

September/October 2009

The Rights Stuff

Mental Health Rights Coalition

Drop In and
Peer Support
Hours:

11a.m- 4p.m,

Mon - Fri

Our Mission: To encourage, enable and empower the voice and participation of consumers in the mental health system in Hamilton.

MHRC Moving AGAIN

MHRC finds itself packing boxes and making another move effective August 14. The new location is at 20 Jackson St. W., Suite 206A.

"We are excited to be in a much larger location right in the heart of Hamilton," says Frances Jewell, Executive Director. "The new



space is very welcoming to mental health consumers and we hope our proximity to other programs like both the YW and YM as well as Cottage Studio will bring new opportunities for program and partnership. "

After settling at 370 Main St. E. in April MHRC has found the location is not adequate for the needs of our members.

Feature Member

This month we begin a new section for the newsletter. The Feature Member is randomly selected from the people who attend the drop in. In this issue we are proud to present



Wayne Perry!

(Continued on page 3)

Do the Math

There are many interesting items which cross our desks each month but one which caught my attention re-



cently was a
"test" on the
internet to see if
it was possible to
live and eat on
social assistance.
The short, fill in
the blanks survey
provided by The
Stop Community
Food Centre in

Toronto, allows participants to fill in what they think it costs to live in their area each month. It moves participants through all the costs of living

from housing to haircuts. Visitors to the site are asked to fill in the amounts they believe would be necessary for someone on social assistance. Participants then fill in their income level and final tally is given comparing the \$572/month for those on Ontario Works, the \$1020/month for those on Ontario Disability Support and your personal income.

The comparison may surprise many and cause them to give a little more consideration and compassion to those who are trying to live on social support.

At the end of the internet journey people are given opportunity to voice concerns about the situation.

To participate in this interesting journey visit Do the Math at

(Continued on page 4)

Mental Health Commission Seeks Input re Peer Support

The Mental Health Commission of Canada is exploring Peer Support and is looking for input from individuals and organizations. You will find the surveys at http://www.mentalhealthcommission.ca/Eng-

<u>lish/Pages/servicesystemsinformation.as</u> <u>px</u>

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Phone: 905-545-2525 Facsimile: 905-545-0211 Email: mentalhealthrights@bellnet.ca Google Map

http://maps.google.ca/maps/hl=en&q=20+Jackson+St.+W.+Hamilton+&ie=UTF8&tl=43.254609,-79.870522&spn=0.005017,0.009602&z=17

Our Mission is to encourage, enable, and empower the voice and participation of consumer/survivors in the mental health system



Executive Director: Frances Jewell

mhrced@bellnet.ca

Cottage Studio at St. Paul's Presbyterian Church, Art Gallery of Hamilton and plenty of other community services.

We're excited about our new office and hope you will like it too.

Whitehern Historic House and Garden,

In the mean time staff and volunteers will be busy packing and unpacking and gearing up for a busy autumn.

Please visit us soon!

Frances



Members and Staff of MHRC and Inspiration Place enjoyed a day at the Waterfront park on Wednesday, August 12. About 55 people enjoyed food, games and trolley rides. The sun shone at last and it was great fun to get out and enjoy some summer.

Location, Location, Location

you read this Mental Health Rights Coalition will have a new home.

We didn't plan to move twice in a year but when you've got to go, you've got to go.

Our new location at 20 Jackson Street West, Suite 206A lands us in the heart of downtown. We're close to the YMCA and YWCA, The Farmers Market and Central Library in Jackson Square,

Seeking Donations

Beautiful leather couches and chairs and other furnishings or cash donations for furniture for the MHRC Drop In.

For more information contact us at MHRC 905-545-2525



Program Coordinator Peggy Guiler-Delahunt mhrcprograms@bellnet.ca

The name tag they gave me at the Mental Health and Addictions Strategy

Summit is hanging on my desk. I considered heaving it the other day when I was cleaning up some things on my desk but thought better of it. It now hangs there to remind me of that monumental event. Some day I hope it will be a memento which represents hope in action.

I've been involved in mental health and addictions in one capacity or another for most of my life. At first it was as family member, then consumer, then volunteer, and for the past 12 years in formal peer support.

Advocacy has always been a big part of my work, particularly as a Telecare volunteer and in peer support. I have watched the system of support for those with lived experience develop and move in many ways which are far from perfect, but, which are much more supportive of recovery than they

were when I began the work in the mid '80's.

The recent summit

feels like it is climactic in this uphill battle for consumers. I am holding my breath a little—wondering if it's just another round of lip service—but I believe the minister is sincere in his commitment and it appears that politicians have been able to

"depoliticalize" the issues of mental health and addictions and consider them as a societal issues which deserve a collaborative, non-partisan approach.

I can hardly wait to see the money flow where the talk ends.

To truly make the system work for consumers the providers are the next group who have to put their own agendas aside and work toward practices which promote good health.

There has been a bit of an undercurrent over the past few years of agencies and health professionals vying for position so they can guarantee their jobs. Turf wars and empire building have to end. The politicians have put down their arms and provid-

ers we have to do the same.

Rather than putting our hands out for the proverbial "buck" we need to be putting our hand out to lead consumers through a process which has the potential to assist them on their journey to recovery.



Give Us A Call! A Peer Support Worker is available Monday to Friday, 11a.m.-4p.m.

905-545-2525

Matches Available

Any consumer looking for on-going peer support by a trained volunteer is encouraged to call the Program Manager at

905-545-2525.

September/October 2009

Summer Student a Great Asset to MHRC



Anthony Morgan, summer student with MHRC, is continuing undergraduate studies in honours Psychology at McMaster University this fall. Anthony has been working with MHRC with funding from Canada Summer Jobs Photo by Amanda Carey

The day June 25th, 2009 means a lot of things to a lot of people. For some it's the day we lost a pop icon and one of Charlie's Angels. For others it marks happier times, like the first day of summer vacation or summer barbeques. For me it is the beginning of my time with the Mental Health Rights Coalition. Thanks to a government sponsored program, I was taken on as a summer student as an Administrative and Peer Support Worker.

In the months leading up to my employment I've been attending McMaster University, enrolled in the honours psychology program. I attended a Notre Dame High School and even in high school I knew I had an affinity for helping people. In the throes of some crisis with their girlfriends or arguments with their parents, my friends would come to me for advice or just to listen. Considering however that I was also strong in mathematics I had a choice to make going into university. I could go into the sciences and pursue a career in psychology or follow my strengths in math and go into the Engineering program. I opted for the latter reasoning that there would be more security in a career as an engineer. I made it through the first term of the year with respectable grades but found that I just didn't seem to

be able to take an interest in the work. Nonetheless I decided that I was just being closed to the idea. So I soldiered on through the rest of the year and completed the first year of the program. The whole experience left me restless and eager to find something that I could be excited about going to class for. I decided that I would switch faculties and move from the Faculty of Engineering to pursue a psychology degree in the Faculty of Science. This surprised my parents and they urged me to think a great deal before switching lest I waste a year. There was, however, no hesitation on my part. Engineering was everything I expected and nothing I wanted.

So the next year my term was full of a variety of psychology courses focusing on everything from social psychology to neurobiology and I haven't looked back since. In fact I've gotten more involved with studying and addressing mental health issues. I began volunteering with the Salvation Army suicide prevention services in 2007 and working as a Teaching Assistant for an introductory Psychology course and have found both have happily filled that something lacking in first year. I'd been able to help counsel a lot of people as a

I perused the website of an organization called the Mental Health Rights Coalition and found myself immersed in a movement I had been oblivious to up to this point.

Suicide hotline volunteer and I wanted to find something that incorporated the skills I've learned as a volunteer and from school.

So by the time this summer rolled around I had a vague idea in mind for the kind of work I wanted to do. I began looking for jobs through the McMaster website and was dismayed to find that there were many more people than average applying for many fewer jobs than average. I shared my frustrations with a friend of mine, Rory, who mentioned that he knew of a place that was looking for a summer student. I perused the website of an organization called the Mental Health Rights Coalition and found myself immersed in a movement I had been oblivious to up to this point. Something called a CSI, or a Consumer/Survivor Initiative, was a brand new concept to me that seemed so common sense and brilliant at the same time. So I hurriedly dropped in and dropped off a resume.

Fast forward two months to today and I have come to fully appreciate the mission of the MHRC. I've had the opportunity to meet many of our members and spend time getting to know them. I've heard so many inspiring stories of resilience and fortitude that I can only hope to incorporate in my own life. The struggles that some have encountered have opened my eyes to the prejudices that the casual "unafflicted" observer with illness may wave off as circumstantial or coincidental. Much more than good work experience or pay cheques, I will take away a deep understanding and appreciation for the importance of CSI's, Peer Support and their impact on people experiencing mental illness.

The 28th of August will be a bittersweet day for me, as it's the last time I'll be able to regularly visit the MHRC. I'll be back to school as of the fall and will soon be engulfed by a semester full of research and extracurricular activities. Though I'll be gone, I'll take the lessons and hopefully be able to pass them on. Thanks for the good times!

Feature Member

(Continued from page 1)

How long have you been a member?

1 year

What are your hobbies or pass times?

I like to watch movies. Especially Science Fiction movies. I also like the oldies with actors like Sidney Poitier.

Tell us why do you come to the MHRC.

It's something fun to do. Something to keep myself busy.

Tell us about a happy memory.

I really liked when I first came to the MHRC. I was glad I did because a friend that I met here helped me get a job. Frances was really helpful in getting me the job. I think of her like a teacher for me. I've felt that way ever since I started coming here.

Favourite Quotes:

"If you think young you'll be young, if you think old you'll be old." - anonymous

Favourite Books

Elvis Presley

Favourite Movies

Love Me Tender Jailhouse Rock

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Do the Math

(Continued from page 1)

http://dothemath.thestop.org

The Stop Community Food Centre began in Toronto's Davenport West district as one of Ontario's first food banks about 30 years ago. Now The Stop states it's goal to "increase access to health food while maintaining dignity, building community and chal-

lenging inequality. The organization hosts many projects including a drop in, food bank, prenatal care, civic engagement, bake ovens and markets, community cooking, advocacy, and food education which includes urban agriculture.

For more information visit their site at http://www.thestop.org

Medical Help for the Homeless and at Risk



Shelter Health Network is a collaboration of health professionals and social service organizations who reach a high risk population who do not have stable housing and who have complex health issues in the Hamilton area.

Poor health and homelessness go hand in hand and this collaborative works on both issues in an effort to improve the general quality of life for many "at risk" members of the community.

Recently the organization added the service of physician who will accept drop in clients on Wednesday mornings at 131 John St. S. Dr. Wilson will also accept referrals at 905-521-0090 ext. 256.

This service includes several physicians, nurse practitioners and mental health professionals who offer a variety of services ranging from primary health care, mental health and addictions care, to shelter, meals and laundry service.

For more information on the services and clinics available please go on line and visit www.shelterhealthnetwork.ca

The major proponents of this initiative include: Good Shepherd Centres (Family Centre, Good Shepherd Men's shelter, HOMES program, Barrett Center, Notre Dame House), Salvation Army (Primary care clinic, Discharge bed program), Wesley Urban Ministries (H2HP at Wesley and Claremont House), Mission Services (Jamesville outpatient clinic, Discovery House), Wayside House, and CMHA.

Monthly Magazine Recommended

Schizophrenia Magazine, the hard copy, is a great magazine but even the online notification about the magazine which can be obtained on the internet, is a great source of interesting material.

The August issue features the story of the magazine's CEO and Founder Bill MacPhee who travels throughout North America telling his story of living with schizophrenia. A link takes readers to a video clip of Bill MacPhee sharing his story.

Also in this issue is an update about the movie, "The Soloist" and suggestions about screenings for groups, a piece on obesity and healthy eating for not too much money, and a personal story.

Sign up for the monthly e-letter is at http://www.szmagazine.ca



Amanda Carey, MHRC Staff Member and Sheila Rogers of CBC had opportunity to meet at two different events over the summer. The first was the Collaborative Care conference in Hamilton in June and the second was at the Mental Health and Addictions Strategy Summit in Toronto in July

Coming Events

Tuesday, September 29—MHRC Annual Meeting and Scope Awards—see page 5 for details

Tuesday, October 27, 2009— Engage and Equip—The Hamilton Suicide Prevention Community Council of Hamilton's 9th annual conference—8:00 a.m to 3:15 p.m. - At Carmen's Banquet & Convention Centre, 1520 Stone Church Rd. East, Hamilton.—Speakers and workshops—Registration \$70, \$50 for members, \$30 for students. see our web site for more info—www.mentalhealthrights.ca

Healthy Lifestyles Change Group

(A concurrent disorders group)

September 9 through November 11th from 1:30 to 3:00 p.m. at Wellington Psychiatric Outreach Program, 40 Wellington St. N. Referrals to Kathy McCabe at 905-522-9767 or Angela Cooper, 905-546-2424 EX2856.

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Notice of
Annual General Meeting
and Scope Awards
Tuesday, September 29, 2009
35 Aikman Ave.
Hamilton, ON
5:00 p.m. to 7:30 p.m.

A light dinner will be provided.

Scope Awards presentations will take place after dinner

This meeting will include the election of officers to the board of directors. Those wishing to apply for a board position must be a member of the Mental Health Rights Coalition for no less than three months. Applications for membership may be picked up at the coalition office or by requesting one via email at mhrcprogams@bellnet.ca.

Application packages for the board will be made available by August and may also be requested by contacting the coalition in person, by phone or on the internet.

A Scope Award form is included in this newsletter. Additional copies may be picked up at MHRC

Letters to the Editor

June 27, 2009

WHAT IS PEER SUPPORT? Question: So, what we are hearing is that peer support may be colloquialism. In the early 90's the true intent of the term Peer Support was to be 'just' psychiatric consumer/survivors.

Now, we are seeing the term referring to the whole not to its parts. Mental Health being that colloquial whole.

So at the end of the day, the terms 'peer support' and 'mental health' are being confused. For example: Full diversity towards peer support initiatives' moves the term peer support towards collectivism. A little more clarification would be helpful.

Do we see peer support work something like the duties of 'Home Aid Workers' in the early 50's and 60's? It is not under the Canada Health Act. Offering low wages with flex hours, means no nest egg in pensions for mostly women and maybe a small percentage of men, however the duties may vary.

Thanks

Karen Harte-Maxwell, Brantford



Comments on the Mental Health & Addictions Summit

By Dylan Goff

Dylan graduated from the Peer Support Training in the fall of 2008 and has become a valuable member of the volunteer force at MHRC, taking on a lot of the more challenging peer support roles. Dylan's flexibility and availability have recently led to his being hired as casual staff at MHRC.

I thought the summit was a lot of fun even though Toronto kind of scares me. It was nice to know the government is thinking about us.

I wish the 10 year plan was a two year plan but lets see if they can deliver.

I was impressed of all the peer support workers I met there, I especially liked working in our little groups to bump heads and come up with ideas for the officials to act upon. The people I grouped with were from all over the place and we all had the same issues.

I also liked the panel at the beginning they seemed honest and had loads of lived experience. It was also encouraging to feel respected for my lived experience.

The Rights Stuff

Published every other month by

Mental Health Rights Coalition Editorial Policy

The Rights Stuff is published every other month by the Mental Health Rights Coalition. Our purpose is to inform our membership and other interested partners in mental health and the community about issues and events which may be of interest. Included is a calendar of events for the upcoming month at MHRC.

The Rigths Stuff is available to our members via mail and to others as requested via email and our web site at: www.mentalhealthrights.ca

The Rights Stuff welcomes submissions & letters of 250 words or less. Be advised that MHRC reserves the right to edit and/ or decline publication of any submissions.

Deadline for submissions is the 15th of the month previous to publication.

Printing dates are September 1, November 1, January 1, March 1, May 1 and July 1.

Views and opinions expressed in this newsletter represent those of individual contributors, and not necessarily of The Mental Health Rights Coalition.

Seeking Donations

Beautiful leather couches
and chairs and other
furnishings or
cash donations for furniture
for the MHRC Drop In.
For more information contact

For more information contact us at MHRC

905-545-2525

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Making Every Door the Right Door

Excerpts from the discussion paper

Below on this page are the seven directions, the vision, mission, goals and principles of the Ministry of Health and Long Term Care's discussion paper on Mental Health and Addictions.

Ontarians are encouraged to read the entire paper and give input to the ministry in an effort to help them develop strategies and priorities for the next ten years.

The full paper and input form are available at http://

www.health.gov.on.ca/english/ public/program/mentalhealth/ minister_advisgroup/ minister_advisgroup.html

If you or anyone you know needs help in understanding the document or providing input there are volunteers and staff available to assist at MHRC.

Right now, Ontario has a fragmented system of services. People go through too many doors and struggle finding the services they need. In most cases, services are not integrated. They do not work together to meet people's needs.

To make every door the right door for people with mental illnesses and/or addictions, we are proposing seven directions: **1. Act Early:** Identify mental health and addiction problems early and intervene appropriately.

We see an Ontario where a wide range of people and places – individuals, family members, peers, family health providers, schools, workplaces and communities – are able to identify the signs of mental illness and addiction and take action, helping people find the best door for help and care.

2. Meet People on their Terms: Develop a range of evidence-based, person-directed services.

People with mental illnesses and/or addictions are empowered to be active partners in their own recovery, making informed decisions about their care, and the system offers a broad range of approaches to care, including healthy development, psychosocial rehabilitation, recovery, harm reduction and trauma-informed services.

3. Transform the System: Provide access to a seamless system of comprehensive, effective, efficient, proactive and population-based services and supports by revaluating current resources.

The system provides a range of evidencebased services that are coordinated with other health services, and with other services that people with lived experience use, such as education, social services, housing and employment programs. **4. Strengthen the Mental Health and Addictions Workforce:** Ensure we have the right people

with the right skills in the right places.

Sharing knowledge and promoting respectful, evidence-based services for people with mental illnesses and addictions is about taking a competency approach to care. Recognizing the value of

life experience as well as academic training can help build a stronger and more efficient workforce.

5. Stop Stigma: Bring mental illness and addiction out from behind closed doors.

Ontario eradicates stigma in the health system, in public services, and in society. We create healthy, supportive communities.

6. Create Healthy Communities: Fostering supportive communities is a shared responsibility that

requires the commitment of all segments of society and cooperation of all government ministries.

7. Build Community Resilience: Take a strengths-based approach to protect people from mental illness and addictions.

Strengths such as family and friends, problem-solving skills, coping style, social skills and being connected to the community can help build resilience and protect people from mental illnesses and addictions. Communities are active partners in promoting health and wellness, and social inclusion.

Vision

Every Ontarian enjoys good health and well-being, and Ontarians with mild to complex mental illness and/or addiction live and participate in welcoming, supportive communities.

Mission

Every Door is the Right Door for Ontarians with mental illness and addictions.

All doors in the mental health and addiction system and the broader health, children and youth, education social services, housing, seniors (sic) services, settlement services and justice systems lead to integrated, accessible, person-directed services and supports.

Services focus on the hopes and needs of people with mental illness and/or addictions, and engage them in their own health and care.

Goals

Improve health and well-being for all Ontarians

Reduce incidence of mental illnesses and addictions

Identify mental illnesses and addictions early and intervene appropriately

Provide high quality, effective, integrated, culturally competent, person-directed services and supports for Ontarians with mild to complex symptoms of mental illnesses and/or addictions and their families.

Principles

(expanded on the report with comment)

Respect

Diversity

Partnership and Collaboration

Healthy Development, Hope and Recovery

Harm Reduction

Excellence and Innovation

Determinants of Health and Well-being



S	Monday	Tuesday	Wednesday	Thursday	Friday	S
		Calendar Activities be	egin at 1 p.m. unless	1	2	3
	MENTAL	otherwise stated		Crochet	Cards	
	HEALTH RIGHTS COALITION	Walking/Exercise activities are dependant upon weather. Please wear appropriate shoes and clothing. Rain dates are			5 + +	
4	5	6	7	8	9	10
	Walk About	Crafts	Movie & snacks	Skip Bo	Yatzee	
				SKIP: BO		
11	12	13	14	15	16	17
	Thanksgiving Holiday Glosed	Coffee Walk	Art Gallery	Members Meeting	Air Hockey	
18	19	20	21	22	23	24
	Current Events	Crafts	Bingo	Cribbage	Backgammon	
			Diligo 0/9 N I B			
25	26	27	28	29	30	31
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				5 a a a a a a a a a a a a a a a a a a a		



September 1



S	Monday	Tuesday	Wednesday	Thursday	Friday	S	
		1	2	3	4	5	
	MENTAL HEALTH RIGHTS COALITION	Crafts	Skip Bo	Card	Movie and Snacks		
6	7	8	9	10	11	12	
	Labour Day Holiday	Library	Cribbage	Backgammon	Current Events		
13	14	15	16	17	18	19	
	Cards	Crafts	Members Meeting	Yatzee	Walk About		
20	21	22	23	24	25	26	
	Movie	Bingo	Board Games	Crazy 8s Crazy 8 Crazy 8 Countdown	Birthday Party		
27	28	29	30				
	Coffee Walk	Annual General Meeting & Scope Awards 5—7:30 pm MHRC Drop in closed today.	Air Hockey	Calendar Activities begin at 1 p.m. unless otherwise stated Walking/Exercise activities are dependant upon weather. Please wear appropriate shoes and clothing. Rain dates are scheduled for special outdoor events.			