

IN THIS ISSUE

Keeping you up to date	2-6	Volunteers	10
– Senator Brett Mason visits MIFSA	3	Fundraising	11
– Members interview Co-Patrons	4-5	MIFSA Support Groups	12
– Board of Management Nominees	6	For your information	13-15
MIFSA Programs	7-9	Current research	16-17
– Peer Worker	7	Members' Muse & News	18
– Psychosocial Groups	8	Activity Centres activities	19
– Activity Centres	8	Membership renewal form	20
– Education	9		
– Well Ways	9		

ISSUE 9
October/ November 2007

www.mifsa.org

Breaking News!

WE HAVE WONDERFUL NEWS TO SHARE – MIFSA WAS SUCCESSFUL IN ITS APPLICATION TO DELIVER PERSONAL HELPERS AND MENTORS (PHAM) PROGRAMS IN BOTH THE NOARLUNGA AND WESTERN METROPOLITAN REGION OF ADELAIDE.

Three sites were available in metropolitan Adelaide so it is truly a commendation of our organisation, programs and service delivery style that we have been successful in two out of three regions.

The Personal Helpers and Mentors Program is an Australian Government funded initiative of the Council of Australian Governments' National Action Plan on Mental Health 2006-2011. The initiative provides \$284.8 million over five years from 2006 for approximately 900 Personal Helpers and Mentors to help people who have a severe functional limitation resulting from a severe mental illness.

PHaM's programs assist individuals to manage their daily activities and access a range of appropriate and integrated community, social support, accommodation, health, welfare and employment services when they need them.

The program creates opportunities for progressing individual journeys of recovery by assisting people to overcome social isolation and increase their connections to the community. A strengths-based approach focuses on a person's strengths rather than deficits. A recovery approach recognises that a person can live a satisfying and contributing life within the limitations caused by their illness. Recovery does not mean cure.

The PHaM's programs at MIFSA will deliver a fantastic service to many individuals, will be delivered by 10 full time equivalent workers across both programs (likely to be between 14 – 18 new workers) with a total program funding of \$2.4 million over the funding period of September 2007 – June 2010. We look forward to bringing you updates over the coming months.

Co-Patrons interviewed by MIFSA members

It was a pleasure to introduce Dean Brown and Jane Doyle as our new co-Patrons in the last edition of *MIFSA News*. Since then several MIFSA members took the opportunity to interview our co-Patrons. Chris Mufford, Tony Kushelew and Teresa Schmucker hope you enjoy reading the results!

Chris interviewed Dean Brown, finding it a very rewarding and valuable experience. She writes: 'We both shared our views and opinions in the area of persons affected by mental health issues and public mental health services, including the stigma, barriers and many challenges that as mental health consumers we face and deal with along our journeys of recovery.' Her questions to Dean Brown appear on page 4.

Continued page 4 >



Vision & Mission

Our vision is that every person with mental illness is able to make a valued contribution to society, without stigma or discrimination, due to an increased understanding and awareness of mental illness in the community and the availability of appropriate services as required.

Our mission is to provide education, support, rehabilitation and recovery based programs in a safe, quality environment to assist people with mental illness and their natural support network living in South Australia to enjoy the best possible quality of life.



From the President

President’s September musings. The COAG announcements last year, promising \$1.9 billion for new mental health services, was followed by several months of mixed messages and very little certainty about what money would become available and when. But since early this year, the pace of change has been amazing. At our last Board meeting Natasha treated us to a summary of the programs that we have won funds for in the last year, and the further submissions she has either submitted or is still working on. Although we are a well-informed Board, it was quite stunning to see how far we have come in such a short time.

With 57 people on the payroll, and more to come soon, programs like Well Ways, Day to Day Living, and Personal Helpers and Mentors are quickly becoming established

parts of MIFSA, providing services that we could only dream about a couple of years ago. And a couple of new bids for funding could see us expanding into respite care and other much needed types of support in the next few months.

So those readers who have been using MIFSA services for a few years will be seeing many new faces when they visit us. We are recruiting just about all the time, and attracting some very talented and committed people. What really delights us is that most of the ‘old faces’ are still here, increasingly squeezed in to our cramped premises, and still fired by the enthusiasm to play their part in a great little organisation. Well, not so little any more!

David Meldrum



From the Executive Director

We are listening closely for what we hope are collective “ooohs” and “aaaahs” when members see MIFSA News in its new colours! Having updated our logo we are in the process of also upgrading our organisational profile and image. For example, we are currently working on a MIFSA poloshirt, cap and badges which will be presented to active MIFSA volunteers in coming months.

In regard to MIFSA News, we have been working hard to find a balance between an updated and professional publication without becoming “glossy corporate”. We have also been mindful of budgets and have finally settled on a full colour back and front cover with internal pages in black, white with our orange colour. We are very pleased with the effect and welcome your feedback as always.

Staff updates include welcoming Susan Wilkes and Cecile Fergusson who are job-sharing the MHRC Administration Officer position, Suzie Graney as Finance Officer and Paula Ryan as Psychosocial Groups Coordinator and Administration Officer. At Panangga Yvonne Turner has extended her hours as Coordinator and we welcome

back to a Coordinator role Bernie Maywald. We have also recruited Andy Inkster and Christina Rasera as Panangga Activity Officers. The last MIFSA News reported Kim as a new Keswick Activity Centre Coordinator, however, after a slight reshuffle we welcome Suzi Howard to the role.

Prue Millingen’s farewell from Panangga was both heartfelt and touching as members and staff wished her well with her future and her travels. We also farewell and thank June Bradley-Sperryn for her support in delivering a fantastic MHRC administration service over the past six months.

In August we completed our survey of members of the Keswick Activity Centre regarding possible opening hours. There was a strong representation from people favouring Saturdays, a good number preferring Mondays and many members who did not mind either way. MIFSA is guided by its members and the Activity Centre will stay open on Saturdays rather than moving to Mondays.

The questionnaire provided interesting feedback including the difficulty for many members in accessing the Centre on a



week-end due to the irregularity of public transport. Members were also particularly keen on the “do it yourself BBQ” on Saturdays. Given the balance in opinions we will keep an eye on attendances and capacity to roll out new programs as part of our ongoing service assessment. Thank you to all who gave such valuable feedback.

Continued next page>



Senator Brett Mason visits Keswick Activity Centre

At MIFSA we are busy expanding our Panangga and Keswick Activity Centres following the receipt of funding from the Australian Government for "Support for Day to Day Living in the Community programs". Parliamentary Secretary for the Minister of Health and Ageing, Senator Brett Mason, visited MIFSA's Day to Day Living Program on Saturday, August 18, to meet clients and staff.

Senator Mason visited MIFSA following recently announced Australian government funding of \$332,000 to provide nearly 100 more medium support places.

It was fantastic to be able to introduce the Senator to over 20 members and to offer a tour of Keswick Activity Centre. The Senator was very impressed with our open plan activity area, computer training room, accredited food kitchen, library and reflexology area. The Senator drew free passes to the Royal Adelaide Show for four lucky members and everyone enjoyed fresh fruit salad and ice cream, and lively conversation.

"Mental illness affects one in five Australians each year and MIFSA is one of the great organisations implementing practical and personalised assistance to help people with a mental illness regain their feet."



Senator Mason spent time talking with members and hearing about MIFSA's rapid progress in rolling out the expanded programs. He was clearly impressed with MIFSA and the Activity Centre and has asked to be kept updated on progress at MIFSA.

From the Executive Director *continued*

From previous page>

MIFSA members will also have received a Call to Action in the past week which pulls together the results of the questionnaire many of you completed earlier this year. Over 2,200 Australians completed the survey from across all states and territories of Australia. The responses have given a clear and compelling snapshot of the feelings that Australians from different sectors have towards mental health issues, particularly the Federal Government's handling of such issues, ahead of the Federal Election 2007. We hope that the Call to Action kit will spur many of you to bring your concerns to the attention of your local Federal Member of Parliament.

Once again, we hope you enjoy reading MIFSA News, all comments, suggestions and feedback always welcome. Have a great Mental Health Week everyone!

Natasha Miliotis

"When you first get diagnosed it should be part of the script to come to MIFSA". A.T.

(new MIFSA member)



MIFSA ANNUAL GENERAL MEETING

THURSDAY 11 OCTOBER 2007 AT 5.30PM

Fullarton Park Community Centre

Cnr Fullarton Road and Fisher Street, Fullarton
(Parking available off both Fullarton Road and Fisher St)

**AGM followed by presentation of the MIFSA
Sunflower Awards at 6:15pm**

**See page 6 for profiles of the Nominees to the MIFSA
Board of Management.**

Co-Patrons interviewed by MIFSA members

continued from page 1

Q Why did you agree to become joint patron of MIFSA?

A Dean responded that he feels honoured to be joint patron of MIFSA alongside Jane Doyle as he has had an interest in mental illness/health for many years. He feels strongly that mental illness is misunderstood and not given the same dignity and respect as other areas of health. Dean believes in mental health reform, and open education about mental illness/mental health. He feels that mental health should be given higher priority. Dean spoke about his involvement in Headspace, in the area of youth mental health, first developed in 2006.

Q What do you believe is your role as patron of MIFSA?

A Dean believes that he will be able to facilitate education of the general community and open doors for MIFSA. He will also be able to promote MIFSA and other mental health services that are available for all people living with mental illness.

Q What do you feel the role of MIFSA is?

A To emphasise the importance of mental health reform and provide services to all affected with mental health issues. To get the message out to the community, employment agencies, hospitals etc., to give support, encourage the enhancement of skills and quality of life of all living with mental illness using a recovery based model, activities and programs. Dean believes that MIFSA provides a safe place to reconnect, share and grow and is an overarching body for all affected by mental illness.

Q How have your political experiences influenced your decision to become a co-Patron of MIFSA?

A Dean started taking an interest in mental health in 1993/1994 when he was Premier and working with Dr Armitage. Dean realised some of the shortfalls of the the public mental health services and treatment of people affected by mental illness. There also seems to be a downgrading of priority in terms of resource funding. As Health Minister, Dean had worked closely with the late Dr Margaret Tobin who helped to carry out the



Dean Brown and Jane Doyle

review of the mental health services and always insisted that MH was a number one priority.

Q What are the main issues facing people living with mental illness?

A Access to treatment as well as appropriate choice of treatment. Other issues include employment, support, early diagnosis, correct diagnosis, family, carers, quality of life, skills development and education. Education needs to include the illness, how it affects people and how to support those with lived experience.

Q How do you feel your particular field (politics) views mental health?

A Dean feels that there is a general lack of awareness/understanding of the challenges faced by those affected by mental illness and their families, as well as the services needed.

Q Do you have any personal experience with mental illness?

Yes, a student friend at university was affected by mental illness.

Q What are some of the positive/negative experiences you have had in regard to mental health/illness?

A Dean has seen many adverse incidents but what inspires him the most is seeing someone affected by mental illness smiling along their recovery journey despite the many obstacles they may be challenged with. One of the negative experiences includes witnessing appalling treatment of people affected by mental illness within health services.

Q How do you think the workplace culture views mental illness?

A Dean thinks there is a general lack of awareness among employers and the general public as well as the lack of education and empathy. Dean believes there can sometimes be ignorance about mental illness, with workplaces not acknowledging the challenges and effects of mental illness. The lack of education or willingness to accept information that is available to workplaces means that there are very few organisations which are committed to mental health.

Q Have you any personal mental health strategies to look after yourself?

A Dean enjoys exercise and moderate intake of foods. He enjoys spending time in the garden and finds this very positive and relaxing.

I shared some of my strategies and the therapeutic, enhancement I get through volunteering as well as my personal growth since my involvement with MIFSA. We also discussed the importance of continuing therapies such as art and music in the public health sector and the benefits of growing fruits, herbs and importance of nurturing animals.

I thanked Dean Brown and welcomed him as co-Patron of MIFSA. I thanked him again for his time and the opportunity and honour of conducting the interview with him;

Chris Mufford.

Tony and Teresa interviewed Jane, with Tony compiling the following article.

Jane Doyle has kindly agreed to be a co-Patron for MIFSA and took time to tell us about herself and discuss her thoughts and understanding of mental illness.

Q What made you agree to becoming a co-Patron of MIFSA?

A Jane explained that she had been aware of the Schizophrenia Fellowship for years, having been an MC at the Sunflower Awards. She has a particular interest in mental health, and being our patron gives her a good opportunity to re-engage with this area.

Continued next page>



Q What do you believe your role is as a co-Patron of MIFSA?

A Jane felt that she had been approached because of the possibility that through her work she may help develop a higher profile for MIFSA and “gain even more traction” within the community for the work it does. Jane stated that she would use her skills to do what she can, however she can.

We discussed the various programs at MIFSA, Jane’s desire to raise consciousness within the community about mental illness, the issues of stigma and discrimination of which Jane is well aware.

Q What do you perceive to be the main roles of MIFSA, in regards to members and the general community?

A Jane stated that people are fearful because of ignorance – they just do not know or understand. If faced with issues which are confronting or difficult, people tend to walk away. She agreed with us that reporting by the media sometimes reinforces these fears.

There are a lot of people who have long standing issues with mental illness. Others are very functional, very gifted in particular areas, but will have periods which debilitate them. That is no different from someone who has asthma or diabetes and if those illnesses are not well managed then they can be debilitating too. We are much more tolerant of physical illness than mental illness.

Q Can you express some of your thoughts and views of mental illness within the community?

A “What most interests me about mental illness and I find most disturbing on the negative side is the problem people have in gaining acceptance. I sometimes think it would be easier to have a debilitating disease like cancer. People offer immediate support. But people are less likely to provide the same level of support to someone with schizophrenia or a mood disorder or another serious mental illness. I think these are issues which make mental illness especially difficult.”

Q Do you know anyone who is living with or has experienced mental illness?

A “Yes I do. That makes it easier to understand what people are dealing with on a day to day basis; and that the “s” word, stigma, is one of the biggest problem they face. It’s very

confronting. Do you disclose your mental illness? If so, to whom and to what extent? Does it help or hinder your own recovery if you disclose? How do you decide when and where to disclose and how much?

“All of that comes down to a very strong fear factor for those with mental illness (as well as the fear felt by the uninformed public). There is a real tension there. To what degree do I put myself at risk if I disclose to an employer? Do I have a duty of disclosure? If you are a parent, do you disclose your illness if you offer to care for somebody’s child?”

Jane used the example of a friend who has serious diabetes and disclosed this very early in their friendship. Later when her friend had a minor incident while in charge of children, because they were aware of the diabetes, they knew “this was fine”, they all understood that this was happening to her because she has diabetes. Her children knew what to do and Jane’s son wasn’t distressed.

“The fact that she had come to me first revealed what had happened impressed me. But diabetes is relatively well accepted. How do you disclose that you have schizophrenia even when well managed? It would be a much more difficult and confronting thing to have to do, even amongst close friends.”

Q What do you perceive are some of the main issues that people living with mental illness face, what do you believe could be done to help break them down?

A “Stigma is ongoing and pervasive. But what concerns me is the breakdown between acute clinical care and how we then deal with people, because it seems that the acute clinical space is getting smaller and smaller, there are fewer and fewer options for people.

“We seem to be going to a community care model which is an excellent idea but unfortunately the resourcing for it has not been adequate and the closure of residential care facilities has been a revenue saving exercise without the savings being redirected to other areas of mental health. Community care could be more effective in giving people assistance in changing their lives if it is properly resourced.

“A major issue that terrifies me as the mother of a young person is the increasing evidence establishing the link between drug use and the triggering of, in some genetically predisposed people, a mental illness. There does not seem

to be enough awareness of this in the youth culture of how dangerous excessive drug use can be.”

Q Can you tell us about any positive/negative experiences you know of regarding mental health/illness, how did this make you feel?

A Jane shared a number of experiences involving close friends and their families who have experienced mental illness, personal struggles and suicide.

“Many years ago one of my first encounters was when I interviewed Ann Deveson AO when she was head of the S.A. Film Corporation, and reading later about her son’s illness. At the time I was interviewing her, her life was affected by her son’s acute episodes of schizophrenia and I remember wondering how she could juggle both a high profile position while managing his illness. Her personal life must have been absolute chaos under the pressure.”

Q Are there any questions that you would like to ask of us?

A Jane said “Ah!” The obvious question is what MIFSA offers you as members. How does it help you with your lives and has it been a positive association? In discussion with Teresa, Jane and myself we agreed that MIFSA provides a sense of community, “like an extended family” as Jane put it. Safety (no need to hide illness), an informative newsletter, peer worker training and other mental health related courses, and, as Jane commented, “an opportunity to give.”

Q What are some of the things that you do to look after your mental health?

A “I am keen to take care of my mental health. I try to maintain a balance in my life, which at times is very difficult, and the most important things is contact with my husband and my son and some long standing friends plus some time out to give myself permission to do things that I enjoy like gardening or reading. I maintain a disciplined approach to physical activity. An aim, a goal, is to establish a meditation practice. In the meantime I incorporate some techniques, such as deep breathing.”

Jane Doyle is a delightful person! We found her well informed, acutely aware of mental health issues and enthusiastic to help in any way that she can. We consider her an excellent patron for MIFSA;

Tony Kushelew



Nominee Profiles – MIFSA Board of Management

Marion Croser

I have been a member of MIFSA since 1995. My role as a volunteer, Chair of the Education Group and as a Board member have all been positive, providing me opportunities to inform people about MIFSA – a very important NGO for consumers and carers and people working in mental health.

I am a psychiatric Social Worker working at the Margaret Tobin Centre and have extensive networks in the mental health area. I wish to continue my contribution to the MIFSA Board as I have over the past 5 years. Through my contacts I am a “voice” for members as well as supporting MIFSA’s aims and objectives as a progressive NGO. My role would involve supporting all avenues to break down stigma and discrimination within systems so as to raise the image of mental health services.

Nicki Hirst

My interests are somewhat diverse; I am compassionate and empathetic, with good insight into quite a few illnesses having lived experience of mental illness myself. I have been involved in quite a few committees and am also involved in a number of programs at MIFSA. For example, presently I am leading the second half of the Support Works group on Wednesday afternoons, I have completed the Public Speaking Education course and am working on a film discussing my experience of psychosis.

I am presently working for the Margaret Tobin Centre at Flinders Medical Centre as a consumer consultant and I love the job. This entails coming alongside consumers and supporting them, as well as their carers or family. If I am elected to the MIFSA Board I will contribute positively, in particular I am interested in areas of policy and the strategic plan and making MIFSA’s existence better known across the community.

Eddy Lynch

Mental Health is my passion to which I have given my whole working life and I also volunteer time to the needs of others in the area of mental health. I have a rich history in Mental Health since 1967. I would like to contribute as a Board member, aiming always for best practice and will also be working with the State Government regarding the Master Plan for SA Specialist Health Services (the re-development of Glenside).

Eddy Lynch was the President of the Mood Disorders Association for fourteen years, with three years as the Vice President and has served on the MIFSA Board for the past two years. Eddy was a foundation member of Family Therapy (SA) Association and a foundation member of the Mental Health Alliance. Eddy has extensive experience in working in mental health having been a psychiatric nurse for 40 years. Eddy is keen to continue his commitment to supporting the Board of Management in their work in guiding MIFSA as a leading NGO.

David Meldrum

I have experience on a number of Boards, both at a state and national level, which I hope gives me the skills and understanding of good governance which can assist MIFSA. I also have good networks in the health and community services sectors, which have opened some doors for MIFSA in the past.

My work history includes extensive experience in both the government and non government sector in the management of health and community services. Previous roles have included the Chief Executive Officer of South Australian Mental Health Services, with my current focus involving consultation with government and private health organisations in Australia and New Zealand in the development of community services as an alternative to hospitalisation.

Susan Wilkes

‘Profound delight’ is the best way to describe how I felt when I first experienced MIFSA’s organisation and culture as a volunteer in May 2006. My subsequent employment as a part-time receptionist/administration officer has only increased my desire to contribute and be involved in the vision, mission and purpose of MIFSA in any way possible.

I have a legal background and was previously employed as a criminal lawyer in SA and Victoria. I have a family history of mental illness, I have personally experienced mental illness and in my previous legal capacity have represented people who suffer from mental illness. I have experienced first hand the helplessness and despair that family members experience when their loved ones are unwell, behaving irrationally, or brought before the Courts. I have also experienced and witnessed recovery and the promise and reality of life lived well with mental illness.

I believe in and support the vision and strategic purposes of MIFSA and am very excited about the reform of mental health services in our state. I believe that MIFSA is a vital, dynamic and relevant presence in our community. I believe that: my personal experience; my network of family, friends and associates; and my analytical and problem solving skills would contribute to my participation on MIFSA’s Board of Management. I certainly welcome the opportunity.



Peer Worker Program

G'day guys, just a brief run down of the program this time, then my esteemed work colleagues will share some info with you. As always the program is going along well. We have just completed two courses and are aiming to run another one by the end of the year. The interest in attending the course continues to grow on both a consumer and organisational level, with several organisations contacting us with job opportunities and training options.

We are in the process of developing further activities and training to assist those who have participated in the course to further develop their skills and find employment. Ideas such as the job club, expanding our website and regular guest speakers are just part of what we are working on.

“ I have also had the pleasure of meeting and getting to know people with incredible strength, skill, passion dedication and sense of humanity. It is individuals like these that give hope to all”

Before I hand it over to Belinda and Liza, I thought I would share a few of my thoughts since coming to MIFSA. During my time here I have been continually reminded about the issues, discrimination and struggles that people have faced and continue to face throughout their lives. On the flip side of this, I have also had the pleasure of meeting and getting to know people with incredible strength, skill, passion, dedication and sense of humanity that makes you feel lucky to know them. It is individuals like these that give hope to all people, not just those living with mental health issues.

Well that is about all from me, if you have any questions please feel free to contact us and we will do our best to help.

Dei Griffith
Coordinator
dgriffith@mifsa.org



It is hard to believe it has almost been three months since I started here at MIFSA. Two training courses down, the P Plates are (hopefully) about to come off and Dei will be stuck with me!

What an awesome place to work. I have the best colleagues and managers, am meeting great members, there is a fabulous 'be yourself' environment here and I love my role! But I have to say, there is one even more significant factor – the PWP team are all POWER supporters. With our beloved team finishing 2nd on the ladder and, as we go to print, into the grand final! The three of us are ecstatic and looking forward to cheering our boys to victory.

I was thinking about the similarities between footy and Peer Work. In a football game, there is a half-time break. The coach addresses his players, changes his game plan if the team struggled in the first half and uses the time to lift their spirits, instilling hope and spurring them towards a win.

For myself personally, and for many of us who have a mental illness, our lives can be likened to that football game. We struggle along, sometimes alone, battling the ups and downs of ill health and wellness. A Peer Worker comes along and spends 'half-time' with us. They listen, hear our concerns and set about using their own experience of illness and recovery to encourage us, offering hope and spurring us towards victory – that is, recovery and a fulfilling life in the 'second half'.

If you are interested in knowing more about Peer Work, drop in to the office for a chat. Our free 'Introduction to Peer Work' training course is open to anyone who has a lived experience of mental illness, is living well and wants to use that experience to help facilitate the recovery of others. It's really interactive, lots of fun and we cover a range of topics, from a basic look at Understanding Mental Illness, Maintaining Your Health on the job to Sharing Your Experience Safely with others.

So as this finals season nears its climax and footy devastatingly comes to an end for 2007, spare a thought for the fabulous things our trained Peer Workers are doing in Mental Health. They are having a huge impact on many people's lives and I consider it a privilege to be training people for such an amazing role.

In 2006, one of our trainees commented: "If I had met a Peer Worker in the early days of my diagnosis, ten years of my life may not have been lost." I wish they'd existed when I was unwell too but I'm so grateful they are out there now. Keep kicking goals!

Belinda Brown
Facilitator
belinda@mifsa.org

As Belinda mentioned, three months have nearly passed since I also started at MIFSA – time flies when you are having fun. I feel happy to be involved with the Peer Network. The people that I meet have been full of enthusiasm, initiative and courage which is great. The majority of people we see have completed the Peer Worker training. Part of their 'recovery' is to start voluntary work, which helps to increase confidence, self esteem and establish a daily routine. I also at times in my journey have done volunteer work and I can vouch for it helping to get the ball rolling.

We provide support for people who are 'work ready' and would like to start work in the mental health sector. We also liaise with other organisations about prospective Peer Worker opportunities; this is all part of the Peer Network. For people who are interested in further study, we also provide relevant course information and support. So basically it boils down to us being available to help with various bits and pieces so come in and talk with us about what you need to assist you.

Continued page 8 >



Peer Worker Program

continued

One of the main initiatives of the Peer Network is Job Club. We are very excited that our first Job Club meeting is about to start. Job Club includes job preparation, job search and, we will work with you to explore and understand your strengths, interests, goals and how to articulate them. We will focus on stress management in job seeking by using mock interviews to increase confidence and experience during this process. It is all part of the process of becoming work ready and to convert that to a successful job application and career.

Job Club will assist Peer Worker Program graduates to either find paid or voluntary work; to use their lived experience and other skills gained from the program to become effective Peer Workers. So make it work for you, and the first step is to come in and talk with us,

Looking forward to hearing from you.

Liza Carless
Mentor
liza@mifsa.org

Activity Centres Program

HI ALL

I am delighted to have recently joined the MIFSA team to work in the Activity Centres and to be part of positive change here in South Australia. So far I have been kept very busy planning for the future, meeting the wonderful people that work here and walk through the doors, and recruiting (at time of writing we welcome Andy and Christina at Panangga and Suzi at Keswick).

It is exciting to ponder the new opportunities for people as together we identify activities we want to explore and things we want to achieve, and then venture into new learnings for all of us! Already we have started new programs – MindBodyLife and Keswick Coffee Club, with moves afoot to develop Tai Chi, cooking classes and a full craft program at both sites.

Again, thanks for your warm welcome. I am so looking forward to 'sharing the journey' with all of you...

Mattea Malcolm
Team Leader
mmalcolm@mifsa.org

Psychosocial Groups Program

The next round of groups will begin in October and will be about 'Alleviating Anxiety'.

Again sessions will be small groups of people, sharing a similar experience exploring practical strategies for managing anxiety.

See table right for locations, dates and times.

Jane Dodding
Team Leader
Jane@mifsa.org

"Alleviating Anxiety"	
LOCATION	DATE and TIME
Clarence Park Community Centre, Clarence Pk	31 October – 5 December, Wed 10am – 12pm
Elizabeth House, Christie Downs	24 October – 28 November, Wed 2pm – 4pm
Eastwood Community Centre, Eastwood (Depression Group)	24 October – 28 November, Wed 2pm – 4pm
Level 1, Education Centre, Modbury Hospital Modbury	24 October – 28 November, Wed 10am – 12pm
Findon Community Centre, Findon	25 October – 29 November, Thur 10am – 12pm
Community Campus, Elizabeth Grove	26 October – 30 November, Fri 10am – 12pm
Payneham Community Centre, Payneham	26 October – 30 November, Fri 2pm – 4pm

Voice Hearers' Group

We will work together to:

- Develop life management skills and voice management skills
- Identify stressful situations and coping strategies
- Increase self awareness about patterns of voices and how they relate to life events, thoughts and emotions
- Explore personal values and identity related to and apart from voice hearing.

Meeting fortnightly, Tuesdays
16th October 2007 - 1st April 2008
10am - 12noon
at Mental Health Resource Centre
1 Richmond Road, Keswick

for more details or to register, contact
Jane, phone 8221 5160



Education Program

Metro Program

Metro Education Program will be holding some evening sessions here at MIFSA upstairs in the Conference Room. These are open to members and the general public. Dates are:

Tuesday, 2nd October, 'Information session on Bipolar Affective Disorder and management strategies', 7 – 9pm,

Tuesday, 30th October, 'Information session on Schizophrenia', 7 – 9pm

Tuesday, 20th November, 'Information session on Anxiety Disorders', 7 – 9pm.

Cost to attend is \$10.00 for non members, \$5 for concession card holders and \$4 for MIFSA members. This cost includes notes and light refreshments.

Bookings essential:
by email to akelly@mifsa.org
or phone reception on 8221 5160.

MIFSA will again have a presence at Stall in the Mall this year during Mental Health Week on Friday 12th October providing an information stall to raise awareness and respond to questions.

Andrew Kelly
Metropolitan Education Coordinator
akelly@mifsa.org

Country Program:

Up and coming events for Country Education for the next two months include:

- The Glenside Rural and Remote sessions continue, with the last of the six sessions to be held on 2nd October 2007.
- Planning is progressing for a follow up visit to Mount Gambier, following the success of our recent South East trip. There has been fantastic feedback and enquiries as to when we can go back! We plan to return at the end of October/start of November. At this stage I have been in contact with Mount Gambier High School, Centrelink and will be looking at holding another general community session.

It has been a busy time in the Education program and the last two months has seen country trips to the South East, Pinnaroo, The Barossa, Victor Harbor and Bordertown.

Loving the great feedback!
Soph

Sophie Angell
Country Education Coordinator
sophie@mifsa.org

“The feedback from staff has been overwhelmingly positive, even from the staff who are normally very resistant to this type of training.”

“Overall, it was a resounding success, and has certainly generated some discussion and awareness amongst staff. Thank you very much...”

Email from Susan Thorne, Centrelink

Well Ways Program

A PROGRAM FOR CARERS, FAMILY AND FRIENDS OF PEOPLE WITH A MENTAL ILLNESS

Program Venues	Dates and times
Clovercrest Baptist Hall, 2 Famechon Crescent Modbury North	Tuesday, 9th October, 6pm
Panangga Activity Centre, 64 Elgin Avenue Christies Beach	Wednesday, 10th October, 6pm
Bookings for 2008	
Registrations being taken now; please contact Maureen Lewis, 8221 5160 or mlewis@mifsa.org	



Well Ways participants attending the September quarterly follow-up workshop

*Be part of Mental Health Acceptance in the Community
Celebrate Life with those in the community affected by
mental illness, and their families – see page 13 for details*

Sunflower Shops

HI EVERYONE,

All of us at MIFSA would like to say thank you to Muriel, who has been at the Christie Downs Sunflower shop from its beginning. Muriel is retiring and will be missed by us all. She has promised to pop in sometimes and keep in touch. We wish you all the best.

I would like to take this opportunity to mention the volunteers at the Christies shop, Marg, Barb, Wendy, Danielle, Maureen, Brenda, John, Jean, Irene, Mel, Rose Marie, Ros, Elona and Robin and anyone else who has kindly given their time to the Christies shop. I really appreciate all your work especially being friendly, reliable and keeping a happy clean and well running shop. It sure makes the place appealing to our customers. The shop has a lovely atmosphere, with lots of fun and laughter.

Saturday June 30 we moved from Shop 8 at the Flaxmill Shopping Centre to Shop 4, with the Bradley's Bakery taking over the old shop. It was hard work. By the following Tuesday the shop was running business as usual. Thank you to all who worked so hard to make the move a success.

Finally I would like to thank all volunteers at the three Sunflower shops for all your hard work in making winter such a successful time sales wise. Now into the warmth of spring we can look forward to summer with its bright happy colours. Should be fun!

Elsha Stolk
Shops Co-ordinator
0409 697 432



Muriel Slater



Christies Volunteers
below: l-r: Rose Marie,
Marg, Barb and Wendy

Christies Volunteers
above l-r: left l-r: Irene,
Robin, Muriel, Maureen,
Ros, Brenda, Mel



Volunteers Function

Friday, December 7th, 6pm – 8pm

All current MIFSA Volunteers will receive an invitation in the post. We look forward to seeing as many of you as possible at your Acknowledgement Function.

Volunteers Wanted

Looking for voluntary work? Enjoy meeting people? Committed to supporting MIFSA? MIFSA provides its services ONLY through the generous and enthusiastic support of volunteers.

The following volunteer positions are available:

SUNFLOWER SHOPS – SHOP ASSISTANTS

Do you have good 'people skills' and enjoy customer service? Are you confident in cash/sales transactions, able to work alone or in a team, are committed, reliable, trustworthy and punctual, patient and willing to learn? Why not join the Sunflower Shop team.

To find out more contact Elsha on 0409 697 432

KESWICK ACTIVITY CENTRE – KITCHEN CHEF

To prepare lunches any day between Tuesday – Friday, or evening meals on Tuesdays and/or Thursdays.

For more information please contact Carol on 8221 5160

PANANGGA ACTIVITY CENTRE – QUALIFIED HAIRDRESSER

to cut members hair on a weekly, fortnightly, or even monthly basis. If you have suitable qualifications and are willing to support MIFSA members in this way, please phone Yvonne or Bernie on 8382 5588.

Free Training for Volunteers



FUNDED BY VOLUNTEERING SA
THROUGH THE OFFICE OF VOLUNTEERS

How to deal with difficult people

Venue: Noarlunga Health Village 26 October, 9:30am-12:30pm

Motivation and Goal Setting

Venue: Noarlunga Health Village 5 November, 9:30am-12:30pm

Grief and Loss

Venue: Noarlunga Health Village 12 November, 9:30am-12:30pm

Essential First Aid

Venue: Noarlunga Health Village 23 November, 9am-4pm Cost: \$15

Introduction to Working in Teams

Venue: Flinders Medical Centre (go to Guide Station for directions to Training Room)
29 November, 1-4pm

For all course bookings contact:

Southern Volunteering SA 8384 9202

Taken from Southern Volunteering SA,
Volunteer Update, March 2007

Sunflower Shops



ARE LOCATED AT

CHRISTIES DOWNS

Shop 4, Flaxmill Shopping Centre, 303 Flaxmill Road
Phone 8236 2456

Note: the shop has moved, but just a few shops west (closer to the coast) in the same shopping centre.

GOODWOOD

145 Goodwood Road (just south of the Capri Theatre)
Phone 8236 2456

SEACOMBE GARDENS

577 Morphet Road
Phone 8236 2456

Vale

VOULA MICHALOPOLOUS

It is with sadness that we share the news of the passing of Voula Michalopolous. Voula was an active volunteer for many years at MIFSA and the mother of one of MIFSA's long serving employee, Jenny Pessios.

Voula's volunteer work at MIFSA over the years brought her close to many MIFSA members who remember her with great fondness. Our memories of Voula will always be surrounded by recollections of tantalising and tempting aromas as she whipped up restaurant quality meals in MIFSA's accredited food kitchen. Voula's kindness and compassion and ability to lend a willing ear to members was also appreciated by many.

Despite her own deteriorating physical health Voula volunteered her time and shared her gentle nature with members, fellow volunteers and staff right up till late last year. Our sincere condolences are extended to Voula's family during this sad time.

In Memorium

Thank you to those who have supported MIFSA in this way with their donations in lieu of flowers. It is through your generosity and financial support we can continue to help both people with mental illness and their carers. MIFSA gratefully accepts memorial gifts to help its work. Donations are promptly acknowledged to the bereaved and the donor.

Bread tags

The tally of bread tags collected by our members and the general public, both in South Australia and interstate, is now nearing 920kg additional to the 450kg already sold.

Thank you all for a fantastic effort!

Our thanks also to the efforts of our volunteers in picking up, weighing and bagging the bread tags – your efforts are greatly appreciated.

Since the last MIFSA News, bread tags collections large and small have been received from:

Judy Visser, Willunga Uniting Church and Avon customers

Trevor Wakely, Bureau of Meteorology Vic

District Council of Kimba

Fasta Pasta, Christies Beach

Happy Valley after School Care

BT Finance

Pt Augusta TAFE

Christadelphian Hall, Adelaide

Arts SA, Adelaide

School of the Air, Pt Augusta

East Adelaide Primary School

Mt Carmel College, Rosewater

David Cresshull, Truck & Body Works

Adelaide Day Centre

Enfield Community Health

Gilles Plains Community Health

Tony, CB Couriers

Marjorie Flynn, Yankalilla

Carolyn Cordon, Redbanks

Karen Fitzgerald, Naracoore

Bartel & Hall, Victor Harbor

M McKee, Cudlee Creek

District Council of Kimba

Mitcham Primary School

Helene Hill, Edithburgh

Peter & Bryce Gurner

Stuart Shaw

N Perrotta

Bev & Jack Cook, Vic

Thank you also to the many anonymous donors who leave bread tags at our Sunflower shops, the Collection Bins, Panangga and the RAH Hospital Kiosk.

Thank you all – your support is appreciated!

Delivery Points for Bread Tags:

Sunflower Shops – see addresses above

Sunflower Shops Collection Bins at:

**Sixth Ave Shopping Centre, Cnr Sixth Ave & Stephen Tce
St Peters**

Woolworth's Plus, 272 Shepherds Hill Rd, Eden Hills

Mental Health Resource Centre, 1 Richmond Road, Keswick

Panangga Activity Centre, 64 Elgin Avenue, Christies Beach



Marion Support Group

Meetings are held bi-monthly (February, April, June, August, October, December) on the second Monday of each month as social get-togethers over a meal at the Marion Hotel, 849 Marion Rd, Mitchell Park, from 6:15pm

Our last meeting on Monday 13th August 2007 was attended by 17 members and friends at the Warradale Hotel. Dinner – fun – laughter enjoyed by all.

Next Meeting: Monday 8th October: at the **Marion Hotel**, from 6:15pm. Bookings essential; please ring Narelle on 8278 5796 by 2nd October .

Advance Notice:

December meeting – Xmas Party Monday 10th December. Again at the Marion Hotel from 6:15pm. Santa may be there. More info, ring Narelle. Bookings essential, ring by Tuesday 4th December.

Take Care, Narelle

Tea Tree Gully Support Group

Meetings are held monthly on the second Tuesday of each month at Woodleigh House in the grounds of Modbury Hospital, Hatherleigh Avenue, off Smart Road, Modbury; commencing 7:30pm

Coming Meeting: Tuesday 9th October and 13th November

Newcomers Welcome

Enquiries: Peter Gurner 8362 6740

Mental Illness Fact Sheets Series

Order forms available by phoning MIFSA, 8221 5160
Cost: all prices include GST

Full Series (1 copy of each 30 sheets)

MIFSA members	\$12.50
non-members	\$15.00

Bulk Packs (50 copies of one title)

MIFSA members	\$10.00
non-members	\$12.50

Small Packs (20 copies of one title)

MIFSA members	\$ 4.00
non-members	\$ 5.00

(plus postage and handling – add \$4 for one pack, \$10 for 2-10 packs)

Support Works

For people who have depression or bipolar disorder and who wish to meet and interact with other people who are in similar circumstances.

Meetings are held every Wednesday, 1pm – 3pm at the Mental Health Resource Centre, Conference Room, 1 Richmond Rd Keswick.

An initial interview with a staff person is required before joining Support Works. Please contact MIFSA to make an appointment.

Mood Disorders Carers Group

Offering help and support to those in the role of caring for people with bi-polar affective disorder and depression.

Meetings are held on the fourth Tuesday of the month, at the Mental Health Resource Centre, Conference Room, 1 Richmond Road, Keswick; 7:30pm

PLEASE NOTE: The October carers meeting date has been changed (from October 23rd) to coincide with the MIFSA AGM and Sunflower Awards presentation on **Thursday, October 11th** at the Fullarton Park Community Centre on Fullarton Road, cnr Fullarton Road and Fisher Street (parking available from either entrance). The AGM involves a meal and begins at 5:30. The Carers meeting will begin at 7:30 and our guest speaker will be Dr. Leslie Stephan who will be conducting an open forum for the carers. Should be a wonderful night. I hope to see a good turnout for this special event.

Our last meeting of the year will be Tuesday, November 27th with Dr Jo Lammersma. This will be our Christmas break meeting.

Details of the Mood Disorders Carers Group's Christmas Dinner: Thursday, November 22nd at 7pm, at the Graduates Restaurant, Regency Park TAFE.

Group Convenor: Marcia Johnson Timm

Focus on Carers – Facilitated by Carers SA

For carers of a person with mental illness: where we are now and where do we want to go?

To be held during Mental Health Week at Enterprise House, 136 Greenhill Road, Unley on Thursday October 11, 2007; 9am – 1pm
Registrations from 8:30am

Registration forms available from Carers SA
Registration closing date: Monday, 8th October to: PO Box 410, Unley 5061 / fax: 8271 6388 / email: sagaya@carers-sa.asn.au



Mental Health Week Program

SUNDAY 7TH OCTOBER



CELEBRATION OF LIFE Glenelg Foreshore (south of the jetty) 11am

Celebrate Life with the Well Ways Carers & Families, with MIFSA members and members of the Community affected by Mental Illness. Short address at 11am. Bring a picnic lunch or cuppa and enjoy a quiet get-together during Mental Health Week to show friendship and acceptance for those people affected by mental illness in the community.

BE PART OF A QUIET CELEBRATION OF LIFE!

TUESDAY 9TH OCTOBER



LAUNCH OF MENTAL HEALTH WEEK Adelaide Festival Centre Terrace 10:30am—2pm

Launch of Mental Health Week and Presentation of the Dr Margaret Tobin Awards 2007. MIFSA was a winner of the 2005 Dr Margaret Tobin Awards for "Excellence in promoting an understanding of mental health in the community". In 2007 the Peer Worker Program (delivered in partnership by MIFSA and Baptist Community Services) has been nominated and is a finalist. Come and cheer on the winners and enjoy some delicious food and entertainment!

WEDNESDAY 10TH OCTOBER



OPEN DAY AT KESWICK ACTIVITY CENTRE 1 Richmond Road 10am—4pm

Come and see what goes on at the Keswick Activity Centre. See and experience a range of recreational, social and awareness raising activities. We have a Yoga demonstration from 11am-12:30pm, join us for a sausage sizzle 12:30-1:30 (\$1.50 each, including an icy cold soft drink) and a demonstration in Tai Chi 1:30-2pm; foot reflexology, neck and shoulder massage available during the day. Free tea/coffee all day. For more details phone Carol on 8221 5160, or see you on the day!

THURSDAY 11TH OCTOBER



MIFSA ANNUAL GENERAL MEETING cnr Fullarton Rd & Fisher St 5:30PM—6:15pm

Join us for the 2007 MIFSA Annual General Meeting at 5:30pm which will be followed by the Sunflower Awards Ceremony at 6:15pm. The AGM will be held at Fullarton Community Centre, (corner Fullarton Road and Fisher Street; parking available from both entrances)

SUNFLOWER AWARDS 2007 6:30pm—8pm

. and stay on for the Sunflower Awards Presentation; the Awards honour outstanding work by an individual, group or organisation working in the mental health area. Light supper provided. Please RSVP your attendance (for catering purposes) by phoning MIFSA on 8221 5160 to reserve your seats.

FRIDAY 12TH OCTOBER



KARAOKE NIGHT AT KESWICK ACTIVITY CENTRE 1 Richmond Rd 6pm—10pm

Celebrate your health and well being with us during Mental Health Week with a fun night of singing, dancing and socialising.

Enter our Mystery Karaoke Competition for your chance to win a prize. There will also be door prizes.

*Cost \$ 6 (includes snacks and light supper) *Soft Drinks \$1 can *Free Coffee & Tea

Transport may be available for people requiring a ride home (please book).

If you can assist with car pooling please let us know. To RSVP please contact Melanie or Dave 8221 5160.

STALL IN THE MALL

All Day

If you're in town, call by and see our new MIFSA banner and have a chat with MIFSA's Community Educators.

For more information contact MIFSA:

ph 8221 5160 / fax 8221 5159 / email: mifsa@mifsa.org / web: www.mifsa.org / 1 Richmond Road Keswick, (3rd building on site)



Omega-3: the real oil discovery?

TAKEN FROM THE AUGUST/SEPTEMBER 2007 NEWSLETTER OF THE OTAGO MENTAL HEALTH SUPPORT TRUST, DUNEDIN, NEW ZEALAND

There have been rumours for some time that fish oil, and in particular oils called omega-3, might be useful for people recovering from bipolar disorder. Is this just the latest natural health fad or does omega-3 really look like a new direction in treatment for bipolar disorder? We asked Dunedin Hospital pharmacist, Lucy Broughton, for the real oil on omega-3.

Lucy was cautiously optimistic. She explained that omega-3 is an essential fatty acid. This means that it is required by the body for biochemical processes, not just for fuel. It also means that we need to get omega-3 from our food as the body cannot make it. Omega-3 used to be called vitamin F but is now classified as a fat rather than a vitamin. Lucy quotes one study which shows that in countries where a lot of seafood is eaten, there are lower than usual rates of depression, bipolar depression and postpartum depression. In general terms, epidemiologists have found that consumption of 2 or 3 seafood meals per week is associated with lower rates of depression. There are also many studies which clearly show that omega-3 is beneficial for our heart and vascular system. Some researchers suggest that this may be particularly important for people taking psychotropic medication that may be at risk from smoking and from medication related obesity and diabetes.

There have been at least four positive clinical trials of omega-3 in people diagnosed with bipolar disorder. The trials were of omega-3 compared to a placebo of olive oil or paraffin. Omega-3 was given to these people in addition to any medication they may already have been taking, although people taking no medication also responded exceptionally well to omega-3. Overall in these four studies, people with bipolar disorder stayed well for longer when taking omega-3. The suggestion was more of a protection against depression than against mania.

Two other studies, in people with acute bipolar depression or rapid cycling did not show any beneficial effect of omega-3. However, the suggestion again from the researchers is that omega-3 may be useful in preventing mood extremes rather than for treating acute episodes.

So how did people in these trials tolerate the omega-3, which was given in gelatine capsules at 1 or 2 grams per day, and was derived from fish oils, exactly as you might find at a health food shop. Were there any dreaded 'side-effects'? Some people complained of a fishy aftertaste although interestingly this was also reported by people getting the olive oil. The most common complaint was of loose stools and there were some reports of nosebleeds, belching and nausea.

This sounds like good news. Here is a substance which occurs naturally in our diet, which is likely to have substantial physical benefits, and which may well help to keep our mood in a health range. Lucy explained that omega-3 is actually made up of three different oils called ALA, EPA and DHA. The studies show that our Western diet is low in EPA so it is this that we should think about

boosting. Health food shops sell omega-3 supplements which contain 180 mg of EPA per capsule. You would need to take 5 or 6 capsules per day to get the 1 gram which is recommended. As Lucy says '...not a chep option!'. Actually, this would cost 50 to 60 cents per day so is affordable for many people. Other sources of omega-3 include flaxseed, walnuts, wheat germ, and plant-based omega-3 tablets. However, these contain mostly ALA which the body then has to convert to EPA and that is not a very efficient process. As the best source of omega-3 seems to be from fish, what sort of fish and how much of it would we need to eat to be getting a gram of omega-3?

I spent some time hanging around the canned fish section of the supermarket gathering data. Salmon, both red and pink varieties claim the highest omega-3 levels. Mackerel and tuna have somewhat lower levels. Fresh fish of course is not labelled for its omega-3 content but there are reports that it is similar to canned fish. Unfortunately, to get a gram daily of EPA from canned fish would require that you eat a 210 gram can of the best red salmon every day, about \$4 to \$5 per day! Still, that is more achievable than getting our omega-3 from 5.58kg of beef or 10 kg of spinach per day!

On balance, the most sensible advice seems to be the same as all other nutritional advice. Eat a varied diet, include plenty of fresh fruit, vegetables and nuts. Eat two good meals of fish per week. A salmon sandwich is as good as you can get. Avoid fatty and processed food. Avoid or cut down on corn, soy, canola, safflower and sunflower oil and margarine of any sort and replace them with olive oil.

It seems that we are unlikely to get a gram of EPA in our diets each day unless we are popping fish oil capsules from a health food shop. However, as the data from clinical trials is so supportive of the beneficial effects of omega-3 in mood disorders, it may be that we should be asking our psychiatrist to prescribe it.

Used with permission from Otago Mental Health Support Trust Bipolar Network & Signpost Newsletter, August-September 2007

National Mental Health Survey

Seventeen thousand Australian households will be contacted for interviews about their mental health and well-being in the Second National Mental Health Survey by the Australian Government.

Parliamentary Secretary to the Minister for Health and Ageing, Senator Brett Mason, said the survey would give a new insight into Australia's mental health and well-being ten years after the first survey. It will gather information on the prevalence of mental illness in the population, the amount of associated disablement and the use of health and other services by people with mental disorders or mental health problems.

The survey will be done over the next four months by the Bureau of Statistics. For more information, go to <http://www.abs.gov.au> and click on Survey Information and Current Household Surveys.

taken from healthUPdate, September 2007



Outdoor greenery walks improve depression

In conjunction with the University of Essex, MIND, one of England's leading mental health non-profit organisations published a report entitled Ecotherapy – the Green Agenda for Mental Health.

Researchers examined mental health clients, all members of local MIND groups who took part in two walks, one in a country park, and one in an indoor shopping centre. They tested the impact of each type of walk on self-esteem, mood and enjoyment.

Results:

- 71% reported decreased levels of depression after the green walk;
- 71% said they felt less tense after the green walk;
- 50% said they felt more tense after the shopping centre walk;
- 90% said their self-esteem increased after the green walk;
- 44% reported decreased self esteem after window shopping in the shopping centre;
- 88% reported improved mood after the green walk;
- 44.5% reported feeling in a worse mood after the shopping centre walk, 11% reported no change and 44.5% said their mood improved;
- 71% said they felt less fatigued after the green walk and 53% said they felt more vigorous.

Source: Alternativementalhealth.com

Used with the permission from *Schizophrenia Fellowship of QLD Newsletter, August 2007*

MIFSA turns 25!

**MIFSA will celebrate its silver jubilee in May 2009
In just 20 months MIFSA turns 25 years old!**

The Fellowship held its Inaugural General Meeting in October 1983, and was first incorporated in May 2004. The Mood Disorders Association SA was also first incorporated at about this time, but under a prior name. MIFSA is considering celebrating this milestone by publishing an association history, to reflect on our achievements, and to record the varied contributions from so many people. Subject matter could include early structural development, significant events, pioneering members, and individual entries / case histories from members.

This offers us a real opportunity to capture the personal stories and circumstances of our members, and the role of MIFSA in those stories. If you have Fellowship or Mood Disorders Association memorabilia, photos, stories, articles or any piece of history that would add to our project please send to or contact us in the following ways: phone: 821 5160, fax: 8221 5159, email: mifsa@mifsa.org or PO Box 310, Marlestone SA 5035.

The Glenside Master Plan

In late September, the State Government released the long awaited Glenside Master Plan which will see the redevelopment of the Glenside site.

The site has been divided into five precincts with a new purpose built health facility, residential district, commercial area, retail section and a heritage/cultural hub.

Concept plans show parklands and wetlands surrounding the hospital buildings, while there will be a "village green" open space area between the housing and retail/commercial elements of the development. The residential area will also include a mix of affordable housing and supported accommodation.

More than 12 hectares along the southern boundary of the 30-hectare site will be sold to developers and turned into housing, retail and commercial precincts. More than 58% of the site will be retained by the government with careful planning to include environmental initiatives which include open public spaces, a village green and a new wetland area all linked by tree-lined footpaths and cycle-ways.

MIFSA particularly supports the importance of closer connection and better integration of the community which will undoubtedly assist in de-stigmatising mental illness. Enhancing social interactions and positive engagement of the community will occur through a range of strategies from community consultation right through to the plan of the site. It was so refreshing and heartening to hear that the buildings have not been designed yet as the service model must be developed first. Once the service model is clear only then can the structural designs be planned to meet the needs of the new health services.

The new specialist hospital will have 129 hospital beds, with new health buildings to also include a 15 bed mental health intermediate care facility and 40 places in supported accommodation. The historical buildings will be converted into a major public cultural hub with restaurants and cafes linking the cultural and residential areas.

Premier Mike Rann said the new hospital facilities would bridge the "gap" between community and hospital care for mental health patients with the hospital redevelopment anticipated to open by late 2010.

**A planned approach to
community integration**

www.health.sa.gov.au/mentalhealth



Growing recognition of cannabis-schizophrenia link

THE FOLLOWING ARTICLE IS TAKEN FROM THE MARCH 2007 MIFACT NEWSLETTER OF THE MENTAL ILLNESS FELLOWSHIP OF ACT; THE OPENING SENTIMENTS ECHO SIMILAR EFFORTS AND VIEWS HELD BY STAFF AND THE BOARD OF MIFSA.

Past issues of this Newsletter have supported education campaigns in schools on the dangers of marijuana. From personal observation of its effect on our children many Fellowship members knew it could trigger schizophrenia. That belief was supported a few years ago by the work of the Neuroscience Institute of Schizophrenia and Allied Diseases (NISAD). Dr Vaughn Carr of NISAD, in a public address in Canberra in 2005, explained that the incomplete process for protective nerve sheathing (myelination) left the brains of young people up to the age of 25 open to the triggering of schizophrenia if they smoked cannabis.

This link now seems to be appreciated among young people. A new report titled "Australian Attitudes Toward Cannabis" shows young Australians no longer consider the drug to be harmless. The Australian National Drug and Alcohol Research Centre study suggests that marijuana is becoming socially unfashionable in the same way as cigarettes. It is now seen as dangerous, addictive and linked to a range of serious health and social problems.

The new study comes after a survey of secondary schools showed a significant decline in the use of cannabis among students. Adult Australians too are becoming more concerned about its effects. Of 1500 surveyed, three in four felt that smoking dope was dangerous or very dangerous, and half thought it could trigger schizophrenia or anxiety disorders.

The survey found that although almost half of under 30 year olds have friends who use cannabis, one third said their peer group found its use unacceptable. The report also shows public opinion is in favour of more government action, with over seventy percent in favour of a public health campaign on the effects of cannabis.

The introduction of roadside drug testing was strongly supported by close to eighty percent of those surveyed, on the grounds that cannabis affects a person's ability to drive a car and increases the likelihood of an accident. Most of them felt that people who were caught should be referred to treatment programs.

"It appears that although Australians believe cannabis is not acceptable in their peer group, they do feel that there should be support given to those who use it," Paul Dillon, Media Liaison/ Information Manager, National Drug and Alcohol Research Centre University of New South Wales commented.

"This research clearly shows that it is important that the Australian public is provided good quality information on the health and social impacts of cannabis. There are plans for a new National Cannabis Centre to be opened this year, funded by the Australian Government".

Used with the permission from Schizophrenia Fellowship of Qld Newsletter, August 2007

Picking the difference: drug-induced v 'primary' psychosis

A research team at Columbia University, New York, has drawn attention to the importance of being able to pick the difference between a substance-induced psychosis and a primary psychotic disorder, because these two disorders require fundamentally different approaches to treatment. They believe that clinicians could more easily distinguish patients with substance-induced psychosis from those with primary psychotic disorder if they took into account family history, pre-morbid functioning, and insight.

To investigate the stability of the diagnostic distinction between these two types of psychosis, and identify possible predictive factors, the team conducted a one-year follow-up study of 319 patients admitted to psychiatric emergency departments, 186 diagnosed with primary psychosis and 99 with substance-induced psychosis.

After a year 89% had retained their initial diagnosis, whereas that for 11% had changed from substance-induced psychosis to primary psychosis. The criterion for a change of diagnosis, usually within six months, was the persistence of psychotic symptoms in the absence of substance use.

The team has reported in the *British Journal of Psychiatry* that patients whose diagnoses had changed from that of substance-induced psychosis tended to have a family history of mental illness, and lack of insight into their condition; in other words, an inherent vulnerability to psychosis.

The study concluded that clinicians should take note of these indicators and check on such patients for up to a year, to see if a drug-related diagnosis was still correct. If not the most appropriate treatment prescriptions may need to include anti-psychotic medication.

Source: *British Journal of Psychiatry* 2007; 190: 105-111

Used with the permission from MIFACT Newsletter (Mental Illness Fellowship of the ACT) March 2007





Qld scientist could have the key to eliminating schizophrenia

The [Queensland] Minister for State Development, Employment and Industrial Relations, John Mickel announced a \$150,000 Smart State Fellowship to Dr Joanne Voisey from the Qld University of Technology's Institute of Health and Biomedical Innovation to fund research which could lead to a genetic test and early intervention programs to potentially eliminate schizophrenia from our society.

Dr Voisey's program combines genetic screening with a demographic history profile to more accurately identify individuals at risk of developing schizophrenia and provide early intervention. 'Dr Voisey's early intervention program could reduce the cost to Queensland's health care system of treating schizophrenia by up to \$360 million each year,' Mr Mickel said.

Dr Voisey said she wanted to develop a diagnostic test that would identify polymorphisms – genetic variations in a person's genome – associated with schizophrenia to determine a person's genetic predisposition. Genetic screening is not currently used in testing for schizophrenia and with approximately 80 per cent of people diagnosed with the illness having a genetic predisposition to the disease the early intervention strategy would help identify those people at risk.

The early intervention strategy could significantly reduce anti-psychotic medication, hospitalisation and caregiver costs, and increase the likelihood of people with schizophrenia leading productive and healthy lives. Dr Voisey said the testing would ideally take place in early adolescence because substance misuse could contribute to the onset of the condition. 'By intervening during early adolescence we hope to provide those people at risk of developing schizophrenia with counselling on substance misuse,' Dr Voisey said.

An overall risk profile is hoped to be developed through genetic testing that will help clinicians better identify those at risk of developing schizophrenia. Dr Voisey said preliminary studies have shown us that a person's genetic makeup can determine how well they respond to anti-psychotic drugs. 'In the future this may lead to personalised medicine where specific treatment options are based on an individual's genetic environmental risk,' Dr Voisey said.

The end point of Dr Voisey's work would be to develop a genetic test for schizophrenia which would enable early intervention and the delivery of tailored medication to individual schizophrenia sufferers that's predetermined by their genetic makeup.

Source: Minister for [Qld] State Development, Employment and Industrial Relations, the Hon. John Mickel, 10/07/2007 www.cabinet.qld.gov.au

Used with the permission from Schizophrenia Fellowship of Qld Newsletter, August 2007

Neuroscience Brainstorm in Adelaide

Neuroscientists from around the nation and key policy makers gathered in Adelaide in February for a brainstorm of the most specific kind.

The Neuroscience Round Tables, at the State Library of South Australia, focussed on how early identification of differences or changes in the brain could help in the treatment of mental illness.

The two-day event resulted from a report by world-renowned neuroscientist and Adelaide Thinker in Residence in 2004-2005, Baroness Professor Susan Greenfield, which included initiatives to increase the profile of science in the state.

Baroness Professor Greenfield appointed Monsignor Cappo to champion an initiative to explore how neuroscience could link to health and community services.

The Round Tables comprised 28 neuroscientists forming three groups to focus on different issues: early brain development; the adolescent and young adult brain; and the ageing brain. The event was presented by the Department of the Premier and Cabinet and supported by the South Australian Neuroscience Institute. It was co-chaired by Professor Marcello Costa, another of Professor Greenfield's champions and Professor of Neurophysiology at Flinders University.

Professor Costa, who facilitated the Adolescent and Young Adult Brain Round Table, said that while the exact relationship between the brain and mental health was still being understood, the Round Tables provided a great opportunity to explore the link.

Round Table facilitators included Professor Laurie Geffen from the University of Queensland and Professor Caroline McMillen, pro-Vice Chancellor at the University of South Australia with an international reputation as a biomedical researcher on the early origins of adult mental health.

A Report on the Neuroscience Round Tables is being prepared and will soon be available for download from the Social Inclusion Unit website: www.socialinclusion.sa.gov.au

Source: Social Inclusion Unit March 2007 Initiative, Used with the permission



Song of a Solitary Star

*Our souls are like stars in the endless realm of night
seemingly separated by the cold emptiness between us,
isolated in our independence from the light of others
it feels as though we are always alone in the darkness.*

*But the love and warmth that radiates from our hearts
provides hope and reassurance for all those around us,
thus we were never meant to live alone in this world
and we shine not only for ourselves but for each other.*

*Though it may seem that each star sings a solitary song
we are a universe of souls creating melodies together,
always sharing life's music of beauty, love and sorrow
and all of us gaining in wisdom through endless ages.*

*This is the love that makes us shine unto the darkness
and the great mystery that sustains our faith and hope,
it supports us in times of our most desperate suffering
and rejoices when we realise just how loved we are.*

*We are all individuals blended into the universal being,
so therefore remember my friend and kindred soul
that you are not alone and your song is always heard
because all the stars in heaven are in love with you.*

© 2007 Robert I Moss

Hunt down your dreams

*Out of the land of darkness,
Came the dealer in dreams
His chariot driven by the wind.
Nobody saw
Nobody heard
but he is real.*

*Hunt down your fugitive dreams
In the chariot of shadows.*

© 2007 Andrew Clifford Adams

Keswick Day Outings

Thursday, 25th October

**A refreshing walk around historic Glenelg.
Bus will leave MIFSA at 1pm and return approx 4:30pm.
Bring hat, sunglasses, something to drink while you walk
and wear good walking shoes — approx total walking
time 1 1/2 hours.**

Friday, 23rd November

**Scenic picnic in the park (Kircaldy Reserve, Grange Rd,
Grange). Meet there at noon or take the bus from MIFSA
at 11:30am. Bus will return to MIFSA by approx 4pm.
Bring your lunch or pre-purchase from our accredited
kitchen. Also bring:
hat, sunglasses and
plenty to drink.**

*For more information
about either excursion
please phone Dave on
8221 5160*



Chew & View @ Keswick

Lunch special followed by new release DVD

Wednesday, 17th October – 12noon
Burritos – 2 for \$4 plus can of drink \$1
RSVP Mel or Dave by Friday 12th October



Wednesday, 28th November – 12noon
Yiros – \$5 plus can of drink \$1
RSVP Mel or Dave by Friday 23rd November

Evening meals served at Keswick Tuesdays and Thursdays @ 5pm

Cost: \$2.50

October		November	
Tuesday	Thursday	Tuesday	Thursday
2nd curried sausages	4th chicken lasagne & salad		1st beef curry with rice
9th thai chicken & hokkien noodles	11th corned silverside & vegies	6th mixed grill	8th spaghetti bolognese & bread
16th shepherd's pie & garden salad	18th satay chicken & rice	13th roast beef & vegies	15th broccoli & bacon fettucini
23rd beef stroganoff & egg noodles	25th honey chicken & rice	20th beef stirfry & hokkien noodles	22nd baked potatoes
30th sweet & sour pork & rice		27th pickled fish & garden salad	29th macaroni cheese





Monday

Keswick

FREE INTERNET ACCESS AVAILABLE DAILY

At Keswick and Panangga During Activity Centre hours



Panangga

Free Coffee/Tea all day

Stay for Lunch \$1 pies/sausage rolls

Movie afternoon 1pm-3pm drop in and watch a latest release DVD



Tuesday

KESWICK

Foot Reflexology 10-5pm

Art 12:30-3:30pm

Members meeting 1:15pm (2nd October & 6th November)

An opportunity for members to meet together and participate in discussions regarding their Centre, and find out about upcoming events.

Walking Group 1:30pm

Evening Meals Served at 5pm Cost: \$2.50



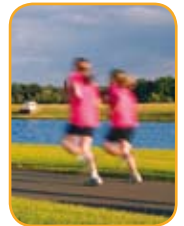
PANANGGA

Relationships Australia Courses 10:30—12noon

Craft in the community 10:30am

Keep Fit in the community (gym or swimming) 11-12noon

Coffee Shop on the hop 1pm



Wednesday

KESWICK

Lunch Special hotdogs

(sausage sizzle, third Wednesday of month)

Chew & View 12pm, 17th October & 28th November

Bowling 12:30pm, 3rd, 17th & 31st October, 14th & 28th November

Coffee Club leave Keswick 1:15pm, 10th & 24th October, 7th & 21st November



PANANGGA

Massage 11am – 2pm

Discussion Group 11am-12noon (phone for details)

Barbeque lunch 12noon (\$2.50)

Visual Art 1-3pm

Bead craft 1:30pm-3pm



Thursday

KESWICK

Foot Reflexology – 10am-5pm

Housing Trust Accommodation Service, first & third Thursdays each month, 1-4pm

Mandala Art, any time during the day

Keswick Day-Trip Outing:

25th October – Refreshing walk through historic Glenelg

MindBodyLife Program – October 18th and November 15th

offered to all people with mental illness looking to make healthy lifestyle choices – contact Carol for further details, 8221 5160

Evening Meals Served at 5pm Cost: \$2.50



PANANGGA

10 Pin Bowling, 11am-12 noon

Bushwalking leave Panangga at 1pm, return approx 3pm

Games afternoon

Manicure 1pm-3pm

Health & Life Program at Panangga

Commences 1st November

held over 6 weeks, 10:30am – 1pm (stopping for lunch)

phone Yvonne or Bernie at Panangga for further details, 8382 5588



Friday

KESWICK

8 Ball Blitz 2pm, second & fourth Friday each month

Winners walk away with a Keswick meal voucher!

Keswick Day-Trip Outings:

23rd November – Scenic Picnic in the Park

Kircaldy Reserve, Grange Rd Grange

meet there at noon or take the bus from MIFSA at 11:30am



PANANGGA

Foot Reflexology, from 11am

Hot Lunch, 12 noon (2 courses, \$3)

Quiz / X Words / games afternoon

South Coast Exchange, 12th October & 16th November at Victor Harbor (to celebrate Mental Health Week – includes massage, barbecue and band)



Saturday

KESWICK

Foot Reflexology 10am-2pm

DIY BBQ Lunch Special 12 noon-1pm

Computer Skills 12 noon-3 pm

Just Art 11:30am-2:30pm



ACTIVITY CENTRES PUBLIC PHONES

KESWICK: 8410 5249 PANANGGA: 8186 6482

MEMBERSHIP FORM/ CHANGE OF ADDRESS



Mail to : PO Box 310 Marleston 5033

- Membership Renewal
 New Membership
 Change of Address

Membership Categories

- Single \$20
Pensioner/Student \$10
Organisation \$45
Family \$30
Pensioner Family \$18
Donation

We keep membership cost low.
Why not make a tax deductible
donation and support MIFSA.

Mr/Mrs/Ms/Dr _____

Address _____

Post Code _____

Email Address _____

Contact Telephone _____

Old Address (if applicable) _____

Membership payment by Cheque Money Order Cash Credit card

Visa Mastercard

Credit card number Expiry date /

Name on Card _____

Signature _____

KEY CONTACTS

Executive Director

Natasha Miliotis
natasha@mifsa.org

Programs & Operations Manager

Monique van der Neut
monique@mifsa.org

Finance Manager

Michael Becker
mbecker@mifsa.org

Administration

Pam Kelly
pamk@mifsa.org

PROGRAMS

Activity Centres Team Leader

Mattea Malcolm
mmalcolm@mifsa.org

Education Program Coordinators

Metropolitan

Andrew Kelly
akelly@mifsa.org

Country

Sophie Angell
sophie@mifsa.org

Peer Worker Program Coordinator

Dei Griffith
dgriffith@mifsa.org

Psychosocial Groups Program Team Leader

Jane Dodding
jane@mifsa.org

Well Ways Program Coordinator

Maureen Lewis
mlewis@mifsa.org

SUNFLOWER SHOPS

Coordinator

Esha Stolk
0409 697 432

MIFSA BOARD OF MANAGEMENT

President

David Meldrum

Vice President

Robert Burke

Treasurer

Neville Rice

Members

Chris Bock
Marion Croser
Brian Gardiner
Katrina Kalaburnis
Eddie Lynch
Dr Eli Rafalowicz

Minute Secretary

Brigid Downing

Ex Officio

Natasha Miliotis

Correspondence and articles for inclusion in MIFSA News to:

The Editor MIFSA News

Mental Illness Fellowship SA,
PO Box 310
MARLESTON SA 5033

Ph: (08) 8221 5160

Fax: (08) 8221 5159

email: mifsa@mifsa.org

web: www.mifsa.org

DEADLINE For articles letters
and reports for the December
2007 / January 2008 issue of
MIFSA News is

Friday, 16th November 2007

LOCATED AT:

Mental Health Resource Centre

1 Richmond Road, Keswick
Phone 8221 5160

Panangga Activity Centre

64 Elgin Ave, Christies Beach
Phone/fax: 8382 5588