

*Nursing at the*  
**EDGE**



*Rebel with a cause*

HILDA CAMPBELL



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For as long as she can remember Hilda Campbell has been told that she cares too much. It has influenced her childhood, affected her career, and shaped the course of her life. But Hilda would have it no other way: "Someone's got to care, really care, for the people who need it most," she says. "I have had to leave the NHS to be the nurse that I always wanted to be."

Hilda heads a charity called COPE, which provides support to people living in west Glasgow from its base behind a pub in Drumchapel. Focusing on mental health, health improvement, wellbeing and community capacity-building, COPE serves as a beacon of hope.

"I was literally rock-bottom, and I'm not joking when I say that I wouldn't be here now if it wasn't for COPE," says former client Kathleen Robertson. "Three years ago I was suicidal, unemployed, ashamed, and couldn't see a future. My GP said I was depressed and advised me to seek help. I turned to my church, but they told me there was a 12-week wait for counselling unless I could pay £40, which I didn't have. So one day I opened a bottle of pills. Only my dog crying stopped me from taking them..."

Kathleen's daughter heard about COPE and suggested that her mother make contact. She is very glad that she did. "I was offered an appointment the same day, and as soon as I walked through the door I knew I was in the right place," says Kathleen. "Basically, I haven't looked back since."

Having received support from COPE therapists and counsellors, and discovered relaxation and self-help techniques, Kathleen started to recover. A former Army training sergeant, she soon became a COPE volunteer, and when a vacancy arose for a full-time administrator, she leapt at the chance. "COPE is not just a place of work

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**KATHLEEN ROBERTSON**

for me, it's part of my family," says Kathleen. "It's built my confidence, my self-esteem and my skills. There's nothing I won't try now."

These days, Kathleen is the first point of contact for people in despair who call COPE. "I can tell what they need because I've been the person at the other end of the 'phone," she says. "No-one ever has to wait to get help here."

For Hilda Campbell, that is the key to COPE's successful service. "The people we see here are at the end of their tether – maybe it's to do with suicidal thoughts, bereavement, depression, drink, drugs, domestic violence or just the daily challenges of living in poverty, but we turn no-one away. If we can't help we try to find someone else who can," she says. "COPE is the community's self-made safety net, and it works."

Established in 1991 with Urban Aid funding, the then Drumchapel Mental Health Consumer Enablement Project started with a local survey. "One of the first things people told us they wanted was to change the project's name, so it became COPE – Caring Over People's Emotions," says Hilda. "They said they wanted the caring bit stressed because that was what our service was centred around."



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hard to promote and protect patients’ dignity and rights, taking on the establishment when necessary. When she was turned down for a clinical nurse specialist post because she “cared too much to be an effective nurse manager”, she decided there had to be a better way of following her heartfelt vocation.



Starting up COPE meant leaving the NHS, but Hilda is still very proud to be a nurse. “My inspiration is Florence Nightingale, who took on the system and transformed it,” she says. “Some of us just aren’t cut out to blindly follow orders.”

Now Hilda leads an organisation that is entirely responsive to the needs of the people it serves. Its base, behind Oliver’s Function Suite on Drumchapel Road, is in the heart of a community that has just about the highest deprivation and lowest life expectancy in the developed world. COPE wants to change this.

Poverty – financial, of opportunity and ambition – is the grinding norm here for many, and COPE makes regular referrals to foodbanks. “But we have a vision that life doesn’t have to be so tough, that there are new ways of supporting people to find the resilience to roll with life’s punches,” says Hilda. “What we do works. Those who use COPE tell us that.”

Born in the East End of Glasgow, where her Burma Campaign veteran father was a school janitor, Hilda knows how hard it can be to survive and thrive in tough circumstances. She has always been keenly aware of the need for care: when she was eight her mother was diagnosed with Lupus, and Hilda remembers wishing the people at the hospital would be nice to her mum, and not hurt her. Hilda lost her mother when she was 15.

Despite being bullied at school for being a ‘swot’, she knew she wanted an education. In 1979 she went to Glasgow Technical College to do a degree in social sciences, where she discovered a passion for psychology.

In her honours year she wrote an essay about mental illness that called for a person-centred approach, long before its time. “I was told I’d passed even though I’d given the department such a laugh with my ‘naïve twaddle,’” says Hilda. “They said I cared too much ever to be an effective clinical psychologist, so I went off to train to become a psychiatric nurse.”

Once qualified Hilda specialised in care of the elderly confused and mental health rehabilitation and she fought

They include local GPs such as Dr Peter Cawston, who is a partner in the Drumchapel practice, one of the 100 ‘Deep End’ general practices that serve the most socio-economically deprived populations in Scotland. “COPE is an organisation on which all the practices have relied for many years, and which has proved a lifeline to our patients,” he says. “None of the other options available to us offer the kind of service they give. If COPE were lost to patient care this would have a serious impact on some of the most needy.”

There was a threat to COPE’s survival last year when NHS Greater Glasgow and Clyde introduced new procurement systems and removed its funding, instructing local GPs to refer their patients elsewhere. “That was terrible for people in distress. All the other mental health services in the area that are NHS-approved have long waiting lists, and we commit to seeing people within 10 days, or sooner if there’s an emergency,” says Hilda. “But thankfully our clients can self-refer and our reputation means that word gets around. People know we are still here for them.”



**“I describe COPE as being like an onion. There’s no core as such, but every layer is important to make the onion strong. Together, we are making this community stronger.” HILDA CAMPBELL**

COPE continues to receive funding from Glasgow City Council, supplemented by income that the charity generates itself. “From the beginning we have reported to the council, for which I am very grateful,” says Hilda. “I understand them and what they are trying to achieve. Their officers are good to work for, and if you demonstrate your competency to deliver, they respect that. While the health board is totally risk averse and wants to be in control, the council appreciates that we can be a part of the solution to their challenges, and they respect our contribution.”

Hilda says that an NHS obsession with box-ticking misses the point about COPE. “What we do is preventative, and can’t be easily measured,” she says. “But I do know that in more than 20 years no-one has gone on to complete a suicide while we have been working with them. If someone needs to be referred to a specialist, of course we do that. I am a health professional, and I am always guided by my nursing ethics.”

The COPE core team is made up of Hilda and administrator Kathleen, supported by key clinical associates (trained nurses, specialist counsellors and therapists, plus a clinical psychologist) who are contracted to undertake one-to-one therapy sessions and lead training courses. There are experts teaching mindfulness and self-management, and community members are trained in suicide prevention skills.

COPE also equips local people to become community development associates, volunteers who work to identify and address issues that affect the areas in which they live. “We deliver whatever people tell us they’re looking for, really,” says Hilda. “I describe COPE as being like an onion.

**Too many people think nurses only work on wards. But I believe that to make a real difference, the streets have to be our wards.” HILDA CAMPBELL**

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That is a sentiment endorsed by the people who spend time at COPE’s homely headquarters. Sixty eight-year-old Jim McAteer, for instance, settles clients in to relaxation rooms where they can recline in a massage chair and listen to soothing sounds. Eight years ago, following his mother’s death, four redundancies and two hip replacements, Jim says he was ‘feeling low’ and his GP referred him to COPE. “I started down there,” he says, pointing to the floor. “Now I’m up here, and it’s a great place to be.

“I see the difference in other people too. Some say it’s taken them months to pluck up the courage to come in through these doors. But COPE is run by real people, and that makes clients feel at ease.”

COPE welcomes men and women of all ages, and offers support to around 2,000 people each year. Donna McAllister, who has bipolar disorder, was recommended to attend by her psychiatrist. “I wish someone had told me about counselling 20 years ago,” she says. “I’ve had lots of help here, and it’s boosted my confidence. They never turn their back on you.”

Now chair of the COPE management committee, Donna says she’s proud to be able to give something back. “I’ve never heard anyone say ‘it’s not for me’,” she says. “This place is for the people, and that’s why they come.”

Elsbeth Kerr says she has umpteen health issues, including diabetes and a double mastectomy. Last April, feeling suicidal and on antidepressants, her GP recommended that she call COPE. After seven weeks of counselling sessions, aromatherapy and massage, the forty one-year-old mother of two became a volunteer. “Life has immensely changed for me,” says Elsbeth, who runs COPE’s quilting course. “This time last year I didn’t think I’d be able to do any of this. Now I’m going for a job interview.”

Seventeen-year-old daughter Alex credits COPE with transforming her mother from “very, very angry Mum” to “mindful Mum”, and now volunteers as well.

For Josie, making the tea in the COPE kitchen, this place has been part of her life for nineteen years. Suffering



from depression and anxiety, she was referred by her GP. One-to-one sessions taught her how to manage the panic and stress that once caused her to flee from shops: “When I feel it coming on now, I take a deep breath and count to ten,” she says. “They’ve taught me how to cope.”

Pal Jaynie says: “It’s great to have somewhere you’re not judged. I’ve no time for health services. Here’s like part of my family and I’d be lost without them. I’m not much good one-to-one with strangers. If it wasn’t here, I’d not be here – and I mean that.”

Barbara, who has agoraphobia, praises the warm welcome that COPE clients receive. “You can spend three months waiting on a psychiatrist, or get seen here the same day,” she says. “You’d not have recognised us when we started. COPE’s been a life-changer.”

Hilda looks forward to the day when what she does is recognised as ‘real nursing’. “I would love to have nursing students on placement here, to show the impact we can make by working with communities,” she says. “Too many people think nurses only work on wards. But I believe that to make a real difference, the streets have to be our wards.” ■

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