

*Mental Health Matters

Newsletter for CMHA Niagara Branch

Winter 2010



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Stigma is a reversible condition

by Neal Wadeson

WILLIAM WORDSWORTH WROTE, “*We Poets in our youth begin in gladness, but therefore come in the end to despondency and madness.*”

There was a time when I thought that statement true. I think Wordsworth may have had a brush with depression. He, from my perspective as I entered the world of mental illness, expressed what I felt. Let me explain.

Imagine that you're travelling down the Queen Elizabeth Way when you have this overwhelming sense of dread come upon you, your eyes suddenly well up with tears and you have to pull over to the side of the road. Slowly you gain enough of your equilibrium so that you can get to the next rest stop. You pull into a far corner of the parking lot, where you sob uncontrollably for the next half hour.

That was my introduction to the world of Bipolar disorder. If the experts are right I probably have a genetic disposition to the illness. Additionally I was probably suffering from it for some years prior to my collapse on the side of the QEW.

Looking back I can see that there were tell tail signs of the illness probably as early as a decade before. Signs that I could never have seen back then.

Back then in the late eighties early nineties I had no clue Bipolar Affective disorder even existed let alone the tell tail signs. Even if I did have, at the time I don't think I'd have gone willingly to a psychiatrist for the simple reason I had prejudicial ideas about psychiatrists. They were for people who needed help and I didn't. What a difference a few years makes. My doctor suggested seeing a psychiatrist, which I did with as open a mind as I could. The results were very positive, beginning a journey that has led

Profile: The Common Stigma

Stigma is a reversible condition that responds well to informed understanding and compassionate social practices

Julie Blushak / PaperFang 2009

to today. Today I'm quite open about my illness. Don't get me wrong, I don't go around yelling at the top of my lungs, "LOOK AT ME, I HAVE BIPOLAR DISORDER." Most of the time, especially if I'm having an off day, I simply tell people I'm not feeling well and leave it at that. If I have to I go and lay down. Still, I'm very active in my church and the topic for one reason or another does come up. As a result I've had a range of reactions.

On one occasion, I was at a convention talking at break with a group of people I knew. The topic of mental illness had come up and I told my story. Later, a woman who I didn't know came up to me and said, "You really shouldn't be talking about mental illness. It's not a real illness. People who have it need to just snap out of it and get on with their life." I was quite shocked. It was at that point I realized evolutionists were wrong and that dinosaurs are still alive and living among us. Another time I was in a church discussion group with other Sunday School teachers. The topic had come up and being the only one in the group with first hand experience, I gave my story. At break a man came up to me to say, and I quote, "mental illness is of the devil, it's a form of demon possession. If you suffer from it you need *continued on pg. 2*

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The CMHA is a national, voluntary organization that exists to promote the mental health of all people and to serve mental health consumers, their families and friends through education, public awareness, research, advocacy and direct services to more than 135 communities in Canada.

Our Vision: *An inclusive community dedicated to the rights and mental health of all people.*

Our Mission: *CMHA Niagara Branch is dedicated to leadership in mental health, demonstrated by the delivery of services that ensure full integration advocacy, and education that eliminates discrimination.*

prayer and you should step down as a teacher until you do so?" He seriously believed what he said.

On both occasions I was shocked, in part because of where I was, a place that should have offered understanding, and in part because of what I perceived as a very callous, uneducated attitude from both people. Fortunately for me I was relatively stable at the time and with friends who agreed with me that those people were very insensitive.

Noone can really know how negative attitudes and hurtful words affect those with mental illness. It's akin to kicking a man with stomach injury when he's down. No one would think of doing such a thing yet those with mental illness seem to be fair game. Is it any wonder people with mental illness stay in the closet?

Stigma has effects

by Catherine Clarkson

IT WAS 2 WEEKS before opening night. I had the lead role in a musical. Rehearsals were intense and I was singing in almost every song. It was a great opportunity for me to show off my voice and naturally I was very excited. Without warning, my brain chemistry went out of whack. My thought patterns were sped up. It was as though someone had given me a shot of adrenalin to last a week. I hadn't been sleeping; 3 or 4 hours a night. When I spoke, it was difficult for anyone to understand me. I knew what I was saying but was unable to make the words come out right for the listener.

I ended up in the hospital and was obviously unable to continue in the musical. Several months later, when I mustered up the courage, I contacted the Director to apologize for the hardship I had certainly caused him and the cast. The hostility I received astounded me and the apology didn't matter. To me, his words implied that I had attacked him personally and destroyed his production. When he asked why I didn't come to him when this happened, I knew we weren't on the same page. He thought I just had a bad case of stage fright!

I tried to paint a picture of my condition for him -- if he was unable to walk in my shoes, maybe I could at least help him to see he was asking the impossible. I told him that my sentences were delivered in riddles. I wasn't making sense. I was sure people were directing my life and my actions were somehow part of a bigger picture, one that would fast-track me to stardom. I said that I was in no condition to be talking to anyone, my own parents couldn't make sense of my rambling. Everyone was afraid I'd hurt myself. I was crying hysterically one moment and the next, laughing hysterically. My husband hid car keys so I wouldn't be able to drive. I was incoherent.

I was so embarrassed by the rejection of my apology, that it would drive me underground with respect to talking about my mental illness. Years passed before I was comfortable talking about my illness to anyone other than family or close friends. I knew that anyone involved with this theatre had heard about my breakdown in our small regional theatre community. I avoided going to any productions there for a number of years. It didn't matter that I had made some friends while performing in past shows. I didn't hear from anyone. They were likely embarrassed for me and their silence spoke volumes. When I finally got up the nerve to attend a play, I was greeted with warmth and kindness by one of the musical directors. It

LOOKING FORWARD by Mike Lethby, *President*

THIS UPCOMING YEAR will be one of learning and adjusting.

There is a general mood that current programs and policies need to be evaluated and new directions and policy implemented. The Board will strive to ensure that people living with mental illness are kept front and centre during this time of new ideas and planning. Let me affirm again that CMHA Niagara Branch exists to serve the needs of people living with mental illness, both individuals and families, and that they are the heart of our organization and are that which give us purpose.

Speak out for others

by Mike McCallion Sr.

LET'S RECALL THE STRIDES made by CMHA Niagara and other Niagara Region mental health community support services in bringing the harm of stigma to the attention of the general population. This increased awareness assists all in the continuing role of providing community support services. These support services are essential for ordinary people who no longer have an ordinary life due to the effect of mental illness.

Our collective goal must include the reduction of stigma as it remains one of the most effective tools in providing a more comfortable life for all people. Uninformed people may be uncomfortable communicating with people who are making their way with an extra burden of "meds" and counseling. Those who are informed through experience and/or vocation, will find occasions where it is necessary to speak up and make uninformed people feel uncomfortable. Making some feel uncomfortable may create discomfort for us -- it is almost unCanadian to force an opinion on someone else. However, short term discomfort is necessary to change current thinking. Changing the thinking of uninformed people is a key challenge in reducing stigma.

May all volunteers, family and professional care providers think of those special days and/or nights, after an especially uncomfortable day of prolonged effort, be able to step back from the situation at hand and say, "I really made a difference in the life of a person in need". Their future will be less uncomfortable.

10 steps to beat stigma

1. Learn more about mental illness.
2. Listen to people and their stories about stigma.
3. Watch your language - don't perpetuate stereotypes.
4. Report stigmatizing media material.
5. Speak up when you find language or terms disrespectful.
6. Talk openly without shame about mental illness.
7. Demand change from elected representatives.
8. Support organizations that fight stigma.
9. Contribute to research.
10. Protest stigmatizing material to those responsible.

Stigma has effects continued

was a relief. I will never forget his sincerity. I would never audition for anything that the other director was involved with, but I have since attended shows that friends are in. I am glad to say that no one else has treated me with animosity when I attend this theatre as a patron of the arts.

The **CMHA Public Education Department** offers presentations that help to increase the knowledge of mental illness while decreasing the stigma. For more information or to schedule a public speaker please call **905-641-5222 ext. 228**.