UCLRA01: To start the conversation, I’d like to ask you, if you knew somebody like this, would you think that she should look for help?

I03BCF50: Yes she should definitely look for help. Because if not, it might develop further and could cause her to get into problems that she shouldn’t necessarily get into… shouldn’t really have to get into. It might lead to serious repercussions.

UCLRA01: OK. Now this is interesting because obviously forgetfulness is quite common; everybody gets that. So what do you think would make the leap between somebody deciding, “ok, now I have to see the doctor”. You know when would you decide when to say….ok, just laugh about it, say I forgot my key today and ignore it or what would make that leap between ok taking the step to go and see the doctor, or just forget about it.

I03BCF50: I think that person should not hesitate, should make the first move and get that first advice, so that her doctor can lead her in the right direction or he or she in the right direction.

UCLRA01: OK, at any point do you think that once you have memory issues you should go and see your doctor? Is it correct?

I03BCF50: Definitely!

UCLRA01: OK

I03BCF50: Yes, ‘cause he who hesitate is lost. It’s best to you know nip it in the bud

UCLRA01: Have ever had that kind of decision to make? Let say for a friend or for yourself?

I03BCF50: Yes, I visited a couple of friends who you know umh didn’t go to the doctor straight away but I noticed that she was umh forgetting a lot things. And umh I’ve noticed that her husband, she usually complained to me that her husband keep wandering away and umh she just thought really he wanted to go for a walk on his own. But then in the end it was dementia. And I don’t think they really took it very serious. One day she was upstairs in her house and when she went downstairs he wasn’t there and he was found wandering in Clapham Common. Just wandering, wandering away…

UCLRA01: OK

I03BCF50: Yea

UCLRA01: And did you help with that situation? What was your reaction?

I03BCF50: Well, I stood by my friend and encouraged her to make sure that he go umh goes to the doctor and umh gets some advice otherwise from social workers

UCLRA01: Alright, OK. Oh that’s excellent. So your idea is definitely we should get help.

I03BCF50: Yes

UCLRA01: Now, you did mention that you advised your friends to go and see the doctor, do you think that would be the first place to go? Seeing the GP or the doctor, or would you…. let say if it was you, would you go and talk somebody else first rather than going to your doctor?

I03BCF50: I … I myself I wouldn’t mention it to anybody. I just sort of keep a watch on my behaviour and then if I find umh that it’s getting a bit overpowering then I’d go to my doctor. Because sometimes you mention something to a friend and they might put it the wrong way and they might even be embarrassed. So it’s best to take a notice… note of yourself and if it gets worse, your doctor is your friend.

UCLRA01: OK… So you…

I03BCF50: Or say to the family

UCLRA01: OK

I03BCF50: It’s always best I think in many ways to in fact umh many families who are interested will notice it. You know and then sometimes they wouldn’t probably advise and say, “You better go and see the doctor”. Or they could report you to the social worker or to another friend. You know it depends the way that people take things.

UCLRA01: OK. Would you mind expanding a little bit more on that, you said umh, unless you go and see your doctor, they might refer you to the social service. Why would you say that?

I03BCF50: Well… social serv… if that particular person goes to the doctor and the doctor refers her to the social services then the service… social worker will be able to umh make some plans, how she could join in and get advice

UCLRA01: OK. So would that be a good thing then?

I03BCF50: It would be a good thing

UCLRA01: OK. Alright…

I03BCF50: Umhm, to my opinion

UCLRA01: Thank you very much. So you said for you what you’d do, you’d monitor yourself first?

I03BCF50: Yes

UCLRA01: Right. Then your next step would be family or the GP? Which one would you go for first?

I03BCF50: (Sigh) I would mention it umh to my family and say, “You know what, I keep forgetting things”, and then they in turn probably would say, “Are you still forgetting things?” and would say, “Oh, mum will you go and see the doctor?” or the social worker. And then it would be up to me or to that particular person to accept what advice they get. It’s always this… the minute you start to experience all these calamities, don’t sit with it or it gets worse.

UCLRA01: OK. So, as far as you’re concerned you would see your friend, sorry your family first. So, would their opinion matters in what your decision would ultimately be? Would you say that if you discussed with your daughters or your, you know your son and they said, “OK mother you keep forgetting so now you should go and see the doctor”, would that push you to go and see the doctor?

I03BCF50: Yes, definitely would, and they would make sure that I go

UCLRA01: OK

I03BCF50: And even if I make excuses that… and they’d say, “Are you sure you went?” They would make sure, you know so… I’m sure about that.

UCLRA01: It would… And why would that make you go to the doctor? That your family…

I03BCF50: That’s because I’ve been encouraged…

UCLRA01: You’ve been encouraged…

I03BCF50: … to go…you know… to take the advice, before it gets worse because I’ve known people who umh you know I think they don’t have family who advise or anything and it gets worse. It’s a lot of dementia now, you know?

UCLRA01: There are quite a few cases…

I03BCF50: Yes… yes, I visit … I visit some of my… couple of my friends and it’s not a good thing. Umh, right now in Luton, my sister-in-law she’s suffering with dementia.

UCLRA01: Oh OK. So you have personal experience…

I03BCF50: My brother told me about it but she didn’t tell me (09:41) you know. I’ve been to see her… I went to see her a month ago and we’d be talking about certain things and things that she should remember but she doesn’t remember. And then my brother is not like me. He sulks! Because she’s complaining to me that, “Oh he comes in and then he goes upstairs in his room and he’s not even communicating with me”. But then, he told me that, you know he can’t cope with it.

UCLRA01: OK. Can I ask, is he getting help or did you advise him to get help for caring for his wife?

I03BCF50: He doesn’t discuss anything like that to me but she tells me everything.

UCLRA01: OK

I03BCF50: You know… so… and then what is bothering now is that I’ve got a sister in Jamaica who is ninety, ninety-five… in November next month she’s ninety-six and umh she’s suffering terribly with it. Yeah… so…it it it’s got to be taken in hand. But then now my brother has got his wife there sitting on her own and he’s being distant. And I said to her she could probably come down here sometimes in a couple of weeks because I’m on my own. But because she’s got umh you know swollen ankle and knee, that stairs, she wouldn’t be able to up and down my stairs. So, if not I’d really say to her, come down and just talk and come down to the club with me. Because when I knew her before this happened, and umh she used to come down very often and spend the weekend and we’d go out together and have fun. But now that’s all over. She sits there.

UCLRA01: That’s interesting because your initial reaction would be to look for help…..

I03BCF50: Yes, look for help!

UCLRA01: … but you’re saying umh…, for example for that member of family, they don’t tend to look for help.

I03BCF50: No

UCLRA01: Would you know what prevent them from looking for help?

I03BCF50: I think it’s sort of umh, I call that foolish pride.

UCLRA01: OK…

I03BCF50: Don’t want anybody to know how things are, you know or how things are and as my mother always said, “pride good before a fall”. See, got to be very careful. I’ve visited quite a few people friends of mine and they’re getting very forgetful. And it’s so sad…very sad.

UCLRA01: OK. Any other reasons than pride that would stop people to look for help do you think? Could there be any other reasons?

I03BCF50: I don’t know, everybody seems to be so different. It could be that umh… any… I don’t know what to say. It’s difficult to know how to say about that. It’s just that umh they’re neglectful…

UCLRA01: OK

I03BCF50: Neglecting themselves…

UCLRA01: Alright, OK

I03BCF50: Neglect! Put it in a one big nutshell, because of neglect. People shouldn’t… because many people you know they’ve got aches and pains and they neglect themselves and they keep it to themselves then it gets worse.

UCLRA01: Yes, that’s true…

I03BCF50: Hmmm, my husband umh had a bit of dementia. And umh we had a sort of a stand which… table there where umh they put his meals. And one day he took one of those slippers and put in the plate… it’s was so sad! Very very sad! I’m down the kitchen preparing a meal and when I come up he’s crying he said he hadn’t seen me for days. Very very very sad it was. Here we go! And then umh I was privileged to get carers and then the social worker said to my son, umh the one whose daughter has got those three degrees there, (that wife?) said, “Take your mum for holiday”, because I was sort of… being like a nurse to him you know… you know what I mean?

UCLRA01: Yes

I03BCF50: I mean when you care love and care for someone and social worker said, “So, why don’t you, you and or family take your mum away to Jamaica for a holiday. She’s over doing it?”, you know. So they took me to Jamaica and I wasn’t allowed to make any phone calls. And my son used to umh keep a check and say, “I hope you’re not ringing home, you know”. I said no, I’m not. But umh… because that was to give me…take me away to give me strength and take my mind (of that a date?). (15:11) If not, two of us (would just) go down, you know?

UCLRA01: Yes absolutely

I03BCF50: So, it’s something I’ve experienced. Another very good friend of mine, she’s in Jamaica now the husband died. And umh she just went upstairs one day, she was living in Solon Road, Brixton, and when she went back… she was having a bath…and when she went downstairs he wasn’t there. You know where he was found at Clapham Common… just wander away…

UCLRA01: OK

I03BCF50: You see with this you know… people who suffer with that need a lot of attention. Shouldn’t be left on their own. There we go… but it’s getting worse.

UCLRA01: Very good point. So the family support is important, isn’t it?

I03BCF50: Very important… umhm

UCLRA01: Now, as you know we have been running these focus groups with quite afew people and one thing that came out is some people say…having memory problems, having to deal with memory problems, they usually think they’re better off to be back in their original country… they country of origin, like being in the Caribbean or being in African than in here. But we also heard the opposite view, where people say, no it’s actually better to be in England when you have to deal with memory problems….

I03BCF50: Yes… yea…

UCLRA01: What are your feelings about that?

I03BCF50: I think they’re better off here… get more help…

UCLRA01: OK…

I03BCF50: Yes, better off here. Because back home people just say, “Oh that person… did you hear about that person next door going crazy”. They just say you know they’re going mad and things like that. They don’t take it serious. But here now, you know you can talk to someone or… and you go to the doctor and when the doctor is talking to you the doctor will discover that something is wrong.

UCLRA01: Yes

I03BCF50: And then they will help… nip it in the bud.

UCLRA01: Yes, absolutely

I03BCF50: I’ve been to quite a few umh of my friends umh places and I talk to them, I say look get some photographs and put all around the place. Take up something to jog your mem… keep your memory going, you know! And when… when I sit here and look around photographs and different things, bring back such nice memories. And that’s what I’ve been saying to my friends. Look up some of your old photographs and things. Stick them up on your wall, especially if you’re living on your own. I’m not lonely, no! Look how many kids I’ve brought up and I’m not… I’m not lonely. Because look, I’ve got all those photographs. And then, I would say, when did they go to that place? Oh that was so and so and so… and everything comes back. So, that’s what I’ve been saying to a few people. Always have something to jog your memory. To take your mind way back and bring it back forward to you. I find it very useful.

UCLRA01: So you helped others to recognise the need to keep the mind…

I03BCF50: Yes

UCLRA01: Now, another thing you mentioned about why people don’t go to the doctor, it could be pride, it could be they’re neglecting themselves…Obviously no one wants to be ill or having illnesses but what would be the difference according to you…what would be the difference between getting a diagnosis of dementia and a diagnosis of… let’s say diabetes or arthritis? Because people usually tend to go through that without major problems, if they have high blood pressure or anything…

I03BCF50: Yes, that’s right yes!

UCLRA01: But what would be the difference between getting that getting a diagnosis of dementia?

I03BCF50: They just feel that umh…you know remarks could be passed that they’re going crazy. Because of prejudice

UCLRA01: OK…

I03BCF50: Hmmm

UCLRA01: You think it’s the…

I03BCF50: Prejudice

UCLRA01: It’s the scare of being labelled crazy or mad?

I03BCF50: Yes… yea but umh it’s terrible. (20:00) – It is so very sad. I’ve heard of some terrible cases… hmm.

UCLRA01: OK. That’s very very interesting. Now, the one thing that we noticed…There are quite a few research going around, and they noticed that people who get help from their doctor earlier in the condition usually do better…

I03BCF50: Yes, that’s right

UCLRA01: Yes they do much better. They have time to plan the future for example. Their family have the help and support… as you mentioned. Now, according to you… I mean if you had to face this kind of problem, if you knew someone… you obviously know people with that kind of problem, what sort of information should be out there to help people seek assistance from doctors?

I03BCF50: They really need umh people like yourself (LAUGH)

UCLRA01: Thank you (SMILE)

I03BCF50: To… to… you know go around and umh you know sort of… how should I put it now umh… give advice and get the information and put it all together

UCLRA01: OK

I03BCF50: You know, going into homes. Visit people and talk to them in fact and converse with them. I think that’s not a bad idea. What do you think? Is that ok?

UCLRA01: Oh you know there is not right or wrong answer

I03BCF50: Like you are doing now, you go around and you… you … you communicate with people. Hear what they’ve got to say. And even if I was suffering with it, you’d pick it up. You know and then you’d go further with it. How many times I say, oh my god where did I put this, where did I put that, then say, oh yes I did put it there, which is just natural.

UCLRA01: It is interesting because quite a few people mentioned the one to one; going to visit people and talk to them, which obviously a very… you know this is the first thing that come to people mind. But which can be in a way sometimes difficult because then we will need a much bigger group of people to go and visit everyone. Do you think there is another way where we can reach people whether using leaflets or …

I03BCF50: Leaflets are very useful… very very useful. And umh people read about umh what’s in these leaflets then it gives them sort of food for thought. You know?

UCLRA01: Yes

I03BCF50: Leaflets are very very useful… very

UCLRA01: Now if your GP sent you a leaflet about memory problems, would you read it?

I03BCF50: Of course

UCLRA01: OK

I03BCF50: Of course, I would

UCLRA01: Would that worry you at all if you see a leaflet… that the GP actually sent you a letter or a leaflet directly addressed to you giving you advice about memory problems… would that worry you at all?

I03BCF50: It would not worry me… I just sort of…

UCLRA01: Would it, sorry?

I03BCF50: Just think about it.

UCLRA01: You would think about it…

I03BCF50: And just aware it’s food for thought. Give me something to think about and say, why did I get this? I must look into it. You know… it’s a sort of, what word should I say now it’s …umh...it’s an advice…in one nutshell advice. You either accept it or reject it. (23:50)

UCLRA01: OK

I03BCF50: But it’s good!

UCLRA01: Now, if the leaflet or any type of information comes from somebody else, not the GP but any other sources, would you still read it?

I03BCF50: Yea of course… it doesn’t matter what source it comes from; the more the better. Because you can look through them and sort of compare and then weigh things up within yourself, you know?

UCLRA01: OK

I03BCF50: Yea, I think so

UCLRA01: OK, thank you.

I03BCF50: For example, what you’re doing (LAUGH)

UCLRA01: Thank you (SMILE)… and what type of information would you think, that would help you to actually read the information. Because some people would say, “Leaflet? Oh another one, I’m probably going to ignore it. If somebody put a leaflet through my door it’s another one, I’m probably just going to through it away”. Now what should be in these kinds of leaflet to attract your attention and make you read it?

I03BCF50: Umh, I would say…is umh the part about umh noticing as it say, have you noticed… are you being forgetful. Are you…how should I say… put that now…? There could be questions

UCLRA01: OK so a question?

I03BCF50: Questions!

UCLRA01: Right… OK… OK

I03BCF50: Number one, and then after the questions say, if you’ve experienced this, then the advice comes afterwards.

UCLRA01: OK

I03BCF50: That’s how I’d work. I would look at the leaflet. Think about it. Make my decision. Keep querying about it and then make a decision

UCLRA01: OK, so something clear and direct

I03BCF50: Yes

UCLRA01: Not too much…

I03BCF50: Not too much

UCLRA01: … information or…

I03BCF50: Just something simple

UCLRA01: Something simple… so saying, if you have memory problems you should do this and you would find that useful.

I03BCF50: Yea

UCLRA01: Now, would you need to see pictures of something like that, or it doesn’t matter to you

I03BCF50: I don’t think the pictures matter. It could be… it depends… it depends… some people say… or I don’t know. Or what would be useful is if a… umh… there’s a session and then is shown on the screen… illustration

UCLRA01: So you’re talking about a kind of a drama or something on the TV?

I03BCF50: Yes… yes

UCLRA01: OK, so what format would be interesting for you? Kind of a movie or some comedy type or… what would you… do you think would work better for you? Like if something wanted to advise you about memory problems?

I03BCF50: I think it’s chiefly for the advice but umh… I don’t know which is the best way that you sort of put over to people

UCLRA01: But what would you like? I mean let say I need to send you some information about memory problems, would it better for you that I send it to you on a piece of paper or would it be better that I send you a DVD for example, that you could put in your machine, your VCR and play it?

I03BCF50: Yea, I think a DVD… or DVD or…umh…

UCLRA01: You would watch a DVD, would you?

I03BCF50: I myself I wouldn’t like to watch a Video

UCLRA01: You would or you wouldn’t?

I03BCF50: I wouldn’t

UCLRA01: Ah, thank you

I03BCF50: It will be too disturbing. I’m not sure… you see it all depends on the individual. Some people might look at it in the video and say, “Oh God, I’d better look about myself and then say, and so and so…I wouldn’t like that to happen to me”. Others now it will sort of put them off. Get them frightened and probably get them worse.

UCLRA01: So would that put you off then a DVD?

I03BCF50: I don’t think… I don’t know what would put me off. No, I don’t think it would but umh I’d feel…. It would put me… in an alert

UCLRA01: OK

I03BCF50: Say look, “Oh dear…” you know give food for thought

UCLRA01: Right… OK

I03BCF50: But it could be very useful… depends. It could upset some people and others again it… made them think too much umh… it depends you know… it really depends. If I see it there now, I’d say, “Oh God, those poor people, oh God, so sad.” I’d be like that. And then it’ll be in my mind all day

UCLRA01: So that might make you a little unhappy

I03BCF50: Yes!

UCLRA01: OK. So in this case, how about if the DVD or the content of the DVD is not sad but something…

I03BCF50: That’s got good

UCLRA01:.. a comedy or something more uplifting. What would invite you to actually pay attention to it without making you uncomfortable? What format? Do you think they should to… let say… just show you a film of a doctor discussing with a patient or may be umh a mother with the rest of the family members discussing their memory issues or perhaps a comedy? Some people mentioned having a comedy… may be a member of the family is making …you know just having a very gentle and nice laugh about the mother or the father forgetting something. What kind of format would you think that would make you actually think, ok this is interesting umh… this is funny yet I need to actually act on…

I03BCF50: Take it seriously

UCLRA01: Yes, take it seriously… act upon it

I03BCF50: It depends so much on people

UCLRA01: Yes it’s true, everybody is different.

I03BCF50: Everybody is so different

UCLRA01: How about you… just for you personally?

I03BCF50: I wouldn’t mind umh you know, watching a comedy

UCLRA01: OK

I03BCF50: You see, because umh I wouldn’t let it go there. I just sort of … get the… see the experience through watching that

UCLRA01: OK

I03BCF50: And then, it would give me food for thought, something to think about

UCLRA01: Thank you. So now, let say we decide to umh we do a leaflet or a DVD, who do you think we should show this to? Who should that be directed at? Should it be a specific age range? Because we’re talking about memory problem obviously... umh if we go and say, ok we’re talking about memory problems, should we just target people aged 65 and over or should we target younger, children or adults or?

I03BCF50: I think you know… age doesn’t count because younger people if you give them the knowledge of these things and if they have their parents who are behaving unseemingly, they could help, by telling someone or telling the doctor you know. It’s alright for young people to see it. Especially if they have their parents or you know umh friends parents. They could say, “I’ve seen my mum so and so doing so and so” and then it leads on from there. Everything depends.

UCLRA01: So it would be the… you would think we should target the entire age range from younger people to older

I03BCF50: Yea… yea, definitely. Because the young ones would notice the strange behaviour you know and even if they you know, they’ll spread the word or whisper it to someone and then it leads on from there

UCLRA01: OK

I03BCF50: umhmm, I think young and old, everybody… everybody.

UCLRA01: Now, just one more question: having discussed that with many people, lots of people say they’re kind of reluctant to go to their GP for a number of reasons. One that seems to come up a lot is they think that the GP is not helpful enough or the GP might not know what to do. What do you think about that? They think if they go and see the GP, he’s not going to help me, he’s not going to be able to do anything. Do you have any ideas or feeling about that?

I03BCF50: If they don’t want to go to the GP, I don’t know… umh they should confide in their friends.

UCLRA01: But would you feel… if you had to deal with that personally with memory problems… if you started worrying about your memory, would you have some reluctance to go and see your doctor or would you just go and feel that you can get the help from him? Would you feel confident that you can get help from your doctor?

I03BCF50: Will go straight to the doctor

UCLRA01: But would you feel confident about that?

I03BCF50: Oh yes, oh yes, oh yes. The doctor is your friend.

UCLRA01: OK

I03BCF50: The doctor is your friend. You got to put your faith in your doctor. I never changed my doctor. I lived in the Brixton area for thirty odd years and when my husband died and moved up to Streatham and that house in Streatham was too large. I didn’t like it. It was too sort of… so I moved up here and I never changed my doctor. I was told you got to change your doctor. I said no way, NEVER. Nobody could get convinced me to change my doctor, not even my doctor. So long I’m sticking to my doctor. I leave from here and I go all the way to Clapham (LAUGH)

UCLRA01: So you have a very good relationship with your doctor?

I03BCF50: Yes… yes because they even asked me to umh to write something about the surgery that I knew from the fifties and I’ve sent in very, very good report. I’ve seen three different doctors now. A Canadian doctor then Dr Mary Waller and this doctor who is there now. And umh, the reason why I don’t want to change my doctor is because of the benefits I get at that place. Oh yea, hmm umh definitely

UCLRA01: Would like to say more about that? When you say benefits could you explain a little bit more about that?

I03BCF50: Pardon?

UCLRA01: You said you get benefits… because of the benefits… what sort of benefits?

I03BCF50: Because umh you know whenever… just in case of anything you know I can call on them at any time and I get their advice, things like that. You know, so… Lots of people say to me, “How is it you don’t change your doctor?” I say, no way nobody can tell me to change my doctor. No way… All my children are the same way. They all go to the same doctor.

UCLRA01: So they’re helpful and available

I03BCF50: Very helpful, yea

UCLRA01: So would you say that the relationship with your doctor is very important

I03BCF50: Very important, very

UCLRA01: So would you think that that would prevent you if you had a strained relationship… you know your relationship wasn’t as smooth as now with your doctor, would that prevent from going and see him

I03BCF50: No it wouldn’t prevent me at all.

UCLRA01: No?

I03BCF50: No!

UCLRA01: If you didn’t like your doctor you still go and see him

I03BCF50: I’d still go. He’s the doctor.

UCLRA01: OK

I03BCF50: And umh, if I’m not happy about what he said to me even though you really should confide in your doctor, I’d mention it to someone else. Or ask them, what about your doctor. And if they tell me the difference between both doctors then, it would give me food for thought.

UCLRA01: Excellent, that’s very interesting to know

I03BCF50: Yea, some good friends out there searching…

UCLRA01: OK, that’s…

I03BCF50: When I was leaving Jamaica, my father said three words would keep you going in a foreign country: how to live.

UCLRA01: OK

I03BCF50: How to live… and nearly everybody, friends, everybody who know I03BCF50 Bailey, they could… some of them call me “How To Live”. Because anywhere I go and giving a lecture and mention what my father said, three words would keep you in a foreign country: how to live. And another big word I’ve been umh saying to a lot of people these days, what we need especially black people is togetherness, togetherness. Those two things. So life is… you know it’s good to sit and talk. And if you’re talking to me here today, the whole… the rest of the day is so inspiring. It’s good to talk.

UCLRA01: Absolutely. So what would be your advice on reaching the black community, you know to advise them to go and get help for their memory problems? What would be the best way to reach them?

I03BCF50: What they have to do is plan umh… like coffee mornings and little get togethers and talk. Get togethers I find very, very helpful. And umh, I go to a lot of little groups and I get couple of my friends. I’ve got all those ladies in my group and sometimes we have tea parties and… you should come and join us

UCLRA01: Yes I would like that

I03BCF50 and UCLRA01: (LAUGHS)

UCLRA01: So would you think that having umh little community sessions is a better way to reach the black community than perhaps maybe sending them a letter? If you want to reach the black community and advise them to look for help when they notice that they have memory problems, would you say… what would be your first choice? Would you like to be reached by organising some kind of event or would you prefer that somebody sends you a letter at home and you read it in your quiet place and make up your own mind? Which would be your first choice?

I03BCF50: Can you repeat that first part?

UCLRA01: Yes, if for example you want to reach you know…you want to

I03BCF50: Reach people

UCLRA01: Reach people of the black community because as we said we have noticed that the black community do not tend to look for help when they have memory problems, you mentioned that one of the good things would be to organise coffee mornings and organise events. But you also said that leaflets are very good

I03BCF50: Very, very good

UCLRA01: Letters are very good as well (I03BCF50: agreement). Now if you had to pick one or the other, if you had to choice the first best way to reach, would you prefer that somebody invites to coffee shops and talk to you about memory or would you prefer that they send you a letter at home that you would read by yourself?

I03BCF50: I think a letter sent

UCLRA01: That would be your first choice

I03BCF50: Yes hmm

UCLRA01: OK

I03BCF50: A letter sent

UCLRA01: Why is that?

I03BCF50: You know even I just go to a lecture and sit there… and when they leave the lecture they might even forget. But having that letter to refer to.. it helps. D’you think so? That’s how I think…

UCLRA01: That’s a very good point. There’s actually no right or wrong answer, obviously it’s your own personal point of view

I03BCF50: That’s right

UCLRA01: That’s excellent. Thank you very much…

I03BCF50: Yes, I think that what you’re doing is wonderful you know. There’s so much dementia, oh God… oh dear, at the moment I know three people who’re suffering with dementia now. People that I’ve known over the years you know and it is so sad. And then they lock themselves in. But, they must go out and meet other people. That’s what I do you know. Our children say, oh no, when you can’t find my mum. She’s all over Britain... (LAUGH). Mum is a lunatic (LAUGH). I like to you know encourage people. And all these I’ve got in my group now you know we sit and we talk and I get them to do things. We celebrate Common Wealth Black History. Right now I’ve got a project for umh I might show it to you before you leave and umh my grandson, my earliest daughter’s son is at university. He’s got umh… there’s this sort of project that’s going that involves different groups and he introduced to me and my group. And we get accepted. I’ll show it to you. You can photocopy it or whatever or you can join us as well. And they’ll be sending umh…they’re having this exhibition. And various groups with different dates will be going and we’ll be able to have a look around and see what’s going on. You could use that for the opportunity. You never know. I’ll show you. And then, I got the like my grandson came round and say we’re accepted. And they will send ten. They did ask me how many people I want to take. I suspect not everybody want to go. Some have pain in the knee and all sort of something. So I’m allowed to take ten people. And they’re sending two cars to pick us up on the twentieth of October.

UCLRA01: OK

I03BCF50: And we did something similar to that with our Martin Luther King

UCLRA01: Let me just umh, sorry for interrupting you. Those were all the questions I had for you so I could turn this off now

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