bio medicines.



# Londoner: Carl, 38

## Carer

**Works** part time as a business consultant

**Lives** with his wife and dog, his parents are from India and live religious lives

**Likes** researching and reading, is an analytical thinker

“When you’re not sleeping very well your temper gets worse and worse and it becomes harder to deal with the people-around-you’s crap.”

“There is so much out there because it’s channeled in from so many places it’s great, but if there was like ‘follow these five things first.’”

“...And you realize that a ton of people are going through this...I think it probably makes you feel less mental about it, less like ‘Is it just me, am I going crazy?’”

“The anonymity of something like [Netmums] generates so much honesty.”

## Experience

Carl is experiencing stress and sleep difficulties. Working in investment banking led to performance related stress and extreme tension headaches. Since then, stress came from caring for his ill wife. When he doesn't sleep, he finds it difficult to cope with interpersonal difficulties. Sleeplessness has become an expectation, and that troubles him.

## Insights

Carl diagnosed himself after looking back, and recognizing a pattern. Work was stressful, but structured. Losing that structure was a challenge. He tried to create structured sleep habits, but caring for his wife during her illness was chaotic. Since then, her sleep preferences still supersede his expressed needs, and she conflates quantity of time in bed with quality sleep.

## Support

On the one hand, Carl he says that he has no problem going to the doctor and wants to change, but he remains in a cycle of browsing forums, reading articles and putting his needs second. He has a sense of stigma, and is also overwhelmed by the available information. He would prefer to use anonymous services, and to read simple solution-focused strategies in the comfort of his own home.



“I try to manage.”

# Survivor



## Key attributes

Low engagement, later in the journey

Passive

Has endured difficulty and isolation, and has found a way to survive without sustained engagement



# Londoner: Don, 45

## Survivor

**Works** full time as a delivery driver

**Lives** alone, is divorced and has two daughters who live with their mother, his family is from Sierra Leone

**Likes** being on his own, is an introvert

"It does help when you know it's not just you, lot of people mess up in life. It gives you the encouragement that you can see that they come through at the other end of the tunnel. If they could, why can't you?"

"Growing up in the 70's - 80's, it wasn't really a thing to say that you are depressed. Obviously, the 2000's now with social media, everyone can be a bit more open, you know if you are depressed, so what, let's sort it out".

## Experience

Don is experiencing sleep difficulties and has experienced low mood and depression in the past. After being in a down period for a long time, losing his job, using drugs and being homeless, he is now back to a stable, employed, and drug-free life. He is focused on maintaining his current state of mind.

## Insights

Don has internalised the stigma surrounding mental health. Talking about depression has always been a taboo in his family and generation. Due to his experiences, he now recognizes the fine line between happiness and depression. After learning to take better care of himself, he gave back to the community by mentoring others.

## Support

During his down period, the hostel key workers encouraged Don to seek help. He eventually received therapy from professionals. They shared stories about people who overcame similar issues with depression and drug issues. His two daughters are his biggest influence to get back on track. They teach him how to talk about feelings.



# Londoner: Penny, 50

## Survivor

**Works** on a contract basis

**Lives** as a single mother and cares for her three children and her niece, a young alcoholic diagnosed with epilepsy

**Likes** reading criminology books

“You’re just having a bad day. But then that day goes into another day, and another day...”

“It’s great that I have a busy life with the kids, because without that... When you’ve got children, mum has to be okay. Because if mum’s not, they’re not. Without them, I wouldn’t get up some days. Definitely not go out.”

“It’s all about self-help. Previously I would have all got them up at the same time, and it would have been a battle zone... for the bathroom, for whatever. But now the morning routine I staggered. I get up, I get myself a cup of tea, and have a few moments to myself.”

## Experience

Penny has experienced depression for over 30 years. She suffered in silence for a long time, but now she shares openly. When her mood gets very low, she sits in one place without moving. Broken routines and unexpected crisis can set her off. Her father recently had cancer, and she suffers from physical health problems.

## Insights

For Penny, making task lists, including getting out of bed, is her way of getting through the day. She learned to stagger her morning routine with the children to avoid being overwhelmed. Her son is a challenge, and caring for her niece is very straining, but worthwhile. She supports others but doesn’t get supported, so she relies on self-help to survive.

## Support

She received CBT three times throughout her life, which helped her to think differently, recognise the signs of her low mood, and self-help. Penny relies on the self-help methods she learned, including list-making and routine. The kitchen is her sanctuary. Reading is her escape that helps her to switch off, but she feels that others don’t recognise this need.

*Thank you*

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