

Experiential art workshop

Odi Oquosa, survivor, artist and Shaman

Odi Oquosa is a Community Artist and a member of South Downs Patient & Public Involvement Forum. Odi was born in 1969 in Onitsha, Southern Nigeria in the Niger Delta region and is an active member of Onitshan Royal lineage.

From the age of 18, he travelled extensively around Asia and Europe working in textiles where he says he gained a far better education than ever he did at Poly!

He is a sculptor, painter, clothes-designer, textile technician, gemologist, musician, scholar, philosopher, dancer, historian of his people, cook, healer, shaman and medicine man. He has been described as a man of many parts, a man of many arts.

The artwork and sculptures displayed around the room are all the work of Odi and the poems that he writes draw to some extent on the traditions and philosophy of the Onitsha nation and although he always allows freedom to his own originality, he remains faithful to the traditions of his ancestors and contemporary Onitsha.

Odi can be contacted via e-Mail at: odiado10@yahoo.co.uk or, for more on Odi's background and some of the difficulties he faced in his native Nigeria, check out Odi Okaka Oquosa via any Web Search Engine.

Odi led an art workshop, in which participants were invited to create art works, a selection of which are displayed on the cover of this paper.

"Revealing"

"Very honest"

"How therapeutic! Self expression and interpretation were wonderful. Lovely way to end the day."

"Lovely to have the opportunity to tap into my unconscious creativity - a rarity! Nice energy from Odi. Thanks. Jane"

"Fun and light"

redbush

Redbush, named after the South African herbal tea Rooibos, is where Afya Trust staff chat about their inspirations, goals, holistic health and wellbeing. Odi Oquosa, Independent Chair of the Catch-A-Fiya Network, shares his vision for the network and the role of art in maintaining his wellbeing.



I was one of the pioneering members of the Catch-A-Fiya Network before my appointment as its Independent Chair in September 2010. In my role, I am coordinating and facilitating the network from the firm foundation set by my predecessors. This includes empowering BME service users to learn and grow, and to work in partnership with other stakeholders in health and social care.

Artist

I am an artist, painter, stone sculptor, blacksmith and a poet. Since 2005, I have run shamanic art workshops in Brighton, within the hospital and community setting, as part of Synergy Creative, a community project. I was trained by the Sussex Partnership Foundation NHS Trust as a Peer Support Specialist.

My work is informed by a Foundation Art Therapy course I did at Goldsmiths, University of London, and a Psychology Diploma I completed at City College, Brighton. I have been offered a place to study a social science degree at the University of Brighton this autumn.

I moved from London to Brighton in 2001 to reconnect my mind, body and soul to the essence of nature – the sea. I also wanted to connect with my fellow artists, friends and the people who supported my wellbeing.

My art work will be exhibiting at Brighton Museum and Gallery from the 27th September to 20th November.

2011 during Black History Month. I am very happy to be showcasing my work alongside my ancestral heritage – spiritual craft art. Brighton Museum's staff and the Arts Council have supported my projects. Since 2007 the museum has given me a sense of place and self within my community.

Legacy

Museums play an important part in my everyday life. I also visit the museums in London and Liverpool to learn from the wisdom and knowledge of my ancestors, whose past have been painted negatively by the early missionaries and anthropologists. Now I have the chance to give their truth.

Looking after my wellbeing is important. I meditate for 20 minutes each morning. Once a month I do 5 rhythms dance. Poetry, drumming and painting are the essences that feed my soul. This is where I am, my real self, and where my soul and my body align with the universe of love, in celebration of life everlasting.

Vision

My vision for Catch-A-Fiya is to reconnect with the network's old members nationally, and to recruit new members from all BME communities in England. I will create a structure of co-production and peer support initiatives that will enable individuals as well as groups.

Members can now put their events and views on our social networking

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portal backchat. We are also on Facebook and Twitter, sharing good practice, new projects, feedback and local and national issues around mental health inequalities.

Moving forward I have set up a steering group and working group to work with me to create strategies that will support our overall vision, and address inequalities that exist in our mental health system. There will be work focusing on the way Catch-A-Fiya responds to national and local consultation on health and social care issues.

Catch-A-Fiya, To Our Own Tunes and the National Survivor User Network (NSUN) have created a charter which will take the network to the next level, possibly becoming a social enterprise. The future is looking bright.

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- Contact can be difficult due to gender traditional communities.
- Provide interpreting services for GP appointments.
- Hold a men's health day in shopping centres where professionals are present.
- Raise awareness around services that are available.



Odi Oquosa opening the event with poetry and meditative music from

Improving the care pathways and outcomes for BME working- adults

Important to get views from people about their own experiences of health services, which would support different recovery models, find out what is accessing services, the different communities people are from, and the significant issues that prevent people from accessing services.

Engaging and Working together

Engage with people from different Black and minority ethnic communities to be involved in peer support training, ensuring that training is culturally appropriate and responsive to meet peoples' different mental-health needs.

Engage with statutory service providers and think in a multi-disciplinary way.

Research marking and making contact with other areas.

Identifying the gaps and levels of demand in commissioning (or buying) specialist services.

Look at assessment treatment models for BME service users.

Plan priorities: (Individual support and outreach)

Allow enough time to build up a relationship based on trust, as people need time to engage and develop their self-confidence.

Identify the value of creative non-verbal therapies.

Use different art mediums with individuals and groups as a non-verbal therapy.

Promote outreach services to some Black and minority ethnic communities, for example, to Gypsy and Traveller communities.

There are issues with having no fixed abode, as registering with a G.P. is difficult.

There are different perceptions of mental well-being, and stigma exists to a large extent. Mental-health appears high among BME people, particularly men (who may not come forward) and there are issues of trust, barriers with female health-workers and health screening in general.

- Contact can be difficult due to gender tradition in some traveller communities.
- Provide interpreting services for GP appointments in Hastings.
- Hold a men's health day in shopping centres ensuring healthcare professionals are present.
- Raise awareness around services that are available



Odi Oquosa opening the event with poetry and meditative music from a service user's perspective

"We have achieved a day of genuine dialogue and leave confident that we've all helped to contribute to coherent planning by the Race Equality Team towards real, people centred outcomes."

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