

EWSLETTER MAY 2021



Kia ora

Welcome to the May newsletter. It has been the announcement of the major changes to

the health system by the Government. It will be a interesting to see how this impacts on Mental Health services and SF services in the future.

May is a busy month we have the Carers Retreat, start of the CALM programme and the Women's Expo. We are looking for volunteers to help out at the expo if anyone is interested please call me (06 355 8561).

We will be starting a new Depression programme this month. If there's

anyone interested, or if you know of someone that might be interested, or an interesting week with need more information please don't hesitate to call.

> We are coming up to the colder part of the year, this can be hard on some people please remember we are here to help if you would like a chat or a visit just pick up the phone (06 355 8561) there will be someone to talk to or we will get back to you as soon as we can. Our new Family/Whānau worker for Dannevirke will be starting this month we all look forward to working with Lyn.

Take care and keep safe. Christine

Contents

Regional Updates	2-3
Borderline personality disorder	4-6
Consumer Activities	8
Acknowledgments	9
Calendar	9

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CALL 06 355 8561

www.manawatusf.org.nz

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

If you no longer wish to receive this newsletter, please let Sharon know and she will take you off the mailing list - admin@manawatusf.org.nz

Palmerston North Office

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



Kia ora from Palmerston North & Feilding

The shift into autumn has been so noticeable over the past couple of days, with darker evenings, colder nights, brisker mornings and a noticeable move from me wanting to be outdoors to indoors. I have had to pull out all my winter woollies and change everything out for the next season.

The family retreat is happening this weekend and I'm looking forward to finding out what it is like for whānau to attend and the benefits this has on their wellbeing. Mother's Day is also in May, I hope you have an opportunity to celebrate with your mum's and connect with her in celebrating all the lovely qualities and values that make your mum special.

Other awareness events in May is World Smokefree on the 31st May, this celebrates being smokefree and working towards smokefree/ auahi kore lives for New Zealanders. I hope by 2025 that New Zealand is smokefree as proposed by the government.

Take care and have a great month.

Kim 🙂

Levin Office

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



Teenaa taatou,

Welcome to our May newsletter.

It's business as usual for the new build at Palmerston North Hospital for the Mental Health Acute ward. I attended the workshop and was surprised how much work has been done already. A final feedback on the new design/layout, very exciting. If your wanting more information see our contact details on the front page.

The Age on the Go Expo was a great turn out sharing lots of information with the older persons and services in our community.

Connections with Hope, the anxiety programme is about to start on Wednesday the 5 May 2021, contact me if you want to know more about this programme.

Our April month has been a busy time. Please don't hesitate to reach out for help.

Take care Noho ora mai – stay well **Luciana Maru-Hill** Aka Lulu



Skill based anxiety reduction programme for school aged children

- 8 week course. One hour per session. One session per week.
- Parents attend alongside child. Parents learn theory and reasoning behind the strategies children are learning.
- Practical strategies are taught by the child programme facilitator.
- Based on Acceptance Commitment Therapy, Cognitive Behavioural Therapy and Self Compassion models.
- Children learn skills in mindfulness, relaxation, self compassion and problem solving.

• Adults learn about identifying and managing sensory issues, thinking errors and social difficulties.

School Based Option

- School choose students to attend up to 8 per group.
- Children and parents received Project CALM Programme on school site after school.
- Teaching staff offered a workshop and PD into anxiety reduction

For registration of interest in hosting a Project CALM course contact Supporting Families christine@manawatusf.org.nz 06 3558561

~ 2 ~



Dannevirke Office

Our new Family/Whānau worker for Dannevirke will be starting this month. We all look forward to working with Lyn.



Starlight Bringing Joy, Giving Hope

Our Aim is to bring joy and hope to mental health patients. We want them to know their community cares about them. We drop off welcome packs to Ward 21 and Crisis Respite in Feilding. During the Year we drop in Easter and Christmas gifts.

If you could help us with the following supplies throughout the year we would be most grateful.

- * Toothpaste * Shampoo * Body Wash
- * Tooth brushes * Face cloths * Combs
- * Purse pack tissues * Note books and pens

Items can be dropped into Supporting Families anytime and we will collect and distribute.

Support Groups

These groups are open to anyone who is caring for someone with mental health issues and addiction. For more information contact a family/ whānau co-ordinator in your area.



Palmerston North: Christine, 06 355 8561

Levin: Luciana, 06 368 6116



Dannevirke: Claudia, 06 374 8797



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

~ 3 ~

Borderline personality disorder

About BPD

People who experience borderline personality disorder have a pattern of having very unstable relationships, having difficulty controlling emotions, moods and thoughts, and behaving recklessly or impulsively.

Overall, ten different types of personality disorder have been identified. A diagnosis of personality disorder is only made where the person's problems result in significant difficulty in their day to day activities and relationships, or cause significant distress.

Just as we have physical features that make us who we are, we also have our own distinct personality features. Our personality is the way we see, think about, and relate to ourselves, other people, and the wider world – whether we see ourselves as good or bad, trust or mistrust others, or see the world as a good or bad place.

The term "personality disorder" implies there is something not-quite-right about someone's personality, but that is actually not what is meant by the term. The term "personality disorder" helps health professionals group a set of typical features for people with aspects of their personality that they, and others, may find difficult to deal with.

People experiencing a personality disorder are often out of step with others and with their community or culture and their personal and wider social lives may be considerably disrupted.

Who gets BPD?

Borderline Personality Disorder (BPD) is diagnosed in around 2% of adults and in up to 20% of people using mental health services. It is more commonly diagnosed in women than men.

It is often assumed that borderline means 'a marginal but not full-blown disorder'. This is not accurate. People with BPD are frequently in significant emotional pain.

It was originally thought to be on the 'border' between psychosis and neurosis – that's how it got its name. We now understand people with BPD experience difficulty managing their feelings and this impacts their relationships and behaviour.

A personality disorder such as BPD will show up by late adolescence or early adulthood. It remains relatively stable throughout adult life, and can gradually improve with increasing age. This is in contrast to other mental health conditions, which come and go over time, with periods of illness interspersed with periods of wellness.

The risk of suicide in people who experience a personality disorder is significant.

It is important that if you are having any suicidal thoughts you seek help immediately.

If you are in crisis

If you are in crisis, you may feel your world has fallen apart, that everything is black, that nothing makes sense or that you are in danger.

If you are extremely distressed and need immediate help, you or your family can call the mental health crisis team (which every DHB has) or call 111 for an ambulance.

Get help

Either way you will be assessed by a mental health clinician. Options for care and treatment following a crisis situation are:

- support in your own home (i.e. medication management)
- respite care in a house staffed by mental health or peer workers
- admission to an inpatient psychiatric ward for assessment and management of your symptoms and distress.

Symptoms – Signs to look for

People with borderline personality disorder may experience mood swings and display uncertainty about how they see themselves and their role in the world. As a result, their interests and values can change quickly. People with borderline personality disorder also tend to view things in extremes, such as all good or all bad. Their opinions of other people can also change quickly. An individual who is seen as a friend one day may be considered an enemy or traitor the next. These shifting feelings can lead to intense and unstable relationships.

People with BPD experience some or all of the following:

- frantic efforts to avoid real or imagined abandonment
- intense fear of being alone
- a pattern of unstable and intense interpersonal relationships
- impulsiveness (potentially self-damaging)
- intense anger, that does not fit with the situation, or difficulty controlling anger
- recurrent suicidal behaviour (about 10% of people with BPD take their own lives)
- recurrent self-harm (up to 75% of people with BPD self-injure one or more times)
- ongoing feelings of emptiness
- experiencing minor problems as major crises
- 'black and white' thinking which often means switching between love and hate in personal relationships
- the use of self-destructive coping mechanisms to express, anger, frustration, desperation and unhappiness
- difficulty trusting, which is sometimes accompanied by an irrational fear of other's intentions.

The severity and frequency of symptoms and how long they last will vary depending on the individual and their history of distress.

People who have a diagnosis of BPD

People with BPD may develop other mental health conditions, particularly if stressed. These include eating disorders, social phobia, bipolar disease, posttraumatic stress disorder, depression and drug and alcohol abuse.

It is vitally important for people with personality disorders to learn ways of coping with stress and to seek help early should any of these other conditions arise.

It is important to get diagnosis and treatment as early as possible. With the best possible treatment there is evidence to show people with BPD can live well.

If you think you have a personality disorder, or you are worried about a loved one, it's important to talk to your GP or counsellor or someone else you can trust as a first step to getting the important help you or they need.

What causes BPD?

Unfortunately the causes of BPD are not certain. There is good evidence that development of personality is a combination of our genes and our environment/upbringing.

People with a personality disorder have often experienced trauma or very difficult times, including abandonment, sexual or physical abuse, traumatic experiences, being in an unhappy family/whānau, feeling alienated from people and society, or alienated from their culture or from their faith, or not living up to people's expectations.

Other people with personality disorders cannot identify things that have gone wrong in their lives. They may agree feel their disorder is genetic.

Many believe it is a combination of these things.

It's important to remember that it is not your fault you experience a mental health problem.

Factors that may be important include:

Family history: People who have a close family member (such as a parent or sibling) with the disorder may be at a higher risk of developing BPD or BPD traits.

Sensitivity: People who are emotionally sensitive and reactive may be more likely to be diagnosed with BPD. Being sensitive is not a bad thing but people with BPD find it difficult to learn to manage their feelings.

Brain factors: Studies show that people with borderline personality disorder can have structural and functional changes in the brain especially in the areas that control impulses and emotional regulation. It isn't clear whether these changes are risk factors for the disorder or caused by the disorder.

Environmental, cultural, and social factors: Many people with borderline personality disorder report experiencing traumatic life events, such as abuse (sexual, physical and/or emotional), abandonment, or adversity during childhood. Others may have been exposed to unstable, invalidating relationships, and hostile conflicts. Alienation from culture or faith can be a factor; so can emotional neglect or attachment difficulties in childhood, separation and loss. Similarly, an 'invalidating environment' where the person's feelings are denied, ridiculed, ignored or judged as "wrong" can be factors.

How the doctor determines if you have BPD (diagnosis)

People with personality disorders such as BPD often do not seek out treatment until the disorder starts to significantly impact their life.

Because people with BPD often experience other mental health conditions which may be very similar to symptoms of BPD, it can be difficult to diagnose.

There is no test for BPD. Once you have spent some time talking to your GP, they will refer you to a mental health professional qualified to diagnose and treat people with this condition.

A diagnosis for BPD is made after talking with you about what you have been experiencing, especially around your level of personal functioning and personality traits that may suggest a particular personality disorder.

For this reason, it's important the mental health professional gets a full picture of the difficulties you have had, both from you and your family/whānau or others who know you well if appropriate.

To be diagnosed as having a personality disorder, your pattern of behaviour will be causing you significant distress or difficulty in personal, social, cultural, spiritual and/or work situations.

A careful and thorough medical exam can also help to rule out other possible causes of symptoms.

BPD is usually not diagnosed in children.

Aims of therapy

For many people with BPD, important goals are:

- to overcome emotional problems (such as depression, anxiety and anger)
- to find more purpose in life (e.g. by making a positive contribution to their community)
- to build better relationships
- to learn to trust other people
- to learn how to understand, be kind to, and live with yourself
- to re-connect with your culture and/or faith
- to improve physical health.

Therapy options

Treatment of BPD can involve several things, each of which will be tailored to meet your individual needs. Psychological therapies or counselling are generally seen as the best treatment for personality disorders with medication added only if required. This may include individual, couple, family/whānau and/or group therapy.

Successful therapy should:

- be well structured
- focus on strengths
- focus on cultural and faith issues if applicable
- have a clear focus, whether the targets are behavioural or interpersonal
- provide a framework for coping with risk and suicidality
- be well-integrated with other services
- reduce blame or criticism of clients.

These therapies involve a trained professional who uses clinically researched techniques to assess and help people to make positive changes in their lives. Therapists may come from many disciplines; for example: psychologists, nurses, occupational therapists, psychiatrists and social workers.

Problem solving/skill training

This is often part of an overall approach, but can also be learnt in special skills training groups. They aim to help you learn more effective ways of dealing with problem situations.

All types of therapy/counselling should be provided to you and your family/whānau in a manner that is respectful of you, and with which you feel comfortable and free to ask questions. It should be consistent with and incorporate your cultural beliefs and practices.

Medication

Medication is generally used for treating any other mental health condition that you may be experiencing, e.g. depression. It may also be useful as a short-term strategy to help with coping in times of extreme stress or distress.

If you are prescribed medication you are entitled to know:

- the names of the medicines
- what symptoms they are supposed to treat
- how long it will be before they take effect
- how long you will have to take them for and what their side effects (short and long-term) are.





FRIDAY 21 MAY 2021

JOIN THE MOVEMENT: WWW.PINKSHIRTDAY.ORG.NZ #PINKSHIRTDAYNZ





Thanks for making someone's day a little better.

~ 7 ~



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

Consumer Activity Programme

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



Hi everyone,

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.

Chat 'n' Coffee with Susan Tuesdays 12:30pm - 2:00pm Let's see where this takes us.

Chat 'n' Coffee with Mio Thursdays 10:30am - 12:00pm

Hello my name is Mio. Sounds like "Me–oh". I am a UCOL Student, I will be in the centre 2 days a week, I look forward to getting to know you.

Paper Craft Thursdays 1:00pm - 3:00pm No Craft 8th April.

Lunch – Monday 10 May 12:00pm

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 Tararua, Mainland Foundation, Community Services Council, Frozen Funds, Milverton Trust, Kingdom Foundation, Heartland Lion Foundation, donations from the general public and of course our members.



May Calendar 2021

Phone: 06 355 8561 Email: consumer@manawatusf.org.nz

Monday	Tuesday	Wednesday	Thursday	Friday
3rd Peer Support	4th Chat 'n' Coffee with Susan 12.30pm – 2.00pm	5th Peer Support	6th Chat 'n' Coffee with Mio 10.30am - 12.00pm Craft 1pm – 3.00 pm	7th Peer Support
10th Peer Support Lunch 12 Noon	11th Chat 'n' Coffee with Susan 12.30pm – 2.00pm	12th Peer Support	13th Te Reo Class 11am Craft 1pm – 3.00 pm	14th Peer Support
17th Peer Support	18th Chat 'n' Coffee with Susan 12.30pm – 2.00pm	19th Peer Support	20th Chat 'n' Coffee with Mio 10.30am - 12.00pm Craft 1pm – 3.00 pm	21st Peer Support
24th Peer Support	25th Chat 'n' Coffee with Susan 12.30pm – 2.00pm	26th Peer Support	27th Te Reo Class 11am Craft 1pm – 3.00 pm	28th Peer Support
31st Peer Support	HELP? WWW	CALL 06 355 8561 www.manawatusf.org.nz		

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Sender:



PO Box 5010 Palmerston North 4441