

The Network

# Bulletin

Vol 13 No 2

Summer 2008

## Emotions & Mental Health

S. YUEN

# Much to do at Network this summer



**Ron Carten**  
Co-ordinator

I'd like to begin with a welcome to our new board members as well as any of you who are new to the Network. This summer promises to be a busy one that will include Mad Pride celebrations, a music fundraiser, folk music festival tickets, a pet therapy workshop, a mental health conference at SFU, and professional development for our self-help groups who are the core of what we do.

At this time I am revisiting and revising our conduct policy which should inform all facilitators and members of how to respond to difficult issues that arise. Although they are few and far between at the Network, it is always helpful to be prepared.

The Network board has identified the need for a name change for the Network. It has been an ongoing issue for a number of years but we are hoping at our fall annual general meeting to introduce a resolution to change the Network's name. A committee was struck for this purpose following the Winter Party in 2007. In addition, some minor changes to the Network by-laws will be introduced by resolution with the membership being given full notice ahead of time of the proposed changes.

The Network is well into our preparation for launching a social enterprise through which we hope to generate funds and employ consumer/survivors. A funding application to the Enterprising Non Profits program of Vancity Credit Union is at the top of my "to do" list as the deadline is the end of the month. We are also benefiting from the work of a practicum student from Langara College, Donavin Thompson, who is developing a manual to assist us in planning our social enterprise.

As for our groups, I will be holding a half-day seminar on running self-help groups for our group facilitators in an effort to help them hone their group facilitation skills. The seminar will be based on the Self Help Resource Association's (SHRA) workshops which I attended in April on running self help groups. Due to a shortage of funds we were unable to send all our facilitators to SHRA and so will be transferring lessons I was able to learn from SHRA to our twelve group leaders. We will be seeking funding to allow our facilitators to go through the SHRA program themselves.

What's really exciting is the Network's partnership with the Yale Hotel (Home of Rhythm

and Blues in Vancouver) to stage a mental health music benefit on July 24 this summer. As the event approaches we will be seeking volunteers to sell tickets and help at the event which we hope will raise some significant funds for the Network.

I'd like to invite you again to visit our website at [www.vcn.bc.ca/vrmhn](http://www.vcn.bc.ca/vrmhn) to keep abreast of opportunities with our groups which are being posted in more detail now as well as tuning into upcoming Community Education events and also to find out more about SFU's summer conference, "Madness, Citizenship and Social Justice," which starts on June 11 at the Harbour Centre campus and is posted on our special events page on the website.

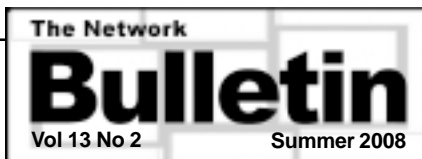
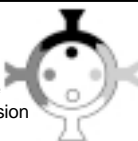
Finally, I would like to thank all our group facilitators as well as Meredith who will be filling in for Paula with our Cultural Arts group in July. Many thanks also to Patty Durich, our tireless office volunteer, without whom the Network office would be much less organized and less easy to work in.

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## Mission Statement

The Vancouver Richmond Mental Health Network serves to promote growth and healing of people who go through the mental health system through the provision of mutual aid opportunities.



The Bulletin is the official newsletter of the Vancouver Richmond Mental Health Network; its contents are the opinions of the individual writers and not necessarily those of the Network. This edition was produced by mental health consumer/survivors. It is a vehicle for the expression of concerns and opinions for all who are interested in mental health issues.

The Bulletin does not necessarily endorse any advertisements appearing in this issue.

We welcome readers' letters, including those from outside the Lower Mainland. We also welcome inquiries about the Network's self-help groups and other programs. Contact us at:  
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 Visit our web site at: [www.vcn.bc.ca/vrmhn](http://www.vcn.bc.ca/vrmhn)

The Vancouver Richmond Mental Health Network acknowledges the support of the Gaming Commission of British Columbia, the Vancouver Coastal Health Authority and the Central City Foundation.

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**Advertising:** 604-733-5570

### The Network offers the following services:

- Co-Ed Badminton/Volleyball Group
  - Community Education Program
  - Cultural Arts Group
  - Expressive Art Group
  - Latin American Peer Support Group
  - Men's Peer Support Group
  - Pan Asian Peer Support Group
  - Sacred Circle
  - Shakti Peer Support Group
  - The Conversation Club
  - Women's Peer Support Group
  - Yoga Group
  - Information and Referrals
  - Mental Health Resource Library
- Events are held throughout the year. For more information, contact the Network.

# Emotional healing leads to freedom

Our topic for this issue is *Mental Illness and Emotional Health*. Are you an “emotional diverter” as Jayne Gayle asks? Perhaps you care for someone with an illness or you daily battle with fears and insecurities? Do you struggle with an eating disorder or does depression sometimes wear you down? Do you agree with Ruby Diamond that “you can’t heal what you can’t feel” and with Sandra Yuen MacKay; that emotional healing is the road to freedom? Perhaps Mental Illness runs in your family? If you

recognize yourself in any of these questions, you will surely relate to the following articles.

Our topic for our next issue will be *Mental Illness and Society*. We would like to know how you feel you are perceived, accepted or rejected by society. Do you “fit in” or feel like a perpetual outcast? Do you feel appreciated or downgraded for your differences? Do you find a need to either conform or to rebel to find your own place?

For those who had the good fortune to see

**Josanna Savoie**  
Editor



the *Recovery Theatre* sketches they were very inspiring. We heard from survivors who suffered from addictions, alcoholism, delusions, eating disorders, depression and more. Congratulations to Producer/Director Elly Litvak for her dedication to giving those with mental illness so much hope.

On Thursday May 1<sup>st</sup> was the vigil & rally at Victory Square to fight for the rights of mental health consumers and honour our sisters and brothers who have died at the hand of an inefficient health care system. Our president Dianne Thurston gave an inspiring speech addressing concerns such as the right to choose alternatives to drug or electro convulsion therapy (ECT), the need for more funding and the importance of peer support.

Readers are always welcome to send comments about our articles to the Editor. Deadline for contributions for our fall issue will be the day after Labour Day Tuesday September 2<sup>nd</sup>. The word limit has been increased from 1000 to 1200. Send submissions to [vanrmd@telus.net](mailto:vanrmd@telus.net) c/o The Bulletin or drop off at our office (address on page 2).



# Holistic healing centre gains focus

Summer is here and along with the flowers and sunshine a warm welcome to Malcolm Sault, Rudolf Penner and Jessica D. They have joined the Network's board of directors bringing our number to seven. Jessica has been contributing to fundraising activities.

In March, I attended a Volunteer Vancouver workshop on The Critical Role of the Board Chair and brought back info, ideas and guidelines, some of which I've been implementing in my role as board chair. Our co-ordinator Ron Carten and I met our contract manager, Kim Calsiferri, at VCHA to discuss our funding contract for this fiscal year.

I've attended an Enterprising Non-Profits (ENP) Seminar in the past and Cassandra Freeman has attended several seminars. The Network is still in the research stages but we are moving toward creating a consumer survivor run business.

The Network is evolving toward creating a

Holistic Mental Health Healing Centre and so we are focusing on enhancing the capacity of our groups' education, peer support and self-help model of recovery. Our group facilitators will be receiving in-house training and the Network Board has approved a proposal by Bob Krzyzewski, our Community Education facilitator. He will start up a Holistic Alternatives for Mental Wellness Support Group in the fall.

I attended a workshop and panel discussion on orthomolecular medicine and mental health on Sunday May 4th at the Bi-annual Orthomolecular Conference in Vancouver.

I also represented the Network at the rally and vigil for consumers/ survivors of psychiatry that was organized by the Mental Health Political Action Group. I talked about the Network's "What Women Want" Project. We are still in the planning stages however the Network needs volunteers and funding to help get the Women's Crisis Prevention Safe House off

**Dianne Thurston**  
President



the ground.

I also addressed the lack of choices and access to alternative mental health treatments for most consumer survivors. Many alternatives are not covered by BC's Medical Services Plan (MSP). Treatments such as orthomolecular medicine and naturopathic medicine are often out of financial reach to people living below the poverty line. And, unfortunately, most psychiatrists do not recognize that there are other options aside from using psychiatric drugs to treat mental illness and that people do recover.

Furthermore, I mentioned the statistics on electro convulsive therapy (ECT) where women are two to three times more likely to be given ECT and that “52% of people receiving ECT are women over the age 60. (quotes from Dr. Bonnie Burstow).



# Third generation survivor learns to trust, vows the buck stops here

By Jayne Gale



I was born into a family with mental illness. First my grandfather committed suicide when my father was 11 years old and he thereafter left home at age 14 crossing Canada from the east coast to the west coast. My father became mentally ill early in life suffering chronic depression and becoming a man full of rage. He had three brothers and three sisters and to my knowledge only his eldest brother meted out uncontrolled rage on his children as well. I have a younger brother by 11 months and a sister who is six years younger. Our mother was damaged from her own family life and brought to each of us children the ownership of blame and shame for the actions of our father. The extent of my father's rage against his own children was kept hidden from other family members and friends although I feel sure two of his brothers who also moved to the west coast and lived with us at times were aware of his actions.

I will tell you one particular incident of many that was very terrifying for me as a child yet will give you an idea of the extent

of his abilities to harm his children then perhaps it will be easier to understand how I was affected in my relationships.

One spring day I jumped off our front stone gate post and unknowingly landed where there was a broken bottle. The result was that a piece of the glass cut deeply into my second toe on my right foot to the point it was barely hanging there. I went into the house bleeding and crying, and was about the age of five. My mother was trying to clean my foot up while my father was watching hockey. He did not like the idea of having his hockey game interrupted and became very impatient with my crying to the point where he yelled at me, "If you don't stop crying I'll get my axe and finish the job". He clearly meant to cut the rest of the toe off. I knew what my father was like when he raged and fully believed he would do what he said which was very traumatic. As it was I had to suffer out the pain until the hockey game was over an hour or so later when my parents took me to a hospital to get my toe stitched back on. To this day I

cannot bend that toe so it is always a reminder of the event.

My parents were very controlling and had certain odd rules even through our teen years like shutting everything off in the house by nine o'clock. No lights, no T.V., nothing was to make a sound that might disturb my father. If we were out we were not to call or disturb them, and if we came home we had to creep very quietly into the house to our rooms.

As far as relationships we all grew up having no trust in the world. We couldn't trust our own parents to be there for us so it didn't follow that we could trust others to be there for us either.

The mental illness and relationship we had with our parents also affected how we managed in the world and touched each of us children with various forms of mental illness. All three of us at some time in our lives have been suicidal due to depression. We have all experienced feelings of great sadness, inner fears and anger that can only be described as rage. For myself I have pushed down my feelings of rage for many years fearing to let it go. I was emotionally blocked and could not even express my sadness as I was so used to hiding the truth about my life from other people.

My brother left home at age 14 like his father had and found a new family among the biker clan. Although he eventually worked in fishing and logging he became a heavy drinker and drug user. In the end depression goaded him many a time through his life; he is very unhealthy and barely surviving with a wife who is also afflicted as a heavy drug user. He has only managed to make friends with other people who have been damaged and has cut ties with family for most of his life other than when he can manipulate some money out of his parents. Regarding children my brother has a boy and girl who have both been exposed to physical and verbal abuse.

My sister became schizoid affective and has suffered greatly losing her relationship with her husband due to her illness. She has had to deal with years of hearing voices and being in and out of hospitals, taking heavy medications and being unable to live a normal life. (It has only been in recent years that she has had a reprieve from the voices and has met someone she is in a happy relationship with, but she too has felt a disconnection from her relatives). It is not easy for her to trust people and make friends. Regarding children my sister made

*continued on Page 5*



**Network President Dianne Thurston refers to cheat sheet notes and so needs a helping hand or two with the megaphone as she addresses the gathering at the May 1st rally and vigil for consumers/survivors of psychiatry organized by the Mental Health Political Action Group. Network member Nick Scardillo, second from left above, helps kick off the rally carrying the banner to Victory Square**

*Photos by Josanna Savoie*

*from Page 4*

the brave decision not to have children medically for fear of harming a child due to her upbringing.

I too have tried to tame the tiger of mental illness for many years. As far as marriage I was fortunate to meet a man early in my life who loved me for who I was and has been very supportive these past 32 years through all my ups and downs. However, even with all love and support it took me 18 years before I fully trusted in our relationship.

I managed to have a successful career

in many areas and was finally where I wanted to be after much work and education when I finally succumbed to chronic depression and many other disorders. I was initially crushed but have slowly been working my way back to health through therapy for the past 10 years. It takes me a long time to trust a psychiatrist or anyone for that matter because I was hurt so very badly due to my father's mental illness and a great part of me feels very much alone, or at least keeps to myself out of self preservation. I am very personable with people yet there is an inner part of me that

fears being hurt and holds back from letting others in.

I have one daughter whom I worked very hard with my husband to ensure she would not become a victim of abuse as I was as a child. I was rewarded one day when around the age of 10 she wisely said to me, "Mommy you will be the hero in our family, because you broke the chains of abuse so now I can grow up and have children and they will never be hurt like you were because you never hurt me."

Paradoxically there can be mental illness and good relationships too.

# Counsellor, peer support heat up food, weight disorder

**By Rose Ananda Heart**

Full recovery is a commitment. It takes time, patience and a great deal of courage. I know because I have been participating in recovery work for the past 20 years. I've been diagnosed with anorexia, bulimia and post-traumatic stress disorder. You see, once upon a time, I used to obsess about food, weight and exercise. It all started out innocently enough. At first I just wanted to lose a little weight and tone up, so I cut out sugar from my diet and I began to exercise daily. This all sounds really great, and in a healthy, balanced person, it would probably work out really well. This desire to lose weight and remain fit, however, slowly and without warning, became a scary monster that seemed to control my every thought and action. I became afraid to eat, thinking that food would make me feel bad and fat and stuffed and ugly. Food would create pain. Whenever I did eat, I would immediately take a couple of herbal laxatives to be sure the food would move through my body as quickly as possible. Life had become a living nightmare. Although technically I was still alive, I was living in a death like hell, created by my own mind.

A glimpse at salvation came in the form of a counselor who specialized in eating disorders. Her name was Sarah. Interestingly enough, my mother has the same name. In some sense, she played the role of the mother that I always needed. She listened and wanted to know who I really was. Self-expression was encouraged. I could tell that she believed in me. During

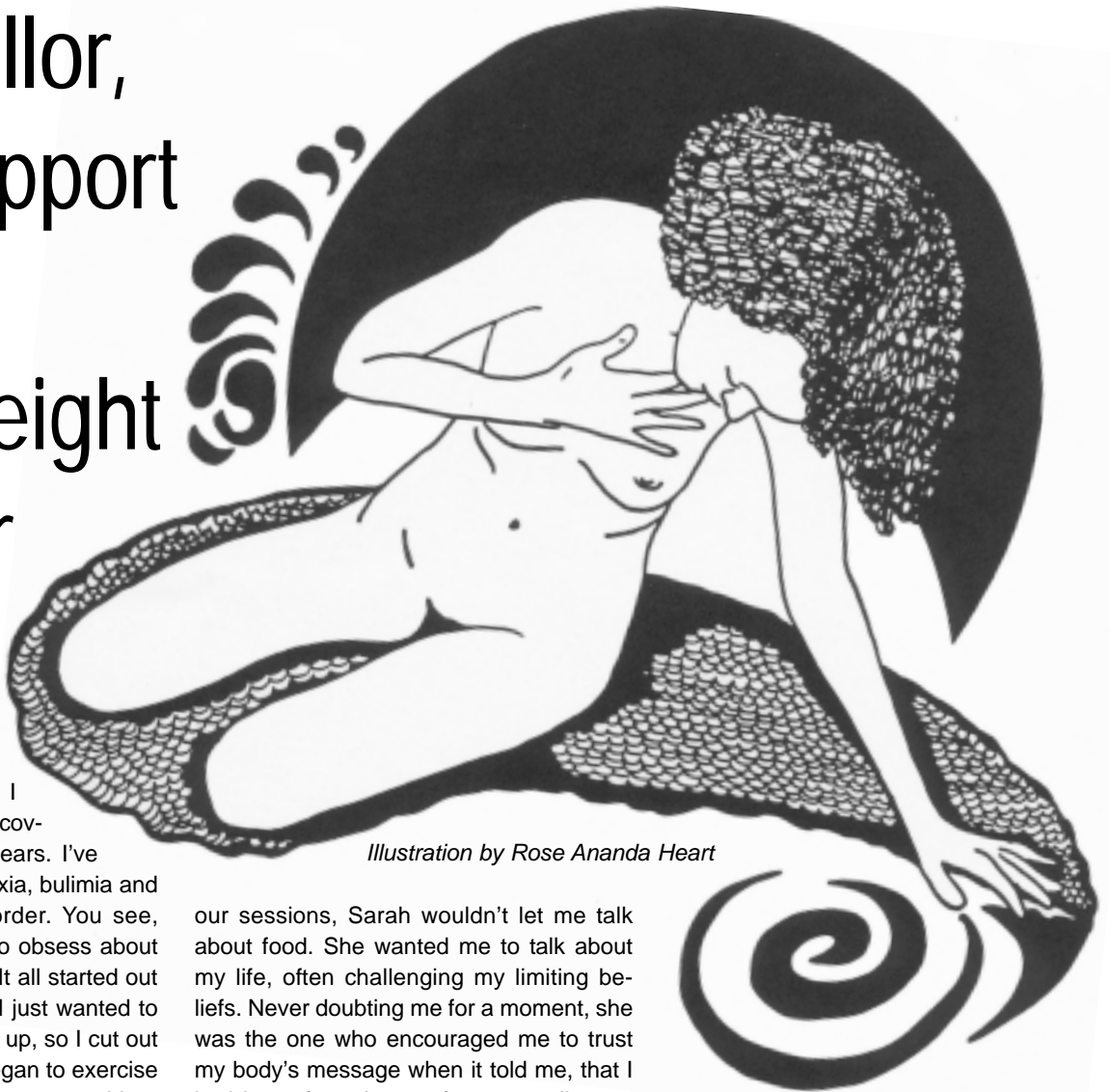
our sessions, Sarah wouldn't let me talk about food. She wanted me to talk about my life, often challenging my limiting beliefs. Never doubting me for a moment, she was the one who encouraged me to trust my body's message when it told me, that I had been forced to perform sexually at a very young age. When these memories came back to me, in the form of body flashbacks, I thought I was hallucinating. This couldn't possibly have happened to me.

A few years later, I discovered re-evaluation counseling, a form of counseling that encourages and supports emotional release and self-empowerment through peer support. This work has given me a great gift. Though emotional release work, I have been able to get back in touch with my soul, my essence, the natural state of my being, which I've experienced as a loving, joyful sense of deep peace. Through the support of co-counselors, I have learned to set boundaries to protect my soul's needs. These include rest, relaxation, music, dance, singing, drumming, painting, creating, writing, walking in nature, noticing beauty, massage, hugging, feeling, meditating, and breathing deeply. I think these are the kinds of things any human being living a natural life would need. With all this in my daily schedule, I have very little time

for unnecessary activities that just fill in time. Modern society has created many distractions that keep us from remembering to tune in, so that we can live authentically and with purpose. Most of the time we are conditioned to tune out. This leads to disease, pain and an inability to live peacefully in the here and now.

I now eat a healthy, balanced diet, and this seems to be essential to my physical as well as my mental health. Along with eating wholesome vegetarian food, however, I find that it is as important to my wellness that I indulge in the things that nourish my soul. Staying tuned into my feelings and intuitive instincts has become my way of life.

Obsessive thoughts no longer fill my mind. Through feeling and expressing my pain, grief, rage and fear, I no longer need these thoughts to protect me from my true self. Today my life still has many challenges, yet I am well on my way to reclaiming my soulful, zestful and healthy self.



*Illustration by Rose Ananda Heart*



# Emotions trigger state of health

by Ruby Diamond

Emotional wellness is connected to mental wellness. You can't heal what you can't feel. As a recovering addict I know that painful emotions like loneliness, fear and guilt cannot be dealt with in a healthy way unless one stops using substances and gives oneself a chance to heal by fully experiencing their feelings. In order for me to feel joy, love, peace and happiness, I need to leave the door open to feeling the full range of my emotional self and this includes feeling the negative as well as the positive emotions.

In the past, the emotions I didn't want to feel, I would just drink and drug them away and the moment I did this I stopped all emotional growth; I became a child in an adult body. The recovery road is not easy, especially when dealing with schizophrenia on top of early childhood trauma. I cannot have emotional wellness or even a chance of it if I'm avoiding myself. For me, drugs are only a temporary fix for everyday human dilemmas.

Basically, I would rather feel pain than feel nothing at all; anger is just a feeling that signals hurt or pain. Through my personal meditations, I have let myself feel the hopelessness and powerlessness as they arise as a necessary continuum on the radar of common human feelings which occur when we have been violated.

I cannot heal if I avoid life. Underneath all that bad stuff is joy and wonder waiting to be tapped into. It is natural that we want to feel the joy instead of the pain, love instead of self-hatred, security instead of jealousy. However today I know that I don't want to push away and cover up and bury anything; without feeling the pain I would not know what joy is. I can see negative emotions as a personal challenge to respond to in constructive and creative ways; they are a signal in revealing something uniquely profound.

Coming from a dysfunctional family and a dysfunctional society has created obstacles and challenges which require original answers. I choose to see my pain, anger,

hurt and resentment as the consequences of unhealthy emotional communication which can be a roadblock to personal realization.

Support for one's journey is so important and having a validating circle of people in my life allows for my emotional growth and wellness. If I can accept my life and know that I am exactly where I'm supposed to be, the answers to my questions will come. I will become like the butterfly after its long gestation of living in a cocoon. I will have become truly transformed and truly free.

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## Mother Earth brings solace

Depression weighs me down like a wet blanket, smothering the fire within, leaving me with a zestless existence. It nags at my heart like a long ago suitor who knocks at my door, persisting, unwilling to let go. Relief comes as my son hugs me, putting his head close to my heart and saying, "I love you mom. You're the best mom in the world."

Like the sun peeking behind gray clouds he gives me hope, the will to persevere. One day I could be free, after I've released the numerous collections of grief, rage and terror from living in a world where sweet, laughing babies are turned into killing machines, or lifeless zombies or somethingaholics; joyous souls ending up in hospitals for the mentally ill or prisons for the dangerously ill or just living lives of quiet desperation hoping for a savior. My sadness is like the futility of a wild creature born in captivity, unable to break free of the chains, never knowing the luxury of my native environment.

I take a stroll through the forest smelling the sweet aromas that come after the rain and fill the air with their healing fragrance

allowing Mother Earth to bring solace to my aching soul. She always shares her lavish wonders and delights, without asking for a coin. I linger next to a dear sister, my favorite birch tree, with her beautiful white skin dappled with specks of black, and sink to my knees weeping, as I pour out my anguished thoughts.

She is a supportive witness, able to hold me within her loving presence, as the tears wash my face, trickle down my neck and return to the soil of my beginnings. Her strength fills me with courage, reminding me to love who I am and to be gentle with the child inside.

*Rose Ananda Heart*

## Writers, artists, poets, lend us your ... err send us your work!

The BULLETIN invites you to submit your stories, no more than 1,200 words, poems and artwork that can be reproduced in black and white. Email them to [vanrmd@telus.net](mailto:vanrmd@telus.net) or drop them off at the Network office at 201-1300 Richards Street, Vancouver.

***We'll pay you!***

## Roads to recovery:

# Cognitive therapy or antidepressants

When you feel happy or joyful, how did you get there, and how do you hang on to that feeling? To answer these questions, you may prefer to look at your life experiences, or maybe the way your brain works. Maybe both. There's a lot to consider when the discussion turns to emotional well-being.

Let's take a look at recovery from a condition that is fairly common in society: post-traumatic stress disorder (PTSD). We see that about half of all individuals who suffer from PTSD also suffer from major depression. We can describe the initial traumatic event and the recovery process from a psychosocial perspective and also, from a biological one.

As one would expect, the language and the way of recovery for each process is quite different. Some people would argue that psychological experiences and brain circuits are not different things, but simply different ways of describing the same thing. But to argue this is quite an assertion. There are brains, yes, and hopefully there are also minds. It is actually possible for the mind to alter the structure and function of the brain. This is related to the concept of "neuroplasticity." And we need to ask whether 'consciousness' is strictly brain-based or not.

Imagine a woman, Kirsten, who is 20 years old. When she was nine years old, during a family summer vacation, her younger sister, Kathy, died in a car accident. The experience of seeing her sister die was horrific and it was forever etched into the deepest levels of her emotional psyche.

In neurological terms, we get the following account during traumatic stress, the amygdala stimulates the sympathetic nervous system as well as HPA (hypothalamic-pituitary-adrenal) axis, which originates in the hypothalamus. These brain centres orchestrate surges of stress hormones – including adrenaline and noradrenaline, which are released from the adrenal medulla, and an entire cascade of neuropeptides and



By Susan Friday

neurohormones are also involved. Elevated levels of noradrenaline and cortisol put Kirsten on 'high alert' and she remained hypervigilant for much longer than necessary. Consequently, the modulation of long-term memory formation by the amygdala in hippocampal and other related areas was adversely affected – contributing to, or causing Kirsten's flashbacks.

Kirsten occasionally still has nightmares about how she tried to save her sister, but could not.

Now, imagine that a man, Jonathan, had a very similar experience and lost his younger brother when he was nine. Both were real traumas, and when we look back at the pathways toward full recovery, Kirsten's mother decided to seek out a therapist who focused on person-centered/ cognitive therapy. By contrast, Jonathan's mother decided to get a psychiatrist involved.

The notes from Kirsten's therapist read as follows: "Kirsten has suffered a major loss and it will take several months for her to reach closure. She still has flashbacks, but they are less frequent – about one per month. Is fearful of being in crowded public spaces. Feels threatened by surroundings, does not like uncertainty. Only goes out with close friends. Her nightmares have been disruptive and currently still has them about once a month. Pattern of sleep has improved, but occasionally has insomnia. Kirsten tends to feel guilt about losing her sister because she failed to save her. However, understands that life is life. Support-group and meditation recommended, in addition to therapy.

At first, was easily startled, and somewhat irritable. Has difficulty to really enjoy positive experiences. Finds closeness challenging and does not engage in any risk-taking behaviour. Previous addiction to alcohol, used to help with emotional pain, especially feelings of guilt. Kirsten still has a fairly low tolerance of frustration, but continues to make progress with constructive use of stress. Discussion, re. diet – fish oil, amino acids, avoid smoking, cut down on alcohol.

Kirsten now has better recognition of certain cognitive mistakes, i.e. arbitrary inference, selective abstraction, personalization and magnification. After three months of therapy, she shows an increased openness to experience, is ready to trust herself and others more. Starting to show more self-esteem."

When we think of Kirsten, and her path toward sustained emotional well-being, one of the key

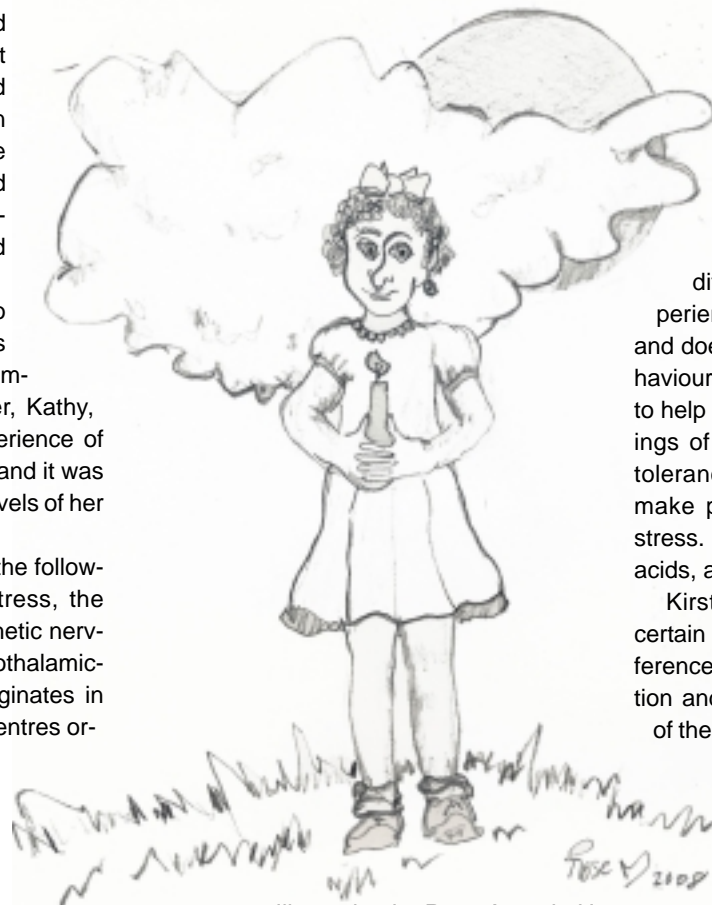


Illustration by Rose Ananda Heart



# essants

factors is cognitive therapy in moving beyond depression. In addition to learning how to avoid various 'cognitive traps' that can hinder positive feelings, a surprising discovery was made about the brain itself – the big difference between how cognitive behaviour therapy changes the brain and how SSRI antidepressants appear to work within the brain.

The big surprise is that cognitive therapy lowered activity in the frontal cortex while raising activity in the hippocampus of the limbic system. And Kirsten does not have to worry about any side-effects or adverse reactions from medications.

Now, let's compare this with Jonathan's situation. The notes from Jonathan's psychiatrist read as follows: "Jonathan has suffered a major loss. It will very likely take him several months to move beyond it. We had some discussion re. his brother and rest of the family.

Jonathan feels guilt since he survived but his brother didn't. This is to be expected. Suffers from depression, ongoing. Is using alcohol to self-medicate. Have recommended some Paxil instead, 30mg/day – am. Discussion re. Zyprexa, Clonazepam. Not necessary. Will meet twice per month."



Illustration by Rose Ananda Heart



Illustration by Rose Ananda Heart

Two days after meeting with his psychiatrist, Jonathan started taking Paxil, which is an SSRI antidepressant.

Eventually, what happened was the *opposite* of undergoing cognitive behaviour therapy: the use of Paxil raised activity in the frontal cortex and lowered activity in the hippocampus. In other words, there's more than one pathway inside the brain when going from depression to recovery, depending on how you wish to recover.

Jonathan managed to overcome his depression, but realized that he needed to have an open discussion with his psychiatrist about using Paxil. "I'm not depressed anymore, but I tend to feel angry. Sometimes I snap at people for no good reason, and I also get headaches. My mouth feels dry and sometimes my right hand starts to shake. And then there's nausea and I'm worried that I might throw up on someone." The psychiatrist looked worried for a couple seconds and then his face brightened. "I'm sorry to hear that the side-effects



Illustration by Danielle Fung

are so problematic. Perhaps another antidepressant, like maybe Zoloft, Serzone or Prozac"? Jonathan shook his head and said, "I think I should simply go see a counsellor. The problem with the medications is that the side-effects can be horrendous, and then, if I go off the meds later, my depression would probably return. And when I stop seeing the counsellor or therapist, at least there won't be any withdrawal symptoms either."

## Poems on Emotional Healing

### You Disappeared

When you left my life forever  
I was in shock and feeling angry  
I also felt responsible for you

But now, months later  
A calming healing silence comes over me  
And I know that the universe will take care of you.

### Passing Away

I still bear emotional scars from childhood experiences  
They move like waves through my mind  
I know that they too will pass away as does  
Everything in our lives  
This is my healing solace

### My Friend

You crossed my barriers of self-protection  
When you trusted and cared about me  
Your softness melted my steel  
And you are my friend  
And I am healed.

*Maureen Glaser*



Illustration by Danielle Fung

### That Fat Cat – Where's She At!?

My fat cat often makes me wonder where's she at, or is she playing tit-for-tat?  
large and black, she really should know well that she lives with me, her host, who really cares for her health yet unfortunately dares to feed her foods that makes her rather fat which can accompany her as a brat along with all of her green piercing stares. Present with those often adoring glares are the frivolous acts of my sweet cat; although, my cat sometimes causes nightmares in my life by after having just sat in her space, then just leaves, and guess who bears the worry, why she's not there on her mat?

*Frank G. Sterle, Jr.*



*Rhonda Davis, (C) 2008*

The water rushes under the bridge of time  
With an emotion charged current  
Neither man nor beast can fathom  
In this moment of life

The mother of vision is whirled downstream  
While the child in darkness  
Floats on a murky pond unseen  
By the ages passing in too quick flow

Alas the many streams of existence  
Take their tolls from the banks  
Which erode in ever increasing magnitude  
To behold a wisdom viewed by few

*dinah*

Illustration by Rhonda Davis

# Hockey or belly dancing up to nature

By JM

What would my life have been like if I had been born male instead of female?

I imagine that I would have been taller - five feet, 10 inches instead of only four feet, 11.5 inches. That would have made me feel more powerful and confident, I am certain. If I was a male, I would be logical and pragmatic instead of emotional and timid. I would be strong instead of easily intimidated.

As a boy, I would have been involved in sports: football, hockey, basketball, and baseball. When I was a girl, I only had a slight interest in softball and skating. I did my homework until 11:00 every evening and I read novels voraciously. As an adult woman my "sports" have consisted of yoga, swimming, and belly dancing. I also walk a great deal - because I am too afraid to drive.

As a male, I would have been interested in learning to drive a vehicle at an early age - 12 or 14 - and certainly would have obtained my license by the age of 16. In reality, at that age, I was not interested in driving and did not involve myself in the activities of obtaining a driver's license. I feared traffic. I now long for the freedom that driving could give me.

Being male and tall would have made me believe that I could be successful at any career that I chose. I could have been a truck driver, a farmer, hydro lineman, carpenter, doctor, or a CEO. Being a short female, I lacked confidence and believed that the career options available to me were secretary, nurse, teacher or book store clerk. Thus I nursed, worked as a clerk for the government, clerked in libraries, did volunteer work, and now I house and pet sit.

Being male, I believe, would provide me with the mathematical skills to understand accounting, banking, and investing. As an adult female, I do not possess these skills; rather, I have some little skill in writing, which I quite enjoy.

With the higher income I could have as a male (as a CEO, for example), I would very likely be married, having a wife to take care of me, our children, and my household. My house would be large, containing a library with a large collection of excellent books, a home theatre, and a work-out room in addition to the number of bedrooms and bathrooms required for a family of six. My wife would have a state-of-the-art kitchen. I would have a large back yard and would barbeque on weekends. I would own a mini-van, a

BMW, and a motorhome. I could own a Harley Davidson and enjoy riding the roads of the province. My hobby could be collecting vintage vehicles - repairing, painting, and keeping them in good running order. I would be a good mechanic.

Very likely, I would have four children with whom I would play sports and go for drives. I'd take my family on vacations to Disneyland, travels across Canada, and to Hawaii.

As a female, I am divorced with no children, renting a cramped one-bedroom apart-

ment, and I have no "wife" to take care of me. When I was married, I was at my husband's beck and call, having no one to "take care of me" even then. I take only one-week vacations occasionally. My prized possession is my computer/word processor, and my hobbies include writing and continuous learning by distance education.

I do believe that had I been a male, I would have been gifted with the confidence and resourcefulness to pursue and achieve a gratifying lifestyle.

## Exploring the inner me allowed spirituality to replace depression

By Pauline Leah Rankin

I have often pondered the word "spiritual", wondering about its meaning. It is a term bandied about a lot these days, in connection to everything from past life regression to addiction recovery.

I am Jewish, belong to a synagogue and practise to some degree. However, I do not do a lot of things considered spiritual practice. I need to develop rituals and thoughts that are original to me and feel right. Many of those can be found in Jewish practice.

As a mental health consumer/survivor, I have experienced deep depression, so intense that I could actually feel an empty space drilled within me. When I recovered, I was faced with the task of filling up that space, layer by layer. The depression, in a backwards sort of way, had been spiritual because it triggered so many expansive feelings. I now had to find ways to "scratch the deep places". In a sense, that is my spiritual search.

I once heard a definition of soul as one's inner life. That encompasses intellect, emotion, intuition, thoughts and perceptions. The soul is not a separate entity but the totality of all our means of experiencing the world around us. This actually is a fundamental Jewish worldview. It is also a concept furthered by teachers in the Jewish spiritual tradition of Mussar, which began in the 10th century and continues to be studied and practiced today.

This makes sense to me. My inner life

is not always stimulated by things deemed traditionally "spiritual". I scratch the deep places through thought, learning, poetry and taking in the world around me.

A good jaunt on my mobility scooter on a brisk day is spiritual. A good lecture or study is spiritual. Daydreaming while washing my dishes is spiritual. Reading or writing poetry is spiritual.

The last point is particularly true for me. As Wallace Stevens said in "Adagia", "The reading of a poem should be an experience. Its writing must be all the more so." When I wrestle with the task of coding experience into words, I really scratch the deep places. Poetry involves the connection of the unconnected. It is a synthesis of emotion and intellect to create something that will in turn create an experience in another being. It is a solitary act, but the goal is always to communicate with others. I have come to understand that my soul is not something separate or outside of myself. It is not something to seek, but something to develop and create, through whatever means are available and that suit the style of each individual seeker. My search was prompted by depression and is continued by need - the need for deep feelings and interactions with my world. For another individual, the definition will be different. However, this concept of an encircling soul works for me.

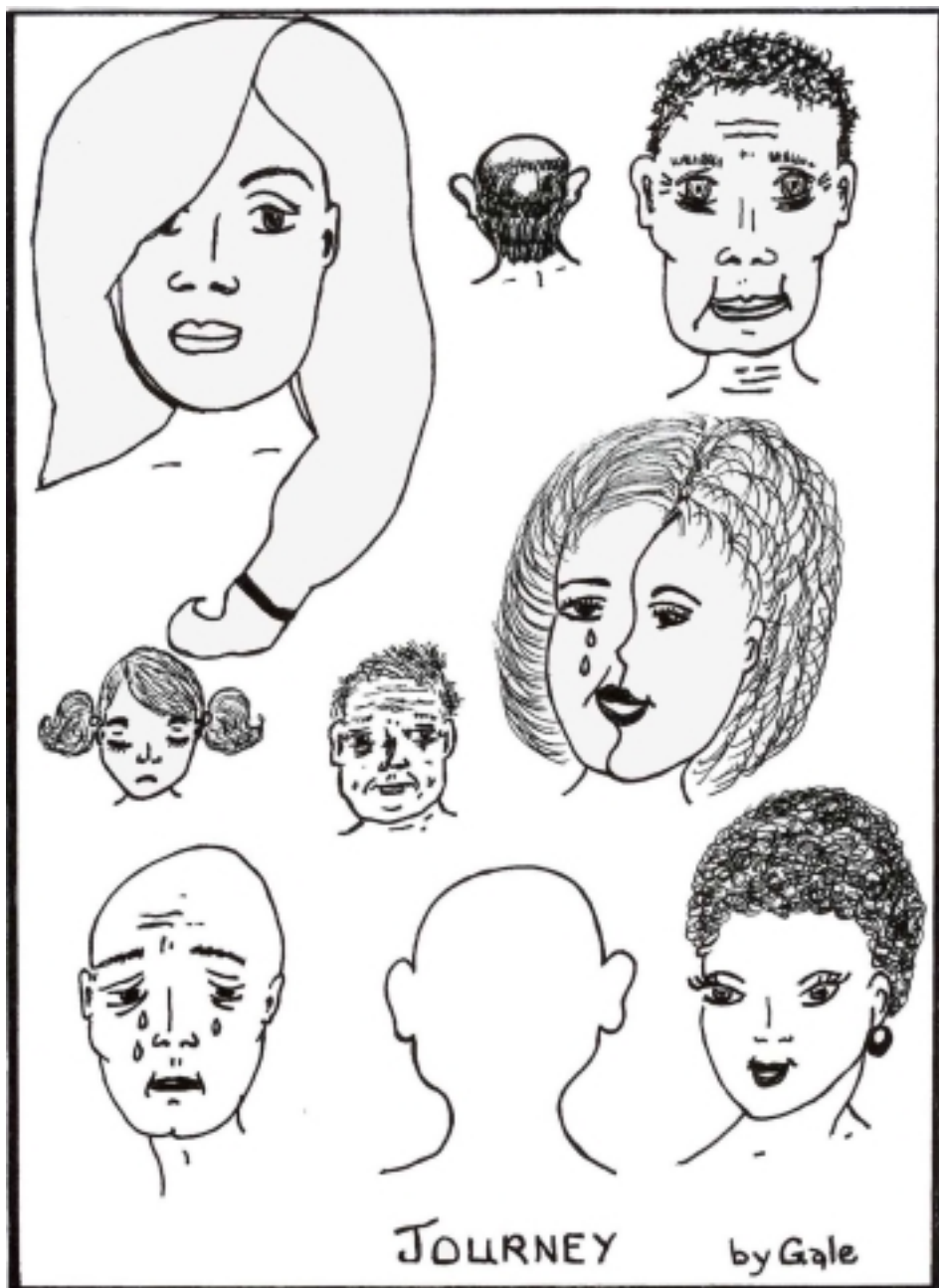


# Simplicity a complex issue for emotional diverters

By Jayne Gale

First you're asking yourself what on earth is an emotional diverter? The answer is simple and complicated at the same time in psychological terms. In its simplest form diverting means to divert attention from something (i.e. an emotion), or turn from a certain course or route.

In my case it's the fear of facing the emotion I'm being confronted with at a given time. In other words when a doctor asks me a specific question about my feelings such as, "Does that make you feel sad?" I may respond with something different like, "A bit, but I love the colour of that tie you're wearing" or "who did that painting I really dig the style of it." Whereby I am completely trying to divert attention away from the question of any feelings I may have of sadness or at the very least minimizing them. At the



same time I am distracting with either a question or a diversion to something unrelated to the topic. This is often how an emotional diverter works.

These habits of emotional diversion are not necessarily conscious attempts to divert but an unconscious defence mechanism that kicks in for any number of reasons. A person may have an overwhelming fear of expressing their emotions, an intense anxiety around feeling emotions or an inability to verbally express emotions.

Perhaps you've had sessions with a doctor or psychiatrist or have been part of a group and heard the feedback specifically that you are avoiding or diverting away from the question or the emotion being discussed on more than a few occasions. It's time then to consider whether you too are an

emotional diverter. If this is a problem you know you have it is not something you need to hang onto or that will help you get well; the opposite is true, instead it will hinder your progress. You can ask your doctor or therapist and confirm whether you have a pattern of avoidance when dealing with your emotions if you are unsure.

The important point is in recognizing whether you are an emotional diverter. Once you have this awareness then you can move forward with a professional to work on the underlying fears or other needs you are fulfilling to use diversion to stall your emotional progress. As I stated earlier it is not always a conscious act but in the end it is something that can slow down or stall your progress in therapeutic efforts to improve your mental and emotional health.



# Determination needed for recovery

When asked the questions, "How is your emotional health? What has sustained you over the years?" I reflected on my life's journey since I became mentally ill. Years ago, I was alone living in a well of shame and guilt. Looking back, I see that perseverance and determination led me to where I am today.

Sometimes self-centeredness got in my way. I desired to be the best for many years. I wanted recognition and success, which I believed would make me a better person. However, my achievements only made me want to strive higher and I remained unsatisfied. I criticized others and myself. If I focused less on the faults of others and stop envying their lifestyle, wealth or prestige, I think I would grow three inches taller.

Someone told me that when one becomes ill at a young age, several things happen. One becomes frozen in time. The illness may hinder the natural development toward maturity. I grew older, but at times I still reverted to selfish or judgmental behaviour that I had at the onset of my illness. I reacted aggressively rather than controlling my emotions. I couldn't see the other person's point of view. I was antagonistic and insensitive. All these things indicated I had a lack of objectivity and emotional balance.

Another thing that happens is failure. I failed to reach my dreams. My avenues for success were altered by my illness. I felt that my three-year-old nephew had more of a life and greater opportunities than I had. How could I at age 42 compare myself to a small child? My sense of self was so distorted that I wanted to be the center of attention like my nephew at three. Sad but it was something I had to deal with.

Also one may become afraid to challenge oneself or try new things. I was afraid to drive to places I wasn't familiar with. I panicked if I had to speak up in class or go to social functions. Things that came easier to others seemed impossible to me; like writing exams or cooking dinner for six. I developed a block, which prevented me from taking initiative.

If you knew me before and how I am now, you would see a drastic change. These days, I laugh, make jokes, smile and talk whereas before I was depressed and carried a chip on my shoulder a mile long.

Others have a tremendous effect on my

emotional wellness. I am lucky that the people in my life appreciate me despite my erratic behaviour caused by the chemical imbalance in my brain. Empathy and compassion should be taught in schools. Not everyone has those qualities, but I'm lucky I know people who care.

Purposefulness is important to my emotional health. If I have a reason to get up in the morning and do something, the day isn't wasted. Going for a walk, answering email, sharing with friends or working on a painting makes me feel good. I don't have to write the great Canadian novel or paint award-winning art. Instead, I enjoy the process of creating. To stay in the present, relax and just be are important goals for me.

Finally, I learned to validate myself and forgive the past. By allowing myself to feel warmth from others and recognize small successes, I became more content.

Because I have matured and gained insights, I am a better person because I can reciprocate the kindness I receive from others. I am able to share my story of recovery in presentations organized by the British Columbia Schizophrenia Society to students, families and other groups. Public speaking allows me to reach a lot of people and demonstrate that mentally ill persons can have quality of life, be productive and benefit the larger community.

So if you are ill or know someone who is, there is hope, there is a light at the end of the tunnel. With the right combination of medication and support from mental health services, families and community programs, I believe many mentally ill persons can recover. I may never be cured, but I love my life and understand the setbacks that I had in the past were lessons learned for the future.



## CRAZY LOVE RHYTHM & BLUES AT THE YALE

The Network has an evening at the Yale Hotel, Vancouver's famous R n B venue. As well as some of the best musicians around town there will be a silent auction. Come out and support the Network and have an evening of great entertainment.

**Thursday July 24  
6-9 p.m.**

Tickets \$10 in advance, \$15 at the door  
Call the Network at 604-733-5570 for tickets

**Yale Hotel**

on Granville at Drake  
in downtown Vancouver

A Vancouver/Richmond  
Mental Health  
Network benefit



# Survivors recognized by UN body

NEW YORK – The World Network of Users and Survivors of Psychiatry joins with the international disability rights movement in celebrating the entry into force of the United Nations Convention on the Rights of Persons with Disabilities (CRPD).

The Convention ensures that persons with disabilities are guaranteed human rights on an equal basis with all other people. "It means we no longer have to sacrifice our freedom when we need support. We will have the legal right to get out of institutions or stop treatment that doesn't meet our needs, to end abusive guardianship arrangements and live as free members of society," said Tina Minkowitz, co-chair of the World Network of Users and Survivors of Psychiatry (WNUSP).

The UN Convention obligates participating governments to change laws and ban discriminatory customs and practices. One highlight of the Convention is the right to enjoy legal capacity on an equal basis with others. For persons with disabilities, this means the right to make our own decisions and to be able to obtain support that we may need to make those decisions. Nothing in the Convention allows governments ever again to make decisions for us because they think they know what is best. The Convention also protects us from discrimination and protects our right to liberty on an equal basis with others; the right to freedom from torture or cruel, inhuman or degrading treatment; the right to live in the community; the right to health care on the basis of free and informed consent; an end to discrimination in the job market; and the participation by persons with disabilities to participate in the implementation and monitoring of the Convention.

WNUSP looks forward to the day that the Convention achieves its purpose – to protect and promote the human rights and dignity of the estimated 650 million persons with disabilities around the world, a significant proportion of who are users and survivors of psychiatry.

For more information visit [www.wnusp.net](http://www.wnusp.net).

Bob Krzyzewski's Wellness column

## Holistic alternatives support spurs further development

Greetings everyone, as summer approaches there are many important current developments afoot to report. The first thing is that we have been offering monthly education seminars which have been advertised as "holistic alternatives" and have presented a wide variety of healing modalities. Events have been well attended as a rule although I feel that recovery has to be more involving and supportive to our Network members.

Therefore I have been incubating a support group model and connected with some members at The International Orthomolecular Conference in Vancouver on May 4<sup>th</sup>, where they hosted a panel presentation, which made a very compelling case for effective holistic recovery.

In the early seventies, Dr Abraham Hoffer along with Fred Kahane, then Chairman of the Canadian Schizophrenic Foundation, unveiled a new movie on "Schizophrenia as a Perceptual Disorder". Here Dr. Hoffer laid down his basic hypothesis that schizophrenia and other mental illnesses were caused by bio-chemical imbalances in the body. These imbalances could be detected, measured and corrected nutritionally with vitamins, minerals and amino acids in correct combination, in a positive support framework, along with other positive lifestyle choices.

Today, Dr. Hoffer, who may be known to many of our readers, is currently retired in Victoria. He has created a wide network of professionals, who in turn can join their international association. At the local level information is widely available, but practicing physicians and psychiatrists are in short supply. Hence the vital importance of a Network sponsored

grassroots support group.

I submitted an official "first draft" proposal to the VRMHN Board at the April 16<sup>th</sup> board meeting, which was accepted as an initial operational statement. I also nominated a Network member who is interested and actively pursuing holistic recovery along orthomolecular principles as a co-host/facilitator. They have accepted this role, and we explored a provisional framework which

includes mutual help shifting through copious amounts of internet and printed information, (which is sometimes very technically written). Group members can support one another by sharing access routes, practitioners and other relevant public information seminars and healing events; a kind of "best practices inventory".

Another important development that needs to be mentioned is the political arena where both provincially and federally legislations are currently being voted, which will have direct regulatory impact on the health foods industry.

I will conclude this article by enthusiastically inviting every concerned member of the Network to look into Federal Bill C-517 and provincially to check B.C. MLA Gregor Robinson's Bills for "The Right To Know" Act, and to show up at a public information rally on June 02, 2008, at St. Andrew Wesley's United Church on Burrard Street hosted by local lawyer Shawn Buckley.

I hope to hear from some of you personally at the Network office and of course to see you at this upcoming concerned citizen's event. These are perilous times for people in recovery from mental illness, and we have to learn to practise effective action in mutual solidarity.

Namaste.



**Bob Krzyzewski**  
Community Education



# Care-giver must tend to own needs too

**By Catherine Wallace**

Alzheimer's disease is that all pervasive memory and confusion disorder which fogs the brain, and caring for one afflicted by it can be emotionally draining if one is not conscious of self-care for both the patient and the self.

In the past several years, a dear aunt of mine has displayed several repeated behavioral problems in her daily life, although she otherwise she appears to be her old self. The behaviors she exhibits which can be difficult to deal with are repeating questions you have already answered, or her playing hide & seek with her personal belongings. She cannot recall where she puts her belongings such as her purse, wallet, identification cards or other esoteric items like her walking cane, toilet paper, Kleenex or toothbrush.

Getting ready to go anywhere with her takes approximately an hour of looking for items lost or misplaced before we even depart her room. Our favorite cliché we repeat while hunting for the "lost" items are; "Well, I guess you put it in a good safe hiding place!"

Another stressful behavior my aunt exhibits is not knowing where she is or more importantly, where she is headed. She often forgets her objective or goal in mid-step. She can easily get lost and not find her way back again. Alzheimer's disease creates tremendous responsibilities for the caregiver because the level of care which will be required can fluctuate from day to day or even hour to hour.

Emotional self care is all important when dealing with Alzheimer's disease like educating oneself, prioritizing, getting sufficient rest and

making connections with others. When the circumstances became clear that I was it - the major caregiver for my aunt - I was attending a weekly counseling session for self-discovery, contenting with an illness – fibromyalgia – as well as struggling with isolation. Immediately upon recognizing my responsibility for my aunt, I started a weekly held Mental Health Society organized introduction to an Alzheimer's Educational Program for I had not previous knowledge of the illness.

The program has given me copious amounts of insights and understanding as to how varying and undermining this disease feels to the one struggling with the illness. Friends, Family and Health Care Workers play a key role in responding to my questions as I do my best to aide and support this ex-independent and still brilliant woman into a suitable nursing home. In helping her I am helping myself.

Now, I understand the concept and value of having one's consciousness in the present for she models this behavior as she greets me and interacts with me "fresh" each time I see her. Eckhart Tolle in *The Power of Now* says the way to end suffering is to be in the present moment at all times. As my aunt's disease progresses, her consciousness is not consumed by her past nor future events; what is important to her is happening right now, each moment. She does not display any pain. I have come to realize the way out of my suffering is to embrace being in the moment. Thank you for freeing me emotionally, aunty!



*Illustration by Catherine Wallace*

# What's happening

## The Best Place on Earth

An art show this summer promises to challenge the way we look at and think about the city at this time and place in its brief history. Karen Ward, a historian, writer and lesbian who lives with a mood disorder and a cat, presents a show of photos in which she lived during a period of recovery. The Best Place on Earth, photos & objects, 2005-06 presented by Karen Ward Taf's Café and Gallery, 829 Granville St. Vancouver (off Robson's)  
web: [www.triumphstreet.ca](http://www.triumphstreet.ca)



Photo by Karen Ward

## SFU Conference

Simon Fraser University will be hosting a three-day conference starting Friday June 12 titled *Madness, Citizenship and Social Justice* at the Vancouver campus 515 West Hastings Street. Ron Carten, our Network executive director, will be presenting his research on the topic of discrimination against the psychiatrized in BC health legislation and the social status of the psychiatric patient. [www.sfu.ca/madcitizenship-conference](http://www.sfu.ca/madcitizenship-conference)  
Tel 778-782-4910/3012.

## R&B at the Yale

The Network has an evening at the Yale Hotel, Vancouver's famous R&B venue. As well as some of the best musicians around

town there will be a silent auction. Come out and support the Network and have an evening of great entertainment. It all takes place Thursday, July 24 between 6 and 9 p.m. Admission is \$10 in advance or \$15 at the door.

## Folk Festival tickets

The Network will be providing Folk Music Festival tickets to members at a discount. The Festival this year will be on July 18, 19 and 20. Members will receive order forms for tickets in the mail.

## Pet Therapy Workshop

Date TBA. The Network will be hosting a workshop on pet therapy and pet care for

the benefit of any interested consumer/survivors.

## Mad Pride Cabaret



The Network will again be presenting a cabaret at this year's annual Mad Pride festival in July to be held at Gallery Gachet. For details contact the Network or call 604-687-2468 or visit [www.gachet.org](http://www.gachet.org) Gallery Gachet is located at 88 East Cordova St., Vancouver.



**Wellness columnist Bob Krzyzewski provides entertainment while Kathleen Still provides nourishment at the VRMHN spring get-together for members at the Mt Pleasant Neighbourhood House in March**



# What's happened

## Spring gathering