



July-August-
September 2018



Canadian Mental
Health Association
Prince George
Mental health for all

Peers Perspective Newsletter

Vol. 3

Break the stigma, peers helping peers

Public Education

Library and pamphlets available for all at the Canadian Mental Health Association, 1152 3rd Avenue, Prince George.

Peer Support – Offers support to individuals impacted by mental illness who require help in resolving issues or concerns they may have in dealing with areas of their daily lives such as: income assistance applications and appeals, government and agency forms and requirements, tenancy issues, making appointments, finding information, financial matters, or connecting to services. This is by no means an exhaustive list, as we attempt to assist individuals with all their needs as best we can, either directly or through referral. This is an open referral service, with anyone welcome to make appointments and inquires to (250) 564-8644 Ext 205

Community Education & Workshops – Providing workshops on mental illness and informational material. 250-564-8644 Ext. 209

Life Skills Support Program – Designed to help those with mental illness develop and learn skills for independent living. 250-564-8644 Ext. 212

Housing Resource Program – To assist in accessing affordable housing. 250-564-8644 Ext. 204

Bounce Back Self Help – For people living with mild to moderate depression with or without anxiety. 250-564-8644 Ext. 211

Questions & Feedback?

Do You Have a Story? We would like to hear it!

We strongly believe sharing real success stories from individuals (you can remain anonymous) can help spark needed conversations about mental wellness.

Contact Ed Lui at Canadian Mental Health Association
Telephone: 250-564-8644 Ext 205
Email: edlui@cmhapg.ca



Hello Friends...

So, many of us will deal with mental health issues at some point in their life. After all, our brains are organs that can have issues, like any other one. Some people will experience acute issues, some chronic. Some people will react to environmental circumstances, some will experience mental health issues without prompt. Mental health issues are complex and fluid, much like the breadth of people who experience them. Some will also choose not to address their mental health in a public way, for whatever reasons. And as long as that is a decision they came to themselves that is to be respected. And for the most part, I've chosen this route throughout my life. But I've come to a time in my life where I not only feel comfortable but want to address my mental health issues publically. People don't need to provide reasons to talk about mental health, but I'm going to- if nothing else for personal catharsis. I want to talk about my mental health because it's going to help me work through it, and explain some things.


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I've had issues with emotional regulation my entire life (a fact my family can surely attest to haha), and when I was 18 my doctor brought up the specter of bipolar disorder. I fully accepted this but attempted not to really focus on it and fall into allocated roles I believed someone who was bipolar would fall into. But in reality- it is what is it- no matter what you call it. I've never been ashamed, or out rightly denied this about myself. But I try not to let my mental health issues dictate my personal identity. It's something that some days doesn't exist, life is just regular. And there are some days, weeks, and months when life is not regular.

And that's really the impetus for this essay- life for the past couple months (in particular the last 5 weeks) have been very much "not regular". I've been experiencing extreme difficulty regulating my emotions (including mood swings), and it became way beyond my control. On a daily basis I go about experiencing emotions, but with extra cognizance to make sure I am in control. Recently I've not had the ability to exert that control, and it's lead to an extremely unbalanced internal state, and irrational external behavior. It may be noticeable to some, it may not be. And I implore you not to equate a social media presence for real life. Although my social media is a reflection of my life, it is of course, not the full story.

This behavior includes irrational anger, anxiety, depression, and mania. As well physically it leads (or is caused by) a lack of sleep, short-term forgetfulness, impulsiveness, and other habits I would not typically exhibit. The most common issues I face are depression, anxiety, and anger. They become hard to control and unpredictably prompted. This essay is not to expunge me from accountability- I am still a human who takes responsibility for her actions. And my mental health issues are not a blanket that covers or explains all my behavior- I am still a human who experiences genuine and varied emotions and actions .

Life has been unusually stressful in the past several months and has included rapid and sudden changes personally, professionally, and familiarly. These external stressors have no doubt contributed to my disordered behavior but are not solely to blame. Another reason I am writing this essay is to address those external factors and to take responsibility for my personal role in my own well-being. With that being said, I'd like to apologize to all of the wonderful people in my life that I may have accidentally upset in the past several months. I have been a neglectful friend to many, while simultaneously being an obsessive friend to others. I've also been mean and short with many people- which is not ok. And it is not lost on me how many friends I have who keep reaching out to me despite my disorders behavior, so thank you. It is also never lost on me, even in my most severe and dark moments that I am a person who is extremely lucky and in privileged circumstances. I always have had a very awesome life filled with love and opportunity.

I chose to write this essay now, as I will soon be entering therapy, and today is the first day in weeks that I have felt healthy, lucid, and present enough to verbalize my thoughts. So thank you for reading all (or really any) of this. It means a lot. And thank you for attempting to empathize with me while I try to work out some very complex issues. It's been a tough road, and it will be tough still. But it will get easier. And simply addressing my issues has made the load I carry a bit lighter. Writing this essay is a very big step for me, and a big risk too, and I am unsure how I will be received, and I am not one who has an easy time with vulnerability and emotional expression (as I hope that became evident haha).

Here is to the road ahead, thanks for reading.

Your stories, please!

I am proud to say, that I am newly a part of this newsletter team through The Canadian Mental Health Association. I now know that this newsletter is capable, in the best of ways, of getting people thinking and sparking dialogue about mental illness. This, ultimately, will bring much needed awareness, information and insight to all the facets of mental health and of course mental illness. If you have one, it's good to know about the other.

Mental illness wears as many faces as the people who suffer from it, and with all the many masks, we need an equally varied approach to fighting back. Every person is different, and so too should be the treatment. There is no straight forward answer for everyone. You cannot turn a blank canvas into an intricate masterpiece with the same brush that you would use to paint a fence. Broad strokes will not work here. Doctors, with all due respect, do not have all the answers. Mental illness is tough to treat; and treating it is trial and error. With every mistake; a lesson is learned, adjustments made, and problems corrected. With every success; a person can start to feel more hopeful. With every story; a mental health community becomes stronger and smarter! Thus I'm asking for your stories, please!

By Bill M.

Jokes of the month

The magician got so mad, he pulled his hare out.

The early bird gets the worm, but it's the second mouse who gets the cheese

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Important numbers

Canadian Mental Health Association Prince George Branch: (250) 564-8644

Crisis Line: 1-888-562-1214

BC Suicide Crisis Centre: 1-800-Suicide (784-2433)

Primary Care: (250) 565-2612

BC Schizophrenia Society: 250-561-8033

Ace Centre: 250-564-3396

Greetings,

At Canadian Mental Health Association Prince George (CMHAPG) we want to share with you, mental health education from those with lived experience in the form of a newsletter.

In this newsletter we hope people may connect with the individuals behind the stories on a personal level and recognize in having similar feelings and thoughts that they are not alone, but more importantly that they can reach out for support to find hope.

Mental health affects everyone - it does not discriminate and affects individuals of all ages, races, and gender. As awareness of mental health becomes more prevalent, so does the need to educate and bring awareness to the public. Statistics have shown that 1 in 5 adults experience a mental health issue in their lives and 1 in 3 working Canadians report having had a mental health condition. Depression, anxiety, bipolar, whatever name it goes by. Mental illness costs Canadian employers billions of dollars every year. The reality is mental illness is a complex interplay of genetic, biological, personality and environmental factors. Stigma or discrimination attached to mental illness presents a serious barrier not only for diagnosis and treatment but in bringing forth acceptance in the community.

We're hoping to receive support by advertising your business in our newsletter. Any donation to help with the cost of printing will be appreciated. Please support mental health in the workplace.

Our main goal is to shed light on the darkness of mental illness by educating the public, education provided from those who have a mental illness. In conclusion, we hope you will be a part of our project that aims to help others and bring awareness around mental health to the community.

Thank You!

Want to Help Out? Volunteer or Donate!

Studies show regular volunteering can have a positive effect on mental and physical health. And who doesn't feel good giving? Visit www.princegeorge.cmha.bc.ca to learn more on how to help Canadian Mental Health Association and your own mental Health!

Quote of the Month

The true measure of mental health is the disposition to find good everywhere

Mental Health Word Seek

P R H O D N N D Q T P H S J F
D S A T X Y I V R G O Y O K G
M V Y L X S U O K Y S H P P H
D E C C O S P U L W I Q U E E
L E N R H P C G V F T X A P R
Z V D T U I I I J S I L H H X
T E F S A C A B R E V O C E R
R E R Q A L H T V O E H N A Y
L X E R U C J E R H T R L L G
Y L I M A F D C C I L C B T N
A N X I E T Y A R W S G O H I
G L O V E X Y E K S W T Z D P
E Q G U J T G P I I M S T K L
J D P W F N B M N L X U A Q E
D B S F A N R R D F B P N C H

ANGER	HELPING	POSITIVE
ANXIETY	HEALTH	PSYCHIATRIST
BIPOLAR	HOPE	FAMILY
CARING	KIND	DOCTOR
CURE	LOVE	PEACE
DISORDER	MENTAL	

Interesting facts

8.4% of Canadians aged 12 or older have a diagnosed mood disorder

8.6% of Canadians have a diagnosed anxiety disorder

Severe depression is associated with suicidal behavior, which is often conceptualized along a continuum from thoughts to plans to attempt/deaths. As many as one in five teens report suicidal ideation in the past year. Suicide is the second leading cause of death among Canadians, accounting for almost one quarter of all deaths at ages 15 to 24

Research shows that mental illness is the most important risk factor for suicide; and that more than 90% of people who commit suicide have a mental or addictive disorder

Suicide is a major cause of death among Aboriginal peoples in Canada. In the 1991-to-2001 period, suicide rates were nearly twice as high among Registered Indian, and Métis men/women compared with non-Aboriginal men/women

Statistics Canada