

In A Nutshell

2 *"... I could be bounded in a nutshell and count myself a king of infinite space..."*
Wm. Shakespeare

Winter 2009-09

Ode To 'Brian' – A Modern Day Job

by Frank G. Sterle, Jr.

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Brian's like the Biblical icon Job, who lost everything he had and, most importantly, those he very much loved – his all 10 children. He was also afflicted by severe physical ailments; yet, he still loved and kept faith in his Creator, who allowed all of Job's misfortune just to prove to Satan that Job was worthy of God's adoration. (Indeed, Job's own wife told him to curse and forget about God).

First, Brian (not his real name) lost his only sister in a car accident in 1984, when her friend at the wheel suddenly, instinctually swerved the car to avoid hitting a stray dog that bolted onto the road out from nowhere.

Then, his mother, severely depressed over the loss of her only daughter, took her own life in 1998. And then, just five years after that loss, Brian's only brother took his own life!

Brian, who suffers from severe mental illness – first diagnosed with a schizo-effective disorder in 1996, albeit stabilized with strong medication – bravely accepts his proverbial cross and bears it stoically.

Brian, who also endures physical ailments, is a very friendly and compassionate soul, who's also a lover of felines [FYI: he also lost a cherished, young pet feline when it crawled into the clothes dryer, likely because it was warm, just before wet clothes were thrown in and the machine was engaged by Brian's mother (causing her guilt, which only exacerbated her severe depression)].

I, also a cat lover, recall choking back tears at hearing about this, how awful that loss must have

added to all of the other huge losses in Brian's hard life.

Nonetheless, Brian — with the much needed visitations of his only remaining direct family member, his father — remains brave to this day and carries on through life with his cross, enjoying whatever good times that may just happen to come his way. Indeed, if anyone that I know or ever met deserves lucky breaks, it's definitely him.

Asked how he bears all of the great misfortune life has thrown upon him, he replies that he has faith: "I'm a believer, that I'll see them, again" in the hereafter.

When I dwell on my negatives in my life, sometimes Brian's great challenges in his life puts matters into perspective for me; he's simply the epitome of a strong, positive

person with an enduring attitude towards the enormous crucifix fate has placed upon him to drag throughout his days on Earth.

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Interview With David MacIntyre, Executive Director Of M.P.A.

by Jim Gifford

JG: What educational and social service background do you bring to your new job as our executive-director?

DM: I've been working in the social service field since I was eighteen, which is close to twenty years now. I was a forensic psychiatric nursing attendant to pay my way through school while getting a Bachelor of Social Work. Then I completed my Masters at the University of Toronto in a program now called Tobacco and Psychoactive Substances.

Then I went to work as a therapist at the Centre For Addiction And Mental Health, then known as the Addiction Research Foundation. While there, I did group and individual counseling. When there was an interest in developing an alternative to the traditional Court System, I was asked to develop a new approach to working with people who were addicted to cocaine, heroin, or crystal meth and who were tied up in the Criminal Justice System. Then I went on to help operate the first Drug Court in Canada, which was in Toronto. Later, I was recruited to the Department of Justice, Canada, to help set up the Drug Court in Vancouver, creating and running the treatment center, and helping set up such courts across North America. I also have business experience and presently need to complete my Masters in Business Administration.

JG: Previously, you emphasized the importance of the mental patients' origins of the MPA and a deep acceptance of the consumers' ongoing role. How do you see the membership participating in the Society's evolution and the realization of our potential?

DM: One of the reasons why I came to MPA was the member focus. I had been working for two decades with government, in one role or another. I was attracted by the agency's unique history of the participation of members, both in the organization and the operation, and basically making sure the MPA is meeting the needs of the people it's supposed to be serving. I see this as a real strength of the Society. The membership is represented on the Board and among the staff so I think it's integral and a main piece of MPA.

JG: How do you see the completed revamping of the Community Resource Centre? And what is the prospectus of the future location, also in the Kitsilano Neighbourhood?

DM: One thing that became clear to me, when I arrived, was that MPA needed a little revitaliza-

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The Editorial Board of **In A Nutshell** welcomes letters, articles, and poetry on mental health issues from you, our readers. Authors of writing that is accepted and published will receive an honourarium - \$50 for articles over 500 wds, \$25 for shorter articles, \$10-\$15 for poetry depending on length.

Deadline for submissions for the Spring 2009 issue is Monday, Feb. 09, 2009.

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News Briefs From All Over

Compiled by Scott Dixon

A Man's Home Is His Castle

A BC Supreme Court ruling says homeless people in Victoria do have the right to set up tents or tarps on publicly owned land, despite a City of Victoria bylaw that tried to outlaw "tent cities." There are more than 1,200 homeless people in the city, but only 140 permanent shelter beds and 220 temporary beds for extreme cold weather. Following the court's decision, a Victoria Times-Colonist newspaper editorial called for action, rather than lengthy court fights. "The solutions are known: More treatment, more social and supported housing, temporary shelters to deal with the interim problems, more outreach to connect people with services, increased policing and a community court to force people to choose between change in their lives and traditional criminal justice. The will and the money have been lacking, and the results are evident all around us."

Please Sir, Could I Have Some More?

The great financial collapse of 2008 had a bit of silver lining for American mental patients, although indirectly. The 700 billion dollar financial-bailout package included legislation requiring employers and health insurers to put their mental-health and substance-use coverage on par with their physical-health coverage, according to the Wall Street Journal. Currently, many health plans don't provide as much coverage for mental disorders as they do for medical conditions such as heart disease or cancer. The "parity" measure requires equal treatment, at least for the 113 million Americans insured by plans that will be covered by the new law.

One Walk At A Time

The Star newspaper in the United Kingdom reports that dozens of people strode out in

Sheffield city center to show their support for mental health charity Mind.

Those with mental health conditions were among some of the walkers taking part in the fundraiser. The aim of the event was to raise awareness of the stigma and discrimination around mental health issues. The event included formation stalls set up in Fargate for shoppers to browse and find out more.

"...to raise awareness of the stigma and discrimination around mental health issues."

Fear Is Ignorance

"Not In My Back Yard" - that's what WCBS News in New York City reports what residents in one Staten Island community are saying about a plan to turn a former convent in St. George into permanent housing for the mentally ill.

"It's dangerous. It's scary," resident John Luisi said.

Luisi and several of his neighbors are upset that Saint Vincent will be housing mentally ill people around the corner from where they live. Once it's renovated the former convent will be home to 59 individuals who have come from transitional group homes in the mental health system.

"My kid plays around the circle all the time," resident Roxanne Mustafa said. "I wouldn't let him play around the circle if I knew 59 unstable people are living there."

Hospital officials insist the residents of St. George will not be in any danger and that there will be security and staff on sight to make sure the residents take their medication.

But many have little faith in what St. Vincent's says.

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Some Psychology

by Terrence Levesque

The world is a pretty big place. The media would have us believe that it is under their control; that they have a good grip on everything. Nothing could be further from the truth.

Someone once said that you, as an individual, do not change the world, but that it is the world that will change you. And this statement is much closer to the truth.

We as individuals often bite off more than we can chew, while the world goes on its merry way. We often recoil in horror to the things that are happening in the world. The individual takes a back seat when we are speaking of the world.

Does this mean, then, that the individual is secondary to world affairs? Not at all. It is

individuals who make up world affairs. But each one is only a small part of the whole.

Some individuals play major roles in life and they make a large impact. Others are barely noticeable. It may be the place or the time, the situation, or the event. The world, however, does not respond to the will of the individual. World affairs are not under the control of any one individual. And this is one of the things that we as individuals learn along the way. This is what is meant when we speak of learning some hard lessons.

There is the individual and then there is the individual in the world. That should be fairly clear. We are all part of the whole. And I might add, that society encloses all.

Quote:

Ninety-nine percent of who you are is
invisible and untouchable.

R. Buckminster Fuller

On Psychology

by Terrence Levesque

Much of psychology today is based on the antecedents of behaviour studies. There are many of these antecedents and a wide range of proponents. With time, these theories are updated, changed and re-worked. In this regard B. F. Skinner comes to mind as does Clark Hull, John Watson, Sullivan and Boss, Hans Selye and Piaget to name a few. To have some understanding of their work is very helpful.

But in our modern world, we must take into account the pressures of society's norms. And we must be aware how the world views psychology in general. Not only can people be viewed from a behavioural standpoint, but they can and should be viewed as parts of something larger than mechanized animals.

I would like to think that man has a mind of his own that he uses every day to reason with,

to think with, to make decisions with. A mind that enables him to relate to his peers and his fellow individuals. And a mind that can reject or accept different ideas when necessary.

I have not said anything here about the incorporations of larger concepts such as a belief in God, views on politics or war, or the person's dependency concerning moral issues. Yet the person as an individual in society must deal with these things as best he can.

All these things are part of modern psychology and continue to be studied. My viewpoint is that those in psychology should not lose sight of what psychology is all about and that they should always be aware that when speaking of psychology they are dealing with the whole person.

The Road Less Travelled: Living With Manic Depression

by Huddy Roddan

In my experience, living with a manic depressive (bipolar) person is not easy but the effort it took has been well worth the stress and sometimes the pain that goes with making a life. For both of us. My husband Sam, was a living example. When we first met he was running away from his teaching career. Once he called me from Hope, B.C. His brother wanted me to call the police to find him; to save him from hurting himself. A friend and doctor advised us against that idea and he also warned me very seriously, not to marry him. He thought Sam would be too difficult to live with.

Of course I did not take his advice. I married Sam and we had three children. In four years. Making it very necessary for one partner to work. In those days, the breadwinner was always the man. We carried on. There were times when I would get a phone call from Sam from a beer parlor where he was trying to ease the pain of getting through each day, of feeling like he wasn't meeting his mark, that he wasn't good enough.

At that time, in the sixties, medical treatment for manic depression was not only limited but frightening. Our psychiatrist recommended a electroshock. I remember Sam, taking my hand and walking out of his office. Never to return. On the advice of our family doctor, Sam started seeing a psychologist. In their sessions Sam spoke about his early childhood, the eldest son of a minister at First United Church in the East End of Vancouver. Sam recalled being put in a closet and being left locked in there while his father wrote his Sunday sermons. When he came out to the car where I was waiting, he collapsed and for the first and only time I ever saw him cry. He wept in my arms. In another session he relived his war experiences; being carted out of France, a mental wreck, white tagged: Neurasthenia. When he was well, he wrote about these experiences. Sam was a both a writer and later he became a painter.

But it was a long road. Full of potholes and puddles. There was two months leave of absence

from school after his walk out into the water at Crescent Beach, a failed suicide attempt. Admitted to Shaughnessy Hospital, the long road back.

But married to Sam, I grew a lot; both as a person and as a professional. Initially, I went back to work as a nurse and then applied to coordinate Home Support Services. There I discovered a lot about problems faced by seniors, by the mentally disadvantaged and also much about dysfunctional families. I learned a great deal in attempting to attract staff to give of their time helping the many people and families who needed the Home Support services. Applying for funding was another new area of experience for me; writing letters, grant applications and meeting with Social workers (sometimes to argue and disagree) taught me much. Sam would often type out my reports and letters for me.

But the main reason I found it necessary to work for a wage was there were times that Sam was unable to. This would happen unexpectedly and he would be away from teaching for sporadic periods of time. I worried that one day he might not be able to work at all, or worse, that he would end his life somehow. I was responding to the challenge, that I had chosen by marrying Sam and having children with him. And I discovered that sometimes, hard choices bring such rich results.

Now, at the age of 87 years old, five years since Sam has been gone, I reflect on the many wonderful memories I have of him. I rarely feel lonely as he is still here with me. His whimsical and colorful paintings animate the walls of my suite. I recently finished organizing and arranging the massive amount of writing he did over his lifetime. His stories and articles were published in books, in *The Globe and Mail*, *The Vancouver Sun* and *In A Nutshell*. Sam was creative in so many ways. And he was a wonderful human being. I can still see Sam shaking his fist in the air shouting, "Atta boy, atta boy" which he used to say to both men and women, encouraging everyone to do their best, to go the extra mile.

The Diagnosis

by Janet Roddan

I don't know where to start. But he has always been there. Summoned from a long, dark sleep, he raised his head, misshapen, disgusting. He stared out of me. A single tear welled up in the corner of his watery eye and slid down his broken cheek. Loathsome. I hated him.

For years we had lived anonymously together. I rarely acknowledged his presence and when I did he appeared completely disguised riding his magic carpet and spreading the seeds of dream dust. When I crashed I was filled with so much darkness and self hatred that I didn't see him waiting there in the shadows of my depression. A monster.

I had almost been convinced by the Seasonal Affective Disorder diagnosis. In many ways, it made sense of the confusing symptoms: my intense energy and creativity during the summer months and the predictable slide into the winter doldrums. When a psychologist I was seeing first said the word *bipolar* my heart went icy.

Mentally ill. The word felt cold and weighed heavy, like a chain. One that would drown me, ruin my life. I felt damaged. Like Dr. Frankenstein, my experiment with life had gone terribly wrong. And worse, according to the books I tried to read, I could never fix it. Condemned.

What would my friends think? My partner? What about my job? I would rather have had cancer. At least it's impersonal, these days. There's nothing wrong with *you* if you come down with cancer. No moral indictment. But mental illness is very personal. It's the mark of Cain.

I always knew I was different. I'd learned to live with it. To maximize my energies when I had them, and hide when I felt the hourglass turning over. The Cinderella nature of my illness dictated that I lived like a whirl wind when I felt up and hid when I felt the midnight bells beginning to

gong. I didn't want anyone else to know, that part of my life was lived in the subterranean, basement suite world of depression. So I hid my monster from the world. And did my best to forget him.

I buried myself in my work, activity and achievement. Grabbing at as much as I could, like there was no tomorrow. I pursued my career as a teacher, started a second post graduate degree, maintained my membership in the Canadian

Mountain Guides Association and worked as a Rock climbing Instructor on weekends and during the summer. I finished a full time Film Certificate Program at the Vancouver Film school and kept my artistic flame alive by producing, directing and editing short outdoor dance films. Aerial choreography. That's what my life felt like. A puppet on a string. I thought sleep was a waste of time.

Public education loves people like me, endlessly pouring our selves into the job which always asks for more. More time, more energy, more love; always more. Impossible to leave the teaching job at work, I'd spent all night working on the computer: interneting, researching, editing video. My all nighters caused some serious rifts in my relationship. The pings, tings and typing had so disturbed my partner's sleep that we'd sold our small apartment in the West End and bought a larger studio in the East Side, in part, to put more distance between the bedroom and the computer.

The disease I carried was genetic but not in the genes? It was deeply disturbing to realize how very little the medical establishment really understood about bipolarism. And the huge amount they didn't understand. Frightening to experience modern pharmaceutical medicine. It's not an exact science. Many of the drugs used on bipolar patients were initially developed and used on epileptics, or other unrelated diseases. Imagine a brain surgeon telling you they're just going to

"When a psychologist I was seeing first said the word 'bipolar' my heart went icy."

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A Cause Without A Rebel

by Frank G. Sterle, Jr.

The homeless have somewhat become a cause
but without a force, a determined thrust,
a political entity's a must
to progressively and without a pause
expose capitalism with its flaws
before our poor turn to naught but dust,
so that Society will do what's just,
and more than only add some Charter Clause.
One must come forward regardless of laws,
one with for social justice a great lust,
lust for the hungry worthy of applause,
in contrast to feeling naught but disgust;
it's rare to find a conscience that wealth gnaws,
where wealth's not the only thing one can trust.

"You're Rich? Then You Can't Afford Me"

by Frank G. Sterle, Jr.

The man only works for those who cannot
afford to pay him (there's not any hitch)
to do their harder tasks, even a ditch
level of difficulty if they're fraught;
the man's great charity cannot be bought
nor befall to any of Money's pitch,
especially those classified as rich,
with whom he's numerous times fist-fight fought.
Though the poor folk's work he's many times sought
to work for free but, say, for a sandwich
break or peach pie freshly baked – not a lot;
and the poor are quite grateful for each stitch
he makes for those impoverished and there's naught
he won't do for them, as though he'd an itch.

so sad hallelujah

by reinhart

so sad
no glad
too bad
i went mad

in my dreams brass ships sail on glass seas
and the deserts are thriving with blooming trees

i dream
i scream
i scheme
i clean

my friend the priest asked me to pray for the salvation of his soul
i said to myself there goes a man of g-d on a roll

home alone
me and my poem
reaped and sown
my spirit roams

the sages said to me that a wise man is more valuable than a prophet
the rabbi said to me do not speak the name of g-d the perfect

this lad
a cad
once had
faith so rad

lately it seems my diet consists of bread without leaven
i'm worn out from the struggle and i'm ready for heaven

then i beam
my eyes gleam
tears stream
when i feel mean

all things considered i'm content to be where i am
and i praise the lord g-d almighty as best i can

i sleep
i weep
i keep
the secrets of the deep

nevertheless i believe and hope in paradise on earth
and i honestly can't think of anything that's of more worth

hallelujah

yesterday morning I fell out of love

by reinhart

guitar is missing a string
i'm glad that my
guitar is missing a string
it helps me compose new songs
i invent words
i study
i practice
i write original verse
i, i, i sing

sometimes you can be so cruel
sometimes your tongue is hateful
sometimes malice and spite
pump through your veins
you make me hurt
with ill intent
you cause me
anguish

yesterday morning i fell out of love
it was 11 am
the coffee was cold
and i drank it anyway
i had learned that you despised me
because i was kind
and you said that i was weak
i wish you would learn
the truth about our love
i hope your life gets better
i wish you well
but go

Meditation As Play

by Oliver Cross

What is Meditation?

Exactly.

People who know I meditate and perhaps don't do it themselves... not consciously, at least, I suppose... ask me that question.

"Meditation is sitting quietly, on a pillow, focussing simply on your posture and breathing."

"Meditation is a safe way to spend your time. Meditation keeps you out of trouble when strong emotions tempt you to do things that may make a situation worse... like seeking revenge, acting violently out of hatred, or taking a hit of your favourite addictive substance, whether it be cigarettes, alcohol, what have you, or something illegal."

"Sometimes I ponder the question when I sit down to meditate. What is meditation? Good question. Not knowing the answer is not a good reason not to do it."

Meditation shifts and changes. I believe we can get into habits and routines, familiar places and spaces in our meditation, coming to believe that we may know what it is in time, with practice.

I also think that, over time, we need to throw out those attachments as well.

Meditation is simply moving into the unknown. There are no experts, only courageous practitioners.

A meditation practice has to breathe, like the participant. As such, over time, we need to practice. We need to spend time meditating. But

there also are times when, to gain perspective, we need to not practice as well. Times when we need to throw out our familiar routine, whatever it is, and see what comes, what settles, what perspective we gain from being a little farther afield. Sometimes we need to see what life has in store for us, to see what we may be missing in our spiritual

practice. We may notice something else, realize another way, recognize a new direction... find a new focus— it is a chance to re-focus.

For non-practitioners, the change in routine to gain new perspective is beginning to meditate, beginning to establish a routine in which we simply are. Meditation is new and exciting.

For practitioners, getting more in touch with ourselves may involve changing the routine as well, forgetting for a time, trusting life for a time to take us where it will without our conscious effort to exercise the familiar in the form of our spiritual practice (who knows, it may be fun).

*"Sometimes we
need to see what
life has in store
for us,"*

Quote:

"Such thought such thought have I that hold it tight
Till meditation master all its parts,
Nothing can stay my glance
Until that glance run in the world's despite
To where the damned have howled away their hearts,
And where the blessed dance..."

William Butler Yeats

The Diagnosis

(continued from pg. 6)

"Try some things out" as you go under the anesthetic. I felt like a guinea pig, trying drugs that often seemed to have less impact than their side effects; I gained over 40 pounds in three months. I was horrified. By the label, the treatment and my future prospects. My life seemed doomed.

So I complicated matters. They call it self medicating. For the first two years after my diagnosis I continued to smoke pot. Then I started using crack cocaine. It sped up my slide towards the edge. I thought it was taking me to the moon, and I didn't wake up until I was crashing backwards through the glass window. My life exploded.

But I've always believed I'm lucky in my misfortune. In the recovery movement I learned to mend some of the holes that had left me feeling so empty for so many years. Mostly I learned how to expose the things that disturbed me, to name my darkest skeletons. Words foster healing. When a shadowy secret, like mental illness or addiction, is exposed it looses its grip, its power. I began to learn how to live with some of my contradictions, labels and monsters and to finally come to appreciate some of the paradoxes of my life.

One of the books I tried to read early in my diagnosis showed pictures of two brains. The one

in the manic state was lit up bright orange and yellow. Neurons going off like fireworks. The depressed brain was a deep, lost lagoon blue. Very little neural activity. Sometimes, when I'm not down, I wonder if perhaps depression is necessary; as a resting period, a time to draw in. The yang in the yin. The darkness necessary, required, to birth the day.

"Mostly I learned how to expose the things that disturbed me, to name my darkest skeletons. Words foster healing."

My psychiatrist lent me a book of people who were bipolar. An impressive bunch ranging from Abraham Lincon to Michelangelo, Bach and Winston Churchill and Virginia Woolf. I began to see that I am in good company. The world needs people like me. Not just to work in places like public education but just to be here, to create and to offer what we have to contribute. I see my creative force as my *little girl*. She's small and young but she's a very powerful drive in my life. I see in her the seat of my creativity and inspiration; it's her flying the magic carpet of my disease.

And now, when I close my eyes, I see that little girl. She looks up from where she is playing in the field of flowers. And there is the monster too, still misshapen and grotesque. But the little girl isn't afraid. She takes his hand now, because she knows, he won't hurt her. They can be friends, at last. And a tiny tear sparkles gently as a small and crooked smile grows slowly over the monster's face.

Quote:

"Light is meaningful only in relation to darkness, and truth presupposes error. It is these mingled opposites which people our life, which make it pungent, intoxicating. We only exist in terms of this conflict, in the zone where black and white clash."

Louis Aragon

Interview With David MacIntyre

(continued from pg. 2)

tion. When I first went into the Center, I was disappointed in its condition. It had once been the heart and soul of MPA. Everyone from all the different houses and programs would meet there, and over the years that changed. I wanted to bring back a sense of community because when I talk to people inside and outside the agency they don't know that we are one of the largest non-profit agencies in the province of British Columbia. Even our own members didn't know all the different aspects of it. So what I'm hoping to do is, by revitalizing the CRC, we start to bring people back and create a supportive community again.

The way the CRC was before wasn't allowing people to have dignity and feel respected. We owe the members, and the staff, more. There are some new expectations around behaviour and we're seeing older members coming back, feeling safer.

There is a good breakfast, intentionally no lunch, and I'm trying to move toward the evening meal being a full Canada Health Guide meal rather than a lot of carbs. One thing to know about the CRC renovation, there's new furniture, a new big screen t.v. with surround sound, and we're hoping to program it 40% of the day, so we can have organized activities.

As for the new Center at Seventh and Fir, they're expecting it will be ready in 2010. There

will be 62 units of housing, independent apartments, above the two floors of the CRC. The residence will be separate, with its own dining room and meeting areas.

JG: What do you see as the primary challenges for the MPA and how do you see it developing in the coming years?

DM: I think the first thing we have to do is make sure all the programs are running well and meeting the members' needs. So we've already started operational planning to make sure the foundations are solid, in areas such as licensed housing and the CRC. It begins with staff and members clarifying the direction in which they want to go.

Operational planning is important and makes sense, for reasons such as being sure we meet all the requirements for funders and that we have principles and programs to make sure that we have some standardization. Over the years, each division has done their own thing, so there is a unity lacking. We need more balance and the reasons for that are to make the transition between the programs easier, but also we start working as one.

JG: Thank you, David

DM: Okay.

News Briefs From All Over

(continued from pg. 3)

"If we can move, we'll probably move," Mustafa said.

Man Continues To Walk With Dinosaurs

Baylor University studies have found that clergy and church leaders may dismiss diagnosed mental illnesses of individuals in their congregation. Dr. Matthew Stanford, Baylor professor and director of graduate studies, conducted two research studies to assess the perceptions encountered in the local church by individuals diagnosed with a mental disorder.

An anonymous survey of mentally ill church-goers across the United States and Canada, was done via the Internet.

The first study found that of 293 Christians with a diagnosed mental disorder, approximately 30 percent reported a negative interaction with the church.

This includes abandonment by the church, which equated mental illness with the work of demons and suggested that the mental disorder was the result of personal sin.

The second study found that of 85 self-identified, mentally ill Christians, 41.2 percent of them said that the church had dismissed the diagnosis.

Dismal or denial of mental illness happened more frequently in conservative churches than in more liberal ones.

Websites Of Interest To Consumers/Survivors/Ex-Mental Patients

This list is not intended to be comprehensive or exhaustive, and has left out many well-known sites that are widely available and easily accessible from local directories.)

Organizations (General)

www.mind.org.uk www.power2u.org www.mhselfhelp.org www.wnusp.org www.tao.ca/~pact
www.u-kan.co.uk www.mentalhealth.com www.icspp.org www.oikos.org www.icomm.ca/csinfo
www.aapd-dc.org www.mindfreedom.org www.geocities.com www.mdri.org www.breggin.com
www.cvdinfbase.ca/mh-atlas/ www.szasz.com www.antipsychiatry.org www.peoplewho.org
www.walnet.org/llf www.mentalhealth.org.uk www.fsu.edu/~trauma/ip.html www.radpsynet.org
www.contac.org www.buildfreedom.com/ft/psychiatric_survivors.htm www.samhsa.gov
www.nucknfuts.com/index.php www.cam.org www.lino.com/~raiddat <http://en.wikipedia.org/wiki/Antipsychiatry> <http://aix1.uottawa.ca/~nstaman/alternatives/OVNVinternational.htm>

Advocacy and Activism

www.mental-health-matters.com/activist.html www.m-power.org www.narpa.org
www.protectionandadvocacy.com www.cchr.org www.popan.org.uk www.advocatweb.com
www.gamian-europe.com www.hri.ca www.hrweb.org www.iahf.com www.benzo.org.uk/prawi.htm
<http://members.aol.com/jimhofw/jimho.htm>

Alternatives

www.talkingcure.com/index.asp www.alternativementalhealth.com www.medsfree.com www.moshersoteria.com www.transtherapy.org www.patchadams.org www.healthfreedommovement.com
www.weglauflhaus.de www.elcollie.com www.stopshrinks.org www.lstpm.org
www.emotiosinbalance.com www.the-bright-side.org/site/thebrightside/ www.doctoryourself.com
www.emotionsanonymous.org www.projectresilience.com www.bu.edu/cpr/rr/alternative/
www.religiousfreedoms.org www.wildestcolts.com <http://stopbadtherapy.com> http://nht_amhl1.blogspot.com <http://essence-euro.org/iasp/> <http://myweb.tiscali.co.uk/erthworks/nonmain.htm>

Drug Information

www.larsmartensson.com www.drugs-and-medications.com www.drugawareness.org
www.outlookcities.com/psych/ www.canadiandimension.mb.ca/v35/v35_5ab.htm#three
www.nmsis.org www.antidepressantsfacts.com www.socialaudit.org.uk/1.4.html
www.chemsense.com www.prozactruth.com www.quitpaxil.org www.talkingcure.com/archive/drugs.htm www.truehope.com www.astrocyte-design.com/pseudoscience/index.html <http://members.fortunecity.com/siriusw/Biochemical-Imbalance.htm> <http://groups.msn.com/SIDEEFFECTS>
www.benzo.org.uk

Children & Youth

www.voice4kids.org www.aspire.us www.hearmyvoice.org www.ritalindeath.com www.p-a-r.org
www.adhdfraud.org

Tardive Dyskinesia/Dystonia

www.power2u.org/selfhep/tardive.html www.wemove.org www.dystonia-support.org www.dystonia-foundation.org www.iatrogenic.org/index.html www.breggin.com/tardivedysk.html
www.caromont.org/16036.cfm www.emedicine.com/neuro/topic362.htm www.drugdigest.org/DD/Articles/News/0_10141_513136_00.html www.psyweb.com/Diction/tardived.html www.thebody.com/pint/phenos.html www.reglan-lawsuit.com www.ninds.nih.gov/healthandmedical/disorders/tardivedoc.htm www.easyweb.easynet.co.uk/simplpsych/tardive.html

Bulletin Board

The Self-Help Resource Association of BC (SHRA) has changed its name to **PeerNetBC**. They also publish a Directory of Self Help/Support Groups in Greater Vancouver with over 600 listings, many of them dealing with mental health issues. **PeerNetBC** is located at suite 306 - 1212 West Broadway, Van. BC V6H 3V1 Tel. 604-733-6186 Fax. 604-730-1015 e-mail info@peernetbc.com . Website - www.peernetbc.com

Vancouver/Richmond Mental Health Network sponsors many self-help groups. Office at #201 - 1300 Richards Street, Vancouver, BC V6B 3G6 Tel. 604-733-5570 Fax: 604-733-9556 e-mail vrnhn@vcn.bc.ca

Named after Vincent van Gough's homeopathic doctor, Paul Gachet, **Gallery Gachet** works to provide a safe, borderless place of artistic expression. It is located at 88 E. Cordova, Vancouver. Tel. 604-687-2468

Ron Carten, Co-ordinator of **Vancouver /Richmond Mental Health Network** has a new blog on-line at www.aimstest.ca. Check it out for interesting information on consumer/survivor issues from a personal viewpoint.

Check out the **Our Voice** website at www.ourvoice-notrevoix.com.

Websites Of Interest To Consumers/Survivors/Ex-Mental Patients

(continued from previous page)

Electroshock

www.ect.org www.banshock.org www.idiom.com/~drjohn/review.html <http://bmj.com/cgi/content/full/bmj;326/7403/1363>

Forced Treatment

www.freedom-center.org www.namisco.org/newsletters/August01/MindAid.htm www.hri.doccentre/docs/gosden.shtml www.garynull.com/issues/Psych/Index.htm www.psychlaws.org www.kqed.org/w/hope/involuntarytreatment.html

Mental Health Law

www.bazelon.org www.ac.wvu.edu/~knecht/law.htm www.psych.org/public_info/insanity.cfm www.forensic-psych.com/pubs/pubADment.html www.psychlaws.org www.imhl.com www.ialmh.org www.justiceseekers.com www.safe-trak.com/main/competencyl.htm www.abanet.org/disability/sites.html www.experts.com www.expertpages.com/psychiatry-psychology.htm www.psych.org/advocacy-policy/leg_res/apa_testimony/testimonysub-crimeposted91800.cfm www.ilppp.virginia.edu/ www.law.cornell.edu/topics/mental_health.html www.helpforparents.net/LegalResources/1LegalResources.htm

History of Mental Health Care

www.psychiatricsurvivorsarchives.com www.webcom.com/thrive/schizo/kdarch.html www.cwu.edu/~warren/addenda.html www.epub.org.br/cm/n02/historia/psicocirg_i.htm

Online Publications

www.mentalmagazine.co.uk <http://members.aol.com/asylumpub> <http://userpage.fu-berlin.de/~expert/psychnews/>

Orthomolecular Medicine

www.islandnet.com/~hoffer/hofferhp.htm www.islandnet.com/~hoffer/ www.orthomed.org

