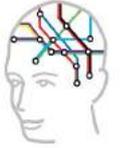


ISSUE

23

# Momentum

MHAPS  
Mental Health  
Advocacy and Peer Support  
*Together on the road to wellbeing*



AUTUMN

together on the road to well-being...

2020

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Momentum is published by  
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Editor: Shelley and Kat



### A GOOD TIME TO DEVELOP YOUR PERSPECTIVE?

*perspective:- a view.....of facts and events. a mental picture of the relative importance of things.*

In just a few short weeks our world has dramatically changed. Many of those things that felt so familiar, normal and certain are no longer accessible. We are asked to narrow our movements down to our own homes, going out only for exercise and essential shopping. That shopping occurs in an alien landscape of queues, masks, screening and physical distancing. Why? Because a microscopic virus, that can be seen only through an electron microscope, is making many people ill and sadly causing the death of some.

This is quite rightly seen as a crisis, one that includes personal loss and an economy that is greatly reduced in activity. So, if the virus doesn't get to us then there is the threat of unemployment or other hardship.

**In 1941 when the Japanese bombed Pearl Harbour** a nurse was in her bed, shrouded in a deep depression, unable to function, let alone work. When the bombs started to fall she rose, put on her uniform and rushed to the hospital where her skills and experience were urgently needed. She never succumbed to depression again.

**There is a pair of Chinese symbols** that collectively mean 'A crisis is opportunity riding on a dangerous wind.' The crisis and the danger are all too apparent at the moment. To find the opportunity however requires perspective that acknowledges the crisis but doesn't get lost in it.

**Have you seen that famous line drawing** that, depending on how you look at it displays either the head of a peasant woman, with rather a large nose, or a full sketch of an elegantly dressed and much younger woman? When you look at it for the first time you may be only able to see the one or the other image. Once you have viewed it many times however, you can move in and out of both views at will. You might choose to see one image as dangerous - a crisis and the other as an opportunity. The drawing itself then is the dangerous wind.

*Continued on page 4>>>>>>>*

## Mental-Health Researchers Ask: What Is 'Recovery'?

By Benedict Carey  
Feb. 25, 2020

There are many ways to measure mental distress. But it's far harder to predict, or even describe, the improvement that often follows.

For years, Claire Bien, a research associate at Yale, strained to manage the gossipy, mocking voices in her head and the ominous sense that other people were plotting against her. Told she had a psychotic disorder, she learned over time to manage her voices and fears with a lot of psychotherapy and, periodically, medication. But sometime in late 1990, she tried something entirely different: She began generating her own voices, internal allies, to counter her internal abusers.

"I truly felt I was channeling my father, my ancestors, a wise psychiatrist, giving me advice," said Ms. Bien, who has written a book about her experience, "Hearing Voices, Living Fully."

She added: "Recovery for me means knowing that my mind is my own, and even when it doesn't feel that way, I know it's only temporary. Knowing that allows me to hold a job — a good job — and be productive, respected and even admired by the people with whom I work."

Mental-health researchers have numerous scales to track symptom relief, like the easing of depression during talk therapy, for instance, or the blunting of psychotic delusions on medication.

But the field has a much harder time predicting, or even describing, what comes next. How do peoples' lives change once they have learned to address their symptoms? Mental disorders are often recurrent, and treatment only partially effective. What does real recovery — if that's the right word — actually look like, and how can it be assessed?

This is what people in the thick of mental distress desperately want to know, and a pair of articles in a recent issue of the journal *Psychiatric Services* shows why good answers are so hard to come by.

In one, the first study of its kind, Dutch researchers tested a standard life-quality measure, the Recovery Assessment Scale, that is typically used to rate an individual's confidence, hope, sense of purpose, willingness to ask for help, and other features of a full, stable life.

The team administered the 24-item questionnaire to three groups of people: one with a diagnosis of a psychotic disorder, like schizophrenia; the siblings of members of this first group, who had no such diagnosis; and a control group of unrelated people who had no history of mental-health problems. The scale found little detectable differences between the groups.

The widely used R.A.S., as the scale is known, is "of questionable usefulness," the authors concluded. If everyone looks roughly the same on the scale, then how can the scale be used to measure improvement?

In the other paper, an editorial, Larry Davidson, a psychiatric researcher at Yale, pointed out that the results were not surprising. The researchers had intentionally left out a subset of R.A.S. queries that probably mattered most, involving how well respondents were managing their symptoms — statements like "Coping with mental illness is no longer the main focus of my life" and "My symptoms interfere less and less with my life."

By taking out these questions, Dr. Davidson said, the study demonstrated only that, in the absence of mental distress, "the everyday lives of people with a mental diagnosis are just like everyone else's." The authors, however, noted that those questions were excluded because, by definition, the comparison groups had no symptoms.

>>>>>> *continued on page 3*

>>>>>> continued from page 2

In effect, both parties agree: The R.A.S., and many similar scales, amount to little more than symptom checklists, in the end not much different from those used to track the short-term effects of a drug. The field could use different, and better, means of assessing how people shake off or learn to manage a mental-health diagnosis.

The scales originated decades ago with mental-health consumers, or “survivors,” who saw the usual clinical definitions of symptoms relief, like the Hamilton Depression Scale, as unable to capture the fullness of personal recovery.

The scale analyzed in the Dutch study, for instance, asks people to rate, on a scale of 1 to 5, how strongly they agree with various statements like, “If people knew me, they would like me,” “If I keep trying, I will continue to get better” and “It’s important to have healthy habits.” Researchers rely on scales like this to gauge the longer-term, real-world effects of all variety of mental-health programs, like group therapy for rape victims in the Democratic Republic of Congo or community outreach for psychosis in Wisconsin.

But as the new study finds, questions like these are applicable to anyone, with a diagnosis or not; not to mention that responses can vary by the day, or even the hour, depending on what insults or encouragements hold sway in the moment.

People who find a way to move on with their lives after receiving a psychiatric diagnosis — depression, anxiety, bipolar disorder, schizophrenia — generally must do so the hard way: gradually, by fine-tuning some combination of personal rituals, social connections, work demands, therapy and, when necessary, medications. And these idiosyncratic regimens of self-care are not easily captured by the measures currently available to researchers.

Now, given the clear limits of the R.A.S. and other quality-of-life measures, some experts say it is time to find ways to better assess how a person’s daily experience changes in the months and years after receiving a mental-health diagnosis. “Personal recovery,” Dr. Davidson wrote, “has

as much to do with the quality of a person’s sense of identity and belonging to a community as it does to subjective experiences of mental illness per se.” He argues that the field needs to develop reliable tools to assess what it’s like to live with mental distress over time, in the same way that cardiology and other branches of medicine use “patient-reported outcomes” to track longer-term responses to treatment.

Gail Hornstein, a professor emerita of psychology at Mount Holyoke College, has been tracking a group of more than 100 people who attend or have attended meetings of the Hearing Voices Network, a grass-roots, Alcoholics Anonymous-like group where people talk with one another about their mental distress and possible ways of managing it.

Most people in the study have a diagnosis of a psychotic disorder, like schizophrenia, and consider their experience in the groups to have been supportive, even transformative. But many still hear voices, and sometimes reassuring ones, Dr. Hornstein said in an email. So assessing improvement by asking the usual kinds of questions — for instance, “Are the voices gone?” — isn’t necessarily useful.

Instead, Dr. Hornstein asks whether the voices — like those that Ms. Bien still occasionally encounters — or other aspects of an individual’s life have changed as a result of participating in the groups.

People’s responses are extremely varied, Dr. Hornstein said in a phone interview. They might say, “I have a different relationship with my voices now.” Or, “My voices used to bully me, and terrify me; now I have relationship with them based on mutual respect.”

“That’s a change, for the better — it’s improvement,” Dr. Hornstein said: “But you wouldn’t pick it up unless you knew how to ask.”

<https://www.nytimes.com/2020/02/25/health/mental-health-depression-recovery.html>

>>>>>>>Letter from Ian Johnson

Right now, there will be people in our community who are excited by the opportunities they believe will emerge from the Covid-19 crisis. For some this will be the catalyst of new enterprises in a changed world, or a chance to buy up bits of the old world at sale prices. Still others will realise new and exciting ways to reach out and help their fellow man. Yet another person might suddenly realise an urgent need for new learning, or a new occupation. It could be that the enforced slowing down enables us to reflect, to experiment with other ways of being and doing. Perhaps a new world-view.

**All these people will be needed**, from some of them there will arise new forms of employment for others. Yet they all see and experience the same events, the same existential threat as you and I do. What they have in common with one another however is a different perspective on what is happening and what it means. A dramatically changed perspective is what happened for the nurse at Pearl Harbour in 1941 and it is also what we learn from the duality of the famous line drawing.

**You get to choose your own perspective of the Covid-19 crisis.** Please take the time to make that choice for yourself and please avoid letting anyone else choose for you or limit your options.

**You will see that at MHAPS we are working hard on our own perspectives** and what we're finding is new and effective ways of reaching out and working with people who decide they need our services.

*Ian Johnson*

Guest Contributor

## Anxious Teens

Here are a few handy links to websites for younger people that are experiencing anxiety.



- <https://www.whatsup.co.nz/teens/>
- <https://www.auntydee.co.nz/tips-and-help>
- <https://childmind.org/article/supporting-teenagers-and-young-adults-during-the-coronavirus-crisis/>
- <https://www.heysigmund.com/anxiety-in-teens/>
- <https://raisingchildren.net.au/pre-teens/mental-health-physical-health/stress-anxiety-depression/anxiety>



**Mad Poets  
Canterbury  
2019/2020  
season  
we're back!!!!**

**Please check our Facebook page for updates as to when we will be hosting events.**

<https://www.facebook.com/groups/madpoetscanterbury/>

Mad Poets Canterbury is by Awareness: Canterbury  
Action on Mental Health and Addictions

<https://www.facebook.com/awarenesscanterbury/>

Awareness Exec is working on plans for a virtual Mad Poets night. Let us know if you are keen for this.

If you'd like more information, please feel free to

**contact us at 365 9479 or  
awareness@mhaps.org.nz**

## Winston Churchill Fellowship to investigate arts on prescription

27 Feb 2020

Kim Morton, director of Ōtautahi Creative Spaces, a creative wellbeing organisation from Christchurch, has received a Churchill Fellowship which will enable her to travel to the United Kingdom and Denmark in 2020 to research arts on prescription.

"I will be investigating arts on prescription, which are similar to green prescriptions" says Kim Morton. "Health and whānau workers connect people who are unwell with arts programmes to build their health and wellbeing."

"The mental health system is struggling to cope with demand, and arts on prescription is a proven way of improving mental health. Increasing access to creativity through a prescription could make a real difference in New Zealand."

With widespread mental distress following the earthquakes and the terrorist attack on the Muslim community, Christchurch is the ideal place to pilot arts on prescription, Morton says. "There was a lot of interest in arts on prescription during the consultation for Toi Ōtautahi, the arts strategy recently adopted by Christchurch City Council. Hauora wellbeing is one of four pou (pillars) for this strategy, reflecting the level of mental distress in our city, and the desire to make change."

"Arts on prescription is a really great opportunity for collaboration by organisations from the health and arts sectors, such as Pegasus Health, Canterbury District Health Board, the Ministry of Health, Christchurch City Council and Creative New Zealand. I look forward to sharing what I learn with these organisations, so that together we can create something here that fits our needs."

Churchill Fellowships allow citizens from all walks of life to design their own research projects, travel the world and further their knowledge in a chosen field, before returning to make their knowledge available to New Zealand society.

The Fellowship is made possible by the Winston Churchill Memorial Trust, founded at the request of and as a living memorial for Sir Winston Churchill. He believed that world peace and greater international understanding could be promoted through ordinary people travelling to other countries and experiencing other cultures.

As part of the Fellowship requirements, Kim will produce a full report of her investigation within six months of her return to New Zealand. These reports become public and are available online at the Winston Churchill Memorial Trust website.

"I warmly congratulate Kim Morton," says Chair of the Trust, Dr. Bronwyn Smits. "We look for New Zealanders who, like Churchill, are innovative, filled with a spirit of determination and possess a strong desire to benefit their communities. Fellows are selected from all over New Zealand for their leadership potential and represent a wide variety of backgrounds, qualification, professions and interests.

"Since the Trust was established in 1965, over 800 Fellowships have been awarded. This represents an incredible wealth of knowledge and learning which the Trust has been responsible for generating and making available to our nation.

"The Fellowship is more than a travel grant. It widens an individual's horizons in such a way that he or she grows in confidence, knowledge, authority and ambition, and can bring benefit to others in New Zealand through sharing the results of their travel. As well as promoting understanding between peoples, the experience makes fellows more effective leaders at work and in the community."

Contact details:

Kim Morton, Director, Ōtautahi Creative Spaces 022 064 7963

[kim@otautahicreativespaces.org.nz](mailto:kim@otautahicreativespaces.org.nz)

<https://www.thebigidea.nz/stories/media-releases/226549-winston-churchill-fellowship-to-investigate-arts-on-prescription>



## **Tips from the official Covid19 NZ Government Website**

### **Top ways to look after your mental wellbeing**

While there are things that we can't control now, there are things we can do to boost our mental wellbeing and that of your loved ones:

#### **Stay connected**

This is important for our wellbeing and helps to make us feel safer, less stressed and less anxious. We can support each other to get through this. While we are limiting social contact to contain the spread of COVID-19, there are still lots of ways we can connect.

#### **Acknowledge your feelings**

It's completely normal to feel overwhelmed, stressed, anxious, worried or scared in the current situation. Allow yourself time to notice and express what you're feeling. This could be by writing thoughts and feelings down in a journal, talking to others, doing something creative or practising meditation. Talk with people you trust about your concerns and how you're feeling. Reach out to others.

#### **Stick to routines where possible**

Try to go to sleep and wake up at the same time, eat at regular times, shower, change your clothes, have regular e-meetings with colleagues or virtual coffee dates with friends and do your chores. Meditating and exercising can help you to relax and have a positive impact on your thoughts. Try not to increase unhealthy habits like comfort eating, drinking, smoking or vaping.

#### **Check-in on other people who might need help**

Reaching out to those who may be feeling alone or concerned can benefit both you and the person receiving support.

#### **Seek accurate information from legitimate sources**

You may find it useful to limit your media intake. Get the facts from this website to help distinguish facts from rumours. Seek information updates at specific times once or twice a day.

#### **Don't be afraid to seek further professional support**

For support with anxiety, distress or mental wellbeing, you can call or text 1737 to talk with a trained counsellor for free, 24 hours a day, 7 days a week.

#### **Continue existing mental health treatment if possible**

Notice if your symptoms are getting worse. Talk to your GP, counsellor, caseworker or mental health team about how they can continue supporting you. Can your appointments take place over the phone, via email, text or video chat? What tips do they have to help you get through? Who can you call if you need help urgently?

**Here's a good article about how the current shut down is affecting people in the arts community and how they are using their creative ideas in collaboration with others:**

Auckland Fringe Director Borni Te Rongopai Tukiwaho has “found a heightened sense of unity and camaraderie to be one of the silver linings for the Aotearoa arts industry”. One of the interesting things is the resounding response from the arts sector, coming together by creating specific groups and creating conversations. “I’ve already seen three main Facebook groups (which includes [Aotearoa Arts and Events during the COVID-19 Crisis](#)) that are starting to try and look at how they can connect to each other across the country, whether that’s being a space for people to speak about how they’re feeling or to share resources with each other. I’m seeing quite a lot of people rallying to try and work it out together.”

<https://www.thebigidea.nz/stories/how-to-cope-with-covid-19-mental-health-issues?>

**Other services available during the Covid 19 lockdown**

- \* MSD—Ministry of Social Development [www.msd.govt.nz](http://www.msd.govt.nz)
- \* Lifeline: Free confidential support 24/7. Call 0800 543 354 or text 4357
- \* 1737 to talk. Text or phone for free confidential support 24/7
- \* Kidsline: 0800 543 754
- \* Warmline: 0800 899 276, [warmline.org.nz](http://warmline.org.nz)—
- \* Safe to talk: Sexual harm helpline: 0800 044 334
- \* Womens Refuge: 0800 376 633
- \* The Lowdown: Text 5626, [www.thelowdown.co.nz](http://www.thelowdown.co.nz)— Support for young people experiencing depression or anxiety.
- \* Home & Family Society Ph:03 944 0635 or Text: 021 101 1438

**ASK YOUR GP ABOUT BRIEF INTERVENTION**

Brief intervention counselling (BIC) clinicians are registered mental health professionals from a variety of backgrounds, who have had specific training as brief intervention counsellors and coordinators.

A BIC clinician can help you with low mood, anxiety, alcohol or substance abuse, and other mental health issues.

There is no charge to see a BIC clinician, but you must first get a referral from a GP. If you meet the criteria for referral you can receive up to five funded therapy sessions with a BIC clinician in your area.

The BIC clinician can give you therapy, advice and

assessment. They can also refer you to other agencies once their sessions have finished. BIC clinicians can normally see patients in the community and often in their GP clinic.

**You may have to wait a few weeks before a BIC clinician can see you. If you need more urgent help you can call 0800 920 092.**

To assess if you qualify for the funded sessions, your GP may ask you to fill in a short questionnaire and use this to work out a score. If your score is lower than the level needed for a referral to a BIC clinician, your GP will recommend other options for counselling. Your GP will also suggest community agencies that may be able to offer support.

**BIC clinicians are available throughout Canterbury.**

## SHORT ARTICLES and LINKS

### MHF Advisory: All the Bright Places

A new film called All the Bright Places has been released on Netflix. It explores teen suicide and mental health issues. If you're having a tough time right now, particularly if you've lost someone to suicide or are experiencing your own suicidal thoughts, this film might cause you distress.

<https://www.mentalhealth.org.nz/home/news/article/285/advisory-all-the-bright-places>

### Shared Medical Appointments Educate, Encourage MS Patients

An innovative concept of shared medical appointments for multiple sclerosis (MS) patients, in which a group of 10 to 15 patients meet for about 90 minutes of medical care and patient education, is showing benefits ranging from improved social connections to reduced depression and emergency room visits.

<https://www.medscape.com/viewarticle/926123>

### Been There: Young Peoples Stories of Struggle and Hope

This book is a collection of stories from 25 New Zealand young people, who have written about a crisis or struggle and what has given them the hope to endure and to pull through. The remarkable openness of their writing means that you will feel anger at the way some young people are treated and admiration for their honesty and courage. You will find their stories sobering, insightful, sensitive and very moving. "Been There" is now available for purchase for \$20 (including GST and postage within New Zealand) - with all profits from the sale of the book going to the Christchurch Youth Hub.

The book can be purchased from The Collaborative Trust website: [www.collaborative.org.nz/products](http://www.collaborative.org.nz/products)

### Chronic Illness and Trauma Disorders: When illness triggers PTSD.

"Scholars have long known that people who live with chronic illness are at a greater risk of experiencing PTSD-like symptoms. However, the trigger for these symptoms is not a one-time event that occurred in the past; rather, chronic disease is an ongoing threat to safety. Researchers thus have proposed a model of PTSD that accounts for this difference entitled the Enduring Somatic Threat ("EST") model of PTSD. This blog post explains both the EST model and treatment recommendations."

<https://www.psychologytoday.com/us/blog/chronically-me/201905/chronic-illness-and-trauma-disorders>

### Why Addiction Treatment Isn't "One Size Fits All"

"Recovery may not involve any clinical intervention or treatment and instead be primarily rooted in peer support, a faith community, or recovery coaching services. If the shared goal of treatment professionals, family members, and individuals suffering from addiction is recovery then all these pathways and more are legitimate strategies for resolving a significant drug or alcohol problem."

<https://www.psychologytoday.com/us/blog/mind-matters-menninger/202003/why-addiction-treatment-isn-t-one-size-fits-all>

*Written by Shelley Engebretsen*

Sitting here putting together the Momentum Newsletter for my first time, from home in lockdown, I have been thinking about my time at MHAPS. How I got to be here, the people I have met, both peers and workmates. What other job could I be doing that would bring me so many meaningful connections on a daily basis?

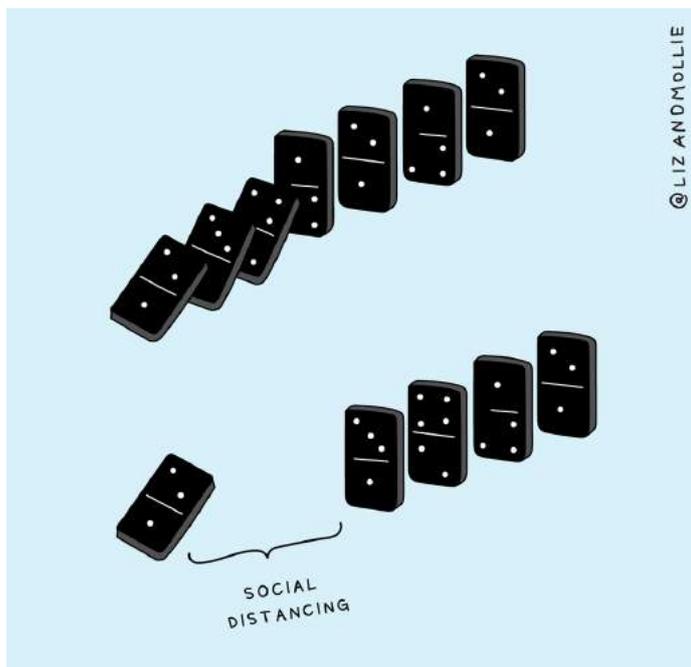
Some of those connections have built into strong friendships. Some, just fleeting moments, making a cuppa for a first time visitor who is nervous and anxious. Trying to make them feel a little at ease before they begin their MHAPS journey too.

I love coming into work everyday to a place that accepts me for who I am. Where every morning upon my arrival the question "How are you today" is genuinely asked and my answer is listened to with great interest and care.

MHAPS has also helped me understand myself. How I deal with situations. I learned that anxiety and depression are very common in the world and to let myself feel them, work through them and to move forward is achievable.

Being in this current state of lockdown, I am really missing all my workmates and seeing our peers come through the door.

I find myself thinking of how everyone is coping and are their needs being met? Do they know how to find the support they need? What role can I play in that support system?



Having the ability to work from home I feel I am doing the best I can in a new and unusual world.

What the future holds for all of us, I do not know. I just keep doing day by day the best I can.

I also feel that I am beginning to get an understanding of what basic living is. I don't need all the materialistic stuff to make me feel alive. I need human connection. I need to hug my family and friends. I need to have meaningful face to face conversations where I can feel a person's energy.

I am looking forward to the day I get to go back into work and things start to feel more "normal".

Take care out there everyone and keep flattening the curve!

## MHAPS SERVICE UPDATES

### WHAT'S ON AT MHAPS?

We offer peer-to-peer advocacy, programmes and a range of individual and group peer support options.

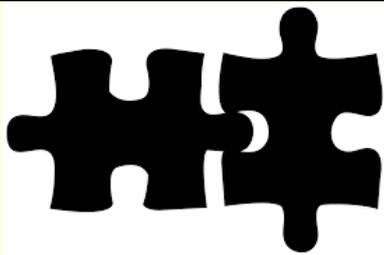
For a copy of our service updates go to: -

<http://mentalhealthadvocacypeersupport.org/>

Email [reception@mhaps.org.nz](mailto:reception@mhaps.org.nz)

Phone (03) 365 9479

Or a pick up a hard copy from our office at unit 4, 357 Madras Street (next to the Heart Foundation).



## Here's how to *connect* with MHAPS

*We provide individual peer support and advocacy, multi-workshop recovery programmes and purposeful discovery groups*

**ALL OF US** at MHAPS have our own lived experience of a mental illness or addictions issue. In practical terms this means we are able to make rapid connections with people going through something similar. To connect with us you don't need to have a formal diagnosis—but if you do that's fine too—just the fact that you're distressed and struggling is enough. *Our core services are free of charge.*

To begin with you **don't need to make an appointment**. During the Level 4 lockdown we are still contactable by phone and we have someone rostered to greet and talk with you. We start by asking you **what has brought you to call us** and then we move on to talk with you about who we are and what we do. This usually leads to our discussing with you what we do and then probably a suggestion about which of our services may be the right place to start. If you like what's being suggested then we will follow up with you later, usually within a week.

You can contact us on phone (03) 365 9479 email [reception@mhaps.org.nz](mailto:reception@mhaps.org.nz) or go to our website <https://www.mhaps.org.nz> where you can get a copy of 'What's On at MHAPS' to find out more about us.

## MHAPS SERVICE UPDATES



### AWARENESS Canterbury Action on Mental Health and Addictions

It has been a very interesting few month for our consumer network. Since the last newsletter we advertised, interviewed and hired a new network co-ordinator. Welcome to Mary, who took up a 15 hour a week role in January. Mary brings great organisational skills and connections to other services in Canterbury to our team.

We write this from inside the Covid 19 lockdown conditions. At this point we know that we have unfortunately had to cancel the Divergence Festival Mad Poets Canterbury night. That made us quite sad as we love working alongside the Divergence crew on that great project. We are holding our breath hoping we will be able to go ahead with the 24 April Mad Poets Canterbury evening as planned but that will depend on the government. The funding for Mad Poets Canterbury was gratefully received from Creative New Zealand. That means we have until November to spend the money. If there is a problem running the poetry evening because it gets too wintery we definitely have a Plan B. A few years ago we were funded to offer workshops as well. Please keep an eye out for announcements on the Awareness facebook page and through this newsletter and emails for courses and workshops that Awareness will run later in the year. If you have a good idea for something you would like to learn please let us know. All ideas happily received at [awareness@mhaps.org.nz](mailto:awareness@mhaps.org.nz)

The membership have contributed to improved services in the sector in a few ways in the last quarter. We have had requests for feedback on government documents, we have been contacted by the All Right? Campaign for feedback on their work and we have a focus group going with the CDHB around the New Building Project. Our membership with their varied skills and experiences offer Canterbury and New Zealand quality feedback and involvement in that ongoing goal of continuous improvement.

Our Executive Committee wants you to remember that the Annual Celebratory Meeting is coming up. Please keep an eye on the Awareness facebook page for upcoming dates.

<https://www.facebook.com/awarenesscanterbury/>

We would welcome new members to the Exec to keep fresh ideas flowing so please consider this opportunity. They are a great bunch of people.

Lastly, we hope you are all coping with these unprecedented times. Please remember to post cool things on facebook and that you can still call MHAPS to chat with a peer worker even if no one is in the office. Take care every one.

## MHAPS COMMUNITY UPDATES



***During this period of lockdown, MHAPS is still running our services from offsite. If you are wanting to receive support from one of our services you can call 03 365 9479 and do a First Step over the phone with one of our support workers.***

***We are still able to call, txt or email our peers for 1:1 peer support, Advocacy, or Group support.***

***Our programmes will still be running online as well.***

***Please contact us via email, txt or phone...***

***reception@mhaps.org.nz***

***022 370 8055***

***03 365 9479***

***Please note that our staff are currently unable to meet in the community or at our offices***



### **Consumer-run mental health radio show** **Saturdays 1.00—1.30**

(repeated Wednesdays 10.30 am)



***As we are all in lockdown, no new shows have been recorded. Plains FM will be selecting from our back catalogue of interviews with people from the Mental Health and addictions community to replay through these weeks. We hope you enjoy these second chances.***

Our consumer radio show has been on Canterbury community radio for 15 years! That is a huge accomplishment when the producer and interviewers are volunteers. We really appreciate the commitment made by people over all these years. Especially Debbie who has been solid as a rock and very creative. It is great to have a vehicle for informing our community about what is new and what affects them.

That being said **we are in need of more helpers!** We could use a couple of people who have any broadcasting experience or would like to learn to be an interviewer. Please call Beth at 03 366 8288 for more information

If you have a recovery story or a service to promote please give us a call at

**365 9479 or email mgr.cas@mhaps.org.nz**

# ANZAC Day Saturday 25th April 2020



Initiated by the New Zealand Defence Force and the Royal New Zealand Returned and Services Association, the Stand At Dawn campaign calls for New Zealanders worldwide to take a moment to remember fallen servicemen.

People can join at 6am on 25 April by standing at their letterbox, front door, lounge rooms or other places while staying within their bubble.

They can tune into RNZ National, listen live on the internet for the official dawn service broadcast commencing at 6am.

## IMPORTANT NUMBERS

**Need to Talk?** Free call or text 1737 anytime

**Lifeline** 366 6743 or 0800 543 354

**Alcohol and Drug Helpline** 0800 787 797

**Parentline** 381 1040

**Crisis Resolution** 0800 920 092 364 0482 or 364 0640 after hours

**24 Hour Surgery** 365 7777

**Healthline** 0800 611 116

**Youthline** 0800 376 633



**Peer Support - Peer Advocacy - Peer Discovery Groups**

**Consumer Participation - Latnam Social Centre**

**Recovery programmes**

**Information and Talks - Quiet Minds Radio**

**PO Box 21-020 Edgware**

**CHRISTCHURCH 8143**

**Unit 4, 357 Madras St**

**365 9479; 0800 437 324**

**[reception@mhaps.org.nz](mailto:reception@mhaps.org.nz)**

**[www.mhaps.org.nz](http://www.mhaps.org.nz)**

### DISCLAIMER:

The information provided in this newsletter has come from a variety of sources with sometimes diverging views of what is effective and safe for recovery and wellbeing. Whilst MHAPS endeavours to ensure the reliability and accuracy of all information, this cannot be guaranteed. Any treatment or therapy decisions you may take should include your GP. It is especially important before making any changes, including additions, to any prescription medications, programme or treatment you are using that you discuss your intentions with your GP or whichever health professional you have used.

**FAMILY  
VIOLENCE  
IT'S NOT OK**

**IT IS  
OK  
TO ASK  
FOR  
HELP**

<http://www.areyouok.org.nz>



**Anxiety  
New Zealand  
TRUST**

**24-Hour Hotline**

If you are feeling anxious and need someone to talk to – wherever you are in New Zealand – you can phone our free 24 hour Anxiety Help Line.

**0800 ANXIETY (0800 269 4389)**

*MHAPS acknowledges and thanks the following organisations for their continued and valued financial support*

**CANTERBURY DISTRICT HEALTH BOARD (CDHB)**

**RATA FOUNDATION (Canterbury Community);**

**CERT; Christchurch Casino; Christchurch City Council;**

**Mainland Foundation; Christine Taylor Foundation;**

**Frozen Funds Charitable Trust;**

**Lottery Grants Board; Lion Foundation; Southern Trust**

**IF UNDELIVERED PLEASE RETURN TO: -**

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If you no longer want to receive this newsletter or our regular updates 'What's on at MHAPS' please contact Shelley on email: [reception@mhaps.org.nz](mailto:reception@mhaps.org.nz) or phone (03) 365 9479