Mental Health – From Prevention to Wellness

The three speakers on February 27th gave very powerful, moving and informative presentations. Moira Forbes and Ruth Levkoe attended this virtual conference on your behalf.

**February 27th Plenary Meeting**

**Mental Health – From Prevention to Wellness**

Our February 27th Speakers Series featured three compelling speakers: Jennifer Pereira-Ashawasegai, an Anishinabek citizen from Henvey Inlet First Nation in Ontario, Kendra Fisher, a former women’s ice hockey goaltender, and Lori Spadorcia, Chief Strategy Officer at CAMH. The topic was mental health, moving from prevention to wellness.

[Jennifer](http://cfuwontcouncil.org/wp-content/uploads/2021/01/Speaker-Jennifer-Pereira-Ashawasegai.pdf) is an Indigenous Community Liaison officer for a corporation and received a diagnosis of bi-polar disorder more than 20 years ago. Since that time she has shared her story and promoted the benefits of integrating traditional health practices with western methods of mental health treatment for maximum benefit.

She compared the Indigenous world view of health to the Western one. The former is collectivist non-linear, holistic with a oneness with Nature.

On the other hand, our Western views linear, with a focus on illness and medications, and hierarchical. She was given a lot of lithium by Doctors.

She shared the Native Medicine wheel with us and its components of Spirit Creation, Heart/Self, Body and Mind. Emotions are expressed in a number of ways. The Elders say it takes 4 years to change your life. Usually a fasting ceremony, time in a sweat lodge, smudging ceremonies are monitored by helpers begins the process. New neuropathways in the brain are created. Traditional knowledge is used with support from the entire community. She talked about the damage done through the generations from the 60’s Scoop and the Residential Schools taking the children away from their culture and family.

The following was posted on the CFUW website:

The CFUW Speakers Series was privileged to have Jennifer Ashawasegai-Pereira, an Anishinabek citizen from Henvey Inlet First Nation in Ontario speak to our group about her experience as an Indigenous woman diagnosed with bi-polar disorder over 20 years ago.

Jennifer was able to bring us her expertise in how her own mental health story involved engaging with her Indigenous Community and their traditions on her journey to wellness and wellbeing practices. She spoke of how traditional health practices can be brought in to intersect with the current western medicine methodologies to bring a more comprehensive approach to treating mental health amongst all people.

Jennifer also engaged our participants with her work as a helper in traditional indigenous ceremonies and how that has benefited her own wellness through connection to community. Jennifer remarked that traditional indigenous ceremonies have a role to play in assisting people “find their path to wellness, whether that be physical, mental, spiritual or emotional or all of it, and to assist people work through trauma.” The medicine wheel can also to utilized in helping people understand balance in their wellness journey as a means of paying attention to what makes up positive health in our physical bodies.

As part of our mental health, we need to pay attention to our intellectual, spiritual, emotional and physical health as these components of who we are aren’t in isolation to one another. Jennifer’s words were a reminder that though we live in a culture in which our physical health is readily talked about we need to normalize talking about and seeking help with our mental health by allowing it more space to be talked about. #RecoveryisPossible

[Kendra](https://en.wikipedia.org/wiki/Kendra_Fisher) Fisher grew up in Kincardine, Ontario. In 1999, when faced with the opportunity to realize her dream of goal-tending for the Canadian national women’s ice hockey team, she was diagnosed with severe mental illness, forcing her to leave the National Program in order to seek help. Kendra now shares her personal journey in efforts to bring Mental Health issues to the forefront.

Her talk was a raw, detailed description of a life in total turmoil. She kept it private while her public image was of a strong, healthy athlete; nevertheless, she couldn’t maintain that image.

She sustained physical injuries in a major car accident, fracturing her vertebrae, but she recovered through hard work and was prepared to make the Cdn Olympic team. She was in the best physical shape of her life, but her symptoms, similar to seizures and heart attacks were a puzzle to doctors. She ended up locking herself in a bathroom and sobbing, unable to breathe before her tryouts for the Olympic Team. She needed help and someone with her 24/7.

She received help from Team Canada and saw sports psychologists,a psychiatrist, and experts in mental health. Her diagnoses included general anxiety, severe panic disorder, OCD, and clinical depression.

Help came with dieticians, therapists, counselling, medication. She spent 5 years in a drugged state, and knew she needed extreme help or she would kill herself. Cognitive Behaviour therapy saved her life, and practicing Yoga to control panic attacks through deep breathing controlled her out of control episodes. Exercise on a daily basis was crucial and Talk Therapy. Proper nutrition once again played a huge role in her recovery as she gave up processed food, sugar, high fat. She saw a Naturopath who helped with this program and recommended vitamins and supplements. It has been a 10 year journey for her healing from diagnosis to recovery.

She now realizes it is so important to share her experiences and let others know they are not alone and help is available. She has seen too many suicides and was almost there herself.

She is now a firefighter but knows she lives with mental illness and must work at this every day.

This isn’t about stigma but sharing her story and letting others know that there is help. Peer support is crucial. Mental health does not define a person, she said.

The following was posted on the CFUW website:

The guest speaker representing Education was Kendra Fisher. Kendra very boldly told her life story of dealing with crippling mental health, including severe anxiety and depresssion.

Kendra Fisher, a native of Kincardine Ontario was living the life of dreams. As a star goalie, she was recruited by the Canadian National team. With the support of her family and community she was set to fly off to Calgary to live out her dream and life ambitions. She was aware that something was not right as she had been struggling with anxiety for the past year. Upon accepting the position she was overcome with crippling anxiety and did not know if she was cable of attending the training programs. Her father sensing her anxiety, flew to Calgary ahead of her to help her transition into the training. Upon arriving in Calgary she was overcome with severy anxiety, and decided to withdraw. The Canadian National Team stood behind her and offered to get her the best treatment they could provide.

Upon arriving back home she lived with severe anxiety and depression. She became a prisoner in her home and started to fade away. Seeing a psychologist and with the help of her family, she attended an exclusive girls school in Toronto, trying to refocus on her life and refind her identity. Kendra acknowledged going to that school was the worse thing that happened to her.

She spent 5 years of her life, trying to cope everyday. Upon hitting rock bottom, she decided to become her own advocate and use the knowledge and the resources that were offered her. She could not exist on ice cream forever and mental health was not going to be her life sentence. Kendra decided to learn how to live with mental illness.

Once she was on the road to recovery and dealing with her mental illness as part of her life, a friends son’s suicide motivated her to become an advocate for mental health. She decided to use her experience and life skills to reach out to others dealing with mental health. She encouraged us to look in on people and if we noticed anything odd, we should speak up and offer our help. This pandemic had impacted people like never before. We need to take care of each other.

Kendra has started a business Mentallyfit. She loves to speak to school groups and other organizations to remove the stigma of mental health. She is also a firefighter and still plays hockey.

Kendra’s journey and the loss of her life for 5 years was very difficult to listen to. She has taken a dark difficult time in her life and changed it into a life journey to help anyone who is struggling with mental illness. Kendra emphasized that mental health is not a life sentence.

[Lori](http://cfuwontcouncil.org/wp-content/uploads/2021/01/Speaker-Lori-Spadorcia.pdf)  Spadorcia is a passionate advocate and is changing the conversation about mental health, improving awareness and understanding of mental illness and working with governments and communities to improve health systems and policy. She supports the alignment of mission critical activities designed to be responsive to CAMH’s many stakeholders and is engaging partners and resources to better position the hospital to make a sustainable system contribution to mental health.

The following was posted on the CFUW website:

Lori Spadorcia, Senior Vice President, Public Affairs, Partnerships and Chief Strategy Officer at the Centre for Addiction and Mental Health (CAMH), kicked off the third of our very successful Ontario Council Speakers Series held February 27th, 2021. The topic of this event was ***Mental Health - From Prevention to Wellness***. Because of Lori’s experience and position within CAMH, she was able to bring to light the gaps which currently exist for the management of mental health and provided opportunities for advocacy within the mental health framework with some notion of moving into recovery.

Lori emphasised the lasting and discriminatory stigma that mental illness carries. CAMH has developed marketing campaigns to expand awareness and promote mental illness as a health issue instead of a character flaw which delays reporting and treatment of mental health in people suffering its affects, but admitted forward momentum is tough. It is a tremendous challenge to overcome the barriers to objective views of mental health issues. CAMH has developed the tagline – “why do some illnesses get treatment and others get judgement?” Rather than thinking about mental illness as a moral failure or a judicial issue, CAMH encourages its consideration as a health problem.

Because of its history, the challenges for recognition of mental illnesses as a health problem fall into three pillars in the approach to mental health according to Lori – a science gap, a justice gap and an advocacy gap. Investment in understanding the brain has lagged behind other illnesses. Substance abuse is still not discussed in the context of health care and is criminalised. Funding, for example in the case of Cognitive Behavioural Therapy (CBT) is an effective, evidence-based treatment but is not covered by our health system. Interestingly, COVID is putting mental health issues under a microscope and may offer a means for very active and loud advocacy in addressing mental health.

The current climate of increased mental health issues because of COVID’s need for isolation and job/income losses have not only exacerbated mental illness for those already afflicted but have strained the already burdened system as more and more Ontarians, young and old, try to cope with increased fear and anxiety.

Lori showed a chart with information released by the Canadian Medical Association about what contributes to the health of Canadians, citing life issues as affecting 50% of those who are ill. Social determinants are a major contributor to mental health and statistics emphasise that housing and food security are inextricably and critically tied to mental and physical health. CAMH is trying to change the narrative of health to include social determinants as areas which require investment as well.

Mental health problems associated with COVID are being variously described as the shadow pandemic and fourth wave (amongst others). Like other issues (long term care, for example), mental health as an entity has been a crisis for a long time and COVID has only served to highlight the issue.

Women have been particularly affected by COVID, often trying to manage child care, new teaching responsibilities and jobs as essential front line workers or losing their jobs altogether. Recognising this, CAMH has been following women and children and the impact of COVID through surveys to identify the huge impact on mental health that is expected to continue surface and to ready its structures to help.

***Building back better*** (from COVID), the catchphrase of governments, for CAMH means not going back to normal but addressing issues like housing, proper treatment for substance abuse, investment in broadband for education, and investing in children to bring equity to our population. Nevertheless, it is a long journey so Lori iterates that we must keep our eye on science, justice and advocacy. For Lori, science and its collaboration intertwined with community and interconnectedness are front and centre.

The new recognition that mental health matters is to be capitalised on. Every voice must join the fight for mental helath. She implored that CFUW advocate for mental health awareness and especially treatment as the province moves forward, with an inclusive recovery for all.

NOTE: You may be interested in quick history of where Lori works (CAMH) which has been built on the site of the original Ontario Asylum built in 1815 at Queen and Ossington (outside of the Toronto city limits). Of special note is the wall that surrounded the Asylum, built by patients. A portion of this heritage wall remains and is preserved in their memory.

The presentations were followed by a Q&A session when the speakers addressed questions from the audience.