

FEATURED

BA (HONS) MULTIMEDIA JOURNALISM



BOURNEMOUTH UNIVERSITY 2016

FROM THE EDITORS

Danielle Cardy - Editor

It gives me great pleasure to welcome you to the first issue of **FEATURED** magazine - I am also delighted to be writing the first editor's letter. I have been asked numerous times in the past three months how I am managing to cope with my final year at university, a dissertation, a part-time job and launching this magazine, all within just a few months. Yes, it has been stressful at times, but editing this magazine has given me a fantastic taster of working in the industry I hope to be a part of in the future.

I have very much enjoyed the whole process. From planning the idea and concept with Emma Scattergood back in December, to applying and achieving the CEL (Centre of Excellence in Learning) award and funding, to running a team of over 20 contributors, writers, editors and sub-editors, and compiling **FEATURED** magazine - it has been a busy yet enjoyable journey to say the least.

FEATURED is a magazine dedicated to Bournemouth University's (BA) Multimedia Journalism students, allowing them to showcase the amazing magazine projects they worked on in the first half of this academic year.

The magazine displays some high quality journalism: from refugees' integration in Bulgaria ([page 12](#)) to the rise of orthorexia ([page 77](#)) and even the emergence of sex robots ([page 24](#)) - yes, you did read that right - the students have investigated a really diverse mix of topics. I'd like to thank all of them for sharing their stories - without them we would not have such rich content. If you head over to the contributors' section on [page 4](#) you can get to know the team and also find out how to contact them.

I would also like to thank Emma Scattergood who has helped me since day one with everything from planning, to getting the ball rolling, and also calming me down numerous times! Also, thank you to Saeed Rashid, the art director of the magazine who has happily shared his design expertise with the team. Lastly, thank you to the CEL (Centre of Excellence in Learning) for awarding the co-creation award and - along with Karen Fowler-Watt, Associate Dean of the School of Journalism, English and Communication - making this magazine possible.

Danielle x



Emma Scattergood - Managing editor

I'm delighted to be writing this letter for the first edition of **FEATURED** - and hope there will be many more editions to come. Over my years in industry, I have worked with a good number of editorial teams on a range of magazines, but working with students is always an absolute pleasure.

The students on Bournemouth's BA Multimedia Journalism are pushed hard. Accredited by all three industry bodies (the NCTJ, the BJTC and the PPA) the course is designed to produce multimedia journalists who are equipped to deal with all aspects of storytelling. We teach them everything from basic news skills to audio/video production, online interactive features and even shorthand, and expect them to produce industry-ready, professional packages at the drop of a hat. So, it's wonderful that so many of them have been eager and willing to use their spare time to help in the production of this magazine too. I thank them all and wish them every success in their future careers - I know they will shine!

Emma x



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TEAM

Managing Editor

Emma Scattergood

Editor

Danielle Cardy

Editorial consultant

Mary Hogarth

Chief Sub-Editor

Mollie Foster

Sub-editors

Kemi Rodgers
Aliyah Allen,
Casey Farr

Art Director

Saeed Rashid

Designers

Aliyah Allen
Casey Farr

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Bournemouth University BH12 5BB.
www.fresherpublishing.co.uk

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Poole, Dorset BH16 6NL
www.dorsetdigitalprint.co.uk

Featured magazine showcases the work of the talented multimedia journalists in their final year at Bournemouth University. Read below to find out more about our writers - and how to contact them

CONTRIBUTORS

KEMI RODGERS ▶

Kemi is a multimedia journalist specialising in features for lifestyle magazines, and enjoys writing about health, fashion and current affairs. You can check out her blog, www.kemirodgers.com and contact her via her Twitter: [kemirodgers](https://twitter.com/kemirodgers)



CASEY FARR ▶

Casey is a multimedia journalist who enjoys writing about politics and feminism. Her passion for bringing underreported issues to the fore and striving for change is what drives her. Find her on Twitter [@casey_farr](https://twitter.com/casey_farr)



CARA CROWCOMBE ▶

Cara is a multimedia journalist, with a passion for writing about different social issues, communities and cultures. You can read, watch and listen to Cara's work on her website, caramarie.uk or you can follow her not so internal monologue via Twitter [@CaraaaC](https://twitter.com/CaraaaC)



WILFRED COLLINS ▶

Wilfred is an up and coming multimedia journalist specialising in politics and current affairs. He has a background in local print media and writing special interest content for online, as well as experience at local radio stations. Follow [@WilfredCollins](https://twitter.com/WilfredCollins) for more



◀ DANIELLE CARDY

Danielle is a multimedia journalist with a passion for female lifestyle stories. She is also Editor of Featured magazine. Follow her on Twitter [@Danielle_Cardy](https://twitter.com/Danielle_Cardy) or read her blog at <http://daniellicacy.blogspot.co.uk>.



◀ MOLLIE FOSTER

Mollie is a multimedia journalist who enjoys writing about everything from news, science and technology to the latest food, fashion and beauty trends. You can reach her on Twitter at [@molliemfoster](https://twitter.com/molliemfoster)



◀ BETHANY CONNOR

Bethany is a passionate writer and multimedia journalist who specialises in the arts and popular culture. She is a frequent photographer and lover of fashion and fancy food. You can find her on Instagram and Twitter [@bethanyconnor1](https://twitter.com/bethanyconnor1)



◀ NICOLE RAY

Nicole is a multimedia feature journalist. She loves reading, baking and has a keen interest in raising awareness for charities. You can reach her on Twitter at [@nicoler_journo](https://twitter.com/nicoler_journo) and read her blog at brunetteambitionbeauties.com.



◀ JOANNA BOWDEN

Joanna is a multimedia journalist aspiring to work in entertainment and lifestyle. Joanna is already a freelance runner for ITV This Morning where she hopes to work as researcher in the future. You can reach her on Twitter [@Joanna_Bowden](https://twitter.com/Joanna_Bowden)



◀ ALEX HASTIE

Alex is a multimedia journalist specialising in animal rights and welfare. She has contributed to Captive Animal Protection Society, RSPCA and PETA. See more of her work on alexhastieportfolio.wordpress.com or on her twitter [@alexhastie28](https://twitter.com/alexhastie28)



◀ STEFANI TASHEVA

Stefani is a Multimedia Journalism graduate with a passion for international current affairs and politics, and an interest in news reporting and freelance journalism. You can get in touch with her on Twitter: [@StefaniTasheva](https://twitter.com/StefaniTasheva) or via email: stefani.tasheva@outlook.com



◀ KATIE BOYDEN

Katie Boyden is a multimedia journalist with a passion for feature writing and local news. She has a keen interest in health and environment, the LGBTQ+ community, culture and current events. If you want to find out more, Katie can be reached on Twitter [@altrocklife](https://twitter.com/altrocklife)



◀ ALICE FIANCET

Alice is a Bournemouth based multimedia journalism student who is interested in everything to do with health and fashion. You can follow her on Twitter and Instagram at [@alicefiancet](https://twitter.com/alicefiancet) and read more of what she does on her blog at www.alicefiancet.co.uk

MEGAN COUTTS ▶

Megan is a journalist, blogging enthusiast and aspiring news broadcaster. With three years experience in editorial and broadcast newsrooms, she is also quick-thinking, fast-talking and curious. Megan95coutts@hotmail.com



HANNAH JACKSON ▶

Hannah Jackson is a multimedia writer and producer, who enjoys uncovering trends in digital technology and modern culture. For a platform of work or to contact Hannah, you can visit: www.hljportfolio.wordpress.com



ALIYAH ALLEN ▶

Aliyah is a multimedia journalist with a specialised interest in everything music and film. She also has a love for art and design; you can see her portfolio on behance.net/aliyahdaily and follow her on Twitter [@AliyahMJA](https://twitter.com/AliyahMJA)



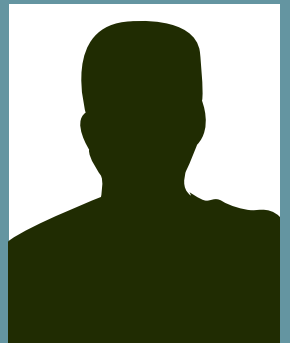
ALICE MCDONALD ▶

Alice is a multimedia feature writer and an enthusiast of all things fashion, health and fitness related. Alice makes up 1/5 of Fashion To Fit, a blog run by five journalism students at Bournemouth University. You can reach her at akmcdonald30@live.com



CHRIS JONES ▶

Chris is a freelance multimedia journalist with a keen interest in online social trends and cinema. He has worked with Bauer Media and NewsQuest on print publications such as FHM and the Bournemouth Echo. Follow Chris on Twitter [@C_risJones](https://twitter.com/C_risJones)



◀ EVE HEWITT

Eve is an aspiring features writer who is interested in lifestyle and current affairs. Her passions are cats, avocados and documentaries. She is also passionate about animal welfare and blogs about being vegan at www.evetheveganstudent.wordpress.com



◀ CHARLOTTE BROWN

Charlotte has worked extensively on the subject of fertility and assisted conception. She has co-produced an interactive documentary on legal highs that has been recognised by the Angelus Foundation. Find her on Twitter at [@CharlottelBrown](https://twitter.com/CharlottelBrown)



◀ CLEO GREAVES

Cleo is a multimedia journalist who loves writing about a huge mix of topics from music to social issues and politics. You can follow Cleo narrating her life on her twitter page [@CleoGreaves](https://twitter.com/CleoGreaves) or read about her musical musings at www.cleogreaves.co.uk



◀ GABI GERVAIS

Gabrielle is a multimedia journalist with a passion for writing and one day wants to work as a broadcast news correspondent. You can reach her on Twitter: [@Gabi_Gervais](https://twitter.com/Gabi_Gervais), or follow her fashion at fitness blog: www.fashiontofit.co.uk for the latest fitness trends



◀ SCARLETT DIXON

Scarlett Dixon is a lifestyle blogger and features journalist, with a particular interest in health, fashion and beauty. She also manages blogger networking events. You can follow her on Twitter [@Scarlett_London](https://twitter.com/Scarlett_London) or read her blog scarlettlondon.com

PUTTING A PRICE ON FRIENDSHIP

As London is announced the loneliest capital in Europe, over 80,000 Brits have taken to a friend rental website to find companionship. Could hiring friends be the future?
Joanna Bowden investigates. . .

I meet my friend Abbie in a bar in London. Over drinks we talk about our favourite past time, music and *The X Factor*. We don't talk about our mutual friends or the night out we shared a few months ago because it's just not that type of friendship. The truth is, this is the first time we have ever met each other and I'm paying Abbie £10 for her company tonight.

I met Abbie, 28, on Rent a Friend, a site that forms connections between members and friends to 'hang out, go to a movie or go to a party together'. For £17 a month members can search for thousands of friends at their fingertips while the friends create dating – esque profiles for free and wait for members to contact them, when they can then negotiate a fee. You may think this all sounds a

bit strange but over 80,000 of us Brits are now hiring friends thanks to Rent a Friend owner, Scott Rosenbaum.

Scott explains, "people are busy these days and often don't have time to spend meeting new people, the site is an easy way for people to arrange meet ups on their terms". He expected the site to be more popular among males when it was launched but says, "I couldn't have been more wrong, it's actually 60% females and 40% males using the site". Scott reveals he thought women were generally more sociable and had closer friendships, so would have less incentive to join the service.

But life coach, Lucy Sheridan explains that women have deeper emotions and are more inclined to share more with each other. Abbie joined the site earlier this year as a way



to earn some money to go travelling and do more activities. "Although I'm not actively seeking friendship, if I can make someone happy for a few hours then that's good enough for me". To date, she has been paid to go for coffees, walks, and on one occasion, she attended a party with someone because they didn't want to turn up alone. "People use the site for plenty of reasons - loneliness, boredom or sometimes they just want to meet new people, I help them out and keep them company."

Abbie admits to charging members depending on what they can afford and the type of activity they get up to. She admits, "I usually charge around £20 to meet up or only have my expenses covered when someone doesn't have lots of money and wants some company".

My experience of hiring Abbie was unusual at first but as the weirdness of the situation subsided, we found that we actually had quite a few things in common and enjoyed each others company. I wonder if it could be the beginning of a real friendship but if I wanted to see Abbie again, it would be in the knowledge that it would probably cost me another £10 (and a few more glasses of wine).

So does this site exploit people's loneliness as they pay for company and often don't receive a 'real' friendship in return? Abbie shakes her head disapprovingly, "it is hard meeting people these days and everyone is moving about all the time. If anything, Rent a Friend is actually helping to prevent loneliness", she says by way of explanation.

The members

Lilianna has been using Rent a Friend to find friendship following her move to London after university. Lilianna's life is full on. She has a degree under her belt, embraced a career in HR and has moved to London all by the age of 25

but when she returns home she feels a fleeting pain in the pit of her stomach. "I get lonely" Lilianna admits. She seemed to be living the dream but found herself struggling to approach new people in everyday life, Rent a Friend seemed like an easier option to meet new people when she decided to register as a member of

'It's 60% females and 40% males using the site'

the site in June.

Her experience of hiring friends has been a helping hand in forming friendships, "through using this site I have met people that I would never have come across before, some I still see and others I have never heard from again but that's expected I guess". Although she is aware that some people are only using the site for money, Lilianna insists she will only meet with people she believes she could form a real friendship with.

Social dislocation on the rise

And Lilianna is not alone. In fact, says Scott, "the average age of members is 20-35, at this age you start find yourself and friendship is a huge part of that". But why are young people

the loneliest?

Here in the UK, there has been a huge shift in the number of people in their twenties living alone. Dr Danny Dorling, a Professor of Human Geography explains that with people moving around for work or working from home, social dislocation is the norm for this age group.

And while loneliness is something we associate with the elderly, studies prove that the younger generation are actually more likely to feel lonely. A survey conducted by Mind revealed that 4/10

4/10 of us have felt depressed because we felt alone

of us have felt depressed because we felt alone (47% of women compared to 36% of men) and this is higher among those aged 18-34.

The debate

So can you really put a price on friendship? Jonathan Alpert, psychotherapist and columnist, believes that some things in life should not be paid for and friendship is one of those things. "I can't imagine it feels very good to know that the 'friendship' is actually a pseudo friendship because it

is merely a service being purchased" he explains. According to Jonathan, making friends in this way does not represent a real friendship based on trust and mutual interests. "Take this away and the friendship does not exist" Jonathan says.

But life coach, Lucy Sheridan,

believes renting our friends could be the future for the UK. She reminds us that we thought online dating was weird when it was first invented, "let's not be too judgemental, perhaps it's an indication that there is a demand for friend rentals because it is hard to meet people in a bar and be like 'let's be mates'. It doesn't work like that".

After testing out this friend rental service, I say goodbye to Abbie and it almost feels like a first date. She was great company and I enjoyed my evening with her but our parting was a little awkward. There is no promise of another meet up and although she promises to 'keep in touch', I am doubtful that she is going to call me again. . . ●



RENT A FRIEND: THE FACTS

Scott Rosenbaum designed the site for people to find and hire strictly platonic friends

It was launched in America and Canada in 2009 and following its success was launched in the UK at the end of 2010

The number of users worldwide is currently 531, 434 and growing daily

Members vary from the age of 18 to 90



THE PURSUIT of OTHERHOOD

For some, Mother's Day only serves as a painful reminder of what will never be. Megan Coutts meets the women who, after years of failed fertility, have found new ways to bring meaning and happiness to their lives

Illustrations ELLEN LISA JONES

I remember a gloomy, rainy February afternoon in the tiny, grotty London studio-flat I'd rented. I was standing watching the rain on the window when the traffic in the street seemed to be completely muted. And in that moment, I became acutely aware of myself, standing there, looking out of the window. And then it came to me, it's over, I'm never going to have a baby', says 51 year-old Jody. 'I realised with absolute clarity and complete certainty that even if I were to meet a new partner, it would be too late for IVF. I was

too old,' says Jody.

The world of infertility can often seem like a multi-layered phenomenon, with profound impacts on one's physical, emotional and psychological well being. And for those aged 30-45, the average success rate for IVF is just 14 per cent. The biological burden can affect up to 35 per cent of the population, often devastating relationships, and resulting in long painful pursuits to parenthood.

But after years of trying to conceive and failing, what does it take to decide to move on? When is it time to start living

again? There is only so much a person can take before they are pushed to the edge of oblivion, and for Jody Day, enough was enough. At 33, Jody was diagnosed with 'unexplained infertility'. And after visiting every nutritionist, acupuncturist, herbalist and quack in London, each month her period would return and she would be in tears yet again. Following 11 years of failed treatments and 16 years of marriage, her relationship was in ruins. 'By the time I reached 38, my marriage was over. My husband's dashing personality had tipped

over into chronic alcoholism and addiction, and our lives became a living hell. Looking back now, I can see that perhaps the subconscious pressure of baby mania was pushing me to take fast, drastic action', says Jody.

Letting go

Too many are often caught up in a seemingly endless cycle of invasive treatments, which can ultimately consume their entire world. To be deprived of having a family can have profound impacts on all aspects of life. For 45 year-old, author and infertility advocate, Jessica Hepburn, IVF became somewhat an obsession.

‘It’s something that messed with my mind, nearly destroying my relationship and on one occasion endangered my life’, says Jessica. ‘But none of that would matter if I had achieved what I set out to do, to have a baby.’ With just a 25 per cent success rate, not only is IVF time consuming, and draining on life-long savings, it can also offer a sense of false hope. During the 10 years of IVF treatment, Jessica spent an estimated £70,000.

‘Doctors told me, “keep trying, it will work”, so you keep trying and trying and it still doesn’t work. And then you get older and older, soon it becomes this race against time, because you know it’s running out’, says Jessica. She was determined to have a baby, but vowed that if she hadn’t had a baby by the time she was 43, it was time to move on. ‘Our last round of IVF was just as I was turning 43, and my book, *The Pursuit of Motherhood*, came out. So I thought ‘right, it’s time to do something else and that was the pact I made with myself.’

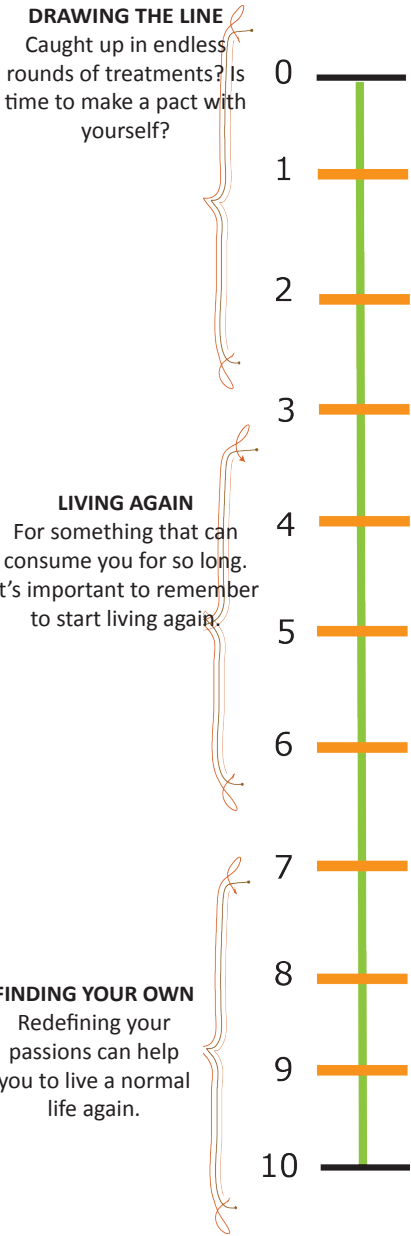
Overcoming the burden

But how do you come to the decision that childlessness is no longer a brief thought, but a permanent one? For 55 year-old, acupuncturist, Lesley Reed, it came as somewhat of a relief. After enduring an astonishing 21 rounds of IVF, she explains how she reached the decision to eventually move on.

‘Gosh it’s a weird one. It’s huge’, she says. ‘It becomes your soul focus for so long, you become fixated on it all the time. But you just have to set yourself a date, and tell yourself that it cannot be your main focus anymore. And when you step over that line, it’s almost like dropping of an old jacket. You’ll pick that jacket back up and sometimes think, “I wish”, but you soon realise that it’s just not for you anymore’, says Lesley. Therapies can often bring great comfort for all kinds of difficulties in life, for Lesley Acupuncture helped her resurrect a new life. ‘When you feel like you’re a feather blowing in a storm, and being pushed from pillar to post, therapy can give great guidance,’ says Lesley.

Psychologist and family expert, Dr Bron Harman, explains the psychological affects therapy can give: “the reality is, is that we prefer to stay in our comfort zones and something like therapy can take you out of it. Counselling or therapy can lessen the psychological impacts childlessness can have on a person.”

PURSUING OTHERHOOD
THE BREAKDOWN



Find something that nourishes your heart

Wanting to be a parent is not only a biological urge but also an expectation from society. As one of the final female taboos society faces, infertility can be hard for others to comprehend. ‘Realistically, in a child-obsessed world, motherhood is in people’s faces all the time’, says Dr Bron Harman. ‘I heard someone describe it as being like a broken crayon, you can still colour, but you’re just broken,’ says Lesley. Although many people will never thoroughly understand what infertility can feel like, as more and more people talk about it, attitudes will continue to change.

While many feel a sense of pity for those that are childless, for Jessica, speaking out about her journey meant that people’s impression is much broader. ‘These days people recognise me for lots of different things. It isn’t just “Jessica can’t

have children,” instead it’s, “well I wish I could swim the channel, climb mountains and run a theatre like Jessica,” which made me realise the importance of defining myself for many different things,’ she says.

In the process of learning to move on and live a normal life again, it’s important to redefine your passions and focus. ‘Whether that may be creating jewellery, setting up a business or writing a book, you have to find something your passionate about’, says Lesley. ‘Because the chances are, there will be something out there that nourishes your heart and when you find that, suddenly everything else does not seem so difficult’, she says.

An epiphany

Jody Day was determined she was going to be a mother one day. After living in her own shadow for the last 15 years, she has finally reintegrated with the rest of her. ‘These days I feel comfortable calling it an epiphany. What started as a strong physical sensation, of all the energy I’d been using to run two separate ‘versions’ of my life, somehow merged back together’, she says. ‘I’d love to say Hallelujah I was fixed from that moment forwards, but the truth is that what happened that day is that I came out of denial.’ Jody then entered a period of profound grief for the children she would never have and the life she would never lead.

‘But I had no idea it was grief, it would have been a huge help if I’d known,’ says Jody. But these days, the entrepreneur, author and psychiatrist has never felt more fulfilled. After writing her book, *Rocking the Life Unexpected* she also set up an international website, ‘Gateway Women’, which offers an online community of support and advice for childless women. The website has successfully received two million hits.

For Jessica, the journey she has been on in the past year has been about trying to find ways to be happy.

‘What I’ve realised is that motherhood does make you happy’, says Jessica. ‘But everybody needs other things in their lives, something for themselves. If you’d asked me three years ago if I’d rather have two embryos inserted back into me, or climb a mountain, my answer would have been very different.’

Following her long battle with infertility, Jessica has embraced the world of adventure. After swimming the channel earlier in the year, she eagerly enlightens us about her trip to climb Kilimanjaro.

Perhaps it’s not completely possible to overcome the reality of childlessness, but it is possible to heal around the burden. Five years on from that gloomy February afternoon, although the sadness of not becoming a mother will always be part of Jody, it no longer defines her. ‘I can leave the world a better place than I found it. Because I’ve helped women feel ok about their lives again. My Mother’s heart, that I desperately wanted to give to my children, I am instead using for other things and that is deeply satisfying.’ ●



Images copyright: Fotofabrika / Photographer: Phelia Barouh for the project The Strange Other

A
Refuge
of
Little Hope

Can Bulgaria – the poorest EU country – help refugees rebuild their lives, or are they left with no choice but to seek another home? Stefani Tasheva reports

Five men of varying ages sit around a plain wooden table in a small room; textbooks with glazed pages lay open in front of them. On a whiteboard opposite, 12 verbs in Cyrillic—the official Bulgarian alphabet – are written and a teacher asks each of them to conjugate a verb or two as an exercise to refresh last week’s lessons. This is how a regular language class for refugees takes place in the Red Cross’s Information Centre located in Sofia, the Bulgarian capital.

“For me personally their progress has been huge,” said 40-year-old Bulgarian Radost Sabeva, who works as a Bulgarian language tutor for the Red Cross. “You start out with people who cannot tell A and B apart and you get to a point where they are able to make conversation freely. The main thing for them is to manage to fit in society and find a job – and communication in Bulgarian is a must when it comes to that,” she explained, praising the textbooks for targeting refugees’ specific needs. For the first half of 2015, 170 people passed the course successfully with the help of Mrs Sabeva and her colleagues.

Today’s lesson involves learning vocabulary to describe one’s mood. As it gets to Ahmad’s turn – a burly, middle-aged Iraqi with a calm expression – he says he feels sad and explains in broken, heavy-accented Bulgarian, that he has

“After so much negative media coverage, people start to fear refugees and refuse to rent out to them”



A refugee woman with her child in the reception centre in Harmanli, Bulgaria in November 2013. Image copyright: UNHCR Photo Unit

struggled to find a job and has three children to look after, one of them is just eight months old.

“The curriculum is very good but it is a luxury for refugees to come here,” Mrs Sabeva said, “They are looking for work or have children to take care of, so it is a real effort they make by finding spare time to attend the course.”

After crossing into Bulgaria from Turkey, most asylum seekers find themselves in one of the State Agency for Refugees’ (SAR) reception centres, where they await their application for a refugee status to be processed. Such a status would grant them legal protection by the state against persecution they experienced in their home countries, together with most of the rights and privileges of all Bulgarian citizens.

But Mariana Stoyanova, Head of the Department for Refugees and Migrants at the Bulgarian Red Cross, said that refugees needed to leave the reception centres after being granted protection. From there on there is no further support available from the government to find employment or affordable housing, or through welfare benefits. “The state’s only compromise is to not force refugees out of the centres and letting them stay after receiving a status,” explains Mrs Stoyanova.

The Red Cross is one of three non-governmental organisations (NGOs) – along with Caritas and the Council for Refugee Women in Bulgaria – that currently provide integration-related activities for refugees and asylum seekers. They offer counselling sessions to help them learn about Bulgarian society and culture, and their staff members act as interpreters, accompanying refugees to medical centres and various government institutions. The Red Cross and Caritas also run free language courses, as well as help refugees throughout the job-seeking process.

“You can imagine we cover a relatively small group as most of them don’t speak any Bulgarian, and without being fluent in Bulgarian, refugees have no chances in

our labour market,” Mrs Stoyanova says, and explains that refugees are subject to discrimination in the job sector, making it even harder for them to find employment.

Families struggle the most after leaving the reception centres, according to Linda Awanis, chairwoman at the Council of Refugee Women, who said refugees often face housing problems comes from the small size of the apartments, usually adjusted for families of four. “It is extremely difficult to find accommodation for a family with eight or ten children,” said Mrs Awanis said. “So we had cases where a single family had to rent out two places in order for everyone to have a roof over their heads.”

NGOs regard the lack of an integration programme – a combination of policies and measures, funded by the state, meant to ease the integration process – as the source of refugees’ problems. The last one finished at the end of 2013 and since then the government has failed to adopt a new one.

Dr Albena Ignatova, Head expert at SAR’s Department for Welfare and Adaptation, said the main obstacle to the creation of a programme is the planning of its budget, which requires an estimate of the number of participants a year in advance. She explained that refugees were a “dynamic” group whose movements were difficult to predict, which made it hard to say how many of those who were granted protection would choose to settle in Bulgaria.

“The beneficiaries of a refugee status have the right to settle in the country and start their lives all over again,” said Boris Cheshirkov, the official spokesperson for the UN Refugee Agency (UNHCR) Bulgaria. “But in practice

British Prime Minister David Cameron with his Bulgarian counterpart Boyko Borisov at the country’s border with Turkey in November 2015



Asylum seekers in the Harmanli centre faced winter in 2013 whilst living under bleak conditions. Image copyright: UNHCR Photo Unit

the system does not give them the opportunity to start integrating immediately after they receive a refugee status. They are left on their own.”

This makes life in the country difficult or even impossible, driving refugees to seek a better standard of living elsewhere. Even though 12,000 people were granted a refugee or humanitarian status in the past two years, only a few hundred of them have settled in Bulgaria, according to the Red Cross.

Mrs Stoyanova said that Germany, with its open-doors policy, as well as Sweden, are seen as the final destination of many refugees’ journeys, due to the strong welfare systems in both countries. She added that most refugees hope to discover large Arab communities there, within which they could find jobs more easily, without having to learn fluent German or Swedish first. But she stressed that the fact that Bulgaria has not yet adopted an integration programme was, in her opinion, part of a government agenda to make sure it stays only a transit country for refugees.

Being the poorest country in the EU, with over 21% of its population living below the poverty line, Bulgaria has a weak welfare system. Thus, it is unable to provide for thousands of refugees entering the country, the majority of who have little or no education,

“Integration is a voluntary process – no one can be forced to stay in the country”

according to SAR figures, and therefore have low job prospects.

Mrs Stoyanova explains that “the small proportion of refugees who chose to stay in Bulgaria mainly consists of people who already have family or friends there to support them.”

Wisani, a sharp-minded 17-year-old refugee from Iraq, fits this description. He chose to stay in Bulgaria since he knew a lot about the country from his Bulgarian-born father. However, his parents are divorced so Wisan lives on his own in Sofia, receiving support only from his mother back home.

“It’s really dangerous in Baghdad and my mother really wanted to come here, but she couldn’t find work,” he said.

“Finding a job isn’t easy, especially for people with a lower level of education and qualifications,” Svetlana Gyoreva, explained Head of the Social Policy Department at Caritas Bulgaria.

Bulgaria is a participant in a €2.5m EU fund created to support the implementation of integration measures until 2020, but the lack of a programme makes it hard to utilize the funds. All activities are organised through granting NGOs funding to execute separate projects, but very few organisations have the capacity and training to work with refugees.

Mrs Gyoreva said there is a need for a systematic and comprehensive approach to their integration that is financially secured by the state budget. She spoke of the previous integration programme that guaranteed refugees six months’ worth of activities to help them integrate, including language courses and a monthly financial support of €33.

Anna Andreeva, Director of SAR’s Department for Welfare and Adaptation, said experts would soon start working on policies to be implemented for 100 refugees, arriving in 2016 as a part of the EU quota agreement – extra funding for whom would come from the



Harmanli refugee centre in 2013. Conditions there have since improved. Image copyright: UNHCR Photo Unit

“Bulgaria doesn’t have the resources or the staff; it is simply not prepared for a large number of people settling”

EU. NGOs, however, expressed concerns there is little clarity over the way the new measures would be put into practice.

Mrs Andreeva defended the government’s lack of action, saying the initial priority was to improve the rough living conditions in the refugee centres, as well as to speed up the cumbersome registration procedures, putting integration second on the agenda. “It is absolutely clear to the government that nothing is possible without an integration programme,” she added.

In 2014, with the help of EU funding, the centres were successfully expanded to accommodate five times more people and renovated to cover basic living requirements, and the Refugee Agency’s staff was doubled. These moves were praised by the UNHCR. But Mr Cheshirkov stressed the adoption of a new integration programme is another big challenge facing the country. ●



As maternity services are being stretched to their limits, are pregnant women and their babies being put at risk? **Eve Hewitt** reports

The call for midwives

After finishing a busy night shift, community midwife Liz Turner finally has a chance to relax with her three children on a Saturday afternoon. During her shift she was called to a couple who had planned to have their first baby in hospital but were told that the hospital was so full they would have to go home and wait until the mother was ready to give birth. When Liz and the homebirth team arrived at the couple's home they found the mother had given birth with only her partner and a paramedic there. The couple had only moved into their new house that day and were both completely traumatised by the experience.

Is this story uncommon? Apparently not. "Sadly things like that happen all the time," reveals Liz.

National Institute for Health and Care Excellence (NICE) guidelines say that women in labour should receive one-to-one supportive care regardless of the time of day or weekday to ensure safe births. However information gathered by Shadow Health Secretary Heidi Alexander revealed that 45 out of 93 NHS maternity units had turned women away at least once in 2015. The figures also showed that there were 575 occasions where women were made to travel up to 50 miles to give birth. Furthermore, findings published in the British Medical Journal suggested babies born in NHS hospitals on weekends are more likely to be stillborn or die within the first week of life. It also showed that NICE guidelines are often not met because maternity departments are so understaffed.

The Royal College of Midwives (RCM) say that there is a need for 2,600 more full time midwives in England and after relentless campaigning to raise awareness of the issue,

it seems they have finally caught the attention of Government as Jeremy Hunt stated in Parliament that more midwives are needed. Head of Midwifery Education at Nottingham University, Kim Russell works with NHS workforce planning and says that the midwifery population is getting older and effectively creating a time bomb as they get closer to retirement age and not enough new midwives are being trained to fill their positions.

The State of Maternity Services Report 2015 stated: "When there are not enough midwives it is the quality of the service that women receive that suffers." Sarah Robinson* experienced the affects of understaffing when she gave birth to her first daughter on Christmas Day in 2003. Sarah went through labour on a general ward because there wasn't enough staff on the labour ward, she was left completely on her own with only paracetamol for pain relief.

A nurse looked after Sarah. Even though both their lives were at risk, as her daughter's heart rate was dropping regularly, Sarah couldn't be taken to the labour ward because of staff shortages. The experience left her traumatised and meant she had a breakdown when she started seeing Christmas decorations the next year. "It was disgusting treatment, bordering on neglect," she says. "All down to staff shortages."

Kim Russell says that women should be getting one-to-one care as standard but it's not the norm in many hospitals because there aren't enough midwives to provide that kind of care. There is no specific guideline that states how many midwives there should be in relation to the number of mothers in hospital, each individual hospital can decide how many staff should be on per shift.

Rosie Allright is a midwife at Nottingham City Hospital, "Some days we are OK, but most days we are short staffed," she says. There



Erika (above and far right) started to work independently as she felt she couldn't give women the care she wanted to in the NHS; now she says her clients feel more like friends. Pictured with clients Becca, Alex and baby Max

should be six midwives on a shift at but Rosie says there are sometimes four and on a night shift there should be six members of staff but there is sometimes only two midwives on the ward. "They always try to staff it so it's safe but with sickness being really bad it can become unsafe," Rosie says, adding that understaffing worries her because the unpredictable nature of her job means situations can become dangerous very quickly.

Closing the ward is a last resort but it happens a lot where she works. Rosie and her team are put under pressure to make sure that the ward doesn't close by trying to get as many women through as they can. Because of this Rosie feels she can't give the standard of care she would like. "You have to do the jobs that are vitally important and then you feel so bad that you can't give someone your time and proper care, that's the really upsetting thing," she says.

A survey by RCM showed a third of midwives feel they are unable to do their job to a standard they are happy with because of understaffing. Staff shortages across hospital departments means that there can be little support for midwives at times. Liz Turner explains that when there aren't enough doctors or midwives on a shift, the responsibility of looking after women can be overwhelming.

"When you've got a woman labouring and you see little subtle things that aren't quite right and there's nobody there to support you, it can be frightening," she says. "It's putting women and their babies at risk really, because we're having to do too much and being spread too thinly."

Understaffing on maternity wards also means women often feel uninformed of their choices and out of control of their birth, as midwives sometimes don't have time to go through options with them. Katie Brooke, author of *Whoosh* a birthing guide for partners, describes her experience in hospital as "terrifying" as she

felt she didn't have the options explained to her by midwives when she was in labour.

As a result she feels the emergency caesarean she had was unnecessary and because she wasn't given the choice of whether she wanted it or not she suffered with posttraumatic stress disorder. Katie considered retraining as a midwife but instead put all of her energy into writing *Whoosh*, a book with facts and advice about how to take ownership of birth. Her essential advice to expectant mums is to "get with it," by asking questions and finding out all of your birthing options to have an informed and empowered birth.

Because women are having traumatic experiences when they are giving birth, some are turning to independent midwives and doulas when having a baby. Kim Russell, Head of Midwifery Education at Nottingham University says that this highlights the problems in the NHS. "If women are given real choices they shouldn't need to go and pay," she says. "I think it's a symptom of women not being given a choice." Independent midwives are fully trained midwives who work outside of the NHS and charge anywhere between £2,000 and £5,000 for their services, depending on what services a couple might want to use.

Erika Thompson works for Wessex Independent midwives and says that although an independent midwife is expensive - Wessex Independent Midwives charge around £3,950 for their services - it's actually a misconception that her clients are rich. "Everybody can afford an independent midwife if they value it," she says. "Some people might want to buy an expensive buggy or go on holiday but if you don't want to do that you can reinvest money elsewhere."

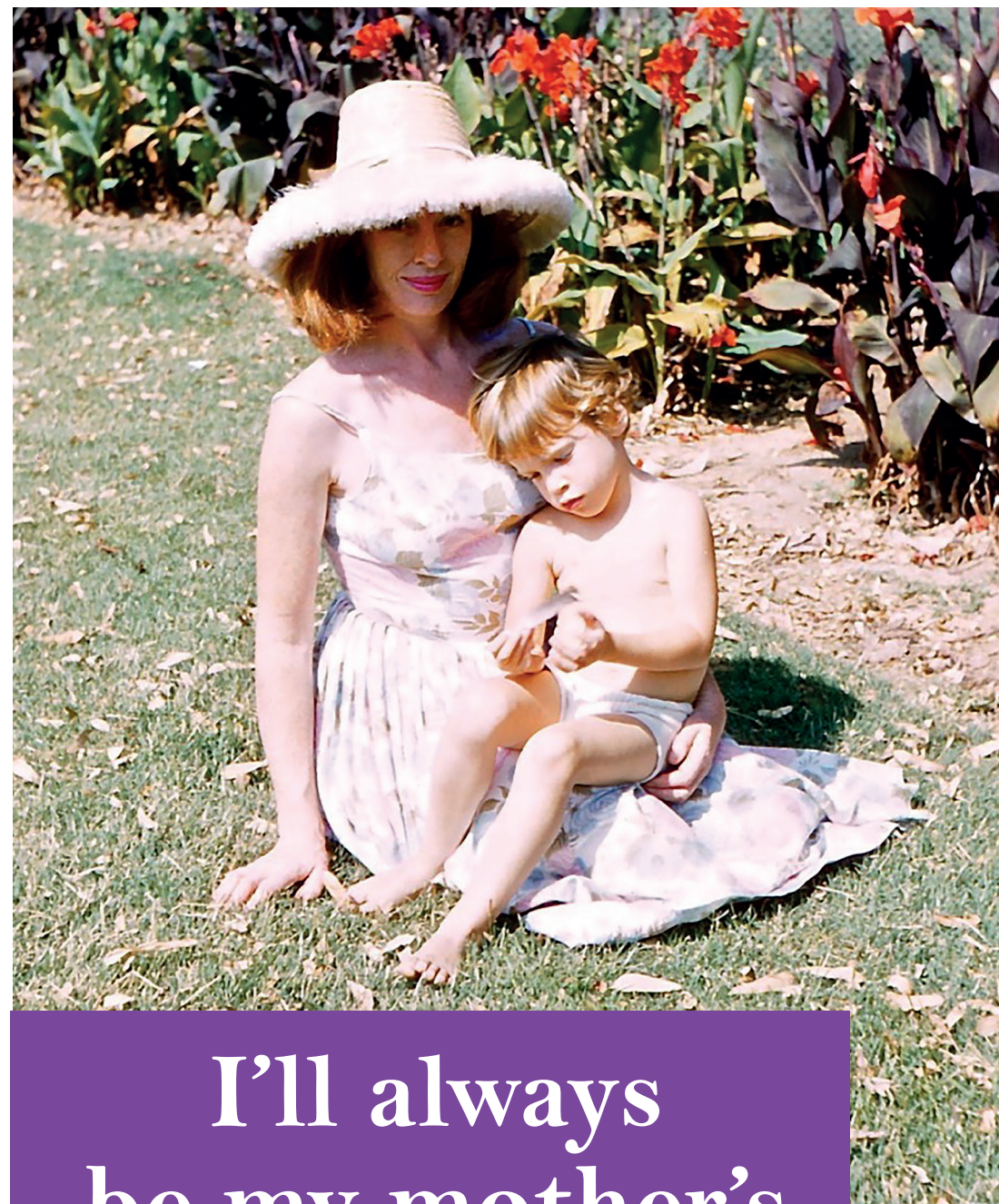
Although independent midwives offer manageable payment plans to help spread the costs, Erika realises that having an independent midwife isn't for everyone. She

advises women who want to go down the NHS route to research procedures and question any interventions that might happen and says there are supervisors of midwives in every hospital who's job it is to listen to any concerns women may have and offer guidance and support for mothers.

But despite the desperate need for more midwives in hospitals, Erika says that at the moment of the 5,000 midwives that are trained every year, only 35% will get a job at the end of their degree and of those who do get a job, only 50% will get full time hours. The government are planning to change these daunting job prospects by changing the way nursing and midwifery courses are funded, lifting the cap on how many students can take the courses so that 10,000 more healthcare posts can be created.

From 2017 grants and bursaries for nursing and midwifery students will be replaced by loans. Students will then be expected to take out a loan to cover their tuition fees, meaning newly qualified midwives will leave university with at least £51,600 of debt. UNISON, the public service union, has warned these plans won't have the desired affect: "Scrapping the NHS bursary the year after next will simply make an already bad situation much worse," said General Secretary Dave Prentis in a statement.

While it's still unclear what will happen to the number of applicants of midwifery courses, Kim Russell is certain that there will still be plenty of aspiring midwives who will want to go to university despite the fees. "Last year we had 900 applications for 77 places," she says. "I would anticipate a fall in applications but I think we would still be way in demand," she adds. These plans could be the answer to some of the problems midwifery services are facing, but they won't be able to undo the lasting damage short staffing has had on women already. ●



I'll always be my mother's daughter

Alice McDonald meets the daughters of dementia sufferers

Motherhood is recognised as a time of caring and giving, but what happens when a disease strips a woman of these natural instincts. There are over 850,000 people with dementia in the UK, two third of

which are female. How does a daughter accept that the woman in front of her is just a shadow of her mother's existence.

"The loss of my mother happened in the early years of her dementia, but the tears didn't stop until the day she died," admitted Sharon Blair. Her mother, Eileen Poole, had spent her life in LA teaching the stars how to live healthily, showing Sean Connery, Tina Turner and Demi Moore the value of a good diet.

It came as a shock to her only daughter Sharon when her healthy 83-year-old mother started to show signs of dementia. "Mum was my best friend, my confidant and guide in life," she says. "I could never of prepared myself for the impact dementia was about to have on our lives."

Dementia is caused when diseases such as Alzheimer's or a series of strokes damage the brain. Dementia is progressive, which means the symptoms will get gradually worse. As of yet, there is no cure.

In the early signs of dementia, Sharon ensured that Eileen still met her clients. She wanted to keep her life as normal as possible. This continued for about a year-and-a-half until one day she didn't want to go to work. "When

you see someone you love start to lose their mental abilities, all you want to do is keep their life as normal as possible," she explains. "Mum started to develop the feeling of not being home, even though she had lived in the same place for 20 years. She was tormented by the search of finding herself."

Like many, Sharon didn't begin the journey as a carer - she was a daughter, wife, mother and friend. The role of carer developed along with Eileen's dementia. Sharon continually adjusted in order to move forward. Her mother was born and raised in England, so she enjoyed watching programmes about London and the Queen. It was at this point Sharon started to experience an ambiguous loss, "Part of me wanted her to move on, she'd have been furious with her quality of life."

Eileen Poole passed away a few weeks before her 88th birthday. "She couldn't have been more peaceful, I was so happy for her to leave a body that trapped and prevented her from living a life she once loved," Sharon



said. 'If you find yourself in a similar position it's important you keep your ego out of the equation, never expect your mother to be anything more than what she is in that very moment. Always come from an understanding and loving place within yourself.'

The symptoms of dementia are wide-ranging and can sometimes be missed. Claire Lucas is the Research Information Officer of Alzheimer's Society,

'Rarer forms of dementia such as Frontotemporal Dementia may be misdiagnosed because memory loss is less likely to be an early symptom,' Claire explains. 'In this type of dementia, personality changes and language problems are more likely to be early signs.'

Pippa Kelly's mother had a pre-dementia personality change that ripped apart their relationship. However, as dementia progressed it revealed some underlying home truths that eventually brought Pippa closer to her mother than she ever imagined.

Pippa is the youngest of three children and was always smothered with affection. As the last-born she would always be her mother's "baby" and they'd always had a solid relationship.

'When I had a miscarriage, I remember my mother coming round and sleeping in the bed

with me. Despite me being a married woman in her late 20s.'

Labelled as one of the strongest love affairs, the relationship a woman has with her mother affects everything from health, relationship with others and her own self esteem.

But only a few years later, their relationship was ruined in a feud over Pippa's decision to divorce her husband. As everyone else continued to get on with life, Pippa's mother couldn't get over her daughter's life choice. 'She thought I was having a mental breakdown,' Pippa explains. 'This was the pre-curse of her getting dementia. It was so illogical and peculiar – I was hurt by her shallow materialism.'

“Mum would have been furious with her quality of life”

Sharon Blair

Pippa couldn't comprehend her mother's actions, if she loved her more than anything else then why was she making it so hard. Meanwhile Pippa's father continued to visit her despite her mother's grudge,

'He would usually say things like, "don't be too hard on your mum. You don't understand what she's gone through and where she's come from."' Pippa and her new husband then had their first child and the Pippa found her mother's grudge even harder to comprehend. However her mum was unwilling to miss out on her granddaughter's life and the pair attempted to rekindle their relationship.

Pippa's father got older and she had no choice but to sell their house and move the couple into a flat. She told her mother she was going to stay with her sister for the weekend, but in fact she would never be going back.

'She never recovered from the shock of it, when we arrived at the new flat she had a breakdown and refused to leave the car, she was sedated and the paramedics were called.'

After many traumatic weekends, Pippa went to a meeting where the psychiatrist explained they might need to section her mum.

'They were about to section her when she caught my eye and she said "I will do it for my baby". She always called me her baby,' Pippa recalls.

'It was very powerful. It was the last time she



was ever my mum in that sense.' Willingly her mother went to hospital and didn't have to be sectioned, she stayed there for six weeks before transferring to a nursing home.

The Alzheimer's Society state that getting a diagnosis early for someone suffering from dementia is important. Claire Lucas explains: 'Having a diagnosis gives the person with dementia access to treatments and support. They can also begin to plan for the future with their family.' Similar to Pippa's situation, the diagnosis may be pre-empted but it is still an awfully worrying and upsetting time for both the patient and family.

In six weeks Pippa's mother had gone from a lady who was getting more eccentric and old to a 'funny looking woman with dementia.'

'The first time I went to visit, I virtually walked past her and felt sick as I thought: shit, that's my mum.'

After weeks of her mother referring to phrases like "model village number 1" the pieces of her mother's upbringing started to take shape. 'My mother had once been in service to the Duke of Newcastle-under-Lyne at Clumber House in Nottinghamshire. The revelation finally showed me who my mum really was.' Finally Pippa understood how walking out on security and wealth was something her mother could not comprehend.

“I wish I could say to her: 'Mum, you're amazing'”

Pippa Kelly

Pippa's mum died on Christmas Day, 'Although dementia stole her from me, it also gave her back to me.' Thinking about the woman her mother was she says: 'I admire my mother's enormous strength, courage and determination. I wish I could say to her *wow you are a woman of today, you're amazing.*'

But not everyone grows up feeling a close connection to their mother. Sarah Reed always felt a sense of distance from her mother Mary. Although she appreciated her mother's kindness and loving nature, she never felt close to her.

Sarah Reed worked at Age UK for 10 years as a volunteer. 'I became very aware of how lonely the elderly get, I became very angry and distressed on their behalf,' said Sarah. 'When my mother's dementia deepened she was

confused and mystified about what was going on around her, I felt a huge affection for her, she was my mum.'

As her mother's dementia grew and developed, so did their relationship. 'Despite dementia I wanted her mum to feel she was a real person with rich life experiences. I wanted to show her there was purpose to her life.'

Sarah decided to make a pictorial album about Mary's life story with picture of her life as a little girl, growing up, getting married, having children, grandchildren – her history. 'I added big captions on each page, like "this is me dancing" it gave her a way of explaining who she was.'

Two days before her mother died, Sarah and Mary looked at the album together. At this point she was bed bound and dying. After they had read it Sarah put it gently on her stomach, her mother wrapped her arms around the book. 'It was as if she was saying: that's me and it's mine,' Sarah recalls. 'At that point I knew we had finally found each other, and connected in a way I never thought we would.'

If you find yourself in a similar situation the Alzheimer's Society advise you go to your GP where they will be able to provide information about local resources. They also have a network of local support groups and advice services across England, Wales and Ireland. ●

A romantic scene of a couple silhouetted against a sunset beach. The couple is standing on a rocky shore, looking out at the ocean. In the background, city lights and a port with cranes are visible under a cloudy sky.

Clarifying Consent

In a society where sex is so prevalent, consent is an issue that is often misunderstood.

How should the next generation be educated about this subject? **Cleo Greaves** finds out



‘Having the right to say no and being able to say no are two very different things’

In 2012, Ched Evans, a professional footballer who played for Wales and Sheffield United was found guilty of rape and was sentenced to five years in prison. Evans was convicted of raping a 19-year-old woman in a hotel room and although he admitted to having sex with her, he said it was consensual. However, the prosecution argued that she was too drunk and vulnerable to consent to sexual intercourse and that vulnerability does not imply consent. There is much debate around what constitutes consent, how to give it and what the consequences are should certain events happen without it. However, the underlying question is exactly when is society taught any of this?

Secondary schools can currently offer sex and relationship education (SRE) as part of their curriculum. However, teaching children how to practice safe sex isn't statutory in any independent school or academy. Fully aware of this, the PSHE association put forward a set of eight lessons to the Government in March 2015 to teach children about sexual consent. The lessons, whilst not age specific, were to be taught to children between the ages of 11 and 16. Topics are vast, covering everything from the law around consent to rape myths to pressures of having sex and even pornography.

Initially, these classes received firm backing from both Education Secretary, Nicky Morgan and the Home Secretary, Theresa May, but they were not made compulsory in schools, which raised concerns amongst MPs that they

would not be taught at all. After a multitude of attempts, no one from the Department of Education would comment on the decision to not make these lessons compulsory.

In 2014, a report published by the Education Select Committee, *Life Lessons: PSHE and SRE in Schools*. It included a survey carried out by the NUS, which stated that 88% of participants thought that consent should have been taught as part of their SRE, but only 34% of those participants said that their school's SRE had covered consent comprehensively and 25% didn't discuss consent at all.

While the results for this survey were not overly surprising, it did prove that something needed to be done about consent education.

There are a number of campaigns that promote this, some produce videos about consent, some run peer-led workshops and some work closely with rape charities.

The general opinion on these lessons around consent is that they won't just educate youngsters about how to give consent, but it'll also leave them 'feeling empowered, and knowing that they have the right to consent really supports their own self-esteem, their own self worth and as a result it has a direct impact on other areas of their life,' explains Rebecca Head, a PSHE specialist who has been teaching consent as part of her curriculum for many years. 'It isn't just about the ability to say "I consent" and understanding what it is, the lessons make them explore their values, how they feel about

themselves in different situations.'

It seems that leaving young people feeling empowered is just not enough for the lessons to be taught across the country. Gail Knopf from the Birchall Trust, a rape crisis charity in Cumbria, says: 'I do believe that it (rape) is an uncomfortable subject for a lot of people and especially in schools, they'll be worried about parental feedback or the comeback on it.'

Rape has always been an issue in society that people aren't prepared to talk about, they don't want to believe it's real. As Gail explains: 'It's the classic problem of "that won't happen to me, that won't happen to my child" and then if it does it's like a truck hitting you because there's nothing to prepare you for it.'

The Emmbrook School in Wokingham have decided to take on the classes and will be teaching them to Year Eight pupils (12 and 13-year-olds), but will alter the lessons plans slightly and focus on teaching the law surrounding consent. Nigel Matthias, the head teacher of Emmbrook says: 'there will always be a small minority of parents who strongly agree or disagree with what is taught in PSHE and if parents make a formal complaint, the lessons will be altered.' However, while parents can choose for their children to opt-out of SRE, PSHE is compulsory and the consent classes fall under that subject, which means all pupils must attend.

It is hard to determine an appropriate age to teach these specific lessons, as even though the legal age of consent is 16, it is unlikely that teenagers under that will be prosecuted if sex

is mutually agreed and they are of a similar age. However, Lilinaz Evans, co-founder of Campaign4Consent thinks that it should be taught earlier. 'Consent is an issue of respect and in a society where a lack of respect for women is the norm, we need to teach children to respect each other and people around them from the earliest age possible.' A potential alternative to these lessons being taught to one age group is to integrate lessons about consent from an early age. Rebecca Head's opinion is that consent should be taught from primary school. 'But in the way that shows that taking something without asking isn't right. I think it should be a spiral curriculum from a very young age, but it should be appropriate.'

Although these classes are being taught to pupils at Emmbrook, Nigel Matthias agrees that consent should be taught at a younger age, but believes that schools need to be aware of their pupil's background as these lessons could affect them emotionally. He says: 'When students reach their second year of secondary school, staff will have had a chance to get to know the students and their family history and can alter the classes accordingly.'

Another concern is the hyper sexuality of children and them being exposed to sex through the media every day. Charities and schools both believe that the sexualisation of children is one of the reasons why these classes should be taught at a younger age. Gail Knopf says, 'I think sometimes people are uncomfortable with 11-year-olds talking about this (consent), but they shouldn't be. I

think it's a huge issue we should be tackling.' Nigel Matthias shares similar views. 'Children are now exposed to being more aware of sex at a younger age without fully understanding what it is and how to say no.' While there are a myriad of reasons why the lessons should have been made compulsory, there is one recurring feeling of uneasiness around these classes. There is a lot pressures about teaching it – and teaching it correctly.

While the guidance offered from the PSHE association is very detailed, teachers do not receive special training for this subject. Some teachers who may be elected to run these consent classes may only be tutors and not PSHE teachers at all. Gail Knopf says: "Because of the prevalence of abuse in society, when you open up about these kinds of subjects, people may then disclose and I think that worries teachers and I don't blame them." While most schools now have counselors on hand, teachers may still be anxious about talking to students about this in-depth with no specialised training.

Even at university level, there are some peer-led classes about consent, which are held during Freshers' Week to help students learn about the law surrounding the issue. Susuana Amoah, an NUS National Women's officer who helped to curate the I <3 Consent campaign, explains: 'We teach our facilitators that there's a limit to the things you can do, so expect disclosures but know who to phone and direct people to those places.'

There is also a fear that the teachers may

not have the full knowledge around consent and therefore may not be able to deliver extensive classes. Lilinaz Evans believes, 'the reason we need these lessons is because there is not enough awareness and knowledge about consent and this includes our teachers.' However, Gail Knopf says: 'GPs, social workers and school nurses find it difficult because they don't have the knowledge, resources or the understanding of the subject.' How then, can we expect teachers to teach these lessons without significant understanding? This could be a reason why schools may be reluctant to take on the classes. Finding time and money to train teachers may not be a priority for the school.

'Having the right to say no and being able to say no are two very different things, which is why I think these lessons are absolutely vital,' explains Rebecca Head.

Fundamentally, most young people are aware that they can say no when they do not want sex or feel as if they are being pressured into having sex. The idea behind these lessons is to help young people gain the confidence they need to execute their right. There's no way of knowing if Ched Evans would have raped that young girl if he had these taken these lessons, but simply having the knowledge of needing verbal consent may have made him reconsider his actions and wouldn't have left the victim feeling responsible for being raped.

The guidance from the PSHE association for these lessons is available online. ●



THE NEW. *automatic lover*

Robotics are already part of our everyday life, cleaning our houses and building our cars. But is jumping into bed with them a step too far? **Mollie Foster** investigates

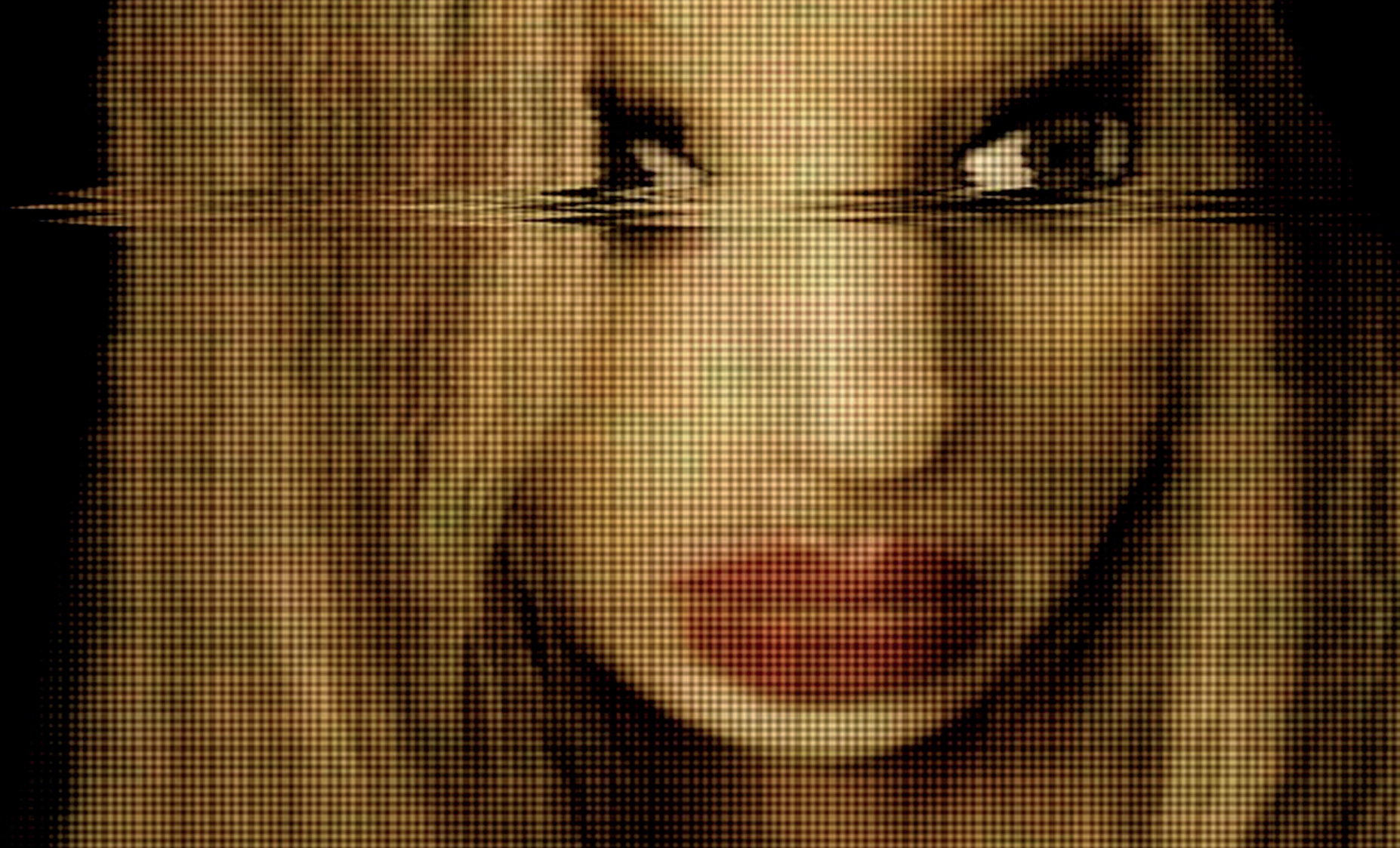
The idea of a world where sex robots take the place of humans seems like a million years away but with advances in artificial intelligence, we may be seeing them sooner than we think. In fact, AI expert and author of *Love and Sex with Robots* David Levy predicts by 2050 “people will be using them regularly for sex, falling in love with them and even wanting to marry them”.

Sex dolls have already made vast improvements from the rubber blow up novelty we once saw to anatomically correct silicone bodies. The advances have already triggered protests as now more manufacturers are building sophisticated intelligence into them so they can talk, listen, carry a conversation, feel and even have a personality.

American company True Companion are developing the world's first sex robot for around £5,000. From a collection of skilled artists and engineers, True Companion will soon produce a sexbot that goes by the name of Roxxy who “will always be turned on and ready to talk or play”.

Sex with robots has already made it onto the small screen this year with the British Channel 4 series *Humans*. Screenwriters Jonathan Brackley and Sam Vincent were interested in whether an artificially intelligent machine could ever be exactly the same as a

Channel 4/AMC



human – purely because it would be built. ‘We wanted to explore the everyday moments where humans could be made to feel inferior to their machine counterparts’ they say. ‘Synths are stronger, faster, smarter, immortal. They have the capacity not just to take over our jobs, even our domestic roles – but to do them better than we ever could.’

Married and in love with a sex doll, Davecat sees them as people in their own fashion. ‘My synthetic companions are as much people to me as a fictional character is to the writer who builds the world they live in. It’s indulging in a fantasy, while maintaining a grip on reality.’ While he welcomes this sexual revolution, we question the morals behind it.

Robot ethicist Dr Kathleen Richardson has launched a campaign to ban the sale of sex robots in the UK, arguing that they “reinforce traditional and damaging stereotypes of women” and will be “detrimental to children, society and relationships”. The campaign, which aims to curtail the developments on sexbots, believes humanoid sex machines that are “designed to look like real women will further objectify women” and “justifies their uses as sex objects”.

Robots capable of satisfying our sexual desires aren’t so farfetched, to some they already exist in the world of prostitution – when humans must switch off their feelings to survive sex. Kathleen Richardson says before she studied sex robots, she didn’t realise how dehumanising the sex trade is. ‘It relies on

people switching off their empathy and getting their needs met at any cost. This isn’t good for the buyer or seller of sex.

‘Technology reflects culture and then reinforces it. If there were no people who were “sex robots”- there would not be technological sex robots,’ she says. If there’s a ready to go, no hassle sex robot, prostitution may cease to exist. That’s the idea some researchers have, arguing those involved in sexual exploitation will instead turn to these automatic lovers.

And it’s not the first time sex robots and prostitution have been uttered in the same sentence. ‘One of the many things that people often ask me about sex robots is why should people enjoy having sex with a robot, when they know that the robot doesn’t love them? But my answer to that is why should people enjoy having sex with a prostitute when they know that the prostitute doesn’t love them. Prostitutes are only interested in their wallets,’ says AI expert Mr Levy.

Hit sci-fi drama *Humans*, featured a storyline where synth Niska is working as a prostitute in a legal synthetic brothel. Screenwriters Brackley and Vincent, question the notion that robots could replace human sex workers. ‘That might seem like a good thing. But would taking the potential exploitation of humans out of the equation lead to the normalisation of the sex trade. That seems pretty worrying – and something society would have a hard time reconciling,’ they say.

“Synthetic companions are as much people to me as a character is to a writer”

Founder of True Companion, Douglas Hines says sex robots do not objectify women. ‘It’s a compliment that we are replicating the warm, loving hug of a woman, the beautiful gaze from a lover and the understanding and support provided by a human companion in the form of our sex robots.’

As if we don’t have enough hurdles in our relationships already, the campaign suggests sex-tech will reduce human empathy taking people away from real human relationships.

Surely a world where lonely singles can find comfort in the arms of a robot lover is better than a world without. Mr Levy certainly agrees. ‘There are millions and millions of people who for different reasons aren’t able to form good human relationships themselves, it might be because they are shy or they have some other form of psychological or psychosexual hang up, it might be because they’re not appealing to the people they would

like to appeal to and for them a sex robot will be a great advantage.’

Dr Helen Driscoll, leading authority on the psychology of sex and relationships, says: ‘Surely virtual sex partners are better than no partner at all.’ But like many others recognizes that human-robot relationships will ‘present real challenges to relationships.’ If and when there are intelligent robot beings indistinguishable from humans walking the streets, when they share our personalities, habits and appearances, whose to say we wouldn’t chose them over ourselves. Much of the conversation surrounding love dolls is the reduced social skills men will have after no longer having to interact with others in the dating scene. This ‘lack of human contact could be harmful,’ says Dr Driscoll.

A common theme in popular TV and film is the geeky guy who can’t get any dates has an inflatable uncanny looking doll stored away in the cupboard, but the truth behind the synthetic doll community might surprise you.

Despite being labeled sex-bots, Mr Hines says customers do not only use them for sexual purposes. ‘They purchase them to help meet their hierarchy of needs. Of course having sex whenever and however you want is nice but the physical act of love making only lasts a short amount of time.

‘To deny someone the ability to experience love is cruel. We would never deny anyone the pleasure and benefit of our sex robots- from the patient suffering from cerebral

palsy without a female companion to the man who is looking to spice up his love life by introducing another woman to their bedroom,’ he says.

Creator of the worlds first sex robot Douglas Hines, says the one underlying theme which unites virtually all of True Comapnions customers is the idea that everyone wants unconditional love and support. ‘We help people meet this need, they provide someone to talk to and share your innermost secrets and desires with,’ he says.

Artificial lovers offer companionship, exploration without cheating, a surrogate when one partner is unable to enjoy sex for health reasons or purely to spice things up in the bedroom department. As an activist for synthetic love, Davecat argues ‘many iDollators want synthetic partners as not only sex partners, but as lovers, companions and friends. Perhaps we have no desire to have children or we can’t find anyone we’re compatible with. Being in a relationship with a synthetic does nothing to harm anyone, so it shouldn’t be stigmatized.’ He says: ‘With a synthetic partner, there’s no fear of a person who you thought was in love with you actually not being in love with you. Life’s too short to worry about your lover’s capriciousness.’

If a robot could be built to feel and act like a human, would you want one? It’s safe to say tomorrow’s sex robots wont inspire everyone to abandon their partners for a life of automatic lovers, but more people

than thought would embrace the new sexual revolution. According to a study by Middlesex University, 1-in-5 people in the UK would opt for robot sex.

Doll lover Davecat sees the future of sexbots much like other recent technology advances. ‘Robo-sexuals are not as large of a demographic, but that’ll change,’ he says. ‘I liken the development of artificial companions to that of mobile phones. Many people didn’t think we needed them at first, but these days, the overwhelming majority of those same people now wonder how they managed to live without one.’

We’re still a long way off according to Humans creators Brackley and Vincent. ‘Just getting a machine to walk up a flight of stairs is a feat of science. Until real-life robots are synth-level convincing recreations of humans, machines used for sex are likely to remain a niche pursuit.’

So the future of sexbots may be closer than we thought, but it may be some time before we’re seeing them dancing in strip clubs and sharing a bed with them. ●

Davecat & his Dolls

HOW DID IT ALL START?

‘My best friend, who knew I had a fascination and desire for Synthetik women, introduced me to the Abyss creations website in late 1998. When I saw the RealDolls it featured, I knew that this was something that I needed. I’d been single for years, and having a Doll as a partner would not only be able to take care of my sexual needs, but offer companionship and a welcome presence in the home, eliminating loneliness.

Currently I have three dolls living with me: Sidore Kuroneko, who is a RealDoll by Abyss creations; Elena Vostrikova, who was created by Russian company Anatomical Doll, and Muriel Noonan, who was made by the Latvian company Textile Doll. Finally, I’m saving up for a lass from the company Synthetics to round out our family.

‘The most amazing thing about having a Doll as a lover is they won’t bring any stress or judgement to the table. . . There’s a peaceful quality to sharing an intimate moment with someone you love where you know it’ll be rewarding for both of you.

ROBOTS?

‘Having Gynoid versions of the women that I love the most would be the ideal situation. Again, Dolls are fantastic, but they’re incapable of self-movement, and one can’t hear them speak aloud.’



ALOPECIA

THE FORGOTTEN DISEASE

For many women, our hair is an asset that we take for granted. But for 1-in-8 women under the age of 35, the joy of having luscious locks is a luxury they no longer enjoy.

Danielle Cardy investigates the impact of Alopecia - the hair loss disease with no cure

For sufferers like myself, Alopecia is an autoimmune disease that affects the hair follicles, and can be a life changing and psychologically damaging illness for any woman. This hair loss occurs when the immune system mistakenly attacks the hair follicles where the hair begins to grow, resulting in total or patchy hair loss, as I experienced.

An estimated eight million people in the UK suffer from Alopecia. Despite there being numerous people suffering with this disease, experts still do not know the cause of Alopecia, why it happens, or any cure to help these helpless women. But why?

Apparently clear Ileana Brown, 24, who is currently unemployed from Stevenage, may seem like a confident and a healthy young woman. However, underneath her brightly coloured blue wig and behind her bold make-up, the lack of support available to her after her diagnosis has left her struggling to come to terms with her Alopecia. 'I spent three months scared to leave the house after being diagnosed. I suffered from severe depression and anxiety. A trip to the shops sent me into major panic mode.'

Inside the head

Alopecia can have profound effects on women of any age. However psychologist Dr Nigel Hunt believes the younger generation are affected the most, especially women starting to date, experiencing relationships for the first time and socialising on a regular basis. It affects all aspects of their lives.

'These women will walk in the street and then think everyone is looking at them and everybody is behaving differently to how they once did, when a lot of it is in their own head.'

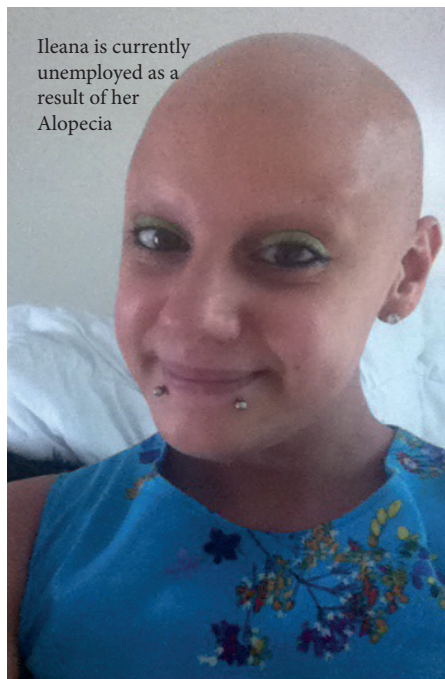
'I have spoken to a number of young women who have been in relationships for a long time who have never taken off their wig in front of their partner or husband, because they feel that they can't. These are just a few psychological affects Alopecia can leave behind for women to live with.'

Reactions to alopecia

Ruth McPherson, 27, from Brixton, is another sufferer of this forgotten disease. Dressed in this seasons must have mini-skirt, paired with a black roll neck, it's quite clear Ruth is like us – a typical, fashion conscious woman. However, as she pulls off her wig her vulnerability becomes more apparent than her in-season skirt.

Like me, she found it difficult in telling her family and friends about her disease and decided to keep it to herself at first. Ruth was diagnosed with Alopecia at 18, and although she told her parents straight away, she found it a lot more difficult telling the rest of her family and friends.

'When you're hiding about something from the world, it can be emotionally distressing because you are not being your true self. I have struggled with telling people and I know



Ileana is currently unemployed as a result of her Alopecia

"I felt like a freak. A complete alien"

Bald patches appear on your scalp usually the size of a large coin

More patches may appear after the first one a few weeks later

If your hair starts to regrow on the patches it may appear a different colour

Mild redness, mild scaling, or mild itching on the bald patches and the surrounding area

Nails may become pitted or rigid

Eyebrows and eyelashes maybe affected too

many other women feel the same.'

Since Ruth was diagnosed 10 years ago, she has only recently felt she can share her real identity with the world. 'Now that I have "come out of the closet" as you can call it, I feel so much better, I don't feel like I have to hide anymore.'

'It's taken me almost 10 years to regain my confidence. This just shows how big of an affect it can have on you. It really is an emotionally distressing condition.'

With the lack of support from doctors already having a huge absence in Alopecia sufferers lives, it's times like this that you need your friends and family around you. However, it's not just the sufferers that have to come to terms with the disease as Ileana experienced.

'My family didn't give me much support. My parents – both hairdressers – where horrified and didn't know what to say apart from "why are the doctors not doing anything". I felt like a freak. A complete alien.' Once Ileana's parents came to terms with her illness, she eventually made the decision to open up to society.

'I came out to all my friends on Facebook with a bald picture and had an overwhelming amount of support. The freedom was unbelievable.'

Meeting men, first dates, and finding love are all exciting experiences for young women. However, imagine having to tell your soon to be partner you have Alopecia. "How will they react, will they still like me, what will they say?" are just a handful of worries that go through an Alopecia sufferer's head.

Shortly after Ileana was diagnosed with Alopecia, her partner, at the time, ended the relationship.

'I hated myself, and I blamed myself. When I eventually returned to the dating scene, I hated it. The first thing I would do would be to show them my Alopecia. I would show them pictures of me with and without my wig, and unfortunately not many men would understand.'

Shanna McCormick, 32, from Manchester, was 30 when she was diagnosed. Although she was already in a long-term relationship before she began to lose her hair. She admits still struggling with her relationship. 'It ruins any intimacy with my partner of 15 years. He has been amazing and tried his best to be there and reassure me that "it's only hair" – my most hated phrase ever.'

Hiding behind the wig

Women often resort to wearing wigs to help them feel like they "fit in" with society again. 'I jumped into wigs wearing immediately,' explained Shanna. 'I am still not comfortable being bald in public and will only take my wig off at home.'

Although wearing wigs seems like a simple option when hiding Alopecia, this also comes with added doubts.

'The difficulties I have faced when wearing a wig are being too hot and uncomfortable. I often feel extremely vulnerable and self conscious and think that people are looking at



Ruth's wig journey over the 10 years of suffering with the disease.

me and know I am wearing a wig.'

Ruth also began wearing wigs to help improve her confidence, but soon realised how stressful finding the right wig can be. She explained: 'Finding the right wig, the right colour, fit and shape is very time consuming. With Alopecia you are constantly thinking when am I going to get my next wig, how am I going to style it, where will I buy it from and most importantly how am I going to fund buying it?'

She also confessed to me that the NHS free acrylic-wigs feel and look fake, and often do the opposite of boosting women's confidence. Resulting in ladies looking elsewhere and paying extra for better quality wigs- but this then leads to the question who fund this?

Still in the unknown

Although Alopecia is a disease that affects thousands of people every year, there is still no medical cure to make the hair grow back. In all forms of Alopecia, the hair follicles will remain alive and be ready to resume normal hair production when the body receives the "right signal" again. Doctors can often refer sufferers to treatments, such as steroid injections, re-growth hair mousse and many more. I was prescribed a mousse that I massaged into my scalp, on to my patches, daily. I was lucky enough to have my hair grow back – unfortunately this is not always the case for everyone, such as Ruth, Ileana and Shanna.

Recent research thought they had found

a cure for Alopecia. Scientists from the Columbia University Medical Centre in New York identified the exact cells that were destroying the hair follicles. Through further research they tested a drug called Ruxolitinib, where sufferers would take this oral pill twice a day. It was proving to be a success. However, the side effects of this drug remain unknown, and further testing is underway.

Regrowth

Despite there being so little scientific research going into finding a cure, individuals who suffer from Alopecia are taking this matter into their own hands. Autoimmune Alopecia Research UK (AARUK) is the first charity to raise money and fund for medical research into Alopecia, with their latest project being a success.

Jayne Waddell, Chairperson of AARUK Alopecia, said: 'We were successful in raising £20,000 to initiate the first alopecia biobank in the UK, and we hope to have it opened by summer 2016 where samples will then be accessible to scientists for research.'

Ruth was one of the participants who raised money for the biobank and raised just under £10,000, by going wig-free for a week for the first time in 10 years.

'It was a huge step for me but so scary. The day I had to leave the house without my wig was very terrifying, but I had so much support and positive feedback, it left me thinking why have I been this scared for so long?'

'I am now at that stage in my life where I want to give something back, help other people to overcome this disease and achieve that level of confidence that I have recently found.' ●



Ruth recently went wig free for a week to raise money for AARUK

BUZZ
ONLINE

See more of the Alopecia Aware Project, including alternative headwear for Alopecia sufferers at buzz.bournemouth.ac.uk

Public?

No thanks, I'll be staying

Private

Want to use online services without your privacy invaded? **Hannah Jackson** un.masks the web's incognito surfers to explore the possibility of being truly anonymous

Wi-Fi isn't Jo Porter's friend. 'The Snowden revelations were a big turning point for me,' she explains refreshing her web page. 'I realised I was living in a world very different to the one I believed I was.'

Porter, 25, from Brighton, like most, uses online services - for work, blogging, tweeting anecdotal woes about public transport. She apologises again for the Internet speed, or rather, lack of. But though a buffering screen is something most eye roll at with frustrating regularity, the sight is more of a routine fixture for Porter. She doesn't use Google Chrome, or Firefox, or Safari. Instead, Porter logs onto the Tor Browser, a piece of software, tailored not for its speed but the guarantee of anonymity.

With World Wide Web users now exceeding three billion, the trading of email addresses, bank details and chunks of your soul in return for services has, for some, become a 21st Century reality. According to Dr Joss Wright, Professor of Privacy Enhancing Technologies at the Oxford Internet Institute, it's for this reason that although technologically

possible, privacy is an issue often put on the backburner. 'People use websites like Facebook because they get an immediate and tangible benefit. If someone hasn't been directly effected by a data breach or suffered the consequences of a public online life, the this will never happen to me argument often prevails.'

Yet, as convenient features like online banking, shopping (and in many cases sharing what you had for dinner with everyone from an old high school fling to your grandma) thrash privacy concerns nine times out of ten, there are those in pursuit of a safer digital world. They have swapped centralised systems like Facebook and Google for privacy conscious alternatives or avoided public websites altogether.

In the wake of recurrent UK data breaches, security climbs the ladder of priority - and not only for the tech savvy. Such is the case that, according to Pew Internet, Science and Technology Research, 86 per cent of web users have taken action to remove or mask their digital footprints - from small steps such as clearing cookies and avoiding disclosing their name to, like Porter, using an anonymous browser. Legislation too has begun to back security for the average web user.

Recently, Google announced it had been asked to remove one million search engine links since "The Right To Be Forgotten," an EU ruling that came into action in 2014. According to the Information Commissioner's office, 95 per cent of those requests came, not from criminals or public figures as originally presumed, but citizens claiming back personal data not destined for the masses.

'People are starting to become savvier about what they should keep private,' says Joanne Frears, technology lawyer and member of the Society for Computers and Law. Despite a huge stride in privacy favoring legislation, the Right To Be Forgotten isn't perfect, she notes, 'but it does give people some powers to pull back on information that shouldn't be out there.'

In terms of where data protection is heading, despite the law's assistance, Frears says a divide in attitudes towards technology is inevitable. 'There will be people who exist purely digitally and others who have said "enough is enough, I'm staying off grid now" - unfortunately the opportunities for doing so are getting smaller because of our reliance on innovation.'

Going "off grid" did however become a reality for Martin Cole, an IT specialist



turned fugitive from Walsall, who took part in Channel 4's gripping social experiment *Hunted*. 'I wanted to prove that you can disappear,' says Cole, who lasted 28 days on the run against Britain's leading surveillance experts earlier this year. Using untraceable online techniques including Proxy services, translation websites and virtual private networks, he managed to stay anonymous even when contacting home.

'I knew that once surveillance experts had access to my email and social media they would know everything about me. Even though I work in IT and am aware of the information stored online, it's hard not to participate,' he admits. 'Our places of work, shopping habits, circle of friends and family are all laid bare on our digital footprints and we have to trust organisations to keep that secure. Unfortunately as demonstrated on *Hunted*, once obtained and analysed, information can be used against you.'

Being private, of course, can sometimes come with whispers of criminality and Wright agrees. 'It would be silly to say these technologies don't enable crime because they can. The question is whether human rights are an acceptable trade off for this pedestaled security state.' Cole also reflects that the extremes he went to may not be realistic for everybody. 'I do think people should be more digitally savvy though. When a basic human right is at stake, even if just deleting your browser history, it's better to do something than nothing.'

Michael Reid, cofounder of Red Scotch software, went one step further than personal protection. After working at a web agency for over five years, he witnessed Internet companies profiling their users and explains being 'incredibly disconcerted with the

situation,' especially watching his children interact more with digital media. As a result, Reid developed 'Kube', a private social network and his attempt to prevent online violation without the sacrifice of being social - something he considers a 'modern facet of the web'.

Reid's logic is understandable. A 2015 report, released by Ofcom, found that eight-in-ten people with a social media profile visit their accounts at least once a day, compared to 30 per cent a decade ago. He says Kube is not about having something to hide but being free to use services without unwanted observation from third parties. 'I have nothing on my computer I'm concerned about, yet I still want privacy. When I go out and about, to a coffee shop or bank and there's CCTV, I understand that I'm giving up some of my privacy to be part of the public but I also know I can go back to my house and have a safe place.'

'What I started to realise in recent years was that when it comes to our online life, we no longer have a safe place.' Concerns like this aren't uncommon. Whilst social media usage rises, the amount of Internet users happy to give out private details online has plunged. In 2005, 36 per cent were comfortable divulging their home address in exchange for a service of some kind. Jump to 2015 however and the amount willing to divulge such information barely scrapes 20 per cent.

What appears a contradiction of nature, Cyberpsychologist Dr Lisa Orchard labels a pressure of conforming to online normalities. 'People who are reserved, anxious or simply keen to prioritise their privacy may see social media as destructive but feel the need to maintain their usage because of its prevalence across other social groups.' Societal pressure, however, doesn't influence everyone.

After being left by his mother at the age of nine, Telecommunications Engineer Paul Robertson, 35, has no intention of parading himself online with risk of being found by somebody he would rather forget. 'There is zero chance I would ever open a social media account,' he says with conviction.

'I don't want to be in the position where I'm hassled by someone wanting to contact me. Surely, I should be in control of who I contact.' His sister was recently found by their estranged mother on Facebook, something that has cemented Paul's belief to avoid open platforms. 'My mother was a drinker and we didn't have a good relationship. The fact she doesn't know our location or occupation and yet was able to contact us because of a website, is frankly scary.'

These varying attitudes towards privacy need considering says Orchard. 'As uploading personal information becomes ingrained as social norm we need the technological affordances to match people's chosen online preferences.' Such affordances, however, Wright regards a 'burden' for users in practice. 'Machines are supposed to take away burdens not add new ones,' he explains, suggesting that embedding privacy is a route to consider.

'If someone can do a one-off action or a company like Apple can provide a simple solution that doesn't effect the user, people will go for it. But as soon as there's a significant cost involved, forget it. With or without concern for privacy, there is still a dependence on speed and usability.' Porter recalls her use of Signal, an encrypted messaging platform that has been praised for its high quality and user-friendly design.

'It's idiot proof,' she insists. According to Google Play, Signal has been downloaded on to over a million Android phones, showing a glimpse into the popularity of security conscious alternatives. 'As we continue to see an economic incentive for privacy, I think integrated offerings will become a regular offering,' says Wright. He analogises the web as a tug of war, between privacy enhancing tools, and services whose incentive is to gather, store and analyse information, saying a change of mindset is needed. 'The question isn't "can we keep privacy as it was in the 50s or 60s"? It's about, now we understand the implications of privacy violation, can we steer our society towards freedom of expression? Or, do we leave it heading towards a market mechanism where everything becomes based on what Google and Facebook want?'

Of course, the lengths some will go for traditional privacy vary. Some look at human rights as democratic corner stones being eroded by technology. For others, confidentiality is a consideration simply not paralleled by the web's benefits - and a nuisance to entertain. So is it time for tech companies to introduce privacy as part of their package? Demand certainly suggests so, but Porter is skeptical. 'Yes encryption can be a hassle,' she acknowledges. 'But can we afford to hang around and wait for privacy to become a shiny, one-click app?' ●



Martin Cole became a fugitive for Channel 4's *Hunted* and successfully used the web under the nose of 28 surveillance experts



'Online, we no longer have a safe place.'
Michael Reid, from
Naimo, Canada.
He is currently working
on a private social media
platform called "Kube"

'How we learned to love our new faces'

What is it like for women with facial scars to live in a world obsessed by looks? **Gabrielle Gervais** speaks to three women in the know



Catrin, Tulsi and Kelly are three women who lead very different lives yet they all have one thing in common – they are all facial burn survivors. None of these women ever thought that one day they would look in the mirror and be met with a reflection that they didn't recognise. So, in a world where beauty and

appearance is sometimes everything, how have they all learned to love their scars and carry them with confidence?

When Catrin was 19-years-old she worked at Alpe d'Huez, a ski resort in France. In April 2013 she was severely burnt and her life was changed forever when in a freak accident, the coach Catrin was travelling on hurtled into the mountainside and burst into flames. She suffered

96 per cent burns to her body, including serious burns to her face and scalp. 'My parents were told at the time of the accident that I wasn't going to live with such severe burns,' says Catrin. She spent three months in a coma but defeated all odds and continues to astonish everyone around her.

A huge part of surviving facial burns is accepting your new appearance. In a world

that is becoming more and more obsessed by the way we look this can prove challenging. For Catrin, she didn't see her injuries until four months after the accident. 'They didn't let me see myself when I woke up straight away until one day my ward manager and surgeon came into my room with a mirror,' explains Catrin. 'They put the mirror in front of my face. I cried for three days straight, I didn't

recognise my reflection. It wasn't just my face that upset me, I had lost my hair too and I loved my hair.'

As psychologist from the Centre for Appearance Research (CAR) Diana Harcourt says: 'Facial burn survivors have to deal with the fact that they have to look in the mirror and it's not the same appearance as before. They may feel the same on the inside but

Catrin keeping positive after the accident



on the outside looking in the mirror when someone different is looking back at you, that can be really, really difficult for them.'

Being raised as a dancer, Catrin was surrounded by world of makeup, dressing up and performing, she cared a lot about her appearance. 'I am not ashamed to admit it, but I used to be vain,' says Catrin.

Despite the initial shock of her new appearance, for Catrin – now 21 – her future is looking promising. She still takes pride in the way she looks however she says through meeting people who have also been through traumatic events, she now thinks her scars and burns are the things which show how strong she is. 'I am more than happy to have my scars on show, it's just as beautiful as someone who has a full face of makeup on,' she says.

Catrin has learnt a lot from her burns, her open mindedness has broadened. 'I am more accepting than I was before,' she explains. Catrin now goes into schools and speaks to young pupils about self-confidence issues. She talks about how the most important thing in the world is not how you look but the most important things are your health, family and what you achieve.

Like Catrin, Tulsi 36, is a facial burn survivor who has learnt to embrace and love

her scars over the years. In 1990, Tulsi was facially burnt in a plane crash, she was left fighting for her life after sustaining 45 per cent burns. To add to the heartbreak, Tulsi lost her parents and her brother in the crash. In the blink of an eye she was parentless and permanently scarred on the inside and out.

'The doctors in India looked at me and said to my family 'what's the point in keeping her alive if she looks like that,' explains Tulsi.

Thankfully her grandparents flew her back to the UK where she received the treatment she needed. 'My family had to dismiss the fact that I looked different and did everything they could to give me a normal life,' she says.

Two degrees later, Tulsi now works for herself as a Pilates teacher, however it has not been an easy journey. When Tulsi was studying she was diagnosed with kidney failure and has since had a kidney transplant. It may be hard to believe but this diagnosis was a turning point for her. 'From that moment I started to learn to look after my health, I realised it wasn't about my burns or how I looked anymore,' says Tulsi.

Public reactions are an aspect of life that facial burn survivors will have to deal with at times in their lives. 'Some people have said to me in the past that they feel sorry for me, I

“My scars are just as beautiful as someone who is wearing a full face of make-up”

respond asking *why?* Based on the way I look? I'm actually very happy,' says Tulsi.

James Partridge is the founder of the charity Changing Faces. He wants to challenge the attitude that says people who carry scars are not likely to lead happy lives. 'There is a very strong public perception that you have to look 'good' in order to experience happiness and success,' explains James. 'We know this is complete nonsense but those with different appearances can feel they are received with fewer expectations and almost patronised.'

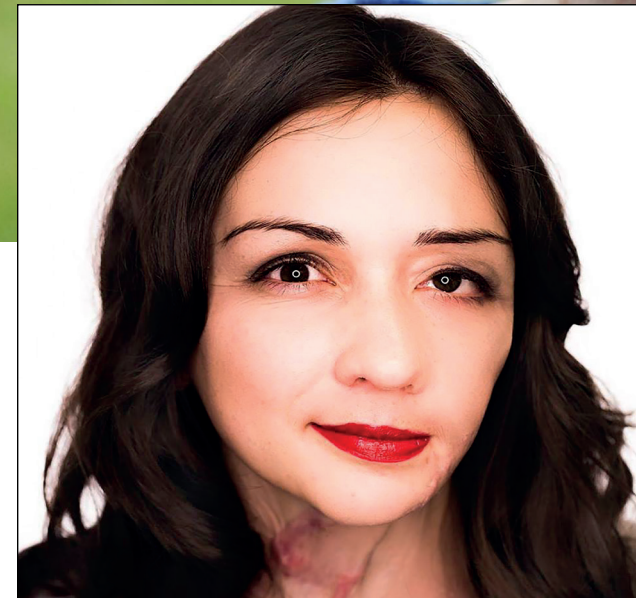
Tulsi is unaffected by people's reactions to her appearance. 'If people stare, I think to myself *who are they in my life?* They mean more to me than my exterior, and everyone else should realise this too.'

Her burns are part of who she is today. 'I've tried to change myself various times because of my scars, but it never sat well with me,' explains Tulsi. 'I now love every aspect of myself, even the flaws. I have realized there is more to me than my exterior, and everyone else should realise this too.'

Kelly, 27, also deals with public reactions positively. 'I don't notice people staring at me anymore, but if I were to, I would understand because seeing someone with scars on their face is not a normal thing to see,' says Kelly.



Tulsi has learnt to love her scars



In May 2013, Kelly was in a car accident. 'This is when my life changed forever. I somehow slept walked into my car, I clipped a tree on the left side and the car flipped over and I went through the roof,' explains Kelly. 'The car landed on me. It was the hot engine and the weight of the car against my face that caused the burns.'

It may come as quite a surprise, but despite a long recovery, with endless skin grafts, Kelly has a positive attitude to almost everything in her life.

'I think my burns and the accident have given me a new lease of life. I now know what is important and what isn't,' says Kelly. 'The way I look is no longer the most important thing to me anymore.'

Another aspect of life that can sometimes be challenging for facial burn survivors is finding new relationships. The thought of "finding love" can be even more daunting than it was before.

Appearance psychologist Diana Harcourt

says that there is sometimes an issue for facial burn survivors around feeling attractive. 'Some people may worry about intimate relationships and what impacts their scars will have on those,' she explains.

Kelly admits that her new appearance does make it harder for her to meet guys. 'A lad isn't really going to look a girl up in a bar and think "oh she's hot" if she's got a big scar down her face. It's just a fact,' she says. However Kelly put's a positive spin on the situation. 'If someone gets to know the real me they will look past my scars,' explains Kelly. 'All it will do is sift out all the bad people.'

She is now more concerned with how she acts towards others, she is focused on her inner beauty and upon how people look at her from the inside rather than what she looks like on the outside.

Catrin, Tulsi and Kelly all appreciate the support they have received throughout their journeys into accepting their new appearances. 'I want to help the charities

which have helped me and give something back to them,' says Kelly.

The Katie Piper Foundation has been a huge help to each of the women over the years and they are all supporting its new online forum. Sarah Chambers is the funding executive for the foundation. 'The online forum will enable people living with burns and trauma scarring to give and receive peer support and get professional advice,' she explains.

'We are aware due to geographical, health and confidence restrictions there are many people who are not able to access these services currently, the online forum will mean more people can be reached.'

The initial pilot will run for six months from January and it aims to help people deal positively with a change in appearance and love their new faces just like Catrin, Tulsi and Kelly have learnt to do.

Visit www.katiepiperfoundation.org.uk for more information about the forum. ●



The cuts that kill

The impact of austerity on domestic violence services. Is the quest to save money overshadowing our fight to save lives? **Casey Farr** investigates

Domestic violence is a terrifying threat faced by women of all ages. “There is no doubt in my mind that, without the support of Lambeth Gaia, I would be dead,” says Ella. It was Lambeth Gaia, a specialist domestic violence charity, that finally helped her escape her former partner.

‘He lost his temper one day because I didn’t come home when I said I would. He got really angry and pushed me against a wall,’ she recalls. ‘My intuition told me to leave, but he broke down afterwards crying and apologising, so I stayed and from that day it gradually got worse and worse.’

The abuse spanned four years, by

which time Ella had experienced a daily onslaught of violent attacks. Threats to kill became the norm and even the story of being pushed under a bus is told with the kind of nonchalance that says everything about the regularity of the attacks. Worse than the blatant violence, she says, was the psychological manipulation and financial abuse that rendered her unable to escape.

‘He had total control of my bank account and isolated me from my friends and family. At that time I had no choice but to stay,’ she says. After four years of suffering in silence Ella found Lambeth Gaia, her specialist domestic violence charity, who moved her into emergency accommodation and gave her the support to rebuild her life once again.

Now 27 and in her first year of study at

Birkbeck University reading Law, Ella is adamant that she owes her success to the support she received at the Gaia Centre. ‘It was a lifeline,’ she stresses.

While Ella’s story is testament to the vital role women’s charities play in allowing victims of domestic abuse to rebuild their lives, for women like Ella seeking help in the era of austerity, the battle to survive has become tougher than ever before.

Since austerity measures came into force in 2010, domestic violence funding has been slashed by roughly a third leading to the closure of 1-in-6 services. Currently the number of women being turned away from refuge stands at roughly 150 per day. Prominent charities such as Women’s Aid have warned that crisis point is fast

approaching, reporting that just under half of its services are running solely on dwindling charitable reserves. Its chief executive Polly Neate feels the situation is getting desperate: ‘Our domestic violence services are among the best in the world. We are risking all of that.’

Last year the government set aside £10m to fund women’s refuges. However there are concerns that this generous fund is being undermined by a localism agenda that is driving local councils to direct their limited resources to the cheapest service provider, leaving many smaller specialist services without the support to continue.

Polly explains that due to the introduction of a tendering process that requires services to compete for funding from their local councils, specialist services are finding themselves beaten to the budget by cheaper generic organisations. Often these have little or no specific experience working with victims of domestic violence. ‘This means that the council says there is still a service, but in reality it is not giving women and children the support they need,’ she says.

The harsh impact of tendering was evidenced by the recent closure of Eaves Charity. It was forced to shutdown after its bid for a £6m contract was controversially rejected in favour of The Salvation Army. Overnight one of the UK’s leading specialist charities was lost – and with it nearly 40 years of specialised experience supporting more than 2,000 victims of domestic abuse.

Barrister Harini Iyengar relied heavily on Eaves’ Poppy Project to protect and support her clients as they bravely battled for justice. ‘Eaves provided expert witnesses, chaperones and safe housing that gave these women the confidence to leave their partners and report their crimes,’ she recounts. Would the women she worked with have been able to escape their partners and seek justice without the support of Eaves? ‘Absolutely not,’ she replies. ‘It’s extremely sad.’

Compounding issues with closures is the fact that the loss of specialist support has come at a time when welfare reforms that are hitting women twice as hard as men. According to the House of Commons library, 85 per cent of cuts



Image credit: Polly Neate

Polly Neate, Chief Executive of Women's Aid

“Our domestic violence services are among the best in the world. We are risking all of that”

have been at the expense of women.

This increased financial hardship has fatal implications for victims of domestic violence. According to domestic violence charity Purple Purse, financial dependence keeps 98 per cent of victims trapped in abusive relationships.

‘Financial autonomy is crucial for women trying to leave an abusive relationship which is why financial abuse is one of the ways that perpetrators of violence will seek to control their victims,’ explains domestic violence support worker Jenelle*, who is also a member of Sisters Uncut, the anti-austerity group leading the fight against cuts to domestic violence services. ‘What we’re seeing with some of these changes to the benefit system is that it’s going to become more financially difficult for women to leave violent relationships,’ she adds.

One reform of particular concern to victims of domestic violence is Universal Credit, a measure designed to reduce costs by debiting an entire family’s benefits to a single named account holder.

Jenelle explains that the introduction of a single payment system is like handing a tool for financial abuse to perpetrators of domestic violence:

‘In a domestic abuse situation a perpetrator will often take all the benefits from the family, whether that’s directly having them into the account or having his partner transfer all the money into his account. So with Universal Credit it’s going to be much easier to do that because all he needs to do is be the named person receiving the benefits.’

While the Chancellor, George Osborne, has assured that victims of domestic violence will be able to apply for exemptions, women’s charities remain cynical.

‘It’s unrealistic to think that victims of domestic violence will be free enough to apply for an exception to Universal Credit,’ argues Polly, ‘We are very concerned, because where the government has introduced supposed exemptions before, for example with legal aid, we have proved that genuine victims are not able to get the support that they have a right to.’

Universal Credit is not the only reform to threaten victims of domestic abuse. Faced with an affordable housing crisis, caps on housing benefits and cuts to refuge funding, there are increasingly few options for

women attempting to flee domestic abuse.

Nevertheless the argument stands that the government must achieve its primary aim of reducing Britain’s £900bn deficit. As the longstanding Conservative MP Gerald Howarth explains: ‘Cuts must be made to compensate for Labour’s overspend and they have to come from somewhere.’

But even in a crude world where numbers must be crunched and making savings are of the utmost importance, do cuts to domestic violence services actually make financial sense?

Currently domestic violence is estimated to cost the taxpayer £5.5bn per year according to a Trust for London Study. Each woman murdered by her partner costs the state £1m. According to the Office of National Statistics (ONS) one woman dies as a result of an



Above: A discarded placard left behind in Trafalgar Square after a protest against cuts to domestic violence services. Below: A breakdown of the economic cost of domestic violence; statistics taken from a Trust for London study

“The options for women are being reduced, which will make more women stay in abusive situations”

abusive relationship every three days, which means roughly £121m is spent every year as a result. Polly expects this figure to climb further unless the situation is addressed. ‘The options for women are being reduced, which will make more women stay in dangerous situations,’ she says.

Money should not be the primary motivation for eradicating domestic violence and backing the services that work valiantly to do so. But even if it were, there is evidence

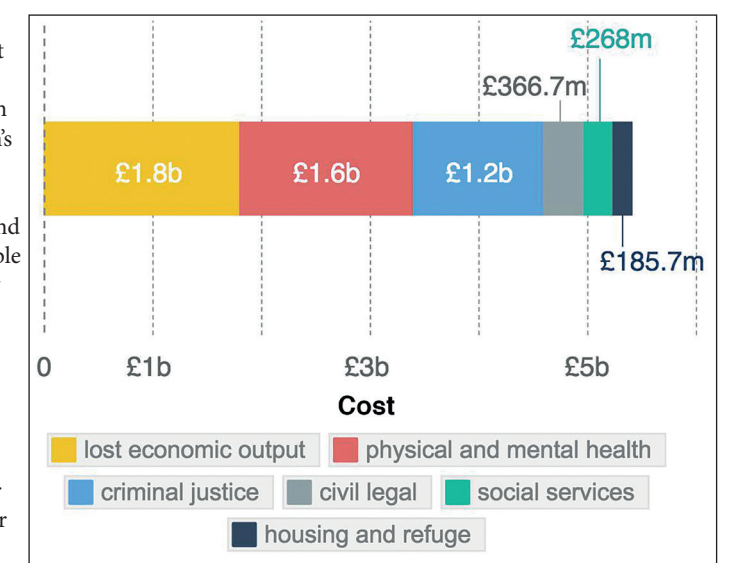
to suggest that budget cuts may not achieve the desired savings. In fact, reducing women’s ability to leave their partners by cutting funding for refuges and welfare support is liable to be as economically crippling as it is emotionally.

The stark reality is that if we continue to ignore the plight of the women’s sector and fail to amend our policies to account for the disproportionate burden on women, the number of women dying as a result of domestic violence will almost definitely continue to rise.

In a country where 1-in-4 of us is already statistically fated to experience violence at the hands of our partner in our lifetime, can

the government really afford not to invest in lifesaving services? ●

*Jenelle’s name was changed to protect her identity. For more information follow @thecutsthatkill on Twitter.





CREATIVE DEFIANCE

WORDS BY **ALIYAH ALLEN** FEATURING **DALE GRIMSHAW & KRISHNA MALLA**

Being invited into a world that is hidden in plain sight is overwhelming, yet nothing is as raw as the beautiful street art and graffiti pieces that can be seen scrawled on brick walls and the side of impossible to reach buildings. Graffiti is vandalism and there is no two ways about it. However as time shifts and as we move into a more digital age, the line between what is and what isn't begins to overcomplicate the two competing subcultures.

It becomes clear that graffiti and street art are very different when the foundations they are created on are brought to the forefront. Street art is a much more of an open subculture, accessible for the masses to understand, whereas graffiti is closed and hidden away, offering exclusivity to the people who are a part of it.

"There are many people that crossover, like Ben Eine for example. He began to get really tired of the politics of the graffiti scene," says Karim, somewhat of an expert when it comes to this topic. He leads a graffiti and street art tour around East London, as well as being a graffiti artist under his pseudo "Freedom Kult" in his spare time.

Eine is famously known for his intricate, stylised bold typography. His large letter forms often resemble a Victorian typeface, that contain contrasting colours with prominent outlines. He has been arrested on numerous occasions for being a graffiti writer. He claimed being a taxpaying citizen gave him the right to paint what he wanted, wherever he wanted. This chain of events resulted in him being fired from his job, and as a metaphorical "two fingers up to everyone", he acquired many tattoos around his neck and hands so he would never have to work in a corporate environment ever again.

Karim added: 'A lot of graffiti writers come to the realisation that the lifestyle is not really sustainable and most grow out of doing illegal works altogether.'

This shift from underground to mainstream, is one that is striking and on many occasions it pays off, literally and metaphorically; one of Eine's prints was given to Barack Obama as a gift and is currently hung up somewhere in the White House. Isn't it ironic to think that the work of someone that was once tarnished a vandal, is in one of the most protected buildings in the world?

Eine is not the only one to have found



previous spread
Dale Grimshaw
Untitled
Acrylic, oils and spray paints
2015

first above
Ben Eine
Cheese London
Spray paint
2015

middle above
Freedom Kult
Untitled
Spray paint
2015

bottom above
Stik
Untitled
2013



success in his defiance. London-based graffiti artist Stik is known for drawing stickmen, which are able to display our basic human emotions with six thick lines and two dots. These figures were an expression of his struggle to find shelter in his own city. He now has commissioned work for the NHS, which can be seen outside Hackney's Homerton Hospital titled *Sleeping Baby*. He hoped money raised from it would help incite people to stop the privatisation of the NHS.

We have moved from the days when catching an artist in action was the main event. Finding people that are doing inventive things with a spray can and some paint, is more of an appetite that people crave to indulge in.

British street artist Dale Grimshaw is one who has also developed a distinctive style that would be sure to hold your stare if you were to come across them. He does admit that sometimes he feels slightly left out due to the fact that his style is so different to the traditional, cartoony graffiti that he is so used to. A lot of the street

"It changed the barrier that was around art and the stereotype that it was just for 'posh white people'"

art he sees is very generic and he tries to learn as well as introduce new things to get people talking.

'My technique involves a lot of movement and graffiti. I tried to incorporate video but with paint, which is a fucking hard task . . . like when the DVD gets stuck a bit and there's bands of colour. I like the idea of trying to capture people as more than moving things but as an energy or an aura.'

Grimshaw's work has a euphoric atmosphere to it, but it's difficult to put into words how he succeeds at showing focus and emotion in his portraits, especially in

the eyes of the models he uses. His pieces are incredibly detailed, so much that you can see every miniature paint stroke on the canvas.

Even his studio is something to behold. Endless spray cans stacked up high, splatters of different coloured paint on the walls and floor. This is where all of his works come to life. Body length canvases scale every nook in the room and you can imagine the works of art that graces them.

Grimshaw has noticed the change in attitudes of people towards street art and graffiti since Banksy propelled onto the scene. 'I noticed a lot of people coming into this world that would've normally felt quite intimidated by it all. People began buying prints and going to shows; there was a time that they would never identify with being an "art collector". It changed the idea of the barrier that was around the art world and the stereotype that it was just for "posh white people".'

Grimshaw was presented with the question of whether he believes that people nowadays only "respect" a piece of art-



work if it has a price tag on it, no matter the intent or technique behind it.

He explained that while he was completing one of his tribal pieces in Camden last year, a woman who worked across the street could not stop telling him how much she disliked it and how 'miserable' it looked. When he then mentioned to her that he is well-known in the art scene and he's been on television speaking about various things, her stance immediately changed.

'There's that side of it where people are like sheep, and they go to like something just because everyone else likes it. But there's also the money side, where people judge things differently based on how much others will buy it for.'

'The art world is cold and ruthless. I don't think I'm that famous to have hoards of people having punch-ups outside my exhibitions because the last print has gone, but it comes hand in hand with being involved with the arts.'

Krishna Malla is another who took on this question with some considerable thought. 'It's become a bit of a fad since it has grown in popularity, so it's understandable that it attracts a lot more people, and then for artists to go and do this art form.'

Malla is Bournemouth-based and is

"I DON'T THINK IT'S VANDALISM IF IT'S DONE RIGHT"

a professionally trained illustrator. He began spray painting from when he was 15-years-old and never stopped. He now takes on commissioned work all over the UK for an array of events, as well as being an event manager at Secret Walls, an international event that takes place in over fifty cities, including those of London, Berlin, Tokyo and Sydney.

'I got into the event industry pretty early and then I started managing Secret Walls which really helped spur me on with street art and being within that culture.'

Malla works in slick, smooth lines and bold colours, which catches your eye and lengthens your stare. His large mural pieces have so much going on that they almost tell a story. Malla's most recent which can be found on the side of Mexican tapas restaurant Ojo Rojo in Bournemouth. It sees beautiful, large wing-spanned owls, in contrasting colours of navy blue, orange, pink and green.

The artwork is hard to miss and difficult to walk past and not admire every stroke of detail. It brings a sense of life

and literal colour to what was once a lifeless seven-foot brick wall in the middle of a bustling town.

With the ever-surrounding vandalism bubble that engulfs the world of graffiti, Malla didn't think that the concept of it was out-dated in any way. Arguably it still exists and depends on how you choose to look at the situation.

'I don't think it's vandalism if it's done right. . . if it's done wrong it's just bad art. It's not necessarily vandalism.'

With a subculture that is dripping with talent, new and old, it's exciting to see how much both are transitioning and growing as time moves on. The future of street art and graffiti is already heading down an interesting route, with the idea of augmented reality and the links it shares with social media. It calls into question whether street art and graffiti will cease to be exclusive as they both draw on noticeable parallels.

Looking towards what could be the next stepping-stone for graffiti and street art is always something artists like Karim try to discover. 'You could argue that graffiti was the first form of social media, and yet is the last form of unmediated communication that we have left. There are a lot of links; they are both worlds of war, regimes of symbols.' ●

‘I didn’t intend to be this old. . .’

Life just took over

Are women who have children in their 40s really selfish? With the average age of first-time mothers rising above 30, we meet the parents who want to change perceptions. **Charlotte Brown** investigates



Portraits by Charlotte Brown

It was 10am on a Saturday morning when 43-year-old Madeline Lyons-Applebee took a pregnancy test. She and her husband, Martin, had been trying to conceive for four months and her period was a couple of days late so she thought it was worth checking, but she did so with little sense of conviction. A few months back Madeline (left) had been to see her doctor for a fertility check. It was low, although the doctor explained that this was normal for a woman of her age. 'The doctor's words were: "It doesn't mean you can't have a baby but it's probably going to take you 18 months, if at all, so you need to be prepared for the fact it might not happen"'. But, on this Saturday morning, with Martin at work until 6pm, Madeline discovered she was pregnant already. Unable to 'sit on this piece of news until then,' she decided to call Martin.

'He thought I was joking at first but then he was just ecstatic,' Madeline recalls.

After the warnings from her doctor, Madeline was surprised to discover that she wasn't alone in conceiving in her forties. In fact, the average age of first-time mothers her midwife was assigned to at the time was 46.

Madeline admits that she 'didn't intend to be this old' having her first child but, in a way, 'life took over'. She met Martin in her early 30s and they lost years spending time together and fulfilling their careers. It wasn't until her early 40s that she realised she needed to make a decision.

As she talks she is feeding her son, Oscar, now three and a half months. Madeline describes her pregnancy as 'a bit of a pain,' although her symptoms weren't age related. She suffered from horrendous morning

sickness for 17 weeks and deep vein thrombosis in her leg, resulting in prescribed daily injections of blood thinning medication until six weeks after Oscar was born.

Now, she believes Oscar couldn't have come at a better time in their lives. 'We've lived our lives, we've done all the stuff we really want to do and we've got established careers so financially we're comfortable,' she adds. 'We are probably in the best place we could of been, in terms of timing, to have a baby.'

Recent figures published by the Office for National Statistics (ONS) show that in 2014, 52 per cent of all live births were to mothers aged 30-plus, up 1 per cent from 2013. The data by ONS depicts a slow yet consistent trend in the rise of maternal age, but today's society seems reluctant to accept this, often branding older mothers as "selfish".

Cari Rosen, an author from London, became a mother at 43 after trying desperately to get pregnant. She started writing *Secret Diary of a New Mum* (Aged 43 ¼) when her daughter, now seven-and-a-half, was six months old, after she grew sick of reading in the tabloids why people waited to have babies later. 'I just wanted to explain the reality,' Cari says, 'which is most people who have babies later do it because that's how life turned out, not because they consciously waited until they were 40 to have a baby. It's not all about career and being selfish.'

After meeting her husband at 39, there was never any question that Cari wanted to have children. In an ideal world she would have become a mother 10 years earlier and had more than one. Despite her circumstance, Cari doesn't advise women to wait until their 40s to start a family. 'I think it's naive not to

realise the decline in your fertility. I think it's really important to be aware; I was all too aware of it,' says Cari. 'If you have the opportunity earlier, go for it and if you don't, don't give up hope.'

Psychologist, Dr Joann Lukins, uses the term "biological clock" to define the increased "internal instinct of parenting and reproduction". When the clock starts ticking, it indicates the closing window of fertility. 'Some argue a physiological basis and there is certainly a highly socialised construct as well,' Lukins explains. 'In terms of the media and our history, there's an expectation that part of a woman's lifetime experience includes bearing children.'

Lukins says there is no set time when a person may feel the urge to reproduce and some people never do. 'It is unfortunate if you feel that you want children, but you aren't placed to do it,' she says. 'See if you can get yourself to a place where you're either feeling better about your circumstances or you can plan for them.'

Jo Johnston, from Essex, vividly remembers watching a news report on television a few months ago where a medical expert was "advocating that women should be younger when they have children and that they shouldn't have children older"

'It made me feel very angry,' Jo recalls. 'She was only talking about it from a medical point of view and I thought that was really irresponsible.'

Jo, who gave birth at 40, says that financial security and a stable relationship are important factors to consider when planning a family. Despite having never considered the idea of being pregnant or wanting children until she met her husband in her mid 30s, Jo says she didn't worry about being able to have children. Her own mother had given birth at the age of 39 in 1975.

'I didn't want to rush into it just because people would perhaps think that 39 or 40 is considered older,' she adds. 'That's a societal pressure in a sense but you do think that you've got to make a decision.'

A statement by The Royal College of Obstetricians and Gynaecologists (RCOG) encourages women to consider having families during the "period of optimum fertility", between 20 and 35 years of age. According to the RCOG, 75 per cent of women aged 30 will conceive naturally and have a baby within a year. This number then falls to 66 per cent for women aged 35.

Mother of one, Sadie*, was 39 when she gave birth to her daughter and runs a popular website called Older Mum (oldermum.co.uk) as a source of support and knowledge for other mothers over 35. After finding that little was written on older mothers back in 2009, Sadie saw a gap in the market.

'I wanted to create a supportive and informative site for older mothers, and especially to profile mothers who'd had children later in life.' Sadie also writes a

Cari Rosen, author of *Secret Diary of a New Mum* with her seven-year-old daughter



personal blog, Older Mum (In a Muddle), about the honest experiences of a forty-something mother.

Sadie believes that the amount of support available for older mothers has gotten better over the years. She says that there is a lot more awareness nowadays but she also knows that what is covered in the media isn't always positive. 'Society will just have to accept and adapt to changing trends,' she says. 'This is what an increasing amount of informed and educated women want to do for a myriad of personal reasons.'

Much of the stigma surrounding increased maternal age is centred on the higher risk of pregnancy complications. Statistics published by BabyCentre show that the risk of Down's Syndrome jumps from one-in-900 aged 30, to one-in-50 or greater aged 45.

Women's health expert and author, Maryon Stewart, remembers attending a lecture at Southampton University, which concluded strong relations between the health of the baby, and the health of the egg and the sperm, approximately 100 days prior to conception. 'That really made me stop and think,' says Stewart. She was shocked to consider the idea that women may not be preparing their bodies before conception.

The ideal preconception programme for both a woman and her partner should be four months, Stewart says. Her books, *The Real Life Diet* and *The Natural Health Bible*, are designed to help women to evaluate their nutrient levels and detect signs of vitamin and mineral deficiency.

Stewart believes that women can significantly influence their chances of getting pregnant naturally. Her work has concluded that a woman's biological age may differ from the age of her eggs due to good or bad nutrition. 'It's not just a question of age,' she says. 'It's also a question of lifestyle and

'I think it's naive not to realise the decline in your fertility. I was all too aware of it'

Cari Rosen, who became a mother at 43

environmental factors and nutritional shape. It isn't as black and white as people think it is.' The Harley Street Fertility Clinic offers a comprehensive suite of fertility treatments for women who are unable to conceive naturally. The clinic's director, Dr Venkat, stresses the importance of undergoing regular fertility checks if natural conception is proving unsuccessful and advises women in their late 30s or older to 'seek help immediately'.

Venkat says that the most successful method of assisted conception, per single attempt, is IVF, although the success rate drastically depends on varying factors including age, ovarian reserve and sperm quality. 'The live birth rate can be as high as 50 per cent or as low as almost zero,' says Venkat. 'However, this may be improved drastically by using donor eggs or donor sperm.'

When Madeline was presented with a chance that she might not get pregnant, she knew there were other options to consider. She would have loved to have adopted. 'I think, as an older mum, is it important to be pregnant or is it important to be a mum? That was the question I asked myself when we thought we may not be able to naturally conceive,' she says. In an ideal world she understands that women want their own baby but for her, 'it has always been about being a mum.' ●



YouTube's Silver Stars

Chris Jones meets the older people who are embracing online media to boost their personal and social lives

In the mid-90s Shirley Curry was given a computer and videogame by her son, igniting a passion that, sadly for her, was ignored by her friends for many years. It was only when her son introduced her to YouTube in 2007 and made her an account, Shirley was able to connect with other like-minded individuals and her passion for gaming could grow.

Eight years later and she has become popular in the online gaming community, enjoying success on her channel that has, at the time of writing, 110,000 subscribers.

Shirley loves to talk about her passions, which also include quilting and reading, and says her experience of using YouTube has enriched her social life beyond anything she experienced before.

"The greatest thing about this experience online is that I'm meeting so many people and that I get to share something that I love doing with others," says Shirley, who is 79. "Other older gamers will comment to me letting me know they're an older gamer."

She's still a member of the quilting guild, a friend of the library board, and goes out with her friends, but wants to use her popular channel to attract other older gamers, "because I feel we are not represented enough on YouTube," she says.

Her first gameplay video was immediately popular on community website Reddit.com. This prompted her to become more active online as the demand for her

"Once people retire there is a lot more they can contribute hugely to society"

Pauline Power, Silver Surfer Awards Manager

genuine style of commentary grew among younger viewers.

"It's the most amazing thing that's ever happened to me," she recalls. "I put it up there just because I thought it would be fun to try and record and because a lot of commenters had asked me 'why don't you record games?'"

Shirley begins each commentary video with "hey grandkids!" as the majority of her audience are only 18-34. But the two-way conversation in the comments section, with personal thoughts and praise from viewers, has proved to be touching for her.

"I love reading their comments and I try to respond to as much as possible. Some of them have made me cry with their laments about their elders," adds Shirley.

Her experience of posting videos online has so far been stimulating and rewarding. "I'm a happy, busy person but this has given me something else more fun to do."

In 2006, Age Action Ireland set up its annual Silver Surfer Awards. Designed

to raise awareness of the achievements of over 50's who use the Internet, they also showcase the benefits of being online.

"I think the awards really highlight the amazing things that older people are doing and once people retire there is a lot more they can still contribute hugely to society," explains Pauline Power, National Development Manager at Age Action and manager of the Silver Surfer Awards. "They've got a huge life experience, such knowledge and value."

Their 'Getting Started' programme, that teaches basic IT skills to over 4,000 older people, was launched in the same year.

YouTube is used to build confidence with hobby and interest finding, says Pauline. "YouTube would usually be a big part of [the learning process]. We ask them their favourite song or whatever it is they're interested in and they'll say 'oh wow!' It's also great for instructional [videos]. Somebody will have made a video about something they want to learn," she says.

The awards have not yet honoured an older user of YouTube, although the winners include retirees who have a zest for connecting with others in online social circles and campaigners for good causes, like Margaret Mullet.

Chicago-based YouTube video blogger Craig Benzine sees the social appeal of YouTube.

"I think that [starting a YouTube channel] would be fantastic, aspects of

society can be represented on YouTube that aren't represented as well in other places.”

The site is currently used by 44% of baby boomers in the US, but the predominant age group on the site is still 18-34. According to Craig, a big social push is needed to encourage older people online.

Shelia Cotton, Professor of Telecommunication, Information Studies and Media at Michigan State University, emphasises the need to encourage older people online with research published last year that found Internet use among the elderly could reduce the chances of depression by more than 30 per cent.

“It all has to do with older persons being able to communicate, to stay in contact with their social networks, and just not feel lonely,” says Shelia to MSUToday, who led the research published in the Journal of Gerontology in April 2014.

“If you're using it in moderation and you're doing things that enhance your life, then the impacts are likely to be positive in terms of health and well-being.”

Hugh Creswell is a group leader of the ‘Introduction to Computing’ course at the University of the Third Age Bournemouth. The course builds on knowledge its members - with an average age of 65 to 70 - already have, but focuses on the simple ways they can carry out everyday tasks.



Margaret Mullett winning the 2015 Silver Surfer

“Having that positive attitude gets you a long way, I see that with a lot of our ‘Silver Surfer’ winners. They're very positive and don't see themselves as being older.”

Since beginning the annual awards, Pauline has no doubt that they've made a difference to its winners. “They've transformed people's lives. It's just getting those amazing stories out there to people and inspiring others to give it a go.”

Find out more

For more details about YouTube, the video-sharing website used by over one billion people worldwide and increasingly popular with over-50s, see the website www.youtube.com. For information about the Silver Surfer awards, and Age Action's ‘Getting Started’ programme, see www.ageaction.ie.



Shirley Curry uses YouTube regularly to share her passion for video games

“The internet has been an incredible benefit”

When her husband passed away just six weeks after being diagnosed with Haemochromatosis (iron overload disorder), Margaret Mullet decided to lead the way in raising awareness for the disorder, which affects as many as one in 200 people.

Margaret, Chairperson of the Irish Haemochromatosis Association, used the Internet and digital media to build a national awareness campaign, in order to encourage earlier diagnoses and therefore reassure those with the genes that they will have a normal life expectancy.

Her work was recognised by Age Action and she won their reputed annual Silver Surfer Award last year.

“I was pleasantly surprised to get it,” says Margaret. “There were a very many hard working deserving people who were nominated as well but I have learnt a lot [about the internet] that I would never had done had I not been involved in raising awareness.”

Her husband George was working as a psychiatrist when he died at the age of 63, after a build up of iron in his blood had eventually made its way to his heart. Four years prior, he had visited a cardiologist due to an irregular heartbeat and hadn't been tested for iron.

“One of the main symptoms is chronic fatigue and in the old days people would go to the doctors saying I'm tired and the doctor would actually put them on iron tablets.

“That has changed a lot now, there's a far greater awareness.”

The work includes sending information brochures to every GP and pharmacist in Ireland and organising talks with medical professionals throughout the country using social media.

She says she is grateful to be able to organise such events online with her knowledge. “The Internet has been an incredible benefit to my life. I'm addicted to it almost.”

“The idea of the course is to get people who know very little about computers and help them to do the things they want ranging from emailing, using Skype to talk to relatives and using YouTube to get information,” explains Hugh.

“Part of [my colleague] David and my role is to say don't be afraid of the computer, it's just to use it. That is part of the U3A [agenda]; to give them the help and the knowledge they need.”

We're often concerned about our privacy, and some people may feel vulnerable when using the Internet for the first time.

Ex-IT industry professional Hugh Creswell advises a bold approach to new technology. “It's important that people of a certain age who are wary of computers need to be taught the tools to use to make them safe,” he says. “They may not know everything about computers but they've got lots of experience in other things, which may be relevant.”

According to the National Strategy Development Report published in July 2013, only 3% of those aged 75 and over had used the Internet. Age Action believes there is a real need to encourage more people to go online and use internet based services, especially those over 50.

“These are people who might be very confident, managing their affairs up to now but because they're missing out online they're certainly struggling,” says Pauline.

She thinks a positive outlook can vastly increase an older person's confidence to realise their potential.

“I started my own YouTube channel”

Sharing his interests with friends and making quality videos are two of the reasons why Paul Armstrong joined YouTube in 2010.

He regularly posts video blog type videos, how-to videos and nature videos on his modest channel, which currently has 342



subscribers and over 150,000 video views. He likes the prospect of becoming more popular online.

“I would like it if my popularity rose and more people subscribe to my channel. The more people that see the videos, the more ad revenue I receive,” says Paul, aged 51. I plan to continue to post videos about all kinds of things and engage my audience in the comments and on social media.”

Paul, who has been making videos since 2004, says finding the audience is difficult when the core YouTube audience is younger people, but advises those of a similar age to break ground online.

“I would suggest people 50+ to go to



YouTube and search for videos about making videos and starting a YouTube channel. That's one great thing about YouTube there are videos on how to do everything. You can learn how to start your own channel just by watching other videos.”

This happened to my sister . . . it could happen to you



What is Parkinson's and who is most at risk? Nicole Ray looks at the problems surrounding this largely unheard of disease

Julie Fryer-Kelsey was 42 when she was diagnosed with Parkinson's Disease. Within 10 years she was dead. Her disease had a huge impact on all her family. But sadly, reveals her sister Angela, Julie's story is not unique. It is a myth that Parkinson's just targets the elderly – it can happen to anyone. No one knows what causes the disease – and there is no cure.

Parkinson's occurs when specific nerve cells in your brain die causing the brain to stop producing dopamine, a chemical, which controls movement in the body.

Many people have little understanding of the disease. It is nearly always associated with the elderly, even though five per cent of sufferers are under 40 when they first experience symptoms.

Indicators don't begin to show until 80 per cent of the neurons have already died in the brain. Patients suffer from a variety of symptoms including tremors, muscle stiffness and slow movement. Because no two cases of Parkinson's are the same patients are likely to develop different side effects to their medication. Because of this doctors treat every case individually ensuring that

“A lot of people, even carers, don't understand what it is and are scared or don't know what to do”

the treatment for side effects doesn't interfere with medication to control symptoms of the disease. Physio and speech therapists also play an important role treating the effects of Parkinson's – like muscle wastage and loss of speech, while nutritionists work to maintain optimum health through diet.

Specialist nurses are there to support patients affected by Parkinson's and their families, making sure that they are aware of the therapies available. Dedicated carers are also on hand to offer support.

Sue Reilly has been a carer for four years, in which time she looked after numerous people with Parkinson's. 'It's a sad, evil disease that hurts and ruins everyone, including the patient and their ability to have

independence,' explains Sue adding that it can be hard for patients to adjust to their new life.

'They are fully aware of how they can't do things and remember what they used to be like so it's very, very hard on them emotionally so depression and upset interfere with their life too.'

Depression is a common side effect so patients are encouraged to attend local support groups. Care homes looking those in need of 24-hour care include special programmes such as animal therapies to help with patients with their mental health.

As the disease progresses in patients, some have trouble chewing, swallowing and talking. Speech therapy is often used in earlier stages of Parkinson's. However, if a patient loses their speech communication can be a huge problem for carers.

'There is always a way to communicate,' says Sue. 'Even body language or eye movements can let you know a lot about a person's day to day needs and there are boards to spell words, write or draw.'

Viv Kavanagh is one of the Parkinson's nurses working in Essex. Her job is to provide support for both the patient and their family and to educate them about some of the issues

they may encounter. Viv also keeps contact with the network of people who work with Parkinson's patients and will speak to them to make sure each patient has access to the facilities they need.

'This disease has a huge effect on not just the patient but the family as well,' explains Viv.

'Quite often you've got an elderly couple and the man has always been old school and wrote the cheques and done all the manly things and the woman's stayed home and run the household, if the wife gets Parkinson's then things get extremely difficult for the man. He would have to take on the role of doing the cleaning and looking after the house.

'You get a role reversal that can be quite traumatic.'

Viv also works to educate children affected by Parkinson's, especially if a parent is diagnosed with young onset Parkinson's, which affects one-in-twenty sufferers. 'With young children their whole life is turned upside down because there's an illness in the family that they didn't expect. It's impacted on their quality time with Mum or Dad so it's about getting the schools involved at that point.'

Viv feels there needs to be more awareness for both the general public and for those in the care profession.

'It's got a hell of a lot better but there's still work to be done. Parkinson's UK have a team that go around to GP surgeries and nursing and residential homes and do training. I think it is getting there but it is also about trying to advertise, trying to ensure that people are educated.'

'We're a limited service,' says Viv. 'There's one full-time Parkinson's nurse in the county and I'm part time so I do three, 12-hour days. There's also an MS nurse and we cover her when she's not around too so we'd like to try to get someone else on board.'

Awareness of the disease is a big problem. Both Sue and Viv have voiced concerns about the lack of awareness surrounding Parkinson's.

'Many people, even carers, don't understand what it is and are scared or don't know what to do when meeting someone with the disease,' reveals Sue.

Viv speaks about the struggle that families can face due to lack of awareness. 'When people go into homes through no fault of their own, whatever the circumstances may be, the other brick wall we hit is getting homes on board with care plans, following the care plans and giving the right care. If the patient has a good family, they can be forever battling to get things done which is a nightmare.

'But what about all the poor people who don't have a family to be an advocate for them?'

She also feels that more people needed to be made aware of young onset Parkinson's.

'People think that it's an old person disease - but there are teenagers with Parkinson's so that needs to be incorporated.'

Although there is no cure, a very small percentage of patients are able to undergo an

“It's a sad, evil disease that hurts and ruins everyone, including the patient and their ability to have independence”

operation that can relieve the symptoms of Parkinson's for several years.

Deep brain stimulation (DBS) involves holes being drilled in the skull and electrical stimulants being implanted in the mid-section of the brain. Another operation is then carried out to fit a device into the chest of the patient. While this works for the few people who qualify for treatment, the majority are left without a cure but many medical experts in the community are positive we'll see a cure within our lifetimes.

Dr Noyce, Parkinson's UK Doctoral Research Fellow at University College London (UCU) is currently researching how to predict Parkinson's in people before symptoms develop. His predict PD study involved participants, aged 60 or over, filling out forms online which helped the team look for very early warning signs for Parkinson's.

The next stage in his research is to complete the study with 10,000 participants. Dr Noyce hopes that by being able to predict the disease before it affects the patient, he and his team can develop a preventative treatment that could also lead to a cure.

'I wouldn't be doing this job if I thought a cure wasn't likely, so I anticipate that we will have a disease modifying treatment for Parkinson's during my lifetime and I would like to be able to say that we will have a cure as well,' says Dr Noyce.

Professor John Hardy, who works alongside Dr Noyce, has been researching Parkinson's for over 20 years. For him the big challenge now is turning the research into a treatment.

'The trouble with the brain is it's very difficult to get selected drugs into exactly the right place, to do exactly the thing you want them to do so it's a real challenge because to change things very selectively in the brain is a very big challenge.'

Professor Hardy also shared his experience with Parkinson's. 'The thing about the disease is when you're diagnosed, you get therapies, the most common one is a drug called L-dopa and it does enormous good. It's so good that at first the disease really seems very benign so in the early years all the patient has to do is take a tablet. But gradually the disease gets worse and they need higher and higher doses of the drug until eventually the drug does not do any good at all.'

While the next step has to be research in clinic for a cure, the wider Parkinson's community continues to work to care for patients with the disease, raise awareness and fundraise.

Julie's story



Julie with her sisters on her wedding day

Julie Fryer-Kelsey was diagnosed with Parkinson's in 2006, she was just 42 years old. Julie is one of the 5% of sufferers that was diagnosed with young onset Parkinson's. Julie was prescribed some drugs and sent home to her husband and, then, six year old daughter.

Julie's illness meant that she was moved to hospital before finally being moved through various care facilities. It was here that Julie's family visited her every day and forged relationships with the carers and staff looking after Julie.

A lack of awareness can mean that patients don't always get the care they need, this was a problem Julie encountered numerous times.

Julie's sister, Angela, spoke to me about how Parkinson's had an effect on the whole family. 'Seeing your loved one trying as long as possible to do things for themselves and struggling to do it, coming to terms with the fact they can no longer do simple things is heart-breaking.'

Angela also appealed for more support for families: 'I think there should be more support for families who have to deal with this. There is very little in the way of support groups.'

Sadly Julie passed away in November 2014, due to pneumonia – an illness which is common among Parkinson's sufferers.

Addressing all the issues that face Parkinson's sufferers at once is the only way to ensure progress is made and a cure is found. To get involved or learn more about Parkinson's go to www.parkinsons.org.uk

If you've been affected by Parkinson's help is available from the Parkinson's UK helpline on 0808 800 0303. ●



The word

Does chivalry still have a place in today's society or is it a threat to equality?
Alex Hastie investigates

‘Our generation has seen women achieve the impossible, so I think an idea as simple as chivalry is one that can change with equality’



Jo Hemmings at ITV Studio's popular show 'Good Morning'; she dedicates her career to the clients she has helped

During a get together not so long ago, a male friend voiced, what is probably a popularly held opinion: 'in this day and age where the fight for gender equality is the strongest it's ever been, why am I still having to pick up the tab at the end of the night?'

Interestingly, this led to an outburst of cries and cheers from everyone else. 'Yes! It's ridiculous, it should be fifty-fifty,' yelled one. 'No, no. Equality and romance are two different things,' added another.

Access to first dates for young men and women is easy these days. With advancing technologies and the rise of dating apps, anyone can get a date if they want to. But does chivalry really still exist. And is it a bad thing if it does?

To this day, a woman will only earn 80p to every £1 a man makes. So, could offering to pay for a dinner bill, be seen not only as a chivalrous, but also a fair way for compensating for this inequality?

As Charles Kingsley said, "the age of chivalry is past, the spirit of romance is dead". Or has it simply evolved with time into a fashion that suits our taste?

First Dates new season airs on Channel 4 the night I meet Jack Bedford. A 24-year-old

broker and 'contestant' who is still sticking around London after his attempt on Channel 4's hit show, a fact that makes even him smile. He is unimpressed by the way he was represented on the programme.

'I'll probably will never have a date again,' he says. 'Or not at least with someone human.' Despite this, he seems relaxed and at ease - even flirtatious - but then Bedford is a serial dater. I can see he has a face that many would find attractive, and dressed in jeans and a casual shirt, instead of the smart suit she sported on the show, he is, to me, more appealing.

When Bedford entered the age of casual dating in his late teens, courtship and handwritten love letters was archaic. But what about paying the bill?

'It is definitely one of the most awkward parts [of the date] for me,' Bedford says: 'Because you're technically fighting on the first date. It's definitely a test for domination for me.'

'My mum always taught me that men were the providers, and that women were the homemakers. She was raised in a different time so I see and respect her values, but growing up, our generation has seen women achieve the impossible, so I think an idea as simple as chivalry is one that can change with equality.'

An so, in an age of equality, he believes it should be naturally assumed the bill is split.

'For me, I think, I work hard to earn my money, and I do it to save up for my future, and what angers me is that I could be potentially wasting it on dates that will never amount to anything. I will always offer to pay, not because it's the gentlemanly thing to do but because it's the polite thing to do, but the minute a woman doesn't argue or offer to split then, as *Dragon's Den* would say: "It's a no from me".'

'That's what happened on the show. I declined her offer of a second date, even after we got on so well and really had the viewers support, but after she refused to split the bill, I knew she wasn't the one for me.'

Bedford believes chivalry can play a part in modern day romance, that it must 'evolve and grow with equality' nonetheless. So can women be perceived as chivalrous? Should today's woman be making as much effort when it comes to courtly lover, as a man is expected to do? Bedford disagrees: 'You say chivalry, and I immediately think of a man holding a door open for a woman, picking her up, paying the bill. I would never associate a woman and chivalry together.'

Lucy Gauntlett, a philosophy and psychology postgraduate from Durham University, fights for gender equality. As

a volunteer and contributor to Feminism in London 2015, she has both seen and argued against her fair share of gender discrimination, but agrees with the ideologies held by Bedford.

'I believe on a first date, as on any date, the two people involved should split the bill,' she says.

However, perhaps surprisingly, this doesn't seem to be the view held by the majority. According to a recent poll conducted by OnePulse, 70 per cent of the interviewees that took part responded that the man should pay for the first date. Gauntlett argues that this seems to be a classic misunderstanding of the principles of feminism: 'we do not want to be treated differently, we wanted to be treated equally.'

She explains, in layman's terms, 'if you're only holding the door open for women, then it could be perceived as anti-feminist, but if you hold the door open for everyone, you are being well mannered, and I will walk through with a smile of gratitude.'

So can chivalry and feminism ever exist side by side?

'I believe chivalry has its place, but maybe the concept should be updated. If you look at the origin of the word, it derives from the code of conduct knights held themselves too, and maybe it is this origin that means we only ever seem to apply this word to men. However, chivalry in it's most basic form is manners. Women and men both have manners, they can both use them with each other and it is in no way disrespectful or condescending, but to assume only a man can show this courtesy is wrong. That view of chivalry should be abolished.'

Next I spoke to Jo Hemmings, who is known for her role as a behavioural, media and celebrity psychologist, and asked what chivalry meant to her.

'What it means to me is just courtesy,' she says. 'It's good manners. Someone who has been brought up well, who understands its just being polite. It's being courteous, more than the very big gestures,' she continues. So what does she think about the idea that chivalry is seen by many to involve the gentleman picking up the expenses at the end of an enjoyable evening? She laughs, as if I'd insulted her:

'Well I think that's ridiculous.'

Unfortunately, not everyone agrees with Hemmings' upfront definition. Beth Murtagh, an Oxford graduate and successful business entrepreneur,



“The worst thing we can do is re-label chivalry. That just opens a window for the whole world to complain”

still upholds the 11th Century characterisation of the word and, to this day likes to apply it to her everyday life.

'I see chivalry in the romantic sense of men cherishing and protecting women. To me this is because women are important, not because they are weak.'

Murtagh found herself at the end of some controversy earlier this year after starting an online dating website entitled "chivalrynotdead.com", a site that only allows the men to approach the women.

Given the fact Murtagh already has several success relationship stories emanating from the site, there are clearly enough people who believe not only that chivalry can exist, even in a digital, feminist world, but are willing to embark on a relationship with an ethos of chivalry at its foundations.

Murtagh's advice for people like Jack, and to anyone else playing the first dates game, is this: 'If women are informed about chivalry and how men should treat them, then they can weed out men who will only treat them badly. To me, this is why chivalry/traditional dating is extremely woman-positive, as it enables a woman to make good choices about the man she wants to be with, through the behaviour he has demonstrated towards her.' Hemmings has doubts: "The worst thing we can do is re-label chivalry. That just opens a window for the whole

Above right: A photograph taken from an art exhibit entitled "The Men of Chivalry", by artist Thus. Left: Graham Campbell's attempts to portray the balance of French swordsmanship and gentleman decorum



world to complain,' she says. However, for many, whether chivalry is acknowledged or not, the medieval tradition has carried its torch through the centuries and embedded itself deeply into the heart of our human characteristics.

Regardless of whether the definition of chivalry will ever be accepted without comment or not, it seems it could take a long time before there is a shift in what is, and isn't considered acceptable behaviour at the end of a dinner on a first date.

As I say goodbye to Bedford and he stands to head off towards yet at another first date, he surprises me: 'I mean if I'm honest,' he admits, 'I don't think it will ever get to a day where it's seen as a acceptable attitude to split the bill. There will always be one gender expecting the other to pay.' ●

Note: names may have been changed.



BODY DEMON

Many of us look in the mirror and see imperfections but, for some young men, this feeling never goes away. Being worried and anxious about how they look is an everyday concern. **Alice Fiancet** investigates

D

Dominic Edwards is 31. At the age of 14 he started having negative thoughts about his legs and began to think they looked too skinny and effeminate, 'I would check men's legs in magazines and check mine in the mirror. It was an obsessional thing where at its worst I'd be in front of the mirror for 10 hours.' The mildest comment that someone made; even if just in passing, would turn into an obsessional thought, 'You become worried that in some way you're different from other people. You're operating on 20 per cent because you can't think about anything else.' Edwards suffers with body-dysmorphia disorder (BDD), a condition that affects 1-in-10 men in the UK.

According to Cognitive Behavioural therapist Stuart Mead, it is a condition where people have a preoccupation with a part or parts of their body that they are not happy with. 'It affects the way they think, the way they feel, their behaviour, their relationships and the way that they live their lives.' Edwards reiterates this by saying that a sufferer will become obsessed with an aspect of their appearance and that thought won't go away.

'You start doing these behaviours and you cannot stop doing them because they relieve the anxiety related to that thought.' His preoccupation with how he looked started out slowly but over time it got worse. He began to exercise excessively, having to go for a run everyday before doing anything else in order to relieve the anxiety he was feeling about the way his legs looked. BDD is an anxiety disorder affecting at least two per cent of the population and it is becoming an increasing concern for men. Many of these will be suffering with muscle-dysmorphia, a form of BDD that leads men to abuse their bodies, overdose on steroids and in some cases can drive them to suicide.

BDD is beginning to get more exposure and is becoming a real concern, but the disorder itself isn't the only problem. More and more sufferers are turning towards the use of steroids as a means of helping them to get the body that they so desperately want. Figures published by the Home Office show that 60,000 people were using steroids in 2014, but it is estimated that there are a lot more. According to Professor Julien Baker,

who specialises in steroids at the University of the West of Scotland, needle exchange centres have seen a usage increase of 600 per cent in the last decade with the average age of steroid users now being men in their early 20s. Between 2009 and 2012, the number of teenagers who used steroids more than doubled, Professor Baker's research has found that children as young as 13 are using them, but why are people taking steroids and what has led to this sudden increase?

Serious steroids

Many experts believe that the growing culture of quick results and instant gratification could be linked to the rise in BDD sufferers choosing steroids. Drug-free British bodybuilding champion Jon Harris echoes this sentiment. 'People want results now rather than later,' he added that people aren't prepared to wait. 'It can't be done overnight so the shortcut is to use drugs to get there.'

Altug Kop, who suffered with muscle-dysmorphia from the age of 16, believes that the "pitfalls" of Instagram and Facebook are to blame. 'You get images of shredded men and women thrown at you everyday and it's not realistic for 99 percent of the population to look like that.' Kop had always idolised the biggest names in wrestling and wanted to be just like them. He thought that to get to the top of his game he would have to get 'as big and as huge as possible'.

At 16 he was given the chance to go to wrestling school but once he got there, reality hit. He thought he could look like some of the top men in wrestling almost instantly but his naivety was soon squashed. He soon realised that everyone else was bigger, stronger and more powerful than him. Some of the trainees at the wrestling school told him he would never get to be as big as the well-known wrestlers naturally and pushed him into considering the use of steroids to help him reach his goal. Following two years of researching, Kop decided he was going to take steroids. 'I felt I had to give myself that edge.'

Harris considered taking steroids at 19 after he had competed internationally. After doing research and realising that there were serious risks attached; which he believed outweighed the benefits and muscle growth he would experience, he decided against it. Harris found that there were lots of options for him to compete drug-free, and spurred on his career as a drug-free bodybuilder.

'I felt I had an avenue I could pursue safely and didn't need drugs.' Harris believes that those people who decide to take steroids fall into one of two categories. There are the competitive, bodybuilder types who want to win as many shows as possible and then there are the "normal" gym types who simply want to grow big quick.

Harris sees the need for instant progress as one of the biggest downfalls. 'People want results yesterday, they are not prepared to wait,' he believes this is one of the biggest reasons people start taking steroids.

Many people do not know what they are getting into when they start taking steroids. People believe they are taking steroids in order to aid muscle growth but with many psychological and physiological effects associated with them there could be long-lasting health implications leading to life threatening consequences. Professor Baker explains some of the health issues related to steroid use, "One of the main consequences is an increased risk of cardiovascular disease and a higher risk of cerebral events." With the Internet being so accessible, it's not wonder that buying steroids is easy. Kop fell into this by purchasing his online but realised taking them wasn't going to be that simple, "I was always scared before I did it because you heard horror stories about people going into their sciatic nerve". Accidental damage is a major factor associated with the use of steroids and a lack of knowledge about what they are taking is one of the biggest killers. Professor Baker conducted a study where he bought steroids online and analysed them. In his research he found that over 30% of the samples were counterfeit, with one of them containing aftershave and olive oil. He explains, "You've got clandestine laboratories springing up all over the place which are not regulated. You don't know what these

"I suffered in silence until everything started falling apart. I was late for everything all the time"

people are putting into the substances they are selling." In the last five months, two young men died from steroid use; one of whom idealised wrestlers, highlighting the seriousness of one of the problems associated with BDD.

Bigger problems

Among many of the issues, sufferers will not talk about their problems. The average BDD sufferer will keep silent for a long time before seeking help, some even waiting 10 years. Edwards understands this all too well, 'I suffered in silence until everything started falling apart, I was late for everything all the time. There were days where I had to call in sick because I couldn't handle it.'

With this silence comes the danger of suicide, it is estimated that 1-in-every-330 people diagnosed with BDD take their own lives each year but recovery is possible. As with other mental disorders, families play an essential role in the recovery process.

Edwards' father was the one who helped him realise that he had a problem. After finding a webpage that described Edwards' symptoms his father encouraged him that seeing a doctor. The treatment for BDD involves a combination of medication and cognitive behavioural therapy (CBT).

Sufferers are given Serotonin re-uptake inhibitors (SSRIs), a known antidepressant that decreases the obsessive and compulsive behaviours.

Mead explains that CBT works by looking at situations people find themselves in and their reactions to those situations. The therapist then works with the sufferer to try and find ways of changing those reactions into something more positive.

Edwards explains it from a sufferers point of view. 'By showing these behaviours I was backing up the belief that my legs were too skinny,' and explains that the therapist helped him to realise that what he was doing was destructive.

Kop and Edwards battled with their body demons but have both found ways to cope with BDD. Kop has started a fitness blog to help people exercise without becoming obsessed with aesthetics or falling into BDD. His modus operandi is to stop kids from getting into steroids. 'You can't inject years of training in a bottle.'

Edwards now works for the BDD foundation helping other sufferers cope with their disorder. 'There is a way out, the recovery process is possible. I was diagnosed at 19 and have been getting better ever since.' You can keep your body and soul together. ●

GOOD ADVICE

"The biggest problem with BDD is recognising you have a problem. Once you realise there is an issue the next step is to seek psychological help."

Stuart Mead

"It's considered an honour to take steroids nowadays in the gym. I would say do not overlook the health implications."

Altug Kop

"Take some time, don't jump into using steroids too quickly and weigh up all the potential negative side affects before making a decision."

Jon Harris

"It's all about education. Young people need to be told about the dangers of using steroids and what it does to your body."

Kevan Wilson

"There is a way out, it's about instilling hope and reassuring them that the recovery process is possible but also realistic."

Dominic Edwards

BDD Contact Helplines

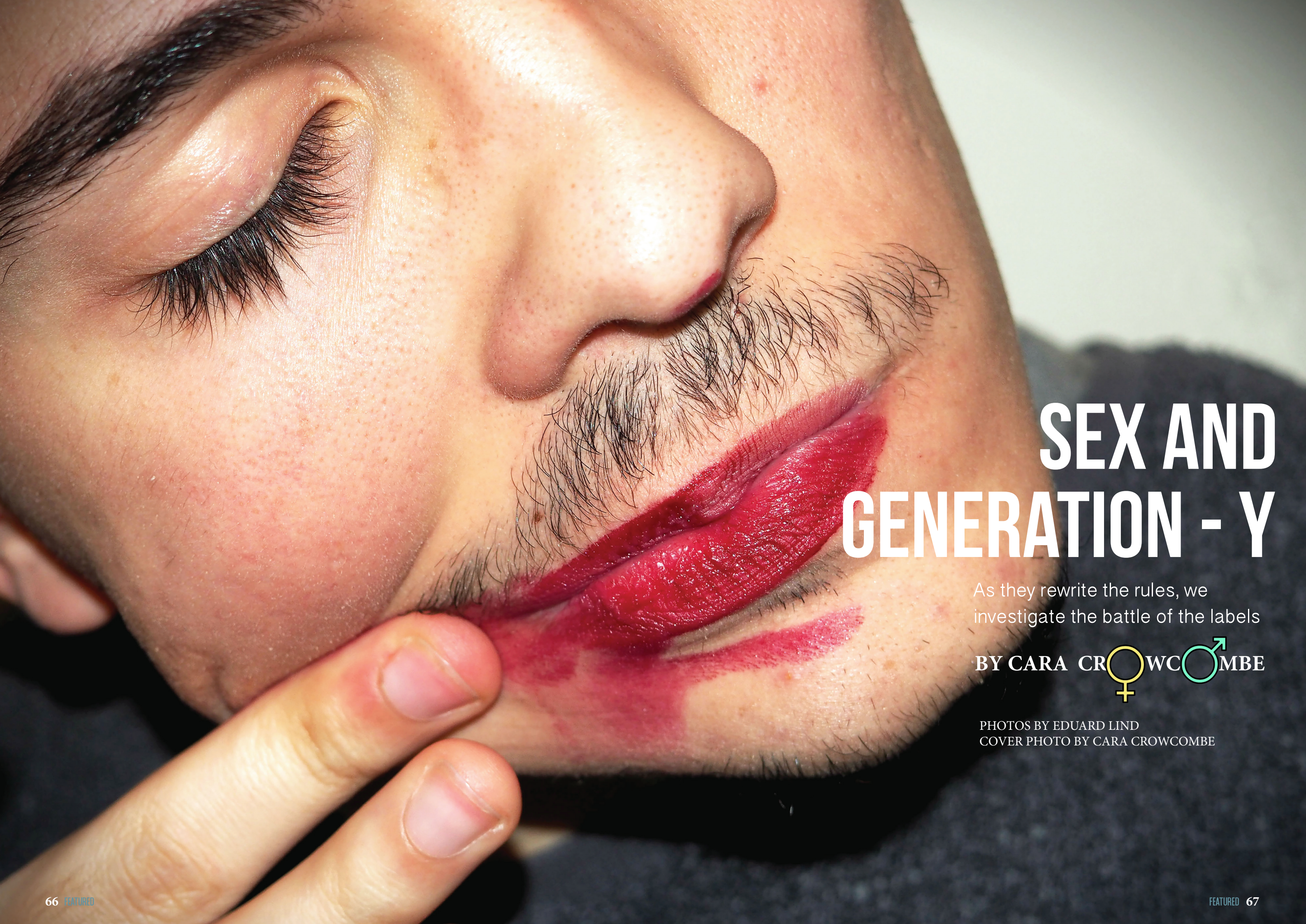
OCD-UK: **0845 120 3778**

HOPELineUK: **0800 068 41 41**

Mind Infoline: **0300 123 3393**

Rethink: **0300 5000 927**

Saneline: **08457 67 80 00**



SEX AND GENERATION - Y

As they rewrite the rules, we
investigate the battle of the labels

BY CARA CROWCOMBE

PHOTOS BY EDUARD LIND
COVER PHOTO BY CARA CROWCOMBE



Half a century ago your parents were dropping acid, wearing tie-dye clothing and going to music festivals before tickets cost the same as a month's rent. It was the psychedelic daze of the 60's, and they were decadently throwing themselves into the largest sexual revolution of recent history. Now it's your turn.

It's a new revolution, with new conventions of sexuality which go beyond the infinite access to porn and readily available dating apps. This is more than just the 'hook-up' and instead at the heart, is a debate about the abandonment of society's pre-approved rules and titles. This is Generation-Y and the rules don't apply to you. No clear-cut gender requirements, no rigid labels of sexuality. Generation-Y aren't fussed about telling you who they want to have sex with, because it's none of your damn business.

Amy Smith, 22, a Business Support Assistant from Reading, identifies as Bisexual, but won't be ditching that label any time soon.

'The problem with saying that you can live in a label-less society, is that some people have faced the brunt of these things for a long time. You're tormented and punished for being Gay or different and now everyone is jumping on the fucking band wagon.

She continued: 'I can see how it might anger people who would say; I've actually fought for this title and I'm proud of this title, I'm not

going to have someone turn around and say actually you're nothing special.'

Jessica Howie, 21, a recruiter from Hampshire, stands at the opposite end of the spectrum, refusing to be categorised as Bisexual, Straight or Gay.

'When you're growing up there are all the external factors, that say you should be straight, or you should be this or that.'

Sitting in her single-bedroom flat, decorated with delicate flowers and feminine touches, sipping coffee from a heart shaped patterned mug, Jessica spoke about being non-binary in her sexual orientation, and the complexities of sexuality as a twenty-something in today's world.

'Everyone wants to pigeonhole you. So it's actually quite difficult to take a step back and say, no this is who I am.' Jessica said.

'Labels to me are a source for people to hate. When it comes to identifying, some people for clarity need to label things. I don't, but I'm not ashamed of who I am.'

Jessica, like many of her fellow Millennials, believes that sexuality is fluid. This means that a person's sexual orientation can evolve over time, rather than having one type of attraction for a lifetime. This idea has become more familiar with young people and last year a YouGov survey quantified the belief. Based on the Kinsey scale of sexuality, YouGov found that 43 per cent of 18-24 year olds placed themselves in a non-binary area of sexuality.

Meaning almost half of Generation-Y don't identify as exclusively Straight, nor exclusively Gay. It caused quite a

stir. For Will Dalhgreen, editor of YouGov's UK news site, the results didn't come as that much of a surprise.

'There is this sort of feeling in the air that something has changed. The labels have become quite blurred. They've become less important to people,' revealed Will.

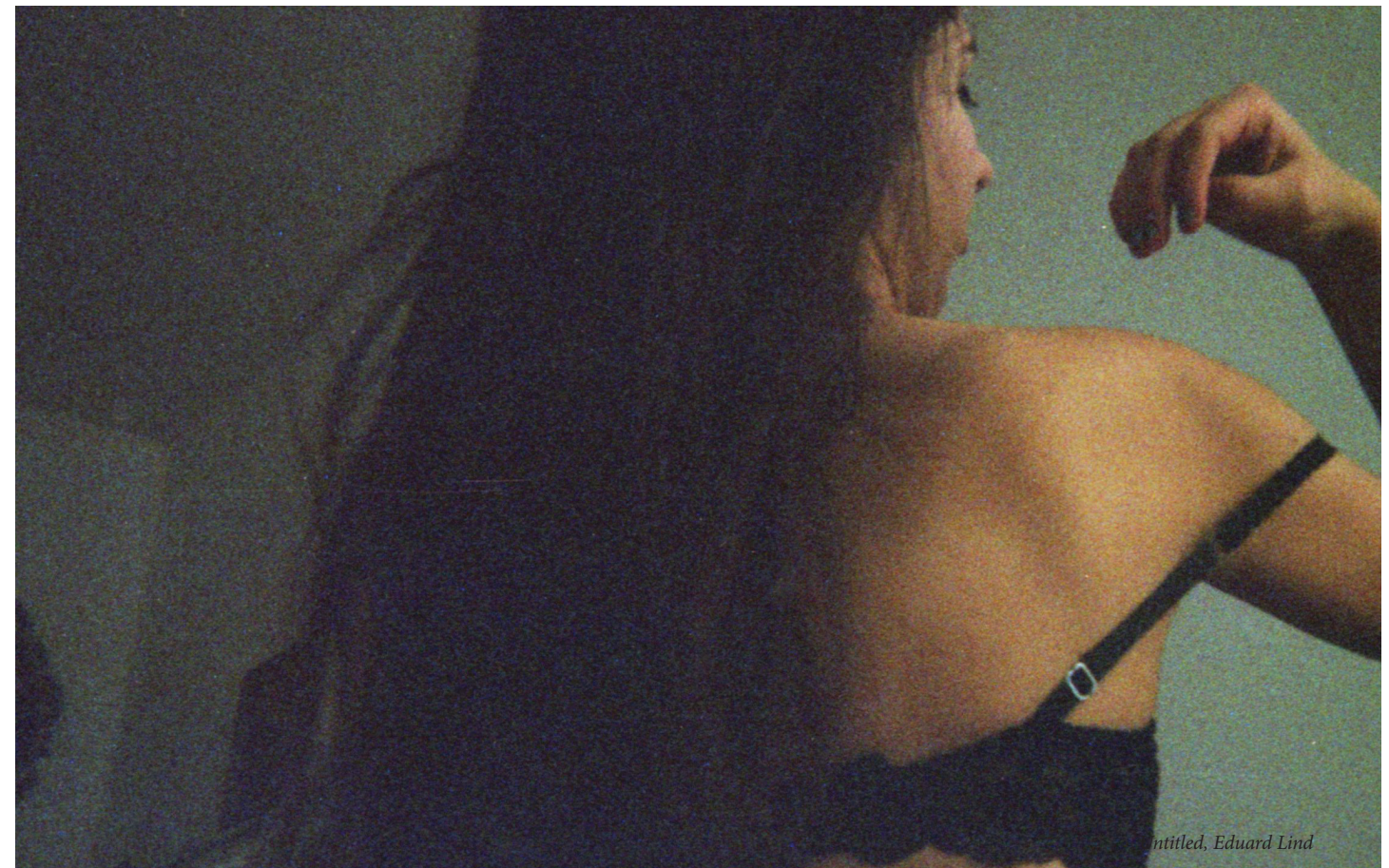
'I don't know if we are going to lose labels, they are useful for the minorities because it helps fight their cause.'

Amy, who has had relationships with both men and women, and is currently in a long-term relationship with her boyfriend Matt, explained how people often misconceive Bisexuality. 'I think that Bisexuality gets merged quite easily with Pansexuality, but I have successfully assimilated to a hetero-normative existence, because I've got a boyfriend. But if there is someone who has openly had lots of sexual partners of both sexes, instead of them being Bisexual people just assume they'd fuck anything.'

While the recognition of a fluid sexuality is becoming more popular with Generation-Y, the divide in this debate deepens when we ask, how exactly does sexuality define a person?

Jessica said: 'I think people let it define them, more than it has to. I don't have a description for my sexuality. I'm not going to restrict myself. But people let it determine the course of their life.'

For a generation of people with a whatever-attitude, the large majority of them would still prefer their sexual identity to not be their single resounding feature. There is more to Generation-Y than the people they are attracted to. But not everyone would agree



with deserting his, or her sexual orientation entirely. 'I think it is something much like race, sexuality is something which does sculpt who you are. I think that the way people get so touchy about it, just goes to show that it has a huge implication on how other people see you,' said Amy. She's not wrong.

Taking ownership of her sexuality, Avni Mohindra, a Pansexual 21-year-old from London, suggests that labels are used to satisfy other people – but not in a bad way.

'I think labels help inform others about what kind of person you are. What sexuality you class yourself as, is really to help others, understand what makes you, you,' says Avni.

As a typical member of Generation –Y, Avni's social media presence is an important part to her life, you can find her regularly preaching self-acceptance and positivity to the 31,000 followers she has amassed on Twitter, unless she's busy doing live chats to fans on YouNow.com.

A quick Google search for "Pansexuality" and you'll be told that it's the attraction to any person of any gender identity. Often Pansexuals are confused for being Bisexual, but the two orientations differ greatly. Bi, refers to the Latin term meaning 'two' so two genders only, whereas Pan is derived from the Greek meaning of 'all'.

Avni is proud of her sexuality and individual interpretation of it. 'I believe that there are more genders out there than just man and woman, I also feel that no matter what you identify as, if I love you and you love me, gender is irrelevant.'

Over the last two years a steady stream of new research about sexuality, has come

to light, with claims and headlines such as: "Women are Bisexual or Gay But Never Straight" which followed a study by Dr Gerulf Reiger, who's research showed exactly that, supposedly. But some people find these kind of click-bait articles to be insulting and a misrepresentation of sexual identity. Amy said: 'It is a difficult thing to quantify and it hasn't given me solace. I certainly don't see it as a sort of salvation, I don't think, oh yes finally I'm not alone.'

Sarah Berry, a former sex journalist and psychosexual relationship therapist, has worked with people who identify across the spectrum of sexuality, for a range of different issues such as concerns with sexual identity. Sarah gave her insight into how sexuality can define a nd affect a persons mentality. 'I find a problem with sexuality often falls into an existential area. People question who they are and what they want. The pressure to conform to society or a group can be internal as well as external,' said Sarah.

With sexuality playing a hugely important part to the human psyche, she explained the negative implications that can happen when someone is detached from their true feelings.

'People who feel at odds with their sense of sexuality may try to repress it and become anxious, aggressive or depressed.' So for the state of your mental health, it's vital to be true to yourself. But that's easier said than done. Many countries, cultures and religions hold sexuality as a defining force. The UK for example, is very hetero-normative, and falling

“MANY CULTURES AND RELIGIONS FIND SEXUAL AND GENDER DIVERSITY CHALLENGING”

outside the married-with-children situation can sadly affect a person's sense of self. Many cultures and religions find sexual and gender diversity challenging.'

When it comes down to interchangeable sexual attractions and definitions, Sarah believes that labels still play a significant role in the psychology of sex. 'Some feel that labels provide a home and identity, but it's a personal thing. I feel it's important people recognise that a label can be sticky; sexuality can be fluid. Finding individuality within these labels can be important.'

Some might see this label-less movement as a fad or metaphorical shrug to the battle that the LGB&T communities have dealt with in the past. But Generation-Y would argue this notion of fluid sexuality isn't just a way to meander through sexual experimentation – it's real. The battle of the labels persists, but clearly is a personal journey, one that serves those who refuse to fit into cookie-cutter moulds of society.

Yet it is equally important to the kids wondering where they fit in, because they aren't like their parents. No matter what Generation-Y decide to call themselves, they understand that these labels stand on their own. 'There's no reason why these things should be lumped together as much as straight people, vegetarians and cat lovers should be put together, they're all just so different from

THE POO TABOO

Women in their twenties are more likely to suffer from a bowel condition than any other age group. Yet talking about going to the loo for a ‘number two’ seems more taboo than sex, religion and politics, resulting in a nation of silent sufferers. **Scarlett Dixon** investigates

Career driven Alice* could pass for your average twenty-something successful woman. Highlighted blow-dried hair, a Michael Kors tote at her side and gorgeous nude wrap-around heels which snake up her St Tropez bronzed legs, she looks every inch the perfectly put together girl. But we’re not here to talk about Alice’s appearance; instead we’re going to be discussing the one thing that affects her daily life that can’t be seen on the outside. For Alice is a sufferer of an invisible illness, a bowel condition characterized by alternating periods of diarrhoea and constipation, in addition to bloating, severe abdominal pain and nausea. Alice has IBS.

Her happy-go-lucky mood changes as she recalls the first time she experienced some of the crippling symptoms associated with the condition.

‘I remember feeling okay that morning. I had a bit of a nervous tummy as I had an important meeting booked for the day.’

‘Once at work, I started suffering from shooting pains in my stomach – so severe I was doubled over and had to rush out to go to the toilet. They had to cut the meeting short in the end and I was mortified at having to explain what was going on.’

‘I do now manage it on a daily basis with medication, but when you’re fluctuating between periods of sitting on the toilet for three hours every morning and then not being able to go for days on end, it does somewhat impede on the things I want to do.’

‘Often, when I’m having a bad bout, I am so afraid to leave the house and I turn down social occasions with friends unless I know there’s a toilet nearby. I find my bowel condition so embarrassing, only a handful of people know about it.’

And Alice isn’t alone. In fact, a recent study undertaken by Yakult for Gut Week revealed that 59 per cent of Brits have suffered from a chronic or on-going bowel condition. Women in their twenties being the biggest group affected and 1-in-5 experiencing nasty digestive symptoms. But while it may be extremely common, the study also found that there was an overwhelming social stigma surrounding toilet habits – with over 59 per cent not telling a soul other than their GP.

Although Fifty Shades of Grey may have

paved the way for more risqué sexual fantasies to be seen as less taboo, bowel conditions such as Irritable Bowel Syndrome, Inflammatory Bowel Disease and Diverticular Disease still have a stigma attached, causing embarrassment, social isolation and intimacy issues.

Affecting lives

Gastroenterologist Anton Emmanuel works with CORE, a digestive charity aiming to raise awareness and provide support for sufferers. He believes the foundation of the taboo is in the “invisibility” aspect of the condition itself.

‘Individuals cannot see sufferers in pain as they may look normal on the outside but internally, they are in vast amounts of discomfort which is incredibly debilitating.’

He also argues that the seemingly trivial nature of the symptoms can contribute to the stigma.

‘Many people have had short-term symptoms or food poisoning on holiday, which might be why we write it off as not really worth speaking about. However, having it daily and unpredictably is very different. Patients can’t wear the clothes they want due to severe bloating and they may have to rush to the toilet without warning while they’re with friends or partners, it’s very socially isolating.’

And, in a generation where FOMO (aka Fear Of Missing Out) is part of every twenty-something’s consciousness, how does the socially isolating aspect affect sufferers?

‘There have been times in the past that I’ve felt left out of the fun because I’ve had an episode, either balled up in bed or in the bathroom. I’ve also had to miss out on travelling and cut trips short because of the discomfort and embarrassment of having to spend all my time on the toilet,’ explains Ulcerative Colitis sufferer Caryn Nelson, 26.

Alongside maintaining friendships, starting a new relationship and being intimate is another thing difficult to balance alongside a bowel condition, as Crohns Carly Trigg, 23, recalls.

‘When I began to get serious with my now boyfriend it was hard to show affection when I didn’t feel myself. I was even reluctant to mention it to friends at first as I didn’t want to seem like an old woman with bowel issues.’

IBS-sufferer Samantha Jones, 29, agrees: ‘Intimacy with someone new is nerve-racking enough but the last thing you want is to be hiding out in the bathroom. I used to have clothes in a size 10, 12 and 14 in my wardrobe because often I’d get so bloated I’d look five months pregnant.’

She continued: ‘Being sexy is the last thing on your mind when you’re having a bad bout. But when you’re with the right person, they’ll understand. My boyfriend even orders food

“It’s something I find so embarrassing, only a handful of people know about it”

that he knows won't cause my "tummy issues" when we eat out."

Clinical Psychologist Melissa Hunt furthers the idea that communication is key to defeating any issues that arise in the context of a relationship. 'Shame and secrecy are intimacy killers, both emotionally and sexually. Being frank and unembarrassed about your stomach issues in the context of an intimate relationship is the key to success.'

Banish the stigma?

Nick Read, founder of The IBS Network, looks into the psychological aspects of bowel conditions and believes that although the symptoms can be very embarrassing, the answer to overcoming them is not in the hands of other people, but the sufferers themselves.

'Often we fear disapproval of others, we create feelings of shame and disgust that we project on to others however they may not have a problem with it. The stigma is often in the patients mind rather than actually existing.'

He also believes that having a heightened awareness of other people's perceptions can be detrimental to living with bowel conditions on a daily basis.

'If people feel stigmatized, it will erode their self confidence. The key to breaking the cycle is to talk about the condition. It's important to develop feelings of self confidence to defeat the embarrassment and look into receiving treatment such as CBT.'

However, Clinical Psychologist Melissa Hunt disagrees and argues that the social stigma needs to change in order for sufferers to defeat their own internal worries.

'Public education, a better understanding of the condition itself and wonderful spokespeople are what it takes to de-stigmatize something like this. Being deaf or trans-gender used to be highly stigmatized and are now far less so due to those in the public eye such as Marlee Matlin and Laverne Cox taking the lead.'

As a sufferer of IBS myself, keen to put all my new found knowledge regarding stigmas and communication to good use, I decided to take action and talk about my digestive issues online.

Having previously kept things a secret from all but close family members and friends, I poured my thoughts and findings into a template on my blog and nervously hit post.

Would people see me differently, think I was disgusting or shun me as a friend? Results were surprising. Comments streamed in from all over the world, sharing their own experiences, stories and tips.

'Finally, a post I can relate to,' wrote Chloe, "you have no idea how much of a relief it was to read that someone else

What's What?

Having a one-off bout of diarrhoea or constipation doesn't necessarily mean you have a bowel condition, but it's worth getting any new persistent or worrying symptoms checked out by a doctor as soon as possible. Dr Lisa Das outlines several of the most common conditions:

IBS: Irritable bowel syndrome is a chronic functional gut disorder manifested by recurrent abdominal pain and changes in stool frequency and consistency, often with flatulence and bloating. This syndrome causes bothersome symptoms but no significant complications or increased risk of serious disease. Treatments may include a reduction of the amount of dairy in a sufferer's diet, laxatives, antispasmodics and mild anti-depressants, the latter of which can be helpful if anxiety increases the intensity of symptoms.

IBD: Inflammatory bowel disease is a chronic inflammation of all or part of the digestive tract. IBD primarily includes Ulcerative colitis (UC) and Crohn's disease, both of which usually involve diarrhoea, pain, fatigue and weight loss. IBD can be debilitating and although rare, can lead to life-threatening complications.

UC: Ulcerative colitis causes inflammation and ulcers in the innermost lining of the large intestine (colon) and rectum. Anti-inflammatory medications such as Aminosalicylates are used in the first instance of a diagnosis to treat the symptoms associated. Steroids may also be used to treat the inflammation.

Crohn's disease: Crohn's can cause inflammation of the lining of the entire digestive tract (starting from the mouth) and often involves the small intestine and/or large intestine. Inflammation can spread deep into affected tissues and cause extreme tiredness and joint pain. Steroids are often used initially to bring the inflammation under control, as well as immunosuppressants.

Coeliac disease: An immune-based reaction to dietary gluten (found in wheat, barley and rye) that primarily affects the small intestine. There is a genetic predisposition to Coeliac disease and there has been an increased rate of diagnosis within the last 10 years. Symptoms include diarrhoea, weight loss, bloating, flatulence and abdominal pain. Treatment involves a completely gluten-free diet, which requires education and motivation. Eventually, this can heal the intestinal damage completely.

Diverticulitis: Affecting the large intestine, small bulges (commonly associated with aging) may be formed and become inflamed. Dietary changes and antibiotics can treat the pain associated.

goes through the same as me on a daily basis.'

Fellow blogger Ellie Adams said: "Thank you for writing such an honest post. I have an ulcerated bowel and damage from coeliac disease and it's so easy to feel alone. It's important to speak out and raise awareness.'

Out of nearly a thousand supportive comments and emails, only one made me flinch. A remark about how it must be hilarious to "shit all the time".

However, I remembered something Anton Emmanuel had said during our chat. 'The words we have in the English language for all things bowel related is either clinical or crude, there's no happy medium. In France, there are words surrounding bowel function that are colloquial but not offensive, something that both children and adults use.'

So, perhaps if we didn't partner the word with something awful, it wouldn't be so socially unacceptable?

Anton agreed: 'It's a complex social issue but the way the-- digital landscape is developing, we're talking about things more openly than ever before.'

I emailed Alice a draft of my blog post, revealing my findings from other interviewees and experts. She called me up within the hour.

'Since we spoke, I had a very frank conversation with my boss about my symptoms. She actually suffers from Crohn's Disease and so was very sympathetic about the embarrassing nature of the condition.

'She told me not to feel guilty about taking time off if I need it.

'The relief of speaking out has eased up my symptoms, which were often exacerbated by worry. I'd urge anyone suffering in silence like I did to speak up. You'd be surprised how many other women may be going through the same.'

*Note: names changed for anonymity purposes. ●

Join in the conversation online - using the hashtag #Pootaboo

WISE TO HIGHS



Katie Boyden discovers the true impact of NPS

New Psychoactive Substances (NPS), more commonly known as legal highs, are drugs that have been chemically altered so as to not fall under the Misuse of Drugs Act 1971. They are engineered to mimic the effects of illegal substances such as cannabis, cocaine and ecstasy and are an attractive option for people who want to experiment with drugs as there are usually no legal consequences to buying and using NPS, and they are very readily available. Head shops, which sell legal highs and drug paraphernalia, are now a common sight in town and city centres. Some NPS dealers even have online stores and will deliver drugs straight to the buyer's door.

Although these drugs are not illegal to possess and consume, this does not mean that they are safe.

'The person using them is like a guinea pig. We don't know what the long-term effects are. They've only been around for a very short time, and there isn't a whole range of research that's been done,' said project worker for Addaction UK, Tim White, drawing on his experience of advising legal highs users.

Addaction UK is a nationwide charity

"Once I overdosed and thought my liver was going to explode because I was in so much pain"

which provides help and support to people with alcohol and drug addiction. Experiences with legal highs can vary. Paul, a 21-year-old student from Lincolnshire, experimented with aMT before it was made a Class A drug in January 2015. He took the hallucinogen because close friends offered it to him.

Paul said: 'I'm open to new experiences and I was definitely open to trying something like that in a controlled environment. I absolutely loved it and I'm very disappointed that it is now classed as a Class A substance. The high lasted for about 12 hours and I remember feeling very euphoric and I saw a light show of various colours.'

In contrast, 20 year old Bournemouth University student Alison used cough syrup containing dextromethorphan.

She said: 'I read on an online forum that dextromethorphan could make you hallucinate. It seemed appealing because it was readily available at any pharmacy.

'Most of my trips on DXM just led to me blacking out constantly or crashing somewhere because I could neither walk nor talk. Even though it is easy to dose, overdosing is still possible when you are tripping and not capable to make rational decisions. Once I overdosed and thought my liver was going to explode because I was in so much pain.'

There are a number of loopholes that allow sellers to distribute legal highs, even though they cannot be sold for human consumption. A lot of the packaging for NPS will contain phrases such as "plant food", or the drugs will be described as incense or salts. The packaging usually contains a list of ingredients, but as there is no regulation of the production of NPS there is no guarantee that the ingredients listed is all that the drugs will contain.

Despite what they are commonly referred to, there can sometimes be legal consequences to possessing and using legal highs. Testing shows that NPS often contain other substances, including illegal drugs.

In the same way as illegal drugs can be "cut" with other substances to reduce their purity and increase profits, NPS users can never be sure of what they are putting into their body.



Cannabinoids such as Purple Haze and poppers like Liquid Gold, left, are sold as room odorizers to get around the law. Also left: Spice is a popular synthetic drug that was developed to mimic the effects of cannabis

The use of any drugs, including NPS, can lead to antisocial behaviour and crime. The Centre for Social Justice discovered earlier this year that police incidents involving legal highs almost trebled from 2013 to 2014 across the UK.

In Lincolnshire, the number of incidents more than doubled from 347 incidents in 2013, to 820 in 2014. In response, City of Lincoln Council and Lincolnshire Police decided to tackle the rise. They brought in an unprecedented Public Spaces Protection Order (PSPO) on April 1st, 2015.

PSPOs give local authorities more power to deal with problems that affect the community's quality of life. Under the PSPO, people in the exclusion zone in Lincoln city centre cannot "ingest, inhale, inject, smoke or otherwise use intoxicating substances".

Between April and October the ban was flouted 276 times. After failing to give up the substances and pay a fixed penalty notice, 12 of these cases resulted in successful prosecutions.

According to a statement from the City of Lincoln Council, following talking to businesses and people living in the city centre it is believed that the PSPO has had a positive effect. Lincolnshire Police also believes that the PSPO has improve the atmosphere in Lincoln. They have seen a 30 per cent reduction in incidents involving legal highs in the city.

Chief Inspector Pat Coates said: 'From our perspective it has been reasonably successful - we don't see open consumption on the city centre streets [any more]. It's certainly made it a more pleasant environment, and we don't have people behaving so erratically and aggressively and causing that real fear.'

Since the PSPO, Chief Inspector Coates confirmed that all of Lincoln head shops have closed. This has reduced the availability of NPS on the city's streets.

In October 2015, a review of the PSPO's progress after six months in action was carried out to analyse how effective it has been. Those results, which should be released in early 2016, will show whether Lincoln City Council and Lincolnshire Police believe the order can be

"The speed at which legislation is being modernised is not keeping up with these drugs as they are developed, bought and sold"

enforced and monitored long-term.

There are other ways the creators of these drugs are able to get around the law.

Once a legal high is made illegal, the developers can alter its chemical makeup. This will make the drug structurally different enough that the user cannot be prosecuted for possessing or using it. The speed at which legislation is being modernised is not keeping up with these drugs as they are developed, bought and sold.

The government is currently trying to tackle this issue and close legal loopholes. The Psychoactive Substances Bill has been through both the House of Commons and the House of Lords. It will be considered at report stage on the 20th of January, where final



amendments can be made.

According to a statement by the Home Office, the Bill's commencement is anticipated to begin in the spring of 2016. It aims to implement a blanket ban on the production, distribution, sale and supply of legal highs.

The Home Office hopes that the bill will fundamentally change the way NPS are

tackled, and put an end to the game of 'cat and mouse' in which new drugs appear on the market more quickly than government can identify and ban them.

However, reactions to the proposed Psychoactive Substances Bill have been mixed.

The Angelus Foundation is a charity that aims to: "help society understand the dangers of legal highs, to reduce the harm they cause to young people and their families, and to save lives". The charity was established in 2009, following the death of founder Maryon Stewart's daughter Hester after she took the then legal high GBL. In December 2009 GBL was made illegal, and it is now a class C drug.

Emily Hicks, campaign support at the Foundation, said that they have been lobbying parliament since the charity's inception to make NPS illegal.

"The main aim of the blanket ban is to reduce accessibility," explained Emily. "We take the standpoint that a blanket ban is necessary."

On the other hand, Tim White is concerned that a blanket ban will not have the desired effect people are hoping for.

"Just because it's not there on the streets doesn't mean that people can't get it. There will be people out there that will still want to continue to use legal highs."

'A blanket ban doesn't deal with it in the best way, and I would hate to think that the quality of NPS would be reduced to really harmful levels, even more than [they already are].'

When it comes to the use of legal highs, debate is complex as there are no two defined sides to the argument.

Some, like the Angelus Foundation, believe a blanket ban on psychoactive substances is the only way to reduce drug-related deaths and increase safety. Others, such as Tim White from Addaction UK, believes that more localised action such as the PSPO in Lincoln will help to reduce open drug use on the streets.

However, underlying both of these points of view is the desire to inform and educate the public about the risks and effects of NPS.

If the Psychoactive Substances Bill is passed in 2016, however, only time will tell whether everything is going to plan, or if there will be any nasty side effects. ●

For many, the arrival of Jeremy Corbyn marked the opportunity for a fresh start for British politics and, finally, a move from the political centre-ground. But is this what all the left-wing parties want?

Wilfred Collins investigates

The political landscape is changing, not just in Britain but across Europe. People are displaying their lack of enthusiasm for middle-ground politics, and alternative parties are reaping the reward.

In the UK, the Islington North MP Jeremy Corbyn went from an outside candidate, making it onto the ballot paper at the last minute, to winning the Labour leadership with an overwhelming mandate of almost 60 per cent. And, despite facing an onslaught from some mainstream newspapers, criticising everything from the 66-year-old's dress sense to his perceived lack of respect for the Queen and World War veterans, there remains substantial support for the new Labour leader. This is particularly evident on social media, where "Corbynmania" can be seen in Facebook statuses, Buzzfeed and selfies.

The group 'Momentum' was established to keep the "Corbyn effect" going post Labour's leadership ballots and now has over 30,000 likes on Facebook. Niryshan Shyrashana, a frontline campaigner for Momentum, believes that "Corbynmania" will continue.

"There was something in the tens of thousands of new Labour members after Corbyn was elected," she says. "According to the media, politics should always be in the centre-ground but more and more people are getting involved. We're going to have a real



opposition to the status quo.'

Jeremy Corbyn's election as Labour leader appears to be part of this move away from centre-ground politics. However, recent allegations in the media have suggested that Momentum might be trying to force Labour further to the left. Corbyn's long-held stance takes Labour in a different direction, the immediate affect of this is being felt by the other parties in Britain.

The Guardian's political blogger Andrew Sparrow believes that a Corbyn-led Labour will cause the Greens to lose out at the next election. 'I think it's going to create problems for the Greens. There is already some evidence that tens of thousands of their voters were voting for Corbyn in the leadership election. Corbyn is taking the Labour party into the space that the Green Party was. Labour has a leader that can ask the PM six questions a week and gets a lot more coverage than Natalie Bennett ever did.'

Andrew says there is little statistical

evidence to go on but Corbyn's affect can be seen on the smaller groups.

'I have not seen appalling evidence to back it up but most of the polling companies aren't doing polls now and, until relatively recently, never used to ask about the Greens anyway – that sort of data isn't easy to pick up. Some of the various left/fringe parties, like Left Unity are now thinking of packing up business, their space has disappeared and it's hard to see why you would run a candidate for one of those parties if you had a "Corbynite" standing in your ward. For parties like that it is going to create problems in the short-term.'

However, while some covering Westminster question Corbyn's affect on the left of politics, Green Party leader Natalie Bennett feels that Corbyn's election is sign of a real change.

"The election of Jeremy Corbyn is enormously exciting, it shows that politics is shifting in the direction of the Green Party. The party that really looks isolated now is the Conservatives. The thing the election has

really done after the whole trend that saw Greens membership more than trebling, the SNP sweeping aside Labour in Scotland, is that people see we can achieve real change in politics. There is a real energy in politics.'

The Greens received 1.1 million votes in last year's General Election, retaining Caroline Lucas for Brighton Pavilion. A proportional system would have also seen Lucas joined by a further 23 Green MPs. Despite the optimism from the Green Party there continues to be a surge in fresh Labour support following Corbyn's election and it seems unlikely that at least part of this isn't coming at the expense of the Green Party.

Corbyn praised the "broad-church" of Labour after their recent Oldham by-election win but a move further to the left could draw more Greens to Labour. Martin Houlden, a UKIP parliamentary candidate for Bournemouth West in last year's General Election, believes the Greens will suffer in 2020.

'The Greens will be the biggest losers, Corbyn is appealing to the hard-left of the party, the Conservatives have their new bogeyman, the Tories will use Corbyn but the Greens will lose out.'

Some could argue that UKIP should be worried about Labour re-capturing lost support. Perhaps it is in UKIP's interests to play it down or claim Corbyn will only appeal to the party's hard-left.

The Socialist Party of Great Britain (SPGB) could also be over-shadowed at future elections because of Corbyn's Labour. SPGB's core principles are the need for a society based upon the "common ownership" and "distributing wealth by and in the interest of the whole community", Corbyn's flagship policies include quantitative easing; while radical to some, it is a different breed to the SPGB's view of socialism.

Colin Skelly of the SPGB South West is quick to distinguish Jeremy Corbyn and the Labour Party from SPGB and its fundamental values:

"The SPGB does not view the Labour Party as a socialist party but as another party of capitalism. Corbyn's election restores an element of radicalism to the Labour Party after a period of right-wing leadership but this is only returning to the situation historically adopted by the Labour Party before the late 1970s, but with MPs considerably to the right of the leadership.'

Jeremy Corbyn has often been branded a socialist by parts of the media, with the BBC referring to him as "left-wing leader". But could this representation end up hurting more left-leaning parties and their "radical" values?

Colin says party opinion in the SPGB is mixed about Corbyn: 'Some see his election as reawakening an interest in socialism from which the party could benefit, whilst others believe that it is of little significance and risks the word 'socialism' becoming associated with the failed policies of a Corbyn government.' Colin says it's possible to see Corbyn as simply



'Momentum' supporters after Corbyn's victory

"Jeremy Corbyn is a lightning rod who has become the beneficiary of a change to mindset"

"at the fringe of the mainstream rather than outside it."

Momentum's Nirryshan agrees that Corbyn isn't as left-leaning as he has been portrayed: 'If you look at the Tories, they are actually moving further right. Corbyn is not as far to the left as has been reported. Jeremy's actually said that within the Labour party is a broad-church and that is a good thing.'

Lack of interest amongst young voters has been a growing problem but movements on the left seem to be enticing new generations to get involved. The Green Party's support at the General Election was greatly enhanced by the student vote and 'Corbynmania' appears to have struck a chord with that audience. A poll of 18-24 year-olds revealed over 40 per cent felt more "engaged politically" because of Jeremy Corbyn.

Jolyon Rubinstein presents the BAFTA award-winning BBC Three television programme, *The Revolution Will Be Televised*, a satirical series driven by political headlines but aimed at younger viewers. Much like Colin and the SPGB, Jolyon also questions Corbyn's 'socialist' labelling: 'It's ironic that

calling for corporations to pay taxes and workers to be paid fairly is heralded as 'socialism' but that is how steadfastly the status quo holds on.'

Yet both Colin and Jolyon have noted the potential in Corbyn's ability to bring different values from outside the status quo to the forefront of Parliament while the Greens are optimistic about changes Corbyn could bring.

Jolyon feels that "Corbynmania" is a sign of Britain becoming more politically radical. 'Jeremy Corbyn is a lightening rod who has become the beneficiary of a change to mindset. Corbyn is now the leader of the opposition. What were the odds on that a year ago? It's difficult to really say in the long-term if this will affect the country. Not since Clement Attlee has Labour won an election without moving to the right.'

The Conservative government has already made significant U-turns on several key policies including cuts to London's policing and the Tax Credits. While many, including some Tories, refused to back these austerity measures, Jeremy Corbyn has been able to capitalise on the situation by articulating the concerns of the many against the controversial cut. Corbyn's vocal opposition helped ensure the proposed cuts came under the spotlight.

Socialist ideas are sweeping Europe despite the lack of left-leaning parties in government. In Britain, Corbyn can bring ideas into the House of Commons which were once more associated with groups like the Greens or SPGB, many often receiving less attention in the mainstream media or electoral polling. While "Corbynmania" may be detrimental to smaller parties when it comes to their vote share, across the left there appears to be a sense of enthusiasm that Corbyn can shift the discussion in their direction. ●

When healthy eating goes too far

Juices for breakfast, protein only for lunch and a complete ban on sugar - is this really eating healthily or are we now going too far?

Kemi Rodgers investigates

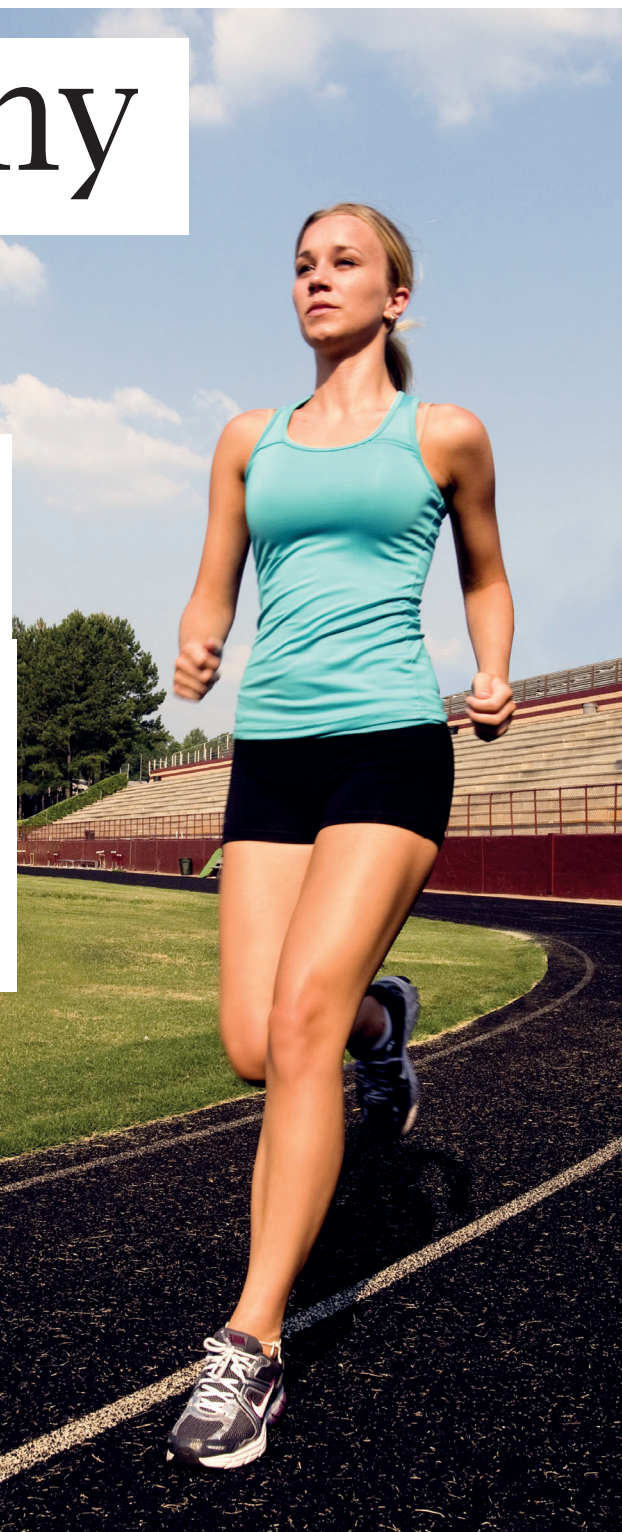
Once again, I'm panicking in the food aisle at Boots, trying to find the lowest calorie option for my Meal Deal so I can rush back to work and try and feel a bit better for not bringing a homemade salad. As I trade the chocolate flapjack for the low-calorie popcorn instead of grapes, I tut at myself in disgust. I've always had a difficult relationship with food. Since the age of eight, I have been unhappy with my weight and over the years I have tried various different methods to reduce my size. But, over the last year, I have found solace in cleaning up my vegetarian diet, buying a blender and bulk buying kale.

And I'm not alone. With #cleaneating gaining over 18.5 million hashtags on Instagram and people like Deliciously Ella ruling the Book and App charts, it's no wonder that healthy eating has taken over everyone's lives. But there is a sinister side to this strict eating trend. In the UK, one in 100 women will be clinically diagnosed with an eating disorder, but studies also claim

that over half the women in the UK have 'extremely disturbed eating habits' in the form of EDNOS (Eating Disorder Not Otherwise Specified).

One of these unspecified eating disorders is called Orthorexia Nervosa. Steven Bratman MD, conceived the term in 1996, applying the Greek word "orthos", which translates to, "right" or "correct" and "rexia" - the Latin phrase for 'appetite'. People with Orthorexia have an extreme obsession with healthy eating, avoiding foods deemed bad or impure - they strive for "perfection". The eating disorder isn't yet recognized by the DSM-5 as a clinical diagnosis, but more and more people are identifying with the symptoms.

"All I've eaten today is bloody spirals courgette and a carrot"



B-eat, the UK's leading eating disorder charity explains the rise in the number of people suffering from Orthorexia. 'Although there are no hard statistics, B-eat is aware of an increase in people seeking help for this condition. This may be exacerbated by the emphasis on what is termed "healthy eating", which may prompt people to go beyond taking care and moving into fixation or obsession.'

Stella Stathi, an Integrative and Jungian Psychotherapist Eating Disorder Specialist, believes that the increase is also due to the symptoms overlapping into other eating disorders. 'Sometimes it's not just clear Orthorexia, it's so usual for a client to move from one type of eating disorder to another or to show certain symptoms of Orthorexia in other eating disorders.'

Jade, 21, is a Barista and Waitress from Seaford. What started out as an innocent health kick soon developed into an obsession with the purity of food. 'The most extreme thing I got myself into was planned eating. I would have to know exactly what I was going to eat every day and I was religiously going to the gym as well. When trying to do a workout I would be like, "oh my god I physically can't do this because I haven't eaten enough today - all I've eaten is bloody spiralised courgette and a carrot".'

She recognises when her problems first began. 'I think it was a year or so ago that I noticed it, around the time that Deliciously Ella became popular and everyone had a blender. I'm quite conscious not to call it an eating disorder because I suppose in my mind, it's just an intense anxiety and more about having that control [with food].'

However, when asked about reporting this to a medical professional, she presumes other people wouldn't take it seriously. 'I think I'd feel a bit silly if I went to the doctor and said 'I'm feeling kind of anxious because I haven't had enough fruit today or I haven't had my second smoothie.' This is an issue that also resonates with other Orthorexia sufferers. Megan, 23, realised that she had problems around food about a year ago - but didn't believe she was "sick enough" to tell her G.P. 'I stuck religiously to a meal plan, which was



"I'd feel anxious if I hadn't had my second smoothie of the day"

mostly geared towards protein. So I had plain egg white omelettes for breakfast, tiny salads for lunch and cooked beans and vegetables for dinner. Then if it was a good day, I would allow myself "dessert". That would be some cottage cheese and a tiny bit of honey.'

Like Jade and Megan, many people with Orthorexia often deny actually having a fully-fledged eating disorder. Orthorexia shares similarities to Anorexia Nervosa and Stella Stathi tells me that these two eating disorders are "ego-syntonic" - which means they are ego boosters. 'Control issues are the big underlying issue in all eating disorders. In Anorexia and Orthorexia people have control. This is what makes them feel good about themselves and this is also what makes these

disorders very difficult to treat. They are also resistant to admitting they are having an issue, simply because they are kind of on top of it, even in the most negative sense of the word.'

Jordan Younger, formerly known as The Blonde Vegan, became the first high-profile case of Orthorexia. In 2014 she announced on her blog that her raw vegan lifestyle had developed into Orthorexia, and she would subsequently no longer define herself as exclusively vegan. She writes: "I had known in the back of my mind for a while that I had developed many fears surrounding food, and it was clear to me that I was becoming more and more limited in what I was comfortable eating. Anything that wasn't completely clean, oil-free, sugar-free, gluten-free and plant-based I dismissed because it wasn't within the dietary label I had given myself."

She realised that her diet had become too extreme when she was out with a friend in New York. Instead of grabbing breakfast at the nearest restaurant, she insisted that they both walk a mile out of their way to go to a juice bar that stocked her specific drink. 'My body was already starving from days of restriction and crying out to me that walking a mile without any sustenance would be a bad idea, but I did it anyway. I was determined, and being unable to shake that feeling scared me.'

Feeling anxious and afraid of betraying set meal plans is a common behavioural trait of Orthorexia. Other symptoms include drastically cutting out food groups, self-loathing when eating something 'forbidden' and obsessively looking at the ingredients and nutritional values of food. But we all look

"It's about small steps every day, like allowing myself dessert"



at the ingredients list right? Stella disagrees. "Other symptoms are when a person's whole life is revolving around food and they cannot focus their energy on anything else. They isolate themselves from friends and family."

This raises an interesting discussion. At what point does just "healthy eating" become a serious eating disorder and should we be worried about it? Stella admits that there is a challenge in diagnosing the condition. 'It's more of the psychological aspect that allows you to distinguish between the two. There is a big amount of fear and anxiety attached to the possibility of just eating a bite of something that is forbidden for them.'

Healthy eating had never been frowned upon before and certainly was never seen as a risk to one's health. Becoming a huge social trend in 2015, we juiced, blended and spiralized anything we could and took inspiration from models, celebrities and wellness bloggers. But with so many new food gadgets and baffling new recipes (spinach pancakes anyone?) saturating the media, it's no surprise that some people can become so consumed by the lifestyle.

Jade cites calorie-tracking applications as a detrimental affect to her mental health at the time. 'I think it's so dangerous because I'd eat something and be like "fucking hell that's got however many calories" and I'd beat myself up about it. It's not worth it and you can see how easy it is for people to get themselves into that mind-set of an eating disorder, it's so easy to slip into.' Megan also "fell into the trap" of obsessively tracking calories and would cut out all carbohydrates and sugary foods from her diet.

There are many different ways of treating Orthorexia, either through the NHS or with a private practitioner. Stella Stathi explains the basic psychological task underpinning the issue. 'The first thing to look at is identifying what needs and desires the person is trying to express and meet through the control of food. Once you have done that, it is about finding and developing certain skills to meet those same needs but without resorting to food.'

Cognitive Behavioural Therapy (CBT) is a popular and effective method, based

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around breaking down negative thoughts into bite-sized chunks. This reduces harmful behaviour on the body, like restriction and self-punishment.

For Megan, it's been nine months into the recovery process, but it's not an easy journey. 'It is about small steps and achievements every day, like allowing myself dessert or going out to eat and ordering whatever I feel like,' she says. With Jade, she had a gradual realisation that her eating habits were not as healthy as they originally seemed, and became fed up of the constant tiredness. 'It's so cliché but life is too short, if you want a bowl of pasta, have the bowl of pasta. I think it's all about finding the right balance and that's what my gradual realisation was. It's okay to have some chocolate; you're not going to die. It's fine.'

With more and more people acknowledging the condition, there are calls for Orthorexia Nervosa to be recognised clinically in the UK. 'Anyone concerned about this and any other type of eating disorder should contact their GP in the first instance so they can be referred to the necessary specialist services.'

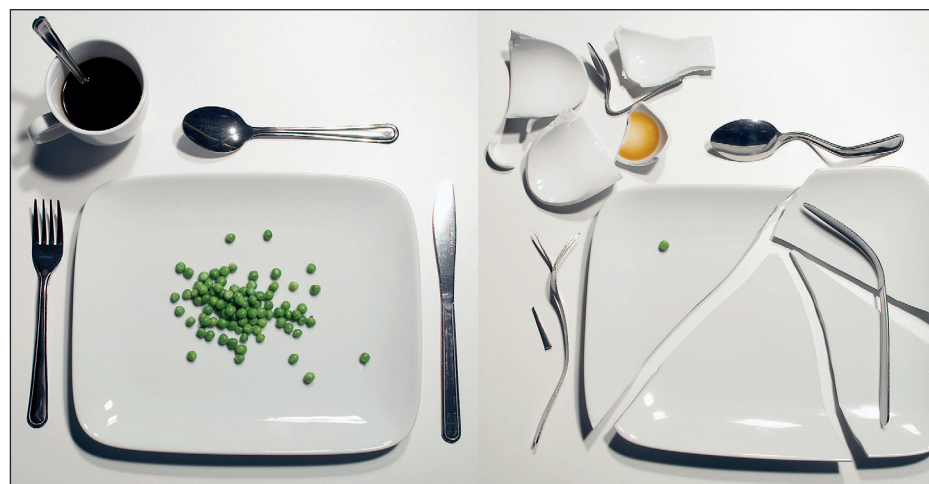
For more information on the B-eat website visit www.b-eat.co.uk

Could YOU have Orthorexia Nervosa?

If you answer 'yes' to the majority of these questions, you could be at risk and should seek help

- 1 Do you spend more than three hours a day thinking about food?
- 2 Do you plan tomorrow's food today?
- 3 Do you care more about the virtue of what you eat rather than the pleasure you receive eating it?
- 4 Have you found that as the quality of your diet has increased, the quality of your life has diminished?
- 5 Do you keep getting stricter with yourself?
- 6 Do you sacrifice experiences you once enjoyed to eat the food you believe is right?
- 7 Do you feel an increased sense of self-esteem when you are eating healthy food?
- 8 Do you look down on others who don't?
- 9 Do you feel guilt or self-loathing when you stray from your diet?
- 10 Does your diet socially isolate you?

By Dr Steven Bratman, MD. Quiz published in his book, *Health Food Junkies: Orthorexia Nervosa: Overcoming the Obsession with Healthful Eating*, Broadway, £13.



ALIYAH ALLEN, JOANNA BOWDEN,
KATIE BOYDEN, CHARLOTTE
BROWN, DANIELLE CARDY,
WILFRED COLLINS, MEGAN
COUTTS, CARA CROWCOMBE,
SCARLETT DIXON, CASEY FARR,
ALICE FIANCET, MOLLIE FOSTER,
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