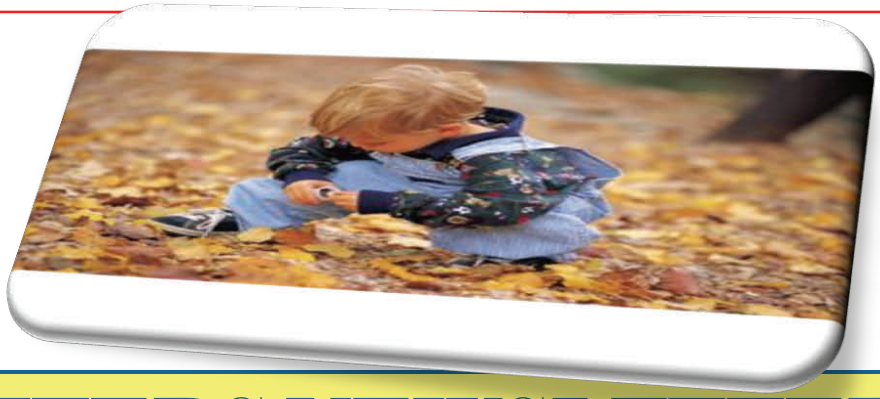




**Family Mental Health
Initiative**



FAMILY MATTERS NEWSLETTER

Our Mission: To provide support through education, training and referral to the family members of those individuals with serious and persistent mental illness difficulties. This will enable those families to adequately fulfill their roles in relationship to their family member(s), the mental health system and the community.

Notre mission : Offrir du soutien aux membres de la famille de personnes atteintes de troubles de santé mentale graves et persistants par l'entremise de l'éducation, de la formation et de l'orientation vers les services pertinents. Ce soutien vise à permettre aux membres de la famille de bien s'acquitter de leurs rôles à l'égard des autres membres de leur famille, du système de santé mentale et de la communauté.

Relationship Logo: The stylized individual represents the Family Mental Health Initiative of Simcoe County. The Initiative helps families fulfill their roles in relationship to their family member(s), the mental health system and the community. The three circles are representative of these relationships. The font chosen for the lettering has a very friendly appearance due to its curved lines. The letters themselves are narrow. This gives the feeling of togetherness.

September 2010

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from the desk of the coordinator

Everyday I have the great opportunity to talk with people like yourself, family members, supporters and friends of persons experiencing mental health difficulties; you share with me your stories, your worries, your struggles and challenges, and the successes and achievements you have witnessed in your loved ones life as well as within your own lives. The journey you are on may at times feel as though it is not paved in gold and at times you wish you could take another route, but through all the trips, stumbles and falls, you get back up, dust yourself off and keep moving forward, not only is your loved on their journey of recovery, so are you. You are courageous, resilient and inspiring. For those times when you feel tired, weak, and burned out, I want you to know that you can reach out for support, to talk or just listen and be with other family members and friends either at one of the family support groups or an information session. Being with others living similar life experiences is one way you can care for your own mental wellness and build your network of support. You are not alone. For those family members and friends who see wellness and share this with others that recovery is possible, instills hope. Recovery is defined by your loved one, only they know what recovery is for them. I know I mention the family support groups at every opportunity, I do this because I know and have seen these groups do exactly what they are meant to do, they create a safe, supportive and confidential environment for family members and friends to talk with each other. Family members and friends have told me after a group that they felt they finally found a place for them, a place where people understand their perspective.

I hope you enjoy this edition of the newsletter. All the best to you and your family, Tara.

Contact us at:

151 Essa Road, Suite 202 Barrie, ON L4N 3L2
Phone: 705-725-0363 Toll-Free: 1-800-324-3252 Fax: 705-725-5496 Website: www.fmhi.ca

Mental Health Crisis Line

1-888-893-8333

FMHI is sponsored by the Canadian Mental Health Association, Simcoe County Branch and funded by the North Simcoe Muskoka Local Health Integration Network

Articles, poems, stories from family members, supporters and friends are welcomed. Anonymity will be respected if requested. Guest articles reflect the opinions of the authors and do not necessarily reflect the views of FMHI. If you have questions or comments please contact the person who wrote the article. Thank you.

Mental Illness Awareness Week

October 3 - 9, 2010

Mental Illness Awareness Week (MIAW) is an annual national public education campaign designed to help open the eyes of Canadians to the reality of mental illness. The week was established in 1992 by the Canadian Psychiatric Association, and is now coordinated by the Canadian Alliance on Mental Illness and Mental Health (CAMIMH) in cooperation with all its member organizations and many other supporters across Canada.

Face Mental Illness Campaign

Nearly 1 in 5 Canadians is affected by mental illness, yet a persistent stigma prevents millions from getting the help they need. The continuing theme of Mental Illness Awareness Week - Face Mental Illness - is designed to change that. By sharing their stories, the courageous "faces" of our campaign are helping bring mental illness out from the shadows. Their experiences are proof that through proper diagnosis, treatment and awareness, people with mental illness can live productive and fulfilling lives.

Meet the *Faces* of Mental Illness Awareness Week 2010



[Dr. Ted Jablonski](#)



[Marie Asuncion](#)



[Jennifer Ashawasegai](#)



[David Albert Newman](#)



[Christine Dubois](#)

Recovery is possible.

For more information, please visit the website: www.miaaw.ca

National Alcohol & Drug Addiction Recovery Month

Recovery Month is an annual observance that takes place during the month of September.

The **Recovery Month** observance highlights the societal benefits of substance abuse treatment, lauds the contributions of treatment providers and promotes the message that recovery from substance abuse in all its forms is possible. The observance also encourages citizens to take action to help expand and improve the availability of effective substance abuse treatment for those in need. Each year a new theme, or emphasis, is selected for the observance.

Recovery Month provides a platform to celebrate people in recovery and those who serve them. Each September, thousands of treatment programs around the country celebrate their successes and share them with their neighbours, friends, and colleagues in an effort to educate the public about treatment, how it works, for whom, and why. Sub-

stance abuse treatment providers have made significant accomplishments, having transformed the lives of untold thousands of Americans. These successes often go unnoticed by the broader population; therefore, **Recovery Month** provides a vehicle to celebrate these successes.

Recovery Month also serves to educate the public on substance abuse as a national health crisis, that addiction is a treatable disease, and that recovery is possible. **Recovery Month** highlights the benefits of treatment for not only the affected individual, but for their family, friends, workplace, and society as a whole. Educating the public reduces the stigma associated with addiction and treatment. Accurate knowledge of the disease helps people to understand the importance of supporting treatment programs, those who work within the treatment field, and those in need of treatment

Source: <http://www.recoverymonth.gov/>



World Mental Health Day

October 10, 2010

World Mental Health Day raises public awareness about mental health issues. The day promotes more open discussion of illnesses, and investments in prevention and treatment services. World Health Organization statistics for 2002 show that 154 million people globally suffer from depression, only one form of mental illness.

Mental, neurological and behavioural disorders are common in all countries around the world, causing immense suffering and staggering economic and social costs. People with disorders are often subjected to social isolation, poor quality of life and higher death rates.

For more information, please visit the website: www.wfmh.org

World Suicide Prevention Day

September 10, 2010

On World Suicide Prevention Day, September 10, 2010, the theme **“Many Faces, Many Places: Suicide Prevention Across the World”** offers us a broad perspective for suicide prevention. There are significant differences in the profiles and circumstances of suicidal individuals in different parts of the world. At the same time, it is clear that the experience of connectedness is important in the mental health of all people.

The World Health Organization has noted that not all suicides can be prevented, but a majority can. Developing and implementing national strategies as well as specific local interventions can lower rates of suicides in diverse populations. Successful approaches to suicide prevention have included:

- Restricting access to means;
- Establishing community prevention programs;
- Establishing guidelines for media reporting;
- Engaging with frontline professionals through gate keeper training programs.

For examples of suicide prevention programs and for more information on World Suicide Prevention Day, Please visit the website: <http://www.iasp.info/wspd/index.php>



Mental Health 101: Schizophrenia

At first glance, schizophrenia may seem like a great puzzle. Its causes are still uncertain; its symptoms variable.

Striking most often in the 16 - 30 year age group, affecting an estimated 1 person in 100, it is youth's greatest disability.

But if it is a puzzle, it's one that is slowly being solved. New pieces are continually falling into place. Consider what we have learned about its symptoms.

Symptoms of schizophrenia

Schizophrenia often starts slowly. When the symptoms first appear, usually in adolescence or early adulthood, they may seem more bewildering than serious.

In the early stages, people with schizophrenia may find themselves losing the ability to relax, concentrate or sleep. They may start to shut long-time friends out of their lives. Work or school begins to suffer; so does their personal appearance. During this time, there may be one or more episodes where they talk in ways that may be difficult to understand and/or start having unusual perceptions.

Once it has taken hold, schizophrenia tends to appear in cycles of remission and relapse.

When in remission, a person with schizophrenia may seem relatively unaffected and can more or less function in society. During relapse, however, it is a different story. People with schizophrenia may experience one or all of these main conditions:

- Delusions and/or hallucinations
- Lack of motivation
- Social withdrawal
- Thought disorders

Delusions are false beliefs that have no basis in reality. People with schizophrenia may think, for example, that someone is spying on them, listening to their thoughts, or placing thoughts in their minds.

Hallucinations most often consist of hearing voices that comment on behavior, are insulting or give commands. Less often, people with schizophrenia may see or feel things that aren't there.

Disorganized thinking makes some people with schizophrenia feel mixed up. In conversation, they may jump randomly from one unrelated topic to another. Depression and anxiety frequently accompany these feelings.

The symptoms of schizophrenia vary greatly from person to person, from mild to severe. A specialist is needed to make the diagnosis, especially because there are no diagnostic tests.

Treatments

A number of medications have been found that help bring biochemical imbalances in many people with schizophrenia closer to normal.

These medications can help a great deal in lessening hallucinations and delusions, and in helping maintain coherent thoughts. But, they usually have serious side effects contributing to non-compliance with medication and relapse.

Psychotherapy for individuals, groups or families is possible, and can mean a lot to people with schizophrenia and their loved ones. Psychotherapy can offer understanding, reassurance, insights and suggestions for handling the emotional aspects of the disorder and providing less stressful living situations.

Families can be a big help. Working closely with health care professionals, family members can learn about the illness. Families can also provide useful information to the health care professionals. They can find ways to support people with schizophrenia and provide a nurturing environment that encourages communication.

To the future

With proper and improved medication, extensive community support (especially in housing) and skilled psychotherapy, many people with schizophrenia will be able to function in the community. With these resources to draw from, many people with schizophrenia could live independently, work enjoy family and friends. The search for a cure continues with hopes for success increasing every day.

Source: http://www.cmha.ca/bins/content_page.asp?cid=3-100

Addiction 101: Caffeine

What is it?

Caffeine is a stimulant that speeds up your central nervous system, and is the world's most popular drug. Caffeine occurs naturally in products such as coffee, tea, chocolate and cola soft drinks and is added to a variety of prescription and over-the-counter medications, including cough, cold and pain remedies.

Where does caffeine come from?

Both words, caffeine and coffee are derived from the Arabic word *qahveh* (pronounced "kahveh" in Turkish). The origins of the words reflect the spread of coffee into Europe via Arabic and Turkey from northeast Africa, where coffee trees were cultivated in the 6th century. Coffee began to be popular in Europe in the 17th century. By the 18th century, plantations had been established in Indonesia and the West Indies, and by the 20th century, coffee had become the biggest cash crop on earth.

Caffeine was first isolated from coffee in 1819. It is also found in tea; in cacao pods, and hence in cocoa and chocolate products; in kola nuts, used in the preparation of cola drinks; in the ilex plant, from whose leaves the popular South American beverage *yerba mate* is prepared; and in guarana seeds, an ingredient in some soft drinks.

What does caffeine look like?

In its pure form, caffeine is a white, bitter-tasting powder.

Who uses caffeine?

Caffeine is the most widely used psychoactive substance in the world. In North America, more than 80% of adults regularly consume caffeine. Worldwide per-capita caffeine consumption (including that of children) is estimated to be 70 mg per day, equivalent to approximately 1 cup of coffee.

In Canada, coffee consumption increased from 96 litres per person in 1990 to 101 litres per person in 2000. Consumption of tea has also increased, up from 42 litres per person in 1990 to 70 litres per person in 2000.

How does caffeine make you feel?

Caffeine stimulates the brain, elevates the mood and postpones fatigue. It also enhances performance at simple intellectual tasks, and at physical work that involves endurance, but not fine motor coordination. (Caffeine-caused tremor can reduce hand steadiness). If you consume caffeine before bedtime, you will likely take longer to get to sleep, sleep for a shorter time and sleep less deeply.

Contrary to popular belief, drinking coffee will not help you to "sober up" if you've had too much alcohol. The caffeine will make you more alert, but your coordination and concentration will still be impaired.

Too much caffeine can give you a headache, upset your stomach, make you nervous and jittery and leave you unable to sleep. Some people feel these effects even with a very small amount. Larger doses of caffeine, especially when consumed by people who don't usually take caffeine, can cause rapid heartbeat, convulsions and even delirium.

How long does the feeling last?

When taken in beverage form, caffeine begins to take effect within 5 minutes, and reaches its peak effect in about 30 minutes. It takes about 4 hours for half of a given dose of caffeine to be metabolized by the body. Normally, almost all ingested caffeine is metabolized, and there is no day-to-day accumulation of the drug in the body.

Is caffeine dangerous?

Moderate amounts of caffeine - up to

about 300 mg a day (3 - 4 cups of coffee) - will rarely harm an otherwise healthy adult.

But if you regularly drink more than 6 - 8 cups of coffee - or your daily dose of caffeine, from various caffeine-containing products, is higher than 600 mg - you may have trouble sleeping, feel anxious, restless and depressed and develop stomach ulcers. Higher amounts can cause extreme agitation, tremors and a very rapid and irregular heartbeat.

Is caffeine addictive?

Regular use of caffeine can make you physically dependent on caffeine. That means that if you abruptly stop using caffeine-containing products, you may feel adgy and tired and have a bad headache. These symptoms usually appear 18 - 24 hours after the last use of caffeine, and gradually fade over the following week.

What are the long-term effects of taking caffeine?

Healthy adults do not appear to suffer any long-term effects from consuming moderate doses of caffeine daily. Larger daily doses (in some individuals as little as 250 mg, or 3 cups of coffee daily) may produce restlessness, nervousness, insomnia, flushed face, increased urination, muscle twitching, stomach upset and agitation.

Caffeine use appears to be associated with irregular heartbeat and may raise cholesterol levels, but there is no firm evidence that caffeine causes heart disease. Although caffeine is suspected to be a cause of cancer, the evidence is contradictory and does not allow a clear conclusion. Some studies indicate that caffeine can cause changes in the cells of the body and in the way these cells reproduce themselves.

Source: http://www.camh.net/about_addiction_mental_health/drug_and_addiction_information/caffeine_dyk.html

Mental Health Works

Work-Life Balance is a state of well-being that a person can reach or can set as a goal in order to allow them to manage effectively multiple responsibilities at work, at home and in their community. Work-Life Balance is different for everyone and it supports physical, emotional, family and community health and does so without grief, stress or negative impact.

Work-Life Conflict occurs when individuals, at any level within an organization, find their roles within the workplace and outside it are overwhelming to them or interfering with one another.

To help employees achieve/maintain a sense of work/life balance, Health Canada suggests that employees:

- Identify ways of reducing employee workloads. Special attention needs to be given to reducing the workloads of managers and professional in all sectors. Employees should be asked for suggestions - they often are in the best position to identify ways of streamlining work.
- Reduce reliance on both paid and unpaid overtime by employees.
- Recognize and reward overtime work.
- Reduce job-related travel time for employees.
- Make alternative work arrangements more widely available within the organization. These might include flex-time or the opportunity to say “no” when asked to work overtime. Saying “no” should not be a career-limiting move. Employees should not have to choose between having a family and career advancement.
- Examine work expectations, rewards and benefits through a “life-cycle” lens (i.e. what employees are able to do and motivated to do and what rewards and benefits they desire will change with each life-cycle stage).

Source: <http://wmhp.cmhaontario.ca/workplace-mental-health-core-concepts-issues/issues-in-the-workplace-that-affect-employee-mental-health/work-life-balance>

Employers: Recognizing Mental Health Difficulties

Being aware of the signs that suggest someone might be experiencing a mental illness is important. Mental illness includes a broad range of symptoms and behaviours, and it is not easy to determine whether someone is mentally ill.

Warning Signs that can indicate that a person is experiencing mental health difficulties (It is important to emphasize that people behaving in these ways may be simply having a bad day or week, or may be working through a particularly difficult time in their lives that is temporary):

- Consistent late arrivals or frequent absences
- Lack of cooperation or a general inability to work with colleagues
- Decreased productivity
- Increased accidents or safety problems
- Frequent complaints of fatigue or unexplained pains
- Difficulty concentrating, making decisions, or remembering things
- Making excuses for missed deadlines or poor work
- Decreased interest or involvement in one’s work
- Working excessive overtime over a prolonged period of time
- Expressions of strange or grandiose ideas
- Displays of anger or blaming of others

Source: <http://www.mentalhealthworks.ca/employers/faq/question2.asp>

Employees: Talking to Your Employer

The following link will take you to a web page that goes through step-by-step the preparation for talking with your employer. <http://www.mentalhealthworks.ca/employees/faq/question3.asp#preparing>

Crisis Services

Addiction and Mental Health Services of Simcoe County's Crisis Services offers individualized support to assist the client in the resolution of their emotional or personal crisis. They are an interdisciplinary team of mental health professionals who provide 24 hour services to those in crisis. Telephone, mobile and residential crisis services available.

Services Offered:

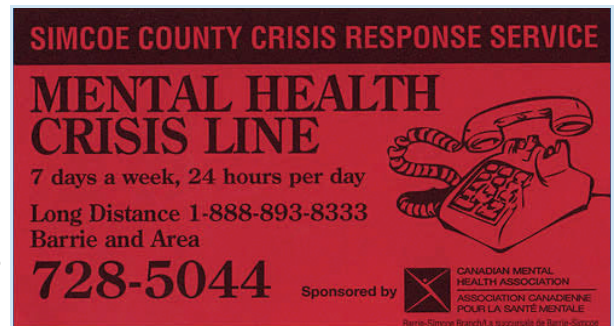
- 24 hour crisis line for Simcoe County/Muskoka
- Mobile response available in Barrie from 11 am to 11 pm
- Crisis response for children and adolescents 16 years and under can be arranged through Crisis Services and will be provided by youth crisis workers
- 5 non medical crisis beds in Barrie for brief stays, available to people 16 years of age or older throughout Simcoe County to help individuals to stabilize and connect with resources during a crisis
- Follow up support upon discharge

Who should contact Crisis Services:

Individuals in Simcoe County/Muskoka experiencing a personal crisis. Family, friends or professionals concerned about an individual.

Hours: 24 hour crisis line

To Access Service: 705-728-5044 or toll free 1-888-893-8333



SIMCOE COUNTY CRISIS RESPONSE SERVICE
MENTAL HEALTH CRISIS LINE
7 days a week, 24 hours per day
Long Distance 1-888-893-8333
Barrie and Area
728-5044
Sponsored by CANADIAN MENTAL HEALTH ASSOCIATION
ASSOCIATION CANADIENNE POUR LA SANTE MENTALE
Barrie Simcoe District / Le district de Barrie-Simcoe



Family Mental Health Initiative Fundraising Program with Bradford Greenhouses Garden Gallery

When shopping at Bradford Greenhouses Garden Gallery, please say "Family Mental Health Initiative" to the cashier **BEFORE** they ring in your purchase. 5% of the value of the sale will go directly to the Initiative. This fundraising program is available at both the Barrie and Bradford locations and continues until October 15, 2010. Your support is greatly appreciated. Thank you.



Family Support Groups



Family Mental Health
Initiative

Barrie Family & Friends Mental Health Support Group:

Date: Second Tuesday of every month
Time: 6:00pm – 8:00pm
Location: 350 Grove St., East in Barrie (Grace United Church)

***There will be no meeting in January 2011**

*This group is supported by the Family Mental Health Initiative of Simcoe County

Barrie Parent Support Group

Date: Third Tuesday of every month
Time: 7:00pm - 9:00pm
Location: 211 Marsellus Dr., Barrie (Holy United Church)

***There will be no meeting in January 2011**

*This group is supported by the Canadian Mental Health Association, Simcoe County Branch and the Family Mental Health Initiative of Simcoe County and Holly co.

The Barrie Chapter of the Schizophrenia Society of Ontario Family Support Group:

Date: Last Thursday of every month - except Wednesday, March 31, 2010 -

***There will be no meeting in December 2010**

Time: 7:00pm – 9:00pm
Location: 60 Worsley St., (Barrie Public Library - Georgian International Room)

*This group is supported by the Schizophrenia Society of Ontario

Parents for Children's Mental Health - Simcoe County Chapter:

Date: Last Thursday of every month
Time: 5:30pm – 7:00pm
Location: 165 Ferris Lane in Barrie (The Common Roof)

*This group is supported by the Parents for Children's Mental Health

Midland Family & Friends Mental Health Support Circle:

Date: First Thursday of every month - group will start on October 1, 2009
Time: 7:00pm – 9:00pm
Location: 334 King St. (HERO Centre - Our Place Social Club - side door of building)

*This group is supported by the Family Mental Health Initiative of Simcoe County and the Mental Health Centre Penetanguishene

Midland Parents Support Group

Date: Second Wednesday of every month
Time: 7:00pm - 9:00pm
Location: 9292 County Road 93, Midland (Real Canadian Superstore - Community Room)

*This group is supported by the Canadian Mental Health Association, Simcoe County Branch and the Family Mental Health Initiative of Simcoe County

Collingwood Family Drop-In

Date: Last Thursday of every month
Time: 10am - 12pm
Location: 12 Erie Street in Collingwood (Consumer Survivor Project)

***There will be no meeting in December 2010**

*This group is supported by the Family Mental Health Initiative of Simcoe County

Orillia Family Support Group

Date: Third Wednesday of every month
Time: 6:30pm - 8:30pm
Location: 76 Nottawasaga Street in Orillia

*This group is supported by the Canadian Mental Health Association, Simcoe County branch and the Family Mental Health Initiative of Simcoe County

Survivors of Suicide Support Program

Is a support group for persons experiencing the death of a loved one through suicide. The program consists of 8-10 week sessions, facilitated by trained volunteers. Topics covered include informal conversations and a sharing of experiences in a safe environment. In-depth counseling is not part of this program. However, someone can meet with you 1 on 1; or through a Phone Buddy system you will be connected with a person who has been through the program. Talking and connecting with others who understand can be helpful. For more information or to enroll please contact: Bernadette at 705-326-9941 or Dianne at 705-327-5970.

VISIT US
ON THE WEB!
www.fmhi.ca

A close-up photograph of a person's hand resting on a computer mouse, with a keyboard visible in the background.



Addiction & Mental Health

Resource List - Simcoe County & Muskoka

Mental Health Crisis Line – Simcoe County/Muskoka
Contact 705-728-5044 or 1-888-893-8333

Family Mental Health Initiative of Simcoe County
Contact 705-725-0363 or 1-800-324-3252

Addictions & Mental Health Services of Simcoe County
Contact 705-726-5033

Canadian Mental Health Association, York Region & South Simcoe
Contact 1-866-208-5509 Ext. 3221

Muskoka-Parry Sound Community Mental Health Services
Contact 1-800-245-5036

Mental Health Centre, Penetanguishene (MHCP)
Contact 705-549-3181

Outpatient Services – MHCP
Contact 705-526-0567

Patient/Client & Family Council—MHCP
Contact 705-549-3181 ext. 3181

Georgianwood Concurrent Disorders Program – MHCP
Contact 705-549-3181 ext. 2122

Community Mental Health Services – Collingwood
Contact 705-444-6600

Orillia Soldiers' Memorial Hospital – Mental Health & Addiction Program
Contact 705-327-9122

Royal Victoria Hospital – Mental Health & Addiction Program
Contact 705-728-9802 ext 47234

RVH – Withdrawal Management Services
Contact 705-728-9090 ext. 24100

RVH – Mental Health Support Services
Contact 705-728-9090 ext. 24300

Simcoe Outreach Services
Contact 705-726-7062

Seven South Street Treatment Centre
Contact 705-325-3566

Addiction Outreach Muskoka Parry Sound
Contact 705-645-1311

Wendat Community Programs
Contact 705-526-1305

Enaahitig Healing Lodge & Learning Centre
Contact 705-534-3724

B'saanibamaadsiwin – Native Mental Health (Muskoka)
Contact 705-746-2512

Consumer/Survivor Project in Collingwood
Contact 705-444-1844

Council of Consumer/Survivor & Family Initiative (Muskoka)

Contact 1-800-245-5036

Patient/Client & Family Council - MHCP
Contact 705-549-3181 ext. 2180

Mary McGill Community Mental Health Centre (South Simcoe)
Contact 705-435-6281

My Friend's Place (South Simcoe)
Contact 705-435-0054

Catholic Family Services - North Simcoe
Contact 705-526-9397

Catholic Family Service of Simcoe County
Contact 705-726-2503

New Path Youth & Family Services
Contact 705-733-2654

Kinark Child & Family Services
Contact 705-726-8861

Orillia Depression, Anxiety and Manic Depression Self Help Group (DAMD): meets at Doolittle-Carson Recreation Centre (57 Neywash St., Orillia - side entrance) from 7:30pm—9:30pm the 2nd & 4th Tuesday each month. Contact: 705-325-2201 ext 3992 (leave a message). Family members welcome to attend.

Freedom From Fear/Obsessive-Compulsive Disorder Self-Help Group: meets at 151 Essa Rd., Suite 202 in Barrie starting at 5:00pm on the 3rd Wednesday each month. You do not need to register, you can just show up. Family members welcome to attend. Contact 705-726-5033 ext. 401

CMHA/SOS - Intuitive Drum Circle: meets at 15 Bradford St., in Barrie - in the RSVP Clubhouse. The drum circle starts at 6:30pm on the 3rd Thursday of each month. Instruments and refreshments provided. For more information please contact Anne Marie at 728-9090 ext. 24300. Family members & friends are welcome. Community Drum Circles...feel the rhythm, catch the beat!

The Lending Library

If you are looking to learn more about a specific illness or topic, FMHI has many books, videos, audio cassettes, that family members, supporters and friends can loan out from the library. The library is located at **151 Essa Rd., in Barrie (2nd Floor).**

Books are loaned out for 3 weeks at a time; DVDs, cassettes, videos, CDs are loaned out for 1 week at a time.

Come on in to have a look around, the library also has magazines, brochures and flyers of events, services and programs.

The Lending Library is open to everyone.





Resource Kits Order Form

- Family Resource Kit** - The kit contains brochures from mental health agencies in Simcoe County; tip sheets, as well as other useful information on specific mental illnesses.
- Native Resource Kit** - The kit contains information and brochures from aboriginal agencies in Simcoe County; as well as a resource list on other friendship centers, native treatment centers, and bands throughout Ontario and Canada; information on specific mental illnesses is also included.
- Concurrent Disorders Resource Kit** - The kit (Mental Health & Addiction) contains information about specific mental health and addiction agencies in Simcoe County as well as fact sheets on concurrent disorders.
- Dual Diagnosis Resource Kit** - The kit (Mental Health & Developmental Delay) contains information about specific mental health and developmental delayed agencies in Simcoe County as well as fact sheets on dual diagnosis.
- Youth Resource Kit** - The kit contains fact sheets on various mental illnesses and brochures from local social services agencies. This kit has information to help young people understand what is a mental illness, written to their age, when they have a parent, sibling or friend who is mentally ill. The kit also provides information for parents whose youth is experiencing mental health difficulties.
- Women's Resource Kit** - The kit contains mental health and addictions information specific to women; including fact sheets, agency brochures. The kit is also for people wanting to learn more about women's mental health and addictions.
- Older Person's Resource Kit** - The kit contains fact sheets on topics of mental health and addictions regarding the older person, and agency brochures.
- Early Psychosis Resource Kit** - The kit contains information on the signs and symptoms of psychosis; fact sheets written for youth with a sibling experiencing a first episode and information on recovery.
- Addiction Resource Kit** - This kit contains fact sheets and information guides for understanding addiction.
- Problem Gambling Resource Kit** - This kit contains articles, brochures and information guides for understanding problem gambling.
- Suicide Resource Kit** - Contains fact sheets on preventing suicide, youth and suicide, and grieving.

ONE KIT OF EACH PER ORDER - KITS ARE AVAILABLE AT NO COST

Name: _____
 Address: _____
 City/Town: _____ Province: _____ Postal Code: _____
 Phone: _____



Newsletter Order Form

- Please **UPDATE** my confidential mailing so that I may receive the **FRENCH VERSION** of this family newsletter.

If you would like to receive our quarterly Newsletter for free, please fill in your mailing/email information and send back to the Family Mental Health Initiative of Simcoe County. You will receive the next issue of the newsletter upon receiving your information. Thank you for your support and interest in this family newsletter

- I prefer to have the newsletter sent to my email. Email: _____
 English Version French Version

- Please **ADD** my name to FMHI's Confidential Mailing List, so that I may receive this family newsletter
 English Version French Version

Name: _____
 Address: _____ City/Town: _____
 Province: _____ Postal Code: _____ Phone: _____



Family Resource Series Order Form

- Family Members, Supporters and Friends** - This issue focuses on Coping with Anxiety; Signs of Caregiver Stress; Understanding Caregiver Stress; Family Members, Supporter, and Friends Bill of Rights; Managing Caregiver Stress; Support and Education; Family Mental Health Initiative of Simcoe County; and Coping Strategies.
- Coping With Crisis** - This issue focuses on what is a Crisis; Signs of a Possible Crisis; Steps to Preventing a Crisis; Crisis Tool Box; Preparing for a Crisis; Tips for Dealing with a Potentially Life-Threatening Crisis Situation; Things to Remember about the Crisis Line; Openers for Calling the Crisis Line; and Crisis and the Risk of Suicide.
- Understanding Diagnoses** - This issue focuses on Dealing with the Diagnosis; Schizophrenia; Depression; Bipolar Disorder; Anxiety Disorders; and Eating Disorders.
- Older Adults** - This issue focuses on The Diagnosis of Alzheimer's Disease; Do's & Don't When Communicating with Someone with Alzheimer's Disease; Understanding Delirium; Understanding Depression in Older Adults; and the Wandering Person Registry.

ONE OF EACH TOPIC PER ORDER - SERIES TOPICS ARE AVAILABLE AT NO COST

- I prefer to have my topic selections sent to my email.

Email: _____

- I prefer to have my topic selections sent to my home address

Name: _____

Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone: _____

Family Mental Health Initiative of Simcoe County
151 Essa Road, Suite 202 Barrie, Ontario L4N 3L2
Ph: 705-725-0363 Toll-free: 1-800-324-3252 Fax: 705-725-5496

**AS OTHER TOPICS BECOME AVAILABLE IN THE SERIES,
THE ORDER FORM WILL BE UPDATED**





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 Website: www.fmhi.ca



Points for Parents Order Form

- Youth and Bullying** - Points on topics of Reasons why People are Bullies; Ways to Avoid a Bully; Cyberbullying; Physical Bullying; Verbal Bullying; Relationship Bullying.
- Youth and Suicide** - Points on topics of Risk Factors; Facts on Youth Suicide; Protective Factors.
- Youth and Self-Harm** - Points on topics of Warning Signs; What is Self-Harm; What Self-Harm is Not; How not to help; How to help; Reasons Youth Self-Harm.
- Youth and Self-Esteem** - Points on topics of How parents Can help; Compliments and Praise for Effort; Positive Self-Esteem Means.
- Youth and Mental Illness** - Points on topics of Anxiety; Depression; Obsessive Compulsive Disorder; Signs of Mental Illness; Panic Disorder; Social Anxiety; Schizophrenia; Anorexia Nervosa; Bulimia Nervosa.
- Youth and Addiction** - Points on topics of Signs of Drug and Alcohol Use Problem; Talking to Youth About Substance Use; Why People Use Drugs or Alcohol.
- Youth and Anger** - Points on topics of Unhealthy Ways to Deal with Anger; It is time to Admit that Anger is a Problem When...; Healthy Ways to Deal with Anger
- Youth and Early Identification and Intervention** - Points on topics of Signs of Early On-Set of Depression; Early Signs (Prodromal Phase) of Psychosis; How I can Help; Benefits of Early Intervention; Signs of an Eating Disorder; Signs of Anxiety; Symptoms of Attention Deficit Hyperactivity Disorder

POINTS FOR PARENTS ARE AVAILABLE AT NO COST

- I prefer to have my topic selections sent to my email. Email: _____
- I prefer to have my topic selections sent to my home address
 Name: _____
 Address: _____
 City/Town: _____ Province: _____ Postal Code: _____
 Phone: _____



Change of Address & Email Form

NEW ADDRESS:

Old Address:

Name: _____
 Address: _____

 City/Town: _____
 Province: _____ Postal Code: _____
 New Email: _____

Name: _____
 Address: _____

 City/Town: _____
 Province: _____ Postal Code: _____
 Old Email: _____