A first of its kind, the school-based mental health conference held on March 31 was a milestone in the work of a policy group aimed at making the case for integrating a mental health/resilience component in school curriculum. The policy group was created after Friends For Life—a resiliency-promoting program—was piloted in a few local schools. It was evident that without proper funding and commitment, sustaining the program would pose a serious challenge. While students, teachers, and parents loved it, competition for resources and classroom time made it unsustainable.

Led by AMI-Quebec, a policy group was created that includes CHSSN, the Centre for Excellence on Mental Health at the LB Pearson School Board, the EMSB, and a number of community organizations. To better understand the environmental challenges and opportunities, the group embarked on a ‘fact-finding mission’, met with various stakeholders, and explored promotion and prevention programs in Canada and abroad.

The March 31 conference brought together some 400 teachers, school board administrators, community organizations, and government representatives to explore how mental health promotion and illness prevention can be achieved. Additional sites across the province participated via webcam.

The conference opened with an informative and inspirational keynote by Dr. Kathy Short, Director of School Mental Health (SMH-ASSIST) in Ontario. SMH ASSIST is a provincial implementation support team designed to help Ontario school boards promote student mental health and well-being.

Ella Amir, AMI’s Executive Director, was one of four panelists, along with a child psychiatrist, a representative from a school Board, and one from the Ministry of Education, who were asked to share their vision for school mental health, the conditions necessary to achieve it, and what can be done in the immediate term.

The following is a synopsis of Ella’s comments on the panel.

What is your vision for school-based mental health?

**EA:** Good mental health can be described as the capacity of children to cope with the demands presented to them as they move from one developmental stage to another and the ability to establish the foundation for healthy emotional and social development. To achieve optimal mental health, efforts to promote good mental health and prevent ill mental health must be undertaken.

With some 75% of mental illnesses starting in childhood and adolescence, early intervention is common sense; a growing body of research suggests that childhood is the optimal time to influence determinants of social and emotional wellbeing. It’s time for mental hygiene to be at par with physical hygiene! Integrating a resil-

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**Hold the date:**

**40th Anniversary Gala**

We will be celebrating our 40th Anniversary with a Gala on October 12, 2017. It’s going to be a fabulous party with good food, music, a silent auction, and a raffle with great prizes. If you would like to become involved in planning this milestone event, call AMI-Quebec at 514-486-1448 today!
iency component in school curriculum as a strategy for promoting mental health is akin to physical education classes to promote physical health. Before mental health issues are established as debilitating conditions that require costly treatments, we may consider ‘general inoculation’ that is likely to spare many children from unnecessary suffering.

This vision is shared by the Federal Government (in its latest Health Accord), by the Mental Health Commission of Canada (MHCC), and by the Government of Quebec. The “Promotion of mental health across the lifespan in homes, schools, and workplaces, and the prevention of mental illness and suicide wherever possible” was identified as one of six strategic directions in the MHCC’s Mental Health Strategy for Canada. Moreover, the MHCC argues that spending on mental health is an investment in “mental wealth” rather than a drain on the public purse.

Investing in mental health promotion and early intervention is identified as a primary area for investment that would be not only economically wise but also lessen the human burden of illness that can seriously affect a person’s quality of life from childhood through to older age.

And here in Quebec, the 2015-2020 Mental Health Action Plan recognizes the vulnerability of children and youth, especially during transition periods (such as entering primary and high school), and the importance of providing all the support they need in order to facilitate adaptation and develop their potential.

What structures/conditions are needed to support school boards and schools?

EA: Schools and the communities in which they operate are interdependent on one another. To achieve optimal mental health, an integrated vision is required that recognizes the importance of addressing mental health before children arrive at school, while they are in school, and once they leave school. Mental health should be a long-term concern that needs to be nurtured continuously!

So we should consider 3 inter-related stakeholders: schools, communities, and governments, and conditions for success require collaborations and partnerships between the three.

Schools need to identify mental health as a priority and integrate a resiliency-enhancing component into their curriculum. The community can be an important facilitator and promoter of youth resiliency. Community organizations are often not constrained by rigid directives and can use creativity to complement school curriculum. They may also have access to funding that schools may not have. The government is the third player that needs to develop mental health policies and ensure their sustainability. The Quebec Ministry of Health and Social Services has recognized early childhood as a critical period of development and clearly stated that ensuring optimal development of pre-school children is the joint responsibility of the family, the community, and the government. Moreover, it agrees that universal measures need to be taken and that the school milieu is a privileged setting for prevention and promotion because of the time children and youth spend in school.

What can educators do tomorrow to help their schools and classrooms better support students’ mental health?

EA: There are fine examples of community engagement that complements school curriculum in various communities. These kinds of partnerships could, and should, be developed everywhere!

What else can be done? Recognize that when we talk about mental health and resiliency we talk about everybody’s mental health and resiliency: students, teachers, administrators, families. The more comprehensive an approach we embrace, the better the outcomes we can expect.

I would like to flag a special group of youth that so far has been largely overlooked. These are young carers (age 15-24) who play an important role in securing and maintaining the health and wellbeing of family members with chronic health conditions, aging associated needs, injuries, or disabilities. These young carers account for 15% of the total unpaid caregiver population (General Social Survey, 2012). So in a classroom of 30 you can expect to have some 4 students who fit this category! (A survey of 12-17 year old high school students in BC found that 12% of the respondents self-identified as caregivers).

Many young caregivers report positive experience associated with caregiving, such as pride, heightened empathy, maturity, and confidence. But they are also vulnerable to social isolation, mental health challenges and lower education attainment and to difficulties in balancing personal development with caregiving responsibilities. With the current demographic trends we can expect the number of young carers in Canada to rise. It is the joint responsibility of schools and communities to recognize this challenge, and offer the needed support to these individuals.

There is a long way to go, but the conference was a stimulating beginning!

The proceedings of the conference can be found on the Centre of Excellence for Mental Health’s website http://cemh.lbpsb.qc.ca/

STAY INFORMED

Want the latest news about our programs, services, and upcoming events?

Sign up for our emails: www.amiquebec.org/email

Visit our website: www.amiquebec.org

Follow us on Facebook Twitter

Or call us: 514-486-1448 (1-877-303-0264 outside Montreal)
Footsteps away from the wealth of Old Montreal stands a group of disheveled men, one lighting a cigarette as they tell jokes at the entrance of a homeless shelter. The contradiction is unsettling, yet poignant. Matthew Pearce has been running the Old Brewery Mission since 2008, and his progressive mind has this shelter metamorphosing into something not seen in this city.

Mental illness affects about 40% of the men who use the Mission, plus a staggering 80% of the women who use their other shelter, which is the largest service provider to homeless women in Canada. “We were never set up as a place to address and receive those with mental illness,” says Pearce. The Mission pushed back for years hoping other organizations would help the mentally ill, before having a pivotal change in thinking: They shouldn’t be here, but since they are, let’s do something about it.

Pearce forged a partnership with the Department of Psychiatry at the nearby CHUM (Centre hospitalier de l’Université de Montréal). Their Prism Project lifts homeless people back up into the healthcare system. The project is alarmingly simple: a clean and well-maintained dormitory where the residents live in semi-privacy. There are 18 beds for men, 10 beds for women; it’s the largest number of emergency psychiatric care beds in Quebec, including hospitals.

In the project, CHUM provides a full-time psychiatrist at the Mission, plus a social worker, psychiatric nurse, and the Missions’ own staff counselors. “What we’re seeing, once we stabilize people with medical attention and clinical treatment, is that these people are ready to move out and (live on their own),” says Pearce. The success stories are startling. 60 to 80 individuals who used the Mission, some for decades—have left the Mission after a week or two of treatment. Pearce says, “It tells you that these people should not be here.”

For the first time in the Mission’s 128-year history, they now have more housing units than shelter beds. The philosophy is Housing First, that housing is the cornerstone of solving homelessness; Pearce focuses on finding access to independent, permanent, stable places to live. The Mission offers transitional services to help people find apartments, along with supportive ongoing counselling. Financially, they provide rent supplements, which is much cheaper on taxpayers than keeping people at the Mission.

A common factor of homelessness is the lack of caregivers in their lives. “The burden on caregivers—these people who are teachers, archaeologists, bus drivers—they are not equipped, toolled up to be able to do this,” says Pearce. “People get worn down, they need to take care of their own health and they drop the individual just because of survival or burn out.”

Without any caregiver support, the Mission aims to help individuals feel included in society. Staff visit clients’ new apartments once a month or more for coffee. They help them plug into activities in their neighbourhood; breaking the isolation of being alone in poverty. A trend started of former clients showing up at the Mission during the day. There was a resistance to allowing this at first, then Pearce and his staff realized something—this is where their friends are, so the Mission shifted towards being seen as a Community Centre rather than a shelter. They renovated their cafeteria, café, and public areas with bright colours and lots of sunlight to provide welcoming warmth to all.

Tragedy hit in January 2017 in the alley outside their front entrance; there was an altercation where police killed a homeless person. Continued on page 8.
AMI MARKS 40TH ANNIVERSARY

Annual General Meeting in pictures

Sylvie Albert, recipient of the Extra Mile Award, sees the big picture and guides callers in the right direction with warmth, confidence and friendliness.

The recipient of the Monty Berger Award, President Anna Beth Doyle led the organization through the purchase of a new, permanent home, the expansion of programs, and the increase of AMI’s impact. Passing the torch to Norman Segalowitz.

Exemplary Psychiatrist Award recipient Dr. Serge Beaulieu’s expertise, influence, and dedication in the treatment of people with difficult bipolar and other mood disorders has been most significant and is deeply appreciated by his patients and their families.

Donald Desrosiers (r., AMI-Quebec Award for Exemplary Service in the Field of Mental Illness) has 35 years of exceptional commitment to helping caregivers and families with mental illness.

Connie Di Nardo (Volunteer of the Year) “Connie has a wonderful heart and gives generously of her time and energy for the cause of mental health.”

Go online for our Annual Report

AMI’s 2016-17 Annual Report is available online at www.amiquebec.org/ar17. If you would like to receive a copy by mail, call us at 514-486-1448 (1-877-303-0264 outside Montreal).

Upon presenting the Ella Amir Award for Innovations in Mental Health to Matthew Pearce, Director of the Old Brewery Mission, Judy Ross said, “Mr. Pearce, you have certainly contributed to important causes and made the world a better place by your selfless endeavours for humanity.”

Presented with the AMI-Quebec Award for Exemplary Service in the Field of Mental Illness, Lucie Champagne was told that, “It takes a special person like you with a great deal of compassion, strength and enthusiasm to be able to offer the type of emotional and other support you have given over the years to caregivers and their families.”

Sylvie Albert, recipient of the Extra Mile Award, sees the big picture and guides callers in the right direction with warmth, confidence and friendliness.
SUMMER 2017

SUPPORT GROUPS
For family, friends and people with mental illness unless otherwise indicated.
For details visit amiquebec.org/support
Mondays 6:30pm 4333 Côte Ste-Catherine Road (near Cote-Sainte-Catherine metro) unless otherwise indicated. No registration necessary

FAMILY for relatives and friends
July 10, 24; August 7, 21

BPD for relatives and friends
Will resume in September

ANXIETY
July 10; August 7

BIPOLAR DISORDER
July 24; August 21

DEPRESSION
July 24; August 21

HOARDING
July 24; August 21

OBSESSIVE COMPULSIVE DISORDER
July 10; August 7

KALEIDOSCOPE for people living with mental illness
July 10; August 7

SOUTH SHORE for relatives
Wednesdays 6:30pm
Greenfield Park Baptist Church, 598 Bellevue North, Greenfield Park
June 28; July 12, 26; August 9, 23

LIFELINE for people living with mental illness
Alternative Centregens, 3820 Montée St-Hubert in St-Hubert.
Call 450-651-0651 for dates and times.

BOARD MEETINGS
Tuesdays 7:00pm at AMI
July 25

Meet our board at amiquebec.org/board

Gilberte Lamoureux, a recipient of the AMI-Quebec Award for Exemplary Service in the Field of Mental Illness was not present. A pioneer in the area of mental health within the Quebec community, she knows how to diffuse any crisis and will always find the right words to appease any a client’s anxiety.

Dedicated AMI staff members at the end of a long and happy day.

What’s an anniversary celebration without a delicious cake?

Members were invited to contribute to a project illustrating the past, present, and future of AMI.

Meet our board at amiquebec.org/board
It was a November evening, at the time of year where the leaves have all fallen and the snow has not yet come to cover the grey of the sidewalks.

Standing, looking at the door of this small office, my gaze was lost on the sign indicating the Phobies-Zéro meeting.

At that moment, I swallowed my pride and told myself, “Okay, this is where I have ended up…”

I opened that door without high hopes for the future and without really knowing what would happen to me. The only thing I was sure of was that there was no future for me in my current circumstances.

I knew the road I was following by heart in all its twists and turns, and it was leading me nowhere. Always the same routine, the same anxiety that follows you like a shadow.

So why not try something else. I had already tried so many things.

As I entered the office, what struck me right away was the number of shoes in the entranceway. Because one of the words that comes up so often in people’s stories is solitude.

Solitude because we don’t want to bother anyone. Solitude because we are unable to reach out. Solitude because we are embarrassed about who we are, what we feel. Solitude by avoidance.

So many of us are trapped in this vicious circle that we each try in our own way and rhythm to break.

Avoidance is one of the pitfalls that we hit regularly. It is a very sly friend: it comforts us in the moment and allows us to reduce our anxiety, but in reality it keeps us in servitude, gradually reducing our freedom.

This is why the strength of a group is so important. The feeling of belonging, once a week, to a group that understands us, does not judge us, and provides us with support.

Just by being there, with other people, lets us know that we exist, and that we are not alone in this labyrinth. And vice versa; by being there we exercise our empathy for others.

People surprise themselves sometimes by being more gentle and understanding towards other people than they are to themselves. But this is take them. Hope for getting better, but at the same time the loss of hope, the darkness in the tunnel.

We are often stuck between being discouraged and wanting to feel better.

There is also the satisfaction of seeing young people come to our meetings, sometimes with their parents, their brothers, or their sisters.

If I had had these resources in my era, I surely would have spent less time meandering and lost in the vicissitudes of my thoughts.

Thoughts. Another word that comes back often. Thoughts that obsess, that occupy hours of our days and nights, that don’t end, that make us believe we are crazy.

We beg for someone to unplug our brains, or unplug us entirely…

What often discourages us is to see anxiety as a mountain too big to climb. What I am trying now is to go one step at a time, no matter how small. I call this my Benevolent Perseverance.

It is 9:30pm on this beautiful January evening. The support group meeting is done. Some people chat outside the building to continue sharing. I take the metro, satisfied with my evening. It has not been perfect, that has to be accepted.

That is what is also difficult to tame: releasing this quasi-obsessive pursuit of perfection and control, which is what keeps us from enjoying life as it is.

– Rodolphe Belmer


AMI-Quebec generally holds support groups three Monday evenings a month. We have groups for family caregivers only, for those suffering from mental illness, and mixed groups for both. We also hold a support group for families on the South Shore of Montreal in Greenfield Park every second Wednesday. Please see our calendar (p.5) for details or visit amiquebec.org/support

THIS IS WHY THE STRENGTH OF A GROUP IS SO IMPORTANT

A personal experience of a support group

because we attack ourselves continually! Self-denigration and doubt act as weapons of psychological torture.

Today, like so many before me who have come through these doors, I have become a peer support volunteer for Phobies-Zéro.

On that famous November evening, I never thought I would find myself on the other side a year and a half later. Despite living with social anxiety, today I realize that I like animating groups and accompanying people on their path.

No matter what, it is important to always remember that we are not our anxiety or our depression.

And there is a beauty in all the people who come through our doors. They are on a journey, sometimes without knowing it.

When they come, we are not always aware of the whole road they have taken to get to us: research on the Internet, looking up the address, reflecting (sometimes for several months) before deciding to come by.

We pose so many questions on our way to the meeting. Will I be okay? Why am I going? Is it really worth it? Will I be judged?

They are looking for solutions, tools, or are just tired of their situation.

There is always something that drives someone to come through our doors, even if they don’t know where this will
Shedding Light on Borderline Personality Disorder (BPD)

Borderline Personality Disorder (BPD) is a condition that affects the way a person understands him/herself and the way he/she relates to the world around them. Individuals with BPD are highly sensitive and have great difficulty regulating their emotions and impulses. They often experience significant challenges in five areas:

**Emotions:**
- Difficulty managing emotions such as anxiety, depression and anger; their mood changes rapidly, usually in response to a stressful event (this is called emotion dysregulation, which may also be associated with disorders other than BPD).

**Interpersonal Relationships:**
- Difficulty sustaining relationships; fear of being abandoned.

**Self:**
- Difficulty knowing who they are, how they feel and what they like; feeling empty and lonely.

**Behaviour:**
- Impulsive and risky behaviours (substance abuse, binge eating, gambling, self-injury).

**Cognition:**
- Difficulty with concentration or problem solving. Paranoid thoughts in response to stressful events. Delusions and sensations or feelings that aren’t based in reality.

AMI-Quebec offers a variety of programs to help family caregivers cope with the challenges associated with BPD in a loved one. Having a good understanding of the person you love, acquiring skills to communicate and offer support, and at the same time seeking support for yourself, can make a big difference.

**AMI BPD PROGRAMS FOR CAREGIVERS**

These programs will begin again in the fall. Sign up for our emails at amiquebec.org/emails and we will keep you informed about new dates.

**Introduction to Borderline Personality Disorder**
- An introduction session providing basic knowledge on BPD.
  - You may register online: http://amiquebec.org/bpdintro/ or call AMI-Quebec at 514-486-1448.

**BPD Support Groups for Caregivers**
- Self-help support groups for family members of a person with BPD or emotion dysregulation, where participants share their experience and support each other.
  - No registration necessary. For dates and information, visit http://amiquebec.org/support/.

**Family Connections Program**
- An intensive program offered in a closed group setting for caregivers. The program is focused on shared experience and practical tools to help caregivers develop practical skills, better cope, and protect their own well-being. For more information, visit http://amiquebec.org/bpd/ or call AMI-Quebec. **Registration necessary.**

**Useful resources for families and those supporting a person with BPD:**
- Visit our website (http://amiquebec.org/bpd4fam/) for a list of online videos, links to external websites, and titles of books about BPD. It’s a great place to start, deepen your understanding of BPD, and learn very useful skills and strategies.

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**TRIBUTES & MEMORIALS**

| In honour of Eileen Rabinovitch  | In memory of Connie Donovan  | In memory of Monty Berger  |
| Norma and Pearl Nutkevitch       | Muriel Morris Bérubé         | Kay Simpson               |
| In memory of my parents          | In memory of Sarah Gaulin    | In memory of Guus Boudens  |
| Sheila Foley                     | Angie Gaulin                | Kay Simpson               |
| In honour of Marianne Nemitin    | In memory of Eddy Goldberg   | In memory of Karen Blauer  |
| Suliteanu                        | Barbara Holubek              | Cindy Blauer              |
| Barbara and Jerry Sheiner        | In memory of Matthew Duskes  | In memory of Marty Reznick |
| In honour of Norma Block         | Rebecca Samaan               | Marylin and Jeffrey Block |
| Marylin and Jeffrey Block        | In memory of John Simpson    | Sylvia and Bill Klein     |
| In honour of Jackie Shapiro      | Kay Simpson                  | Phyllis and Abe Pinchuk   |
| Norma Block                      | In memory of Douglas Simpson | Deborah Ryan              |
| In honour of Lynn Nulman         | Kay Simpson                  | Kay Simpson               |
| Fanny Stark and Seymour Covienky| In memory of Barbara Simpson | In memory of Gordon, Joan, |
| In memory of Sheila Ted Geraghty | Kay Simpson                  | and Bonnie Calderhead    |
| Beppie Boudens-Alexander         | In memory of May Gruman      | Kay Simpson               |
| Ching Yee Suen                   | Kay Simpson                  | In memory of Jane Smith   |
|                                |                            | Dorothy Barter            |

AMI-Québec extends sympathy to the bereaved and appreciation to all donors for their generosity.

If you wish to honour someone with a donation, please phone 514-486-1448 or visit amiquebec.org/donate.
Homelessness ... continued from page 3

man. Pearce called the Chief of Police and said, “Enough is enough. We have to talk.” Another partnership emerged; the Mission now holds trainings with police officers between shifts, teaching them how to address people having psychotic episodes, breakdowns etc. Moreover, a human link was made. Police officers are now invited to the Mission while on the beat—in full police gear—to have coffee, chat, and serve meals to the homeless.

Over the last decade the metamorphosis has been tremendous. Pearce says, “homelessness as a lifestyle won’t happen here at the Mission anymore.” The shelter has blossomed into a supportive housing organization and triage center. Today Matthew Pearce shifts his attention to prevention. He’s working with young neuroscientists to address root causes like social issues, the fabric of the family, and education systems. He’s getting a better understanding of why people arrive at his doorstep 365 days a year.

The Old Brewery Mission isn’t going anywhere; it’s exactly where it needs to be.

– Marc Griffin
www.oldbrewerymission.ca