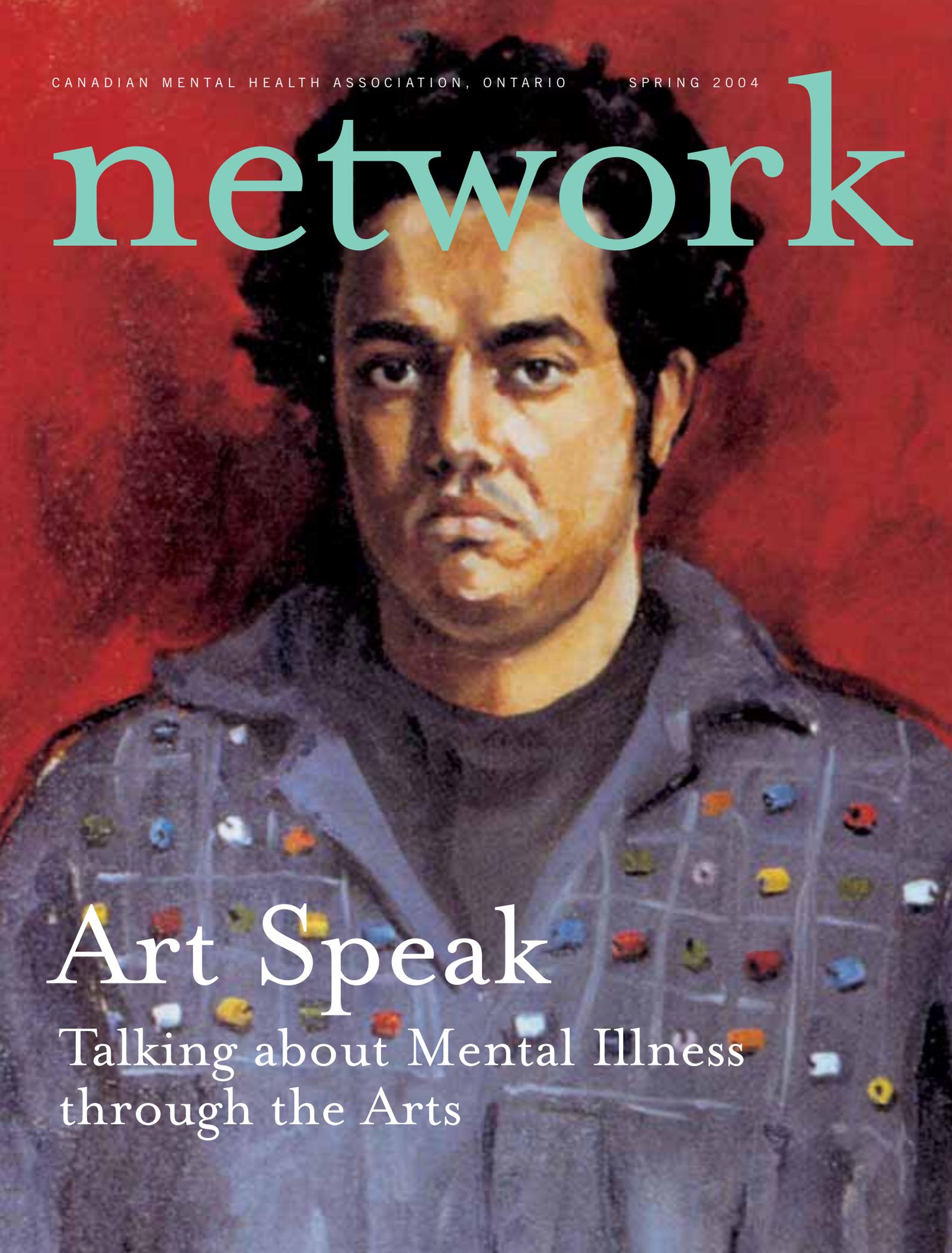


CANADIAN MENTAL HEALTH ASSOCIATION, ONTARIO

SPRING 2004

network



Art Speak

Talking about Mental Illness
through the Arts



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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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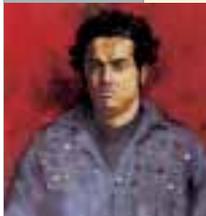
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Danae Chambers, *Man with Beaded Shirt* (oil on canvas, 24" x 32"). Reproduced by
permission. This painting appeared in the 2003-2004 art exhibit Being Scene at the
Centre for Addiction and Mental Health in Toronto. See "Raising Awareness: The
Workman Theatre Project" on page 8 for more information about the annual exhibit.



Barbara Everett, PH.D.
Chief Executive Officer



Finding Our Artistic Voice

All forms of art have a special place in my heart. I come from a family where women's work was cooking, sewing, knitting and crocheting — pursuits which my aunts, grandmothers and mother used to express their artist selves even though their work was put to everyday use. Creativity was in the air that I breathed and it is a central part of my life. It is also central to the lives of the many contributors to this issue of *Network*.

We've addressed artistic expression on many levels. First, I would like to mention our own artistic endeavour. We have redesigned *Network* itself. The idea is to modernize our appearance so that *Network* looks less like a professional journal and more like a magazine with broad appeal. The cover celebrates the work of a talented artist, Danae Chambers, and we will continue this approach to cover design in the future. The interior of the magazine has also been altered, with a fresh layout and more playful typography, thanks to the talented work of Soapbox Design Communications. We hope you find it as engaging as we do. Our thanks also to artist and survivor Jean Johnson for inspiring this issue.

Art, in relation to mental health, is most frequently discussed as therapy. There is no doubt that art therapy is both uplifting (for client and therapist alike) and effective in promoting healing and recovery. But art has many more dimensions and roles in people's lives.

Isabel Fryberg's heroic struggle to keep the Creative Works Studio open is a case in point. Members find that the time they spend making their art is the centrepiece of the creation of new and powerful lives — despite living with a mental illness. The Workman Theatre Project appeals to actors (who happen to have a mental illness), and to people who have a mental illness (who happen to want to try acting). Both groups learn to take artistic risks that give them power and confidence in other parts of their lives. Under the direction of Lisa Brown, the Workman Theatre Project has

extended its reach to embrace other creative disciplines, including film and visual arts. The annual Rendezvous with Madness Film Festival is now a fixture in Toronto's cultural calendar, creating a much-needed stage for public discussions of mental illness and how it is represented on film.

We also feature art that sparks conversations and changes attitudes. The FAN Club uses puppetry to teach children about their emotional side. Donna Morrissey found her artistic voice as a writer, and singer-songwriter James Gordon used his art to reach others when his son was diagnosed with a mental illness. Jay Lefler lost his art, for awhile, but then he found it again and used his talent to help him recover from mental illness. His mother, Judith Rosenberg, seeing how creative expression helped her son, founded Spark of Brilliance where art helps people with mental illness find their talents and their confidence. (Both Jay Lefler's and Judith Rosenberg's stories appear exclusively online, in our new Web Extras section.)

Humans seem to crave ways to express themselves that can touch other people's hearts. Mental illness often isolates people, sometimes because they are shunned, and sometimes because the illness, itself, interferes with their ability to reach out, or to be reached. Art appears to be a universal language that offers a way in — to that which is human in ourselves and in others. Art is obviously not only for people with mental illness. It's for everyone, and perhaps therein lies its universal power. Anyone can find and use their artistic voice... and feel better because of it.

Making Space for Art

It's

1:30 p.m. on a Tuesday and already the atmosphere in the studio at 401 Logan Avenue has an air of purpose about it. Most of the artists have arrived and are adjusting easels and beginning to get down to the serious business of art. And what a great space to be creative in. Although the room is small, the high ceilings, large windows and white painted walls contribute to an environment that invites creativity, evident in the artwork displayed around the room. Isabel Fryszberg, originator and facilitator of the Creative Works Studio, is working with ten people today, most of whom turn up on a regular basis every Tuesday and Friday afternoon.

Their journey to 401 Logan has taken some twists and turns. In fact, Fryszberg describes the group as something of a “wandering tribe,” moving from one facility to another. And 401 Logan is not going to be their final destination. With the Toronto real estate market heating up once again, there’s talk of the building they are in being demolished and a condo being put up in its place. Fryszberg and her artists may soon be on the road again, but she believes it’s a worthwhile journey.

A mental health occupational therapist with the Inner City Health Program at St. Michael’s Hospital, Fryszberg began the Creative Works Studio in 1995. Back in the 90s, mental health reform meant the

system was experiencing a lot of cut-backs and changes. Hospitals reduced their programming, and in many cases communities were not able to pick up the slack, due to lack of funding. Fryszberg saw that gap and felt the need to act. Her career as an occupational therapist, combined with her love for all forms of art, seemed to be an ideal combination of the

skills needed to put in place a program that would provide creative opportunities for people dealing with long-term mental health problems. “Whenever I ran art groups with clients, I saw change,” says Fryszberg. She believed it was possible to create an environment where people could relate to others who shared the same passion they had, rather than just focus on the negative things in their lives. The Creative Works Studio was conceived out of the desire to create a culture where people could experience a sense of inspiration, normalcy, community. Later, the Sisters of St. Joseph provided Creative Works Studio a storefront in South Riverdale where they worked out of for two years, just before they moved into their new location on Logan.

The program goes beyond therapy. It develops artistic expression in people. Fryszberg’s philosophy is that everyone is creative, we just express it in different ways. But the key to that expression is space, safety, resources and information. Not all of us are given the luxury of being able to afford those things, she says. The Creative Works Studio aims to provide those resources to its members.

“It’s very important that this program continues to exist because it’s really saved my life,” says Jean, one of the studio’s regular members. “I am so grateful for this place. I was so depressed before I started coming here, it was all I could do to get out of bed, but this has given me the freedom to do something that is so joyous.”

Jonathan, who has been coming to the studio for a number of years, calls it an “oasis.” “It just seems so natural to be here,” he says. “I’m trying to combine my thoughts about my illness and express it through my art. I’m trying to be part of both worlds. I can always work at my art, but real life is

much more difficult. I am trying to be responsible and just accept things the way they are. Being here at the studio is like a fantasy, an oasis. I can escape from everything for a while.”

For Elisaveta, who has a master of arts degree from Bulgaria, the studio provides the artistic environment she needs to be free to explore her art and gain inspiration for new ideas.

But how much actual artistic training takes place as opposed to pure self-expression? To what degree are members using their medium to express their emotions and thoughts about their illness and how much are they actually developing their painting and drawing techniques? Rita says that she has definitely become better at expressing herself creatively since she has been coming to the studio. “And my technique has also improved. Every time we come we are developing our skills a bit more. It makes me happy to be here. My spirit is free and I don’t think about anything beyond the painting. It’s very healing.”

And that’s what Fryszberg is aiming for: “art for healing,” not “art therapy.” All of the members know there is a therapeutic element to what they do, they won’t deny that, but the Creative Works Studio supplies something that an art course offered by a college can’t, and that’s a safe place where healing and art come together. This is a place that does not demand an explanation when you are having a tough day. A place where you can still come and do your art and be accepted for who you are.

There is a real sense of celebration and strength within the group. The path they have taken through their art has helped them develop a sound self-esteem. A confidence. A recognition of new abilities and possibilities within themselves. The studio has also become a community where friendships are nurtured and new insights gained as they discover what they can achieve together.

One of the highlights for members of the Creative Works Studio is the annual art show, which provides an opportunity to work as a team as well as pursue individual skills. Over a period of time, through an ongoing dialogue which includes them all, a theme is developed. This might reflect a social issue or a common interest, but once established all of the work is then geared towards exploring that theme. In 2003 the theme was “Connections,” and paintings pulled the viewer into a world of exploring the need to connect with others. The most recent theme, expressed at the art show at 401 Logan in November 2003, was “Figure It Out,” and the walls of the studio are still adorned with an explosion of images that challenge our notions of body image and ideas of perfection, and bring forward simple alternatives that speak of self-acceptance, love and unity.

Each year, the images produced at Creative Works Studio become the focal point of a calendar, which is sold to raise funds. Many of the pictures in the calendar include a short narrative by the artist. In the 2004 Connections calendar, Rita’s image of a tree, backed by a hillside village in Greece,

e



CREATIVE WORKS STUDIO FOUNDER ISABEL FRYSZBERG (ABOVE) AND MEMBER JONATHAN CARROZZIER (LEFT AND FAR RIGHT). PAINTING OF WOMAN (RIGHT) BY MEMBER RITA LAZAKIS.

PHOTOS BY ROGER MURRAY

is accompanied by these words: “My raged past, my culture, my spirit, my beliefs, my happiness are all behind an old closed forgotten door! The only connection with the present is the ‘tree.’ It is almost dead but it still has a few healthy leaves and strong roots. You can’t see the treetop, it connects to another picture. It is still hope! You can see the little flowers at the bottom of the canvas. These are my children that keep me alive. They give me hope and encourage me to grow taller and ‘hang in there.’ I’m trying to find my right connection for tomorrows’ mornings....”

Both Fryszberg’s commitment to this program, and the commitment of members, is long term. “I don’t believe in a short-term philosophy,” she states. The payoff for members appears to be on many levels. As learning artists they are given the opportunity to develop their creative skills. As people suffering from a mental illness they are offered a safe place to be. As skilled artists they enjoy the feeling of success and achievement that comes with seeing their work hung on display for an art show that they can invite their friends and relatives to, or reproduced in the annual calendar.

“One of the things about our culture is that we are all suffering from being slaves to technology,” explains Fryszberg. “It’s making us very isolated. I think the arts provide connections for people and opportunities to build a community. It can draw you out as you share a passion for something other than the habitual and robotic things of the day-to-day. I think, especially in mental health, it is too much of a factory. And it’s really not a benefit for anybody because the true healing and long-term things that make people get better is not about efficiency. It’s not about short stay, or medication alone, although medication is important for stabilizing people, but it’s about all those other things that can so easily be forgotten in a nuts-and-bolts type of approach.”

A Trillium grant and a relatively new partnership with JVS, Toronto (Jobs, Vision, Success) have made it possible for Fryszberg to start working on the next phase — expanding programs and emphasizing the development of artistic skills, so that members can begin to use their talents to create meaningful, paid, art projects. Isabel also looks ahead to

the day when they will have their own, permanent space, large enough to accept more members into the program (they currently have a waiting list, as there is no time limit on how long a member can be a part of the group), and a gallery organized and run by members.

The constant challenge is finding the right space. “It’s not enough just to have people work at their art in isolation,” she explains. “People who have serious mental health problems, who are on disability, have limited means and they are living in limited residences. They don’t have a space to work on their art, and they don’t have a space where they can get together with other people. They are isolated.” One of the outcomes of the group is social interaction that has evolved outside of the studio. “People visit the Art Gallery of Ontario together. They’ll plan social trips, maybe skating or a meal out. It’s something I didn’t plan. It’s just one of the results of providing a safe place where people can build friendships.”

At the Creative Works Studio, that safe space not only ensures that artistic skills can be explored and developed, but it also creates an opportunity for healing to take place.

Creative Works Studio is an initiative of the Inner City Health Program at St. Michael’s Hospital in partnership with JVS Toronto (Jobs, Vision, Success). It began as an expressive art group in a hospital setting, expanded into the community and grew in its mandate to include opportunities for economic development, skill training in the visual arts, and public education aimed at reducing stigmatization of people with mental health issues. The program was conceived, and continues to be facilitated, by Isabel Fryszberg, a mental health occupational therapist at St. Michael’s Hospital. The studio, located at Atria Lofts, 401 Logan Avenue, Studio 101B, is open to artist members four afternoons a week. There is no charge to become a member and all art supplies are provided free of charge.

For more information, contact Isabel Fryszberg at 416-864-7460 EXT. 8306, or fryszbergi@smh.toronto.on.ca.

FAN Club Puppets

Speak to Young Audiences



Simon, Jason, Tara and Marcus are members of a troupe of actors who are making a big impression on young children in schools in the Grey Bruce area. They seem to have the same kinds of problems that all kids have: the class bully who always gets his way, the smart kid who makes you look and feel stupid. Some things just never change. But the actors have some answers that make sense, and the way they act out their stories makes sense to their young audience too. These actors aren't just ordinary kids though, they are child-sized puppets, worked by puppeteers who stand behind them and provide the voice.

"When I first heard about this I thought that the puppeteer would dominate, but it's not at all like that," says Marion Wright, executive director of CMHA, Grey Bruce Branch. "The children identify completely with the puppets. First of all these are their peers. They speak to them in their language about everyday events. And they don't use adult or mental health care terms about these experiences."

Each puppet in the Friends and Neighbours (FAN) Club has a name and a character that is uniquely his or hers — a complete biography, in fact — and that character is maintained throughout the presentation and carries over into the question-and-answer period that follows each skit. To reflect the cultural diversity in the Grey Bruce area, the troupe includes two First Nation puppets. One of the most popular puppets is Bingo, a big, hairy, scruffy dog. But perhaps the most unusual one is Nicholas Oliver Teen (Nick-O-Teen) — a puppet with a problem, he is a four-foot-high cigarette with bags under his eyes and a

hacking cough. The response to these puppets has been so positive that Grey Bruce Branch is planning to have a fan club where children can write in with their questions to the puppet of their choice, and the puppets will reply.

The focus of the program is children aged 4 to 11. A typical show lasts about 30 minutes and includes a skit or presentation followed by a question-and-answer period. Activity books have also been developed so that the teachers can build upon the topics presented and do follow-up work in the classroom. Although the primary venue is through the schools, Grey Bruce Branch is also looking at day-care centres and holiday camps.

The Phoenix Centre for Children and Families in Pembroke, Ontario, who initially developed this program, continue to make the puppets and write the scripts. With the help of a steering committee of community representatives, CMHA, Grey Bruce Branch then adapts each script to reflect the needs of the local community.

The main thrust of the program is

to raise awareness of good mental health while dealing with issues such as bullying, self-esteem and attention deficit disorder, but there has been a side benefit to the program. Most of the puppeteers are young people from the community who are involved in drama clubs at high school. Not only have they been trained to operate the puppets, but because they also have to answer the questions raised by the children at the end of each presentation, they have received quite intensive training on mental health issues. "We're not just reaching the younger children with strategies to ensure good mental health," says Wright. "We are also, through our training program, able to discuss how important good mental health is with the teenagers who are working the puppets."

The FAN Club is raising awareness at all levels within the community. They have received strong endorsement for the program from the school boards in the area, and local sponsors have covered the cost of the puppets and scripts. "The FAN Club is all about primary health prevention and mental health awareness. The skits that we do and the topics we cover from a child's perspective are paramount to building good mental health," says Wright. "This program is a joy."

For more information on the Grey Bruce Friends and Neighbours (FAN) Club, call CMHA, Grey Bruce Branch at 519-371-3642.

Raising Awareness

The Workman Theatre Project

The Workman Theatre Project (WTP) is a not-for-profit performing arts company with over 15 years' experience in integrating individuals who have experienced mental health problems with arts professionals. WTP has produced more than 12 original new Canadian plays, toured over 30 theatres across Ontario and Manitoba and played to over 115,000 people. Each year they produce the Rendezvous with Madness Film Festival, the Being Scene art exhibition, and a theatre training program. Last year WTP also produced the first ever Madness and Arts 2003 World Festival at Toronto's Harbourfront Centre. This unique arts company, led by founder/executive director Lisa Brown, has attracted national and international attention. WTP works in partnership with the Centre for Addiction and Mental Health (CAMH), and is based in Toronto at the Joseph Workman Auditorium, at the Queen Street site of CAMH.

Lisa, it's a big leap from being a nurse to becoming the founder and artistic producer of something that now has international recognition. How did that happen?

I came to Toronto in 1982 fresh out of nursing school, not knowing a soul, and ended up at Queen Street. I was probably somewhat of an atypical nurse even back then. I tended to gravitate towards the artistic individuals and they to me. I worked evening shifts a lot, and it sort of evolved to where we would have talent shows on Friday nights. Anything from someone using a garbage can as a drum and a broom for a mic, to a poetry recital. The Workman Theatre Project grew out of what I was doing as a nurse in the mental health field.

How would a typical production at WTP take place?

It depends on what it is, whether it's a film festival, an art exhibit, a theatre show or a training program. We have diversified to the point where we are now multi-disciplinary. In terms of a theatre production, a concept would be developed, we would research the subject, and then hire a professional playwright to work with our members to develop the play. All the theatre shows that we produce deal with mental health issues, so they are both an artistic expression on the part of the artist involved, as well as a way of promoting public education. Once we have a script that everyone is happy with, we start to put the team together. First of all we hire a director and have one of our members apprentice under that director. That same process works in all of the various departments. For instance, we would have a professional stage manager and an assistant stage manager. When onstage, we have a 50/50 split of equity actors and membership actors.

How long would you be in production?

That depends on the show. We were working on the musical *Joy* for about five years. That was a very difficult show to develop. We finally got it up with a cast of nine. With another show it may take three months to develop the script. In most cases we have a four-week rehearsal period and a two-week run. An exception to that has been *Vincent*, which has toured throughout Ontario and Manitoba for the past 11 years. This show was originally commissioned by the International Conference on Forensics in Penetanguishene in 1993.

Are the logistics of touring very complicated?

Yes, it can be extremely complicated, from getting agreements in place, to engaging the actors and production staff, to determining what venue the show will play in, and arranging transportation and accommodation. *Iris the Dragon*, which was part of the Madness and Arts 2003 World Festival, toured in schools in tandem with a British theatre company. The production logistics of that were very complicated. We had a little boy who played the lead in *Iris the Dragon* who was being home schooled, and his mother went along on tour and ensured that he continued to get his schooling.

Are the shows put on as purely theatrical events, or is there a point at which the audience is engaged in dialogue?

Once again it depends on the show. With the musical *Joy* we didn't have talk-back sessions with the audience, but with *Vincent* there is about 40 minutes of drama and then 40 minutes of discussion in which a police officer, a family member, a person with schizophrenia, and a mental health professional will sit on a panel and discuss the issues that are in the play. Then we open it up to the audience for a question-and-answer period.

What process do you use for choosing films for the Rendezvous with Madness Film Festival?

We have a research coordinator who comes on in the spring and works with a programming committee for about five months. We have films sent to us for consideration by filmmakers both nationally and internationally. We also look for films at other festivals. We go through a jury process in September where we choose our slate of films. We take each program and within that, match features and shorts together. We then begin developing panel discussions around the topics that are in that particular program.

Who would be on the jury?

We have people who have had direct experience with mental illness, people that work in film and people that work in the mental health field. We have a fairly broad range of people who will choose the work, all coming from different perspectives.

During the 10 days that the film festival runs, how many people come out?

About 1,500. Some of the films that we show are premieres, meaning that they have never been shown either locally, nationally or internationally. Sometimes we'll find a film that has come out of the Toronto International Film Festival that is really appropriate for our festival. For example, four years ago we saw the film *Shine* [about pianist David Helfgott], so we put it up here before it had a theatrical release. That was an interesting experience because the audience loved it but the panelists didn't. They tore the film apart, they really didn't like it, but we had audience members standing up to applaud it. Some of the things the panelists criticized were the piano playing, the script (which one of the panelists felt had a lot of holes in it), and the way David's illness was portrayed in the film — the fact that it was extremely difficult to determine what mental illness he had.

Is inaccurate portrayal of mental illness an ongoing problem in films?

Yes, it's a huge problem. At our festival we try to balance the portrayals as best we can. We will not put up a film that reeks of stigmatization and stereotyping unless we put it up to discuss that particular issue within the context of the film. One of the highlights of the festival is the panel discussion which takes place after every film program — the fact that there is an interaction with the audience and an increase in mental health and addiction awareness through the films.

The Jean Simpson Studio is free for the artists, and the space is self-managed. The artists will be able to work 12 hours a day, seven days a week if they want. There will be responsibilities, but they can come and go as they please.

How long has Workman Theatre been involved with the visual arts?

At the moment we are in our fifth year of the Being Scene art exhibit, in which we present between 60 to 80 works of art from people who receive services from the Centre for Addiction and Mental Health (CAMH). The works are displayed at the Queen Street, Clarke Institute, and Addiction Research Foundation sites [in Toronto]. The year-long exhibit is open seven days a week to the general public, who can go on a self-guided tour with the help of a program guide available at each site. The show is juried by a professional artist, gallery owner and art educator who choose the works out of 300 to 400 submissions.

There has been a tremendous interest and growth in this show. In addition to the exhibits at the sites I mentioned, we

had a six-month exhibit last year at Queen's Park, in the Lieutenant Governor of Ontario's residence, and we've been invited back for another six months next year. We have an exhibit coming up with the Canadian Mental Health Association at the CBC Atrium during Mental Health Tune Up in May, and we are currently exhibiting work at the St. Lawrence Market Gallery. That exhibit will run for three months, from March through June 2004.

Where do the artists produce their work?

The majority of our artists work in isolation, producing their work at home. Some of the works we hang are quite large and those artists are working in very difficult, small spaces. One artist we work with, who is homeless, brings his artwork to us to go into the shows or to sell. People will give him old canvases so that he can paint over them. He carries them on his back and is driven to paint. He absolutely lives the lifestyle of a nomad. His work is quite spectacular and he's been in several of our catalogues.

The new Jean Simpson Studio is going to provide an exciting alternative for artists like these who are producing their art under very difficult working conditions. Due to open in the spring of 2004 on the second-floor mezzanine in the Community Mall at the Queen Street site, the Jean Simpson Studio will house seven or eight artists at a time, with workspace available for a three-month period. With the Jean Simpson Studio they will have a fairly large area to

Singing in the Streets

PROFILE



Trista Bassett was diagnosed four years ago with severe depression and anxiety. In her early 20s Trista did a lot of stage performing, but as the depression took hold she ended up taking her music to the streets. Workman Theatre Project has been her entree back into the world, an avenue to pursue her love of music. She is currently part of the Busking Program.

"It's a little nerve-racking to be performing again, but it has really helped to bring me out of my depression a bit more — to do what I love. This is what I want to do with my life, so being accepted into the program was as if my music was being accepted and my talents were being recognized."

What she wants to do with her music...

"I've always been a politically minded person, so I definitely want to convey some of my feelings about mental health issues through my music and hopefully change other people's attitudes."

Why her music is important...

"Performing is a huge part of my music for me. If I was just singing in my own home, or performing for friends, it wouldn't be the same. Singing is the one thing that I can always do unless I am really really low with my depression. It's the one thing I can do that brings me up."

On what she wants to achieve...

"I don't really have a long-term goal. I'm just trying to get through the day-to-day stuff. It hasn't been very long since I've actually accepted this illness. I've been fighting against it, so now I'm working with my therapist. Being part of the Busking Program at WTP has really helped a lot with interaction with people. When passers-by give me a positive response, that really means a lot because my world is pretty isolated right now."

work in. We have hired an artist-in-residence, Henry Benvenuti, and his role will be to provide support to the other artists working in the studio.

The studio is free for the artists, and the space is self-managed. Because of that, the artists will be able to work 12 hours a day, seven days a week if they want. There will be responsibilities they will have to take on in order to work in that space, but they can come and go as they please. The criteria for participation in the Jean Simpson Studio project include a willingness to share the responsibilities involved in the smooth running of the studio space, submission of a portfolio including sketchbooks and rough drawings for an admission selection process conducted by peers, and a desire to use the studio to explore a specific project that they would be unable to execute under their current working conditions.

What are your goals with the Workman Theatre Project and what are some of the barriers you struggle with?

We have two major goals. One is to increase public awareness of mental health and addiction problems through various artistic media, and the other is to provide artistic training, support, and employment within a creative environment for people who receive mental health and addiction services.

I've been working in the mental health field for 21 years and when I look at the barriers which are still there for our members I'm discouraged. Just recently I had an assessment for life insurance. During that assessment it became very clear that if I admitted that I suffered from anxiety, depression, bipolar disorder or schizophrenia I would not be eligible for life insurance. We have experienced that within our own company, trying to get health insurance for our staff. We are trying to fight the fight and yet I can see how difficult it would be to willingly disclose something that makes you unable to receive the same privileges as other people receive.

Another barrier we face is the fact that at WTP we pay our members/artists for their work and this has a negative impact for those on ODSP [Ontario Disability Support Program]. It doesn't work for our artists. One of them may have a painting they have done which they could sell, but if they do they stand to lose substantial amounts through their ODSP. Many of our members do not want to go off ODSP for fear they will get sick again and it will be more difficult to get back on. The system needs to be overhauled. I know there are people advocating for change, and I do think we will see change in the next five years. I am hopeful, but it makes trying to run a company like we do very difficult. You asked me what I hope to achieve, and it's to continue our work, see some of these barriers removed and ensure that those who are making significant contributions to society, like our members/artists, are recognized.

For more information on the Workman Theatre Project, visit www.workmantheatre.com.



PETER SMITH, *BATHERS* (OIL AND WAX ON BOARD, 12" X 9")

A Journey on Canvas

Diagnosed with schizoaffective disorder in the early 1990s, Peter Smith had to drop out of the Ontario College of Art, and for five years he was not able to pursue his passion for painting because of his illness. He is a regular contributor to the Being Scene annual art exhibition produced by Workman Theatre Project.

"My painting is very important to me," says Peter. "Even when I felt I wasn't using all my faculties, when my illness made it impossible for me to access them, it was still important that I try. It gave me some sort of purpose beyond just being a consumer/survivor, a guinea pig for the pharmaceutical companies."

On what he wants to achieve through his art...

"I don't have a really hard manifesto with my work. My mental illness isn't the theme that runs through it. Because of the symptoms I went through for many years, the hallucinations, things like that, it does bring a different experience to my work and I think sometimes that comes through and gives it an almost mythic type of persona. There's a journey happening on my canvas, but you don't know where it is going."

On whether his art has changed since he was diagnosed...

"I think there's been a natural progression. When you are starting out it's a very frustrating process as much as it is an enjoyable process. Eventually you get to the point where you realize that there are no shortcuts. Generally if it's not hard work there's something wrong. And you just get used to the fact that it's hard work and you start to enjoy the hard work. That's when you do real art."

On how selling his work affects his Ontario Disability Support Program payments...

"Well, it is a problem. I have a case worker and we have worked something out with the ODSP so that they average out my art income over the year. You might sell a painting and get \$1,000 that month when you are actually only eligible to make an extra \$200. But I might not sell anything more for the next six months, so now at the end of the year they take a look at my expenses and income and work it out then. You have to have a good case worker. I was lucky. For a client to go through the ODSP and try to figure things out for themselves, well you might as well check yourself back into the hospital."



Medical Scare

Donna Morrissey has her life's work down to a manageable routine now. In the morning, she writes. Then she heads to the gym, stops for lunch, and gets back to the computer for a second stretch of writing that often reaches into the early evening. We catch up with her right after the gym section of the day, and Morrissey is brimming with all kinds of positive energy. Dressed in cargo pants, a striped red T-shirt, and a floppy brimmed hat, sunglasses slung round her neck on a black rope, she looks tireless and young — unnaturally young for her forty-five years. She's chosen a busy little café near her home in downtown Halifax, and, it seems, she knows both menu and staff exceptionally well; she cheers and high-fives the young woman who ducks into the kitchen to find one last remaining date cookie for her.

"I love these cookies," Morrissey says happily, her eyes a brilliant green.

It was a friend who suggested Morrissey try writing fiction, saying, "If you can write like you talk..." One can easily see why the comment was made. The woman tells a tale with flourish, arms flying through the air, bum shifting in her seat. Words come out rapid-fire and full of every conceivable emotion. "The biggest shock on leaving my outport was discovering the queer way that everybody spoke!" she says with her now muted Newfoundland brogue. "The way they all looked at me when I didn't speak *clearly*."

Morrissey's first novel, *Kit's Law*, is set in a tiny Newfoundland outport most easily accessible by boat, not unlike the place where she grew up. And from the sounds of it, The Beaches was an idyllic place to be a kid. "Everybody's door was open. Everybody had a hand in smacking you across the arse if we went too far, or near the water.... There was the ocean in front of you, and the woods in the back, and they were your parameters. And in between was your mother and your grandmothers and your aunts and your uncles."

As most young people do, Morrissey left The Beaches. At sixteen, having flunked out of high school, she set off travelling that vast expanse of country to the west. "I was like, 'Jesus, I want to see a hippie! And I want to smoke pot, and I want to do all of that stuff and travel the world.' I didn't do the world so much, but I certainly traipsed through this country a few times."

For ten years, Morrissey moved from province to province, working as a waitress, a bartender, a cook on an oilrig. She got married and had two children (a son, now twenty-six, and a daughter, now nineteen). And when she tired of life "abroad," she brought her family back to Newfoundland and worked splitting cod at a fish processing plant. It was there, in St. John's, when Donna Morrissey was thirty-two, that crisis struck.

It started with some bad fish and the plant advising all its workers, as a precaution, to get a tetanus shot. Morrissey happened to be going home for a holiday that week, so decided to have the shot there. "The doctor lived right next to my mom, so I just thought I'd hop over and get that done. And while I was in there saying I needed a tetanus shot, he looked at my hand and he saw some little cuts. And he said, 'Are you experiencing any kind of stiffness of your neck or throat?' And I'd just spent fifteen hours on a bus getting home, and I said, 'Well, yes, I am, as a matter of fact.'"

After checking her pulse and examining her throat, the conversation went something like this:

Doctor: You have tetanus.

Morrissey: Okay. So what do we do now?

Doctor: Nothing. It's lethal. You have at most six months to live.

Some fifteen years later, Morrissey has instant recall of that moment. She can still see herself there, in abject terror,

sitting in a chair in that small, sterile clinic. "That was the moment for me. The moment that can never ever be undone.... He said those words — 'it's lethal' — and everything left me. All reason left me. All I felt was this incredible sensation of sinking, losing, swimming, my stomach overwhelming me with its feelings of total fear."

It's the moment she blames — and it still makes her mad — for the anxiety, panic, and phobias that invaded her life for many years to come. It's the moment that triggered unwanted memories.

Years earlier, when Donna Morrissey was twenty-three, she had held her father's best friend as he died of a heart attack. A few months later, her own best friend died in an accident. And in between these two terrifying events, something far worse. Her younger brother died in a work-related accident while he and Donna were living and working in Alberta. "When you're twenty-three years old and you're so far away from home, and you've dealt with this kind of tragedy, and you've got to take this home to your mom and dad, things happen that you don't know how to process, really. So when this doctor told me that it was my turn to die, he triggered trauma that was so set within me that I really hadn't learned to express it."

She told the doctor she thought she was going crazy. She started to cry. Then the doctor leaned forward in his chair and did something entirely unexpected. He handed her a lollipop.

Morrissey was told she could die at any moment. The doctor, someone Donna had not previously met, sent her home with pills to take in case of an attack that very night. And he instructed her to get to the nearest hospital the next morning. One can imagine the kind of night that must have been.

At the hospital, after a thorough work-up, she was told there'd been some kind of mistake; she was, in fact, perfectly healthy. The doctors suggested she go home and throw herself a party. Which she did. "I had a great big party, a three-day party.... And when I went back to St. John's, after the holiday was over, I resumed normal living." Then she adds firmly: "There is such a thing as normal — I now know that, because I've never been normal since. So I know what was normal before that."

Morrissey went back to work at the plant. She took care of her kids, spent time with friends. Then in the early hours one morning, just after some of her closest friends had said goodnight, everything crumbled. "I was just doing that last-



An anxiety disorder, she came to understand, is nothing like your occasional, run-of-the-mill bout of nervousness. “Patterns of thought become entrenched; patterns of being, of thinking. It changed everything about me: how I thought, how I saw things, what I did, everything.” ...Morrissey describes anxiety as a physical presence, a bodily experience she equates to a car engine grinding because it lacks oil.

minute cleanup before you go to bed so you don't have to deal with the empties in the morning... and I was walking up the stairs to go to bed. Just skipping up the stairs, and suddenly it was like something hit me, something black and awful, like I'd hit a wall. It was that sudden, and it was that physical. It brought me to my knees.... I crawled upstairs, got into bed, and finally I went to sleep. And when I woke up — wham, there it was again. I walked around like that for eight months.”

During those eight months of “black, dark, awful” fear and anxiety, Morrissey told no one what she was feeling. She said she was fine, if ever anyone cared to ask. Went to work each day, came home again each night, all on a kind of auto-pilot. “And all I kept thinking about was, ‘Jesus, I'm mad, this is madness!’ and I knew it totally had to do with that doctor.”

Finally, one morning as she was driving to work, she found herself so exhausted she could no longer go through the motions. “All of my energy was being taken trying to cope with feelings of fear inside of me, and fear for no reason. I just felt choked in fear, and I couldn't break away from it.” In desperation, Morrissey drove, in full fish-worker's gear, to a doctor's office in St. John's.

“I'll never forget the moment. I was wearing a white coat, rubber boots, and I had a hairnet on, and a splitting knife tucked into my rubber boot. And I just pulled my car over, got out of the car, walked into his office.” She told the doctor she thought she was going crazy. She started to cry. Then the doctor leaned forward in his chair and did something entirely unexpected. He handed her a lollipop. “A candy sucker! And he pulled one out for himself, and he said, ‘Oh, do you really think so?’ And I remember saying, ‘Just when I thought I'd had every kind of day.’” (Years later, she would recreate elements of the scene in *Kit's Law*.)

Then another odd thing happened. “I saw a picture of an old woman on his desk. And I said, ‘She looks like my great-aunt Emma,’ and he said, ‘Well, her name is Emma.’ And it turned out we were cousins, me and the doctor. I had no idea.” Not what you expect when for the first time in your

life you admit to fear of losing your mind. But not entirely ineffective either. Morrissey got herself to work that day.

Meanwhile, the doctor/cousin referred her to a psychiatrist, then a psychologist, both of whom recommended psychotherapy. It didn't help her much. “The psychiatrist was bloody well learned, wasn't she, and the psychologist was bloody well learned,” Morrissey says, her face switching from humorous-scene-telling mode to a flush of real anger. “They looked at me and said, ‘We don't think you've resolved your grief around your brother.’ I [thought] ‘Don't give me that shit — maybe I haven't, but where's my pill and where's my cure? I've seen a lot of people in grief but I don't see them walking around like me.’ I sound really cynical and I am, because they didn't help me.”

What did help was a book recommended by her psychiatrist on Morrissey's very last visit. “She had little else to say to me that day, and her eyes just happened to fall on this book that some other poor idiot left behind the last time they sat in the chair I was now sitting in.” The book was called *Hope and Help for Your Nerves*, and reading it was a profound experience. In it, she discovered such terms as “generalized anxiety” and “posttraumatic stress disorder,” both of which she concluded applied to her.

Intrigued, she started taking psychology courses, and five years later she had earned a social work degree from Memorial University. (She got divorced during this time, too.)

“I started piecing together what happened to me back there and understanding. Then I was able to at least work with it.” Where she had once stayed silent, she now started telling anyone and everyone about what ailed her, soliciting opinions and advice. “I found my information through friends, through talking my heart out... and through reading, through my own research,” she says. In this regard, she considers herself fortunate.

“What causes me suffering,” she says, picking up speed and fury like a preacher at the pulpit, “is knowing that in those outposts where I come from — and in these tiny little towns all over the country — there are so many people who

suffer in silence; they still don't have what I have found in terms of support and knowledge. They're cut off from that."

Read as she could, talk as she might, Morrissey's own troubles were far from over. Anxiety plagued her for years, worse at some times than others, but never really disappearing. "No matter how hard I worked with it, it wouldn't end. It was always there. It was like a fucking bird flying over my head, with its shadow. Even though you might be anxiety-free for today or this week or this month, even, you never felt that it wasn't going to catch up with you. So you become afraid of lots of things. You don't want to travel. You don't want to go far from home. I never did become agoraphobic, but I certainly see how that can happen."

Morrissey, who had travelled the country solo as a teenager, hitch-hiking and camping and fearing nothing, now found herself terrified by a twenty-minute bus ride across town. Sitting close by the exit, she'd try to protect herself against... "What? I don't know. The past, the fear you'd freak out in front of [people], whatever."

An anxiety disorder, she came to understand, is nothing like your occasional, run-of-the-mill bout of nervousness. "Patterns of thought become entrenched; patterns of being, of thinking. It changed everything about me: how I thought, how I saw things, what I did, everything." Getting others to understand these concepts was another matter. When she told a boyfriend she was struggling with anxiety, he suggested a walk. "It's like, 'Sweetheart, I went for 5,000 walks! I've walked 5 million miles! This isn't about taking a walk!' Unless they've been there, I don't think they really understand."

Morrissey describes anxiety as a physical presence, a bodily experience she equates to a car engine grinding because it lacks oil. When she read up on serotonin depletion and its possible effects on the brain and emotions, the physicality made sense to her. "I could just feel my brain grind with no fucking grease in it! And it was like, Would somebody loosen it, free it, oil it? But I couldn't find anybody with intelligence enough to put it together for me."

If the ineffectual doctors prolonged her agony, and the confluence of traumatic events preceded and contributed to it, Morrissey still lays the bulk of blame at the feet of that outport doctor who'd told her she would die. "He made me sick. I'm sure if he had said that to my mother, it wouldn't have happened. So [there is] a predisposition, maybe, [but] he was the trigger."

University helped, because it gave her a routine and an incentive to keep getting up every day. But recovery was "clawing, day by day, week by week, month by month."

Morrissey started writing after finishing her degree, taking pen and paper to a neighbourhood café each morning. Not long after, she moved to Halifax, where she wrote seven hours a day: short stories, screenplays. She was in her late thirties and only just discovering where her talents, and her

passions, lay. And very quickly, she was winning awards and critical acclaim.

When her mother — "my heroine" — was diagnosed with terminal cancer, Donna Morrissey moved back to The Beaches to care for her. There, by her mother's bedside, and with her input and advice, she wrote the manuscript for *Kir's Law*, telling the story of a teenage girl growing up in a troubled home in an outport called Haire's Hollow. When the manuscript was finished, they mailed it off and anxiously waited — together, because it was a labour of their shared love — for an acceptance letter. In the months ahead, while her mother's health deteriorated, there would be no such letter. And soon her mother was at death's door. Then another striking confluence of events, which Morrissey later described in print: "Sunday, at 2 p.m., she departed. Monday, at 9 a.m., Penguin Canada called. My mother had plied the hand of God, and I was now a writer."

"What causes me suffering," Morrissey says, "is knowing that in those outports where I come from — and in these tiny little towns all over the country — there are so many people who suffer in silence; they still don't have what I have found in terms of support and knowledge. They're cut off from that."

The novel became a national bestseller, winning a Canadian Booksellers Association award and being picked up by publishers in Europe, Japan, and the United States. Its success — *her* success — has in turn forced Donna Morrissey to take the final plunge in overcoming her anxiety. "Suddenly, I had to go on this cross-Canada tour, and I had to do public readings. I am phobic of flying. I have a phobia of public speaking. I had like twelve ongoing phobias, and I had to now do this solo act. And I thought, 'There's not a chance in hell.' But at the same time, I said, 'There's not a chance in hell that I'm missing it, either. No way. It's too exciting.'"

A close friend encouraged Morrissey to try an anti-anxiety drug called Celexa, which had worked wonders for her. Morrissey, who had "started getting tired of the fight," decided to give the little white pill a try.

"Gee, it was hard. I remember standing there with that little pill in my hand for two, three, maybe four or five days, trying to get the courage to swallow it. Finally, I had to. I

was going across the country, alone, flying, reading to 400 people in Vancouver. So I just had to.”

Several nights into her tour, she found herself coming to a realization: *nothing was going to go wrong*. She’s stayed on the drug ever since, although now at a reduced dose. “I’ll never go off it,” she says.

Since that tour, Morrissey has published a second novel, *Downhill Chance*, also set in Newfoundland. She’s travelled to England, navigating the London Underground alone, appearing on live television and radio — something that can raise the blood pressure of even the calmest soul — without a hitch. The medication “works beautifully. I do my presentations and my talks, and I go anywhere I want.” When she travels now, she carries a pill in her pocket, a few in her purse, and more in her suitcase. “It’s like, don’t let me be separated!”

Soon she’ll be off to New York, the first of several stops promoting *Kit’s Law* in the United States. And this time, there’s no anxious waiting for a publisher for her new book: she already has three — one for Canada, another for the United States, and a third for Britain.

“I want to cross my fingers and say, ‘Jesus! Don’t go singing too loud, because the song might end tomorrow,’” she says, laughing. “When you go through these feelings of fear and anxiety, you start understanding we’re so vulnerable — you don’t take anything for granted.”

And she doesn’t.

From *Beyond Crazy* by Julia Nunes and Scott Simmie, published by McClelland & Stewart Ltd., The Canadian Publishers. Reprinted by permission of the publisher.

Beyond Crazy

Personal stories have a unique ability to undermine the stigma of mental illness by moving readers beyond stereotypes and misconceptions, and into the very real details of someone’s life. Journalists Julia Nunes and Scott Simmie are excellent storytellers, and their deliberate goal in *Beyond Crazy* is to “take a big whack at stigma” by showing that “mental illness hits all kinds of people for all kinds of reasons.” Artists, politicians, housewives, radio announcers, athletes, students, siblings, parents and children — no one is immune, and everyone has their own tale to share.

The collection combines first-person accounts, submitted by people from across the country, with interview-based profiles by Simmie and Nunes. Many of the people telling their stories are well known: Olympic figure-skater Elizabeth Manley, politicians David Reville and Michael Wilson, comedian Scott Thompson, actor Margot Kidder, and musician Ronnie Hawkins. Others are ordinary people — students, journalists, healthcare workers, family members — whose stories are equally compelling. And some contributors choose to remain anonymous, a reminder that stigma continues to haunt us.

The authors told their own stories in *The Last Taboo: A Survival Guide to Mental Health Care in Canada* (2001). Although they took a very personal approach, the book focused primarily on giving practical information and advice to help people navigate the “system.” There are practical lessons to be learned from *Beyond Crazy* too, but here the authors have another objective: to show that people can and do recover from mental illness. In this, they share the vision of Boston-based psychologist Dr. William A. Anthony, executive director of the Center for Psychiatric Rehabilitation. Dr. Anthony is a leader in researching and promoting the ideas of resilience and recovery — the con-

cept that people need more than medication and psychotherapy to get well. They need social supports — a job, a home, a friend — to help them move through the trauma of mental illness and find new meaning in life and opportunities to grow.

Dr. Anthony began his groundbreaking research in the 1970s by doing something that very few other healthcare professionals were doing: listening to the stories of people with mental illness, to understand the challenges they faced and to discover what they wanted and needed to cope. He learned to look past the impairment, to see the whole person and not just the diagnosis.

Beyond Crazy succeeds by helping readers to do exactly that: to look beyond the label. The stories are personal, and each person brings a unique perspective — on suffering, suicide, family tragedy. By talking openly about mental illness, they break the taboo. And together, they tell a compelling story of survival, resilience, and recovery.

Beyond Crazy: Journeys through Mental Illness, by Julia Nunes and Scott Simmie, was first published in 2002 by McClelland and Stewart. The trade paperback edition was released in February 2004.



THE
LIFE



ME

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AN INTERVIEW
WITH
RACHEL MANNING



THE LIFE OF ME IS A DOCUMENTARY FILM THAT FOCUSES ON TWO ACTORS, GEORGE VUKOJEVIC AND RACHEL MANNING, AS THEY STRUGGLE TO OVERCOME THEIR OWN FEARS AND CHALLENGES TO PRODUCE A PLAY THAT WAS PERFORMED AT THE FINALE OF THE MADNESS AND ARTS 2003 WORLD FESTIVAL. AT TIMES IN THE DOCUMENTARY, IT IS ALMOST IMPOSSIBLE TO BELIEVE THAT THESE REHEARSALS WILL EVER RESULT IN A POSITIVE OUTCOME. GEORGE STRUGGLES TO IGNORE THE VOICES IN HIS HEAD AND LEARN HIS LINES — WITH LITTLE SUCCESS FOR THE MOST PART. RACHEL HAS HER OWN DIFFICULTIES TO FACE. A PROMISING ACTOR, IT ALL SLIPPED AWAY FROM HER AS SHE FOUGHT A LOSING BATTLE WITH DEPRESSION. THIS COULD BE HER CHANCE TO MAKE UP FOR ALL THE LOST YEARS. SO MUCH IS AT STAKE FOR BOTH OF THEM.

Against all odds, the final play, entitled *In the Room*, was an overwhelming success, both in terms of audience response, and in the strength that George and Rachel were able to draw from their ability to dig deep and do what had to be done when it really counted. That night, says Rachel, was “a golden performance.”

How did you become involved in this production?

I've been a member of the Workman Studio for the last three years, and I'd done some small bits and pieces with them. They were looking for two actors to do this, and Lisa Brown [founder/artistic producer] knew I had a long history of theatre and acting and suggested me to Ed Roy, the director. He basically just met with me and asked me if I'd like to do this, it really wasn't like an audition. It came at a wonderful moment for me. It was a breaking point in my life. A time to get past all the years of mental health problems and other difficulties. It gave me the opportunity to focus and get back into theatre arts and acting. It was a bit of a challenge at first because it was the first real thing I'd done in ten years. But it was a tremendous success.

Rachel, how much of the story in the documentary is your story and how much did you create for the play?

That's interesting because what Ed had us do was really improv. He asked us to create characters, and I think what was happening was that although I didn't consciously relate the character I created to my life, there were things that mirrored it. In my life I had come through a couple of years of ups and down. I was in the hospital. I had lived outside of the house in different places and I was just getting back on my feet, emotionally, mentally, all that kind of stuff, and some of that crept into my character for the play. It paralyzed my life. So it wasn't that I was writing about myself, but I was using some of the things that I had gone through.

So did Ed actually write the script based on things that you and George came up with? A communal creative script with him having final control?

Yes. The first time we got together we just sat around and talked and I kept thinking to myself, “What are we doing here? I thought this was going to be a show with lines.” I had no idea at that point that it was going to be a collaborative process.

In the documentary you say, “Is it crazy to have this mean so much to me?” How much did the play mean?

In some ways it did feel crazy feeling so strongly about the play. I trained as an actress for many years in high school, and then at Young People's Theatre and Second City. I took voice classes. After high school I studied in New York. Now here's this little play....

Was that when you started to be aware that things weren't right, when you were in New York?

I was suffering from great depression before I went to New York. I think going there just made it snowball. It was hard because I didn't know anybody there and it's a tough city. I arrived two weeks before acting classes started and shared a flat with another woman who needed a roommate. She was

a little older and we got along but it wasn't like we were friends. I would go out walking and be gone all day and forget to eat, my mind was somewhere else, and it just kept on like that. I was lonely. I did really well at the classes and I was quite successful in the shows, but when I came back to Toronto I couldn't go on. I really needed help. But I didn't get it at that time. Then I got my own apartment and got into the bar business and ten years went by. Finally one day I woke up and said, “What am I doing? I'm wasting my life here,” and that's when I discovered Workman Theatre. It was a great way for me to get started again, but as I said it was difficult for me. I had trained so hard, I had done shows at a professional level, and all of a sudden here I am putting my whole life into this one little performance. It was kind of embarrassing for me to make such a big deal of it. But the end result made me so proud. And the feedback... people were just floored by what we had done. Even though it wasn't a huge production it was something important. Working with Workman Theatre has given me an opportunity to do so much more than act. Workman isn't just about theatre, it's about people, people with problems. I did a performance called *Show on the Road* with Workman, and we took it around to the wards and performed for the patients. That kind of thing gives you a perspective on what you can do with your art as far as contributing to people and society.

George says at one point in the documentary, “The stakes are high” and intimates that he can't afford to mess up.

How high were the stakes for you?

The stakes were high for me in the sense that I was really very worried. I didn't know if it was going to work. I really liked the piece and I wanted it to work but I was scared that it wouldn't go on after all the months and months of preparation.

So for you, even if this hadn't worked, hadn't been a success, it wouldn't have affected how you felt about acting.

You'd still be out there doing what you do best?

Yes I would, but with the minus of having something that's really like a medal behind me. Every time you finish a show you get a sense of accomplishment, but this was even more. It was one performance that was just golden and irreplaceable.

What made it so golden?

Well, I think first of all the piece was brilliant, what Ed wrote. I think also, after all the talking and all the struggling, here we were, two actors on stage with none of the garbage of what was going on in our lives there, doing what we do, or what we want to do, or what we can do. It was also the way we all collaborated, how it came together, how at a low moment in my life, and in George's, someone phoned each of us up and said, “Hey, how about doing this?” I had no idea it was going to be so big. I had no idea that it was going into Madness and Arts. I think the other thing that made it so special was because the play was about real issues in life. It was an original piece written about real people, their situations and struggles, and we were a part of making that script happen.

Do you feel differently about your craft of acting, what you want to achieve with it now, than you did before you were diagnosed with bipolar disorder?

You know it's funny, I've been thinking about that lately. When I finished the Workman project I was really revved up to forcefully get back into acting. Now it's been a year and I know I need to focus on keeping healthy and keeping a clear mind, and acting kind of isn't the first thing. I'm still ploughing away at it, but because I have so much time in between each thing I do I lose the trust in myself that I can do it. Also, because I am getting older, I'm not putting all my eggs in one basket. I'm not saying that acting is going to be the rest of my life. Right now I am in a position where I have the opportunity to do some theatre, which doesn't pay great, but I don't know how good I am. I get people telling me I've got a lot of talent and I should go for it, but I don't know. I think it's funny because when I was in worse shape mentally than I am now it came more easily, but when you calm down and deal with your reality, getting up and acting is a very strange, foreign feeling. I've been working for the last few years on trying to maintain stability with who I am, then suddenly I am acting and I have to pretend to be someone else.

So you're saying it's kind of a pretend game again and you are trying to get out of playing pretend?

Exactly. My last production in high school I played Helen Keller in *The Miracle Worker* and it was fabulous, but I was a mess. I was so locked into character in the play that on the final show when the whole cast was backstage in the hallway, cheering and laughing, I was in the dressing room bawling my eyes out because I didn't know what to do with myself. Where do I go now? It's like having this wicked love affair and then it's over and you have to move on and find another one. I'm pretty emotional by nature, aside from having had mental health issues, so it's hard for me to ride that roller-coaster. It used to be that my mania would catch up, now it's not the mania. I get on a high because things are going so well and then something has to give. It's normal human emotion.

It must be difficult for anyone who performs to deal with the kind of adulation you get on stage, and then deal with an equally bad low once the audience has left. Is that an additional difficulty for someone with a mental illness to cope with?

Yes, it's an incredible letdown because all of a sudden you are in your real life. And if you don't have a life.... I once had an acting teacher tell me, "You can't just have this, you have to have a real life too."

And that's what you've recognized? You love acting but you have to develop a real life too?

Absolutely. I have to have my life in order. I know for myself when I am doing a show that is all I'm talking about, or that's all people are asking me about. But when I've finished no one is interested. I have to be able to live that real life in addition to acting. The Workman Theatre is fabulous and they really gave me back something that I don't know if I could have



ACTORS GEORGE VUKOJEVIC AND RACHEL MANNING REHEARSE *IN THE ROOM*, PERFORMED AT THE FINALE OF THE MADNESS AND ARTS 2003 WORLD FESTIVAL.

achieved on my own. I might have, but it would have taken much longer. Even though I am doing other theatre projects now, I would still like to work with them.

In the documentary your mother says, "When you were ill I wondered whether you were still in there." I know a lot of people when they are diagnosed with a mental illness feel they have lost their identity, they become the illness. Do you feel that your acting enabled you to regain your identity and enabled other people to see you have an identity apart from your mental illness?

Absolutely. And the night we performed I was me again. When I walked off that stage I was more myself than I had felt in a long long time. I had about 25 people come and see me do that play because it was such a huge deal in my life, and they knew that I had had many years of stuff going on. And you know it wasn't just my mom wondering if I was still in there. When I was ill I didn't feel I was there. I was alone for many years because of my illness but now I wasn't hiding anymore. I was up on a stage in front of people. I couldn't hide, so when I came off the stage I was open. I was me. I was wanting to make contact with people. And I had great talks with people. People who didn't know me came up to say thank you. If you are a big movie star maybe you expect that, but this was different, this was people who were genuinely thanking me for giving them something. And it made me realize what art is about: it's about giving people something. You are giving people a thought or a feeling whether they are looking at a painting or watching something you are presenting. It's a gift you are giving. They are experiencing something through what you are portraying. Actually, after we showed the documentary one woman stood up and said, "I think there is someone else here who needs to be acknowledged and that's Rachel's mum." The documentary is touching lives just like the play did because even if it's not you who has a mental illness, it might be your child, or a family member, or a friend. People see themselves in there somewhere, and that's what art does, it touches people.

Bre ing the mask



Singer-songwriter James Gordon has spent almost 30 years performing, as founder and former member of the Canadian folk trio Tamarack, as a solo artist, and more recently with pop musician Sandy Horne. He has over 30 albums to his credit, and still maintains a gruelling tour itinerary that regularly takes him to cities across North America. He composes music for theatre and dance, teaches songwriting workshops in schools, and has his own recording studio where, in his free time, he produces other artists. Just in case that isn't enough to keep him busy, he's also written a book, *A Thousand and One Canadian Nights*, describing what it's like to spend a large chunk of your life on the road, touring as a singer.

But when his 15-year-old son was diagnosed with a mental illness, James Gordon decided he needed to add something else to the mix. He considered how he could use his performance abilities to somehow reach teenagers like his son, hoping that artistic expression would make a difference in their lives. He soon discovered that being given the chance to express themselves through a picture or a song or a painting gave them greater confidence. More than that, it gave them a voice to express the things that were important to them. Gordon realized that if he could help young people reach a wider audience of their own peer group, re-telling their own story in a way that other teens could identify with, not only would it get the message out about mental illness, but the ones delivering the message would be given a chance to grow through the experience.

Breaking the Mask, a video that incorporated all the talents of a team of 10 young artists, was the vehicle he used. The symbolism in the video is that of one person finally having the courage to pull off his mask, willing to be seen for who he is. That mask was taken off symbolically in the video, but for some of the young artists who shared their stories with their peers in a question-and-answer format after the video was shown, that mask was literally thrown away.

Sponsored by the Homewood Foundation, with the participation of the Schizophrenia Society of Canada, *Breaking the Mask* had its debut in June 2001 in Guelph, Ontario and again at the National Conference for Schizophrenia in Toronto. Although none of the participants had any previous video experience, they were collectively responsible for every aspect of the production, sharing their stories through music, drama, art, poetry and photography. Gordon's son, Evan, acted as musical director.

For production manager Joanne Tofflemire, who suffered from depression and an eating disorder through high school, the process brought greater confidence in herself, her work capabilities, and her ability to communicate effectively with others. Other participants called it an "incredible opportunity to learn new skills," and said they gained a new realization that "mental illness doesn't have to cripple you."

Breaking the Mask continues to be shown in schools across Canada and the United States. Gordon has produced a study guide for teachers, and whenever possible he attends the viewing, ready to answer questions from teen audiences.

His advocacy work didn't stop with *Breaking the Mask*. At about the same time, Gordon founded the Family Mental Health Network in Guelph, which successfully lobbied for an Assertive Community Treatment team. In 2003 he launched "Tour of Hope," a series of awareness-raising and fundraising concerts in the United States, with proceeds going to support educational programs for local chapters of the National Alliance for the Mentally Ill.

In 2003 Gordon also recorded *I in 5*, a twelve-song CD about mental health issues. "The songs are from personal stories people have shared with me," he told an interviewer.

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"Some are dark, others bright." The title track refers to the high prevalence of mental illness, the fact that one in five people will experience it in their lifetime.

More recently, Gordon has turned his attention to theatre. In October 2003, he debuted *Hardscrabble Road*, a dramatic musical about homelessness, and he is currently working with Spark of Brilliance, a community-based arts program, to create a theatrical production about mental health. In the same manner as *Breaking the Mask*, participants will take on all levels of responsibility, including writing, acting, video documentation, and live production.

Teamwork and creativity have proven to be a successful combination in the past. "Being involved with the *Breaking the Mask* video was my first big step in getting back into the community," says artist Jay Lefler. "It was a collaborative work of ten people that James Gordon orchestrated. It was a big project, it took nine months, but it was well organized and it ended up being a landmark event in my life."

Viewers agreed. After watching the video, one member of the audience commented, "I changed my mind about the future of young people who are diagnosed with mental illness. Good things can happen. There is hope."

For more information about James Gordon, or to purchase videos and CDs, visit www.jamesgordon.ca.

Speaking Out

As a child and young teenager, Joanne Tofflemire loved taking photographs, mainly of the family dog, Suzy. Working as the production manager for *Breaking the Mask* was the doorway to improving her self-esteem and getting her involved in photography once again.

"Photography helps me feel safe," says Tofflemire. "The camera acts like a protective barrier between me and the world and helps me find the courage to interact with people in various settings when I would otherwise be too afraid to become involved. This is important because it is so easy to become isolated."

"The act of creating, for me, is anything that helps me to feel connected both with my true self and the world around me. Interacting with nature, the ultimate creation — interacting with life — is probably the most important part of my creative process, my healing journey, and my life's journey."

"Four years ago I really struggled with telling my story. But I've learned that the best way to deal with it is to speak out."

Web Extras

Visit *Network* online for these additional stories

> **Spark of Brilliance**
Judith Rosenberg promotes empowerment through creative experiences

> **Art for Self-Expression**
Rediscovering his creative self put artist Jay Lefler on the road to recovery

www.ontario.cmha.ca/network

CALENDAR

May 3-7, 2004

National Mental Health Week: Making Connections. For more information: 416-484-7750, national@cmha.ca, www.cmha.ca.

May 4-5, 2004

Mental Health Tune Up 2004. Public education forum and community resource fair, organized by the Canadian Mental Health Association, Ontario, and the Ontario Psychological Association. Generously sponsored by GlaxoSmithKline, RBC Financial Group, and the Psychology Foundation of Canada. Barbara Frum Atrium, CBC Broadcasting Centre, 250 Front Street West, Toronto, Ontario. For more information: 416-813-2282 ext. 2001, www.mentalhealthtuneup.ca.

June 9-11, 2004

Adult Antisocial Behaviour: Where Does It Come From and What Can We Do About It? 18th Annual Forensic Conference. Midland, Ontario. For more information: 705-549-3181 ext. 2201, fax 705-549-0518, confor@mhcp.on.ca, www.mhcv.on.ca/forensic.

July 7-11, 2004

Honouring Our Past, Charting Our Future. CMHA 2004 Annual National Conference. Saint John, New Brunswick. For more information: 506-455-5231, fax 506-459-3878, cmhanb@nbnet.nb.ca, www.cmhanb.ca/events.html.

October 4-6, 2004

Making Gains in Mental Health and Addictions: Knowledge, Integration, Action. 2nd Annual Making Gains Conference. Toronto Hilton Hotel, Toronto, Ontario. For more information: 705-454-8107, fax 705-454-9792, www.makinggains.ca.

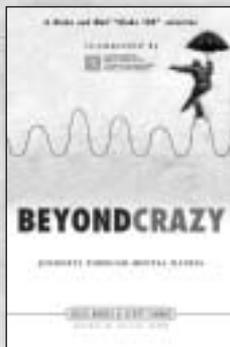
October 12-15, 2004

Pathways to Recovery: From Foundation to Innovation. Ontario Chapter of the International Association of Psychosocial Rehabilitation Services (IAPRS), 7th Biannual Provincial Conference. Hamilton, Ontario. For more information: psrconf@stjosham.on.ca or Jodi Younger at 905-522-1155 ext. 6267.

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BEYOND CRAZY **Journeys Through Mental Illness** by Julia Nunes & Scott Simmie



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RON CHASE (Manager Information Technology, Frontenac Community Mental Health Services, Kingston, Ontario, Canada)

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The conference will strive to meet the needs of the increasingly complex and diverse communities that we serve – from delivering service to creating excellent volunteer-run organizations. Drawing on Toronto's diversity, the conference will also focus on the challenge of meeting the complex and diverse needs of all members of the community through creative and innovative strategies.

www.makinggains.ca



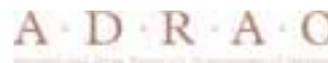
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