

Safer Choices: Week 3

Wednesday 6 May 2015 IMPACT AND DAN'S STORY

Your child will be doing the following:

- Finding out more about Dan's story and the impact of his death on his family and his friends (see links to online clips below)
- Thinking about different areas of impact society, health, the economy and ranking them in order of significance

First... they will be shown a short clip of a BBC news feature in summer 2014:

http://www.bbc.co.uk/news/uk-england-london-28500768



Then... they will hear the Victim Impact Statement Dan's parents, Tim and Fiona, were asked to write for the sentencing of the drug dealer on 1 August 2014, about the loss of their son, how this had affected them and the impact it had on their lives. Fiona wrote this, and read it in the courtroom from the witness box. You can see her reading it on YouTube

(http://www.youtube.com/watch?v=OFeazTnOCRg&feature=em-upload_owner)

Impact Statement: Fiona Spargo-Mabbs

"Before we try to tell you about the impact of losing Daniel, we need to try to tell you about the impact of having Daniel in our lives. Words are deeply inadequate for both tasks, but are all we have.

Dan used to make me a cup of coffee every morning. He used to chat to me while I got ready for work and he got ready for school, sitting in the bathroom while I did my make-up, following me around to finish telling me something, or asking what I thought about something. Before he died he'd kept buying us all cream eggs in his personal quest to find the cheapest deal. It was always three for something, so he ate one himself, and gave one each to Tim and to me. We kept the last one he'd given us on the windowsill for months. He had a very strong sense of justice, of right and wrong, and a very big, generous heart and conscience. He ran little errands for the elderly ladies on his paper round. He was a member of Amnesty International. He walked barefoot from Croydon to central London to raise awareness of the plight of children in the developing world unable to afford shoes. Shortly before he died, he'd been accepted as a bone marrow donor. He was very disappointed to find he was unable to give blood until he was 18. He carried an organ donor card in his wallet, but of course his organs were no use to anyone by the end. Dan was the one who'd always be happy to help out, especially with practical things, checking the tyre pressure on the car, fixing the dodgy fence, fiddling with cables behind the new Blu-ray player. He liked a challenge.

He was well and widely loved at school by both pupils and staff, and was overwhelmingly voted Prom King in summer 2013. Dan was ridiculously funny; he was quirky, curious, intelligent, engaging, charming, infuriating, loving and infinitely, enduringly lovable. He was an enormous, dynamic, enriching and life-affirming presence in our lives. He was our son, and we love him, and would have given our lives in place of his.

The drug supplied on 17 January 2014 caused Dan's body temperature to rise to 42 degrees. Each of his internal organs and systems stopped functioning in turn over the next few hours, and by the time he was transferred to Kings College Hospital that Saturday afternoon, his lungs, liver, kidneys, heart and circulatory system had all failed. We sat with him over the next two days and watched him slowly die.

He never regained consciousness, but we talked to him, held his hand, stroked his hair, rubbed his shoulders to try to get them warm. We found out after he'd died that he'd almost certainly suffered damage to his brain because his oxygen levels were so low when paramedics reached him, and they were unable to intubate immediately because the MDMA had caused his jaw to lock shut. At Kings he was on a ventilator, kidney dialysis, continuous bloods and fluids to try to raise his blood pressure and help his heart to begin to work better, and there were so many drains and monitors and machines it was difficult to get too close to him, but we did what we could. Because his liver wasn't functioning his blood wouldn't clot, and so wherever they'd had to put tubes in was continually bleeding. They'd put plugs up his nostrils where there were tubes, but the blood still seeped out slowly all the time. His eyes weren't quite closed, and so they had to stick blue gel pads over them to stop them drying out. He had to have emergency surgery to save his legs a few hours after he was taken into intensive care at Hillingdon, because pressure accumulating in his muscles meant the circulation was dangerously limited. On two further occasions they considered whether amputating his legs would improve his circulation, but both times it was decided that there was too much else wrong for it to make the difference needed. By the final morning, the circulation in his legs and arms had been so reduced as a side effect of the last drug left to them to try, that his legs and arms had already died, there was no surgical option, and they had no choice but to switch the life support off. It took just twenty minutes for him to die. We were all with him. I was holding his face, because it was

all I could really hold that was still living. After the beeps on the machine got slower, and then did the continual beep, to tell us his heart had stopped, I just couldn't let go of his face, because I knew when I did it would go cold, and then it wouldn't be warm again. I held him for what seemed like ages. But then I had to let go.

At that point our lives fell apart completely. We're slowly trying to rebuild them into whatever our 'new normal' will be, but we've barely begun and have a very long and hard road ahead of us. When people talk about having an aching heart, having a broken heart, I'd always assumed this was metaphorical. I didn't know that it would be an actual physical pain. Some days I'm unable to do anything because I can't stop crying or get off the sofa. I can only attempt very low-level tasks. My head is still so full trying to process and make sense of this thing that makes no sense, that I can't put it anywhere else for very long. The impact beyond Daniel's immediate family has also been profound, and like a tsunami rather than a ripple effect, reaching far beyond family and close friends to the wider community. Our parents, our extended families, Daniel's closest friends, his girlfriend of over two years, his very wide circle of other friends at school and church, his school community, our church community, our friends and colleagues. Too much and too many to be able to account for. His loss is far-reaching.

I still can't believe that this has happened. How can someone so full of life be there, and then just not be there? From time to time the reality of it comes into focus, briefly, like glimpsing something in the corner of my eye, and it's so unimaginably awful that I honestly think it'll destroy me completely, and I have to look away again. The rest of the time it remains hazy, as if I have a vague memory of a lovely dream I had once, where I had a lovely son called Daniel. Or as if this present reality is a dream, a horrible dream, but I'll wake up sometime and get my real life back, where I have two lovely sons, a job I love, and all is well. But this haziness I hate as well as the unbearable reality, because in it any clear sense of the real Daniel is lost. It feels like a double robbery, losing Dan in reality and in my head, which is all I now have. But to have a sense of the real Dan back, brings with it the awful knowledge that he's gone. There is nowhere to rest.

When you become a mother, from the first moment you know you're expecting a child, your identity, your energies, your focus are on that new little being, and such a massive part of who you then are, is being that person's mum, and is pouring an infinite quantity of love into that person. I still have all that for Dan, but don't know what I do with it now. I don't know who I am, what's left of me, now that I can't be Daniel's mum. And how can someone who has been such a massive part of me for more than sixteen years, as his mother – how can he not be here anymore, when I still am? What do I do with this love, this energy, this focus, this massive part of my identity? It's like having a limb ripped off without an anaesthetic. It's like having an enormous gaping open wound. And it's not like either of these things. It's so, so much worse. I would choose either of these things over losing my son. And this is the rest of my life on this earth."

Nex+... they will discuss as a class the many other ways in which drug use can cause an impact on individuals and society, and will be asked to rank the impacts in order of significance. You could discuss this some more at home...what order did they put?

Social	Health	Economy
Increase in anti social	Dependence on substances	Costs to frontline services
behaviour, acquisitive crime and drug driving	Mental health problems –	– ambulance, police,hospital, nursing
	paranoia, depression, even	
Social exclusion from society	suicide	Debt
Society	Overdose risk, intentional	Costs of further research
Relationship breakdowns	or unintentional	and additional training to
Poor education and	Accidents	front line staff to ensure appropriately equipped to
therefore less employment		work with individuals
opportunities	Difficulty in treating	Cooks of tooting unless on
	patients in hospital who have taken unknown	Costs of testing unknown substances
	substances	
	Death	
	20001	

	IMPACT OF DRUG ABUSE	RANKING (1=greatest impact)
1	Increase in anti-social behaviour	
2	Increase in acquisitive crime (burglary, robbery)	
3	Increase in drug driving	
4	Social exclusion (withdrawing from society, being rejected from society)	
5	Relationship breakdowns	
6	Poor education and resulting low employment	
7	Dependence on substances	
8	Mental health problems – paranoia, depression, even suicide	
9	Overdose risk, intentional or unintentional	
10	Accidents	
11	Difficulty in treating patients in hospital who have taken unknown	
	substances	
12	Death	1
13	Costs to frontline services – ambulance, police, hospital, nursing	
14	Costs of further research and additional training to front line staff to ensure appropriately equipped to work with individuals	
15	Costs of testing unknown substances	