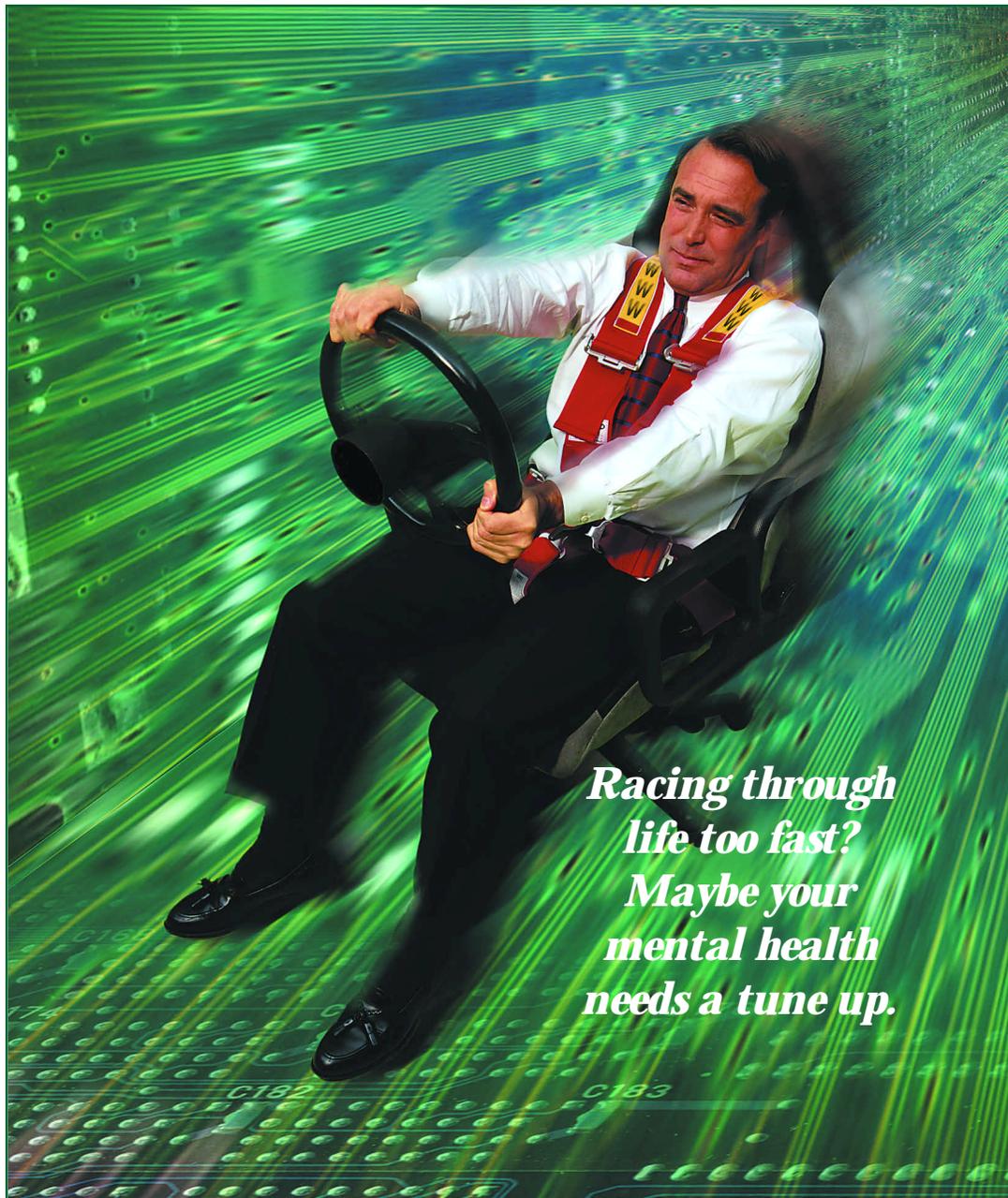


Network

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*Racing through
life too fast?
Maybe your
mental health
needs a tune up.*



**CANADIAN MENTAL
HEALTH ASSOCIATION**
**L'ASSOCIATION CANADIENNE
POUR LA SANTÉ MENTALE**

Ontario Division/Division de l'Ontario

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OUR MISSION:

To provide leadership in advocacy and service delivery for people with mental disorders, and to enhance, maintain and promote the mental health of all individuals and communities in Ontario.

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A New Sense of Urgency

This edition of *Network* examines mental health in the workplace. For most of us, balancing the demands of our working and personal lives remains a constant struggle. Against the backdrop of horrific global events, feature authors in this issue argue that we have a new sense of urgency in our lives, one that demands that we pay attention to our own, and our family's, emotional well being.

People who work in the health care industry do so because we value service to others. In any form of health care, but in mental health care in particular, our "selves" are the tools through which we provide counseling, support, encouragement and hope to patients and clients. If our "selves" are in poor working order, we cannot deliver optimal mental health care.

Yet, we know that in hospitals, community agencies and other places where mental health services are delivered, workers are struggling with the pressure of constant change. With workloads increasing, job loss threatened, and low wages, many workers feel under-appreciated and demoralized. The result is a decline in the physical and mental health of our most precious resource, the people who deliver mental health care in Ontario. This decline is measured in high rates of long-term disability claims where depression is the most common health problem.

Organizations that provide mental health services have particular challenges when it comes to workplace health. We serve a highly vulnerable client group where daily decisions can have life or death consequences. In addition, crisis units, emergency wards, as well as inpatient psychiatric wards, can be places where violence occurs. Community mental health staff often work alone and travel long distances to meet clients in their own communities. These factors combine to create complicated leadership and management

challenges. Nonetheless, we have an obligation to support the system's workers by demonstrating the highest quality in governance leadership, creating and maintaining safe work environments, providing appropriate supervisory and management training and evolving organizational structures that empower staff at every level. Organizational excellence is critical in maintaining the mental health of our workforce, and in recruiting and retaining qualified and motivated staff.

In the pages of this edition, Janice Stein describes the changed world in which we now live. She offers a hopeful message regarding the capacity for societies to adapt to change. Alexandra Keay-Murray talks about what individuals can do to help relieve the stress in their working and personal lives. Dr. Mark Sanford offers advice on how children can be raised in ways where they are more resilient and less vulnerable to stress. And as stated above, employers too must do their part. Hershell Ezrin speaks to organizational structures that support and empower workers. Finally, we profile the Mental Health Works project that works with companies to raise the profile of mental health in the workplace as a business issue that affects the bottom line for thousands of Canadian organizations.

As we move forward during province-wide mental health reform activities, many of us are examining not only the quantitative changes needed in the mental health system (how many services delivered where, and how, and under what governance structures) but also qualitative changes (what is the morale of the work force and how can those who provide these services be supported in their caring). This issue of *Network* challenges us, both individually and organizationally, to recognize that care givers need care too.



BARBARA EVERETT, PH.D.
Chief Executive Officer



A symbol of resilience and recovery for people who care about mental illness and health.

Mustering Our Resources

What kind of shape is our mental health in? For many of us, the good life has been acquired at a high price. Sixty hour work weeks purchased the managerial position we wanted, but left us short on time with family and friends. The shortage of affordable housing and welfare cutbacks have made the vulnerable in our society even more vulnerable. The terrible events of September 11 provided the catalyst for the theme of this issue of *Network* – perhaps we have to be pushed to the edge before we realize what is truly important in life. The people we interviewed for this issue make it clear that building nurturing relationships is the cornerstone of good mental health. And those nurturing relationships must take place not only in our family and with our friends, but also spill over into the workplace. Corporate leaders have only to look at the financial bottom line of the cost to business of people with mental health problems to realize that they too have to reach out to employees in new ways.

We start this issue of *Network* with an interview with Janice Stein, Harrowston Professor of Conflict Management in the Department of Political Science and the Director of the Munk Centre for International Studies at the University of Toronto. She looks at the political and social impact of September 11 and ends with the comment that ‘Canada brings enormous resources to the table in its capacity to cope with this event. The challenge is to muster those resources’. In terms of our mental health, ‘mustered those resources’ must be a priority both for us and our children if we are to survive, and thrive and find solutions to the stresses we face in our day-to-day lives.



*In our race
through life, have
we overlooked the
most important
things?*

The NEW LANDSCAPE

THERE'S NO DOUBT THAT CANADIANS ARE LIVING IN A DIFFERENT WORLD. FEARS OVER JOB SECURITY HAVE BEEN INTENSIFIED; INVESTMENT AND RETIREMENT FUNDS ROCKED BY FALLING MARKETS, AND, FOR THOSE WHO HAVE TO FLY, A DEEPER CONCERN ABOUT THE SECURITY SURROUNDING AIR TRAVEL. THE COMMON CONSENSUS HAS BEEN THAT WE ARE FOREVER CHANGED. BUT ARE OUR CIRCUMSTANCES RADICALLY DIFFERENT FROM WORLD WAR I AND II WHEN IN EUROPE PEOPLE LEARNED TO LIVE WITH BOMBING RAIDS ON A REGULAR BASIS? WAS SEPTEMBER 11TH TRULY A UNIQUE EVENT, THE LIKES OF WHICH HAVE NOT BEEN EXPERIENCED BEFORE IN HISTORY? AND WHAT DOES HISTORY TELL US ABOUT OUR ABILITY TO NOT ONLY LIVE WITH, BUT SURVIVE, TRAUMATIC EVENTS? JANICE STEIN, DIRECTOR OF THE MUNK CENTRE FOR INTERNATIONAL STUDIES AT THE UNIVERSITY OF TORONTO, ANSWERS SOME OF THESE QUESTIONS, AND MORE, IN THE FOLLOWING INTERVIEW.

Harrowston Professor of Conflict Management and Negotiation in the University of Toronto's Department of Political Science, and Director of the Munk Centre for International Studies at U of T, Janice Stein is an acknowledged expert on conflict resolution and international relations, with an emphasis on the Middle East. She received her undergraduate degree from McGill University, her master's from Yale University, and returned to McGill for doctoral studies. She joined U of T in 1982 and was named a University Professor in 1996. A Fellow of the Royal Society of Canada, she has received other honours, including the Edgar S. Furniss Jr. Award of the Mershon Center, in recognition of her contribution to the study of national security and civilian military education. She has served on many international advisory panels, including membership in the Working Group on Middle East Negotiations at the United States Institute of Peace. Janice Stein was the Massey lecturer for 2001.

Edward T. Linenthal, professor of religion and American culture at the University of Wisconsin recently wrote an article on the events of September 11th entitled “The New Normal” and said “There’s a sense in my mind that we live now in a kind of alien, foreboding, frightening landscape, and we’re searching for the resources with which to deal with it.....It was a qualitatively different event from anything that has ever happened. And I think it’s going to be a while before we get a sense of the new landscape.” Do you agree that September 11th was “a qualitatively different event” from anything history has experienced?

JANICE STEIN: No. Terrorism is something that societies have lived with for millennia. There’s been terrorism in every epoch of recorded history. What’s new is the target. There has never been an attack of this magnitude on the United States by non-American citizens. That’s what’s new. It is also larger in scope than the kinds of attacks that most other European societies, for example, have experienced. There have been long-standing periods when Britain has coped with terrorism in London by the IRA, and there have been periods in France where really large actions were planned, such as the plan to blow up the Eiffel Tower that was aborted. So we are talking really of a matter of degree. What makes September 11th so radically different is that the target here was the United States and the attack was of the massive scope that it was. But the really important point is that we are not dealing with a revolution in world affairs.

What do you think the impact continues to be on Canadians as we’ve now moved some months away from the event?

JANICE STEIN: I think Canadians understand better than any other society in the world how profoundly shocking this was to the United States. How traumatic it was to them. And there certainly is not the expectation among Canadians that this is something that will quickly fade, either in American society or in the American government.

There’s obviously a ‘new normal’ that Americans are living with in the aftermath of September 11, what about Canadians?

JANICE STEIN: We’re struggling to adapt to what

will be an ongoing reality in our relationship with the United States, and that relationship is more important to us than it is to any other society in the world. We are the neighbour to the north who more than any other society has to adapt to what has happened in the United States. We don’t have a normal yet – we’re still struggling to figure that out.

Would you agree with Edward Linenthal that we are looking at a more ‘frightening landscape’ simply because of this uncertainty?

JANICE STEIN: I think he is correct about that. The landscape has changed and certainly it is more frightening in the United States. Americans now live with the prospect that this was not an isolated attack. There may be others. They are re-configuring their society to deal with that prospect. Canadians, one removed from that, nevertheless have to deal with the consequences in our relationship with the United States. I think Mr. Linenthal is right that there is a more frightening landscape than there was in 2001 before September 11, but we have to see this, not as a qualitatively different kind of problem, but as a serious problem for which we do have precedents in world history, and which is certainly going to require significant changes in our relationship with the United States.

Janice, what does history tell us about our ability to live with traumatic events, not just in North America but globally?

JANICE STEIN: Societies adapt. They are remarkably flexible. Even under extreme trauma – war, devastation and destruction – what is actually remarkable is the capacity of people to adapt and to find ways of reconstructing their societies even when they are close to the margins. Look at the capacity of Afghans who have gone through 25 years of brutality ending with a military campaign by the United States against the Taliban. People adapt, they develop new social forms, and informal ways of coping. And Canada certainly brings enormous resources to the table in its capacity to cope with this event. We have a complex and rich society that is capable of innovation and experimentation. We have strong and deeply embedded institutions. The challenge is to muster those resources.

Cultivating SUPPORT SYSTEMS

IN THE FACE OF ANY KIND OF TRAUMA, HOW WELL HAVE WE PREPARED OUR MENTAL HEALTH RESOURCES TO COPE? DO WE EVEN SEE THE NEED TO PUT IN PLACE PRACTICES THAT WILL SAFEGUARD US FROM SLIPPING INTO DEPRESSION WHEN LIFE'S BUMPY ROAD THROWS US AN EXTRA CURVE? CULTIVATING SUPPORTIVE RELATIONSHIPS TAKES TIME – SOMETHING MANY OF US ARE LACKING IN OUR BUSY LIVES – AND SO WHEN A CRISIS HITS THE RESOURCES THAT WE MOST NEED MAY NOT BE AVAILABLE TO US. IN THE FOLLOWING INTERVIEW, ALEXANDRA KEAY-MURRAY, PUBLIC EDUCATION CONSULTANT AT THE OTTAWA BRANCH OF THE CANADIAN MENTAL HEALTH ASSOCIATION, MAKES THE POINT THAT WE NEED TO BEGIN EXAMINING HOW WE PRIORITIZE OUR TIME AND TO SEE THE IMPORTANCE OF BUILDING RELATIONSHIPS THAT WILL BECOME THE CORNERSTONE OF A MENTAL HEALTH SUPPORT SYSTEM.

Alexandra Keay-Murray has been in the field of health communications since 1982, working in both the public and non-profit sectors. She held the position of Director of Communications at the Canadian Mental Health Association, Ontario Division, between 1990 and 1993. She spent three years in Singapore working as a project manager for the Pharmaceutical Society of Singapore where she was responsible for the development and implementation of a public education campaign raising the profile of pharmacists and their role to the general population. Since her return to Ottawa, Alexandra has been working as a Public Education Consultant at the Ottawa Branch of CMHA, marketing and delivering workshops in stress management and crisis intervention.

Alex, as a society that's obsessed with physical health how obsessed or concerned are we about our mental health?

ALEXANDRA KEAY-MURRAY: People are very focused on their physical health, but as a society – and certainly we learn this from childhood on – we do not tend to pay attention to our mental health. We have a tendency to think that if we are feeling down or depressed for a few days or a few weeks it will probably just go away. So there has always been this hesitation to address the needs of our mental health. We just don't seem socialized to be able to say yes, our mental health is as important as our physical health. If we break an arm or a leg we have it attended to immediately, but if we've been feeling sad for a few weeks we just think we're going through a bad patch, or worse, we hide it because we don't want anyone to realize that we can't cope with the issues that we have in our life at the present time.

How would you describe a person who has good mental health?

ALEXANDRA KEAY-MURRAY: I think it's someone who feels good about getting up in the morning. Someone who feels good about their life as it is right now. Obviously we can't all have the perfect job, the perfect relationship, the perfect child, and we have to be aware of that. Everyone has good and bad days, and mental health just like physical health is cyclical. Physically we can have our immune system suffer. One winter we might have cold after cold, another winter we sail through with no problems. But our mental health does impact our physical health. If we have gone through a crisis or a very difficult time, often the immune system will deteriorate latently and you'll find that six months or a year later is when you are hit with physical problems. There is a definite correlation between the two, a symbiotic relationship. They feed each other. Obviously if you have a chronic illness your mental

health can be affected. When we hear about people who are dealing with a terminal illness who psychologically are trying to be positive, practice visualization techniques and so on, they are trying to affect their physical health by improving their mental health. Studies have shown that there is a relationship between improved physical health and those who think positively and those who practice positive coping skills. Not necessarily a cure, we can't promise that, but the supports we draw upon to improve our mental outlook can be a real determinant in our physical health.

The ways in which we take care of our physical health are very visible – we eat properly, we exercise, we brush our teeth – but the things we need to do to take care of our mental health are somewhat more invisible. What should we be doing, on a regular basis almost without thinking about it, that will take care of our mental health?

ALEXANDRA KEAY-MURRAY: One of the things is to make sure that you are fitting the things you like to do into your life somehow. And that is a huge challenge these days when everyone is running from one task to another. Make time to go to that exercise class you've been talking about. Spend time with people that you want to spend time with. How many of us are afraid to say no, and so end up making a dinner engagement with someone we really don't want to be with. Or how about that friend or relative who telephones you and leaves you drained by the time they ring off? We have to be more selective about the people we spend time with. There are so many things we do that just drain us, we have to prioritize how we spend our time. The reality is that you might be doing two or three things a week or a month that you have no interest in which are draining you and affecting your mental health.

We just don't seem socialized to be able to say yes, our mental health is as important as our physical health.

Cultivating Support Systems

What happens to us when we are already in a situation where we are pushed to the limit, our stress load is high, and then a major traumatic event happens?

ALEXANDRA KEAY-MURRAY: I think in a crisis situation the first stage is shock and denial, similar to how people felt during the cold war in the early sixties when bomb shelters were being built in backyards. There was that tremendous fear that this could happen here, on our street, in our city. All that uncertainty, all that fear of the unknown, is a difficult thing for the human race to deal with in terms of mental health. Certainly in Canada we've been living in quite a bubble for the last while. Life has been very safe in terms of international terrorism and war. We turn on CNN every day and see what is happening around the world and thank God it's not us. Suddenly we are facing this. Many of us have had to talk to our children about it. It's very reminiscent of the first and second world wars where parents had to tell their children that there were safety issues involved in their day to day life that they had never had to worry about before.

So many Canadians already feel very stressed – too much to do, too little time – how do we deal with unexpected additional stressors?

ALEXANDRA KEAY-MURRAY: One of the most important things we talk about in basic stress management is cultivating support systems. We often use the analogy of being stranded in a snow storm at two in the morning. Could you think of two or three people you could call to come to your aid who are not family members? And if you can't, and the majority of us couldn't once you've excluded family members, then what does that say about the amount of time we have taken to cultivate support systems? Do you have time in your schedule to

help someone through a difficult time? I think that in the last 15 to 20 years we have all lost sight of the importance of building those kind of support systems because we tend to be so busy. If you are not busy there is the underlying assumption that there is something wrong with your life. The trouble is we've been too busy to cultivate the kind of relationships that are so necessary, so that when a crisis hits we don't have those resources available to us.

There has been more coverage in the media lately about the importance of defining priorities, of spending more time with the people you care about – a recognition that there is more to life than work. Do you think this will continue to be viewed as a priority?

ALEXANDRA KEAY-MURRAY: I tend to be a positive thinker and I feel that heightened sensitivity is not going to go away. I think the same is true of

people who survived the first and second world wars. There was a greater compassion that came out of their experiences that frankly the last generation has lost. Most of us have never seen war – our generation has been very fortunate. Previous generations did cultivate support systems and made sure they had friends to help them out but we have moved away from that.

But now spending time with family and friends has become a priority. We are learning how to reconnect with family and friends.

So you are saying that lesson is an important one no matter what the stressors are, whether it's someone losing their job, or going through a divorce, we still need to continue to build relationships, continue doing things that take us away from the stress?

One of the most important things we talk about in basic stress management is cultivating support systems... The trouble is we've been too busy to cultivate the kind of relationships that are so necessary, so that when a crisis hits we don't have those resources available to us.

Studies have shown that there is a relationship between those who think positively and those who practice positive coping skills.

ALEXANDRA KEAY-MURRAY: Absolutely. The worst thing you can do is try to control the uncontrollable. We generally can't control stress, but we can control the way we respond to stress. For instance, you can't eliminate the fact that you've lost your job, or that you've lost a loved one, but you can control how you are going to deal with that situation, and one of the ways is to spend time with family and friends doing things you enjoy. Not to get obsessed about being afraid of the future. What would we have done if people in the second world war had done that for instance? But they got up, they went to work, they fell in love and got married and raised children. People carried on. We can control our mental health: we can see the positive in situations, we can make things more positive, we can be supportive to a friend who is going through a difficult time. I think the danger point is reached when people think they have lost control. There's that feeling of 'what's the point of going on?'. But if you really believe that you can control how you respond to certain events in your life, if you don't relinquish that control, then you can feel that anything is possible.

The Canadian Mental Health Association (CMHA), Ontario Division has 33 branches across the province. Contact them for more information on stress or for a copy of a booklet "Coping with Stress" which is a joint publication of the Heart and Stroke Foundation and the Canadian Mental Health Association.

What can be done to relieve stress in our lives?

We all have different ways of responding to the stress in our lives. Some may have physical signs such as muscle tension or difficulty in sleeping. Others may have more emotional reactions, such as outbursts of crying or anger. Understanding your response to a stressful situation is one of the first steps in developing your ability to lower those levels. We need to ask ourselves the question, am I really spending my life in the way that is most important to me? Am I making time for the important people in my life? Is it time, in fact, to rearrange my priorities?

One of the best ways to fight stress is to get pleasure out of life; to make time for those people and events that are truly important to you.

The Canadian Mental Health Association, Ontario Division suggest the following list of things to do to help reduce the stresses that all of us experience:

- **Talk about your feelings. To move into solution-based thinking, it's important to vent.**
- **Find forms of expression that are appropriate for you. There is no single "right way".**
- **Find someone you feel safe with to talk to about your fears. It's good to talk about what's bothering you. Explore your feelings with this person.**
- **Offer support. Helping others, in good times and bad, builds relationships that help us heal.**
- **Exercise, stay motivated, and motivate others to do the same.**
- **Appreciate the little things – take pleasure in walks, spend more time with friends and family, or cozy up with a good book.**

Increasing OUR CHILDREN'S RESILIENCY

PERHAPS ONE OF THE MOST IMPORTANT WAYS IN WHICH WE CAN BECOME A NATION WHICH PLACES A STRONG EMPHASIS ON TAKING CARE OF OUR MENTAL HEALTH IS IN MODELLING THAT MESSAGE TO OUR CHILDREN. AS WE SEEK TO INCREASE THEIR RESILIENCY TO STRESS AND UNDERSTAND THEIR VULNERABILITIES, WE ARE HELPING TO BUILD A GENERATION WHO WILL KNOW HOW TO FACE AND DEAL WITH STRESS IN A MORE POSITIVE MANNER. DR. MARK SANFORD (HEAD, MOOD DISORDERS SERVICE, CHILD PSYCHIATRY PROGRAM, CAMH), LOOKS AT THE CHARACTERISTICS WHICH WOULD MAKE CHILDREN BETTER ABLE TO COPE WITH A STRESSFUL SITUATION, AND TALKS ABOUT HOW THESE CHARACTERISTICS CAN BE ENCOURAGED AND FOSTERED. AS WITH THE INTERVIEW WITH ALEXANDRA KEAY-MURRAY, THE THEME OF NURTURING RELATIONSHIPS IS ONCE AGAIN MENTIONED AS BEING 'HUGELY IMPORTANT AND VERY PROTECTIVE – IT SEEMS TO BUFFER A WHOLE RANGE OF STRESSORS'. IN A WORLD WHERE CHANGE IS CONSTANT AND OFTEN TRAUMATIC, THE RAMIFICATIONS OF NOT HELPING OUR CHILDREN TO DEAL WITH THE STRESSES OF LIFE SHOULD MOTIVATE US TO FIND WAYS TO INCREASE THEIR RESILIENCY, AND OURS.

Dr. Mark Sanford was educated at the University of Otago Medical School in New Zealand, and did his psychiatry residency training at McMaster University and the University of Toronto. Dr. Sanford is an Associate Professor, Department of Psychiatry at the University of Toronto and Head of the Mood Disorders Service, Child Psychiatry Program at the Centre for Addiction and Mental Health (CAMH). His clinical interest is in the assessment and treatment of children with emotional disorders. Research interests include: clinical course of adolescent psychiatric disorders; acute and maintenance treatment interventions for child and adolescent mood disorders; evaluation of adjunctive family psychoeducation in depressed adolescents; resiliency assessment in children of parents with psychiatric disorders and addictions and preventive interventions for children at risk for emotional disorders.

In speaking with Alexandra Keay-Murray, Public Education Consultant, CMHA Ottawa Branch, she made the comment that from childhood on we learn not to pay attention to our mental health. How can parents help their children to safeguard their mental health?

DR. MARK SANFORD: That's quite a difficult question to answer because part of the problem is that children are very different in their vulnerability to different stressors. There's not a general answer that one can provide that would cover all children. I think parents have to consider the strengths and weaknesses of their individual child and the particular vulnerabilities they might have. We know in general that there are certain things that seem to increase resiliency against stressors, and some children will have more of these and others less, so I think the first step is understanding a particular child's resiliency.

What are some of the characteristics that would help a child's resiliency?

Some children seem to have good social coping skills. They are non-aggressive. They relate well to other children and adults. Clearly these children are going to cope better in the face of stressors, and are likely to receive better support from the people around them. Intelligence also seems to be a factor. High levels of intelligence seem to help children in coping and understanding not only the stress but also their role in it. They might be able to make a better judgment as to whether they are to blame because of a parent's separation for instance, or to make some sense of the stressful experience they are having. On the other hand certain children have a tendency towards aggressive behavior and they are less likely to cope well. This characteristic makes them more likely to react in an aggressive way which then tends to isolate them further from people around, complicating the situation even further. So encouraging non-aggressive coping strategies in those children would be quite important.

Having a strong support system – good relationships – is a major factor for adults in dealing with stress and I presume this would be just as critical for a child?

Yes, we know that if children have supportive relationships with one or both parents where they can receive nurturing, that seems to be a very strong protective factor. An ongoing special relationship with a grandparent or neighbour which provides support and has positive involvement is also quite predictive of children who will cope well with stress. Another child characteristic is those children who have areas of particular competence, who may be very good academically, or in sports. A high level of involvement in these areas of competence is quite sustaining to children, even when other parts of their life are affected by stress. So that needs to be fostered.

You mentioned that parents need to consider the strengths and weaknesses of their individual child – are there different coping patterns?

The child's way of coping comes back to cognitive factors and how children perceive stress and how they cope with stress. There are certain coping strategies that children employ which seem to be more helpful in certain situations. So total avoidance type of coping is not that helpful, whereas the kind of coping where children process things cognitively and seek support seem to be more helpful strategies. Some children have a concept of helplessness whereas others feel a lot of personal agency – that they are able to affect their lives and their situation – and in the face of stress this seems to be quite helpful compared to a child who becomes overwhelmed and feels there is nothing they can do. Quite probably children who have had opportunities to be effective and to develop a sense of personal competence will be relatively protected in the face of stress. These are some of the things that come to mind as being important characteristics of a child and their environment that will be protective. Having said that however, severe stress can overwhelm any child so there is no such thing as a child who is totally resilient to stress.

One of the things you have mentioned as being an important coping tool for children, and for adults too for that matter, is nurturing relationships.

Increasing Our Children's Resiliency

DR. MARK SANFORD: Yes, it seems to be hugely important and very protective for adults as well as children to have that common nurturance and support. It seems to buffer a whole range of stressors. An isolated child who doesn't have that level of peer support, and maybe who avoids family members – and you often see this in teenagers – is going to be placed at higher risk.

Family avoidance seems to almost be a characteristic of those teenage years.

DR. MARK SANFORD: There is a normal process of withdrawing from family and sometimes a child needs that alienation because the family isn't supportive or is hostile or even abusive to them, but for most children family is a huge area of support.

Within a normal family environment what signs should be triggers to a parent that a child is carrying an abnormal load of stress? What behavioural changes would signal this?

DR. MARK SANFORD: One of the things is what you mentioned – a change in behaviour. It's obvious when there is a change in a level of functioning that there is a problem. For instance a child whose marks deteriorate at school or who seems less interested in school. Or perhaps they have suddenly lost interest in activities they were previously involved in. Any abrupt changes like this are indicative of something more disturbing going on with the child. There are a range of symptoms. Obviously stress tends to affect our moods, so more anxiety, more depression, more worrying or concern, those types of changes would also alert a parent. But stress can also affect our physical functioning, so sleep or appetite changes, kids who seem overly tired or can't be bothered doing anything, those types of changes are also signals to alert a parent. Very self-critical comments from a child that normally feels good about themselves but is now talking in hopeless terms, or sees their future as hopeless, should also cause concern in a parent.

How can a parent provide some comfort and normalcy for a child when they are exposed to extremely stressful situations? For instance I'm thinking of events like September 11th, or the situation in Ireland recently where parents were having to walk their children to school through a barrage of abuse.

DR. MARK SANFORD: Well I think there are a couple of things. First, can the stressor be removed? In the case of the situation in Ireland, although I understand politically and personally why parents might take their children through the ranks of abusive adults, children need to be protected from this kind of abuse – we should be very reluctant to accommodate those kinds of stressors. If somebody is sick or ill in the hospital, a parent or close family member or friend, those are things you can't control so you can't make that stressor go away. That's where you need to help a child understand what is going on. Most children benefit from that. Keeping things secret will often lead to even greater fears than are necessary. So in this kind of situation you would

try to be open without being morbid and help them process on an intellectual basis what is happening.

You also need to give the child an opportunity for them to express their concerns and to talk about their feelings and

thoughts so that you are not always lecturing the child. I think it's important to be available to hear the child. It's quite amazing how often just having the chance to speak about concerns will frequently alleviate those concerns in children. But then you also have to encourage them not to dwell on those things either. There's a time to talk about them but there's also a time to carry on and be involved in their usual routines.

So we need to allow children to be children even in a tragic or stress-filled situation?

DR. MARK SANFORD: Yes, and I think that's incredibly important. In fact just purely expressing your feelings without in some way trying to master that and cope and carry on is not that helpful, but

Parents have to consider the strengths and weaknesses of their individual child and the particular vulnerabilities they might have.

children usually want to do this anyway and once they have had a chance to express their feelings they often will put a positive twist on things and then get back into something positive. For instance if they have a sick friend or relative, suggesting that they make a card to give them is a coping strategy that a parent can encourage that will help the child to express some of those feelings we've talked about, and also turn it into a positive experience.

Would you agree that sometimes as adults we feel guilty about doing something that is just pure fun when we are in a tragic situation, whereas a child doesn't feel those kind of inhibitive factors?

DR. MARK SANFORD: It's never helpful as a parent or adult to model being immobilized by our feelings. It's one thing for parents to share their feelings – that legitimizes a child's fears or concerns when a parent says 'yes, I feel the same way', but when a parent becomes completely immobilized that's not going to be helpful for a child. The parent has to demonstrate that they can

continue as well and show their own coping strategies. That might be listening to music, watching a movie, whatever, but it gives the message that 'I can't think about this stressful situation all the time, I need some pleasurable things in my life too'. If an adult can give that kind of message to the child that will be very supportive. Children do want to go on and have fun – there shouldn't be guilt in that. Even addressing that directly with a child can be helpful. I think an important thing to recognize is that when it comes to stress everybody tries to cope so most behaviour that we see following a stressful situation are attempts to cope. And this is true for both adults and children. Some coping mechanisms work better than others – we need to observe how a child is trying to cope and see what strategies are working and which ones are not. There is a healthy side to all of us that tries to cope and master these situations and deal with them the best we can. We have to recognize where a child's attempt at coping is just causing them more problems.



CMHA CONFERENCE ANNOUNCEMENT

*People, Policy & Passion!:
New Conversations about
Mental Health*

The CMHA National Conference is one of Canada's largest mental health conferences attracting health care professionals, public educators, policy makers, community groups, consumers, families and concerned citizens. The goal of this year's conference is to create new conversations and opportunities for CMHA to learn about and work with others in the community and government to achieve common goals.

WHEN? Saturday, November 16 to Tuesday, November 19, 2002
WHERE? Crowne Plaza Hotel, Ottawa, Ontario
Watch for detailed information at www.cmha.ca.

Providing Support in the Workplace

ALTHOUGH BUSINESS, IN THE WORDS OF HERSHELL EZRIN, CHAIRMAN AND CHIEF EXECUTIVE OFFICER OF GPC INTERNATIONAL, “CANNOT, AND SHOULD NOT, TAKE ON THE RESPONSIBILITY OF MANAGING PEOPLE’S LIVES, IT DOES HAVE TO RECOGNIZE THE FACT THAT WITHOUT AN OPEN-MINDEDNESS TO THEIR NEEDS, CORPORATIONS WILL NEVER SEE ITS EMPLOYEES REACH THEIR FULL POTENTIAL”. A COMPELLING REASON IN ITSELF FOR CORPORATIONS TO BOTH IDENTIFY AND SEEK TO PROVIDE SOLUTIONS TO THE PRESSURES AND CHALLENGES FACED BY ITS WORKFORCE. THE FEBRUARY 2002 REPORT, WORK-LIFE BALANCE: A REPORT TO THE MINISTERS RESPONSIBLE FOR LABOUR IN CANADA, RECOGNIZES THE NEED TO “CREATE AND MAINTAIN AN ENVIRONMENT THAT WILL ALLOW WORKERS TO MAINTAIN A BALANCE BETWEEN WORK AND PERSONAL RESPONSIBILITIES”. MR. EZRIN EXAMINES HOW THAT BALANCE CAN BE BROUGHT ABOUT.

GPC International is a worldwide public affairs and communications consulting firm serving clients with a wide array of needs. Through a network of offices in 20 countries, GPC combines international perspective with local knowledge. Over 500 consultants around the world provide expertise in a range of industry sectors, helping clients advance their interests with the many audiences who impact their business. GPC is a supporter of the Global Business and Economic Roundtable on Addiction and Mental Health.

Mr. Ezrin, what makes a ‘mentally healthy workplace’ – what should companies be doing?

HERSHELL EZRIN: I’d like to start with the recognition that it’s a continuum. You can’t say ‘I’ve implemented an EAP program’ or ‘I’ve done such and such’ and think that you can rest on your laurels. What you have to say is, ‘I have started to meet a number of the needs of people in our workplace, but I have to be constantly vigilant to see how things work, how they change over time, and I have to be prepared to continue to change the way I react and anticipate people’s needs’.

It seems that not too long ago, part of the work ethic was that you didn’t bring personal problems into the workplace - the role of managers in business in regards to how they respond to the stresses that employees carry into the workplace seems to be changing.

HERSHELL EZRIN: That’s true, and it’s reflective of the nature of technology. We have everything from the telephone to email, with any number of other wireless communication devices, so in essence it means you are constantly ‘on’. It used to be that once you left the office or your place of employment, no one could reach you, but now whether you are in the subway, your car, or in a restaurant you can still be contacted, so you are constantly following up on work related issues, leaving less time for personal ones. It’s our job as managers to provide support in

helping employees access the services they need to respond to life's dilemmas.

Is business finding itself in the same situation as schools who are expected to resolve issues that stem from bad parenting? Is business expected to deal with the fact that we are living in a stressful world?

HERSHELL EZRIN: That's an interesting analogy and I don't know if I would go quite that far, but I think it's fair to say that because we are asking so much more from employees we have to accept the fact that business has to understand their needs outside of work hours if we are to get the maximum productivity and efficiency from our workers. I think that's where the genesis for a lot of these EAP programs come from, which are very important for people's mental health. For instance, knowing that you can find out who to call if you need nursing assistance, or some kind of supervisory care, for an elderly parent who may live in another city allows that pressure to be taken off your shoulders.

What we are asking of business then is to be caring and understanding of the situations that inevitably accompany us into our workplace?

HERSHELL EZRIN: Well, we are asking business to do it in their own self-interest. Caring and understanding are words that people don't always

associate with business. Businesses are doing this because they are going to have much more motivated employees – employees who will not just have a sense of loyalty to them, but more importantly will be able to devote the time that they have at work to thinking about the work they have to do and not of the other things they have responsibility for that are causing stress and pressure.

Can you give me an example of this kind of support within your own company?

HERSHELL EZRIN: We have an internal communications group that meets in our Toronto office a couple of times a month and their job is to identify things that are concerning people, whether that's in the workplace or not. We then try to find ways to help relieve some of that stress. Some of this has been done in previous times under other guises. I am not suggesting that we are re-inventing the wheel here, but rather that it is important that there be vehicles where people with different perspectives can contribute their understanding and hopefully make the workplace a more sympathetic environment for people to work in.

Visit the Canadian Policy Research Network website at www.cprn.com. Themes relating to work in the new economy; productivity and the quality of work life; and developing tomorrow's workforce are covered in depth. By illuminating how the changing world of work affects the lives of Canadians, these and other projects contribute to informed public discussion of policy options.

Work-Life Balance: A Report to Ministers Responsible for Labour in Canada

In February 2000, a meeting of federal, provincial and territorial ministers responsible for labour was convened. Following presentations on work-life balance, the ministers agreed to support and promote work-life balance in Canadian workplaces. They directed the Canadian Association of Administrators of Labour Legislation (CAALL) deputies to gather information on the subject. This report issued in February 2002, notes the context in which the issue of work-life balance is evolving, and includes a strategic analysis of the issue as well as suggestions as to possible directions for individual and joint action. The complete report can be viewed at: labour-travail.hrdc-drhc.gc.ca/worklife/wlbc-ctvpc/presentation.cfm.

Providing Support in the Workplace

MENTAL HEALTH WORKS

IN December of each year the Globe and Mail's *Report on Business Magazine* lists the 50 best companies to work for (www.robmagazine.com). As you might expect, although salaries in the top 50 companies outrank their competitors, it is employee morale that has a greater significance when it comes to choosing the best of the best. Things like company awards nights where employees are recognized for their efforts; take-home meals that can be picked up for a nominal amount at the end of a busy day; fitness facilities; emergency aid programs (which one company has used for things as diverse as flying in the mother of a sick employee and paying for home help, to buying a high quality wig for an employee with alopecia); daycare centres; flextime and telecommuting all give employees the sense of being supported and valued by their employer. Bill Wilkerson, co-founder and CEO of the Global Business and Economic Roundtable on Addiction and Mental Health, said in a speech to the Conference Board of Canada Council on Workplace Health and Wellness that "people are the most precious asset a competitive business can have" and that business needs "resilient, attentive, flexible, well-motivated people....a pretty good working definition of what constitutes mental health".*

As more and more corporations recognize the need to address both employee workplace and

lifestyle stresses and challenges we are seeing innovative and supportive programs put in place. **Mental Health Works**, a joint project of the Global Business and Economic Roundtable on Addiction and Mental Health, the Canadian Mental Health Association, Ontario Division and the Ontario Ministry of Citizenship, is working closely with organizations in the manufacturing, human resources, legal and banking sectors. Dofasco is one of the companies who has recently signed an agreement with **Mental Health Works** to look at specific initiatives that address stress in the workplace. Tim Price, Chairman of Trilon Financial Corporation and inaugural Chairman of the Canadian Business and Economic Roundtable on Mental Health very clearly summed up the challenge: "Mental health is a business issue and one we must get our arms around in a hurry." **Mental Health Works** exists to do just that. For more information on this project, or to become a sponsor or active participant contact Miriam Ticoll, Project Director, Mental Health Works, CMHA, Ontario Division at 416-977-5580 ext. 4120 or e-mail: mticoll@ontario.cmha.ca.

**Calgary, Alberta, November 23, 2001, see complete speech at www.mentalhealthroundtable.ca*

Employee Assistance Programs

The CMHA, Windsor-Essex County Branch, has been providing employee assistance programs (EAP) and work place health services for 17 years. The program offers organizations a very broad range of both preventative and reactive services from over 25 different health promotion workshops right through to clinical intervention and counselling, a 24-hour crisis line, management consultation on labour management issues, and critical incidents stress de-briefing. The CMHA EAP program offers solutions that make it possible for employees to be in a healthy environment that acknowledges and respects them as a valuable asset to the company. For more information visit the website at www.cmha-weeb.on.ca.

Community programs run by the Canadian Mental Health Association are a vital part of Ontario's mental health system. In fact, increasingly, they're the only programs available in some communities. We need to rely on your support to be able to continue this essential work.

Your caring donation will help the CMHA continue with these programs, help people with mental illness get well, and can even help save lives.

To donate to the CMHA call
416-977-5580 ext. 4122,
or 1-800-875-6213 ext. 4122.

**PLEASE GIVE GENEROUSLY
TODAY. THANK YOU.**

MAY 6-12, 2002

National Mental Health Week. During Mental Health Week many of the CMHA Branches across Canada will participate in health fairs or stage special displays to promote mental health. Call your local Branch of the Canadian Mental Health Association for activities and events in your area. Make Mental Health Matter.

MAY 30 – JUNE 1, 2002

**Canadian Psychological Association
63rd Annual Convention**

University of British Columbia, Vancouver, British Columbia. Information: Kathy Lachapelle-Petrin, Tel: 613-237-2144 ext. 30, Fax: 613-237-1674, Toll-free: 1-888-472-0657, E-mail: klpetrin@cpa.ca

MAY 31 – JUNE 1, 2002

People In Motion 2002. Canada's most comprehensive exhibition for people of all ages with disabilities, as well as their families and friends. It features 63,000 square feet of exhibits which include transportation and mobility, barrier-free

design, rehabilitation services, home health care products, accessible travel, leisure activities, technical aids, employment information, corporate services and government programs. Information: Tel: 905-702-1121, Fax: 905-702-1244, web: www.people-in-motion.com.

JUNE 10 – 14, 2002

Broadening the Spectrum of our Practice – Celebrating Our Growth,

International Association of Psychosocial Rehabilitation Services (IAPSRS) 27th Annual Conference. Regal Constellation Hotel, Toronto, Ontario. Information: E-mail: conferences@iapsrs.org, web: http://www.ofcmhap.on.ca/.

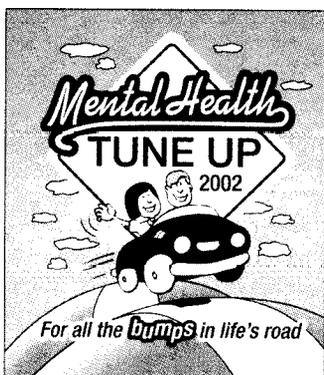
JUNE 22, 2002

Canadian Mental Health Association, Ontario Division's Annual General Meeting.

Holiday Inn Select. Toronto Airport, 970 Dixon Road, Toronto, Ontario. Info: Tel: 416-977-5580. Fax: 416-977-2264, E-mail: division@ontario.cmha.ca.

In 2002 CMHA, Ontario Division is celebrating 50 years of "making mental health matter". The CMHA Ontario Division continues to strive for maximum community involvement: enhanced public understanding of mental illness; and greater advocacy to protect the rights and freedoms of individuals. We are proud of our many accomplishments and are confident that our increasingly comprehensive programs and services meet the very real, and often critical, needs of individuals, families, key support persons and communities. Thank you to our thousands of members, donors and volunteers who have committed countless hours and resources to support the activities and programs of the Association.

Mental Health Tune-Up 2002



Helping people cope with the stresses and challenges of modern day life is the goal of Mental Health Tune-Up 2002, a free public forum that will provide the "know how" to access mental health resources to help cope with all the bumps in life's road. The forum will take place on Friday, May 10 and Saturday, May 11, 2002 at Metro Hall, 55 John Street (at Front Street), Toronto. Mental Health Tune-Up 2002 features a Community Resource Fair in the Rotunda of Metro Hall populated by mental health resource and advocacy agencies, including the Canadian Mental Health Association and the Ontario Psychological Association. The second component is the many presentations, including workshops, seminars and movie screenings, that address a wide

range of mental health issues such as Attention Deficit Hyperactivity Disorder (ADHD), Children and Divorce, Teen Suicide, Relationships, Depression, Anxiety and Panic Disorder, Eating Disorders, Stress, Career Transition and much more.

The free event will operate from 10:00 a.m. to 5:00 p.m. on both days with presentations from 2:00 p.m. to 5:00 p.m. on Friday and 10:00 a.m. to 5:00 p.m. on Saturday. Presented in partnership by the Ontario Psychological Association, Canadian Mental Health Association, Ontario Division and Canadian Mental Health Association, Metro Toronto Branch. For information, please call the Hotline at 416-813-2282 ext. 2001 or visit www.tuneup2002.com (Age 14+ due to the mature content of some of the presentations)

OPENING CEREMONY featuring The Honourable James Bartleman and Toronto's Mayor Mel Lastman.

Let's get set to race for fun and charity at the **Molson Indy Bike Challenge 2002!**

June 27th, 2002, Toronto's Exhibition Place, Lot "H"

The Canadian Mental Health Association is proud to be participating for its 7th consecutive year in the Molson Indy Bike Challenge. Sponsored by the Molson Indy Festival Foundation, teams obtain pledges and sponsorships to race and raise money to support the Canadian Mental Health Association (CMHA).

This is a fun, friendly and competitive event.

Participants are encouraged to get \$100 in pledges and will receive two general admission passes to

July 5th Molson Indy, a Molson Indy Bike Challenge T-shirt, a team photo, and a voucher for food and drinks at the event.

To get involved or for more information contact:

Aileen Mitchell at 416-977-5580 ext. 4140 / 1-800-875-6213 ext. 4140 E-mail: amitchell@ontario.cmha.ca
or

Lucas Southern at 416-977-5580 ext. 4131 / 1-800-875-6213 ext. 4131 E-mail: lsouthern@ontario.cmha.ca



Network

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Ontario Division/Division de l'Ontario

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