

By Evan Matthews

# For any person who's ever struggled, to any degree.

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# Introduction

The highs and lows of life can push any person to experience deterioration in their mental health. Without proper coping mechanisms in place, a person may not be able to bounce back appropriately. How one recovers from such experiences is an example of how psychologists define whether or not a person should be diagnosed with a mental illness. By having the right supports and coping mechanisms in place, a person recovering from these experiences in a healthy way can avoid suffering later in life for longer periods of time.

#### Manitoba, a champion of mental health

By moving away from the traditional healthcare model towards a recovery-oriented mental health system, Manitoba has become a champion in the field of mental health. The Government of Manitoba has acknowledged the recovery-oriented system as its official approach. The province defines recovery as a journey of healing and growth owned by and is unique to each individual. Recovery is built on individual, family, spiritual, cultural and community strengths, which enables a person to live a powerful, resilient and meaningful life.

#### **Recovery**?

Organizations like the Canadian Mental Health Association or the Program for Assertive Community Treatment (PACT) teams are the first of their kind to apply this recovery-oriented approach to help those in need. These organizations facilitate recovery-oriented workshops and focus on setting individual goals. These goals are broken down into manageable pieces, which help the person suffering to address issues specific to their situation.

Recovery is not so much a practice as it is a culture. That is, it isn't so much what you do, but how you do it. Recovery is about building a meaningful and satisfying life — a life the person defines themselves regardless of whether there are ongoing symptoms or problems. Allowing a person to be self-directed, empowered and respected in their recovery journey is one of the keys to success. Recovery is a non-linear timeline, and requires peer support and hope. Various methods of therapy are becoming more widely accessed and accepted. Journaling, scrapbooking, art therapy or different forms of talk therapy, such as narrative therapy, cognitive behavioural therapy and dialectic behavioural therapy, are being used regularly.

#### The mental health spectrum

There are varying degrees on the mental health spectrum. A person may have schizophrenia, but be in a good place in their recovery, whereas someone who hasn't been diagnosed with anything may be suffering through a time of deteriorating mental health. Someone may have never had a diagnosis and is currently living a happy life, while a person recovering from depression may relapse into a similar depression.

The point is this: everyone has a place on the mental health spectrum.

#### Intersectionality

Every person will likely have a different interaction with the mental health system. Just because a person fits into certain generalities, such as gender, skin colour or having a disability, doesn't mean they have experienced the same oppression as others with some of the same characteristics or experiences. For example, a homeless indigenous man may not have the same experience with the mental health system as an indigenous woman working as a reporter for a high-profile news organization.

Understanding how people from all cultures and situations register on the spectrum is important in shedding the stigma surrounding mental health concerns.

#### Easier access

In discussing mental health resources with professionals in the industry, there is a widespread belief that accessibility to mental health resources needs to be made easier. As this booklet will demonstrate, the current framework of our society often fails to provide the resources needed to cope with issues surrounding mental health on a day-to-day basis. That means people who are already suffering are forced to become their own advocates. The justice system often fails when trying to rehabilitate people who have entered the system as it focuses on punitive methods rather than restorative ones. The workplace lacks the infrastructure to deal with employees who experience languishing mental health, and the financial supports from government are not in place to adequately take care of those suffering. Recovery-oriented plans are specific to the individual seeking them, but government funded support is only supplied over a standard timeline.

#### There is hope

Therapy methods are available for various mental health issues. More and more people are accessing the services, and the shame and stigma associated with mental health is being left in the past. The common theme in The Road of Recovery's stories is hope. When a person has hope, they are able to make progress. Recovery is about rediscovering a sense of identity, an identity separate from illness. This booklet relates a few people's individual recovery stories, and dissects the journey from the various perspectives involved.

The stories in this booklet are not bound by gender, race, cognitive ability, age or any other labeled generalities. The stories are a set of circumstances given to and dealt with by individuals.

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#### ELIGIBILITY

Living with a mental health diagnosis or disability

Not qualified or recipient of Employment Insurance in past 12 months

Currently unemployed or under-employed (less than 20 hours per week)

Seeking rapid employment with approximate start date of 4 weeks from start of program

Willing to be marketed to employers as a participant in the program

Motivated to work and willing to participate in frequent appointments every week



Canadian Mental Health Association Manitoba and Winnipeg Mental health for all

As the nation-wide leader and champion for mental health, CMHA facilitates access to the resources people require to maintain and improve mental health and community integration, build resilience, and support recovery from mental illness.



# **James' Road**

Nobody chooses their family, certainly not their biological parents.

James Grant — once Jamie Grant — recalls being born into a home not knowing of love. Born to a Polish-Ukrainian mother and a French father, James' life of abuse, loneliness and isolation started in 1960 in Thunder Bay, Ontario.

"As a young boy and into my adult life, I did not know what it was like to be loved," says James. "My father would hurt me with his hands when I was just a baby. My mother said my father would tell the doctor, 'He fell out of the crib."

#### More than blood

The family home is supposed to be a safe place, a place filled with love. James, now 55-years-old, says instead his father would mentally and physically abuse him and his mother. "There was no family," says Leona, James' now 75- year-old mother. "I mean there was a mother, father and kids, but we weren't really what I call a family. My family growing up was totally different."

James' sisters would often run outside when their father was drinking, and never really got to know their father.

"Jamie tried to spend as much time with his father, trying to figure out how to get his father's love," says Leona. "His father couldn't do it. All Jamie got more or less was violence from his dad."

#### Cycle of abuse

James' father's issues stemmed from his own father, who was also an alcoholic and abusive parent. James' father had a severe drinking problem too, and James remembers him seldom being home. However, when his father was home, he would be violent. "I remember him hitting me and telling me how stupid I was," says James. "One time I dropped my marbles on the floor which made some noise. He came upstairs and into my bedroom, he picked me up, and he threw me against the wall. He sure was angry. He'd always come up with a reason why he could be physical with me."

But it was James' mother who endured most of the physical abuse, while a lot of James' abuse was mental.

"I've always loved my husband, but I found out he didn't love us," says Leona. "He didn't give a shit about the kids or anything. What I learned over the years is my husband lived for two things: booze and sex. That's it."

#### A quiet kid

In spite of the abuse, James would laugh a lot. Many times it would be during one-on-one conversations, and his mother couldn't figure out why. Not until years later would anyone discover his laughter was a byproduct of being anxious, scared or simply not knowing how to communicate effectively. His laughter was a reaction.

"Every time I'd try talking to him, or when he had done something wrong, he'd laugh at me," says Leona. "I didn't know how to deal with it. I thought he was just being a spoiled child."

Leona did what she could to unravel the mystery surrounding her son, but there was little knowledge or support within the community. "I was taking him to psychiatrists, psychologists, everywhere you can think to take a child," Leona recalls. "I was trying to figure out was wrong, but there was nobody I could find to help."

Leona says she knew there was something mentally wrong with her son. "It was the reason I took him to different psychiatrists. But how do you explain that to somebody?"

#### Like it wasn't enough

The constant abuse James was enduring was not limited to his own household.

"I was molested as a young boy. I told me father and he did nothing, like he didn't care," says James.

The man who abused James lived down the road. James was a friend of the man's two younger brothers. One day James went to his friends' house to ask the two youngest boys to play. They weren't home, and their older brother invited him in where the molestation took place.

"My mother was scared of my father and scared to tell the police, so no one did," says James.

Nothing ever came of the accusation. James carried the weight of multiple abusers, and he says stress was coming at him from all directions.

Isolated and unable to learn Although there were other children around, James found himself to be very withdrawn from the world. He preferred to be alone. His struggles weren't limited to a social nature. "I found it hard to learn," James remembers. "I would bring my fears of my father to school, so my learning suffered. Learning was too hard, so I wouldn't try at all."

James says other kids bullied him, and he was already growing up believing he was stupid.

"I never thought of him as stupid, but I thought he was the kind of kid who just wouldn't listen," says Leona. "He wouldn't understand, or he couldn't at the time. I always figured he could though, because he was my first child. You don't really know what it's like when it's your first — nobody taught you nothing."

James grew up unable to focus on the things most kids have the opportunity to learn. Things like spelling, grammar and the ability to communicate effectively were lost on him, as his mind was occupied with fearing for his safety, and looking for love and support. Leona says James' mental development was slower than normal, and through the years he was not able to approach situations the way he wanted to.

#### The justice system

According to Leona, James would go to school but he wouldn't learn. Eventually he stopped going to school all together. He had already lived a hard life, and as time passed, James entered his teens and had his first interaction with the legal system.

"He was cutting lawns one summer for money," says Leona. "He knocked on the door after finishing the yard, and no one answered. He went in and found some money in the cookie jar, but the woman was home. She reported it. I think that's why he went to the boys' school."

Thus before turning 16, he had lived in four different group homes and "boys' schools" for troubled children. He moved on from these to jails.

"I was in and out of jails a lot from 16 to 18-years-old," says James. "Thunder Bay District Jail a number of times, Millbrook Correctional Centre, Ontario Maximum Prison for six months."

Every time James would be released from

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I thought he was just being a spoiled child. I was trying to figure out what was wrong, but there was nobody I could find to help

- Mother, Leona Grant

"

prison, he would go find his dad and drink. Often times his father wouldn't want him around, but James remained persistent. He would keep trying, and eventually his dad would let him hang around. James says his father would often still leave him to be with other people, doing God knows what, and this hurt James deeply.

"I wanted him to care about me, but that just wasn't going to happen," says James. "I remember seeing him beat a guy really bad with his feet when I was only 12-years-old. I cried because it was scary to me."

#### The cycle continues

A vicious cycle of abuse, addiction and incarceration began to take a toll on James. He was living the same lifestyle as his father, and his father even had to save him from a drug overdose.

As James became older, he tried to carry on his father's legacy.

"I tried to be like him with fighting, but I

couldn't fight the same way with speed," recalls James. "I won fights, but I lost a lot more than my father ever did. People used to tell me he'd never back down from a fight."

James was eventually sent to a treatment centre called Lakehead Psychiatric Hospital in Thunder Bay. While subject to a zero tolerance policy on alcohol, James continued to consume alcohol. Then, having not consumed a drink in five weeks and feeling guilty about the situation, James told his group leader about what happened. James was kicked out of the program.

"I was walking down a long hallway feeling really sad and crying," says James. "I kept asking myself, 'Why are people giving up on me all the time? Where am I going to live, or even eat?"

Having no idea where to get food or shelter, James says he decided to drink and pop pills on his way back to "Skid Row". In retrospect, James admits he was trying



to numb the pain that was filling his mind. He didn't have the mental tools necessary to cope, and he was about to pay a heavy price for numbing his pain.

#### The assault

One fateful night, James recalls drinking and popping pills with a man who knew both him and his father. The man warned James, "You know how you are when you mix pills with alcohol," but James didn't listen and blacked out.

"I remember this lady not too far from me, walking with a purse," says James. "I right away thought of money so I could keep drinking. I knew in order to get the money I would have to rob her. By the time I got to her she was at her car. I didn't want her to see my face (and remember me), so I started beating her bad. All the built-up garbage I had inside me, I released it all on that lady. I was having a hard time stopping. I remember thinking (while it was happening) I was going to kill her, and get life in prison."

James remembers a car parked next to the attack had a big dog in it, and while the attack was happening the dog began making a lot of noise. The dog wouldn't stop barking, so James got scared and ran off.

"The dog may have been what saved her life," says James.

#### The arrest

Whereas his victim did not, James made it home that night. He slept for a short while, got up, and went back to the bar.

"I was inside and I ordered two beers," says James. "I was just sitting down when two guys came up to me and asked, 'Are you Jamie Grant?'" James answered, "Yes."

The men were officers, and they read him his rights. He was under arrest.

After the brutal attack, the assaulted woman lay in hospital for two months. The woman's parents, who were Christians, forgave James before a judge sentenced him.

"His lawyer told me the judge was going to use Jamie as an example," says Leona. "I asked, 'How can you use a child as an example?' Mentally he wasn't grown up, he might be 18, but he's a kid who doesn't even know what's going on."

#### The sentencing

In 1979 James Grant was sentenced to seven-and-a-half years and six months for attempted murder.

"This is a part of my past I hate ever having had happen," says James. "For decades I've felt bad whenever I think of the crime. I don't know if I've forgiven myself, even now."

James spent five years in Stony Mountain Institution before being given early parole. The judge who sentenced James suggested he be sent to a treatment centre immediately, but it didn't happen right away. Finally, two years into James' sentence, he was sent to Saskatoon Prison Hospital, but his stay wasn't very long. Four or five months later, the staff told James, "You aren't ready to change, and you're being sent back to Stony."

"They were right, I wasn't ready to change," says James. "I cut my wrists and the right side of my neck. Back then I really did hate

### My parole officer was right that I'd change, because it's happening now

### James Grant

myself and how I didn't make sense when I would talk." The learning disabilities from James' childhood were still affecting him in adult life, pushing him to this suicide attempt. James remembers he would laugh a lot during one-on-one conversations. He was later told it was because of his nervous anxiety.

"I remember thinking, 'If I can't talk right, I'll laugh," says James.

#### End of an era

James' mother and father visited him a couple of times while in he was in prison, but Leona said financial limitations made it hard to visit institutions outside of her own city. James recalls his father visiting him the year prior to his death, while he was in Stony Mountain.

Toward the end of his sentence, James was sent back to the hospital in Saskatoon for a second time. He was making better use of the facilities this time. During this second stint, his father died. Leona told James it was sclerosis, as kidney and liver failure proved alcohol to be his father's cause of death. Ironically James' father died by abusing not a person, but a substance. "Alcohol was destroying his health fast," says James. "When he came to see me, he looked very old in my eyes. He died young at the age of 48."

#### Same old story

After finishing his treatment in Saskatoon, James was released to a halfway house on Edmonton Street in Winnipeg. A familiar occurrence for James, one day he almost drank — but somehow he managed not to. If he had, he would have breached his probation order. He once again told a staff member of the halfway house. The next day a police car was sitting outside.

"My gut feeling was the police car was for me," says James. "I was right. I was sent back to Stony, and it wasn't long before something serious happened there. Two guards were killed in 1984."

The guards were killed at the end of his cellblock, a memory that stays with James to this day. He remembers the institution going into a lockdown for two months and being fed sandwiches through the bars. While he was incarcerated, he spent time paying for his past mistakes but still wasn't working on a brighter future for himself. Later in 1984 James was released back to the halfway house. He was then able to move out on his own, with mandatory check-ins with a parole officer for the next three years.

#### Someone on his side

He was finally given the clear instruction from his parole officer. "If you slip up and have a drink, just don't tell me."

"Even though I had so many problems, I found she believed in me," says James. "She gave me the time frame for how long she thought my recovery might take, based on her experience."

James says his parole officer was off regarding the number of years it would take; it's something he still works at today.

"But she was right that I'd change, because it's happening (now)," says James, referring to his ongoing journey of recovery.

#### Relationship issues of his own

Over the next five years, James would enter into a few serious relationships with women. None of them lasted.

"They didn't work because I treated them like my father treated me," says James. "I've learned the hard way. I was really mean, controlling, jealous, mentally and physically abusive, and I had a sex problem".

One relationship was was slightly different from his usual cycle, as it was the woman who abused him more often than not. The relationship also ended up being his longest — 17 years.

"I was on welfare and hooked up with a girl who helped me waste a lot of my life," says James. "It sounds crazy, but instead of being the abuser I let her beat me up a lot. She stabbed me a number of times over our 17 years together. It was a very scary and lonely time for me."

James eventually fought back. He was charged and released the next day.

"I couldn't take the hits anymore," he says.

James realized the way he handled the situation wasn't overly surprising, as it was the only way of life he had ever known an unhealthy way of life.

#### A new support

James was then introduced to a counselor from Klinic, Lori Grant (no relation). Lori says James had trouble communicating, just as he had described throughout his life.

"I see where if James could be coached more consistently, to have more relationships, so he could pick and choose which ones he wanted to strengthen, he'd be enriched," says Lori. "He has so many good things to offer. He had all these other preconceived notions about how other people saw him interfering with him even attempting (relationships). It would keep getting reinforced that he was on the outside (of society), partly because he expected to be on the outside, but I don't know that anybody had invited him in."

James says he was able to recognize Lori had faith in him.

"She was very straightforward with me. Later on I would realize how helpful she was to the beginning of my recovery," says James. "She helped in getting me a taste of trying to change. She was very nice and caring. But I was more interested at the time in talking about problems instead of working on solutions." James has since been diagnosed with Post Traumatic Stress Disorder (PTSD). PTSD is often associated with symptoms of intrusive and upsetting memories of an event, flashbacks, nightmares, and can lead to depression and anxiety.

#### Cracks of society

Lori acknowledged the flaws within the system, and she says they played a major role in the deterioration of James' mental health. She even referenced issues with the Employment and Income Assistance program, saying they seem to work upside down.

"There are so many vulnerable people who have such few resources. I don't know how he slipped through so many cracks," says Lori. "I don't think the systems out there helped him, and (they) maybe made things worse in some ways. His brushes with the criminal justice system were missed opportunities to be helpful to him, and I think he carries a lot of shame rather than having people trying to help him get out of there."

Lori refers to the cracks within our societal framework. James' community didn't have the correct resources to help him when growing up, and with the justice system punishing him instead of rehabilitating him are other examples of the these cracks. Lori says James has confessed carrying a lot of shame from his time within the justice system. His experiences made him less likely to trust health care professionals and to not be open or honest. "Maybe that's wise," she says.

The Canadian Mental Health Association Shortly after the crucial step with Klinic, Lori referred James to the CMHA where he has spent nine years with the organization in some capacity. He started by accessing their services and was given tools to help him cope and communicate. Now James is a volunteer with the CMHA's Rehabilitation and Recovery Service.

The instability James experienced in his life was counteracted by the CMHA's patience. Its programs helped James to set goals and ultimately achieve those goals. Dealing with the learning disabilities that hindered James all his life was his first goal. He was having trouble understanding what CMHA employees were telling him about his recovery and the things he was working toward. In order to get on the road of recovery, he first had to understand it.

"I have to admit there were times it was hard to believe I could experience the change that I needed in my life," says James. "But the CMHA never gave up on me. For that reason I got to see I was going to change over time."

After James' communication skills began to improve, he was able to approach his recovery plan with understanding. Having a sense of social belonging and acceptance, which the CMHA provided, proved to be a big part of James' recovery as well.

"Volunteering helped me become more stable and much stronger and healthier," says James. "There are people who have been a big influence in my recovery. I'm grateful for their help and for not giving up on me."

#### Update

Things have been changing fast in the last year for James, but in a good way — and he doesn't mind at all. He finally realizes he deserves to experience all the healthy change. "It feels good to have a voice and to use it," says James. "No more feeling lost or stupid in this world."

James has been living sufficiently and independently now for seven years. He has four cats, and they've been instrumental in his recovery too. While this relationship made him unhappy at one point, he decided he wanted to work on it. He has become a very gentle and loving cat companion, and he was relieved when he found those qualities inside him.

"I learned to love them and they love me back," says James. "They've been a huge therapy for me."

In healing and becoming healthy for the first time in his life, James has learned to deal with his past. He has been treating his mother better now and she finally sees him in a healthy place within his recovery.

"My mother, she's never stopped loving me," says James. "All I put her through for decades and she never gave up on me. I brought her to tears many times over, but now I can say I've got respect for my mother. We now have a good mother and son relationship. She's my best friend. She seems to be happy, and I like that."

James still phones, but his calls are different now as his mother does not have to worry about him anymore or expect his calls to be bad.

"There were times over the years where I didn't believe he had the ability to get to where he is today," says Leona. "He surprised me when he started. I'm proud." His former counselor Lori says James still has a way to go, and she would like to see him settled more, as he can still get anxious. But she says he looks more engaged in the world and feels he has a right to be here. He now realizes he belongs in the world the same as everyone else.

Leona says James is finally developing his mind and using it. It's helpful he's not using drugs or alcohol the way he used to. A life filled with drugs, alcohol and sex were the ways James tried to fill the void in his life, but none of them did the trick. He remained in what he calls "the dark side of life" for a very long time, but he is now on the road of recovery.

"I've been away from the stuff harming my health for three years," says James. "It might be at the late age of 55, but I've learned through people that it's better late than never."

His mind is no longer in a fog and so he thinks more clearly. He loves his cats and wants to be around for them and his family. James now has the tools to deal with his panic attacks, his anxiety and his past.

"Recovery is hard," confesses James. "I see life now a whole lot clearer and my mind is more open. No matter how hard things get, I have to remind myself how far I've already gone and how much further I can go by not giving up."

James says the road of recovery is long, but he encourages people to use his story as an inspiration.

"May you find the strength to continue and to make the changes you want to experience in your life." Getting loud means speaking up to stop the discrimination and the stigma that often go hand in hand with mental illness. It means using your voice to raise awareness and build support.

For someone at home. For someone at work. For yourself.

# CMHA'S 65TH ANNUAL MENTAL HEALTH WEEK MAY 2-8, 2016

**GET LOUD** to maintain positive mental health. **GET LOUD** to get it back.

We all want to be healthy and happy. No one can be truly healthy without positive mental health. It involves how we feel, think, act and interact with the world around us. Mental health is about coping with the normal stresses of life and making a contribution to our community. Ask for help or seek advice from a professional—give your mental health the attention it needs and deserves. Visit MentalHealthWeek.ca to GET LOUD for mental health

### Your path to mental well-being

Positive mental health isn't about avoiding problems or trying to achieve a "perfect" life. It's about living well and having the tools to cope with difficult situations even during life's challenges.

Each person's path to mental well-being is unique. We all have our own goals, our own challenges, our own talents and our own supports. But positive mental health is within everyone's reach. Staying mentally healthy is like staying physically fit it requires effort.

But the rewards are worth it! Everyone has to face stresses and demands, but we all need and deserve breaks. Daily physical exercise, for instance, not only makes you stronger and more fit, but it also improves your mood and your sense of well-being.

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# **Heather's Road**

#### The trigger

An anonymous threat

promising a daycare shooting ultimately proved hollow, but a trigger of a different kind was pulled in Heather Tabinski-Stortz' life in the following months.

Forty-year-old Heather says the daycare she worked at had come under new management at roughly the same time as the threat. The staff was experiencing a culture shift, and from Heather's perspective the shift was anything but positive. Heather broke down, suffering, she says, from a deep depression. Heather's husband of seven years, 57-yearold Alvin Stortz, says the couple had only been married three months at the time of her breakdown.

"It was a tough start to our relationship as a married couple," says Heather. "I had lost all caring of the world around me, and it was a very slow waking up. And still, whenever I would talk to him about an idea I had or where to get help, he would say, 'Anything you need, we will do."

What Heather calls her breakdown started in July. By August she went on a six-week stress leave from work.

"She told me she just couldn't do it anymore, and I just backed her up on it," says Alvin. "Her health was more important than working at a place that was stressing her out like that."

#### Blue Cross-ed

Heather says the insurance company she was with at the time, Blue Cross, would only allow for six weeks of paid leave. As she neared the end of her time off, Heather told Blue Cross going back to work was not a possibility. "I would think about going back to work and I would get all worked up again," says Heather. "It took me over a year to get my head out of the pillow, to wake up, and start doing research and other things to make me feel human again."

She would hear friends, family or coworkers say, "Oh, you'll get over it. It's going to be okay."

"No, this (suffering) isn't just in people's heads," says Heather. "This is a real thing."

But before Heather would eventually wake up, over the next four months she extended her stress leave as much as possible and met with a psychiatrist. She says she was trying to put herself together to get back to work.

"I saw my doctor again and she recommended I quit my position and see if I could get help from (employment insurance) because there was no way I could go back to work in the condition I was in," she says.

So she did. Heather quit her job at the daycare just before Christmas, some five months after taking her initial leave.

"I wish she could've stayed working. We would've been better off (financially)," says Alvin. "Most times it didn't bother me, but at other times I knew she had to go back."

With a note from her doctor, Heather was approved for EI. She was granted long-term leave and then additional benefits. But her EI ran out within a few months and that was it, she says. The problem was she still wasn't ready to go back to work.

#### A day in the life

While spending time away from work, she describes days where the world was too much for her to deal with. Some days she would not get out of bed, or when she did she would just sit on the couch. Often the thought of leaving the house and facing the world would induce panic attacks. These attacks included strained breathing, the inability to focus and concentrate, and a lack of understanding why these things were happening. By this point Heather was feeling very isolated and felt she had nowhere to turn.

"People shouldn't have to have a breakdown before they get support," says Heather.

#### Intervention irony

People don't often recover in isolation. Taking on meaningful and satisfying social roles while participating in the local community is closely associated with recovery, and peer support is crucial in making any sort of progress.

Heather grew up with a Ukrainian background, with church being a big part of her life growing up. But as she got older her spirituality faded away. During Heather's stress leave, her best friend, 40-year-old Amy Semko, was a major support in keeping her from sinking any lower. Heather refers to Amy as her cheerleader.

Amy recalls Heather relying very heavily on specific comforts, including the TV and computer. Heather added she would find comfort in eating too.

### Heather was granted long-term leave and additional benefits. But her EI ran out in a few months and that was it, Heather says

"When I was watching interventions, I would watch people shooting up or drinking whiskey while thinking, 'I can't see myself doing that," says Heather. "Meanwhile I was eating a bag of potato chips, and in hindsight I was kind of doing the same thing."

Amy had never seen Heather in such a dark place, and says Heather's self-worth was next to zero.

"It was scary to see her there, my friend was fading," she says.

#### A family outing

Amy will never forget the first time she witnessed one of Heather's panic attacks.

"We were at a Moose hockey game — Heather, my family and I," says Amy. "My family and I had gone to the concession stands, but I had gone to the washroom and was coming back. I saw the paramedics with the stretcher. I thought, 'Oh no, somebody got hurt, or something happened,' but it happened to be Heather." Heather was in her chair when she got dizzy, lightheaded and shaky. The attack happened at intermission while nothing was happening, so neither of them had any idea what could've happened. Amy followed Heather to the hospital only to see the medical staff perform an array of tests. In the end, Heather was sent home with nothing wrong with her.

"It was scary just watching her," says Amy. "There was nothing I could do for her except just be with her. You don't know what they're experiencing."

#### Doc, what gives?

Heather describes her doctor as one of many who are quick to prescribe a pill to their patients when dealing with mental health concerns. When her breakdown occurred, another doctor quickly set her up with a psychiatrist, and then Heather was diagnosed.

"I saw the psychiatrist twice," says Heather. "That's when I got my diagnosis. She was the one who said you're going to need some talk therapy, and through that you can map out a plan." The psychiatrist had diagnosed Heather with problemsrelating to panic, anxiety and depression. The plan was to take medication and get the correct dosage through trial and error.

#### A form of therapy

When Alvin would go to work, Amy would often come over for dinner and spend time with Heather just to make sure she was okay. They would watch TV, chat and sometimes Amy would watch Heather scrapbook.

"If people want to know my story, I always ask, 'Do you want to see my book?"" says Heather. "I could've handwritten my entire story, but I wanted visuals. Every page has a theme."

Heather's scrapbook is filled with pictures and quotes of things she feels represents her journey. Taking visuals and piecing them together is a talent Heather has had since birth. With a creative outlet and a support system in place, Heather was getting ready to take her next step.

#### Walking the road of recovery

"I'd go in to see the doctor, and the visit would end with, 'Okay, come and see me in three months and let me know how you're doing," says Heather. "I spent time wondering what else could I do aside from taking medication to make myself better."

With her doctor only offering medication, Heather felt motivated to do her own research. For a time, she became her own advocate. Heather took it upon herself to start seeing a therapist, but her insurance covered only nutritional therapy, not psychological. She was paying the therapist out of her own pocket while not having income.

#### Financial hoops

"She wanted me coming in every week," says Heather. "I said, 'There's no way I can pay \$300-\$400 a month to see a therapist."

While still carrying 100 per cent of the financial burden, Alvin says their relation-ship suffered at times.

"Sometimes I'd just say the hell with it, and I was ready to pack it in and find something else," he recalls. "I bit my tongue a lot of the time, and took things day by day. I figured eventually it had to get better."

Heather finally had to stop seeing her therapist for the couple's financial benefit.

#### Aide à Saint-Boniface, et d'un père

After a year of seeing her doctor every three months with no significant improvement, Heather asked if there was anywhere she could go for individualized therapy. Her doctor referred her to St. Bonifacé Hospital's psychiatric department as an outpatient. During her time at St. Bonifacé, Heather's 72-year-old father, Larry Tabinski, recognized an opportunity as a hands-on way to support her.

"When Heather was going to workshops in St. Boniface, I would drive her," says Larry. "I didn't care what time of day or night it was, I wanted to make it easier on her. I figured the help she was getting was going to help her, so if I could help in any way to make sure she gets the help, I would do it."

#### Family support

Aside from just driving her, Heather's parents were always supportive. They would call her daily to check in on her

and see how her day was going and what her plans were. Larry says watching Heather do her own research felt like she was doing the doctor's job a bit, and it was hard for him to watch. But he knew she was doing the right things.

"My relationship with my father is kind of a student to teacher relationship," Heather says. "My mother is very traditional, and family-oriented. 'Family can fix your problems,' and that sort of thing. A part of her doesn't understand because the medication is working. That's a reason to stay on it and continue to be well."

It was not that her mom wasn't supportive — her mom would call every day — but she just didn't fully understand certain aspects of Heather's recovery.

"She was being supportive by saying, 'You've come so far, you don't need (therapy/medication) anymore, go on with life," says Heather. "Her way of being supportive was calling me to see how I was doing, and inviting me over for coffee just to be somewhere other than at home."

Heather knows if she were to ever go off her medication she would be taking a step backwards, and her doctor shares that opinion. Part of her problem is a chemical imbalance, and she says it is a fact.

#### Spirituality's second coming

In the midst of Heather's recovery, she felt a need for spirituality again. She happened upon a church one of her friends was attending.

"I haven't been in a while, and I need church," Heather recalls. "Amy and I picked a Sunday and we went. I went the next week and she came again." Heather felt at home at the church and started befriending other churchgoers. Having another form of social inclusion was an added bonus, Heather says. Opening up to people in the church allowed those around her to pray for her and to keep her in their thoughts.

#### It IS all about you

Over a two-year period, Heather completed two 10-week workshops in the St. Bonifacé psychiatric department: Overcoming Panic Disorder and Overcoming Social Anxiety. Although the programs were helpful, the workshops focused more on giving her the tools and coping mechanisms to deal with her anxiety and panic attacks. Heather says she was stilllacking individualized therapy. She may have been seeking different and more specific programming at the time, but the workshops were imperative in her recovery because they gave her some control. She describes her new tools as arrows in her quiver, and she wanted more.

"I first thought of my struggle as an infection," says Heather. "You take medication and eventually it goes away. Then you do what you can for it to never come back. I didn't realize this was going to be lifelong. With the support of the church, my friends and family, it was time for me to get back on the ball. For one of my courses I picked up a book from the Anxiety Disorders Association of Manitoba (ADAM). I then started asking a bunch of questions when I went there to pick up the book."

Heather wanted to know if their programs had individualized therapy or talk sessions.

The CMHA has programs for anything you could think of. They have programs for educational purposes, for people trying to get housing, or for people trying to get a job

Heather Tabinski-Stortz

#### Peer-support & the mental health spectrum

ADAM told Heather that its peer-led focus groups were very beneficial to some of their clients.

"I thought the group sounded really cool," Heather recalls.

After doing more research, Heather called back to ask how often the programs ran, and upon receiving the appropriate information, she attended a few.

"Most of the time there were between 10 and 12 people in the workshops," says Heather. "It awakens you and helps you realize you're not alone in this."

While Heather felt good knowing she was not the only one in this situation, in another way she felt disheartened, knowing she was in a different place than everybody else.

"Some were at the beginning of their recovery, and some people were much further along and just needed a touch-up," Heather says. "I was in the middle and I just didn't feel like I fit yet." Amy says these peer support groups may not have been the solution to Heather's struggle, but they were good steps, however small. Heather needed to cross little hurdles, and each program she finished was symbolic of that.

#### The Canadian Mental Health Association

Heather knew it was time to get back on her feet and become a productive member of society again. When she asked an ADAM facilitator about programs for people looking to return to work, he said they didn't provide it, but the CMHA did. Heather had never heard of them.

"He told me the CMHA has programs for anything you could think of," Heather says. "They had programs for educational purposes, for people trying to get housing, for people trying to get a job."

While Heather wanted to get in quickly, she was told acceptance to the programs could take four to six months. Heather told her husband, "I'm doing this. I'm getting a really good feeling about it, but we have to be patient and wait." Alvin says he told Heather if she thought it would help, he was going to wait for her.

"My husband is a great man and so supportive," Heather says. "With any husband or wife relationship there are things that irk us about one another, but we support one another."

It was almost six months to the day, but in December 2013 she was accepted into the CMHA's General Rehabilitation and Recovery Program. After an initial meeting in July 2014 the ball started rolling.

#### Goal setting

"Getting employment was my only goal," Heather says. "But my worker started to break things down for me, and asked, 'What are you struggling with? What's keeping you from going back into the workforce?" Heather problems were identified with negative self-talk and conflict. The next step was creating a plan on what to focus on and when. They talked about why she had negative self-talk and was given ways to build herself up with positive self-talk. She was given tools to work through and deal with conflict. Heather and her worker worked together for a year.

"While she was getting help we saw it getting better and better," her father Larry says. "Finally it came to a point where she's okay."

With the help of her worker, Heather broke her issues down into manageable pieces to work on herself before looking for a job.

#### Re-identifying her identity

Through discussions with her worker and the material she would work on, Heather was able to boost her self-esteem, self-confidence, and realize some of her talents and abilities. At an earlier time in her life, she had worked in administrative roles. Heather was now at a point in her recovery where she was comfortable enough to upgrade her professional skills.

"I knew I wasn't going to get back into childcare," says Heather. "So I found a program through the River East School Division Adult Education Centre. I didn't even talk to anyone about it. I signed up for the class and paid for it."

During her three-and-a-half-months in the adult education program, she was taught the ins and outs of Microsoft Office twice a week. She finished the program in June 2015.

#### **Knowing yourself**

As the class was winding down, Heather was ready to find a job. While her worker felt it was premature, Heather wasn't willing to sit on her hands and do nothing, especially after developing new skills.

"I had a plan in my head and I wanted to be helpful," says Heather. "I wanted to get copies, I wanted to get coffee and do the mail. I wanted to contribute."

In July 2015 Heather received an interview for an administrative role with an engineering firm. She got the job and has been there ever since.

Heather wanted to contribute, and she is doing exactly that.

"She's devoted to getting back to life," says Amy. "She's in a place where she's so happy about striving for more." Amy says Heather is more open to going out and having a good time now, as she is living her life. "She just a lot happier and she's trying to do whatever she can to better herself as a human being, instead of just digging herself out of a hole. She's trying to be the best person she can."

#### Lifelong recovery

But Heather admits it is not always easy, and she still has moments of negativity. As happy as she is with her job, sometimes the anxiety crops up at work.

"I forget how to prioritize and how to organize things sometimes," says Heather. "I even forget how to organize my own thoughts. I feel the anxiety and the panic rise. Then I have to work it out with the tools I have." However, Heather can now face conflict and deal with it accordingly. She understands if things cannot get done, she has the opportunity to finish them the following day. Six years ago she would have just cried.

"Seeing someone come out from the black hole and become a better form of themselves in the end is one of the greatest things a person can see," says Amy. "There is help out there and it really does help people's lives in a positive way. Heather prays and relies on her faith in God to guide her through in a positive way and to keep her spirits up."

#### Using her experience

While Heather no longer works in childcare, she says mental health education should start in elementary school.



She believes that creating a unit within an existing health class could be a good start.

"I'm sorry people experience stigma and I'm sorry people get the wrong idea," says Heather. "People need to learn what this is, this is for real, and this is something people work through but never get over."

Heather says that by educating children and showing them examples of certain feelings and emotions, it helps raise awareness early on in life. She says kids who are experiencing certain trauma in their life can then know what they are feeling is not wrong, and it is okay to talk about it. Nobody should suffer in silence.

"I didn't know I had members of my own family who were being medicated for anxiety or depression until I started talking to them about it," says Heather. "One of my family members is on the same exact medication I'm on. Now we talk about it."

Heather has too often heard the saying, "You can't teach an old dog new tricks," but she disagrees when it comes to mental health. For her it all depends on how much work a person is willing to put in.

#### Almost like addiction

"First they have to admit they have a problem," says Heather. "It's the most painful part — admitting you have an issue. Healing hurts. You have to pick at the wound first to find out what the problem is, and when you start talking and getting the tools and putting the pieces together, that's when the healing starts."

Heather is committed to her road of recovery. Eerily similar to one of the alcoholics or drug addicts on her favourite

show, Intervention, or just like Alcoholics Anonymous or Narcotics Anonymous, she says her recovery will be a lifelong journey.

"I'm sure at some point somewhere down the road, I may have a relapse," says Heather. "But I have the tools to pick myself up if it were to happen."

Heather finished her program with the CMHA in September 2015. She continues to stay in touch with many of her contacts within the organization who helped and continue to help throughout her journey.

"There were a lot of players who helped me get back," says Heather. "I'm such a better me than I was, even before my breakdown. This experience has made me a better and stronger version of myself."

For the first time in a long while, Heather is awake and she is happy.



A workshop for people with a mental health difficulties, problems or illnesses. The workshop explores recovery and how others (family, friends, community and service providers) can support your recovery journey.

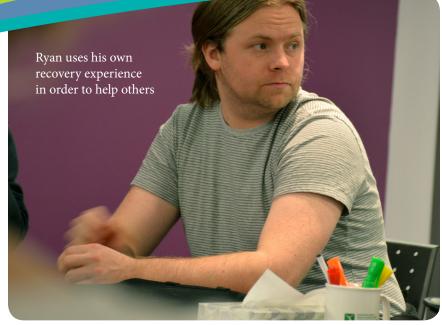
### Thursday, November 5 1:30 PM to 4:30 PM

CMHA Thompson Clubhouse 43 Fox Bay

To register, call Katherine at 204-677-6051 or register online at <u>winnipeg.cmha.ca</u> (see Education -> Partnership for Recovery Workshops)



Canadian Mental Health Association Manitoba and Winnipeg Mental health for all



# **Ryan's Road**

Seven years ago, 31-year-old Ryan Dion's life fell apart. He was renovating a house in the hopes of building a life with his then-girlfriend. He had been working a lot and was under a ton of stress.

Ryan's father, 56-year-old Trevor Dion, describes witnessing his son experience symptoms of depression, and soon after there was an instance of infidelity between the young couple. They broke up, and Ryan's stress levels and depression went through the proverbial roof.

#### The medical system

Ryan didn't have a family doctor at the time, so he went to a walk-in clinic to address his mental health concerns. He told the doctor about his symptoms, and the doctor asked him a couple of scenario-based questions. "They said, 'Oh, well that's depression," says Ryan. "They basically wrote me a prescription and that was it. It was very, very quick. I don't think it was very sensitive."

Over a short span of time, Ryan had lost his job, his home and his girlfriend. His dad says everything at once crushed him, as he had been sacrificing all his time and money into the home. Ryan's medication was just numbing the pain he was experiencing.

"I suppose it helped a little bit. I was able to continue working, but it didn't have a lasting effect," he says.

#### Stigma

Other areas in Ryan's life began to suffer.

"His workplace was handling his prior issues fairly well (at first)," says Trevor. "During the break-up he had to take some time away from work. They were aware of his condition, and told him it would be okay to take the time off. However, he missed too much work in the eyes of Shaw Cable, who ended up firing him."

A co-worker and friend of Ryan's, 30-year-old Erin DeBooy, was in Shaw's tech support department. They got along well, but she says Shaw really isolated Ryan in some ways.

"It was constantly a struggle and he was always going into meetings," says Erin. "He'd be saying he wasn't doing well, but they didn't understand. It was frustrating to watch, and it must have been frustrating for him too."

#### Ryan's only support

Ryan's dad, Trevor, works with New Directions. It's an organization that deals with high-needs and high-risk children, comprised of young offenders, kids with ADHD and other issues, so he is quite familiar with some of the struggles Ryan was going through.

Trevor believes medication can be used as a stepping-stone to get healthy, but until a person deals with all of their issues from the past, there isn't any way of knowing what one needs in terms of medication levels.

"Medication can help people deal with issues until they've dealt with the issues for themselves," says Trevor. "But medication shouldn't be there to fall back on as an end all-be all." Trevor had many conversations of a similar nature with his son. Ryan had very few support systems, and at times Trevor was the only one. Trevor allowed Ryan to live at home for six months, but at some point the father couldn't do it for his son anymore.

#### Progressing to progression

Erin saw a noticeable difference in Ryan when she saw him about six months after he left Shaw. In her mind his turnaround was extremely quick.

"He's obviously strong," she says. "When he lost his house and everything, I don't know how he survived, to be honest."

Ryan started working at Boston Pizza, and quickly worked his way into an assistant manager role. He also started dating someone new.

"He started dealing with head office," says Trevor. "They wanted him to be involved with their local advertising department. He seemed to be doing well, flourishing actually."

In Ryan's words, he got back on the horse and kept going, but he ended up enduring more anxiety attacks.

#### More setbacks

There were pressures coming from home again, while his girlfriend thought he wasn't at home enough. Ryan wanted his girlfriend, but he wanted his job and career too.

"It sort of ping-pongs in your mind back-and-forth," says Trevor. "I guess he gave up his job, and in doing so I think he lost a little more of his identity. My take on it was there was a bit of a breakdown."

The medical system's progression Ryan went back to the walk-in clinic and the first thing he said to the doctor was he didn't want to take any medication as he felt the meds weren't doing anything.

"Rather than sit there with a notepad and ask me what was wrong, this doctor grabbed a chair and sat down and said, 'We really need to talk about this," says Ryan.

The visit to the walk-in clinic came years after his initial visit, and Ryan noticed a progression in the way the medical doctors handled mental health issues. Ryan's doctor mentioned a treatment called cognitive behavioural therapy (CBT). CBT is a form of talk therapy specifically designed to tackle the issues of depression and ADHD. The doctor gave Ryan an understanding of what CBT was, but it was up to Ryan himself to find working examples of it. The information was easily available online, and Ryan found doctors well versed in CBT right away. He contacted one doctor and heard back within a day.

"I had coverage at the time so I was very lucky," says Ryan. "I know a lot of people who didn't have coverage, and they've had a very, very different experience."

Once Ryan met with his doctor, he was officially diagnosed with ADHD, depression and anxiety.

Trevor told his son, 'It's a diagnosis, not a sentence.' "This is what they see, so this is what they diagnose," explains Trevor. "It's not a liver or a kidney; we're talking about the mind. Your heart, your liver, your kidneys, they do a job, they do it well, and they'll never change. But your brain is constantly changing, you can change the way it thinks, the way it works, what it's doing. Just because someone diagnoses you with something today doesn't mean it's going to be the same for you tomorrow."

#### The plan

Ryan took his father's advice and did what he had to do.

"We worked on a plan (for me) to leave work for awhile, because I was having anxiety attacks," says Ryan. "I was excused with medical leave, but we started working on a graduated return to work."

Ryan's ADHD made him wonder if he would remember anything about anything at certain times. He began to work on some of his issues by developing coping mechanisms. Although he was taking steps forward, Ryan says this was one of the hardest times in his life. His time off work was substantial, and a lot of his time was with a therapist, getting through some of the deepest depressions he had ever experienced.

"You go through suicidal thoughts," says Ryan. "It was a really difficult time."

Ryan says the difference between personal and professional supports is boundaries. Professional therapists don't take another person's stress upon themselves. Often people start losing their support network because the person struggling will lean on their support systems, and when that support doesn't know how to react, the support becomes tired and doesn't want to hear about the struggles constantly. But Trevor says the one thing he always tried to help Ryan maintain was hope. They basically wrote me a prescription and that was it. It was very, very quick. I don't think it was very sensitive

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#### Enter the Canadian Mental Health Association

Ryan's therapist recommended a program called the Mindfulness Based Stress Reduction Program (MBSR), a meditation-based, stress-relieving program. This was facilitated by the CMHA, and would be Ryan's first interaction with the organization.

"He was at point in his life where it just was perfect timing for him," says Trevor.

Ryan spent some time being his own advocate.

"I was going into it blind. I had searched it up on the website, was looking through it, and I saw the program," says Ryan.

If a person doesn't have coverage, the CMHA charges for programs based on income. They told Ryan they would assess his situation and get back to him.

"Fifty-dollars was the minimum charge, and that's what they charged me," says Ryan.

It took some time, as after Ryan registered on the website he had to wait for about three months. Trevor says there were of course times when Ryan was discouraged, disheartened and depressed, as it has been an ongoing change. He says there was no real catalyst that created the change or put the map together for Ryan.

#### The CMHA's programming

– Ryan Dion

Ryan went to the MBSR program once a week and completed the program, and as time went on he learned about different programs being offered by the CMHA. There were even programs for people who hadn't been diagnosed, so there was something for everyone. Although he didn't access the other programs at that point, just knowing they were there was helpful to him. Eventually Ryan enrolled in the CMHA's Rehabilitation and Recovery Program.

"It's the starting point," says Ryan. "It's generally how it works. I started seeing stuff on self-esteem and negative thinking, and I realized it was something I needed, so I got into workshops and they were extremely helpful."

Ryan knows he had obviously been in a dark place and didn't have much going on. Once he started with the workshops he began to feel validated. Knowing there were people out there who were understood and going through similar situations helped. People from all walks of life are affected by mental health concerns, and Ryan found it interesting to talk to people who were professionals. He recalls a nurse who was going through a similar scenario, and just talking with her was a good experience. Eventually he began to share his own experiences.

"Stigma is such an interesting thing," says Ryan. "I just thought the world was a certain way, and I felt like I was the only one to be isolated."

This thought had been re-enforced not only in Ryan's mind, but also by the many institutions that had given up on him and his condition. Ryan says stigma exists in a very real and impactful way.

#### Journaling

When Ryan was told about journaling, he hesitated as he thought there was a level of social stigma attached to that activity. But he says it was imperative to his recovery.

"Journaling was a key to him finding his way out of his psychological mess," says Trevor. "In journaling and doing CBT, I've seen him become more apparent and more deliberate in the things he's doing. He's more sure of himself because now he has something to go back on."

Ryan says when you journal, you really dig into what is going on. Although you constantly re-trigger yourself you can challenge those negative thoughts, ultimately ending up in a situation you feel better about.

#### Specified goals

Ryan began focusing on specific goals during his one-on-one sessions with a worker from the CMHA. While he was living at his father's house, he had a time limit on this living situation and he really wanted to get on with his education.

Ryan says he experienced the negative stigma once more when trying to apply for Employment and Income Assistance (EIA). Because he was staying at his dad's and it wasn't his permanent address, he needed a permanent address to qualify but he couldn't lie to them. Ryan says he wasn't lying to them rather than his situation hadn't been resolved, hence his application in the first place.

"It was a hard time, because when I called they were just really, really mean," says Ryan. "I remember my worker there just picking up the phone and giving them an earful."

If his worker wasn't present at the time of the call, Ryan would have just hung up and tried something else. He was going through so much, including looking for money so he could eat — and to have someone jump down your throat put his anxiety through the roof.

"It was difficult, but the CMHA helped me with both issues. They were really, really good at supporting me," he says.

While previously noting the progression of medical doctors regarding mental health concerns, Ryan says the EIA office is an example of an institution in need of progress. He says they deal with people who are essentially disabled, and there is a need for sensitivity. "People don't really know at the time (if they're sick), although you sort of do," says Ryan. "But when you're not 100 percent sure, it's tough."

After jumping through various EIA hoops, Ryan was accepted and began receiving a regular cheque.

#### Finding a level of understanding

He moved out with a friend of his, but the situation was less than ideal.

"He was a heavy drinker," says Ryan. "I spent as little time as possible at that place. I'd just try to sleep at my dad's. It wasn't exactly a conducive environment (to recovery), so I moved again."

As he became settled in his more permanent living arrangement, he found himself taking material he was learning from Rehabilitation and Recovery home with him — articles like self-esteem, changing negative thoughts, friendships, assertiveness and a ton of other ones.

"Those courses were quite good," says Ryan. "I was in the friendships and boundaries course, and it was a really small group. I told my entire story and let them in completely. It was interesting because we'd be talking, and people would say, 'Hey, if you ever need to get a hold of me, man, here's my number."

As Ryan and his father have said, prior to this point Ryan lacked people who understood. But with the combination of experiencing understanding and religiously going through the course material, Ryan was retaining the information because he was constantly accessing it.

Ryan started to bring his personal habit forward. Other people were also taking the material home, but they often did not do anything with it. Ryan could relate.

"When things got really stressful I'd put it down," says Ryan. "It was almost like as the stress increases, the likelihood of using the material goes down."

#### Ryan's epiphany

Ryan doesn't remember exactly when he realized it, but he knew reviewing the material was important to his own success, and he thought others needed a place to constantly pick up the material — just like

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He missed too much work in the eyes of his employer, who ended up firing him

Trevor Dion

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the workshops — but without having to re-attend the workshops. He wanted it to be about people's personal processes, and that is where the idea for his peer support group, the Action and Recovery Peer Support Group, came up.

"One of the workshop facilitators at the CMHA had mentioned there was a possibility for space, and I should write something up," says Ryan. "One of the people from a workshop had decided to sit down and talk about it."

The woman who helped to facilitate the new support group was a huge help, but eventually she became so busy with her own life and couldn't continue.

"I wrote a proposal and the CMHA made the space available," says Ryan. "I just sort of got started. I contacted another person I was going to workshops with, and he helped me. We brainstormed a ton of stuff."

Todd Hamin, and Action and Recovery Ryan had contacted 50-year-old Todd Hamin.

"If it seemed he was stuck or whatever, I have experience with committees, working with people, and things like that," says Todd. "I'd offer my help or just step in and advocate or help."

The peer support group gets participants to write down positive things about their life as they walk in. From then on, the group focuses on hurdles participants are facing on a weekly basis, and how they are dealing with them. Ryan says by the end of the group's sessions, you can cut the air in the room because people become worked up after focusing on the negative aspects of their life, and at the end they can reference the positivity in their life they wrote down earlier.

"Ryan loves to help people," says Trevor. "I think part of his therapy was being able to help other people with the things he learned himself."

To say organizing and contributing to the group is easy would be untrue, according to Ryan. He has had to deal with his own anxieties to stand in front of a group of strangers, but also had to help others deal with their own anxieties. From an external point of view, Ryan would listen to others' experiences and remark, "Oh, I do that too." He says it was enlightening for him.

And peer support really does help, according to Erin.

"I've gone to him for advice for my own anxiety issues," she says. "He's gone through it 10 times worse than me. It speaks to his strength and how he overcame that. It felt kind of nice to talk to a regular person rather than a doctor."

Becoming a mental health hero In 2014 Ryan won the Mental Health Heroes Award for his work with the group.

"The whole thing was sort of surreal," says Ryan. "The whole time I never really felt like I was doing much."

Now Ryan compares the support group to staying physically fit.

"Getting in front of people and talking about it felt like — for lack of a better analogy — working out," says Ryan. "If you I started seeing stuff on self-esteem and negative self-thinking, and I realized it was something I needed, so I got into workshops and they were extremely helpful – Ryan Dion

can understand the material, it makes you feel better about anxiety, and then you add more pressure and weight — stresses you should be able to deal with on a daily basis. And as time goes on you learn to apply the coping mechanisms you've just learned and eventually be functional."

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The point of the group, Ryan says, is to review what is going on in your life.

"You're doing all this on your own, without creating any support structure," says Ryan. "It's one of the biggest pieces for my own recovery, and I have a feeling for anybody else too."

Ryan's peer support group has prerequisites because they want members to have some coping mechanisms already, as sessions can be strenuous. Given that the group often parallels what the CMHA is doing at the time, Ryan says it just makes sense.

Because journaling is such a big part of his own recovery, Ryan encourages his group members to do the same. He says it is hard to get people to journal because they don't see the point.

"A common excuse is, 'well, I end up writing about what I did today," says Ryan. "But it's like, you're writing — the point is to continue to write until something bad happens, and then you write about that. You get it out."

Ryan says journaling is equally as effective as talking to another person. He can rant all day about his problems until he is done talking about it, but through a laugh, he advises against journaling on Facebook.

#### **Encouraging education**

Ryan's therapist is part of a group working toward bringing mental health awareness into schools. In a way, Ryan wishes something similar was available while he was in school, potentially putting his life on track earlier.

"I've spoken with schools about similar stuff," says Ryan. "I was brought into Glenlawn High School to discuss mental health and wellness. It's great they're finally doing it."

One recurring theme in Ryan's story is progression. Ryan says a few corporate and government groups are currently offering grants for bringing mental health into the technological world, like an app. The goal is to address mental health through modern terms.

"I think going forward people in the (mental health) community should really look to technology," Ryan says. "Bringing accessibility to resources like that, for youth, should be a huge goal."

#### Spirituality

Spirituality is also part of Ryan's recovery. Trevor says he never wanted to force religion on his children or "shove it down their throats". Ryan was raised to look into spirituality, but only in the broadest sense. Although Trevor is a practicing Christian, he says more than anything he encouraged his children to put their faith in whatever they chose to believe in.

"I did a lot of exploring when I was younger," says Ryan. "I looked into polytheistic stuff, into my own heritage and roots — Norwegian stuff. I read a lot on Christianity, Islam and many other religions."

Ryan identified closely with Buddhism for meditation reasons early in his recovery, but as time went on he aligned himself more closely with Christianity.

The idea of forgiveness is the biggest part of Ryan's move towards Christianity. Ryan thought he knew how to forgive, but in reality he would often bury his thoughts regarding what he considered to be betrayals or slights. He also found he would never forgive himself and always felt the need to fix matters when things would go wrong for him. He realized if he couldn't forgive himself, then he couldn't really forgive anybody else either.

"He's been able to forgive for the past five years or so," says Trevor. "It's important. Never, ever believe you can't change, and never, ever, give up on yourself."

# Never, ever, give up on yourself. -Trevor Dion



## **Evan's Road**

I wrote this booklet because I have had some very dark times in my life.

Often when people think of the mind the ups and downs — they think of mental illness rather than mental health. Everyone has mental health, and the reality is when a person experiences a given set of extreme life events and added pressures, anybody can experience languishing mental health. By getting to know the amazing people in this booklet whose stories exemplify strength, determination and perseverance, I was able to analyze my own situation in a way I never have before. I took the process a step further and brought the pieces together, and because of the courage shown by Heather, James and Ryan, I am going to share my story too.

#### Child of divorce

I was 15-years-old when my dad told me

my parents were going to get a divorce. The year was 2007. We were driving to my high school hockey game when he told me. He broke down a bit, I broke down a bit, but then I went in and played my game. I could handle it. I was almost a man.

#### My mom

"Even though the divorce was hard on you, you were instantly strong for your sister," my 45-year-old mother, Juanita Matthews, remembers. "I knew you were struggling internally, but you didn't show it. You didn't show it for her."

#### My sister

My sister, Becky Matthews, was 12 at the time of the divorce.

"You kind of shut down. You seemed more angry than anything, and you didn't really want to let your feelings show," says now 21-year-old Becky. "I relied on you a lot, so I think you felt a little bit responsible for me and that was more of a burden than you wanted at the time."

Eventually my parents started dating other people and my mom met someone out of town. She would leave periodically to stay in Moose Jaw with her boyfriend. I would volunteer to stay at my mom's with Becky. I would be frustrated when my mom would leave town, and at times felt like taking care of my sister shouldn't have been up to me.

#### My friends

Like a lot of teens, I spent time with my friends and started drinking casually. The frequency of my drinking would increase over time.

"You just instantly thought you could do it by yourself," says Juanita. "You turned to your friends. As you got older, there came a time where you coped with alcohol."

As an 18-year-old high school graduate, I decided to take a year off school to "experience life". I was living with my dad and my drinking had increased. I began to explore other intoxicants, and I was doing a variety of drugs.

#### My dad

"I didn't like how you would get when you drank heavily. You would get argumentative and confrontational," says my 45-year-old father, Trevor Matthews. "You were hanging out with people I didn't always like. When it came to other substances, I didn't find out about a lot of them until after and with some of the stuff I heard, I just didn't want to know anymore." Trevor thought I was drinking too much, but because he drinks too it put him in a position where giving criticism was difficult.

One's perspective is not another's My father says he did not think I was struggling, but rather I lacked motivation with school and work. According to him, I never displayed any traditional signs of depression or anxiety. He concedes he may not have been as in tune with my mental state as he wanted to be, as he was going through a crisis of his own.

"I never expected to go through the divorce," says Trevor. "For a while I felt like my world was falling apart too."

#### Coping

I had been dating a girl I met through my high school, and she was very much a part of my lifestyle, even if she didn't partake.

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I broke down a bit, but then I went in and played my game. I could handle it. I was almost a man

Evan Matthews

I didn't see a problem.

"You spent a lot of time at your girlfriend's," says Juanita. "I think it was a diversion too, just to be away from the situation. You always had a way of making it look like everything was going to be okay."

My family says they all noticed my habits, but nobody recognized them as coping mechanisms. It was easy to say I was growing up.

"You expect a lot less of people at that age," says Trevor. "More commonly with boys than girls, they are like that — more interested in themselves and having a good time."

#### Shaking up my life

But as time went on, I continued to suppress my feelings about the divorce and what my situation had become. I had lost all sense of belonging and I didn't have any life goals. I knew I wanted to be a journalist someday, but I didn't know how to make it happen. I had nothing else going on at the age of 19, and post-graduate life wasn't living up to what I envisioned.

I moved to Fernie, B.C. with two of my best friends, Rob Schick and Mike. With \$300 to my name, we left to spend the season there. My girlfriend and I decided to try long distance.

"Your supports were your best friends," says Trevor. "Rob and Mike. They were the guys you spent the most time with." Rob recalls that time in his life.

"It was just a wild decision made during last call at the bar," he says. "I thought Fernie was a little gem in the mountains. We had never been there before, and once we got there I thought it was a beautiful place. Having other friends who had moved out there, it didn't take long to understand why they did."

#### Our arrival

We checked into a hostel and immediately met two Australian dudes. We hit it off. The next day they introduced us to a larger group of people staying in the hostel, including other Canadians and people from New Zealand, Scotland and Sweden. The two girls from New Zealand had found a house fitting 12 people, the exact number of people staying in the hostel. We jumped at the opportunity and all decided to live together for the winter.

"Our house was a great place," says Rob. "We were out of mom and dad's house, and we were living with friends — and making friends — living with people from all around the world."

Rob was learning many things personally and on a cultural level, as all of us were. There was a wide range of demographics in the house, which brought a variety of perspectives. The age gap from the youngest person to the oldest was 13 years, and Rob says we lucked out with some really down to earth people.

"We were all in the same situation even though we weren't at the same point in our individual lives," says Rob. "We were all very in tune with that."

It was common for people within the house to take one or two traits from other personalities, and then try to incorporate them into their own personality.

#### "You turned to your friends. As you got older, there came a time where you coped with alcohol.

# "

#### Juanita Matthews

#### The crew

Carl Lewis was a 24-year-old Australian surfer, snowboarder and adventurer. He was fearless and lived for the moment. He was seizing as many opportunities as he could.

Then there was Lawren, a 31-year-old volunteer firefighter from Saskatchewan. Rob remembers him being a strong, silent, confident, respectful and respectable kind of guy — someone the younger men in the house looked up to at times.

Steph and Heidi were the two women from New Zealand. They were beautiful inside and out. They were in their early 30s. Rob refers to them as the housemothers. They were just really good people. They would make house meals periodically, and in a way they made sure everyone was taken care of.

"We tried to emulate those qualities," says Rob. "We tried to bring them into our own lives. We all influenced each other."

We got to know each other through our parties and through everyday lives in Fernie. We spent time on the hill as a family. To me, our falls and triumphs on the hill were always symbolic of many of the ups and downs I had already faced. I personally felt inspired for the first time in quite a while. These people were living meaningful lives, and I wanted to live a life of meaning too. Still, I hadn't shed many of my negative habits and continued to use them as coping mechanisms for the skeletons in my closet from the past. I knew the substances were affecting me negatively, but I was still comfortable in my lifestyle.

Rob says that although we felt like adults, we weren't living like adults. And for me, the lifestyle of most visitors in Fernie made it easy to blend in.

"We were all pretty crazy out there," says Rob. "I'm sure we all had our own things going on that we were unconscious of at the time. I don't remember thinking my buddy was in trouble."

#### Life choices

I met a Swedish girl who was visiting. She was beautiful and kind, and I was lonely and sad. We entered into a relationship, and I told my then-girlfriend I had made a poor choice. I didn't know what was going to happen initially, but ultimately we would break up. I didn't handle it well. I felt like on top of having substance abuse issues, I had an unhealthy idea of what relationships should look like.

Because I had made yet another negative life-altering decision, I felt like I needed to re-evaluate my life. I realized I needed to move back home and get my life back on the right track. I needed to rehabilitate my mind to become a productive member of society. With no means to return home, another one of my best friends, Jesse, came out to Fernie from Winnipeg. He picked me up and took me home. I was 20-yearsold.

#### Admitting denial

"One day shortly after coming home, you were laying on my couch," says Juanita. "You were crying. You expressed you did a lot of drinking while you were in Fernie, and you were actually concerned for yourself. You said you needed to change your behaviours because they weren't helping you get to where you needed to be."

Juanita says the conversation was never directly about what was bothering me, as much as it was to do with the direction my life was headed. But she says on some level my habits were a direct reflection of what I had been through. My mom asked if I wanted to seek professional help that day.

"You didn't want any professional help, but you said you needed to make some changes on your own," says Juanita. "Even though you expressed to me you were concerned about how heavily you were relying on alcohol — for you to go and talk to someone, I think you had a real fear that someone was going to tell you that your habits weren't getting you anywhere in life. Part of it was you didn't want to hear that, and you would have had to alter your behaviour to get yourself well."

She was right. I didn't want to change my behaviour, and I didn't want to show what I thought could be perceived as weakness. **Moose Jaw, Saskatchewan** A short time after that day, my mom announced to the family she would be moving to Moose Jaw. She was moving in with her boyfriend. I felt like as if the divorce wasn't enough, my sister and I were being abandoned for the second time.

Then my mother leaving, my sister moved in with our dad so she could stay in Winnipeg and graduate with her friends.

I had to move out and continue to live on my own.

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You expect a lot less of people at that age. More commonly with boys than girls, they are like that — more interested in themselves and having a good time

"

- Trevor Matthews

"At first — and in the long run — (moving out) improved our relationship," says Trevor. "With how you were living, your lifestyle differed from mine and we weren't getting along as roommates."

Jesse, who picked me up from Fernie, took me in for a while. Although he still lived at home, his family allowed me to stay with them until I was able to find adequate housing.

"Having to become independent was really hard on you," Juanita says. "Alcohol and partying continued to be a vice for you. I think it was scary for you to imagine not having that to get you through."

At 21-years-old, I found a house with three other men living there, one being the homeowner and landlord.

#### Sherburn Street

This was the darkest point in my journey. I felt that no matter how my family's lives continued to change, I was always expected to bear the brunt of it. Whether it was true or not, I began to crumble under the pressure.

"I thought you should have talked to a professional when you got a little older," says my sister, Becky. "You were still so resentful, and you seemed distant. I thought if you had an objective person to talk to, they might have helped you figure out how to cope with your emotions. When you had to move out you were angry, not toward dad so much, but a little resentful towards me. You were really resentful towards mom for the fact that you weren't ready to be on your own, and it was forced upon you." By this point I knew making money was essential to my survival, but I would barely work the hours needed to cover my bills. I lost so many various jobs, I actually lost count. I was in a cycle of finding a job, making enough money to not work for a while, and then start again.

I continued to mask my internal struggle with the usual intoxicants. One of my roommates and good friend, 30-year-old Gary Johns, noticed a few patterns in my behaviour. "I remember you were on a tear with women when you first moved in," says Gary. "There must have been at least five different chicks the first month or two, but I think you had as many jobs as you did women."

As my time in the house went on, my mental state continued to deteriorate as did my relationship with the landlord, Milo. I can recall times when I was buying alcohol, cigarettes and drugs over the food I needed to stay healthy. I had borrowed money from my family on several occasions, and I still wasn't working steady jobs.

"Nan and Auntie Lee were there for you, but I don't think they knew how to be there for you," says Becky. "They'd be there for you almost too much, which wasn't what you needed."

I remember days I wouldn't want to wake up and face the world. I would pull the blinds, stay in bed and skip any obligations I had. I didn't really care who would be angry with me, or how the decision would impact me. Gary says my cleanliness had slipped, and I was even struggling to clean the shared areas. My behaviour was beginning to affect my living situation, but I still had time for parties.

"You would bring your buddies over late at night, talking and laughing loudly while I was sleeping," says Gary. "I think you acted that way because you were young and your friends were just a little rowdy."

But as with my family, Gary never saw my partying as a way to cope. "I couldn't comment on substance abuse, as I was high (on marijuana) most of the time," says Gary. "I enjoyed the time we lived together."

When Gary would approach me with suggestions for improving my behaviour, we were always able to talk about it and come up with solutions. We would make progress together. However, my landlord would also approach me with issues regarding my lifestyle.

"Milo would blame you for things like leaving the door unlocked and dirty dishes, and then give you shit for them," Gary says. "When he would come to you with problems it would often end up in an argument — little was ever solved. He had some anti-Evan tendencies. When I would calmly ask you to improve, maybe you just didn't feel as attacked on a personal level."

#### 20/20

In hindsight, I could have been a lot better in many ways. Eventually my landlord gave me 30 days notice of eviction, as he was selling the house. The sale of the house felt personal, almost as if I had made Milo want to leave. It felt like a step back.

During my time in the house I improved my physical condition. I had let myself go

a bit, but I began working out again and taking care of my body. "You had always been one for fitness and it was a good outlet," says Becky. "At that time there was so much going on mentally and emotionally. When I would see you, you would look drained and you were always on edge."

As a result, I started feeling better in other areas too, even mentally. Although my upcoming move felt negative to me initially, I had a better attitude this time. I found a more "stable" job working as a security guard, and I started looking for places. Right around the same time, a friend of mine told me he was looking to move out too.

#### Wolseley Avenue

We found a place in a nice area and we moved in. I felt my life stabilizing. My home life was comfortable, taken care of and permanent for the first time since living with my dad.

I had always planned on pursuing a career in journalism, but given the circumstances I was able to find excuses to put it off. "You never got your ducks in a row for school because everything was forced upon you," says Becky. "Making the effort to find something you were interested in was a challenge."

While living there, I looked into school and enrolled in a journalism class.

"There were times when you seemed happier and healthier then you had been, but then the stress and stuff would kick in," says Becky. "Even in your first year of school you were so overwhelmed, but even compared to now you're the happiest and healthiest you've been in a long time. You don't seem to live in the past as much anymore."

#### Update

Since living in Wolseley, I have moved into my own place. I am scheduled to graduate in April 2016. I'm not perfect and I still drink. But I don't abuse alcohol the way I used to. I don't mask my pain with it, and I certainly don't let alcohol run my life. Some of my family members think I would still benefit from speaking to healthcare professionals to deal with issues in my past.

"I've seen a transformation, but I still don't know if you've dealt with all the emotions you felt," says Becky. "You've matured, and you've made peace with a lot that has happened, but I still think you should talk to a professional."

As a person who suffers from anxiety, Becky can relate. "Talking to someone can teach you a lot about yourself," she says. "Help should be more easily accessible for people."

After completing this project, I'm considering seeking a mental health professional as school winds down.

#### My support

My family is on good terms now and the dust has settled, so to speak. My family may not be a traditional one, but they are my support.

"You're an open book now," says Juanita. "I think you still feel like you need to be strong, but you're a lot more mature now. I think you're honest about expressing yourself more than you were back then, and there is no shame in that." My friends are my support too. They are there for me when I need it, and I thank them for it.

I still struggle with some of the same things, such as the demons from my past, but I have learned this is a lifelong commitment. My road of recovery is a long one, and I still have more work to put in.

My mom tells me the past 10 years have put me where I am today. I would have to agree. I feel enlightened and ready to face whatever challenges the world throws at me. I'm finally living a life of meaning.