

HUG QUESTIONNAIRE

Areas of Interest and Experience

If you would be interested in getting involved in some of HUG's work, please fill in the questionnaire below and return it to Karen at HUG in the FREEPOST ENVELOPE provided or download the form from the HUG Website www.hug.uk.net and look under **Contact Us**, complete and return to me at hug@hccf.org.uk

This form gives you the opportunity to update your details and also indicate what you would like to get involved in. There is no pressure to become involved, you can either be someone who supports HUG and may come to occasional meetings or someone who does lots and lots with us.

NAME:
ADDRESS & POSTCODE:
TELEPHONE:
EMAIL:

I WOULD LIKE TO BE INVOLVED IN	YES	NO
• E-mail bulletin - receive regular information updates		
• Online message board - share your views with other members on-line		
• Training		
• Participate in training		
• Provide information		
• Personal testimonies - e.g. video, tape, face to face (delete as appropriate)		
• Working with young people		
Note: if you are interested in becoming involved in training, full support will be given and expenses incurred will be reimbursed		
• Website Development		
• Updating the website		
• Providing information for the website		
• Attending Conferences		
• Reviewing Policy and consultation reports		
• Representing HUG at - National/Highland/Local level (delete as appropriate)		

I WOULD LIKE TO TALK ABOUT MY INTEREST IN OR EXPERIENCE OF:	YES	I WOULD LIKE TO TALK ABOUT MY INTEREST IN OR EXPERIENCE OF:	YES
• Self-harm		• Housing	
• Hospital		• Benefits and Welfare	
• Detention / being sectioned		• Employment and training	
• Community Mental Health Teams		• Medication	
• GPs, social workers and psychiatrists		• Families and carers	
• Police and the judicial system		• Other disabilities	
• Care Programme Approach		• Racial and cultural issues	
• Alternative treatments including talking treatments		• Information availability on services	
• Rurality and geographical isolation		• Drug and alcohol misuse	
• Suicide		• Other Please detail:	

I HAVE EXPERIENCE OF	YES	I HAVE EXPERIENCE OF	YES
• Anxiety and stress		• Obsessive compulsive disorder	
• Depression		• Personality disorder	
• Manic Depression		• Eating disorder	
• Schizophrenia		• Young People	
• Recovery		• Sharing Positive Experiences	
• Talking Treatments		• Self Help	
• Peer support/buddying		• Other Please detail:	

OTHER	YES	NO
Would you like your details to be passed onto the Patients Council which is an affiliated organisation?		
Would you be interested in finding out more about HUG and how you could get involved?		

Any information gathered will be used for HUG purposes only and your name will not be passed onto any other person or organisation without prior consent.