

# A MENTAL HEALTH PERSPECTIVE

Canadian Mental  
Health Association  
Kings County Branch  
Mental health for all



April 2015

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## Newsletter Staff Takes a Break

The staff of **A Mental Health Perspective**, the newsletter of the Canadian Mental Health Association Kings County Branch, is about to take a well-deserved break. The newsletter has served the Kings County mental health community without pause since February, 2008. That's seven years. And they never missed an issue.

Serving as a voice for people living with mental illness, the newsletter has been produced from start to finish by mental health consumers. Article topics have been far-ranging and the newsletter staff has never been at a loss for words when it comes to ideas for topics to write about.

CMHA Director, Brenda Main, has promised this will not be the last issue of the newsletter; rather, she sees this as a time to tend to administrative concerns connected to the newsletter and hopes the newsletter will be up and running again by September. This hiatus was promoted by the retirement of Editor Heather Frenette who hopes to move to Halifax soon.

Heather, who has been the newsletter editor since December, 2008, says she will miss her job. "The personal rewards of writing and editing the newsletter have been endless from the satisfaction with the finished product and a job well done to the closeness I feel to the newsletter staff who worked with me so diligently for so long. Knowing that our writing has been helpful to our readership means a lot. I will be sad to leave," she said.



### Thank You



I can't believe this is my last issue as editor. It's been a long and successful run. The present newsletter staff, Dena Walker and Tony Legere, has been amazing in their dedication and in their ability to share their strength and optimism with our readership. I would like to thank CMHA-Kings staff, Laurel Taylor, Mark Eastman and Jane deWitte for their help and guidance and Brenda Main for her patience and her prowess in catching glitches, grammatical and otherwise, before the newsletter hit the presses. Lastly, thanks to the CMHA -Kings Board for their support and for believing in us.

-Heather Frenette, Editor

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## The Working Mind: Helping Canadians Understand and Respond to Mental Illness

The Mental Health Commission of Canada developed a new mental health initiative called **The Working Mind: Workplace Mental Health and Wellness**. The program is designed to not only reduce the stigma of mental illness in the workplace, but also to educate employers and employees about mental health issues. The goal is to support employees with a mental illness and help them be fully productive. This is accomplished by encouraging them to recognize when they are struggling, providing strategies to lessen their symptoms, and getting them to seek help when needed. The following is a model used by **The Working Mind** program to aid workers in maintaining their mental health:

### MENTAL HEALTH CONTINIUM MODEL



Normal mood changes	Nervousness, irritability, sadness	Anxiety, anger, pervasive sadness	Excessive anxiety, easily enraged, depressed mood
Normal sleep patterns	Trouble sleeping	Disturbed sleep	Unable to fall or stay asleep
Physically well, full of energy	Tired, low energy, muscle tension, headaches	Fatigue, aches and pains	Exhaustion or physical illness
Consistent performance	Procrastination	Decreased performance	Unable to perform duties, absenteeism
Socially active	Decreased social activity	Social avoidance or withdrawal	Isolation, avoiding social events

### ACTIONS TO TAKE AT EACH PHASE OF THE CONTINIUM

Focus on the task at hand	Recognize limits	Identify and understand own signs of distress	Seek consultation as needed
Break problems into manageable chunks	Get adequate rest, food and exercise	Talk with someone	Follow health care provider recommendations
Identify and nurture supports systems	Engage in healthy coping strategies	Seek help	Regain physical and mental health
Maintain healthy lifestyle	Identify and minimize stressors	Seek social support instead of withdrawing	

One in five Nova Scotians will experience poor mental health at some point in their lives. Debbie Phillips, Capital Health manager and former mental health nurse, asserts, “A program like **The Working Mind** is vital to Nova Scotia. I’ve worked in the mental health field for almost 30 years and [have been] forever battling stigma that’s associated with someone living with a mental illness” (Interview, *Global News*). So far, this program has been focused on reducing stigma within the hospital and is going to soon include the Nova Scotia Community College. This program has recently been made available to provincial employees.

For more information contact the mental health commission at [theworkingmind@mentalhealthcommission.ca](mailto:theworkingmind@mentalhealthcommission.ca).

By Dena Walker

#### References:

- Mental Health Commission of Canada. “Initiatives: The Working Mind.” 2015. Web. Retrieved from <<http://www.mentalhealthcommission.ca/English/initiatives-and-projects/working-mind>>
- Pace, Natasha. “New program aims to reduce mental illness stigma in Nova Scotia workplaces.” *Global News*. 2015. Web. Retrieved from <<http://globalnews.ca/news/1876652/new-program-aims-to-reduce-mental-illness-stigma-in-nova-scotia-workplaces/>>

## Update on Electroconvulsive Therapy (ECT)

Electroconvulsive therapy is used to treat people who are severely mentally ill. It is mostly used for depression but it is effective in the treatment of other illnesses as well. A strong electrical current is administered to the brain. This current causes a seizure which affects the chemical processes of the brain which cause the relief of symptoms. Advancements to this treatment have made it safer and less severe than it was years ago and ECT is making a comeback as a preferred treatment option.

ECT has been proven to be effective in relieving symptoms of severe depression. Some studies have shown that ECT works just as well as medication and some show it works better than medication. Literature states that it works more quickly on symptoms than medication.

Diane Demetropolis was diagnosed with bipolar disorder. She was offered ECT but refused to take it but she was severely allergic to the medications she was given. She then started ECT receiving three or four treatments a week. She described the procedure: the staff makes you feel comfortable, you go to sleep, are in and out before you know it, and do not feel a thing. Diane claims that she responded very quickly to the treatment and felt better afterwards. She used to cycle through highs and lows quickly. Her ECT treatments levelled this out. Now Diane receives maintenance treatments every two weeks.

Diane never claimed to have side effects but some people do. ECT is similar to antipsychotic medications in that there are risks involved. The main side effect is memory loss. Some lose memory of the weeks before and after treatment. Sometimes the memory loss is permanent.

Another side effect is difficulty with attention and concentration. Usually it only lasts a few weeks but some patients are not able to do things like reading on the same level they could before treatment. Confusion is another problem people experience. Some people do not even remember the reason they are hospitalized and the name of the hospital. Usually the confusion goes away in a few hours but can go on for days. Others may experience headaches, vomiting, muscle aches, and nausea. These usually subside after a few hours or days.

This procedure must be administered by a trained psychiatrist or physician. When a patient undergoes ECT they are given general anesthesia which increases the risks involved. Their vital signs are monitored throughout the whole process to make sure there are no complications. People who have problems with their heart should never receive ECT because the risks are too great. Like any other medical treatments ECT has its pros and cons. A person must weigh them carefully and make a decision whether or not to receive ECT.

By Tony Legere

### References:

- “Electroconvulsive Therapy: Beneficial or Barbaric?” *Healing From Depression*. 20 March 2015.  
<<http://www.healingfromdepression.com/ect.htm>>  
Dr. Joe Sadek and Diane Demetropolis. Personal Interview. CBC Radio. 13 March 2015.  
John Hauser, M.D. “Risks of Electroconvulsive Therapy (ECT)” *PsychCentral*. 2010. 20 March 2015.  
<http://psychcentral.com/lib/risks-of-electroconvulsive-therapy-ect/0004063>



## Mental Health and the Community Impact of Gambling Harm

Join us Tuesday May 5<sup>th</sup> as local professionals in the addictions and mental health field educate us on mental health and how gambling harm impacts our community. From the normalization of gambling in our society to the mental health connection, we invite you to participate in this important conversation about awareness and what we can do as individuals to lessen the effects. Call the Greenwood Military Family Resource Centre (GMFRC) today to register or for more information call (902) 765-5611.

**Date:** Tuesday, May 5, 2015  
**Time:** 9:30 am – 12:00pm  
**Location:** Illingworth Room, Greenwood Military Family Resource Centre,  
24 School Road, Greenwood

**Partnerships:** Greenwood Military Family Resource Centre, the Canadian Mental Health Association Kings Branch, Kings Community Action Group on Gambling

*The presenters will be from CMHA-Kings and KCAGoG. This presentation is part of the Building Community Readiness to Reduce Gambling Harms project funded by GANS (Gambling Awareness Nova Scotia).*



## **Project H.O.P.E brings... Homeless in Kings County Information Session**

**Location:** St. James Anglican Church Kentville, NS  
**When:** April 23, 2015

**Registration begins at 9:00 am**

*Transportation can be made available to those that require it.  
If you would like to make arrangements to get bus passes for this event  
please call Candy at the number below.*

For Information go to [www.kingsns.cmha.ca](http://www.kingsns.cmha.ca)  
Or call (902) 679-7573



Saturday, May 2, 2015

This is a 1km walk/or 5km run event  
1 km walk through downtown Wolfville or a 5 km run  
on 1 of 2 randomly assigned routes. One route  
represents life with mental illness and will follow the  
trails up and down the South Mountain, the other route  
is run along the dykelands.

To register for the (Walk) call Pat at **The Schizophrenia Society** at (902) 678-8458  
Or for the (Run) call Jane at **CMHA-Kings**  
at (902) 679-7464



## **A Mental Health Perspective Mission Statement:**

The purpose of this newsletter is to bring faith, hope and courage to members of the local mental health community of Kings County, Nova Scotia, as well as others who are involved with a mental, emotional or psychological condition.



Donations (cheque or money order) to support this newsletter and other important programs and services can be made to  
CMHA-Kings, 11 Opportunity Lane Suite 3 Box 10 Coldbrook NS B4R 0A5  
Editor: Heather Frenette Writers: Tony Legere, and Dena Walker  
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