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## Family Support and Involvement Team

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## RESILIENCE

Supporting a loved one with mental illness can have complex effects on family members. While our July 2023 newsletter included amazing stories of success, we want to acknowledge that being a family member can also mean periods of difficulties, which can lead to distress and burn out. Therefore, in this newsletter we wanted to focus on resilience and highlight how families have been resilient through these times.

In this edition, we introduce new employee Katie Cribb, describe resiliency for family members, and share family stories of resilience. We discuss self-compassion and have interviews with Pathways President Shirley Chan, Amy Roomy on self-compassion, and Sasha Gladu from Indigenous Health.



Sometimes supporting your loved one requires you to acknowledge that you are not able and/or capable of providing them with what they need.

Please remember that if your loved one is at risk to themselves or others, the best resources are your local Emergency Department, and 911. In Vancouver, for non-emergencies please contact the Access and Assessment Center (AAC).

### AAC Contact Information

Hours: 7:30 am - 10:00 pm 7 days/week; 365 days/year

Phone: 604-675-3700

Address: Joseph & Rosalie Segal Family Health Centre, 803 West 12th Avenue, Level 1  
(at Willow between 12th and 10th)

## About us...

This Newsletter is brought to you by Vancouver Coastal Health's Family Support and Involvement Team. We assist families with resources, education, information, support, and with facilitating the inclusion of family in the care of their loved ones. We also work with patient and family partners to ensure that clients and families are involved in planning and decision making across Vancouver Coastal Health's Mental Health and Substance Use Services. You can find our contact information on the front page.

The *Family Connections Newsletter* is available electronically, direct to your email inbox. If you don't already receive *Family Connections* via email and would like to stay up-to-date about programs and services for families who are supporting a loved one with mental illness and/or substance use, sign up at [www.spotlightonmentalhealth.com](http://www.spotlightonmentalhealth.com)

By going to this website and clicking on the [Family](#) tab you can find our [Community Resource Guide for Families](#), Vancouver Coastal Health's [Family Involvement Policy](#) and much more.

Thanks for reading!



## Vancouver Family Advisory Committee (FAC)

*A Partnership with Vancouver Mental Health &*

*Substance Use Services*

### Who Are We?

*We are Vancouver parents, siblings, adult children and friends of those living with serious mental illness and substance use. We are individuals with lived experience. We are community agency representatives, Mental Health & Substance Use professionals, and the VCH Family Support & Involvement (FSI) team.*

*Together, we are the Family Advisory Committee.*

***The FAC provides a strong family perspective to improve services for our loved ones, and expand communication and supports for caregivers and families.***

If you feel inspired to join our efforts, or simply want to learn more about the FAC, please check out our page here:

<https://www.spotlightonmentalhealth.com/vancouver-family-advisory-committee/>

To connect, email us at: [VancouverFAC@vch.ca](mailto:VancouverFAC@vch.ca)

**We're always looking for new members!**

## OUR NEW TEAM MEMBER: KATIE CRIBB

We are pleased to introduce our new colleague, Katie Cribb. Katie is working in the role of Consumer and Family Involvement Coordinator, Regional Tertiary Mental Health and Substance Use. She is covering Tao-Yee Lao's maternity leave. Katie supports consumers and family members who are connected with our longer term Mental Health and Substance Use facilities - helping to strengthen the family/consumer voice across the system. Katie answers the following questions below for us.

### *What is your background?*

I am a social worker and recently graduated with a master's degree in Social Work. Last fall, I did a master's practicum in this exact position supervised by Tao-Yee Lau, whose maternity leave I am covering. I really enjoy school and learning so I have a MSW, BSW, and BSc all from UBC.

In my previous career, I was a fully delegated child protection worker. I also have an interest in research and was a Graduate Research Assistant at UBC during my MSW.

### *What is the Regional Tertiary Consumer & Family Involvement Coordinator?*

The Coordinator provides support, education, and resources to family members & consumers who are admitted to VCH Regional Tertiary (long-term specialized care) sites; builds staff capacity in understanding and implementing the Family Involvement Policy including involvement in complex cases, staff consultations, and presentations; coordinates the work of consumer, peer, and family advisors in Regional Tertiary programs; helps strengthen the consumer and family voice and advocates for patient and family-centered care across the Regional MHSU system; and much more!

### *What areas does "Regional" cover?*

Regional Tertiary covers Vancouver, Richmond, North Vancouver, and Sunshine Coast sites, and clients come from Greater Vancouver, Sea to Sky, Central Coast, Sunshine Coast and certain sites in Burnaby and Surrey. In contrast, our Family Support and Involvement Coordinator for Community works with families who live in Vancouver proper, or whose loved ones do. The "Acute" counterpart works with families whose loved ones are currently in a short-term psychiatric facility operated by Vancouver Coastal Health.

### *What are you most looking forward to in this role?*

I am excited to be able to support consumer and family voices to be at the forefront of decision-making. The expertise that comes from lived experience with these systems is so valuable and I feel honored that I have a role in making sure we learn and grow from people's experiences. I want to support the mental health and substance use systems to improve the experience of those who are currently in the system or may be part of these systems in the future.



*Resiliency  
can be  
strengthened  
over time*

## What is Resiliency?

By Katie Cribb

Resiliency during a mental health crisis is often most used in the context of the person directly experiencing the crisis. However, we know that mental health crises do not happen in vacuums and can have huge impacts on the family members and friends of the person experiencing the mental health crisis.

Resilience can look like “bouncing back” to where things were before the crisis or “bouncing forward” to where changes are made which support successful functioning under new circumstances. Resiliency for family members is needed as mental health and substance use journeys may have many periods of highs and lows. Increasing resiliency can help reduce the sense of helplessness during low periods. Resiliency is a skill that can be strengthened over time.



### Common features of resiliency

- Healthy coping skills
- Stress management
- Flexibility
- Sense of purpose
- Sense of humor
- Positivity
- Creativity
- Spirituality
- Support system (people, services, community, health team)
- Curiosity
- Hope
- Problem solving skills
- Emotional Intelligence
- Self-care
- And many more



To build resiliency it can be helpful to recognize your own strengths from this list and reflect on how they can be most helpful during times of increased stress.

Family members may also benefit from having a resiliency story. A resiliency story is an example from your own life of a time that you got through something difficult. If you are struggling to think of an example, perhaps consider what you did to pick yourself up after losing a job, a romantic break-up, or failing an exam. It can be helpful to have a story as during difficult times you can remember it and know that you have gotten through hard times before and can do so again.

### Some questions to consider when reflecting on your resiliency story:

- When did I know that I was going to be okay? How could I tell?
- What coping mechanisms helped me at this time? Do I still have access to these mechanisms?
- Is there anything I would have done differently with hindsight?

Sources: <https://helpstartshere.gov.bc.ca/wellbeing/emotional/resilience>  
[http://navigateconsultants.org/2020manuals/family\\_2020.pdf](http://navigateconsultants.org/2020manuals/family_2020.pdf)

# Family Stories of Resilience

By Sean Ford

For this segment we requested that family members send in stories of what resilience looked like for them when dealing with challenges related to their family member's mental health and/or substance use. The following four stories each highlight different strengths that their family utilized. Thank you to everyone who shared their family's story. We appreciate your honesty and openness.



## Patience and Empathy

Youths' task of individuating is difficult when there are health challenges. In her late teens, my daughter was struck with mental illness (psychosis), autoimmune arthritis, and serious eye inflammation. She had to drop out of her touring dancing corps and then after a second psychosis, she dropped nursing in her final year. She needed me at appointments but resented her lack of independence. She finished a diploma in Early Childhood Education.

During her 3rd episode of psychosis, she was homicidal towards me. There were specific ideas that her mind exaggerated to conclude I was a threat. While I wasn't present, her sister and husband were there to care for their 18-month-old boy. Police took her to hospital. She returned home 10 days later.

For 6 months I waited for her to invite me back into her life. She had endured a waking nightmare about me which I understood would take time to soften. I gave her space and sent small gifts to her through my husband. I gave her peace of mind by not texting or calling. I also didn't show up for extended family gatherings. At 5 months she sent me a curt text for my birthday and mothers' day. "Maybe someday we can be a family again." Then at a tragic family funeral, we sat on the same pew after 6 months of estrangement. "Would you like some gum Bubsie?" She shook her head. My now 2 yr. old grandson never missed a beat "Nanny piano!!!", as if no time had passed. We went off hand in hand to play the church piano. Slowly at her pace, we addressed her delusions of me, allegation after allegation. I evaporated her tears of regret. For a mother and daughter who share an illness, "all time is soon". I understood what others couldn't. I was psychotic for only one day, confused but not paranoid. I remember every detail of what I thought and did until I was sedated. I understand the persistence of psychotic memory.

In those 6 months of waiting, I surrounded myself with loving folk. I saw my psychologist weekly to bolster, plan, and rehearse. I traveled 5 times, ate pie and ice cream, bought myself flowers, and consoled my husband. A mother's love can endure, patiently and expectantly. She calls me more than daily to check in on how I'm doing and to tell me about her day and how much she loves and needs me. Trusting us and ours to hope, health, happiness, and harmony.

*Keep your  
eye on the  
prize, which  
for us is a  
relationship  
with our  
daughter  
that endures.*

### **Perseverance, Humor, and Curiosity**

The number of times I, my husband and our adult son have thrown up our hands in exasperation, anger and outright despair are too many to count. Anyone with a loved one with a serious psychotic diagnosis knows the havoc that mental illness can wreak on a family.

But what is more important are the number of times we have opted to answer our daughter's phone calls, visited her – yet again - in hospital, fed her two cats (yes, daily during one year-long hospitalization), helped her move, cleaned out her hoarded garbage, sought help during emergencies, invited her for dinner, gone for long walks...



Frankly, I'm amazed we've stuck it out. But here we are, still intact as a family and very grateful for what is, after 25 years of severe illness, a period of stability, community reintegration and progress.

How do we find the strength? Every family finds their own way. For us, at least in the early days of psychotic symptoms, it was humor – often “black” humor between myself and my husband over the oddball antics from our daughter. My husband is British and his humor in those days was hilarious. Equally strong was his willingness to stay committed to our daughter, no matter what. It was a powerful message and it helped us survive.

As the years passed, and the chaos and hospitalizations continued, I found strength in Family Support meetings through Vancouver Coastal Health. Knowing we weren't alone, and being able to share joys and heartbreaks was a great comfort. Also, I made it our mission to learn everything we could about the symptoms of psychosis and the impact of a lifelong illness like schizophrenia. I attended conferences, read books and joined advocacy groups. When our daughter was at her worst, I still felt my volunteer work was relevant and helpful, even if not directly targeted at her. Little by little as a family we learned acceptance. We downscaled our future “hopes” and focused on small achievements.

Our journey with our daughter has taught us so much. Tolerance, patience, empathy, respect. We appreciate what she has endured, and her continued struggle. We continue to learn.

My biggest tip for other families? Take a deep breath before you respond to a comment that may be personally hurtful, or an action from your loved one that seems totally off base. Know your boundaries, make them clear....but learn to let the little stuff (even the “medium” stuff) go. Keep your eye on the prize, which for us is a relationship with our daughter that endures.

Cheers,  
“A Mother”

### **Simplicity and Gratitude**

I am compelled to share my story as I am the matriarch and have kept these dark secrets from any other family except for my brother.

A burden of care sits in the body after decades of verbal abuse, worry and anxiety.

Pain, tension and exhaustion with little motivation to get well. spurts of I can do it like the little train

that could. The cost for treatment and therapy in itself is another burden.

This all stems from generations of wounds that were never healed. I continue to see dark clouds on the horizon mixed with lightning although the storm clouds are a little more distant.

My daughter now 41 is calming down but has been verbally abusive for so long that the scars run deep in my psyche and in my heart .

My youngest son is finally in 12 steps and sober and now is going to be a father.

I use simplicity and gratitude to get me through the day and micro dosing psilocybin has really helped.

Thank you family support team for the work you continue to do supporting us.

Sincerely,

A Mother

### Multiple Coping Strategies

My husband and I have one child, a daughter who is now in her early 30's. At about age 15 she became isolated and lonely and started having some emotional problems. Then she started experimenting with drugs, mainly party drugs, but started using crystal meth at about age 19. She has since been hospitalized 17 times since and been diagnosed with a few diagnoses, namely depression, drug induced psychosis, Schizoaffective Disorder and Bipolar Disorder.

Most recently, she was been diagnosed with Schizophrenia and her psychiatrist told us that it is "treatment resistant", so there are few drugs that will help with the psychotic symptoms. In fact, only one seems to work, but she has refused to take that one due to the weekly blood tests required. She is a vulnerable young woman and her life has been saved by staff at her SRO (single occupancy hotel room) numerous times when she has overdosed so that is stressful as well.

It has been a painful journey for our family. So how do my husband and I cope?

We find that the following have helped:

- Keeping in touch with our daughter has helped, but with certain boundaries. We get more worried if we never see her.
- Spending time with immediate family, extended family and friends a few times a week
- Doing physical activities that we like a few times a week. (Swimming, tennis, running, Pilates, resistance)
- When I became quite down, I found the Cognitive Behavioural Therapy skills group very helpful. Your GP can refer you. It is run by Divisions of Family Practice. There is no cost if you attend all of the groups.
- Taking one day at a time or sometimes one minute when things really stressful.
- Attending support groups like Family Connections through VCH or Parents Forever
- Seeing your own counsellor if you need to
- Watching old episodes of Seinfeld and other comedy shows
- Doing deep breathing
- Meditating regularly
- Practicing mindfulness



*Attending  
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Family  
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Parents  
Forever*

## Building Resilience Through Community: Pathways Serious Mental Illness Society

Interview: Shirley Chan | President

By Jessica Gill and Katie Cribb



*We are  
families  
helping  
families.*

For many family members navigating the complex world of mental illness, Pathways Serious Mental Illness Society is a beacon of hope and strength. In this article, we will delve into Pathways and how they play a pivotal role in fostering resiliency within our families.

Pathways is a non-profit organization based in North Vancouver that supports families throughout British Columbia. Pathway's mission is to alleviate suffering caused by schizophrenia and other mental illnesses through mutual support, advocacy and to provide education to community. Pathways' slogan is Families Helping Families. Who is a family member is defined broadly. For example, it could be a parent, grandparent, sibling, friend, or partner.

Pathways understands the toll mental illness can take on family members, the burnout that can result from caring for loved ones, and the need for resiliency. The society offers a wide range of free resources and support for families. From educational programs to peer-led support groups, their initiatives aim to strengthen families' capacity to cope with the challenges they face. They provide a safe space to share experiences, exchange coping strategies, and draw strength from one another.

### **What Pathways offers:**

**Education:** Pathways offers various educational programs, workshops, and webinars that equip families with knowledge about mental health and effective caregiving. Through education, family members can learn to understand the conditions that their loved ones are facing, empowering them to be more resilient when supporting family members.

Their Family-to-family Education Course is an eight-week program. It helps move families who are struggling from denial/confusion/fear to empathy/acceptance/advocacy. This is a free course offered online and in-person.

Pathways also provides educational opportunities for the community at large.

**Peer Support:** Pathways' peer-led support groups provide a sense of belonging and reduce the isolation, shame and guilt often felt by family members. Also, family members are able to connect with others who have similar experiences, which can be validating and supportive.

**Advocacy:** Pathways' helps empower families to have a voice and together advocate for improved mental health services and policies. They participate in advocacy via sending letters and meeting with ministers.

**Online Resources:** The Pathways website, <https://pathwayssmi.org>, has a lot of valuable information on it. All of the upcoming programs, events and workshops are listed there.

## Shirley's Story with Pathways

Shirley became involved with the organization as she supports her daughter who has concurrent disorder. Shirley took the Family-to-Family Education Course thanks to a recommendation from a neighbor who recognized that her daughter may have a mental illness. When Shirley was taking the course things escalated with her daughter. However, thanks to the support of Pathways, Shirley gained tools to deal with this crisis. The support helped her with cope with stigma and learn to navigate the complex health care and criminal justice systems. When she met other families who had shared experience the sense of shame and guilt she had diminished. She learned from the experience of many people who helped throughout the process.

After that experience, Shirley started to support Pathways with fundraising. Then chaired their advocacy and program committees. Six years ago, she joined the board of directors and she is currently the president of Pathways. This is her 6th and final year with the board. Shirley also teaches the Family to Family course and recently became certified to train teachers for the Family-to-Family Education Course. Every time she leads the course, she learns more due to the unique experiences brought by the families. Shirley co-facilitates one of the monthly support groups and also supports families in crisis with one on one calls. Shirley says that providing extra supports to families can alleviate some of the pressure of supporting a loved one with a serious mental illness and encourages family members to take care of themselves.

## From Burnout to Resiliency

For families who are struggling with burnout or feel overwhelmed, Shirley would invite them to join a Pathways support group. There are four to six on-line and in-person groups offered each month. It is important that family members learn to set boundaries and get themselves help first because helping others is difficult if they are stressed, burned out or angry.

Families burn out because they are tired and they do not know what to do or where to turn. Pathways helps alleviate the burnout with understanding, empathy and by sharing the burden. Pathways provides a safe space for families help each other and learn tools such as boundary setting, communicating with their loved one, navigating the system and advocacy skills for themselves and loved ones.

Pathways arms families by building resilience from within to empower families to be the best support system for their family members. Resiliency is not the absence of adversity but the capacity to adapt, learn, and grow despite it. Pathways has made a difference for many family members. Families are supported to hang on and build their strength. Shirley's own experience with her daughter and Pathways brought out resiliency in herself. She had to practice empathy and become more humble. Together, family members can find the strength to face the challenges of serious mental illness with hope and determination.

## Upcoming Events

The family support group runs multiple times a month. Please visit the Pathways' website for the dates and how to self register.

The Annual General Meeting will be in the spring. Members are invited to hear about the success and challenges faced in the past year.

Pathway's primary fundraiser for the past 13 years is the Circle of Strength luncheon. Mark your calendars for Saturday, April 20, 2024. Be prepared to learn about serious mental illness and the work of Pathways during the luncheon.

*Families  
are sup-  
ported to  
hang on  
and build  
their  
strength.*

# Self-Compassion

By Sean Ford

## What is Self-Compassion?

Self-Compassion is related to the more general definition of compassion, sometimes described as being touched by the suffering of others resulting in kindness and the desire to alleviate suffering (Neff). Compassion involves non-judgmental understanding of those who fail or do wrong so that their behaviour is seen in the context of the larger human experience. Self-Compassion is the process of turning this compassion inward towards ourselves and can be further broken down into 3 components: self kindness, sense of common humanity and mindfulness.

### Self-Kindness

Self-Kindness, versus self-judgement or criticism. Self-Kindness is the act of extending kindness and understanding to oneself in a warm soothing manner as a response to distress rather than harsh judgment and self-criticism (Neff). Although the idea of Self-Kindness may sound simple most people can be incredibly harsh and unkind toward themselves, much more so than they would towards a friend or even a stranger. Neff 2009 suggests that those who are able to be kind to one self can have improved psychological health in part because “the inevitable pain and sense of failure experienced by all individuals is not amplified and perpetuated through self-condemnation.”



### Common humanity

A second component is common humanity versus a sense of isolation. A sense of common humanity is described as seeing one's experiences as part of a larger human experience and the recognition that all people encounter hardships and emotional distress at one time or another (Neff). It is normal to become narrowly focused on your experiences when suffering but learning to see these difficult experiences as part of the human condition experienced by many others encourages a sense of connection. A sense of common humanity helps us recognize that we all are worthy of self compassion as opposed to being consumed by self pity and isolation when we are struggling.

### Mindfulness



Finally, self-compassion includes mindfulness versus over-identification. Mindfulness can be described as observing one's thoughts and feelings in a non-judgemental and balanced way. It's often easy to fall into over-identifying in which one can often not see or feel any other aspect of themselves besides their negative feelings (Neff). The act of observing our thoughts non-judgmentally helps to decrease self criticism and see challenges more accurately. The non-judgemental approach of mindfulness also helps lessen self criticism and increase self understanding which directly enhance self-kindness.

### How is self compassion helpful?

Self-compassion may be a valuable coping resource when people experience negative life events. People who are self-compassionate are less likely to catastrophize negative situations, experience anxiety following a stressor, and avoid challenging tasks for fear of failure (Allen). Research suggests that self-compassion can play an important role in the coping process and is linked to various aspects of wellbeing including lower anxiety and depression and increased ability to be empathetic, willingness to forgive an apologize as well as increased social connectedness (Lathren).

### How can it help families?

In addition to helping us on an individual level self compassion is associated with many interpersonal relationship benefits. Self compassion in parent's has been linked to lower parenting stress, that in addition to affecting each individual family member could lead to an intergenerational pattern of self compassion development within families (Lathren). There is also evidence suggesting parent self-compassion is connected to how parents perceive their child's behavior and that self compassion can result in more adaptive thought patterns and coping within the parental context.

### How do I implement self compassion/How do I find out more?

Like most skills in life Self-Compassion takes practice and is developed over time. However even taking small steps to adjust your internal narrative and self kindness can make a big difference. If you are interested in exploring self-compassion and how it could be helpful in your life more information as well as guided practices and exercise are in the resource below [selfcompassion.org](https://self-compassion.org/). Additionally many clinical counsellors incorporate self compassion into their work and could be helpful if further support and guidance is preferred.

#### Resources

<https://self-compassion.org/>

#### Research cited

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*Self-Compassion takes practice and is developed over time*

*Self-compassion is a very direct antidote to working through shame*

## Amy Roomy on Self-Compassion

Clinical Supervisor Kits Mental Health Team

By Sean Ford

**Sean:** Hi Amy, we're speaking today about your understanding and experience with self-compassion. Could you tell us a little bit about yourself, your role at Vancouver Coastal Health and your interest in self-compassion?

**Amy:** Sure, I've been with VCH since 2005, and I've been with the Kitsilano Mental Health Team for six years, where I'm the clinical supervisor. In 2013, I started my PhD focused on self-compassion and completed it in 3.5 years. What propelled me to do the PhD at SFU was my experience working with folks with mental health and substance use concerns; particularly people with histories of trauma, which I feel we all have some form of on a continuum. What made me want to specialize in the field of self-compassion was that I've found that unless someone has some semblance of self-warmth, self-kindness, or positive self-regard that no significant change can happen on a sustained basis.

I was really interested in understanding, not just theoretically, but also through application. So in my dissertation I wrote a group-based curriculum that could be used for the mental health and substance use field that included eight modules with a focus on contemplative practices. I ran that group at Stepping Stones Concurrent Disorders Service. We had very little attrition of attendance because people basically have a deep yearning for a cultivation of self-compassion and a deep need to try and find peace and solace in their life.

**Sean:** That must be a special interaction effect adding the group to the self-compassion work, very different from a one-to-one environment?

**Amy:** Yes, and what's powerful about doing self-compassion in a group are the contemplative practices. You can run a large group and walk people through an experiential exercise. Another effect of self-compassion that is very powerful within a group is that it destigmatizes folks. Shame is often another big component of folks struggling with substance use and mental health concerns, and self-compassion is a very direct antidote to working through shame.

**Sean:** What do you see as the main benefits of self-compassion?

**Amy:** Ian McNaughton is a well-known psychologist here in Vancouver and he described self-compassion as creating "safety in one's consciousness." I thought that was really beautiful, the idea that you feel safe in your own psyche, you feel safe in your own mind. So that's one of the benefits. Another benefit is that around 75% of DSM diagnoses include some form of affect dysregulation or emotional dysregulation and we know that if you can learn to speak to yourself in a self-soothing, kind and mindful way that in of itself is self-regulatory. Self-compassion is very profound in terms of being able to help with emotion regulation. Since many of our folks have a long history of trauma or some form of trauma that the internal triggering that happens from being exposed to events or experiences recapitulates the trauma. Self-compassion helps to calm the nervous system enough so that one doesn't reach the hyper arousal state of feeling highly distressed.



**Sean:** One of the things I can't help but think about during your descriptions is that they seem like such frequent challenges that will come up over and over again with different populations. I wonder if you see it that way and if one of the wonderful aspects about self-compassion is that it is so broadly applicable and useful for varying people.



**Amy:** Yes, I think the lack of self-compassion is pervasive and it's not particular to mental health and substance abuse. So many people suffer from an internal critic or a part of themselves that is not self-nurturing. The self-critic is often unconscious and can lead to a general feeling of sadness in one's daily life.

**Sean:** I feel like this connects really well to the newsletter and the theme of resilience. How do you see self-compassion and resilience interacting together?

**Amy:** Well, if you have some semblance of warmth towards yourself, you have that foundation. I really like the operational definition of self-compassion Kristen Neff talks about which is self-kindness, mindfulness, common humanity. If you are anchored in those, when the difficult adversities of life come up, you're much more likely to be grounded in your body and able to cope with wisdom.

Kristen Neff breaks down those key three aspects in her book Self-Compassion and I love the way she expands this model in many ways. One of those ways is that she also speaks to the flip side of those. The opposite of self-kindness is self-criticism, self-isolation is the opposite of common humanity and mindfulness' opposite is self-absorption. I know I'm getting a bit theoretical, but I like looking at the flip sides in helping understand that they keep one from being in the body. According to Christopher Germer and Neff (2019), the three negative flip side responses of self-compassion are fight, flight, freeze response. The fight is the self-criticism, the flight is the self-isolation, and the freeze is self-absorption. If you're in one of those fight, flight freeze states, you can't have resiliency because you're not really centred in your body.

**Sean:** I hadn't heard that before, I really like that as well too. So, the three aspects of Self-compassion can sort of be a counter for those flip side states.

**Amy:** One of her contemplative practices is to actually use phrases for each so that you're working with some self-kindness, common humanity and mindfulness throughout the day. You just say those affirmations so you can be grounded and then when life happens, you have more reserves to cope.

**Sean:** Absolutely, and you've kind of alluded to this but I was wondering if you can touch on how you've seen these ideas affect the client's you've worked with.

**Amy:** In my last job I worked a lot with people with PTSD (Post Traumatic Stress Disorder). In general, I felt work with self-compassion affected folks so they were finally able to feel connected to themselves in a way that was self-compassionate. The mindfulness aspect helped in being able to be in the present moment. In order for self-compassion to be sustained, it needs to be a daily practice. At first there was a lot of despair and not a lot of confidence it would work. But

*The opposite of self-kindness is self-criticism, self-isolation is the opposite of common humanity and mindfulness' opposite is self-absorption*

*“I  
acknowledge  
my suffering  
with great  
care”*

for those people who really stayed with the practice and developed it, they found it improved their life in general and affected everything, including their relationships.

**Sean:** What are your thoughts on self-compassion in the context of supporting loved ones and perhaps struggling with the process of supporting loved ones?

**Amy:** I think self-compassion training helps families and others. It is important to clarify what it is that they do feel. If they feel that they have caused a part of the suffering of their child or loved one, it helps to be really specific about what that is. Otherwise, it becomes like this gestalt of feeling “I’ve failed in some way” or “I should have done more, or “I could have saved them from this”. Self-compassion is about being really accurate in terms of how someone may have participated and not just making narratives that are much more than one is responsible for. Does that make sense?

**Sean:** yeah, I think so, when you said gestalt, I’m kind of hearing you can fall into this trap of “this is my fault” and “everything is my fault” in a broad sense. Without actually looking at the specific details which will give you a better understanding of what you’re experiencing and what you should and shouldn’t be taking responsibility for”.

**Amy:** Yeah, because the family member’s loved one, their life is much larger than just the interactions they’ve had with the family, much larger. And yet when I’ve worked with families, a lot of the time they will take on full responsibility as opposed to really breaking down all the interactions and being very specific about what, if anything, they could do more of. Because if you’re really specific then you have something to work with as opposed to this very deep shame, guilt and despair, things that aren’t very workable.

**Sean:** Are there any final thoughts that you think could be important to share with families in the general area of self-compassion?

**Amy:** One of the things I’ve done with families, and it’s been very powerful, is that when they feel tremendous pain around their loved one’s suffering and feel overwhelmed by it, I ask them to touch the part of their body that feels pain and just say “I care about my suffering”. Tara Brach developed that approach and it’s powerful because often the family is not getting the support that their loved one is, yet they are suffering just as much. So just trying to acknowledge suffering, and sitting with it without adding the second part of self-criticism and giving into a negative narrative of oneself. Just sitting with “I acknowledge my suffering with deep care”. Self-compassion and self-care are very important for family members as it enables their resiliency and healing. Also, mindfulness can help the family member stay attuned to their loved ones without being overwhelmed by their suffering.

**Sean:** Yes absolutely, and I think that’s a nice place for us to end. Thank you so much Amy for sitting down and doing this and all the work that you do.



# Sasha Gladu on Resilience

## Strategic Lead Indigenous Health

By Katie Cribb

This interview was with Sasha Gladu. Sasha is from Alexander First Nation, which is located in Treaty 6 territory. Sasha and I spoke about resiliency and what it has meant for herself as an Indigenous woman. She also provided some strategies for families and recommended some resources.

### Sasha's role at VCH

Sasha works as a strategic lead for urban populations at Indigenous Health. In this position, Sasha has worked on a variety of different initiatives. Recently, she had a project where her team collected information to conduct a GAP analysis of cultural supports offered by different agencies on the Downtown Eastside. The analysis was used to inform the creation of Indigenous Health's new Indigenous Outreach Team.

### What is resilience through an Indigenous lens?

For Sasha, resilience means having the ability to adapt to stressful situations possible related to trauma. Sasha has a personal connection to this topic because as a single mom of two kids at eighteen-years-old she had to believe in herself. One thing she did was that she went back to post secondary on her own. Following that path opened doors for her and was a big part of her journey. While there were hard days, Sasha says that there was a light at the end of the tunnel.

According to Sasha, Indigenous Peoples' ability to adapt is what makes them so powerful. The resiliency is evident when looking at what Indigenous People have had to overcome and what Indigenous People are currently involved with, for example now there is the first Indigenous Premier, Wab Kinew, out of Manitoba.

### Practical strategies or advice for families?

Healing is a long hard journey but is necessary. To heal, it is important to believe that you have the strength within yourself. Sasha stated that having to overcome intergenerational trauma herself, therapy has been a huge savoir. She has learned to get to a comfortable point with being able to express what she has faced. For some Indigenous People it might feel difficult to talk about traumatic events. However, being able to talk about them has been an important part of Sasha's healing journey. Therapy has helped her build a solid foundation.

Sasha recommends finding people to connect with who have a common ground so that you are less likely to feel like you are going through things alone. It can be helpful to find other people who are also on a healing journey. You may be able to find people through group counseling or even just speaking with co-workers. As Indigenous People are inherently relational, building a support network may be an important step of a healing journey. When you feel like giving up a support network can be a lifeline to keep going.

### Resources?

Sasha recommends the Vancouver Aboriginal Friendship Centre Society, as they are fantastic. They have elder support available and host a sharing circle. Additionally, Urban Native Youth Association has Indigenous youth programming and family culture nights.

## Tidbits from the Family Connections Support Group



This edition's Tidbits include a range of resources and information that we discussed in our VCH MHSU Family Connections Support groups.

### **Variety of Local Resources:**

#### **Pathways' Support Groups**

- **Website:** <https://pathwayssmi.org/weekly-support-groups/>
- **Description:** Pathways Serious Mental Illness Society is a BC-based charity organization. They have a weekly support group for families facilitated by family members. The group provides emotional support, information, resources and resource navigation.

#### **Gastown Vocational Services Supported Employment and Education Services**

- **Website:** <https://www.gvssupport.ca/>
- **Description:** GVS provides education and employment services to people 16-29 with a mental health diagnosis living in Vancouver.

#### **Ask an advocate Program**

- **Website:** <https://askanadvocate.ca/>
- **Description:** Ask an Advocate provides straight-forward information on Income Assistance, Disability Assistance, Tenancy & Housing, and other income support.

#### **CMHA Echo Clubhouse**

- **Website:** <https://vancouver-fraser.cmha.bc.ca/programs/echo-clubhouse/>
- **Description:** ECHO Burnaby Clubhouse supports individuals in their rehabilitation and recovery journey through holistic services that range from vocational (job, volunteering, education), leisure and recreation, health and wellness, to personal education.

#### **Coast Mental Health Peer Support Program and Clubhouse**

- **Website:** <https://www.coastmentalhealth.com/what-we-do/pillar-services/>
- **Description:** The Peer Support Program provides 90 hours of class time and a practicum to support Coast Clients in being able to use their lived-experience to support other clients. After the practicum clients are either placed in a position or able to bid on job contracts. The Coast Clubhouse is located in Mount Pleasant. It offers social, recreation, employment, and education services for Coast members.

## **Variety of Educational Tools:**

### **The Saskatoon branch of the Canadian Mental Health Association**

- **Website:** <https://cmhasaskatoon.ca/find-help/for-family-members/>
- **Description:** This website has a good articles about the experiences and emotions that go with the experience of being a family member to someone with mental health struggles

### **YVR recovery college**

- **Website:** <https://recoverycollegeyvr.ca/>
- **Description:** YVR Recovery College is for people in all stages of mental health and substance use recovery. It has free in-person and online courses on a wide range of topics from Art Therapy to Smart Recovery. As well as support groups run by peers.

## **Book Suggestions:**

### **When Quietness Came by Erin L. Hawkes**

- **Website:** [ErinHawkesEmiru.ca/Quietness](http://ErinHawkesEmiru.ca/Quietness)
- **Description:** Erin Hawkes writes about her own experience developing schizophrenia during her final year of her undergraduate degree. She hopes that this book can support friends and family of people with schizophrenia to be able to sympathize and better understand those afflicted.

### **Unwinding Anxiety by Judson Brewer**

- **Website:** [DrJud.com/book/](http://DrJud.com/book/)
- **Description:** Dr. Jud Brewer wrote this book to support people to break the cycle of anxiety. Dr. Brewer says that Anxiety drives bad coping habits and addictive behaviors and we get stuck in anxiety loops that can be difficult to break out from even with high willpower. This book has techniques and small hacks to uproot anxiety at it's source.

### **I am not Sick I Don't need help by Dr. Xavier Amador**

- **Website:** [www.DrAmador.com/books](http://www.DrAmador.com/books)
- **Description:** Dr. Amador's is a psychologist whose brother has schizophrenia, bi-polar disorder and addictions. Dr. Amador struggled to get his brother to accept his diagnosis and the treatment for it. This led Dr. Amador to conduct research on Anosognosia (lack of insight) as a symptom of schizophrenia. In this book he provides a plan on how to communicate with your family member when they have Anosognosia in a way that builds trust based on his research.

*Websites,  
Resources,  
Books, recommended  
reads!*

The Family Connections  
Support Group

Like many other resources during COVID, we have moved our groups to ZOOM meetings. Family and supporters are free to attend on a regular basis or drop in as needed, like in our regular meetings. If you would like to receive an invite to our Support Group, please contact us and we will happily add you to our invite list!

*\*We do not meet on STAT holidays.*

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## MORE FAMILY SUPPORT GROUPS



**PLEASE CALL/EMAIL AHEAD TO CONFIRM DATES AND TIMES**

**Parents Forever** – Support group for families of adults living with addiction. Group meets weekly via Zoom on Friday evenings. Contact Frances Kenny, 604-524-4230 or [fkenny@uniserve.com](mailto:fkenny@uniserve.com)

**SMART Recovery** meetings for families are back! Tuesdays 6:00-7:00pm, <https://smartrecovery.zoom.us/j/91012011101> Meeting ID: 910 1201 1101; Also search for a local meeting here: <https://meetings.smartrecovery.org/meetings/location/>

**BC Schizophrenia Society Family Support Groups** - for family members supporting someone with serious mental illness. Local listings of BCSS support groups across B.C. regions can be found here: <https://www.bcss.org/support/bcss-programs/family-support-groups/>. You can also contact the Coastal Manager @ 604-787-1814 or [coastmanager@bcss.org](mailto:coastmanager@bcss.org) for more details on the groups and to register.

**VCH Eating Disorder Program – Family & Friends Support Group** – for friends and family members of individuals living with an eating disorder. Contact Colleen @ 604-675-2531.

**Borderline Talks** - for individuals living with Borderline Personality Disorder (BPD) or Traits, and their loved ones. Zoom group every Sunday at 4pm. Check <https://bpdsupportgroup.wordpress.com/finding-help/>

**Pathways Serious Mental Illness** (formerly Northshore Schizophrenia Society) - weekly online support groups, and family to family education sessions. For more information on the next support group: <https://pathwayssmi.org/weekly-support-groups/>

**Pathways Clubhouse Chinese Family Support Group** – Catered to Chinese-speaking (Cantonese and Mandarin) individuals and families, who are caring for a loved one with mental health issues. 2nd Saturday of each month from 1:00pm to 4:00pm via Zoom. Part 1 (1:00pm-2:30pm) is a free talk delivered by a guest speaker and Part 2 (2:45pm-4:00pm) is a Heart to Heart Support Group Sharing. Additionally the 4th Saturday of each month has a face to face support group at the Pathways Clubhouse. Contact Lee Ma at [Lee.Ma@pathwaysclubhouse.com](mailto:Lee.Ma@pathwaysclubhouse.com) or 604-761-3723 for details.

**Alcoholics Anonymous**— Support groups for individuals looking to stop problem drinking. Local meeting locations can be found here: <https://www.aa.org/find-aa>