Animals as Superheroes
The Mental Health Benefits of Having a Pet

Animals have been humans’ companions for hundreds of years. They are fluffy, furry, feathery, or even scaly! No matter what they are, these little creatures bring a lot of happiness to people. Studies have been conducted to understand how their presence is advantageous to our health, and the results might surprise you. We have put together some of those findings to show how having an animal can benefit you physically and psychologically.

So, what’s the big deal with animals? Take a look!

Psychological Benefits
One of the main benefits of having a pet is companionship. Studies show that pet owners have decreased feelings of loneliness. Even if you can’t have a reciprocal conversation with an animal, you still develop a bond with them that helps you feel like you are not alone.

Having a pet can bring more structure to your daily life. With dogs, it can be taking them out for a walk. For other animals, tasks such as cleaning a cage, changing a litter box, or even just brushing their fur can bring some structure to your daily routine, which can ease stress and even encourage you to do more in your day.

Taking your dog out for a walk encourages you to get out of the house, and this can lead to meeting new people. Going to your local park gives you the opportunity to meet new people and socialize, which is good for your mental health.

Physical Benefits
Having an animal can increase your physical activity, especially with a dog. When you take a dog out for a walk, you are increasing the exercise in your daily routine, and this in turn helps with joint and muscular movement. Studies have shown that this increase in activity improves cardiovascular health and lowers cholesterol levels. It also decreases blood pressure. Some studies even found a decrease in the risk of having a heart attack.

When you pat an animal, your oxytocin levels (the “happy hormone”) increase. This means that just the act of patting and being with an animal can change how you are feeling!

And the physical benefits are not just for the younger population. Studies have shown that older adults who had a cat or dog had better cognitive function than those who did not. This means they were able to remember more details and had a higher attention span.

But most of these benefits are for cat and dog owners!

Your animal doesn’t have to be a dog or cat for you to experience the health benefits we talked about. Although...
some of the benefits apply more when you have a dog or cat, even having a fish in an aquarium can benefit you in many ways. Don’t forget about creatures such as birds, reptiles, and rodents.

What if I can’t have a pet?

If you cannot have a pet, and would like to take advantage of the benefits discussed above, volunteer at your local pet shelter. Most places look for people who can spend time with animals, by walking the dogs or playing with the cats. Contact your local shelter today to learn more.

Bonus: Dog and Cat Cafés Just Around the Corner!

Did you know that Montreal has several cafés where you can pet and interact with dogs and cats? Here are some places where you can find some new furry friends:

Brandy’s Canine Café
828 Rachel East, Montreal, QC H2J 2H6

Café Chat L’Heureux
172 Duluth Est, Montreal H2W 1H3

Café Chato
4833 rue de Verdun, Montreal H4G 1N2

Le Doggy Café
4701 rue St-Denis, Montreal H2J 2L5

— Gabrielle Lesage

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For regular updates, follow AMIQuebec on:

Sign up for monthly emails: amiquebec.org/email

Or call us: 514-486-1448
(1-877-303-0264 outside Montreal)
What is Caregiver Burnout?

Caregiving can be very taxing! Taking care of a family member or friend can take a toll on your physical and mental health, even if you are a resilient person. It is normal to feel overwhelmed, but it is important to make sure you do not drive yourself to a burnout. We put together information that can identify if you are on your way to a burnout, what you can do to prevent it, and how to cope with the challenges that come with caregiving.

What is Caregiver burnout?

Caregiver burnout can be described as emotional, mental, or physical exhaustion caused by the stresses that come with caregiving. This often comes after a long period of time of taking care of an individual. Caregivers can be responsible for many tasks such as scheduling appointments, making sure the person they are taking care of is taking their medication, and helping with basic needs. Caregivers can feel discouraged and can feel like their situation is bleak with no solution.

Is burnout the same as stress?

They both have an effect on an individual, but burnout is more acute than stress. Symptoms of stress can include anxiety, fatigue, difficulty sleeping, change in eating habits, and irritability. Burnout symptoms are more severe and debilitating. Having a burnout is your body’s way of telling you that it needs attention, that it is feeling overwhelmed. It can be easy to ignore stress and burnout symptoms when caring for someone, but it is likely to catch up with you eventually, if you don’t pay attention.

What are the symptoms of burnout?

The following are common symptoms of caregiver burnout:

1) You have significantly less energy than you used to
2) You are more susceptible to catching common illnesses like a cold or the flu
3) You often experience fatigue even when you take a nap or relax
4) You neglect your own needs
5) The majority of your life revolves around caregiving, and it gives you little satisfaction
6) You experience difficulty relaxing and finding enjoyment
7) You are more easily irritable and impatient, especially with the person you care for
8) Increased feelings of helplessness and hopelessness

What can you do to prevent caregiver burnout?

There are many ways you can take care of yourself—the trick is to actually do it! Here are some ways you can take care of yourself and prevent caregiver burnout:

1) Celebrate the small things: Sometimes caregiving can become overwhelming, but by focusing on the small things (and small victories) you can create a more positive mindset, which will help diminish negative feelings.
2) Have something that belongs to you: Even though it might be difficult, make sure you take up a hobby or an activity that is not related to caregiving. Having this allows you to step out of the role of caregiver into something that belongs completely and entirely to you. It is important to not lose your sense of self or your identity, and participating in a hobby helps maintain that.
3) Ask for help: There is nothing wrong with saying “I need a helping hand”. Reach out to friends and family who can provide you with support. They can help with tasks around the house, run some errands, or even simply be a listening ear. Whatever you need, someone can help you.
4) Step out of the house: Sometimes going for a walk to take a breath and clear your mind can do wonders. Walk around the block, or sit outside for a few minutes. Take a few moments in an environment that is not related to caregiving.
5) Reward yourself: You work hard! Give yourself a pat on the back. Eat your favourite snack. Buy a new book. Watch that movie you’ve wanted to see for a while. Whatever it is, give

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SEASONAL AFFECTIVE DISORDER

Just the Winter Blues?

Seasonal Affective Disorder (SAD) is a type of depression that happens during a particular season, most often during the wintertime when there is a decrease in natural sunlight. Some research suggests that SAD is related to a chemical imbalance that occurs because of shorter daylight hours and less sunlight during the winter months. This does not mean that someone can’t have SAD during the summer; it is just not as common. Some people might dismiss SAD as just “the winter blues”, but it is not something to take lightly. Even though it doesn’t last all year, it can seriously affect your health and daily functioning.

**Symptoms**

Like other illnesses, everyone experiences it differently, but here are common symptoms:

- Fatigue, being easily tired
- Less active than before (or not at all)
- Changes in weight and appetite (e.g. craving more carbohydrates)
- Changes in mood (e.g. irritable, more sensitive, more easily upset)
- Changes in sleep (sleeping too much or trouble sleeping)
- Decreased concentration and difficulty making decisions
- Loss of interest in activities
- Feelings of hopelessness and worthlessness
- Not taking care of responsibilities (e.g. housework)
- Decrease in self-care (e.g. grooming, hygiene, eating)

**Risk Factors**

Even though anyone can suffer from SAD, there are individuals who might be pre-disposed to an increased risk of experiencing SAD:

- Women: Research shows that SAD is diagnosed four times more in women than in men.
- Living far from the equator: If you live far North or South, you have more chances of suffering from SAD.
- Family history: If people in your family have suffered from or currently experience SAD, your chance of having it yourself is higher.
- Age: Younger people are more likely to be diagnosed with SAD than older adults.

**Is SAD treatable?**

Yes! There are three different treatments that are common in treating SAD:

1. **Medication:** Usually, Selective Serotonin Reuptake Inhibitors (SSRIs) are prescribed. This is because it is suggested that those experience SAD have irregular levels of serotonin, which is a neurotransmitter associated with mood. The medication helps regulate the neurotransmitter levels. Note that it is important to talk to your doctor about side effects and how they can affect your body.

2. **Light Therapy:** This therapy has been used since the 1980s. Since there is less daylight and sunlight in the winter months, light therapy allows you to have more light in your life, and may relieve symptoms of SAD. The tool used is a light box, which emits an artificial light while filtering out harmful ultraviolet rays. The side effects are usually mild, but some people may experience nausea, headaches, or eyestrain. For that reason the light should be used only 20-60 minutes a day.

3. **Psychotherapy:** The type of therapy that seems to be most effective for those with SAD is Cognitive Behavioural Therapy (CBT). Therapists have used techniques of CBT and created a new technique called Behavioural Activation (identifying activities that are pleasurable for the patient in order to better cope with the winter season).

**What if I know someone who has SAD?**

Even if you are not experiencing SAD, chances are you know someone who is. The best thing you can do is to be supportive. You can offer a listening ear (all the while not trying to “fix” their problems), encourage habits that can help with their recovery, visit them more often, or simply ask them how you can help.

— Gabrielle Lesage
**Post-Traumatic Stress Disorder**

**Trauma Can Affect Anyone**

**What is PTSD?**

Post-Traumatic Stress Disorder is a condition that can develop when a person experiences a traumatic event. Those who suffer from PTSD can relive the trauma they have been through, and experience various physiological and psychological symptoms. A person’s biology, environment, and personal history have an effect on the nature of the trauma and how someone reacts to it.

** Aren’t war veterans the only ones who have PTSD?**

Although many people associate PTSD with those who have been in a war, PTSD can be experienced by anyone who has gone through any sort of trauma, such as natural disasters, an accident, illness, war, or abuse.

**What are the symptoms? How do I know if I have PTSD?**

According to Anxiety Canada, there are four categories of symptoms:

1) **Intrusive Symptoms:** Including recurring memories of the traumatic event, nightmares, reliving the trauma, distress when thinking of the traumatic event, and physiological symptoms when thinking of the traumatic event.

2) **Avoidance Symptoms:** This is when you avoid anything that might remind you of the traumatic event (i.e. avoiding certain conversations, activities, people, places...)

3) **Negative Changes in Thinking or Mood:** Including consistent negative moods, a feeling of detachment, and distorted beliefs of the cause of the trauma (self-blame).

4) **Arousal:** These include irritability, anger, hyper vigilance, and difficulty sleeping.

Typically, a PTSD diagnosis requires 1-2 symptoms from each category. If you think you may be suffering from PTSD, consult a medical practitioner.

It is important to note that while most people start to experience PTSD within three months of the traumatic event, sometimes symptoms don’t occur until years later. Symptoms can appear much later when exposed to increased stress and/or a strong reminder of the traumatic event.

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You could be a caregiver and not even know it
Caregiver Myths Debunked

What is a caregiver? The word and definition itself seem easy to understand, and we know when another person is a caregiver, but there are a lot of people who don’t believe they themselves are caregivers when in fact they are! Here are six caregiver myths that may shed some light on misconceptions you may have about caregiving. It is important to look at this because caregivers deserve help too. If more people knew they were caregivers they could reach out for help to relieve the anxieties and stress that can come with caring for another individual.

Myth: You are a caregiver only if it is a member of your family.

This is definitely not true! There are many people who care for people who are outside of their family circle such as a friend, neighbour, or co-worker. The act of giving care for someone can extend to anyone you want to help.

Myth: You are a caregiver only if the person lives with you.

There are all sorts of caregiving arrangements. The care recipient may live with you, or in another home, live in a residence, or even in a hospital. Some people are live-in caregivers, and some are not.

Myth: You have to provide more than five hours a week to be a caregiver.

Whether you provide a few hours every few weeks, or 24/7, there is no specific amount of hours that defines the role of a caregiver. The definition of caregiver is someone who provides care to an individual; there is no minimum hour requirement. Caregiving situations are different for everyone.

Myth: Caregivers are people who are 65 years and older.

You can be a caregiver at any age. And we are seeing more and more young caregivers in our society. In March 2019, we held the first Quebec-based Young Carers Symposium to highlight the importance of young carers.

We are planning on creating more initiatives that target young carers, so stay tuned!

Myth: There can only be one caregiver for one person.

You might be a primary caregiver, but that doesn’t mean you need to be the only caregiver. There are times when you will need to reach out for help, and those who come and help you become caregivers too. Having a support system like this is important for your health because caregiving can become overwhelming.

Myth: There is no help available for caregivers.

It might seem like there is no help, but there definitely is! Of course, AMI Quebec provides many programs like workshops, support groups, and counselling. We also have an external resource list on our website (amiquebec.org/resource-list/). There are many organizations like AMI that help caregivers according to their specific needs. Don’t be afraid to reach out for help! ☑

— Gabrielle Lesage

TRIBUTES & MEMORIALS

| In honour of Lily Shatsky                  | George Lynes       |
|                                          | Lygia Pietracupa   |
|                                          | Marina Souranis    |
|                                          | Cheryl Watt        |
| In honour of Sylvia and Bill Klein       | In memory of Erika Bloom |
| Martha Widlus                            | Amir Anders        |
|                                          | Katia Billick      |
| In honour of Charlotte Young             | David and Lori Diner |
| Sylvia Klein                             | Joan and Howard Golberg |
| In honour of Dan Wise and Murielle       | David Goodis       |
| Zagury                                   | Leo Kliot          |
|                                          | Suzi Korman        |
| In honour of Robert and Kim Deckelbaum   | Gaetan Liberatore   |
| Rosalie Fagen                            | Joseph Matthews    |
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|                                           | Bonnie and Bart Kitner and Family |
|                                           | Erin Lesser        |
|                                           | Pam and Sari Litman |
| In memory of Marcel Morin                | Natalie Giuffrida Sita |

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.
On October 3rd, a crowd gathered in the Oscar Peterson Concert Hall at Concordia University to listen to the story of James FitzGerald, award-winning author of What Disturbs Our Blood: A Son’s Quest to Redeem the Past. He brought the audience on a journey in discovering the legacy and secrets of his grandfather and father, and shared his own journey of understanding his unconscious and own mental health. Everyone listening was at the edge of their seat as FitzGerald weaved a story of mystery, injustice, and the discoveries that have changed his life.

He began his talk by exploring his childhood. Characterized as a Victorian upbringing, James described what it was like living in a cold environment where personal emotions and struggles were kept secret. We then learned about his father’s struggles with depression, his suicide attempts, and the back-and-forth of diagnoses that James was witness to during his teen years. Learning about what his father went through in the psychiatric wards gave the audience a chilling account of the ways he was treated, at a time when mental illness was seen as shameful, even in the medical community.

After years of psychodynamic therapy and experiencing a cathartic exploration, James took the leap to confront and understand the experiences of his grandfather. After publishing his first book Old Boys: The Powerful Legacy of Upper Canada College, he dove into serious research into the innovations and remarkable career of his grandfather, Dr. Jerry FitzGerald, whose internal struggles and last days provided an important discussion of masculinity vulnerability and how crucial it is to defeat the stigma of mental illness.

The Q&A period provided the time for a conversation on how things have changed today, but that more still needs to be done. FitzGerald advocated for a change in how mental illness is viewed and what needs to be addressed in the medical community. He ended the discussion with an important reminder: “For change to happen, there has to be somebody listening”.

An AMI first: the lecture was livestreamed on Facebook! If you missed it, you can check it out here: amiquebec.org/events.

If you would like to learn more about James’ journey and history, What Disturbs Our Blood is available in the AMI library.

— Gabrielle Lesage

PTSD ...

Does everyone who goes through trauma develop PTSD?

No. According to the National Alliance on Mental Illness (NAMI), about half of the population will experience at least one traumatic event in their lives, but the majority won’t develop PTSD. They might experience typical symptoms that come with a trauma, but they won’t necessarily develop PTSD. Usually, there is an indication of PTSD if the symptoms persist after a few months and interfere with the person’s life in different ways.

What are some treatment options?

There are various treatment options, and different methods work for different people. According to NAMI, there are four therapies that work best for people with PTSD:

1) Cognitive Behavioural Therapy: Changing thought processes by replacing negative thoughts with positive ones.
2) Eye Movement Desensitization and Reprocessing: The individual is exposed to their traumatic memory with various stimuli like eye movements.
3) Exposure Therapy: In a safe environment, the individual is faced with their fears and learns to cope with them.
4) Imagery Rehearsal Therapy: A relatively new way of treating nightmares associated with PTSD.

Visit amiquebec.org/ptsd/ for a list of organizations that can help you or a loved one cope with PTSD.

— Gabrielle Lesage
Burnout ... continued from page 3

... continue to relax and rejuvenate yourself a reward that will please you.

6) Take care of your body: Putting an importance on the number of hours you sleep and the types of food you eat are crucial in maintaining a healthy body and mind. If it seems to be intimidating at first, try working on small things and then doing more and more as time goes by. Small steps every day make it easier and easier.

AMI-Québec holds support groups for families and friends of people living with mental illness three times a month. See p.5 for our calendar or visit amiquebec.org/support.

— Gabrielle Lesage

This issue of Share&Care has been made possible by a grant from the Otsuka-Lundbeck Alliance.

Please visit amiquebec.org/newsletter-sources for references.

— Gabrielle Lesage

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