Helping a loved one

Source: Sane Australia

It can be particularly distressing to have close friends or family members suffer with a psychological disorder. Not only can the illness cause them pain and disrupt their lives, but it can also damage your relationship with them. There is reason for hope, however, both for your loved ones and for you. While you can’t control their illness, you can take steps to ensure that they receive the help they need, that their recovery is as quick as possible, and that you don’t get burned out in the process. To that end, there are three critical things to consider as you learn more about mental illness and what you can do to help your loved ones:

1. Mental illness is remarkably common. The National Institutes of Mental Health (NIMH) estimates that more than 25 percent of the population in the United States will suffer from a psychological or substance abuse disorder this year. The stigma of mental illness keeps many people silent about their illness or the illness of a loved one, but chances are that you already know at least one person who has dealt with a psychological disorder personally or in a family member.

2. Treatment for mental illness works. If your loved one is ill, he or she might get worse before getting better, but up to 90 percent of people who receive appropriate treatment (meds, therapy or both) will experience improvements in their symptoms.

3. The family and friends of people with psychological disorders need help and support too. Dealing with a loved one’s mental illness can strain you emotionally, physically and financially. There are resources to help you deal with the challenges in front of you, and it is important to seek them out at the same time as you are seeking care for your loved one.

Though it can be challenging, it is possible to help your loved one while also taking care of yourself.

If you are looking for help consider giving our office a call on 9388 9869, Monday and Friday for a chat. We also have a range of practical resources members can checkout from our library.
From our Editor

I often say to those struggling with life and its pressures that knowing ourselves and what our triggers are is one of the foundational things to comprehend if we are to successfully navigate life’s stormy seas. In this issue of our newsletter we touch on a few articles that deal with anger, stress and grief and how to deal with them.

On page 14 Natasha Tracey blogger at bipolar burple writes about anger:

“It’s very natural to be angry when something egregiously bad – like getting bipolar disorder – happens to you. It’s not necessarily rational, per se, but it is normal. And when we’re mad about something we look for someone or something to blame. We look for someone to blame for our bipolar disorder. Again, this isn’t a rational, or even conscious thing, it’s really just a natural reaction to an extremely unfortunate situation, but it really isn’t healthy.”

In another article also on page 14 Natasha also outlines how accepting our differences can go a long way to dealing with our anger at not being normal.

Lee Dhepnorrarat has also contributed to or current newsletter with some tips and advice on dealing with stress on page 7. Check out the links and chill out with some of the great music Lee recommends.

This time of year can also be a painful reminder of those we have lost from our lives. As Margarita Tartakovsky writes in an article on healthy ways to navigate grief on page 6:

“Many people use unhealthy ways to cope, such as ignoring their feelings, isolating themselves, setting a time limit or pretending their way through the grieving process... But when you’re in it, in the thick of the pain, confusion and chaos, it’s hard to pick anything healthy. Instead you pick whatever you know, whatever is nearby or whatever is easiest.

Navigating grief takes work. And it may mean doing things you’re unfamiliar or uncomfortable with, such as actually feeling your feelings. But it’s worth it.”

Michael Hunt

EVEN KEEL
BIPOLAR DISORDER
SUPPORT
ASSOCIATION INC

c/- June O’Connor Centre
2 Nicholson Rd, Subiaco WA 6008
E: office@evenkeel.org.au
W: evenkeel.org.au
P: (08) 9388 9869
(Open Fri & Mon only: 9.30a–3.30p)

We meet at:

SUBIACO
June O’Connor Centre, 2 Nicholson Rd
Friday 10:30am - 11:30am
Contact: The office on 9388 9869

PERTH CITY
Senior Citizens CitIPlace
Perth Railway Station above Platform 9
11.30a-1.00p, Last Wed of the month
Contact: The office on 9388 9869

RIVERTON
McDonalds High Road, Riverton
6-8pm, 2nd Tuesday of each month
Contact : Lyn on 0402 922 302.

YOKINE
C287 McDonald Street, Yokine
Community Centre
1-2pm, 3rd Saturday of each month
Contact: Corrine on 0408 202 747

ROCKINGHAM
June O’Connor Centre, 8 Baralda Crt
12-2pm, 2nd Friday of each month
Contact: Ingrid (8a-8p) on 0412 522 387

JOONDALUP
June O’Connor Centre, 1/20 Mercer Lne
1pm, 1st & 3rd Thursday of each month
Contact: Freddie on 0439 804 061

MIDLAND
Midland Womens Health Care Place,
4 The Avenue
10-11am, Last Saturday of the month
Contact: Jessica on 0439 522 140

FREMANTLE
The Meeting Place, 245 South Tce
1-2pm, First Saturday of the month
Contact: Corrine on 0408 202 747

CANNINGTON
The Leisure Plex, Cnr Wharf & Sevenoaks St
1-3pm last Saturday of each month
Contact: The office on 9388 9869

MANDURAH
1-3pm, 3rd Wednesday of each month
Contact: Glenys 0418 828 387 for location.

BUSSELTON
Caring Friends Support Group
Salvation Army Hall, 94 Kent Street
PO Box 260, Busselton 6280
Every Wednesday 10am-4pm
Individual Support 10am-12pm
Bob A/H on 9755 4021
Workshops & Group Meeting 1-3pm
Contact: Bob on 9751 5866 (Wed only)
E: caringfriends@westnet.com.au

INPATIENT INFORMATION SESSION

SIR CHARLES GAIRDNER HOSPITAL
Ward D20

FREMANTLE HOSPITAL
Alma St Centre, Ward 51

ROYAL PERTH HOSPITAL
Ward 2K

BENTLEY HOSPITAL
Mills Street

GRAYLANDS HOSPITAL
Frankland Centre

ROCKINGHAM GENERAL HOSPITAL
PaRK Mental Health Service
Elanora Dve

MARIAN CENTRE
Cambridge Street, Wembly
Inadequate care, poor health, isolation and unstable housing are major concerns for many older people with mental illness according to new research by SANE Australia.

A study by the national mental health charity has found that more support, services and education are needed to appropriately care for our ageing population.

‘We found from first-hand accounts that there are relatively few support and rehabilitation services aimed at older adults living with mental illness. Caring is often left to generalist aged care staff, who have little, if any, understanding of mental health issues,’ says SANE CEO Jack Heath.

Growing Older, Staying Well – Mental health care for older Australians draws together research, interviews and surveys SANE Australia conducted earlier this year with over 130 people living with mental illness, carers and service providers.

‘Many older Australians have managed their mental illness over a number of years and they’re often pretty resilient; but as they get older, additional challenges impact on their lives,’ Heath explains.

‘As an example, a lack of employment in earlier life can mean this group is less likely to have secure housing or financial resources. The death of an aged carer can lead to an urgent need for support and the long-term effects of medication on physical health can also affect people’s independence, stopping them from being able to do the activities they enjoy.

‘These changes may contribute to a deterioration in mental health, but we must remember that mental ill health is not a normal part of ageing.

‘It’s a dangerous misconception that people will automatically become depressed as they grow older. This assumption can prevent health and care workers from identifying older people who aren’t coping well and are in need of additional support,’ explains the SANE CEO.

‘Older people with mental illness can also face a double stigma – being both older AND having a mental illness,’ Heath adds.

As one older Australian told us: ‘I am almost of an age now where I could join a seniors club, and yet my generation – who are not living with mental illness – are more stigmatising than most other people because of all the old conceptions of mental illness.’

‘By listening to the experiences of older people living with mental illness, we found that stable and safe housing, quality health care and opportunities to participate and keep engaged with life, are key to their needs,’ Heath concludes.

**Growing Older, Staying Well – Mental health care for older Australian**

**RECOMMENDATIONS**

- Stronger lobbying and advocacy giving the needs of older people living with mental illness more prominence in aged care and mental health
- Address social isolation in older adults living with mental illness as a central tenet of any policy reform and advocacy work in this area
- Consult with older adults when seeking to understand the experience of living with mental illness
- Mandatory mental health training for staff working in the aged care and community support sectors
- Provide clear and easily-accessible information for older adults, their families, friends and staff about mental illness in older age
- Encourage GPs and other primary health professionals to seek additional training and education in the treatment of coexisting physical and mental health problems
- More research focused on mental illness in older adults.

**About the study….**

The Growing Older, Staying Well – mental health care for older Australians report is the culmination of research and surveys conducted with consumers and carers in Victoria, during early 2013. Most of the survey respondents were female (73%) and aged predominately between 50 and 64 (74%). The diagnoses reported were most frequently depression (45%) followed by Schizophrenia (28%) and bipolar disorder (23%). The study was funded by the Ian Rollo Currie Estate Foundation. The Foundation recently announced it will support the next phase of SANE Australia’s Aged Care Project.
Suicide: how to talk to someone about it

Source: smh.com.au by Amy Corderoy

I sat at my desk, in a busy newsroom, sobbing. Not the quiet, repressed tears of someone trying to hide the fact they are crying at work, but huge, body-shaking sobs.

I’d just been talking on the phone with the mother of a young man who had died by suicide. Overcome with grief, she had told me she had no other option than to suicide as well.

A lot of people are afraid of saying the wrong thing, or embarrassing the person or themselves if the person is not thinking of suicide.

To this day, I have never experienced such raw, powerful, frantic grief as that felt by this loving woman, who would have given anything to have her beautiful boy back.

It was the first time someone had told me that they wanted to kill themselves. Given my line of work, it was not the last.

Each time it happens, it is different, because each person has different reasons and a different personality. I have talked to distraught parents as well as people with mental illness. I even once had someone tell me he would suicide (and then hang up the phone) after I told him I was unable to report on the poor treatment he had experienced at the hands of the health system.

On that occasion I called the police, but at other times I struggled, at the end of a distant phone line, to know how to provide the support the person needed in their moment of crisis.

Mostly, I just hoped that they took my advice and got in touch with the support services I suggested, or maybe that by listening I had helped them to keep going until their pain subsided.

But a new website is being launched on Thursday that gives people practical tips for having conversations about suicide.

Conversations Matter provides fact sheets, videos and podcasts that cover how to talk to people who have told you they are thinking of suicide, to families who are bereaved, to children and to the broader community.

The guides were produced by the Hunter Institute of Mental Health with the support of the NSW Mental Health Commission.

The Hunter Institute’s Jaelea Skehan says the best thing someone can do when they are told someone is considering suicide is simply to hear what they’re saying.

“Just listen. Let them tell you why they are feeling that way and how they are feeling,” she says. “Sometimes you might wonder why someone talks to us, but it can be that it was just the right moment, or they didn’t want to burden those around them.”

Equally important, Ms Skehan says, is to listen to your gut when you feel those around you might be considering suicide.

“A lot of people are afraid of saying the wrong thing, or embarrassing the person or themselves if the person is not thinking of suicide,” she says. “That’s understandable … but we have to be able to find ways of getting over this.

“It’s much better to ask the question and be mistaken than to not ask the question and be left wondering.”

NSW Mental Health Commissioner John Feneley says individuals can make a difference if they speak openly about suicide.

“With access to the practical information in Conversations Matter, people in the community can be empowered to talk about suicide in ways that break down stigma, increase understanding and support those thinking about suicide or affected by suicide,” he said ahead of the launch of the guidelines.

NSW’s Minister for Mental Health, Kevin Humphries, said about 2100 Australians die each year by suicide, and for every one that dies, another 30 attempt it.

“It is a national problem that is greater than it should be because all too often we are afraid to speak about it,” he says. “We know that talking about suicide can be a very difficult and challenging experience, but that should not be a barrier to having the conversation.”

It’s been a few years since I spoke to that mother, and I’m sad to say that when I tried to contact her to tell her I was writing this article, I could not find her number.

I did talk to her again, a few days after her first call. While still overwhelmed with grief, she no longer seemed in crisis.

She did seem, however, a little embarrassed to have burdened a stranger with her problem.

She needn’t have been. She and her family didn’t deserve the trauma they had been through - and the very least she deserved was someone to hear how she was feeling while trying to help in the best way they could.

Everyone deserves that.

Ed. You can visit the website of Conversations Matter here:

A Mental Health Picture Book for Kids

Karen Tyrell is an Australian author and teacher who has recently published a new children's book called "Baily Beats the Blah". This is a picture book that aims to help kids develop more awareness around mental health and build up mental health coping skills.

Natasha Tracy of The Bipolar Burble blog recently interviewed her and an extract of that interview is reproduced below:

1. **After writing two bipolar recovery memoirs, Me and Her: A Memoir of Madness and Me and Him: A Guide to Recovery, why did you write a children’s book?**

I’m passionate about mental health for kids and grown-ups. My goal is to return to school as a teacher-author-story teller. Using Bailey Beats the Blah, I want to boost children’s self-esteem, emotional awareness and resilience skills. My philosophy is: Prevention is FAR better than cure.

2. **How did Bailey Beats the Blah come about?**

As a teacher I came across so many kids like Bailey. Kids, who experienced sad days, worry thoughts and tummy aches brought on by stress. I made a decision to write a narrative story, to empower children with coping and resilience skills.

3. **How can the book help children to become more emotionally aware and resilient?**

School counsellors say reading a child a picture book is the best way to change a children’s thinking and behaviour. It’s all about giving the power back to the child. Making him/her responsible for his/her actions.

4. **What’s your advice to parents, who wish to improve their child’s self-esteem and coping skills.**

Read Bailey Beats the Blah to the child encouraging an emotional response. And then ask: When has the child ever felt: blah or had a bad day. Follow up with a discussion of how did Bailey turn his BLAH into HA-HA-HA? Act out the story using puppets from my website.

5. **Is this book supposed to be dealing with mental illness or mental health in general?**

Both. Bailey is for kids 4 to 8 years old. Families with mental illness will benefit as the story opens up discussions on mental health, mental illness, wellness, resilience, anxiety, depression … and bipolar.

Simple resilience strategies are demonstrated through the actions and words of the characters: Bailey, Mum, Tom, Miss Darling (the teacher) and Fuzzy the dog.

6. **And what are those resilience strategies? Are there any messages about mental illness?**

Kids who are experiencing sad days (depression), worry thoughts (anxiety) and tummy aches can turn their BLAH into Ha-Ha-Ha.

With simple changes to their daily routine: exercising every day, engaging in fun activities they enjoy, daily journaling, sharing with a friend, spending time with their pet and positive thinking.

School counsellors recommend picture books to empower kids, changing their perceptions, habits and behaviour.

Karen is offering free children’s activities and teacher notes through her website to spring board discussion around emotional health and wellness, including sadness, depression, resilience, and coping strategies. You can find these and much more at [http://www.karentyrrell.com/](http://www.karentyrrell.com/).
Healthy Ways to Navigate Grief

Source: psychcentral.com by Margarita Tartakovsky

“We don’t seem to know how to grieve”, said Christina G. Hibbert, PsyD, a clinical psychologist who specializes in grief and loss.

In fact, that’s the number one question Hibbert gets: “How do I grieve?”

Many people use unhealthy ways to cope, such as ignoring their feelings, isolating themselves, setting a time limit or pretending their way through the grieving process, she said.

But when you’re in it, in the thick of the pain, confusion and chaos, it’s hard to pick anything healthy. Instead you pick whatever you know, whatever is nearby or whatever is easiest.

Navigating grief takes work. And it may mean doing things you’re unfamiliar or uncomfortable with, such as actually feeling your feelings. But it’s worth it.

Hibbert understands the complexities and pain of grief firsthand. In her memoir, This Is How We Grow , she writes about the four years following the passing of her closest sister and brother-in-law and inheriting her two nephews.

We may not naturally know the best ways to handle grief or we may resist following them. Like most things in life, we can practice, and we can learn.

Below, Hibbert shared her insight into helpful, healthy ways to navigate grief.

Heal together

Hibbert stressed the importance of families working through their grief together. As she put it, “Families who feel together heal together.” For instance, families may talk through your grief, listen to each other and cry together.

Helping a loved one through their grief means being there for them, she said. “Let them talk, cry, tell their story over and over to you. Say, ‘I’m so sorry,’ and ‘I’m here for you.’”

Acknowledge your feelings

Avoid ignoring, escaping, pretending or burying your feelings, she said. Instead, FEEL them: Freely Experience Emotion with Love.

“It’s OK to express that sadness, or anger, or fear, or pain, or whatever you’re feeling.”

Give yourself permission to sit with your feelings. “Do so lovingly, never judging what you feel. It only takes a couple of minutes to let your feelings be heard, and once they are, they usually quiet down for a while.”

Give yourself time to grieve

Don’t put a time limit around your grief, which is a process. “Your relationship with the deceased is unique and personal. It takes as long as it takes to grieve the loss,” Hibbert said.

Engage in healthy activities

In response to her clients wanting to know how to grieve, Hibbert created this anagram: TEARS. “It stands for Talking, Exercise, Artistic expression, Recording emotions and experiences, and Sobbing.”

In other words, you can talk about your grief; physically release difficult emotions with exercise; express grief through dancing, painting, making collages or making music (these are especially helpful outlets for kids); write about your thoughts and feelings; or cry.

Many people think weeping is for the weak. It’s not. Consider the words of Washington Irving, which Hibbert quotes in a piece on grief: “There is sacredness in tears. They are not the mark of weakness—but of power. They speak more eloquently than ten thousand tongues. They are messengers of over-whelming grief, of deep contrition, and of unspeakable love.”

Practice deep breathing

While processing her own grief, Hibbert found deep breathing to be helpful. “Practicing breathing from the diaphragm in a calming pattern helps slow the anxiety and tension that can often hit us in grief.”

Seek counseling

According to Hibbert, counseling can give people an unbiased perspective and teach them healthy coping skills. She especially recommended counseling when grief has severely affected a person’s daily life.

Seek therapy if you’re experiencing an intense depression , feel suicidal or don’t know how to cope, she said.

Therapy also is an excellent option for families. It helped Hibbert and her family cope with their tragic loss. “We must find ways to bridge the grief gaps in our relationships, and seek outside help as needed, to keep our families strong.”

Dealing with grief is a process that takes time. Give yourself the space to feel your feelings, practice self-care and seek support, from loved ones and a professional, if needed.
Bust that stress right outa your life!

I know you have heard people say, I need this, kids say, I want that mum, people at the office are breathing down your neck and the day just seems to slide out or your hands and 11pm hits and your too wired to sleep as you just didn’t get it all done.

Well I say, don’t worry be happy, life is a bit of a roller coaster, expect some bumpy roads, if it was so easy and rosy there would be no, yoga centres, gyms, hospitals with psychiatric wards for those who have had melt downs.

Speaking about the topic of stress I could go right into the whole thing with a fine toothcomb and iron out the wrinkly bits but I am going to keep this really simple.

Just stop it!

You heard me, kick it out of your life and make time for yourself, even if it is 5 minutes in the morning, we all got 24 hours in a day, make at least 5 minutes of it for you.

Your down time can be anything from reading a book, writing in your journal, playing music, playing sport or just plain flopping in front of the box watching your favorite soap opera!

I know television is not great, but for me sometimes it is cool if the kids are in bed and I want to watch The Bold and The Beautiful, I will watch it, man I really need to catch up on the juicy gossip of Brooke and Taylor the main two characters, call me corny but I say this to get a point across, learn to laugh at life, it will get you through the tough times.

Treat yourself with love and kindness

If you have some bad habits in life, I know I have many, just don’t worry and think, humans are designed in love, warts and all, god, our creator, the universe whatever you want to call it made us with imperfections, we are on our journey to find love and to live with each other, like everyone or not.

Remember, there will be conflicts with others and yourself. As you grow older and wiser, you may need to shed some skin like a snack every so often, flow with it and just move on, don’t fight change, life is bustling with new opportunities and ideas and the world moves fast, just roll with the punches as they say. Love your life, if you don’t who will!

Keep it sweet and keep it simple

Laugh, laugh and again, laugh! Laughter can move mountains and zap you out of a situation that is getting you down. Why be serious, life is meant to be fun and your meant to enjoy the ride. If you go through and forget to laugh then you may as well not be here, this is my view.

I am very good at laughing at the most inappropriate times, I even once laughed at a concert where a harp musician was playing probably to the disgust of others, but I just chuckled quietly and my cousin who was there with me also laughed once we were out, we didn’t know why we laughed but it was contagious!

Last but not least, do one thing and one thing only from now on. Focus life and things and all your goals and dreams on the word, wait for it, LOVE. We can all do that, it isn’t’ hard and if you have to stop and think what to do, make a list of all the things you love in your life, there are many, trust me once you put that pen to paper you won’t be able to stop.

Some links to help you make this happen

Firstly relaxation music I live off while I feel stressed.

http://www.youtube.com/watch?v=asg8XMzOvCE&list=PL8EFCDA6F90CCB400

Above are some great ones, then just search for relaxation music, sleep music, any sort of this type of music is great for background in house, find your favorites, you will be hooked! I use daily right now!

Secondly I use Tapping a lot, basically it is like therapy such as Acupuncture but you do on yourself. Great for things like anger emotions, setting up positive mind frames etc.

It is very self explanatory if you get stuck message me I will get back to you and talk you through or help if I can.

http://www.eftthailand.com/videos.html

I would use like in morning each day for saying, I am going to have a great day. Or if I had something bad happen in day time I would use this technique and let go of arguments etc. Just think of that moment and tap it.

We all have moments in our day we need to let go of to sleep well so this is great for that! Of if you can’t sleep just do it for that!

A quote from me to say goodbye

Live with love, kindness and long lasting passion, if you look deep enough into your heart, it is burning, bubbling with love and joy. Just seek love, it is everywhere around you, just seek it!
Bipolar II and the Incredible Hulk

Source: psychcentral.com by Erica Loberg

My poor mother. I don’t know how she did it. I won’t say I was a violent kid, but I had a serious unknown short circuit. When I would get angry over something minor or major (usually minor though, sad to say), I would get this bolt of lightening through my skull and lash out like the Incredible Hulk.

Looking back I feel bad about some of the violence I inflicted on my family. I think back and there were times I would lash out over practically nothing. I wanted to do my laundry and would freak if my mom was kind enough to do it for me. God forbid if someone moved or touched my things. God FORBID!

One time it was bad. It was my turn to practice the piano and I was anxious (like all bipolar II people) ’cause I had a lesson in an hour and didn’t practice enough that week to get by without my teacher making my life hell, so I told my sister it was MY turn to practice and to MOVE.

“Ask me nicely.”

“No, move.”

And she wouldn’t move. I pushed her slightly, and she pushed back, and the Hulk appeared.

ROARRRR! I went full force and tossed her and she blasted through a glass window. Her hand split open and blood poured out. I immediately got on my bike and ran away. Ran away meaning road around the block and decided to hide on the side of the house ’cause I didn’t know WHAT was going to happen. I had such a bad history of outrageous moments that I knew my number was up.

Now, I know that siblings fight and sometimes people get badly hurt, but over not getting the piano to practice? After that my parents came down hard on me and I was not to lay a finger on my sisters again. I was twelve years old at the time and that was the end of that. I knew I had a problem that was beyond anger management. This was different. This was unimaginable irritability that could peak at any stupid given time. That was when I learned to talk to myself through those moments.

Recently the Hulk reappeared, and I was checked on why I take meds, and what bipolar II irritability can do and more importantly, what I feel like.

My pill cutter doesn’t really work so when I have to take half of a pill I bite it. I was tired of taking all my meds and found myself biting less than half and the Hulk reappeared. I would take my shoes off and the right one would fall to the left side when the right one should be on the right side and the left one should be on the left. It sounds ridiculous, but man, the physical shudder of anger that shook my body was unexplainable. If I dropped a pen or something, BOOM! Fire like lightening would explode in my brain and I would have to acknowledge it, take a breath and talk to myself — literally:

“Erica, it is only a pen, chill. It’s gonna be okay.”

And I would pick it up and put it down and unwind.

Those Hulk moments made me go back to biting off the full half ’cause it wasn’t worth the torture. It wasn’t fair for my family to be at a loss sometimes on how to manage my outbursts over mundane things, and bless my poor mother to this day for dealing with me.

I asked my mom recently what I was like as a kid and she said as a baby I never slept and she really had a hard time handling me. Yeah, I would too if my daughter threw a fit for doing her laundry.

The Hulk!
Tales of Manic Depression

by Erica Loberg

I’m mad
Then glad
Then disappointed
Then triumphant

Make up your mind man!

Self-preservation
Self-awareness
Self-affliction
Self-defeat

One side has a turbulent self
While the other side rests in harmony
Sometimes the self sits with
Darkness
Defeat
Loss
Pain

The other sits
Calm
Willing
Ready
Proud

When you’re not ready
You can’t tap into that harmony
And the only way to reach it is
To give up on the bad side of the self
And make yourself

Try something new.

Free your mind
Find your soul
Reintroduce yourself
To yourself
And life will take a

New direction.
The Holiday Party Survival Guide: 3 Tips to Consider

Source: psychcentral.com by Erica Loberg

Every holiday season I find myself becoming more and more isolative. And every holiday I know it is coming and do my best to manage it.

Sometimes the challenge is to force myself to go to the holiday parties with a happy face and find a way to get through it. You can’t miss Thanksgiving dinner, and even if you don’t want to go, you don’t want people to think you are depressed or not doing well. When you are the person in the family with a mental illness, every now and then you feel the pressure to appear fine, when really inside you are not fine. So, here are a few tips on how to handle those dreaded Holiday Parties:

1. Clothes

Find your Christmas outfit and wear it over and over if you want. You don’t have to buy a dress for every occasion so keep it simple and make it easy on yourself and select your holiday “uniform” so to speak and stick to it. And make it fit okay. We all eat, maybe over eat, during the holidays so find an outfit that allows you to breath cause nothings worse then going to your go to gown and it doesn’t zip up. That’s enough for depression right there!

2. Hair

Bad hair day? Holiday parties are great for accessories. Wear a fun hat or some sparkly jewelry. Who cares if you look like a Christmas tree all ornamented out. At least your depressed hair that hasn’t had a shower in a long time is covered up!

3. Gifts

If you can’t handle the idea of going Christmas shopping pull out a pen and write the host of the party a letter. You don’t have to face that mall mob so take time to think about what other gifts you can make at home that come straight from the heart. Besides, some of the gifts given to a host of a party might be a re-gift anyway so, look at it this way, you can be original!

Even with medication, sometimes we can’t help the seasons causing us to fall into a depression. So when I prepare for my depression season and know I have to buck up and attend events, I may not want to attend, I keep to my survival guidelines which all have one main denominator crucial and necessary to survive:

KEEP A SENSE OF HUMOR!!

Don’t wait till New Years

Source: psychcentral.com by Erica Loberg

Christmas is going to come and go and before you know it you’re going to find 2014 hit you in the face like a ton of bricks. Some of us make resolutions, others remain anti-resolutions, but either way there are pressures to make changes. Take the month of December to think about where you are in life, and where you want to be a year from now. Managing a mood disorder adds a layer that can challenge your ability to execute your goals. For example, a lot of us walk into the new year with high hopes of losing weight. You swear you’re going to return to the gym and lose those rolls. You swear you’ll cut back on drinking, or cut back on caffeine, or spreading butter on bread (that is if you’re not giving up carbs all together.) But, if you’re depressed you simply won’t feel like working out. If you’re manic you might go full throttle and overdo a goal. “I am never going to eat a carbohydrate ever again!” Don’t go there. It’s not healthy or realistic. Finding balance is hard. Knowing your moods will help you adjust accordingly so, should you fall off the wagon on one of your resolutions, give yourself a break.

It’s hard being moody and navigating through change. Keep that in mind when you get yourself ready for 2014. Like I said, New Years is less than a month away...
Worldwide, self-help groups are becoming increasingly popular. They are effective in providing mutual support and are good resources for discovering information.

Support groups are a place for people to give and receive both emotional and practical support as well as to exchange information. Support groups don’t work to a manual. They are not a pity party, nor are they treatment or therapy. Support groups can help us in our journey back to a fully functional life. Meetings can be quite liberating, and no one will say “You’re crazy” or “I’m going to increase your Seroquel.”

If only our illness were as simple as popping pills in our mouth!

At a support group meeting you will hear about experiences of others who are struggling with denial, medication, side effects and how they are generally coping with bipolar. Often this may be the first time someone has had to discuss their illness honestly amongst people who actually understand.

Rarely are support group members surprised by what they hear. You may hear other member’s relate experiences such as how they flew into a road rage, or went on a crazy shopping spree or had a relationship breakdown.

If only our illness were as simple as popping pills in our mouth! We know it’s not that simple, so we have to work on winning back our lives in as many ways as we can. Attending a support group can be one of these ways. Fortunately, in the course of living with the illness, many members have picked up a range of coping skills and tips that they are very happy to share with the group.

It’s often hard for people with bipolar disorder to get out that door to attend a support group meeting and join a group of strangers for the first time. But you won’t know until you’ve taken that difficult and courageous first step!
The Biggest Lesson I've Learned in Managing My Bipolar Disorder

Source: psychcentral.com by Margarita Tartakovsky

When Andy Behrman was diagnosed with bipolar disorder over 20 years ago, he didn’t know anyone who had the illness. He didn’t even know what it was. “I remember asking the doctor if I needed to have an MRI and if I would live to see my next birthday.”

For about 10 years he struggled with stabilizing his disorder, which included being misdiagnosed by seven mental health practitioners, taking over 40 medications and receiving ECT. It’s a period he chronicles in his book Electroboy: A Memoir of Mania.

One of the biggest lessons he’s learned in managing his bipolar disorder and living a successful life is to embrace the illness.

“I’ve chosen to be friends with my bipolar disorder instead of [viewing it as] the enemy. I feel [that] too much emphasis is placed on ‘fighting’ mental illness and ‘recovery,’ when I know today that learning to embrace my bipolar disorder and keeping the focus on coping and managing to live with it on a daily basis would have been a much better strategy.”

Bipolar disorder is a difficult and complex illness. It affects all areas of a person’s life and often requires meticulous management.

Of course, “everyone is different. Every story is different,” said Ellen Forney, a graphic novelist and author of the New York Times bestseller Marbles: Mania, Depression, Michelangelo, and Me.

Still, it can help to know how others with the same illness have coped. Below, individuals with bipolar disorder share what they’ve learned in managing their illness.

Understanding Severity

“The biggest lesson I’ve learned is to take bipolar disorder very seriously,” said Julie A. Fast, a bestselling author of books on bipolar disorder and professional coach who works with loved ones of people with the illness. Fast was diagnosed with rapid cycling bipolar disorder II in 1995.

“It’s not like other illnesses. It’s sneaky and dangerous if you don’t watch it all of the time.” She compared it to type I diabetes. “People with diabetes one can’t mess around – ever. I can’t either.”

Fast follows her treatment plan and practices self-care. And despite the challenges, she describes herself as an eternal optimist. “As long as I can keep relatively stable, I always find a way to get on with life and strive for happiness. I will never stop.”

Having a Great Support System

“The biggest lessons I’ve learned in managing my illness is that I need to commit to my treatment plan and take care of myself to stay well for my family,” said Jennifer Marshall, who writes the blog BipolarMomLife.com, which explores what it’s like to open up about living with mental illness.

It was a realization she made after her last hospitalization. Marshall was hospitalized twice in the beginning of her illness and two more times during the years she had her kids.

“All four times were because I was unmedicated. Once I came to the realization that bipolar disorder is an illness I’ll live with for the rest of my life, I pledged my dedication to my treatment plan.” In addition to medication, her plan includes getting enough sleep, exercise and regular visits with her psychiatrist and therapist.

Martin also has accepted that some people simply won’t stick around. It’s been a hard lesson, but it’s also been important to let them go. “You deserve to surround yourself with people who support you and care about your wellness.”

Kevin Hines, author of the critically acclaimed memoir Cracked, Not Broken: Surviving and Thriving After a Suicide Attempt, has developed a vast support system of family and friends. “I call them my ‘personal protectors.’ They stay close in my life so that when I cannot be self-aware with my accepted mental illness they can catch me when I inevitably fall.”

Committing to a Treatment Plan

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“The biggest lesson I’ve learned in managing my illness is that I need to commit to my treatment plan and take care of myself to stay well for my family,” said Elaina J. Martin, who's written a memoir about living with mental illness and pens the Psych Central blog Being Beautifully Bipolar.

This includes her psychiatrist, therapist, mom, best friends and boyfriend. “I recently found a great new psychiatrist who takes time to explain things to me and we decide together on changes to my medication. I have a therapist that I trust and together we come up with solutions to things that are troubling me.”

She can call her loved ones at any time, day or night, if she needs them. “My boyfriend is my live-in supporter.” Her support system also helps her recognize when she might be experiencing a depressive or manic episode.

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Being Honest

“The biggest lessons I’ve learned in managing my bipolar disorder is to be honest with myself and my psychiatrist,” said Laura SQ, who was diagnosed with bipolar disorder in 2002 and proudly lives a stable life in Houston, Texas, with her family. “Without honesty, and without self-awareness I truly can’t maintain my stability.”

Hines, also a Global Mental Health & Suicide Prevention Speaker, has bipolar I with psychotic features. For him being completely honest about his symptoms, especially the distorted, psychotic beliefs, is a key part of recovery. “When I have paranoid delusions and hallucinations, I am able to voice them to those closest to me, and thus they are able to squash those mind distortions with their ‘true reality.’”

Being Kind to Yourself

“I also know, and have learned, I cannot be too hard on myself. We must give ourselves the room needed to grow with love, understanding and patience,” SQ said.

Even though being self-compassionate might not be easy (or natural), Forney reminds herself that self-flagellation is useless. She likened her self-berating to a parent yelling at a child who’s having a tantrum. Rather than calming them down, the parent just keeps yelling, and the child keeps getting upset.

Taking A Holistic Approach

“In my personal experience with bipolar disorder, I learned that in addition to my medications and counseling guidance, I needed to incorporate a holistic approach to my self-care,” said Gail Van Kanegan, DNP, RN, a nurse practitioner at Mayo Clinic in Rochester, Minn.

She practices yoga, tai chi and meridian energy exercises, which have improved her sleep, boosted her energy and enhanced her self-confidence.

Having A Routine

For veteran journalist and Psych Central managing editor Candy Czernicki, the biggest lesson has been the importance of following a strict schedule. Interpersonal and Social Rhythm Therapy is valuable for helping people with bipolar disorder create and adhere to daily routines.

The Power of Stability

When Forney was diagnosed she feared that treating her bipolar disorder would kill her creativity. She associated creativity with the electrifying passion of mania. Today, with treatment, she feels just as passionate about her work, just in a “more grounded way.”

She compared it to falling in love. At first couples have a highly charged, head-over-heels attraction. Over the years, this develops into a deeper and calmer way of being passionate with each other, she said. “Stability is good for my creativity.”

For Behrman, now a mental health advocate and speaker, overcoming the most difficult challenges of his life has given him perspective and made him a better person.

“Because I have successfully navigated myself through this devastating experience, which on several occasions could easily have taken my life, every challenge in front of me seems so much easier today.” Today, his coping skills are finely tuned, and he’s become a more strategic thinker, a better father and more empathetic friend.

Hines views his illness as one of life’s greatest gifts. “Had I not developed it and gone through such pain, I would not be the man I am today. I would not have been given the opportunity to share my life with so many others. My voice has been and will continue to be heard.” His story continues to inspire people all over the world and change lives for the better.

“Stability is a growing and learning process every day,” SQ said. She encouraged readers to never give up. “I won’t say it will be easy. I will say, it will be worth it.”
**Blaming Others for Bipolar Disorder**

*Source: bipolarburble blog*

It’s very natural to be angry when something egregiously bad – like getting bipolar disorder – happens to you. It’s not necessarily rational, per se, but it is normal. And when we’re mad about something we look for someone or something to blame. We look for someone to blame for our bipolar disorder. Again, this isn’t a rational, or even conscious thing, it’s really just a natural reaction to an extremely unfortunate situation, but it really isn’t healthy.

**Who to Blame for Bipolar Disorder?**

Bipolar disorder is a disease of the brain and it can happen to anyone, so really, there is no one to blame. However, if you wish to back it up, our genetics and life events are primarily to blame for bipolar disorder. This means we could blame our families. It also means we could blame any traumatic events we may have suffered for our bipolar disorder.

For me, this means I can blame my father’s side of the family, where mental illness definitely resides, and I could also blame my own history where in events like a sexual assault have occurred when I was younger. And, of course, I could blame the people in my life for “letting” the sexual assault take place – in my case, namely my mother. So I could go around blaming my parents for my bipolar disorder.

**What Happens When You Blame People for Your Bipolar Disorder?**

And, of course, if I were to blame my parents for my bipolar disorder, I would be walking around very angry, much of the time. I would take this anger out on them, and probably others. The anger would be big, bad and scary. This anger would tear at me from the inside. It would be fire singeing me and everyone around me.

**Being Unaware of Our Anger about Bipolar Disorder**

When I lay it out like that, I know it sounds like it’s illogical to be angry that no one would do it. But the fact of the matter is, people do. People do blame others for their bipolar disorder. People do blame events for their bipolar disorder. People get very, very angry about being sick. And this anger may be subconscious. It may come out in stabs of aggression that we don’t understand. It may come out as snaps against those around us, even those that we love.

**We Need to Let Go of Our Anger about Bipolar Disorder**

But this anger is very dangerous and self-destructive. It is not a healthy coping technique. It does not enrich our lives. It does not embetter us, it embitters us and it certainly doesn’t have a positive effect on our bipolar disorder.

The first thing to do is to get in touch with this anger. Look for it. Feel it. Get to know it. It’s not really your enemy. It’s really just a part of you and not something to judge.

Once you find that anger it’s time to recognize what it really is – anger over being sick – which is okay. It’s a stage in grieving, which we all do about bipolar disorder. But it’s important to move beyond this stage so that we can keep going forward as people. That anger will hold us back. And none of us need another barrier in our lives.

In short, the anger is normal, it’s nothing to feel bad about, but it is something to face and let go of. Because it’s not fair to blame our bipolar disorder on anyone or anything. It’s just a bad role of the dice. And that could happen to anyone.

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**Bipolar – I Just Want to Be Like Everyone Else**

*Source: bipolarburble blog*

I was sitting in my living room today starting at the wall. I spend a surprisingly large amount of time staring at the wall. It’s not that my walls are even vaguely interesting, it’s just that I spend a lot of time depressed and when depressed, even considering watching TV seems overwhelming.

And I was sitting there, depressed, staring at the wall, and the thought occurred to me: I just want to be like everyone else. I just want to go back to a time when walls were just the things you painted and not sources of non-entertainment. I just want to go back to a time when I couldn’t define bipolar disorder and psych medications were something I would never even have considered. I just want to go back to a time when I was just like everyone else.

**Bipolars Aren’t Like Everyone Else**

But when was this time? When was this magic time when I was like everyone else? Even before there were doctors and pills and therapists there were symptoms. Even before there were hospitals and clinics and offices there were problems. Even before I figured out why I wasn’t like everyone else I knew that I was.

So was there really a time when I was like everyone else?

I think not. I think that I’m romanticizing the past and my faulty human memory is just making it seem like there was a time when things were shiny and bright. For me, things were quite often terribly dull and dark.

And I think a lot of people with bipolar disorder are in this boat. I think a lot of people with bipolar disorder can think back, even into childhood, and see the warning signs of bipolar disorder nipping at their heels. I think a lot people just weren’t like everyone else ever.

**Wanting to Be Like Everyone Else, Be Normal, is Understandable**

And this desire to be like everyone else, this desire to be normal, is completely understandable. When I see happy people I want to be like them. When I see joyful couples laughing at the beach with their little toddler in tow, I want to...
be like them. When I see people who I’m sure have never heard of antipsychotic medication, I want to be like them.
It’s okay to want this. It’s normal, if you will, to want to be like everyone else.

**All the Greats Were Not Like Everyone Else**

But perhaps it serves us well to remember that all the greats were not just like everyone else because if they were, they would not have stood out and been so great. Many of those greats were different and horribly pained individuals some of which proved as much by taking their own lives. These people were different and that is why we remember them.

Now I’m not saying that I’m great and I’m not saying that you are either, I’m just saying that not being like everyone else is sometimes the thing that set you apart from others and makes you noteworthy.

**I’m Not Like Everyone Else, Okay**

And even if it doesn’t, even if the only thing it does is make you feel like a freak and make you feel alone, consider this: adolescents are under a huge pressure to conform to a peer group and many of them do not. And when these adolescents come home, crying, because they’re not like everyone else, parents assure them that it’s okay to be themselves. It’s okay to be different. Being different can be a virtue. Being different means being who they are. And one day that will become clear to them. One day their adult mind will recognize that not wearing the right brand of jeans doesn’t matter and doesn’t diminish their self or social worth.

And we must come to the same conclusion. We must realize that our differences – profound they may be at times – do not diminish us and there is no need to be like everyone else. Because if you give in to this notion of being like everyone else all you do is put pressure on yourself and give strength to unhappiness because you will never be like everyone else. Not ever.

So the desire to be like everyone else is seductive. But it’s not me. I like being the girl with electric hair. I like being the one who’s a little inappropriate. I like being the one that people remember when I leave a room. I don’t like the bipolar part, but the difference part I can accept. I wouldn’t be me any other way.
We meet at:

**Subiaco**
June O’Connor Centre
2 Nicholson Rd, Subiaco WA 6008
Support Group, 10.30am to 11.30am every Friday
Office Open Monday & Friday 9.30-3.30pm
Contact: (08) 9388 9869

**Perth City**
Senior Citizens CitiPlace
Perth Railway Platform above Platform 9
11.30am to 1pm, last Wednesday of each month
Contact: (08) 9388 9869

**Riverton**
McDonalds High Rd Riverton
6-8pm, 2nd Tues of each month
Contact: Lyn 0404 022 902 (after hours)

**Yokine**
C287 McDonald Street, Yokine (Community Centre)
1-2pm, 3rd Saturday of each month
Contact: Corrine 0408 202 747

**Rockingham**
2nd Friday of each month 12-2pm
Contact: Ingrid 0412 522 387 for location

**Joondalup**
June O’Connor Centre, 1/20 Mercer Lane, Joondalup
1pm, 1st and 3rd Thursday of each month
Contact: Freddie 0439 804 061

**Cannington**
The Leisure Plex, cnr Wharf & Sevenoaks Sts, Cannington
1pm to 3pm, last Saturday of each month
Contact: (08) 9388 9869

**Midland**
Midland Women’s Health Care Place, 4 The Avenue
10-11am, last Saturday of the month
Contact Jessica on 0439 522 140

**Mandurah**
1pm-3pm, 3rd Wednesday of each month
Contact: Glenys 0418 828 387 for location.

**Fremantle**
The Meeting Place, 245 South Tce, Sth Fremantle
1-2pm, First Saturday of each month
Contact: Corrine 0408 202 747

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**Busselton**
Caring Friends Support Group
Salvation Army Hall, 94 Kent Street Busselton
PO Box 260, Busselton 6280
Every Wednesday 10am-4pm.
Individual support 10am-12pm
Bob A/H 9755 4021
Workshops and Group Meeting 1-3pm
Office (Wednesday only): 9751 5866
Email: caringfriends@westnet.com.au

**Online**
http://www.evenkeel.org.au
Avail 24hrs 7days

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**Inpatient Information Sessions:**

**Sir Charles Gairdner Hospital**
Ward D20

**Fremantle Hospital**
Alma St Centre, Ward 5.1

**Royal Perth Hospital**
Ward 2K

**Bentley Hospital**
Mills Street

**Graylands Hospital**
Frankland Centre

**Mimidi Park**
PaRK Mental Health Service, Elanora Dve

**Marian Centre**
Cambridge Street, Wembley

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**We aim to:**

- Provide understanding, awareness and education for people diagnosed with a mental illness, their family/friends/carers, with a focus on mental health and emotional wellbeing
- To promote awareness in the community in order to increase understanding and assist with the elimination of stigma
- To provide an information centre comprising of literature obtained from national and international sources

**Membership Includes:**

- Quarterly newsletter
- Access to library resources and borrowing facility

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Even Keel
Bipolar Disorder Support Association
Phone: (08) 9388 9869
Fax: (08) 9388 2298
E-mail: office@evenkeel.org.au
Website: http://www.evenkeel.org.au

Even Keel 2013 Membership Form

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All donations over $2.00 are tax deductible

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