# WYTHAM HALL

# **Annual Report 2019 - 2011**



Breaking the cycle of street homelessness

Now, we come to discover that the moments of agony
(Whether, or not, due to misunderstanding,
Having hoped for the wrong things or dreaded the wrong things,
Is not in question) are likewise permanent
With such permanence as time has. We appreciate this better
In the agony of others, nearly experienced,
Involving ourselves, than in our own.
For our own past is covered by the currents of action,
But the torment of others remains an experience
Unqualified, unworn by subsequent attrition.
People change, and smile: but the agony abides.
Time the destroyer is time the preserver,
Like the river with its cargo of dead negroes, cows and chicken coops.

**T S Eliot** (1888-1965) Four Quartets – The Dry Salvages

Front cover: The Slave Ship by J. M. W. Turner "Slavers Throwing Overboard the Dead and Dying" (Museum of Fine Arts in Boston, USA)

Back cover: Wytham Hall

### WYTHAM HALL ANNUAL REPORT

1<sup>st</sup> April 2010 – 31<sup>st</sup> March 2011

#### **CONTENTS**

Wytham Hall - An Introduction
Council of Management
Members of Wytham Hall4
Chairman's Report5
Resident Members' Report
Supported Housing Report
Residents' Contributions
Student visits to Wytham Hall
Benefactors of Wytham Hall
Statistics
Accounts
Publications
Appendix 1 Guest Nights List
Appendix 2 French Group

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National Lottery Charities Board Recipient



#### **■ WYTHAM HALL - An Introduction**

Wytham Hall was founded in 1984 by a group of doctors and medical students who were keen on exploring the dynamics of interpersonal relationships, particularly in the doctor-patient relationship. It seemed most appropriate to apply these principles to those who, because of their fragility and the precariousness of their circumstances, were most in need – the homeless and the deprived people. Dr El Kabir had, for several years, been running a medical centre for the homeless people in Soho. Great Chapel Street Medical Centre, www.greatchapelst.org.uk. This seemed an

ideal starting point for the project.

house was acquired through donations and benefactions and Wytham Hall took life. Wytham Hall Recovery Unit was opened in 1984 as unique and innovative project providing residential care to homeless patients with medical and psychiatric illness. Its aims were to offer help, space, treatment and respite to those in need of it, and to help them lead a more fulfilling life. It

has an extensive educational role, welcoming students from the UK, the USA, Hungary, Czech Republic and Israel. Its members have undertaken research on various aspects of homelessness, resulting in a number of publications.

Wytham Hall functioned as a recovery unit with fourteen beds and sixteen beds in move-on accommodation, which included a superb house donated by (what was then) Glaxo plc. We have been able to create small communities for people to run their own lives in these premises. In 2007 we changed to supported housing with 25 beds in total. The emphasis has shifted from acute treatment and stabilisation towards the longer term recovery not only of physical but also psychological health. This has involved a reevaluation of the way staff and resident members relate to our residents. We take pains at our weekly staff meetings to learn from the interactions of the last week and to search for the growth points. In this way we aim to enhance the process of evolution and

understanding that is part of all our journeys through life help and our residents towards an integration of their personalities. Our residents are involved in the weekly Balint and French groups which work towards the same goal. We have been delighted to have one of our former residents join as a member of staff.

We have, in 25 years, admitted some 2500 individuals. We tried to care for each of them as individuals

with specific needs and capacities. We tried to give them some of the dignity they needed to look after themselves. Needless to say, we have not always succeeded. However, most of them have been able to gain some benefit from us. Some have indeed managed to reconstitute their lives.

(Great Chapel Street Annual Report available upon request)

#### **■ PRESIDENT**

Dr John Horder, C.B.E., F.R.C.P., F.R.C.P.E., F.R.C.G.P., F.R.C.Psych.

### **■ COUNCIL OF MANAGEMENT**

Terry Bamford, O.B.E., M.A. (Oxon), Dip. Soc. Admin. Director, Social Perspectives Network

Peter Barry, M.B.A. (City), F.C.C.A., Dip.M., I.M.I.S. Finance Director, Meiko UK Limited

Sir John Birch, K.C.V.O., C.M.G., M.A. (Cantab)

Vice Chairman, Formerly UK ambassador to the United Nations and Hungary and Council of University College London

Dr June Crown, C.B.E, M.Sc. (London), M.A., M.B., B.Chir. (Cantab), F.R.C.P., F.F.P.H.M. Past President, Faculty of Public Health Medicine, Royal College of Physicians

Gideon Dabby-Joory, LI.B. (Reading), LI.M. (L.S.E) Partner, Howard Kennedy Solicitors

Dr David El Kabir, M.B.E., M.A., D.M. (Oxon), M.B., B.Chir. (Cantab), F.R.C.G.P. Chairman and Principal of Wytham Hall

Lt-General Sir Scott Grant, K.C.B., M.A. (Cantab) Formerly Quartermaster-General to the Army, Chief Royal Engineer

Sir Brian Jarman, O.B.E., M.A. (Cantab), Ph.D., M.B., B.S. (Lond), F.R.C.P., F.R.C.G.P., F.F.P.H.M., F.Med.Sci.

Emeritus Professor, Imperial College, Faculty of Medicine

Dr Richard Lancaster, Ph.D, F.R.C.P. Consultant Physician, Emeritus, St Mary's Hospital

Chris Littmoden, C.B.E., C.A.

Non-executive Director, Low & Bonar plc., Non-executive Chairman of VIT Security Group

Philip Reid, B.A. (Oxon), M.B., B.S. (Lond), M.R.C.P., M.R.C.G.P., D.R.C.O.G., General Practitioner, (Vice-Principal)

Dr David Alexander Sturgeon, M.A., B.M., B.Ch. (Oxon), F.R.C.Psych. Honorary Senior Lecturer in Mental Health, UCL and Consultant Psychiatrist, UCH

M.F.Woods, M.A. Dip. Arch. (Cantab), A.R.I.B.A., F.R.S.A. Formerly Chairman, Association of Consultant Architects Chartered Architect

Dr Theodore Zeldin, C.B.E., F.B.A., F.R.S.L., F.R.HisC.S., M.A., D.Phil. (Oxon) Fellow of St. Anthony's College, Oxford

Company Secretary:

Dr Petr Valasek, M.D., Ph.D (Prague)

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Bankers: HSBC, 196 Oxford Street, London W1A 1EZ

#### ■ MEMBERS OF WYTHAM HALL

#### **■ RESIDENT MEMBERS**

Robert Bolus, B.Comm. (Cape Town) (Bursar), Practice Manager, Great Chapel Street Medical Centre

David El Kabir, M.B.E., M.A., D.M. (Oxon), M.B., B.Chir. (Cantab), F.R.C.G.P. (Principal)

Philip Reid, B.A. (Oxon), M.B., B.S. (Lond), M.R.C.P., M.R.C.G.P., D.R.C.O.G., General Practitioner, (Vice-Principal)

Petr Valasek, M.D., Ph.D (Prague) Senior Research Fellow, University of Reading; Locum Senior House Officer at Accident and Emergency, King's College, London and Royal Berkshire Hospital, Reading

#### **■ NON-RESIDENT MEMBERS**

Bridget McCarthy, Cert. Therapeutic Counselling Service Leader

Andrew Keck, Supported Housing Worker, NVQ 2 Health & Social Care; B. A. Hons. Town Planning course, South Bank University

Andrew Frederick, Supported Housing Worker, NVQ 2 Health & Social Care

Dr Hannah Theodorou, M.B.B.S., B.Sc. (Lond), Foundation Doctor Worthing Hospital

Dr Nada Horakova, M.D. (Prague), House Physician, Robert-Bosch Hosp, Stuttgart, Germany

Alzbeta Karlikova, medical student, First medical faculty, Charles University, Prague

Danylo Yershov, medical student, First medical faculty, Charles University, Prague

#### **■ VISITING MEMBERS**

Desiree El Kabir, M.A., M.B., B.Chir. (Cantab), M.D. (Lond), M.R.C.P. Physician

Jeremy El Kabir, M.B.,B.S. (Lond), F.R.C.S. F.R.C.S.(Urol) Consultant Urological Surgeon, Northwick Park Hospital; Honorary Consultant Surgeon, St. Mark's Hospital, Honorary Senior Lecturer in Surgery, Imperial College

Daniel Lassersson, M.A. (Cantab), M.B. (London), M.R.C.P., M.R.C.G.P. Lecturer in General Practice, University of Oxford

Philip Joseph, B.Sc., M.D. (Lond), F.R.C.Psych.

Senior Lecturer & Honorary Consultant in Forensic Psychiatry, St Mary's Hospital, London; Honorary Senior Lecturer in Forensic Psychiatry, Institute of Psychiatry, London

Belinda Banham, C.B.E, J.P. (supplemental list), B.Sc. (Hons Econ) Dip. Philosophy of Medicine (Society of Apothecaries) R.G.N. Independent Assessor in the Office of the Commission on Public Appointments.

George Osborne, F.C.C.A. Accountant

Lenka Zakova-Cassidy, B.A. (Hons) Administrator

#### **■ CHAIRMAN'S REPORT**

It may seem strange to have Turner's picture of 'Slave Ship Throwing Overboard the Dead and Dying - Typhoon coming', on the front cover of this year's annual report. A picture so powerfully painful, that John Ruskin, who owned it for a while, couldn't bear to live with it despite the fact that he thought it was one of Turner's great masterpieces. When Turner first exhibited the picture in 1840 he gave it a caption from what he called "The Fallacies of Hope". He wrote: "O hope, hope, fallacious hope! Where is thy market now!" The reason why we have chosen this particular picture, is that we, over the years, have had to discharge dying and dead concepts of care in our quest for rebuilding shattered lives. It has become clear to us over the years that the primary aim of social integration of rehabilitating people's lives should give way to addressing the existential reality of an individual. And that to be supportive we had to nurture an individual's potential through exploring what it is possible for them to achieve and also what is possible for us to give. This implies addressing the dynamics of interpersonal relationships.

The aim is to integrate people's shattered personalities rather than to paper over the cracks in their lives. One example springs to mind: A former drug addict expressed a wish to learn French because he liked the sound of the language. It seemed to me that the ideal way was to introduce him to a drug addict of genius – Charles Baudelaire. In one of his poems (Moesta et errabunda), he speaks of his longing to escape from the mud of the cities, which he describes as created by human tears. There is a degree of authenticity about this, which compels compassion for his dilemma. It is not that we think that escapism is a solution to the problems, but that understanding the nature and reason of the difficulties may ultimately help them to adopt a more mature and responsible attitude to life. Some of the essays and other creative work in this annual report are testimony to the success of this approach.

These matters are discussed with the staff in our weekly meetings and with the residents in Balint groups and further explored in one-to-one meetings with residents. The results of this approach speak for themselves: a number of articles in this report will testify to the richness and the depth that our residents have discovered in themselves and have expressed to the



reader; also the fact that one resident, a former drug addict, is now a permanent member of our staff.

It is evident that, to achieve this particular aim, one needs to question the very nature of communication between human beings. It seems obvious that the relationship is a two-way process, which implies an awareness by participants of the intentionality behind the words they use. People who have lived on the streets are intensely aware

of who they are talking to. It is quite evident since they have to defend themselves against what they might perceive as an external threat. They perceive shallowness, inadequacy, and any lack of a coherence of direction. These issues have to be addressed. For the past two years we have been training our staff to be aware of the phenomenology of encounters. Deficiencies in that area have been very evident to us in the approach of social workers, general practitioners and psychiatrists. The failure of these received ideas of care are evident in the absolute lack of any philosophy of aftercare of vulnerable people. The bankruptcy of this approach is evident in the vast majority of people we have admitted. Particularly for people with mental health problems. We have invited Professor Dinesh Bhugra, President of The Royal College of Psychiatrists, to discuss these issues with us. He was clearly aware of the problems and undertook to involve Wytham Hall in the training of psychiatrists. We have also discussed these issues with Professor Femi Oyebode, Professor of Psychiatry at Birmingham University. We are aware that we have a responsibility to make our methods better known in general – particularly to a society which is increasingly alienated from itself, relying on shaky structures rather than on existential cores. No wonder, there is so much despair on our streets.

We have decided to revive the guest nights, which were a prominent feature of our activities over two decades ago, and to invite leading professionals to have dinner with us (trustees, members, staff and residents) and to discuss issues of care and of aftercare. A list of these guest nights is appended on the back cover.

The French group explores, through studying important literary texts, the circumstances of their creation and the use of language in achieving the communication desired by the writer, poet or musician. A summary of some of the texts studied is appended on the back cover.

There have been few changes in the Council of Management. We welcome in Lt-General Sir Scott Grant, former Quartermaster-General to the UK Army. He will, no doubt, bring his managerial skills to the more modest needs of Wytham Hall.

Our educational programme is still going strong. We have been particularly impressed with some of the students who expressed a desire to continue their links to Wytham Hall. Some of the comments that we have received about the student attachments can be found in section 10. No doubt the experiences in Wytham Hall will impact on their work in years to come. One result was a visit organized by Andrea Pekarkova for Petr Valasek and myself to visit the Third Medical Faculty in Prague and discuss Wytham Hall and its approach to problems of vulnerable people with academics, members of the Salvation Army and medical students. A number of those have applied for studentships at Wytham Hall.

Our financial situation is stable – we have made a surplus of  $\mathfrak{L}57,000$  over the past year reflecting our very high occupancy levels. Details are to be found in this report. We are still vulnerable to unexpected contingencies such as repairs and a sudden drop of occupancy and any change in social policy affecting supporting people contracts. Wytham Hall has so far reacted creatively in the face of vicissitudes.

I would wish to thank our staff for their matchless dedication, our residents for their resilience, and my fellow Trustees and Resident members for their dedicated support.

Dr. David El Kabir

#### ■ RESIDENT MEMBERS' REPORT

Four of us live at Wytham Hall full-time. Three of us are doctors, David is a retired GP, I am in general practice and Petr is a researcher. Robert is Practice Manager at Great Chapel Street Medical Centre. We have lived at Wytham Hall for many years. The presence of senior staff living 'over the shop' is one of the features that makes Wytham Hall unique and contributes to its sense of community and

are addressed off site. Residents are generally stable in health but still have to deal with chronic physical complaints such as cancer, arthritis and lung problems and chronic mental conditions such as depression and psychosis.

We continue to welcome medical students since the initial programme started in 1989 by the Conanima Foundation. Students come



also of continuity. For many of our residents, their lives have been full of changes and broken relationships.

We all attend weekly staff meetings and Balint Groups and frequently meet our residents in passing. David runs a weekly French Literature Group and sees residents individually as needed. Since Wytham Hall closed as a care home to concentrate on supported housing, the role of the three doctors has changed. Many of the residents are registered with me at either Great Chapel Street Medical Centre or The Notting Hill surgery. Thus most of their medical problems

from Imperial and Oxford universities and University College Hospital on special study modules or day visits. We have recently reinstated the elective programme for students in the Czech Republic and have had some excellent students. Most of their clinical experience is based at Great Chapel Street Medical Centre, whereas Wytham Hall offers them the chance to spend more time with individuals; to understand their history, personality and perhaps why they became homeless and what it meant to them.

Dr Philip Reid

#### ■ SUPPORTED HOUSING REPORT

Wytham Hall as an organisation provides housing and support for 25 formerly homeless residents over four sites. The Wytham Hall building houses nine residents (five of whom come from the Rough Sleepers' team in line with our contract and four are not under contract). All other residents are housed at either Lanhill Road (established with a grant from Glaxo Wellcome in 1994) or in two Charfield Court flats (established in 1996 and 1997 with a grant from the National Lottery

Charities Board and a substantial donation from The Henry Smith Charity). Wytham Hall has a no drug or alcohol policy with the aim of providing a safe environment for people that are committed to not drinking or using illegal drugs. All residents have the support of a team of workers including a Manager, a Service Leader, and three Supported Housing Workers and crucially the support of each other.

Further support is provided by visiting medical students. As well as British students these

come from as far afield as the Czech Republic, Slovakia and the Ukraine. Often these students remain involved well beyond their initial visit with some becoming involved permanently.

Admission to our accommodation is via referrals from outside agencies. This provides as detailed a history of the resident as is available (personal, medical, housing history etc). Suitable referrals are then assessed (typically by Dr David El-Kabir (Principal and

Chairman) and Bridget McCarthy (Service Leader)).

The length of stay within our accommodation varies from months to five years, although this may become either longer or shorter depending upon need. We do not have access to our own move-on accommodation. however we offer support to all residents to access accommodation appropriate to their needs when it is felt that they are ready to move.

Upon admission and following a needs assessment, individual support plans are developed (these are reviewed quarterly and residents are free to invite who they wish to attend). A risk assessment is also carried out with the resident's involvement and key work meetings take place every 4-6 weeks. All of this paperwork can

also, at its best, serve to provide not only a snap shot of a resident's current situation, but in retrospect can serve as a useful tool for assessing progress and development. It should, however, be noted that the vast majority of contact between residents and staff is frequent and informal.

All Wytham Hall residents have the opportunity to express their opinions about issues arising in their own homes during monthly house meetings and through their regular contact with Wytham Hall staff. Our

residents often develop an ongoing relationship with our resident members and occasionally with our trustees and visiting guests.

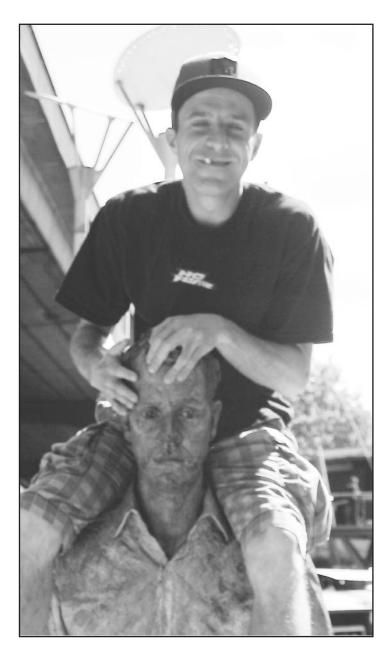
The maintenance of a clean environment within accommodation is co-ordinated by the residents themselves and although monthly inspections are made by the supported housing workers identifying issues to be resolved, addressing them is typically a task that the residents take upon themselves. Staff also monitor Health & Safety concerns and advise residents where necessary.

The majority of residents living in the supported housing units are in receipt of a variety of benefits and Housing Benefit (which typically covers all rent bar a £7 weekly service charge which covers council tax and all utilities). Staff at Wytham Hall devote a considerable amount of time to helping residents manage their benefits, advocating for them and lodging appeals when necessary. Developments in the benefits system have also led to much staff time being taken up with

completing medical assessment questionnaires and in attending medical assessments.

Staff recognise that it is imperative to develop and maintain strong working relationships with other services and organisations involved in the welfare of supported housing residents. Staff are in regular contact with Care Managers, Psychiatrists, Community Psychiatric Nurses, Social Workers, Drug and Alcohol Workers, Day Centre Teams, Outreach Workers, Lawyers, Advisers and others and support residents by attending appointments with all of the above if need be.

Many of our residents have accessed medical



support in the past via Great Chapel Street Medical Centre and as they are no longer technically homeless they are encouraged to register with Dr. Reid at Notting Hill Gate surgery. The aim being to enable them to access a G.P. with a great depth of understanding of their plight and experiences.

#### **LANHILL ROAD**

Lanhill Road is a large house approximately ten minutes walk from Wytham Hall, providing accommodation for eight residents in single bedrooms. Residents share a spacious kitchen, a living room, three bathrooms, two shower rooms with toilets, a laundry room and

a thriving and colourful garden. Lanhill Road offers temporary supported housing for homeless people where residents typically stay for a period of up to two years unless we deem a longer stay appropriate. Lanhill Road gives residents the opportunity to gain confidence in independent living, but with the support of Wytham Hall staff and each other.

Since admission some residents take part in education, training and full and part-time employment. One resident maintains the garden (and indeed numerous gardens and other green spaces across London). The garden has become a place of relaxation and recovery for the Lanhill Road residents and the venue for the annual Wytham Hall Barbecue.

#### **CHARFIELD COURT**

We have two flats within Charfield Court, each with four bedrooms, a shared kitchen, lounge, balcony, bathroom and further cloakroom. They are located in a quiet area around the corner from Wytham Hall. Both flats offer long-term accommodation (up to 5 years) and in all other ways are similar to Lanhill Road, but without the garden.

#### **WYTHAM HALL**

The Supported Housing at Wytham Hall comprises nine rooms. Five of these units are currently occupied by people funded via our Rough Sleepers' contract. The five basement rooms benefit from a shared kitchen and access to a large garden. Wytham Hall was fortunate to receive a hostels grant of £63,000 from Westminster in early 2009. This has enabled us to install new bathroom facilities as well as complete interior painting and recarpeting of the basement area. The four rooms located on the first floor of the property offer very spacious living areas and have a communal kitchen. Some of these rooms overlook the large and tranquil gardens belonging to the property.

Since admission to Wytham Hall as a whole, many of the residents have been successful in moving forwards with their lives. Many have returned to work, embarked on further education college courses (one gentleman

recently began a law degree whilst still a resident and has now moved into independent accommodation, another is very close to obtaining certification to become an electrician and one has now become a permanent member of the staff team).

Wytham Hall supported housing continues to be a great success for residents and staff alike.

#### SUPPORTING PEOPLE

Wytham Hall is continuing to self-assess working practice in six core areas, and has maintained its level 'B' status with Supporting People. Wytham Hall has a good working relationship with Supporting People, meeting at least quarterly, maintaining contact through e-mail and telephone, and working together towards continuous improvement of our service. Wytham Hall staff members attend Supporting People Providers' fora, which facilitate information sharing between providers within Westminster.

# DEVELOPMENTS IN THE SERVICE IN THE LAST YEAR

#### Counselling

The most radical change has been the approach to understanding residents' psychological problems and how their behaviour can be explored and managed to their advantage. This has been led by Dr David El Kabir. The approach involves group activities, direct counselling of residents and also support for staff in managing problems.

#### **Publicity**

Wytham Hall celebrated its 25th Anniversary on 4th October 2009 at The Royal Academy of Music to which representatives from many related organisations were invited.

Dr El Kabir gave a talk on pragmatic approaches to tackling homelessness at the British Museum. It was well attended and provocative. It was recorded and can be viewed on line at www.ucl.ac.uk/applied-global-citizenship/ or from our website www.wythamhall.co.uk/news.htm.

#### PLANS FOR THE NEXT YEAR

#### Admitting more rough sleepers

We are keen to continue to admit more rough sleepers (and have in fact been admitting them directly to Supporting People beds).

#### **Engaging rough sleepers**

In partnership with Great Chapel Street Medical Centre we are looking at a proposal to engage with some of the high-frequency users of casualty departments and use former rough sleepers in the engagement process. We would use the same skills that have proven effective in engaging the residents at Wytham Hall.

#### Increasing resident involvement

Resident involvement has begun to evolve quite naturally and only occasionally requires prompting. The degree of trust that exists between staff and most residents is such that they often feel very comfortable in approaching staff to either raise their concerns regarding the emotional well-being of fellow

residents, or have begun to work with staff to help fellow residents over hurdles that emerge. Both staff and residents accept that their different backgrounds and relationship with other residents enable them to work very effectively as a form of tag team.

#### **Conclusions**

We have been able to attract and stabilise a number of rough sleepers of widely varying backgrounds, who need the special and unique environment that Wytham Hall offers. That environment is physical psychological. We have made some interesting and useful developments in the last year and plan more for the next. As our cohort of residents progresses, we look forward to being able to report on those successes as well as the admission of more rough sleepers at the entrenched end of the spectrum. We know we can engage them and offer something special.





#### **■ CONTRIBUTIONS FROM OUR RESIDENTS**

#### A text message from a resident

Gratitude unlocks the fullness of life. It turns what we have into enough, and more. It turns denial into acceptance, chaos to order, confusion into clarity. It can turn a meal into a feast, a house into home, a stranger into a friend. Gratitude makes sense of our past, brings peace for 2day & creates a vision 4 tomorrow. - quoting Melody Beattie

#### B.R. - When Elvis met Marilyn

Elvis Presley picked himself up from the cobblestones of Covent Garden's piazza. It had been a long morning for the rock and roll icon and screen actor. The sun was fierce. Unforgiving. The alcohol swirling around his system played havoc with his co-ordination and sense of balance. It was difficult for anyone, let alone a man covered head-to-toe in bronze paint, standing atop a foot high metal plinth, cradling a guitar, hoping to remain statuesque; unique for public scrutiny and his own self awareness.

Elvis was quickly upright, dusting himself down. His great shock of bronzed hair was as rigid as the points on his cowboy boots. Coins lay strewn around the base of his plinth. He coughed nervously, tried to pretend his stumble from grace was all part of the act. Camera flash caused him to blink, curse his fame; soon he regained his composure amongst the assembled living statues dotted around the square.

Napoleon Bonaparte tossed a crude comment in the King's direction, concerning his weight and the fact he'd eaten too many cheeseburgers, sunk too many Tequilas.

Elvis was used to the brickbats from his fellow artistes. They were envious of his elevated status in popular culture, he told them in no uncertain terms. I'm Elvis from the 1950's, he cried at the motley crew of plinth dwellers around him. I'm thin. I've sold more records than you, Mr Bonaparte. And you Robot Man, whoever you are.

The days were long and unrewarding. Months spent vying for the public's attention and cash

- tedious in the extreme.

The great climb up from the street was well ingrained in the King. The strain of remaining motionless for hours at a time, preferable to the cold nights spent huddled in shop doorways with little money or hope.

He thought of Marilyn, his bride to be.

They'd met in a soup kitchen queue in Westminster. Marilyn in her famed white dress, dancing blonde curls, from the movie – The Seven Year Itch.

It was odd seeing great historical figures, science fiction characters, creatures from the mythical past waiting patiently in line for bread and soup, hot beverages and a friendly smile. Passers by, inquisitive policemen and women wondered at the strange assortment of people with plinths strapped to their backs, discussing their days work and monies made. Surreal, said one. I don't believe my eyes, another.

Towards the back of the line, next to Frankenstein's monster, was Joan of Arc. A crude wooden stake, along with a silver plinth tied to her back. She wore a tattered gown with flame shapes sewn onto the garment, for effect. She didn't like King Elvis, hated his music and his crummy films, as she put it.

They were an item once, living on the street together, often sharing a doorway in Carnaby Street. They'd set their hearts on moving upmarket to Mayfair, but the romance fizzled out due to the stress of low level existence; the constant surge for achievement driving them apart.

Joan eyed the two love birds with distaste.

Marilyn gazed into the King's eyes. They held hands and whispered sweet nothings. Star gazed their elevation from obscurity.

Soon they were dipping their crusts in one another's soup. In Covent Garden they moved their plinths closer together, became inseparable, adored by the summer crowds - he, serenading her - she allowing the breeze to render her dress high.

Across the fog of time, two hazy shapes looked on. And for a moment the neon burned brightest over Covent Garden.

Dear Bridget,

I hope this letter finds you well and that all is ship-shape at number 117. I am writing to offer the briefest of thanks to you for all very the hard work you did on my behalf during my stay. Honestly, I am very grateful. Looking back to where I was when I first presented before you and to where I am now, I can see a great change. Indeed, life seems something of a possibility now. My time at Wytham Hall and particularly the work you did both with me and on my behalf has had a significant effect and I consider myself extremely fortunate to have had that experience. I shall not forget it! Knowing the circumstances of others in my position I feel I can say with complete justification that I could not have found myself a healthier or more encouraging environment. I felt always that you were on my side and that you were interested and supportive to a fault. Consequently, I think of you as having played a major role in my rehabilitation which, happily, remains ongoing. Whilst I am sure you would say that this was "all part of the service" I would suggest that in reality you went some way beyond the normal call of duty. So, once again, an enormous thank you is due. I was tempted to give you a hug when I left but I understand this would have broken all the rules in our modern thoroughly regulated society including, probably, the rules on health and safety and bio-diversity. There is bound to be some statutory clause lurking somewhere that bans such outward displays of gratitude. As we know the law remains, often, an ass. I note also from the current crisis in 'social care' that much emphasis is placed on qualifications, CRBs, codes of practice and other legal safeguards. But without the 'caring spirit' that you possess I submit that none of these measures is of much use to anybody.

I finished my first year at university. It nearly killed me. However, assuming I passed the exams (not at all certain with the Constitutional Law paper) then I shall have the whole summer to ponder on my future and to try and figure out how to make the rent. It's not easy starting again at my age but mostly I remain resolute. On a very positive note William is absolutely thriving both at school and in himself. He brings me the greatest joy. In fact he has become quite the little monster. He

gets away with it (i.e. murder) by being very amusing indeed. I think maybe the stage beckons. Perhaps I should be stricter with him but at the moment I simply cannot. Whatever the case, it is a far cry from the days of Children's Services and its attendant miseries.

I do hope all is well at Wytham Hall. I look back with great fondness to my time with you. How hard it was to leave. Indeed, where else could one gain access to the healing power of French poetry for the homeless, the drug addicted, the dispirited – Jobcentre Plus? Westminster Social Services? They are not big on these things. Please do send my very best to everyone and I look forward to seeing you all at the BBQ on the 8th July. Once again, a huge thank you Bridget for all the work you did on my behalf.

In the meantime I remain, as ever, your humble servant

M.

P.S. I wrote this letter some time ago but having no longer easy access to the WH printer it has unfortunately taken me ages to print and send it.

gregarious animal adapted to live on the plains of Africa in a small group. A single human being wouldn't survive very long on their own with lots of large hungry carnivores wandering around. So living together is natural + being nice to each other is natural to strengthen the bonds which would of course hold the group together.

Baudelaire lived before Charles Darwin's theory of evolution + it is unclear if he believed in God. There are some suggestions that he believed in an exterior evil force + that humanity was doomed by original sin which to me is a quite morbid point of view. In Moesta et errabunda he writes of lying away from the black ocean of the foul city + mud being made of our tears. He is probably talking of the physical state of the city as well as humanity. Most literature of that period talks of the physical stench of cities with streets covered in horse waste, rubbish and human sewage.

I find it hard to get into the mind of a man who lived 150 years ago, Baudelaire was a product of 1820 Paris and his thinking would of course have been highly influenced by its culture.

M.D.

# Essays on Baudelaire (French group topic)

Baudelaire seems to have been quite an unhappy person who was trying to get away from himself + his surroundings. That was probably caused by several things. Being addicted to drugs + alcohol is in my experience depressing for most people. The physical effect of waking up with a hangover all the time would of course taken its toll. Also it is quite common for unhappy people to believe that going somewhere else will solve all their problems. Baudelaire was also a proud man spending a lot on being a dandy which left him in constant debt. He also had syphilis, so with drug addiction + syphilis he would of course been in constant physical discord.

He stated that vice is natural in that it is selfish, while virtue is artificial because we must restrain our natural impulse in order to be good. My problem with that point of view is that it doesn't take into account that we are a

## Les Fleures de mon Mal – My Evil Flowers

The poem "Les Fleures du Mal" by Charles Baudelaire represents the psychological gesture of recognition by Baudelaire, of his own extreme sense of personal sickness. Baudelaire sees himself as an individual suffering from deep existential weariness of life and subsequently his poems become the symbolic offering of flowers as a 'get well soon' wish to himself and by extension, to his readers.

Baudelaire does not spare us, his readers, or indeed himself, the contemplation of pain, anguish and brutality. He wishes us to confront these unpleasant aspects of life and it is in this spirit of confronting one's demons, as it were, that I too am compelled to face up to the fact that I have done many bad and stupid things in my life. Why did I do these things? It is not the object of this piece to address this question but rather to expose my transgressions and my faults and allow the monstrous 'flowers' of my depravity to bloom

in the shadow of Baudelaire's poetic genius. Trying to explain them will not erase them, observing their reality may be a starting point, however, in the process of any eventual resolution and sense of healing.

Where does one begin such a task as this – and indeed – how? It will serve nothing to simply list my mistakes and wrongdoings, the consequences of which have been severe on myself and others. I could attempt to explain certain actions or offer insights into a particular frame of mind. However, this would seem to me to be pandering to formulaic schools of pseudo-psychology and self-recrimination.

No, far better at this juncture to conjure an image offered by Baudelaire as an initial excavation into this complex hothouse of desires and aspirations thwarted, despair, degradation and loss. Baudelaire presents us with a striking and indeed horrifying picture in his poem "Une Martyre". A veritable chamber of horrors is displayed before us, as it were, in an image which appears:

"...Dans une chamber tiede ou', comme en une serre,

L'áir est dangeraux et fetal ..."

Dear reader, let us together invoke in our imagination the tragic sight of the decapitated head of beauty which Baudelaire offers us; it is resting on a small commode, in a richly furnished room, detached from its torso, which lies separated from it on a ruffled bed and pours forth a stream of vivid red blood on damp pillows. The stagnant stench of death, folly and perverse betrayal hangs in the air, inviting us to enter and embrace the scene of destruction and waste of life. Baudelaire expresses his own sense of mortal communion with this tragic beauty which has been so desecrated and contemplates what could have led to this immensely dramatic scene:

"... Elle est bien jeune encore! - Son ame exasperee

Et ses sens par lénnui mordus

S'ataient-ils entr' ouverts a la meute alteree

Des desirs errants at perdus? ..."

Baudelaire makes no form of moral judgment nor does he attempt to sanitize the situation for us. He merely reflects on the possible susceptibilities which may have brought about this particular 'martyrdom'.



Would you rather look away? Do you wish to condemn the poet for his flagrant disregard for your sense of propriety? Do you wish to range your rational arguments and fine ideals against the poet? A word of caution; cast aside your fear, your indignation, your claims to moral superiority and righteousness. Allow the tenebrous spirit of Baudelaire to guide you out of your comfort zone and witness the horror that dwells in the human heart. Put your nose up close to these devastating flowers of evil if you dare. What is done is done. Time marches on beyond reach of redemption. What is left behind is an overwhelming pain of loss and perhaps, as in my own case, overwhelming failure. Do we think we can understand the pain of others? Baudelaire, the humanist, the romantic, the realist, the dandy,

the 'maudit', makes no condescending claim to understand or be able to explain or interpret the pain of others. Do we understand our own pain? In asking these questions it seems that I must rip out my heart and place it side by side on the insignificant commode with the decapitated head of beauty. If you wish to try and understand something of pain I invite you to hold out both your hands: in one I will place the decapitated head of the death beauty in the poem "Une Martyre" and in the other my sorrow-swollen, blood-aushina, own extricated and lacerated heart, bulging like an orchid gorged on despair. This is all I can give you, dear reader. See how it feels.

Bon Chance!

S.C.

#### ■ STUDENT VISITS TO WYTHAM HALL

#### **Czech Students**

Miss Nada Horakova – Charles University Prague, First Faculty of Medicine

Mr Daniel Ilczyszyn – Charles University Prague, First Faculty of Medicine

Mr Jan Knenicky – Charles University Prague, Third Faculty of Medicine

#### **UK Students**

Miss Katherine Donovan – Oxford University
Miss Martina Dalton – Oxford University
Miss Elaine Bruce - University College London
Miss Hannah Theodorou – Imperial College
London

#### Feedback from 7 UCL students

Key: 5 = very good; 1 = very poor

Organization = 5.0

Quality of learning experience = 4.86

- Put lots of effort into our placements: well organized and gave us lots of paper handouts to take away.
- Very well organized with opportunities to talk to two residents.
- The interesting residents and inspiring staff provided a unique opportunity for learning.
- Excellent: I really enjoyed the opportunity to talk to service users alone and to discuss my experiences with Dr. El-Kabir. I learned so much from this experience, not only about homelessness but also about how personal interactions can influence one's understanding of a person's background.
- It was good to see two residents and the person who runs the service.
- Very memorable service users. It really opened my eyes to the range of people affected by homelessness.
- Allowed for challenging one-to-one communication and great follow up with Dr.
- Very well organized: provided literature and organized for us to meet with two residents. Also spoke with supported housing worker before and after meeting residents. Felt that we had time to hear their stories and ask questions. It was a really engaging afternoon.

#### WYTHAM HALL STUDENT REPORTS

#### My experience at Wytham Hall

When I applied and took a part in an elective at Wytham Hall - taking care of homeless people I did not know what to expect from it. BUT I did not expect that I am going to have a life experience and will have an opportunity to know better myself. And this is what Wytham Hall is about. You go there trying to help people, to listen them, to understand why they came to these difficult life situations and suddenly realize that you starting to learn more about yourself. It was very hard in the beginning just to listen to residents, not to judge or say I would do this or that....At the end I have started to love them just as a human beings, tried to find something marvellous in their character. I will never forget how Dr.El-Kabir was interviewing a girl from Eastern Europe, who had became homeless. He asked her if she was looking for something and she started to cry. The same question I am asking myself now.

N.F.

As a medical student I carried out a three week placement at Wytham Hall and its associated medical centre. I wanted to experience something a little different from the usual hospital-based placement. During my three weeks, I split my time between GCS and the community at Wytham Hall. My time at the medical centre allowed me to gain insight into the type of medical complaints that face homeless people sleeping rough. I gained a greater knowledge of the difficulties that homeless people face when in need of access to medical services and I observed members of the large multi-disciplinary team providing social, housing and benefits advice. This gave me a glimpse at how many obstacles there are in trying to aid the complex needs of this very vulnerable group of adults.

The greatest experience I will take away from this placement has been from the interactions I have had with the residents and staff at Wytham Hall. I have been welcomed into the community, meeting with residents on a regular basis and attending groups. It is these interactions I will endeavour to summarise in such a way as to share what I have gained and what I wish to apply to my career and life in the future.

"Acknowledging someone else's reality validates your own" – David El Kabir When I first entertained the idea of training to be a doctor, I hoped it would be a means of relating to people, of crossing cultural, racial and religious barriers in the ultimate hope of helping them. But to help someone must mean that you understand that person and how it is that they need to be helped. In medicine, I am increasingly realising that this is the greatest challenge.

Each week at Wytham Hall I attended the Wednesday morning French group set up by Dr El-Kabir. I speak little French and lack confidence in my ability to learn languages, yet I felt inspired by how the residents could relate to the French poems, songs and plays that we worked through. Even though I felt very much the novice amongst the group, I was made to feel welcome and it gave me the confidence to participate and I thoroughly enjoyed the sessions.

The Balint Group is available to residents every Wednesday evening as an open forum for discussion. I felt privileged to be present whilst residents and staff discussed anything from the Da Vinci exhibition to problematic gardening relating it back to difficult periods and events throughout their lives and the different mediums through which people choose to express themselves.

There are two particular residents who gave me the opportunity to reflect on how I interact with others, the strength of my interpersonal skills and what factors influence how I feel I am able to help people.

Building up a rapport with Mr A was difficult and in the end I was left with a sense of helplessness. Not knowing in what way he could be helped and what I could share with him left me angry and frustrated by his lack of motivation for change.

My meetings with Mr B were very different. He spoke openly about his relationship with his mother, although valuable to him it has represented a constant part of the cycle of his addiction and by living in Wytham Hall he hopes this will be another step to breaking that cycle.

On a personal level I have gained a lot from my meetings with Mr B as his experiences resonate with circumstances in my own family. It has led me to re-examine my own past and attitudes and to seek further understanding.

#### **Summary**

As medical students and no doubt as doctors, the ability to empathise and relate to others often arises from our own personal

experiences. We relate to people as best we can and as only we know how. My experiences gave me a greater sense of having connected with Mr B. In contrast, Mr A often made me frustrated because I felt I had nothing to share with him and I could not relate to his lack of need to change. In reality, my meetings with the residents at Wytham Hall forced me to delve into my past and my own ideals, making me reflect on how I apply my own experiences and values to form judgements of others and how they cope with their problems.

Professionally, this opportunity has tested my interpersonal skills and has made me realise that my own life experiences have a very strong influence on the way in which I interact with others and how I believe I can help them. In light of this, I must recognise the judgements I make and remember that what I feel I can offer to the individual may not be best suited to their needs. As a doctor I hope to use what I have learned in my time at Wytham Hall to pursue a greater understanding of the dynamics of my relationships with patients.

J.S.



#### ■ BENEFACTORS OF WYTHAM HALL

We would like to thank the following organisations and individuals, as well as those that wish to remain anonymous, for their kind donations and gifts.

#### FINANCIAL YEAR 2010 - 2011

Trusts and Statutory Bodies:Individuals:Dr. J. CrownThe Sidbury TrustMs. D. SimpsonDr. D. El KabirNomuraMr. D. DerxMr. C. Littmoden

Ms. A. Gleave Dr. D Sturgeon
Mr. and Mrs. E. Jupp Mr. S. Andrews
Sir Muir Gray Miss C. Court
Ms. S. Willson Jennifer Raworth
Her Grace Frances, Duchess of Miss G. Tonti

Rutland

Mrs. C. B. Tubb Dr. R. Lancaster

# We would also like to thank the following organisations with whom we regularly cooperate:

ABT Photocopiers; Alcohol Recovery Project; Alcoholics Anonymous; Agency; Andrews Computers; Atis Real Weatheralls Surveyors; Atlas Boilers; The Benefits Agency; Broadway; Browns Chemist 195 Shirland Road; Citizens Advice Bureau; Central North West London CMHT; Chubb; The Connection at St. Martin's: E K Mechanicals; Eurogard; Foundations 66; Freshstart; Great Chapel Street Medical Centre; Groundswell; Homeless Link; Homeless Persons Unit Westminster, House of St Barnabas; Housing 21; Hungerford Drug Project; Joint Homelessness Team; Kensington & Chelsea Primary Care Trust; London Law

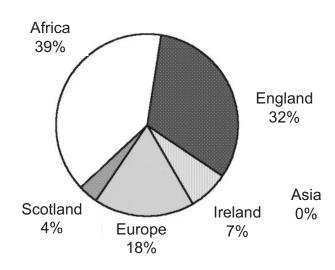
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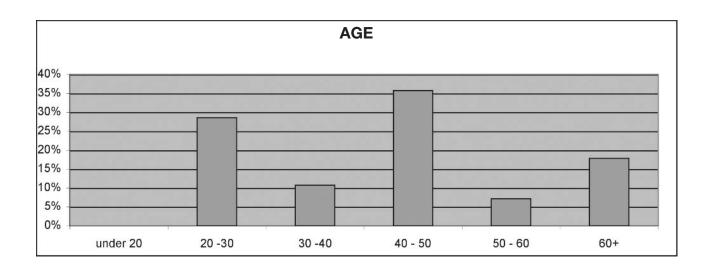
Metropolitan Police; MIND; Narcotics
Anonymous; The Passage Day Centre; St
Mary's Hospital; St Mungo's Outreach; The
Rough Sleeping Team; Salvation Army;
Shroton Street Hostel; Supporting People;
Threshold; Turning Point; WAMH; West End
CMHT; West London Day Centre;
Westminster Drug Project; Westminster
Housing Benefit; Westminster Social
Services; Westminster Transport
Department; Westminster Volunteer
Bureau; Wharfside Clinic; Westminster
Adult Education Service; Woodfield Road
Health Centre.

# ■ STATISTICS ON ADMISSIONS TO WYTHAM HALL

APRIL 1st 2008 - APRIL 1st 2011			
	2008-2009	2009-2010	2010-2011
Total number of residents:	26	26	28
Male:	26	26	28
Female:	0	0	0
Average age:	45.5 years	40.15 years	41.64 years
Average length of stay:	802 days	789 days	1026 days
Figure of overall occupancy:	86%	85%	95%

# **PLACE OF BIRTH**





### **CASH FLOW STATEMENT YEAR ENDED 31st MARCH 2011**

	2011		2010	
	£	£	£	£
Net Cash/inflow (outflow) from operating activities		22,228		(5,289)
Returns on investments and servicing of finance				
Interest received Interest paid	1202		377	
Net cash inflow from returns on investments and servicing of finance		1202		377
Investing activities Payments to acquire tangible fixed assets	(6,025)		(2,381)	
Net cash inflow/(outflow) from investing activities		(6,025)		(2,381)
Net cash inflow/ (outflow) before financing		17,405		(7,293)
Financing Donations received	14,969		10,940	
Net cash inflow from financing		14,969		10,940
Increase in cash and cash equivalents		32,374		3,647

# **INCOME AND EXPENDITURE ACCOUNT YEAR ENDED 31st MARCH 2011**

	2011		2010	
	£	£	£	£
Income		272,738		246,357
Direct and administrative expenses		231,897		312,438
Operating surplus/(loss)		40,841		(66,081)
Interest receivable Interest payable	1202	1202	377	377
Surplus/(deficit) of income over expenditure for the year		42,043		(65,704)
Donations	14,969		10,940	
Capital donations Transferred to reserves Profit on sale of fixed assets	127	15,096	-	10,940
Surplus/(deficit) for the financial year		57,139 		(54,764)

#### **■ PUBLICATIONS ON HOMELESSNESS**

Great Chapel Street Medical Centre El Kabir D J.

British Medical Journal, 1982; 284:480-1.

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Psychiatric Bulletin, 1990; 14:270-1.

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In: Smith S J, Knill-Jones R and McGuckin A,

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Community Based Teaching, Sharing Ideas 1, King's

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St. Catharine's College Society Magazine, 1992.

Book Review 'Homelessness: A national perspective' Ed. Robertson M J., Joseph P.

British Medical Journal, 1992; 305:658.

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Joseph P.

Criminal Behaviour and Mental Health, 1992; 2:192-200.

Diversion from Custody. I: Psychiatric Assessment at the Magistrates' Court

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Diversion from Custody. II: Effect on Hospital and Prison Resources

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Psychiatric court clinics in the United States Joseph P.

Psychiatric Bulletin, 1992; 16:557-560.

The perception of emotion by schizophrenic patients Joseph P, Sturgeon D, Leff J.

British Journal of Psychiatry, 1992; 161:603-609.

Psychiatric morbidity and substance abuse among residents of a cold weather shelter

Reed A, Ramsden S, Marshall J, Ball J, O'Brien J,

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Joseph P.

British Medical Journal, 1992; 304:1028-9.

Quelques observations sur les sans-abris

El Kabir D J

Paris, Les Temps Modernes, 1993: 567

A pragmatic approach to the health care of the single homeless: its implications in terms of human

resources

El Kabir D J, Ramsden S S.

Dimensions of Community Mental Health Care, ed

Weller M, and Muijen M,

London: W B Saunders: 1993

A psychiatric bail bed in a residential sick bay: a one year pilot study

Joseph P. and Ford J.

The Journal of Forensic Psychiatry, 1995; 6:209-217

On creating a culture of care for the homeless

El Kabir D

Journal of Interprofessional Care, 1996; 3: 267-272

Primary care of the single homeless Homelessness and Mental Health

Ed. Bhugra, Cambridge University Press.1996

Dr D El Kabir & Dr S Ramsden

Copies of all papers and articles are available on

request.

#### Appendix 1 - Wytham Hall guest night list

Guest Night - 27.10.2010

Dr Phil Timms - Consultant Psychiatrist Homeless Mental Health Team
Dr Phil Joseph - Forensic Psychiatrist, St Charles and Maudsley Hospitals

Dr John Denford - Personality Disorder Specialist, formerly Director of the Cassel Hospital

and Consultant at the Tavistock Clinic

Nicolas Vial (GCS)

John Conolly (GCS) - Lead Counsellor, Homeless Service, CLCH

Cathy Mulroy - (NHG Practice Nurse)

Guest Night - 8.12.2010

Dr Clare Gerada (CBE)

- Chairman, Royal College of General Practitioners

- University College Hospital Homelessness Project

- Former Chairman, Kensington & Chelsea PCT

Mr Charles Fraser - CEO St. Mungo's

Dr Dan Lasserson - Lecturer in General Practice, Oxford University

Dr Raj Persaud - Consultant Psychiatrist

Guest Night - 23.2.2011

Prof David Haslam (CBE) - Member of NHS Evidence Advisory Committee

Lt-Gen Sir Scott Grant (KCB) - Trustee elect

Dr Jill Hazelhurst - General Practitioner

Dr Dan Lasserson - Lecturer in General Practice, University of Oxford

Guest Night - 10.3.2011

Dr Iona Heath (CBE) - President of the Royal College of General Practitioners

Professor Sir Muir Gray - Director of the National Knowledge Service and Chief Knowledge Officer

to the National Health Service

Dr John Horder (CBE) - Past President of the Royal College of General Practitioners,

President of Wytham Hall

Erez Noonoo - Lawyer

Guest Night - 16.3.2011

Prof. Gillian Manthorpe - Professor of Social Sciences, Director of the Social Care Workforce

Research Unit KCL

Dame Ruth Runciman (DBE) - Chairman of Central North West London Mental Health Trust

Dr Phil Joseph - Consultant Psychiatrist

Erez Noonoo - Lawyer

#### Appendix 2 - French Group

Texts studied include works by Ronsard, Malherbe, La Fontaine, Victor Hugo, Charles Baudleaire, Paul Verlaine, Max Jacob.

Musical settings of some of these poems by Fauré and Duparc were appropriate. Reproduction of paintings by Breughel the younger (Fall of Icarus), Phillippe de Champaigne (Ex-Voto) and Watteaus (Fete galante) were studied together with the works of painters mentioned in Baudelaires poem "Les Phares".

Further details on request



# **MAKING A REFERRAL**

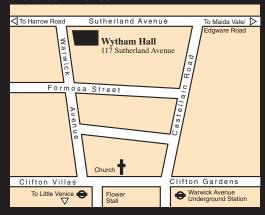
Contact: Project Workers to make an initial referral

Tel: 020-7289 1978

We provide support and housing for people with a history of homelessness in Westminster, who are not actively using alcohol or drugs. Support may include counselling, educational courses, but also simply living in a more settled way with the support of staff and other residents.

Not for long term housing alone.

### How to find us



www.wythamhall.co.uk