



# Wellness and Recovery Newsletter

Volume 3 Issue 3 October 2008



Community  
Resource  
Connections  

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of Toronto

## Welcome to the Wellness and Recovery Newsletter

Once again it is our pleasure to bring to you a new issue of the Wellness and Recovery Newsletter. We hope that you find it helpful and informative.

Thanks to everyone for the feedback regarding the last issue of the Newsletter. People seemed to be very interested in the article about the Public Labyrinth. If you know of any other novel mental health-related community resources, especially ones which people all around Ontario and other places such as B.C. can utilize, please let us know so that we can include information in a future edition. As usual there was feedback about book reviews too, which gives us ongoing encouragement to include capsule and full-length reviews of books we think may be of interest to our readers.

In this issue of the Wellness and Recovery Newsletter, we have a review of the new book “Happiness for Dummies” which just hit the bookstore shelves a few months ago. There is also information about two self-help books about a relatively new form of psychotherapy called Acceptance and Commitment Therapy (ACT). Who said that ACT had to always stand for Assertive Community Treatment?

Peer support phone lines are a terrific resource in that they can be so easily accessed, meet consumer/survivors’ social needs, and provide good part-time jobs for consumers. I was fortunate to have an opportunity to sit down with the Co-ordinator of the Progress Place Warm Line and get answers to my questions about how the Warm Line works, and what are its benefits. The result is a two-page article in this issue.

Finally, we have some miscellaneous capsule book reviews, and a list of ‘mental fitness tips’ which CMHA National Office has granted us permission to reprint from their web site [www.cmha.ca](http://www.cmha.ca).

As always, we appreciate feedback from you, our readers.

- G. Dewar

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## **The Progress Place Warm Line**

**“Happiness is knowing you’ve got somebody to talk to.”  
- David Baird, A Thousand Paths to Happiness, pg. 94**

The Progress Place Warm Line is a free-of-charge resource for persons with mental health problems who live in the Greater Toronto Area.

The Warm Line is a peer support phone line which people can phone if they feel they have a need to just talk- you don’t have to have a specific problem or reason to phone beyond that. The Warm Line is operated by Progress Place Clubhouse, which describes itself as “a recovery center for people with severe and persistent mental illness.” The Warm Line is a very helpful addition to Progress Place’s other programs.

The Warm Line is open 8 pm to midnight, seven days a week. Just dial 960-WARM (9276). The Warm Line’s hours were set to late evening so that it would be available when most mental health services are closed for the night.

“Peer support” means that the people who answer calls at the Warm Line are all people who have themselves experienced mental health difficulties. This situation benefits the people at both ends of the phone line: you benefit because the person who answers your call most likely has many common experiences with you (such as dealing with the side-effects of psychiatric medications, and working productively with psychiatrists and case managers) and so can better empathize with your situation; for the Warm Line staff, the Warm Line provides consumers with good part-time jobs.

The Warm Line operated by the Krasman Centre north of Toronto, which serves York Region, is also a peer support line.

The Warm Line receives more than 900 calls each month. Most callers are experiencing some anxiety, and the most frequent reason for calling the Warm Line is loneliness. For loneliness, a call to the Warm Line is an excellent antidote. The staff are trained to listen, but if the caller has difficulty talking, the staff are happy to chat and to carry the conversation. So if you want to call but don’t know what to say, leave it up to the Warm Line staff. Also, it helps some people to jot down in advance some things that they want to discuss on the Warm Line.

Besides anxiety or loneliness, it’s fine to call about any other problem you’re having. The Warm Line staff will not tell a caller what they think the solution to a particular problem is, but quite often a solution will surface during conversation about a problem.

Perhaps the great thing about the Warm Line is that you don’t need to have a big problem to call. And sometimes callers who are calling about something specific won’t immediately give the reason for their call; they may just chat with the Warm Line staff until they feel comfortable discussing their concern with that particular staff. There is no need to “get to the point.”

It should be stressed that the Warm Line is not a “hot line” or crisis line. If a caller is actually in crisis, or wants or needs the kind of help that a crisis line normally provides (eg. A home visit from a mobile crisis team), he or she will be provided with the appropriate crisis line phone number to call.

While the Warm Line cannot take the place of a crisis line or “hot line”, it does welcome calls from people who are trying to decide whether or not to call a crisis line. Sometimes the “pre-crisis” call to the Warm Line gets things resolved. Once a year the Warm Line does a survey, for a period of time, of everyone who calls. One of the questions on the survey is “Has the warm line ever helped you prevent a crisis?” Many people answer “yes” to this question.

Warm Line staff need a combination of sensitivity, and strength to handle the stress of the more difficult calls. Training includes role playing and an emphasis on “active listening” – listening to the caller without interrupting him or her too often.

What are the barriers to using the Warm Line? There are very few:

- Not having access to a phone
- Having access to a phone, but without the needed privacy
- Not feeling comfortable with discussing things with a stranger (it is hoped that reading this article will relieve at least some of this discomfort)
- Not knowing what to say to the Warm Line staff (again, hopefully this article will address that concern)

On the other hand, the Warm Line has some very real advantages:

- It’s free
- No health card, membership, etc. needed to use it
- You don’t have to give any information about yourself- not even your name
- Everything is confidential
- You don’t need to take transit somewhere to take advantage of it (in most cases)
- Something about the phone sometimes makes people feel more at ease for talking to a stranger than doing it face to face

Some people call regularly because they don’t have family or friends that they can call in the evening. Some people call regularly for a period of time when they are going through a troubled time, then stop calling.

Callers range from young to old.

And what, according to Warm Line staff, is the favourite topic of discussion in calls? “Pets” hold this honour, cats in particular.

Whether you want to talk about a pet, or a specific problem, or don’t have anything in particular to talk about, give the Warm Line a call.

Progress Place Warm Line 8 pm – midnight, seven days a week (416) 960-WARM (9276)
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## Poverty, Mental Illness and the Determinants of Health

Over the past decades, researchers trying to determine what determines people's health have found that, actually, a person's health-related behaviour and what goes on between her and her doctor is only a small part of the picture. They determined that, in fact, there are a number of factors, which they called "determinants," which mostly determine a person's health.

Here is a list of the determinants of health, as provided by Wikipedia on the internet ([www.wikipedia.org](http://www.wikipedia.org)) from the Public Health Agency of Canada:

1. [Income](#) and [social status](#)
2. [Social support networks](#)
3. [Education](#) and [literacy](#), i.e. [health literacy](#)
4. [Employment/Working conditions](#)
5. [Social environments](#)
6. [Physical environments](#)
7. Personal health practices and [coping](#) skills
8. Healthy [child development](#)
9. [Biology](#) and [genetic endowment](#)
10. [Health services](#)
11. [Gender](#)
12. [Culture](#)

In this article we are concentrating on the first determinant in the list: income. Income inequality is becoming an increasingly important issue in Ontario. Premier Dalton McGuinty has promised to release a plan by the end of the year to reduce poverty in Ontario, but with the deteriorating state of the economy and the corresponding reduction in provincial government revenues we hope that this promise will not fall by the wayside.

The relationship between low income and mental illness is set out quite well in the "Poverty and Mental Illness" backgrounder available on the web site of the Canadian Mental Health Association, Ontario Division (November 2007, 4 pages). "Experiencing a mental illness can seriously interrupt a person's education or career path and result in diminished opportunities for employment. A lack of secure employment, in turn, affects one's ability to earn an adequate income. As a result, people may eventually drift into poverty." The backgrounder goes on to explain how difficulties in obtaining community services and supports, mental health services, affordable housing and income support can result in chronic poverty.

CMHA Ontario's backgrounder also considers "Why Poverty can Lead to Poor Mental Health." It points out that "for persons who are poor and predisposed to mental illness, losing

stabilizing resources, such as income, employment, and housing, for an extended period of time can increase the risk factors for mental illness or relapse.”

There is much additional information on this subject in the backgrounder, and if you are interested you can go to [www.ontario.cmha.ca](http://www.ontario.cmha.ca) and read and/or download it.

CMHA Ontario has produced a very timely position paper dated June 2008 and entitled “Strategies for Reducing Poverty in Ontario” which may also be downloaded from their web site. It includes a dozen recommendations for a poverty reduction strategy.

The Toronto Central Local Health Integration Network (LHIN) has recently released a “Health Equity Discussion Paper” which can be downloaded from the Toronto Central LHIN web site [www.torontocentrallhin.on.ca](http://www.torontocentrallhin.on.ca) (53 pages). It is accompanied by a five-page summary (also downloadable) which begins by giving examples of how people with low income experience greater health problems. The summary defines health inequities as “differences in health outcomes that are avoidable, unfair and systematically related to social inequality and disadvantage”, with low income being perhaps the prime example. In the report, the author Dr. Bob Gardner writes that “...given the impact of poverty and income inequality on health and health disparities, the Toronto Central LHIN could join existing broad partnerships of the City, community agencies and many others working to develop poverty reduction strategies....a strong voice demonstrating the health impact of pervasive poverty could add significant influence.” (pg. 38)

There are a number of popular movements to reduce poverty. Here are a few:

- The “ODSP Raise the Rate” campaign by Houselink, a housing provider here in Toronto
- The “25 in 5” Network for Poverty Reduction. This campaign demands that our government commit to a plan reducing poverty in Ontario by 25% in 5 years.  
[www.25in5.ca](http://www.25in5.ca)
- “Make Poverty History” – info at [www.makepovertyhistory.ca](http://www.makepovertyhistory.ca)

The next C/S Information Session, sponsored by the Consumer/Survivor Information Resource Centre of Toronto, is to be held on November 4<sup>th</sup>. The topic is What Is Recovery? It will be led by Greg Kim, of the Consumer Participation Initiative, Canadian Mental Health Association, Toronto Branch, and Chair of the C/S Information Resource Centre:

**What Is Recovery?**

1001 Queen Street West  
Malcolmson Lecture Theatre  
November 4, 2008  
7:00 pm – 8:30 pm

## Mental Fitness Tips

Think about your emotional well-being. Assess your emotional health regularly. Consider the particular demands or stresses you are facing and how they are affecting you.

Give yourself permission to take a break from your worries and concerns. Recognize that dedicating even a short time every day to your mental fitness will reap significant benefits in terms of feeling rejuvenated and more confident.

Here are some simple ways to practice mental fitness:

- **Daydream** – Close your eyes and imagine yourself in a dream location. Breathe slowly and deeply. Whether it's a beach, a mountaintop, a hushed forest or a favourite room from your past, let the comforting environment wrap you in a sensation of peace and tranquility.
- **“Collect” positive emotional moments** – Make it a point to recall times when you have experienced pleasure, comfort, tenderness, confidence, or other positive emotions.
- **Learn ways to cope with negative thoughts** – Negative thoughts can be insistent and loud. Learn to interrupt them. Don't try to block them (that never works), but don't let them take over. Try distracting yourself or comforting yourself, if you can't solve the problem right away.
- **Do one thing at a time** – For example, when you are out for a walk or spending time with friends, turn off your cell phone and stop making that mental “to do” list. Take in all the sights, sounds and smells you encounter.
- **Exercise** – Regular physical activity improves psychological well-being and can reduce depression and anxiety. Joining an exercise group or a gym can also reduce loneliness, since it connects you with a new set of people sharing a common goal.
- **Enjoy hobbies** – Taking up a hobby brings balance to your life by allowing you to do something you enjoy because you want to do it, free of the pressure of everyday tasks. It also keeps your brain active.
- **Set personal goals** – Goals don't have to be ambitious. You might decide to finish that book you started three years ago; to take a walk around the block every day; to learn to knit or play bridge; to call your friends instead of waiting for the phone to ring. Whatever goal you set, reaching it will build confidence and a sense of satisfaction.
- **Keep a journal (or even talk to the wall!)** – Expressing yourself after a stressful day can help you gain perspective, release tension and even boost your body's resistance to illness.
- **Share humour** – Life often gets too serious, so when you hear or see something that makes you smile or laugh, share it with someone you know. A little humour can go a long way to keeping us mentally fit!
- **Volunteer** – Volunteering is called the “win-win” activity because helping others makes us feel good about ourselves. At the same time, it widens our social

network, provides us with new learning experiences and can bring balance to our lives.

- **Treat yourself well** – Cook yourself a good meal. Have a bubble bath. See a movie. Call a friend or relative you haven't talked to in ages. Sit on a park bench and breathe in the fragrance of flowers and grass. Whatever it is, do it just for you.

*The above Mental Fitness Tips are reprinted from CMHA National Office's web site [www.cmha.ca](http://www.cmha.ca), with permission.*

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## **A New Self-Help Option: Acceptance and Commitment Therapy (ACT)**

Acceptance and Commitment Therapy (ACT) is a relatively new approach to mental health issues which can be accessed on a self-help basis through several books widely available in bookstores:

“Get Out of Your Mind & Into Your Life” by Steven Hayes, Ph.D. with Spencer Smith (Oakland, California: New Harbinger Publications, 2005, 206 pages)

“The Happiness Trap” by Russ Harris, MD (Boston, Massachusetts: Trumpeter Books, 2008, 245 pages)

I purchased and read the book by Stephen Hayes first as he is the originator of Acceptance and Commitment Therapy, and I have successfully used a number of New Harbinger Self-Help Workbooks in the past. Later I noticed the book by Russ Harris at the bookstore, although it was not evident from the title that it is actually quite a good lay person's guide to ACT.

According to the Wikipedia entry about Acceptance and Commitment Therapy, ACT is a branch of cognitive-behaviour therapy, but “ACT differs from traditional [Cognitive Behavioral Therapy](#) (CBT) in that rather than trying to teach people to better control their thoughts, feelings, sensations, memories and other private events, ACT teaches them to "just notice", accept, and embrace their private events, especially previously unwanted ones....ACT aims to help the individual clarify their personal values and to take action on them, bringing more vitality and meaning to their life in the process.” I would direct the interested reader to the Wikipedia entry ([www.wikipedia.com](http://www.wikipedia.com)) for descriptions of the basic principles of ACT. Interestingly enough, this Wikipedia entry is preceded by warnings in large type that “**A major contributor to this article or its creator has a [conflict of interest](#) with its subject**” and “**The [neutrality](#) of this article is [disputed](#).**”

There is an “official” web site for Acceptance and Commitment Therapy: [www.contextualpsychology.org](http://www.contextualpsychology.org). On this web site Dr. Hayes describes some of the studies which had been done, as of late 2007, to prove the effectiveness of his ACT workbook. I had found some of the exercises in the workbook difficult; Dr. Hayes also addresses this problem on the web site by outlining how readers should approach the book: he suggests skimming through the whole book in a day or two, without doing the exercises, letting the book sit for a day or two, then begin reading it through carefully and doing the exercises. He estimates this process will take “at least a month.”

## Capsule Book Reviews

How to Control Your Anxiety Before It Controls You, by Albert Ellis, Ph.D. (New York, NY: Kensington Publishing Corp., 1998, 244 pages). Dr. Ellis, who passed away last year, founded Rational Emotive Behavior Therapy and laid much of the groundwork for Cognitive Behavioral Therapy. This book is somewhat unusual in that in the last 35 or so pages, Dr. Ellis very helpfully lists over 200 'rational maxims' to help you control and act against anxious thinking, feelings, bodily reactions to anxiety, etc. These exhaustive lists can be very useful.

Money Can Buy Happiness: How to Spend to Get the Life You Want, by M.P. Dunleavy (New York, NY: Broadway Books, 2007, 213 pages). This is a book which wasn't as big a bestseller as some other recent books offering the key to happiness. In it the author uses recent psychology research to give a systematic analysis of how you should best spend your money strategically, recognizing that in most cases simply spending to accumulate "stuff" will only make you happy in the short term. Examples of her strategic spending include: spend to hire housecleaners and babysitters to free up your time; buy yourself peace of mind by hiring an adviser to help you with your investments; and, investing in some good walking shoes to get some inexpensive exercise to keep up your health. These are only a few examples.

Handbook of Positive Psychology, edited by C.R. Snyder and Shane J. Lopez, Toronto: Oxford University Press, 2005, 829 pages. This huge academic tome will provide you with additional interesting reading if you are interested in the books on positive psychology, happiness, etc., mentioned in this and previous issues of the Wellness and Recovery Newsletter.

This book is in the Ryerson University Library in Toronto. So if you are interested in seeing the table of contents (which gives you some idea of the scope of positive psychology as of 2005), just go to the Ryerson University Library on the web at <http://www.ryerson.ca/library/>, and search for the book by title. This will bring up the book's catalogue record which lists all of the papers included in the volume. The catalogue record will also tell you whether or not the book is out on loan, in case you are interested in going to the library and reading some of the book.

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### Reflections on Reading for Self-Help

Recently I came across an interesting quotation from E.M. Forster (1879-1970) which seemed to quite aptly explain why certain self-help books seem to interest one only at certain times: "I suggest that the only books that influence us are those for which we are ready and which have gone a little farther down our particular path than we have yet got ourselves." (from *Two Cheers for Democracy*, 1951).

Have you ever had a situation, for instance, where someone has given you a book but you just relegate it unread to a bookshelf. Then one day years later you are weeding out your books, you come across this particular book, and now you find it very relevant. There is also a widely quoted Buddhist proverb about this: "When the student is ready, the teacher will appear."

**Book Review: “Happiness for Dummies** by W. Doyle Gentry, PhD, Hoboken, NJ: Wiley Publishing, 2008, 328 pages.

This book was released in July, just in time it turns out to give me some good vacation reading. I was browsing the bookstore shelves on the night before leaving for Muskoka, looking for some really interesting and worthwhile reading, when this brand new book caught my eye. I snapped it up immediately and having arrived at camp I found a chair under a nice shade tree at the beach where I read it, alternating every so often with Pat Capponi’s excellent new mystery novel “The Corpse Will Keep” to give my reading some Canadian (Toronto local) content.

The author of “Happiness for Dummies” is a clinical psychologist, who is the Founding Editor of the Journal of Behavioral Medicine. He is also a writer of self-help books. His book provides a broad approach to happiness, looking at life from many different angles and providing advice on how to optimize each of those aspects of life for happiness.

I think the only thing to keep in mind is that it is probably best to just pick out a few things you want to work on, instead of trying to remember all of the advice. I recall some time ago reading a book on stress-busting which had a lot of seemingly excellent advice, but trying to implement even the minimum amount of the advice in the book would have added too much to my stress level. But usually a few pieces of advice in such a book will stand out as the things you should concentrate on.

My thesaurus defines happiness as “a feeling or state of well-being and contentment.” By this definition, happiness may be considered a better measure of being “in recovery” than being free of symptoms of mental illness (something often not possible). One might consider depression to be the opposite or flip side of happiness, but no: according to the thesaurus, depression is only a ‘near antonym’ of happiness. The full opposites or antonyms of happiness are listed as misery, sadness, unhappiness (well, that makes sense), and wretchedness.

Happiness is a different perspective on mental health from that usually employed in the treatment of mental illness. The usual approach, as embodied in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), concentrates on pathological problems of the mind. Happiness on the other hand is now being studied systematically as part of the relatively new field of “positive psychology”. Positive psychology looks more at people’s strengths than at their problems.

Dr. Gentry points out that too many people are passive about happiness- they sit back and hope that it will happen. He states that the purpose of this book is to make its readers proactive, by showing them the things they can do to obtain happiness.

I am more used to using the “For Dummies” series of books to learn new computer software packages than “soft” subjects such as this, although they do seem to have books in the series on everything under the sun. I do like the way that the books in the “For Dummies” series, with their familiar yellow and black covers, can be generally relied on to provide an even-handed overview of a particular topic, and I think this particular book in the series lives up to that expectation.

- G. Dewar

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## How to Subscribe to the Wellness and Recovery Newsletter

The Wellness and Recovery Newsletter is available by Canada Post and by email. To subscribe, contact the C/S Info Centre by phone at 416 595-2882 or by email at [csinfo@camh.net](mailto:csinfo@camh.net). The Newsletter is published quarterly ie. Four times a year. Subscriptions are free.

This Newsletter is a joint effort by the Consumer/Survivor Information Resource Centre of Toronto and the Health Promotion Program of Community Resource Connections of Toronto (CRCT). The C/S Info Centre has for many years published its Bulletin which twice a month brings information of interest to consumers and stakeholders in the mental health system. CRCT works to encourage wellness and recovery of consumers through its Health Promotion Program, Community Support Program, Hostel Outreach Program, COPE Program, and Mental Health Court Support Program. Visit CRCT's web site at [www.crct.org](http://www.crct.org) for information about its programs as well as current information about mental health-related resources, news and events.

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