



Supporting Families in Mental Illness

NEWSLETTER | MARCH 2020

Kia ora

Another month has flown by. I hope you can take some time to just enjoy the sunshine and take a breath in your busy day. We have a few things coming up. The Go Kidz programme is starting again at the end of March. This programme is for children between the ages of 7-11 yrs who live in the presence of mental illness and addiction. The programme covers talking about mental health and addiction, learning about feelings, looking at anger, managing worries, stress and grief, mindfulness and coping strategies, getting to know others. If you know of anyone that would be interested in this programme please don't hesitate to contact me 06 355 8561. The Carers Retreat will be held early April this runs from Friday to Sunday afternoon free to carers. If you are interested and would like more information please call me (Christine) or talk to your Family/Whānau worker. Each year people go away feeling relaxed and they enjoy meeting others in a similar situation as themselves.

This month the SF Board is starting to work on the Strategic Plan, looking at where to from here. If anyone would like to send in thoughts or ideas the Board would be very happy to look at them. You can send them into me at christine@manawatusf.org.nz.



Look after yourselves remember if you don't take care of you, you cannot take care of others.

Take care, Christine

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Family/Whānau Coordinator: Kim Mckelvey
Email: kim@manawatusf.org.nz

Consumer Support: Susan Forbes
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Office hours: Monday to Friday 8.30am – 4.30pm
Peer Support hours: Monday to Friday 9am – 4pm

Dannevirke Office

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Phone: (06) 374 8797

Family/Whānau Coordinator: Claudia Nicholson
Email: claudia@manawatusf.org.nz

Office hours: Tuesday to Friday 9am – 3pm

Levin Office

58 Bath Street, Levin (1st floor)
Phone: (06) 368 6116

Family/Whānau Coordinator: Luciana Maru-Hill
Email: luciana@manawatusf.org.nz

Office hours: Tuesday to Friday 9am – 3pm

Palmerston North Office

Whānau Coordinator: Kim Mckelvey
Email: kim@manawatusf.org.nz



Kia ora Palmerston North & Feilding

It has been a busy start to the year, with many new referrals and a number of families struggling with alcohol and drug issues within their whānau. A good resource for families is living well- life strategies for family, whānau and friends of people using alcohol and drugs. This is produced by Kina Families and Addiction Trust. If you would like a copy we have some in the office, just let me know. This resource has some great information and can give hope to families while acknowledging the stress and impact that being around someone using alcohol or other drugs has in families.

Enjoy the sun while it lasts.

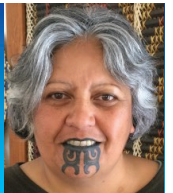
Nga Mihi, Kim

"Success is not final,
failure is not fatal:
it is the **COURAGE**
TO CONTINUE
that counts."

WINSTON CHURCHILL

Levin Office

Whānau Coordinator: Luciana Manu-Hill
Email: luciana@manawatusf.org.nz



Christine and Claudia are looking after the Horowhenua region while I recover from a broken leg. If you need support please don't hesitate to call the office as the phones have been diverted to the Palmerston North office.

Nga mihi
Luciana

Children Understanding Mental Health

GoKids Programme

For children between the ages of 7-11yrs who live in the presence of mental illness and addiction.

Programme Focus

- Help children get the answers they need to make sense of their world
- Discuss and deal with feelings related to living with mental health concerns in the family and whānau
- Teach children how to get support for themselves and their family and whānau
- Understand key messages like "I am not alone", "It's not my fault", "I didn't make it happen", "I can't catch it", "It's not my job to fix it"
- Know that all feelings are okay and to teach strategies to help manage difficult emotions
- Help build children's resilience and ability to live well.

For more information contact Christine on 06 355 8561



St John Health Shuttle

Feilding, Palmerston North and surrounds

Booking essential at least 24 hours prior to appointment

Office hours weekdays 8:30am - 3.00pm

Phone 0800 323 565

In an emergency call 111



St John
Here for Life



Dannevirke Office

Whānau Coordinator: Claudia Nicholson
Email: claudia@manawatusf.org.nz



Kia ora koutou katoa,

Dannevirke has been very steady with referrals and whānau wanting to be informed while their whānau member is going through a very tough time. Coordination with other services is very important with support from Jane Tylee from the Rural Support Trust joining Supporting Families with the development of a Business Lunch in July. I am also looking forward to meeting with the local Rangitane Iwi to present this service with my Manager Christine.

Levin is also busy as I am filling in for Luciana while she is recovering from her accident. The travelling is always an issue, but I have been welcomed by Women's Refuge and ARC's Horowhenua. I seem to have kept up with the referral over this period. Meeting the whānau in Horowhenua has reminded me, that issues that are faced in one area are often similar to issue for whānau in another area.

Currently I am facilitating a Connections with Hope program for Depression in Dannevirke and we have a very enthusiastic group that with humour and fun are looking into how their thoughts, actions and healing are all important and connected. We have 8 more weeks and I am looking forward to each one.

On another happy note I am supporting the Te Ringa Kaha Kapa from Dannevirke by performing for Te Riu o Tamaki in the Regional Kapa Haka Competition. Kapa Haka is a great way of practicing Te Reo Māori, keeping fit and mixing with fun and happy people. Recommend this activity for all people.

Have a great month as we head into Autumn.

Claudia Nicholson

Support Groups

These groups are open to anyone who is caring for someone with mental health issues and addiction.



Palmerston North
Friday 28 March, 1pm
Manawatu Golf Course



Levin
Contact family/whanau worker for more info.



Dannevirke
Contact Claudia for more info.

Supporting Families – Out and About: *Trip to the Beach*





Overall time on social media is not related to teen anxiety and depression: Eight-year study shows screen time isn't the problem

New research found that the amount of time spent on social media is not directly increasing anxiety or depression in teenagers.

The amount of time teenagers spend on social networking sites has risen 62.5 percent since 2012 and continues to grow. Just last year, the average time teenagers spent on social media was estimated as 2.6 hours per day. Critics have claimed that more screen time is increasing depression and anxiety in teenagers.

However, new research led by Sarah Coyne, a professor of family life at Brigham Young University, found that the amount of time spent on social media is not directly increasing anxiety or depression in teenagers.

"We spent eight years trying to really understand the relationship between time spent on social media and depression for developing teenagers," Coyne said about her study published in *Computers in Human Behavior*. "If they increased their social media time, would it make them more depressed? Also, if they decreased their social media time, were they less depressed? The answer is no. We found that time spent on social media was not what was impacting anxiety or depression."

Mental health is a multi-process syndrome where no one stressor is likely the cause of depression or anxiety. This study shows that it is not merely the amount of time spent on social media that's leading to an increase in depression or anxiety among adolescents.

"It's not just the amount of time that is important for most kids. For example, two teenagers could use social media for exactly the same amount of time but may have vastly different outcomes as a result of the way they are using it," Coyne said.

The goal of this study is to help society as a whole move beyond the screen time debate and instead to examine the context and content surrounding social media use.

Coyne has three suggestions to use social media in healthier ways.

Be an active user instead of a passive user. Instead of just scrolling, actively comment, post and like other content.



Limit social media use at least an hour before falling asleep. Getting enough sleep is one of the most protective factors for mental health.

Be intentional. Look at your motivations for engaging with social media in the first place.

"If you get on specifically to seek out information or to connect with others, that can have a more positive effect than getting on just because you're bored," Coyne said.

In an effort to understand teenagers' mental health and their social media use, researchers worked with 500 youth between the ages of 13 and 20 who completed once-yearly questionnaires over an eight-year span. Social media use was measured by asking participants how much time they spent on social networking sites on a typical day. To measure depression and anxiety, participants responded to questions with different scales to indicate depressive symptoms and anxiety levels. These results were then analyzed on an individual level to see if there was a strong correlation between the two variables.

At age 13, adolescents reported an average social networking use of 31-60 minutes per day. These average levels increased steadily so that by young adulthood, they were reporting upwards of two hours per day. This increase of social networking, though, did not predict future mental health. That is, adolescents' increases in social networking beyond their typical levels did not predict changes in anxiety or depression one year later.

Co-authors on the study include BYU professors Adam Rogers, Laura Stockdale, Jessica Zurcher and BYU graduate student McCall Booth.





Mood disorders on genetic spectrum

Researchers shed new light on the genetic relationship between three mood disorders associated with depression -- major depression and bipolar disorder types 1 and 2 -- in a new study.

"The clearest findings are a genetic distinction between type 1 bipolar and type 2 bipolar, and the greater similarity of type 2 bipolar to major depressive disorder," said first author Jonathan Coleman, PhD, a statistical geneticist and postdoctoral fellow in the lab of senior author Gerome Breen, PhD at the Institute of Psychiatry, Neuroscience, and Psychology at Kings College London, UK.

Both types of bipolar disorder used to be referred to as 'manic-depressive disorder'. Mania is a behavioral state associated with behavioral activation, euphoric or irritable mood, reduced need for sleep, impulsive behavior, impaired judgement, racing disorganized thoughts, impulsive behaviors, and frequently strongly held false beliefs (delusions) or hallucinations. Bipolar disorder type 1 is associated with mania and depression, while bipolar 2 is predominately associated with depression marked by mild symptoms reminiscent of mania, called hypomania.

The insights came from several extremely large datasets analyzed together. For their meta-analysis, Coleman, Breen and their co-authors combined genome-wide association studies from three large datasets of people with major depression and bipolar disorder to evaluate shared and distinct molecular genetic associations. Most of the data came from the large international Psychiatric Genomics Consortium. Additional data came from the UK Biobank, a major health resource established by the Wellcome Trust, and the online genetic service platform, 23andMe.

There are significant racial and ethnic differences in the findings from genome-wide association studies (GWAS). The findings of this study pertain only to people of European ancestry and findings might be different in other groups.



The authors also report that the genetic risk for these disorders was predictive of other traits as well. For example, the genetic risk for bipolar disorder was correlated with more educational attainment, while the heritable risk for major depressive disorder was associated with less education.

In the mouse brain, the authors also mapped the genetic risk for these disorders on to particular brain cell types using a sophisticated analytic strategy building on the pattern of genes expressed. They implicated serotonin neurons in the risk for both depression and bipolar disorder, while bipolar disorder distinctively involved GABA and glutamate neurons (nerve cell types also implicated in schizophrenia).

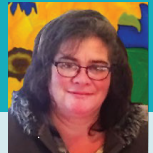
"We have long known that mood disorders are highly heterogeneous and the boundaries between types of mood disorders are often difficult to define clinically," said John Krystal, MD, editor of *Biological Psychiatry*. "This new study suggests that there are aspects of genetic risk, and presumably brain function, that link forms of mood disorders, but there are also distinctions that may shed light on subtypes of depression that may have important implications for treatment."

Ultimately, the researchers want to develop clinical tools to help predict if a first episode of depression is likely to persist as a disorder or progress into bipolar disorder. "Genetic data won't ever replace clinical insight, but it might be a useful addition to clinical models," said Coleman.



Consumer Activity Programme

160 Cuba Street – Entrance on Pitt Street (Beside Chinatown)



Hi everyone

On Wednesday 11th March we will be having a BBQ at the Ashhurst Domain. Our Well Being Support Group is included and our topic is "In Touch With Nature".

For one on one support, please phone Susan on 06 355 8561 to make an appointment, as this will ensure that you get the time and privacy that you need.



Wellbeing Support

Wednesdays 1:00 - 2:30pm

The aim of this program is to provide a peer support group with the theme of wellbeing, this month's topics will look at;

- **Revised Goal Setting:** Is this helpful; do we need to restyle it or break it down further?
- **In Touch With Nature**
- **Making Use Of Our 5 Senses**
- **Mindfulness**



Art Lessons

Tuesdays 12:00 - 2:00pm

Come and enjoy having a tutor to support your creativity.



Lunch

Wednesday 11 March

BBQ at Ashhurst Domain

Leaving centre at 11.30am



Donations and Acknowledgements

We are grateful to be in a position to provide support. However in order to continue to improve and develop our service we require the ongoing support of donors. The ongoing support of your small gift each month is the most effective way to assist our valuable work. All donations are tax deductible, and there are no longer any restrictions on the amount you can claim back. We are still happy to receive donations by cheque made out to **Manawatu Supporting Families in Mental Illness**. Alternatively if you prefer internet payment, this can be set up with the following details:

Manawatu Supporting Families in Mental Illness

Westpac 03 1522 0020097 00

*Please place your **Name/s** under **Particulars** and "**Donation**" under **Reference**.*

A receipt can be issued upon request for tax credit purposes.

We gratefully thank the following for the funding we receive:

MidCentral District Health Board, Lottery Grants Board, The Lion Foundation, Infinity Foundation Ltd, T G McCarthy Trust, Vavasour Trust, Eastern & Central Trust, COGS Manawatu, COGS Taranaki, Mainland Foundation, Community Services Council, Frozen Funds, Milverton Trust, Kingdom Foundation, Heartland Lion Foundation, donations from the general public and of course our members.





February Calendar 2020

Phone: 06 355 85612
Email: consumer@manawatusf.org.nz

Monday	Tuesday	Wednesday	Thursday	Friday
3rd Peer Support	4th Art 12.00pm – 2.00pm	5th Wellbeing Support Group 1.00pm – 2.30pm Revised Goal Setting	6th Craft 1.00 – 2.30 pm	7th Peer Support
10th Peer Support	11th Art 12.00pm – 2.00pm	12th Ashurst Domain 11.30am – BBQ & Wellbeing Support Group 1.00pm – 2.30pm In Touch With Nature	13th Craft 1.00 – 2.30 pm	14th Peer Support
17th Peer Support	18th Art 12.00pm – 2.00pm Lunch 12.00 Noon	19th Wellbeing Support Group 1.00pm – 2.30pm Making Use Of Our 5 Senses	20th Craft 1.00 – 2.30 pm	21st Peer Support
24th Peer Support	25th Art 12.00pm – 2.00pm	26th Wellbeing Support Group 1.00pm – 2.30pm Mindfulness	27th Craft 1.00 – 2.30 pm	28th Peer Support



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The views offered in this newsletter are not necessarily the views of Supporting Families in Mental Illness Manawatu.

Sender:



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