



APRIL 2015

Newsletter

BC Schizophrenia Society, Victoria Branch

“Stigma”

For info or self referral: visit www.bcssvictoria.ca or call 250-384-4225 email: admin.bcsc@shaw.ca

MUSIC MAKERS & STIGMA SHAKERS

A BENEFIT CONCERT to BREAK
the SILENCE on MENTAL ILLNESS

With performances by:

Kytami

CARMANAH

SAM WEBER

HAWK & STEEL

Guest Speakers from and Proceeds going to:

NEED2

BC Schizophrenia
Society Victoria Branch

LAST DAY OF CLASSES

THURSDAY, APRIL 2, 2015 | ALIX GOOLDEN PERFORMANCE HALL |
907 PANDORA AVE. | DOORS OPEN AT 6:45 PM | TICKETS \$25
@ LYLE'S PLACE AND DITCH RECORDS



FACEBOOK.COM/UVICMENTALHEALTH

UVic Mental Health Awareness Club | uvicmentalhealth@gmail.com | 250-920-8885

*Come on out for a night of great local music,
while also raising funds and awareness for
mental health!*

April 2nd, 2015 7:30-11:00 pm

Doors open at 6:45 pm

Alix Goolden Performance Hall

907 Pandora Avenue

We are pleased to announce that a Mental Health Awareness Club at UVic has identified BCSS Victoria as one of the recipients of the proceeds from the concert. All profits from ticket sales will be split equally between the Victoria branch of the BC Schizophrenia and NEED 2 Suicide Prevention, Education, and Support. This concert event will include four great musical performances, as well as some brief presentations about mental illness by guest speakers including Hazel, Paula and Ricky.

Tickets are \$25.00 in advance and \$30 at the door. They are available at the BCSS Victoria office or online.



BCSS Victoria Iris Luncheon

May 22rd, 2015 Noon-1:30 pm

Union Club of BC, 805 Gordon Street, Victoria.

Guest Speakers: Mayor Lisa Helps and Paula Roumeliotis

Tickets: \$35.00 for Speaker and Buffet Lunch



Please bring your cheque books for the Silent Auction. Funds raised stay local!

The Iris Luncheon will be held on May 22nd in support of the BC Schizophrenia Society, Victoria Branch. Champions for mental health can join us for this meaningful event to raise funds through sponsorship, donation of silent auction items, and attendance at the Iris Luncheon Fundraiser. Help us make a difference in our Capital Region for those facing serious mental illness. Major sponsors, Investors Group, partner with the BC Schizophrenia Society Victoria Branch to raise awareness and funds during the 4th Annual Iris Luncheon. “We are so very pleased to partner with community leaders to show support for those facing the stigma and other challenges of schizophrenia and psychosis. Recovery is possible for those with schizophrenia and psychosis” stated Hazel Meredith, BCSS Victoria, Executive Director. Tickets are now available at the BCSS Victoria Office 941 Kings Avenue.



My Mother and the Black Dog: A Memoir

By Terry Germanson

My mother died peacefully and swiftly two weeks after Christmas at the age of 91. She was smart, gracious, loyal, and witty to full measure. Even with advanced dementia in the final year, the clever, madcap one-liners kept coming, seemingly out of nowhere. Ironical wit was apparently the last thing to go.

My mother had a secret though and the secret was depression. She would not be pleased with me even now for saying so. She has a posthumous reputation to maintain after all. The public knowing of her mental illness could ruin all good opinion of her character in a single, heartless stroke.

Odd though this may seem, my mother and I are finally talking about this now, post-mortem. For those of you who may not be aware, mothers keep conversing with you even after they die, depending on the mother, and especially when unfinished business looms. I've told her I'm telling her depression story in a newsletter dedicated to other people with mental illness and their loved ones. "No," she retorts, "that would be awful." Other people with mental illness apparently know better than anyone how bad it is (was), so the exposure could be all the more ruinous. She's missing the point, but I intend to persevere with the anti-stigma campaign. Stubbornness also runs in the family.

I'm with Clara Hughes that talking openly about the experience of mental illness and sharing with peers is surely the way to transform this experience. My mother lost her grip on the life she might have had for decades because these conversations did not take place (earlier).

Nobody but my father and the medical profession knew of her diagnosis for the first 25 years. When the illness finally burst open into a major depressive episode after my father's death, the truth finally spilled out. Why didn't she tell even us years earlier? Because her daughters might think less of her. When I shared this revelation with my husband while driving back from the airport, he nearly drove off the road. That was 1995.

Things got better after that with competent psychiatric treatment, her full cognitive powers restored. But my mother was never again that person who led region-wide panels on international affairs, sparring with intellectual friends. The humiliation of losing all control in a state of catatonic depression had been too great and she never corresponded with the old friends again. She was banished into a senior centre where she went into a kind of spiritual hibernation. Nobody there knew her really and I was the co-conspirator in the cover-up.

Happily though, my mother's life took still another turn at around age 80. We moved to Victoria where she settled into an assisted living centre on Humboldt Avenue. From the very beginning, those around her knew who she was. They got her dry laconic sense of humour and parried back. The quips were back at the dinner table with peers who may have had their own mental health stories, though they never talked about these experiences directly. My mother's graciousness and lightness of spirit returned. She was never so charming and quick witted as in her 80's, at least with her friends, residents and staff. Perhaps she had privately decided to forgive herself for having depression; peering over a book one evening, she remarked, "I hope I can always be as happy as I am right now."

I am glad it ended this way with my mother making a full recovery from depression. But I can see looking back that self condemnation and stigma took a bigger toll along the way than the original illness itself. She was never a lesser person in the first place for having depression. The struggle, though painful, lent depth, not shame. That is why the conversation is still not over. It's time to go public now, get it out in the open, complete the circle, in the community of the wise. "Okay, okay, I see your point. Tell them."

WHAT IS STIGMA?

By Louise Sowerby

Stigma is a strong feeling of disapproval that some people have about something, especially when this is unfair. Mental illnesses are inseparable from the attached stigma. Anxieties tend to be inborn and as a defensive reaction people tend to be alarmed by the unknown, and suspicious of unpredictable things. They have a fear of mentally ill people and at times even negate them.

The mass media's power to impact public perception and the degree to which people are exposed to media representations makes the media one of the most significant influences in developed societies. The media ends to skew reality when it comes to mental illness. For example, inaccurate depictions of schizophrenia can lead to false beliefs, confusion, conflict, and a delay in receiving treatment.

Unlike physical ailments, many mental illnesses are associated with stigma. Having to deal with this 'shame' can be very debilitating and can interfere with daily living. The mentally ill continue to receive negative attention, largely due to fear and prejudice. People who suffer from mental illness are often pushed to the fringes of, or are directly excluded from, society.



Vintage, Retro and Collectibles Show/Sale

Mary Winspear Centre, Sidney

Easter Sunday: April 5, 2015 9:30-4:00 pm

General Admission \$4.00 Early Birds (8:00 am) \$20.00

BCSS Victoria Branch will be hosting a few fundraising and information tables at the Vintage, Retro & Collectible Show. This event supports our efforts to raise the quality of life for our clients and their families.

Come on down to the Vintage Show to find some new treasures to add to your collections and to support programs and services at BCSS Victoria Branch. We hope to see you there!

STIGMA and families

By Murray Galbraith

Readers of this Newsletter are well aware of how stigma clings to mental illness, adding to the impoverishment that disease brings to body and spirit. Dr. Freud and his theory of Psychological Analysis gave us reason to think of all diseases in a scientific way more than a century ago, but it has taken most of that for the word "cancer" to be spoken without shame.

We look forward to that also happening with all of the five major mental illnesses. There has been some movement toward this goal, but families that are struck are tempted to put off searching for diagnosis because of "what the neighbors might say". They sit on their options and bizarre behavior goes on. "Better to wait it out, maybe its only juvenile delinquency. Uncle Bert had that, and now he owns a car dealership." Time passes. If care and treatment is required it cannot begin in the absence of diagnosis. Opportunity is lost, good outcomes are prejudiced, and life is wasted.

Stigma also reduces the number of people that will support efforts at public awareness. Who will show the flag and unmask this impostor? Some suggestions will be offered in the next issue.



Balance of Self Care and Service

*By Susanne Dannenberg
(outgoing Family Counsellor)*

Two and a half years at BCSS, Victoria, went by in a flash it seems.

One 'minute' I am answering the phone here, the 'next' I am out for coffee with a peer, and 'the other', I am sitting with fellow family members listening to their stories. Stories of love, worry, confusion, frustration, humility, determination, patience and yes, HOPE and RECOVERY.

Over the past few years, we talked about when and how do we best support loved ones with a mental health challenge, especially when they have no or little insight into their illness? And when does our support become enabling and no longer facilitates recovery? How do we engage in self-care, when we know our adult child or spouse is seriously struggling and we always feel on call, never able to fully relax? Every person and family has unique circumstances, but there are also many parallels, hence our family and spousal support groups have been a blessing for many family members, they tell us. I now have been called by my own family to be of more support to them, and so I will be moving shortly to the Okanagan to do exactly that.

Besides my dog, Keenu 🐶, I will take with me the many memories of mutual sharing, crying and laughing here at BCSS, as well as my own reminder of 'walking my talk' by creating new balance in my life again through self-care. That will involve following my own WRAP with adequate sleep, good food and walks in nature, making and teaching art, and doing other things that I am passionate about.

The dance of life includes loss and change as well as new opportunities for increased awareness and practice of new skills learned that can help us move toward wellness. I am grateful for all I was able to give and learn at BCSS, and I embrace all that will come, by following my heart and inner truth one moment at a time; guided by the most important 'things' in life for me: LOVE for self and others, and the balance of the two.

With grace and gratitude, I wish you all the best on each of your journeys, Susanne



Maladjusted

A Review by Don Palmer

On Jan 31st, at the Songhees Wellness Centre, I saw a unique and compelling play on the harmful effects of stigma, originating from the health care system, related to mental illness. It's an interactive play called "Maladjusted". The play is about a half hour long and is performed the first time with just the actors on the stage. When it is performed the second time, an audience member has the opportunity to say "stop" at a point where they feel they could take the place of one of the actors for a few minutes and say and do things in a way that is more helpful to the person with the mental illness. Audience members are then asked to give their opinion on what could be changed in mental health policy to be more helpful to the person with "lived experience" and on what would contribute to the dissolution of stigma related to it.

Stigmatization is a significant problem in the identification and treatment of a mental illness. Many people will not seek help because they fear people seeing them as "different", "less than" or "crazy" and even worse than that believe those things about themselves (self-stigma). Even after treatment is sought the person receiving it may discontinue the treatment due to the inability to shake the beliefs inherent in stigma and self-stigma.

Among the many issues pertaining to stigma within the mental health system identified in a two day discussion organized by Vancouver Coastal Health in September, 2011 were: the division between various mental health services and lack of communication between them; how a "mechanizing model of care" is relying more and more heavily on pharmaceuticals; how the health system expects patients and caregivers to conform to the needs of the system, rather than finding innovative patient-centred opportunities; burn-out of health care workers who themselves have little or no support; and disparaging language (written and spoken) that health care professionals use to describe the people with whom they work.

"Maladjusted" is very moving and powerful; an emotional viewing experience with heart and unexpectedly even some humour. I encourage everyone to see the webcast as the play is only being performed in BC and Alberta the next 2 months. If we don't have such an illness ourselves we certainly know someone or know of someone who does. Social change requires a huge amount of public support. Please consider seeing "Maladjusted" and consider becoming part of that change. For more information go to info@theatreforliving.com. Join the conversation at facebook.com/TheatreForLiving.



Annual Naked Bungy Jump 2015 for BCSS A Great Success!!!

This year's Naked Bungy Jump for BCSS was a great success. With over 250 people attending, wonderful volunteers, perfect weather and of course hot dogs and smores, we couldn't have had a better time! Paula, our new Administrative Coordinator jumped for her first time not once, but twice!!! And we raised over \$20,000.00 which will go a long way towards being able to continue to provide support and services to people living with mental illness and family members. Many thanks to everyone who contributed towards making this event a successful one especially to all the folks at Wild Play Elements Park in Nanaimo.

Thank you to our corporate donors: Thrifty Foods, David's Tea, Tim Hortons, Walmart Canada, and Wolf/Wave Radio.



Thank you to all of our wonderful volunteers: David Axon, Kevin Pryer, Michaela Iacob, Jenna Grant, Kent, Kees and Dianne Bastianns, Stefanie Lekei, Louise Sowerby, Bruce Saunders, Mark, Joan Appleton, Jared Weib, Ricky Kohli, and to our fantastic camera crew: Kara Udell, Mandy, Shawn, Alex and Alex.

Want to take an active part in helping
to bust up the stigma of mental illness?

Consider contacting BCSS Victoria to inquire about our Partnership Presentation Program.

We have a team of speakers with lived experience including people living with mental illness, family members and others who can come to your place of work, school, or business to share their experiences about what it's like to live with mental illness. It's a great way to bring awareness and help to lessen the stigma that surrounds mental illness. Call the BCSS office at 250-384-4225 to book a presentation.

CANNABIS AND PSYCHOSIS

By Ricky Kohli

The use of cannabis among youth is on the rise, not only because it is on its way to becoming legalized, but also because most users feel it is not as bad as it is played out to be by the government. However, a new project was started by the Schizophrenia Society of Canada in 2009, to find the link between cannabis and psychosis and has brought some new and important information to consider.

The Schizophrenia Society of Canada began a project called The Cannabis and Psychosis Project in September 2009 to find the link between the use of cannabis and psychosis in youth. 28 youth who had previously experienced psychosis were trained as research assistants in three sites across Canada. These youth would then work with their support staff to recruit youth for interviews on their experiences with cannabis and what they thought about the connection it may have with psychosis.

The results showed that youth from ages 12-17 were typically using cannabis and the reasons for using were mainly peer pressure, being social, curiosity, being under the influence of alcohol, boredom, to “escape” life and reducing stress. The patterns of use started as a social and recreational hobby and progressed to solitary use. It was also seen to change over time and with patterns of on-and-off constant use.

The experience of the high itself varied from positive to negative and they found that it really depends on the person. The positive results consisted of happiness, increase in energy, fun, relaxing, more focused, carefree, creative, reduces stress and anxiety, makes you talkative, and light-headed. The negative effects were basically the opposite with some extras. Users found they are more paranoid, anxious, experienced loss of motivation, foggy memory, hallucinations and depression. Users that had negative experiences coped with the effect by focusing on other things such as watching a movie, playing a game, going for a walk or simply engaging with others in a calm and relaxed environment. Some also shared that they used it for meditation, medication, or as an alternative for alcohol.

As for the connection between cannabis and psychosis, all of the youth generally believed that cannabis could in fact have triggered or played a role in their illness. They also showed a great amount of uncertainty on the subject. “I don’t think drug use causes psychosis, but I 100% support that it brings it out in people who are predisposed”, one of the youth shared. The study also showed that the use is more likely with individuals who may be predisposed to mental illnesses than with people who are not. Whether this is because they use it to deal with their disorder or because of peer pressure is unclear.

It is clear, however, that youth are not being given the information they need about cannabis and how it affects everyone differently, especially those who may be predisposed to a disorder.

In my own experiences, I have a family member who has just experienced first stages of psychosis and schizophrenia that could have been triggered by cannabis. For two months he was under the impression that it was helping him cope with his anxiety, however the cannabis could have actually made it worse. Some would argue that cannabis prevents these symptoms and would make them feel better. This can be true, but it is also true that each plant has its own characteristics and properties that will affect individuals differently. As for my family member, he received the help that he needed at the right time because of information as valuable as this. Cannabis would not have been considered as a trigger however now it seems like it could have played a big part.

It is crucial that youth are aware of this information and that they check with their doctor or someone with more experience before they try cannabis, for any reason.

BCSS Victoria on Facebook: <http://www.facebook.com/BCSchizophreniaSocietyVictoria>
BC Schizophrenia Society Victoria Banch on Twitter: [@BCSSVictoria](https://twitter.com/BCSSVictoria)