



**Family Mental Health  
Initiative**



# FAMILY MATTERS

**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.

## *from the desk of the coordinator*

In this edition of the "Family Matters" newsletter I wanted to include articles on topics which have come up several times as topics at the family support groups throughout Simcoe County. Many family members, supporters and friends continue to say that stress, burnout, and isolation are issues they face. Many families are looking for coping ideas as well as how to re-create and maintain healthy, supportive relationships with their relative/friend experiencing mental health and/or addiction difficulties. In this edition you will read articles on Setting Healthy Boundaries, Coping Skills, and excerpts from a book in the lending library on the Stages of Healing for family members and friends. If you are a family member/friend reading this edition for the first time or a you have been receiving this newsletter for awhile now and are looking for support, the family groups are a safe, supportive and confidential place for you to meet other family members/friends and talk from your perspective. The groups are not counseling but rather a supportive place to build your network of support and talk. If you have questions about a group or would like to connect with someone before attending a group please feel free to contact me anytime. The list of family support groups are found on page 9 of this edition.

I am pleased to inform you that the next two topics in the resource series are ready, "Understanding Diagnoses" and "Older Adults." You may find the order form for these resource topics on page 12 of this edition.

Other resources available for families are the Points for Points sheets. The series consists of 8 topics. The order form for the Point sheets are found on page 13 of this edition.

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

**March 2010**

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### Mental Health Crisis Line

**1-888-893-8333**

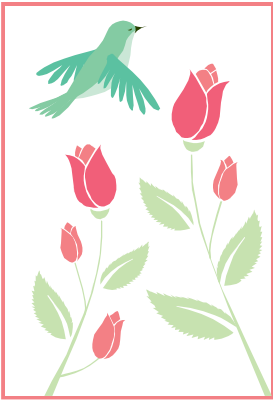
FMHI is sponsored by the Canadian Mental Health Association, Simcoe County Branch and funded by the North Simcoe Muskoka Local Health Integration Network

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.

#### 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](http://www.fmhi.ca)



# Setting Healthy Boundaries

Boundaries emerge as individuals learn to value, trust and listen to themselves. When a person believes they have the right to have what they want and need in life, then they will be able to practice what is called self-care behaviours in all area of their lives. Setting boundaries is not selfish but helps people achieve self-love, inner joy and self-fulfillment.

Boundaries are the key to loving relationships with closeness and intimacy.

1. Learn to say “NO.” Especially when busy, tired or stressed. It is alright to not want to participate in anything you clearly do not want to do.
2. Do not feel you must control everything around you or make things happen. The truth is that we have no control over other people, places and things.
3. Don’t rearrange your plans or day to accommodate others except in a true emergency.
4. Don’t get involved in other people chaos. Doing this stops you from paying attention to your own life.
5. Stop feeling responsible for other people’s behaviours.
6. Make it clear to others that you do not accept abusive treatment whether it is physical, emotional or verbal.
7. Always take a small part of your day to meditate, relax or do something nice for yourself.
8. Expect your family members to be involved in sharing household responsibilities.
9. Delegate tasks, make lists, assign chores or whatever it takes to get cooperation and never complete anyone’s chores or pick up the slack!
10. Tell yourself everyday that you deserve the very best in life and no one else but you are responsible for making that happen.



Source: By Marylou Johnston, RN BScN, MA



# Coping Skills for Families

## **Accept your feelings**

Despite the different symptoms and types of mental illnesses, many families who have a loved one with mental illness, share similar experiences. You may find yourself denying the warning signs, worrying what other people will think because of the stigma, or wondering what caused your loved one to become ill. Accept that these feelings are normal and common among families going through similar situations. Find out all you can about your loved one's illness by reading and talking with mental health professionals. Share what you have learned with others.

## **Handling unusual behaviour**

The outward signs of a mental illness are often behavioral. Individuals may be extremely quiet or withdrawn. Conversely, he or she may burst into tears or have outbursts of anger. Even after treatment has started, individuals with a mental illness can exhibit anti-social behaviours. When in public, these behaviours can be disruptive and difficult to accept. The next time you and your family member visit your doctor or mental health professional, discuss these behaviors and develop a strategy for coping.

## **Establishing a support network**

Whenever possible, seek support from friends and family members. If you feel you cannot discuss your situation with friends or other family members, find a self-help or support group. These groups provide an opportunity for you to talk to other people who are experiencing the same type of problem. They can listen and offer valuable advice.

## **Seeking counseling**

Therapy can be beneficial for both the individual with mental illness and other family members. A mental health professional can suggest ways to cope and better understand your loved one's illness.

## **Taking time out**

It is common for the person with the mental illness to become the focus of family life. When this happens, other members of the family may feel ignored or resentful. Some may find it difficult to pursue their own interests. It is important as the caregiver to schedule time for yourself. This is a way to prevent becoming frustrated or angry. It will also help keep things in perspective and you may have more patience and compassion for coping or helping your loved one. Only when you are physically and emotionally healthy can you help others.

## **Let go of the guilt.**

Remember that no family is perfect. Whatever you did, or did not do; you did not cause your family member's illness.

## **Get the facts**

Continue to educate yourself about your family member's illness.

## **Don't forget about your own health**

Eat right, exercise, and stay healthy. Find a new hobby for yourself and the person who is ill. Remember to laugh, take walks and nurture yourself.

## **Fresh thinking**

Try thinking in terms of "brain" illness, instead of mental illness. This can be helpful in dealing with both external and internal stigma. If you feel that you are "going in circles" take a break. Try to be creative if the old approach is no longer working. Stay optimistic and take care of yourself.

## **Focus on the positive**

We are all stronger than we think. Sustain confidence, courage and sound perspective.

Source: <http://www.arafmi.asn.au/arafmi/copingskills.asp>, <http://www.fameforfamilies.com/coping.php>, <http://www.nmha.org/go/information/get-info/mi-and-the-family/recognizing-warning-signs>



# Mental Health 101: Bipolar Disorder

We all experience changes in mood. Times of sadness or disappointment are natural reactions to the difficulties that occur in our lives. The loss of a loved one, problems at work or a deteriorating relationship can cause us to feel depressed. Similarly, a great success or relief from a problem makes us feel happy and content. Our moods tend to be varied and shifting, but generally we feel as though we have some control over them. However, for people with mood disorders like depression and bipolar disorder, that sense of control is missing and that causes distress. Anyone who has experienced depression or a manic episode can readily tell you the difference between those illnesses and their own normal feelings of sadness or happiness. Severe or prolonged depression is an illness that affects not only a person's emotions, but also physical health, relationships and behaviour. At any given time, almost 3 million Canadians have serious depression. It is about twice as common in women.

Bipolar disorder, also called manic depression, is an illness in which there are periods of serious depression, followed by episodes of markedly elevated or irritable moods or "highs" (in the absence of drugs or alcohol). These mood swings are not necessarily related to events in the person's life. Bipolar disorder affects approximately 1% of the population; it typically starts in late adolescence or early adulthood and affects men and women equally.

Depression and bipolar disorder can be treated. There is good reason for hope. By learning more about these conditions, you can help remove the stigma that prevents many people from seeking help.

People with bipolar disorder, or manic depressive disorder, experience alternating mood swings, from emotional highs (mania) to lows (depression). The condition can range from mild to severe. It is not known what causes bipolar disorder. Research suggests that people with the condition have a genetic disposition. It tends to run in families. Drug abuse and stressful or traumatic events may contribute to or trigger episodes.

## **Symptoms of mania include:**

- Feelings of euphoria, extreme optimism, exaggerated self-esteem
- Rapid speech, racing thoughts
- Decreased need for sleep
- Extreme irritability
- Impulsive and potentially reckless behaviour
- Symptoms of the depression phase are the same as in major depression, described above.



## **Treatment Is Available**

Depression and bipolar disorder are treatable. Learning to recognize the signs and triggers enables people to work with their doctors, other health professionals, family and friends to prevent recurrences from becoming severe. The great majority of depressed people respond to treatment and nearly all who seek treatment will get some relief from their symptoms. Both medication and some forms of counseling or psychotherapy have been demonstrated to be effective. Bipolar disorder is mainly treated with medication and psychotherapy. Medication helps to stabilize moods, while therapy helps people detect patterns and triggers and develop strategies for managing stress. Sometimes, electroconvulsive therapy, or ECT, is used.

## **What Can I Do?**

Many people do not seek help for depression or bipolar disorder, sometimes because their symptoms prevent them from recognizing the seriousness of their situation. It can also result from the stigma that surrounds both these conditions, making people feel like they are weak or at fault. It is important to know that depression and bipolar disorder are treatable. Friends and family can be supportive by learning all they can about the condition affecting their loved one. You can learn more from support groups and community health associations.

Source:[http://www.ontario.cmha.ca/fact\\_sheets.asp?CID=1578](http://www.ontario.cmha.ca/fact_sheets.asp?CID=1578)

# New Developments at Canadian Mental Health Association, Simcoe County and Simcoe Outreach Services - Addiction Centre

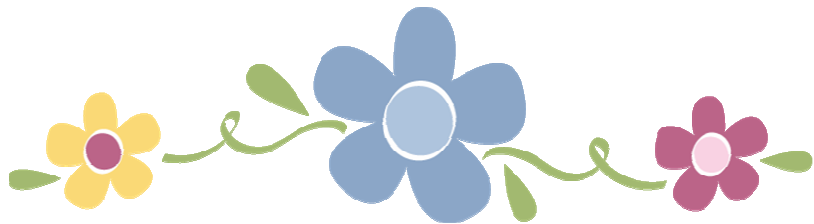
Simcoe Outreach Services and the Canadian Mental Health Association, Simcoe County Branch are very pleased to announce that effective December 1, 2009 we have amalgamated our organizations into one legal entity. While our legal name is Canadian Mental Health Association, Simcoe County Branch our operational name is **Simcoe County Addiction and Mental Health Services**.

This decision was made to enhance services to clients experiencing one or both addiction and mental health issues. Some of the benefits to clients include:

- Implementation of central intake services where first come and most in need are served first
- An increase in client resources through shared resources
- Increase services to addiction services and on call support 24 hours/365 days
- Walk-in support and quick response to all clients
- Increased assessment capacity to individuals experiencing Concurrent Disorders
- Greater flexibility to change and adapt services to the needs of clients
- A more holistic continuum of care and support
- Staff who are all cross trained in both addiction and mental health so that clients can be supported by one person

Fortunately the amalgamation has been a smooth transition as both agencies have strong shared values and a philosophy base of recovery and harm reduction. This is a great starting point and will assist to keep focused on the individuals we support.

Nancy Roxborough  
Chief Executive Officer



# Addiction 101: Alcohol

## What is it?

Alcohol is a “depressant” drug. That means it slows down the parts of your brain that affect your thinking and behaviour, as well as your breathing and heart rate.

## Where does alcohol come from?

Alcohol is produced by fermenting, and sometimes distilling, various fruits, vegetables or grains. Mentioned beverages include beer and wine, which have a maximum alcohol content of about 15 per cent. Distilled beverages, often called “hard liquor” or “spirits,” such as rum, whiskey and vodka, have a higher alcohol content.

## Who uses alcohol?

Research reports that alcohol use among Ontarians age 18 and older was 87 per cent in 1992 and 79 per cent in 1999. Even though our laws restrict alcohol use to those 19 years of age and over, a 2001 survey of Ontario students in grades 7 to OAC found that 66 per cent reported using alcohol in the past year, and 27 per cent had been drunk at least once in the past four weeks.

In general, men drink more than women do, and are almost twice as likely to have drinking problems.

## How does alcohol make you feel?

The way alcohol affects you depends on many factors, including:

- Your age, sex and body weight
- How sensitive you are to alcohol
- The type and amount of food in your stomach
- How much and how often you drink
- How long you’ve been drinking
- The environment you’re in
- How you expect the alcohol to make you feel
- Whether you’ve taken any other drugs (illicit, prescriptions, over-the-counter or herbal).

For many people, a single drink of alcohol releases tension and reduces inhibition, making them feel more at ease and outgoing. Some people feel happy or excited when the drink, while others become depressed or hostile.

Women are generally more sensitive to the effects of alcohol than men, and all adults become increasingly sensitive to alcohol’s effects as they age. When someone is more sensitive, it takes less alcohol to cause intoxication, and more time for the body to eliminate the alcohol consumed.

Early signs of alcohol intoxication include flushed skin, impaired judgment and reduced inhibition. Continued drinking increases these effects, and causes other effects, such as impaired attention, reduced muscle control, slowed reflexes, staggering gait, slurred speech and double or blurred vision. A severely intoxicated person may “black out,” and have no memory of what was said or done while drinking. Effects of extreme intoxication include inability to stand, vomiting, stupor, coma and death.

## How long does the feeling last?

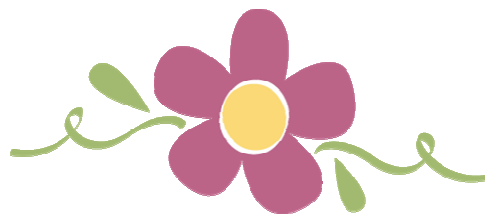
It takes about one hour for the liver of a person weighing 70 kg (154 lbs.) to process and eliminate eight to 10 grams of alcohol., or about two-thirds of the alcohol contained in a standard drink. This rate is constant, no matter how much alcohol has been consumed, or what food or non-alcoholic beverages are taken.

Drinking heavily usually results in a “hangover,” beginning eight to 12 hours after the last drink. Symptoms can include headache, nausea, diarrhea, shakiness and vomiting. A hangover is caused in part by acetaldehyde, a toxic chemical that is created as alcohol is processed by your liver. Other causes include dehydration and changes in hormone levels.

## Is alcohol dangerous?

Yes, alcohol can be dangerous in a number of ways.

The impact of alcohol's effect on judgment, behaviour, attitude and reflexes can range from embarrassment, to unwanted or high-risk sexual contact, to violence, injury or death. Alcohol is involved in more regrettable moments, crimes and traffic fatalities than all other drugs of abuse combined.



# Addiction 101: Alcohol continued

Young people, who are less familiar with the effects of alcohol, may be especially prone to act in an impulsive or dangerous manner while intoxicated.

Extreme intoxication can kill, often as the result of the person “passing out,” vomiting and choking. A person who has been drinking heavily and is unconscious should be laid on his or her side and watched closely. Clammy skin, low body temperature, slow and labored breathing and incontinence are signs of acute alcohol poisoning, which can be fatal. Seek emergency medical care.

Women who drink during pregnancy risk giving birth to a baby with behaviour problems, growth deficiency, developmental disability, head and facial deformities, joint and limb abnormalities and heart defects. The risk of bearing a child with these birth defects increases with the amount of alcohol consumed. The first trimester may be a time of greatest risk of the fetus, although there is no time during pregnancy when it is known to be safe to drink alcohol.

Mixing alcohol with other drugs-prescribed or recreational-can have unpredictable results. Alcohol may either block the absorption of the other drug, making it less effective, or it may increase the effect of the other drug, to the point of danger. The general rule is to never mix alcohol with any other drugs; for exceptions, ask your doctor.

## **Is there a safe level of drinking?**

While there is no precise “safe” level of drinking, there are guidelines for adults who wish to lower the risks of drinking. People who are pregnant, who have certain medical conditions such as liver disease or mental illness, or who will be driving a vehicle or operating machinery, should avoid alcohol.

## **Is alcohol addictive?**

It can be.

Most alcohol-related illnesses, social problems, accidents and deaths are caused by “problem drinking.” This term describes alcohol use that causes problems in a person’s life, but does not include physical dependence. Problem drinking is four times as common as severe alcohol dependence.

Physical dependence involves tolerance to alcohol’s effects, and withdrawal symptoms when drinking is stopped. As people develop tolerance, they need more and more alcohol to produce the desired effect. people who are

physically dependant on alcohol can develop withdrawal symptoms, such as sleeplessness, tremors, nausea and seizures, within a few hours after their last drink. These symptoms can last from two to seven days and range from mild to severe, depending of the amount of alcohol consumed and the period of time over which it was used. Some people experience delirium tremens, or “the DTs” five to six days after drinking stops. This dangerous syndrome consists of frightening hallucinations, extreme confusion, fever and racing heart. If left untreated, severe alcohol withdrawal can result in death.

Treatment for alcohol dependence usually begins by treating withdrawal symptoms, but most people will need additional treatments to help them stop drinking. Even after long periods of abstinence, a person may continue to crave alcohol, and may begin to drink again. Treatment may include residential or outpatient treatment, individual or group therapy, self-help or mutual help groups, such as naltrexone. Some people respond well to one form of treatment, while others do not. There is no single most effective treatment approach.

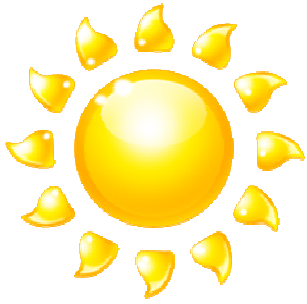
## **What are the long-term effects of drinking alcohol?**

How alcohol affects you in the long term depends on how much and how often you drink.

For middle-aged and older adults, as little as one drink of alcohol every other day can help protect against heart disease. On the other hand, heavy drinking raises blood pressure and puts people at risk of stroke and heart failure. Heavy alcohol use can result in appetite loss, sexual impotence or menstrual irregularities, vitamin deficiencies and infections. Alcohol irritates the lining of the stomach, which can be painful and is potentially fatal. Alcoholic liver disease is a major cause of illness and death in North America. Alcohol also increases the risk of liver, throat, breast and other cancers.

Chronic use of alcohol can damage the brain, which can lead to dementia, difficulties with co-ordination and motor control, and loss of feeling or painful burning in the feet. Alcohol dependence often results in clinical depression, and the rate of suicide among people who are alcohol-dependent is six times that of the general population.

Source: [http://www.camh.net/About\\_Addiction\\_Mental\\_Health/Drug\\_and\\_Addiction\\_Information/alcohol\\_dyk.html](http://www.camh.net/About_Addiction_Mental_Health/Drug_and_Addiction_Information/alcohol_dyk.html)



# Stages of Healing

The following are seven stages of healing or recovery from illnesses that can be most helpful for individuals and families. Each of the following stages can be seen as a “state” of consciousness,” or a way to view the world or your life. These stages are not sequential’ going from stage one to two to three etc. People will constantly circle back and forth among the different stages, reviewing what already has been learned, and gain a deeper understanding and perspective while spiraling forward to a new level of awareness and growth.

## The First Stage: Chaos

Healing generally begins with chaos, because chaos is the first reaction of the family to the mental illness. The predominant feelings of this stage are fear, shame, guilt, depression, anguish, and fatigue. More psychiatric or medical diagnoses are made in this stage for all family members. Chaos is also a time of great creativity and opportunities to rebuild in new and even better ways.

## Stage Two: Diagnosis

The person experiencing mental health difficulties and the family make a remarkable awareness: “it is not me that is causing all of these problems; it is the illness.” The new perception releases a great deal of energy. This stage is set for the rest of healing, because accurate diagnosis and assessment are the foundation upon which healing rests.

## Stage Three: Core Issues

Core issues flow from diagnosis. It is a stage of problem identification, problem ownership, personal accountability, and self-responsibility - not towards the loved one but toward oneself. It is the stage in which the family member acknowledges the impact upon himself or herself. Awareness of the core issues presents the person and the family with an accurate picture of the cost of the illness and what the cost of caring for the loved one has been.

## Stage Four: Moving Beyond

The fourth stage of healing occurs naturally as family members realize they have a right to their own life just as their loved one experiencing mental health difficulties does. The major tasks of this stage is to create a safe or healing distance from the illness. It marks the shift from a preoccupation with the illness or the loved one’s behavior to other areas of life that require the family member’s time, attention, and effort. It can involve a re-commitment to friendships, hobbies, business, career, and, importantly, to the family member’s own health.

## Stage Five: Getting It Together

This stage is a continuation of the momentum achieved in the previous stage. One of the longest stages in duration, it occurs as the family addresses its own wounding and becomes as committed to its healing as it has been to the healing of their loved one. The goal of this stage is for family members to get themselves together; the concern is not in getting a loved one together. There are two essential tasks in this stage: dealing with chronic grief and coping with chronic stress.

## Stage Six: Refamiliying

This is the sixth stage of family healing, the discovery or re-discovery of the miracle of “us.” It is the affirmation of family power and a family way of coping with daily living and all the challenges this brings. It is the natural outcome of the previous stages. As family members get their lives together, they have the energy for family renewal. The possibility for a stronger and more vibrant family can now unfold.

## Stage Seven: Transcendence

The last stage of healing is called transcendence. A process of “stepping over, going beyond, surpassing, being above and beyond,” Transcendence is the “brass ring” of healing. While it is available to all, few actually get to this stage. The mystics tell us that in order to get to the Temple of Enlightenment, one must pass through the pillars of confusion and paradox. In this stage the gift is received and acknowledged, and this occurs through a process of connection-connection to self, to others, and to something above and beyond the self. Strength and guidance come from beyond the limited confines of the self. The primary feelings of this stage are love, awe, mystery, reverence, and respect. This stage is open to all family member.

To read about the Stages of Healing in further detail, the book is available at the lending library at 151 Essa Rd., Suite 202 in Barrie.

Source: Gravitz H (2004). *Mental Illness and the Family: Unlocking the Doors to Triumph*. Santa Barbara, California. Healing Visions Press.

# 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)

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

## **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

## **Collingwood Family & Friends Mental Health Support Group**

Date: Last Thursday of every month

Time: 10am - 12pm

Location: 12 Erie Street in Collingwood (Consumer Survivor Project)

\*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

## **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

## **Barrie Parent Support Group**

Date: Third Tuesday of every month

Time: 7:00pm - 9:00pm

Location: 211 Marsellus Dr., Barrie (Holy United Church)

\*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 July, August and December

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

## **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](http://www.fmhi.ca)

A photograph showing a close-up of a person's hand resting on a computer mouse, with a keyboard visible in the background. The image is set against a blue 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

Canadian Mental Health Association, 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

Enaahchtig 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

**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

## The Lending Library

### \*New Location\*

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.

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

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

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



## 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: \_\_\_\_\_



## **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: \_\_\_\_\_ Fax: \_\_\_\_\_

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



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 Phone: 705-725-0363 Toll Free: 1-800-324-3252 Fax: 705-725-5496  
 Website: [www.fmhi.ca](http://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: \_\_\_\_\_ Fax: \_\_\_\_\_

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 Ph: 705-725-0363 Toll-free: 1-800-324-3252 Fax: 705-725-5496



## Change of Address & Email Form

**NEW ADDRESS:**

**Old Address:**

Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
City/Town: _____	City/Town: _____
Province: _____ Postal Code: _____	Province: _____ Postal Code: _____
New Email: _____	Old Email: _____