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## Chapters

### **Saskatoon Chapter**

304-506-25th Street East

Saskatoon, SK

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(306)374-2224

### **Regina Chapter**

Box 305 Station Main

Regina, SK

S4P 3A1

This newsletter sponsored by



## Eli Lilly - Moving Lives Forward Scholarship awarded to 3 Individuals for 2009

The 2009 Moving Lives Forward Scholarship was a great success this year. This year we broke all records with the number of applications received. In total we received over 25 applications, all of them from very qualified individuals from all over the province. It was a very difficult decision to narrow it down and choose just 3 but our Awards Committee did an excellent job.

An award of \$1000.00 was given to each of the 3 winners for 2009. They are Sheena Tremere of Saskatoon, Chris Kambeitz of Weyburn and Joanne Maisonneuve-Speers of Martensville.

Sheena Tremere's goal is to become a Music Therapist. She is currently enrolled at the U of S in Saskatoon taking her prerequisite classes in order to attend Capillano University in Vancouver, BC. Sheena says that she loves music and wants to share it with other people to have a positive impact on peoples lives. She says it has helped her to grow and cope with life and wants to assist others to be able to do the same.

Chris Kambeitz is currently enrolled at the Kelsey SIAST campus in Saskatoon and is taking his Heavy Equipment and Truck Transport Technician Certificate. Chris has been quite involved with the Canadian Mental Health Association in Weyburn and has, through them, and working with his family on the farm, realized again a life long interest in mechanics. He says that having a mental illness has been a challenging and humbling experience and is very excited at having been accepted into this SIAST program.

Joanne Maisonneuve-Speers is currently enrolled in the Bachelor of Arts Program at the University of Saskatchewan. She is a single mom majoring in Sociology and Psychology. Joanne's goal is to work in the area of transitioning to employment, delivering life skills and community liaison work. Joanne currently holds a Life Skills Coach certificate from Assiniboine Community College in Brandon. With these classes she is well on her way to accomplishing her goal. She says that her decision to move from the back of the classroom to the front again excites her and gives her the opportunity to give back armed with knowledge of mental health issues, overcoming stigma, managing illness and implementing coping skills in daily life.

To each of this years winners of the scholarship we say congratulations and wish you the best with your goals and dreams. You were all very deserving of the scholarship!

Thanks to Eli Lilly Pharmaceuticals for their donation of \$3000.00 again this year. Their ongoing support of this scholarship over the years has helped many people with their educational goals.



## Government of Canada helping those who are homeless or at risk of homelessness in Regina

**REGINA, SASKATCHEWAN, October 13, 2009**—The Government of Canada is helping those who are homeless or at risk of becoming homeless build a stronger future for themselves.

Mr. Andrew Scheer, Member of Parliament for Regina—Qu'Appelle, on behalf of the Honourable Diane Finley, Minister of Human Resources and Skills Development, announced today that a Homelessness Partnering Strategy investment will be used to help construct the support service area in a new local housing facility.

“Our government is supporting many Canadians with housing needs and is fulfilling our commitment to help those seeking to break free of the cycle of homelessness and poverty,” said Mr. Scheer. “Through this investment, Ehrlo Community Services will be able to help adults who are homeless or at risk of being homeless, and who have chronic mental health challenges.”

With this investment of \$603,786, Ehrlo Community Services will construct and develop the support service area in a new supportive housing complex that will help homeless and at-risk individuals live independently in the community.

“The strength of this project is based on strong partnerships between all levels of government, the health region, Phoenix Residential Society, and Ehrlo Community Services,” said Mr. Malcolm Neill, Vice-President of Ehrlo Community Services. “This project also addresses a priority population identified in the Regina Community Plan 2007.”

In September 2008, the Government of Canada announced \$1.9 billion over five years for housing and homelessness programs for low-income Canadians. This commitment provides the Government with the flexibility to work with the provinces and territories, municipalities and charitable organizations to develop ways to improve the effectiveness of federal spending in the area of housing and homelessness.

This ongoing funding will ensure that the Government can continue to assist those who need support, including homeless people and those at risk of homelessness—low-income Canadians, seniors, people with disabilities, recent immigrants and Aboriginal Canadians.

Canada’s Economic Action Plan is building on these investments by making an additional one-time investment of more than \$2 billion over two years in new and existing social housing, and by making available up to \$2 billion in loans to Canadian municipalities over two years for housing-related infrastructure improvements. To learn more about Canada’s Economic Action Plan, visit [www.actionplan.gc.ca](http://www.actionplan.gc.ca).

The provision of safe and stable housing and related supports is an important element for addressing homelessness and helping individuals achieve greater self-sufficiency and improved quality of life. The Homelessness Partnering Strategy therefore places an emphasis on longer-term transitional and supportive housing through a housing-first approach to help people overcome homelessness.

# Holiday Apple Crisp with Cranberry sauce

*This is a good recipe to use up the left-over cranberry sauce from you holiday meal*

**Prep Time:** 15 min      **Cook Time:** 45 min      **Servings:** 8

### Ingredients:

4 Granny Smith Apples—peeled, cored and sliced	1 cup rolled oats
1 1/2 cups whole berry cranberry sauce (canned or fresh made)	2/3 cup packed brown sugar
1 cup whole wheat pastry flour	2/3 teaspoon ground cinnamon
1/2 cup butter, melted	

### Directions:

1. Preheat oven to 350 degrees
2. Place apple slices in a 8 or 9 inch square baking dish. Spread the cranberry sauce over the apples. In a medium bowl, stir together the flour, oats, brown sugar, cinnamon and butter until crumbly. Sprinkle over the apples and cranberry sauce, covering completely.
3. Bake for 45 minutes in a preheated oven, or until apples can be easily pierced with a knife and topping is browned.

# Alberta changes Mental Health Act

Thursday, October 1, 2009—CBC News Online

Alberta has made changes to the Mental Health Act that were recommended three years ago following an inquiry into a standoff that led to the death of an RCMP officer in 2004.

One of the amendments, proclaimed into law Wednesday, broadens the criteria under which a patient can be involuntarily admitted to hospital. Previously, involuntary admissions could only occur when the patient presented "a danger to self or others."

The amendment widens that requirement to including patients seen to "suffer substantial mental or physical deterioration or serious physical impairment."

"We can step in earlier, get them turned around and back into the community quicker," said Dr. Michael Trew, senior medical director for addictions and mental health for Alberta, adding the changes have been in the works for year, and put the law in step with those in other provinces.

The changes were recommended by provincial court Judge Peter Ayotte, who led an inquiry into a February 2004 incident in Martin Ostopovich, a 41-year-old diagnosed with paranoid schizophrenia, shot and killed RCMP Cpl. James Galloway, 55, in Spruce Grove, west of Edmonton. RCMP officers then shot and killed Ostopovich.

Ostopovich, who had a history of mental illness, had been committed to a hospital psychiatric ward but discharged himself before his treatment was completed, even though the psychiatrist who treated him felt he was still a risk. The law wouldn't allow her to keep him in treatment against his will.

In his recommendations, Ayotte said changes needed to be made to the Mental Health Act to allow psychiatrists to keep patients in hospital for 30 days even if their initial symptoms have disappeared.

He also recommended the province introduce community treatment orders, which would force patients to continue treatment in the community.

The province intends to introduce community treatment orders in early 2010.

## **Closing of acute care beds highlights issue**

Colin Simpson, regional director of the Schizophrenia Society of Alberta in Edmonton, said he was "thrilled" with changes that will allow families to intervene when they see people with mental illnesses start to deteriorate.

However, he called Wednesday's announcement a "mixed blessing" in light of the province's recent announcement that it will be closing 246 psychiatric acute care beds at Alberta Hospital and moving patients into community care options.

"We're still very worried that even if a person is involuntarily committed, where will they go?" he said. "When those beds go, we're really not sure that they're not going to be available so they would make the changes in the legislation somewhat moot."

Changes in legislation needs to be backed up with beds and facilities people need to recover, Simpson said.

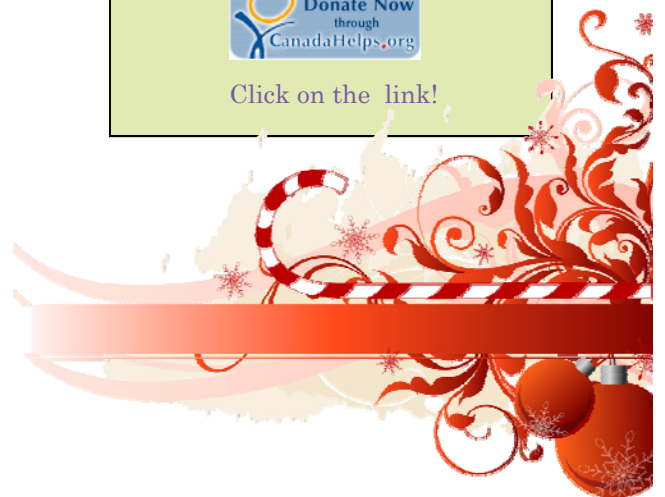
But Trew said the acute care beds will be there for the people who need them.

"We anticipate those acute care beds will be shifted to some of the other community hospitals within Edmonton so the net number of beds that are available for this kind of acute care will not actually drop," he said.

Online donations accepted at  
<http://www.schizophrenia.sk.ca>



Click on the link!



## Income Program Opens to People with Long-Term Disabilities - SAID

People with significant, long-term disabilities no longer have to rely on social assistance following the launch of the province's new Saskatchewan Assured Income for Disability program (SAID).

More than 3,000 people who are eligible for the new program have been invited to enroll by the Ministry of Social Services, as part of the program's implementation, with the first benefits to be paid for the month of December. So far, more than 2,000 people have already enrolled in the new program.

"For the first time, Saskatchewan people with long-term disabilities have their own separate income program," Social Services Minister Donna Harpauer said. "As requested by the disability community, the new program has fewer reporting requirements and will be less intrusive than social assistance."

The SAID program was designed in collaboration with members of the disability community and will provide an income for people with significant, long-term disabilities that is separate from the Saskatchewan Assistance Program (SAP). Financial benefits and amounts will remain the same as those currently provided through SAP. However, people enrolled in SAID will not have to re-verify their disability status on a routine basis. Enrollees in SAID will also continue to receive Supplementary Health Benefits.

Participation in the new program is voluntary. People on social assistance with significant, well-documented, long-term disabilities are eligible for SAID, and have been invited to enroll, if they:

- live in residential care or family care settings with an assessed level of care of two or higher; or
- live in a Social Services or Mental Health Services group home.

A Program Implementation Advisory Team (PIAT), comprised of members of the disability community, has been established to provide advice on the implementation and development of the new program. PIAT members continue to meet with agencies and clients to gather feedback on the processes being used for the implementation of SAID. The team is also working with ministry officials to draft terms of reference for a staff training strategy, and for an assessment process that may be utilized in the future development of SAID.

For more information, please call 1-888-567-SAID (7243) or visit the Ministry of Social Services website at <http://www.socialservices.gov.sk.ca/SAID>.



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## **ABILIFY™ now available in Canada with several benefits: efficacy, good safety, tolerability and neutral impact on weight, cholesterol and blood sugar levels**

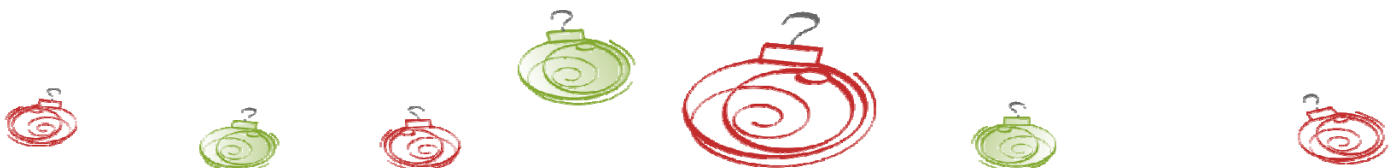
**MONTREAL, QUEBEC – October 6, 2009** – A new treatment option for Canadians with schizophrenia, ABILIFY™ (aripiprazole), is now available in Canada. For those living with this lifelong disease who may be struggling with a treatment that doesn't work for them or with side effects that are difficult to tolerate, ABILIFY offers efficacy and good safety and tolerability with limited impact on weight, blood sugar and lipids – significant clinical benefits that may help patients stay on treatment longer.

“Schizophrenia is a complex disease that is often challenging to treat. As a physician, the main challenge I face is that patients stop taking their medications and relapse,” said Dr. Ruth Baruch, psychiatrist and director of the community program at Toronto East General Hospital. “Weight gain is particularly important. Two thirds of patients will stop taking their medication because of weight gain. Numerous studies have indicated that ABILIFY has the advantage of causing fewer long-term side effects such as lower weight gain and less increase in cholesterol. Where I think this will translate in the real world is improving adherence and patients will be more likely to stay on medication in the long-term.”

Schizophrenia is a lifelong disease and treatment plays an important role in its management. ABILIFY is the latest medication in Canada to treat schizophrenia. It has not only been shown to improve day-to-day functioning and lessen social withdrawal, clinical studies show it does so with less impact on patient weight or other metabolic factors such as cholesterol, lipids and blood sugar levels. ABILIFY is effective in improving a range of so-called “positive” symptoms of schizophrenia, such as hallucinations and delusions, as well as the “negative” symptoms of the disease, such as lack of motivation and emotional withdrawal, that prevent many people with schizophrenia from leading full and fulfilling lives.

One person who knows the immense burden schizophrenia puts on those directly affected by it is Brian Good of Oakville, Ontario. His brother, Eric, was struck with the devastating disease when he was in his early 20s and at university, primed to advance in education and his adult life. Brian remembers what it was like growing up. “My brother's behaviour at home was very disruptive. He would cycle between not being on medication and do strange things like hitchhike across the country,” said Brian. “I lost a brother and my children lost an uncle. If there had been better treatment options back then, our family might be very different.” Now in his 50s, Eric lives in a group home in Gravenhurst, Ontario.

The Schizophrenia Society of Canada believes that patient access to new treatment advances is critical to making it possible for people with schizophrenia to control their illness and improve their quality of life. “Schizophrenia is treatable and recovery of a quality of life is possible. There can never be too many treatments options for schizophrenia,” says Chris Summerville, CEO of the Schizophrenia Society of Canada. “Given the complexity of schizophrenia and psychosis, the challenges people face in recovering and finding the right medication that supports the recovery process, it's vital for patients to have as many options available as possible. For this reason we believe all therapies approved by Health Canada should be made available to patients by all drug plans in Canada, public and private.”



# Expressions: *Through your eyes*

Welcome to a new feature in the InFocus Newsletter: **Expressions**. This is a new place for you to Express yourself and share with others. If your Poem, Short Story, Editorial or Artwork is chosen for our publication you will receive an honorarium of \$25.00

Submit your entry to: **InFocus**

**Box 305 Station Main; Regina, SK; S4P 3A1**

## *“The Gift”*

*Tamara Campbell © Christmas 2008*

<i>One night I bought a tree and brought it home.</i>	<i>He had taken my tears</i>
<i>And as I strung the lights</i>	<i>and rocked me to sleep,</i>
<i>I reflected upon my life, going around and around.</i>	<i>when I was overcome by my fears.</i>
<i>So many twists and turns along the way,</i>	<i>He was by my side</i>
<i>not perfect but pretty, when I was done.</i>	<i>when I did not know where to turn,</i>
<i>Next came the ornaments that were carefully packed away.</i>	<i>when I did not know where to hide.</i>
<i>Each one had a story,</i>	<i>As I looked at that tree</i>
<i>Each one, sang its own special song.</i>	<i>I began to realize just how much</i>
<i>A sparkled ball here and there</i>	<i>He truly loved me,</i>
<i>angels glowing locks long.</i>	<i>and I would never again feel lost or alone.</i>
<i>When I finished, I was filled with joy.</i>	<i>I won't need a Christmas tree to remind me</i>
<i>The hope that I felt once again,</i>	<i>that He is with me...always.</i>
<i>with the promise of Christmas of that special baby boy.</i>	
<i>He had molded my broken life</i>	
<i>and put it back together.</i>	
<i>He had held me in his arms</i>	
<i>on the days I felt I would blow away like a feather.</i>	
<i>He had given me the gift of love,</i>	
<i>that is free to all who seek Him.</i>	
<i>He had loved me through it all</i>	
<i>when life at times, seemed dim.</i>	

**We would love to hear from you. If you have anything that you would like in the next issue of *InFocus* please feel free to send it to:**

**Dianne Medby—Executive Assistant**

**InFocus Newsletter**

**Box 305 Regina, SK-S4P 3A1**

**306-584-2620**

**Toll Free: 1-877-584-2620**

## The Schizophrenia Society of Canada Supports Appropriate Treatment of Inmates Living with a Mental Illness

(Winnipeg, November 5, 2009)

The Schizophrenia Society of Canada ("SSC") welcomes the 2008/09 Annual Report of the Office of the Correctional Investigator ("OCI") tabled November 2, 2009 in Parliament. Commenting on the Report, SSC President Jim Adamson says: "It is commendable and most appropriate that four of the 19 key recommendations address the treatment and support of inmates who live with a mental illness within Canada's federal prison system."

According to the OCI Annual Report, mental health services in federal penitentiaries are woefully deficient. Across the country, prisoners are denied treatment because of a shortage of clinical staff and inadequate mental health facilities for the prison population. The Schizophrenia Society of Canada along with its provincial schizophrenia societies has maintained that the treatment and support of inmates who are mentally ill in Canadian prisons is sub-standard, and sometimes almost non-existent.

Howard Sapers, Correctional Investigator of Canada says in his annual report: "Federal correctional mental health care services are under extreme duress - there are deficiencies in terms of capacity, quality, standards and responsiveness of care. Criminalizing and then warehousing the mentally ill burdens our justice system and does nothing to improve public safety. The demands in this area of corrections are increasing dramatically; the unmet needs are immediate and troubling. The overall situation of offenders with mental health disorders has not significantly improved since my Office first reported on this troubling situation back in 2004."

The prevalence of offenders with significant mental health issues upon admission has doubled in the past five years. Eleven percent of federal offenders have a significant mental health diagnosis and over 20% are taking a prescribed medication for a psychiatric condition; just over 6% were receiving outpatient services prior to admission. <sup>1</sup>

The Correctional Investigator's report highlights the seriousness of the conclusion that our prisons have become warehouses for the mentally ill. Over the past three decades Canada has moved toward a community and outpatient system of "de-institutionalizing" the mentally ill from provincial facilities, to "re-institutionalizing" them as prisoners.

"Criminalization of those with mental illness is unethical. If these inmates do not receive hospital-standard psychiatric care, their chances of rehabilitation are extremely low and their risk of re-offending remains high. Allowing inmates to go without comprehensive treatment services for their mental illness is a failure of the Correctional Service to address mental health needs of offenders on many levels," says Chris Summerville, CEO of the Schizophrenia Society of Canada.

<sup>1</sup> Public Safety Canada, *Corrections and Conditional Release Statistical Overview: Annual Report 2008*, December 2008.

## REC Group Bids Farewell to Long-time Group Leader

On August 23 2009, Nadine Marklinger played her last game of pool as the leader of the Saskatoon Chapter's Recreation, Education, and Caring (REC) group. Nadine will be moving on to study Social Work in the fall.

Nadine had been the group leader since 2005. She first became involved in the group as a family member and volunteer, before taking over the reins. She has provided a great deal of support to group members both within and outside of the group, including visiting members in hospital when they were not well.

Honing her pool skills over the years, Nadine has worked out great deals with The Snooker Shack to provide recreation to the group at low cost to the Society so that the group can remain free for all members. She has also led group discussions at the W.A. Edwards Centre and organ-

ized special events such as mini golf and movies.

The Society and members of the REC and Wellness group are sad to see Nadine go, but we wish her all the best in her schooling and her social work career.

Tracey Mitchell will be taking on the coordination of the REC group this fall.

**Those who would like to join the REC group for some fun activities this fall can register and receive the events calendar by calling the office at 374-2224.**

## “Opening Minds” to take the Stigma out of Mental Illness

On October 2, 2009, the Mental Health Commission of Canada issued a News Release pertaining to a significant effort to reduce the stigma of mental illness in Canada. Here is the text of the News Release:

**Opening Minds**, the largest systematic effort in Canadian history to reduce the stigma of mental illness, was launched today by the Honourable Michael Kirby, Chair of the Mental Health Commission of Canada.

“More than seven million Canadians will experience a mental health problem in 2009. Many of these people will **not** seek help because of the stigma surrounding mental illness. In fact, people who live with mental illness tell us that the stigma is often worse than the disease itself”, says Kirby.

Mr. Kirby was speaking at the launch of **Opening Minds**, the Commission’s 10-year Anti-stigma / Anti-discrimination Initiative. **Opening Minds** is aimed at changing the attitudes and behaviours of Canadians toward mental illness. The first phase of **Opening Minds** targets children and youth, and health care providers.

“Symptoms of the disease most often appear in adolescence. Early treatment can make a big difference to quality of life. Our children and youth are our future and we need to ensure they can grow up with good physical and mental health”, says Kirby. Health care professionals are also a focus of **Opening Minds**.

Many people seeking help report that front-line health care providers often discriminate against them. Earlier this year, the Commission issued a Canada-wide Request for Interest (RFI) to groups that work in the mental health field.

“We don’t want to reinvent the wheel. We want to work with organizations already operating anti-stigma projects”, says Kirby.

248 proposals were received in May 2009. An independent panel helped select 36 projects for **Opening Minds**. These will be evaluated for their effectiveness and assessed for their potential to operate nationally.

Every day, half a million Canadians are absent from work due to mental health problems and this costs the Canadian economy \$33 billion. In 2010, the workforce will be added as an **Opening Minds** target. Additional target groups will be identified as the program moves forward.

The **Opening Minds** launch took place atop the Calgary Tower as a new day dawned with the hope of a stigma-free Canada. The flame on the tower burned from 6 a.m. to 8:30 a.m. to symbolically bring mental illness out of the shadows forever.

## Much Music Mental Health PSA’s inspired by **mindyourmind** youth teams

MuchTalks of MuchMusic, in partnership with the Mental Health Commission of Canada has released a series of PSAs placing the spotlight on youth mental health. In an effort to ‘get it right’ MuchMusic reached out to **mindyourmind**, the New Mentality and other community stakeholders to help create these video segments and shape the message. We are delighted that youth participants at The New Mentality and **mindyourmind** were able contribute and share their stories. Their voices will surely resonate with youth all across the country.

In hopes of reducing stigma and encouraging young people to seek help, **mindyourmind** youth volunteers created the tag line used in the videos, “reach out, get help, give help”, at the program’s inception back in 2004. Much Music has created 4 short Public Service Announcement videos focused on increasing awareness and encouraging peer to peer support. The message is clear. Friends matter. And these videos go a long way in reinforcing that message, one that **mindyourmind** continues to broadcast through its website and various channels.

**mindyourmind.ca** is an award winning site for youth by youth. This is a place where you can get info, resources and the tools to help you manage stress, crisis and mental health problems. Share what you live and what you know with your friends.

**mindyourmind** is a non-profit mental health engagement program that works with youth, emerging adults and the professionals who serve them to develop reliable and relevant resources and communication platforms. These resources are designed using current evidence and research to reduce the stigma associated with mental illness and increase access and use of community support, both professional and peer-based. Through the use of active engagement and technology **mindyourmind** inspires youth to reach out, get help and give help.

# Tips to Handle Holiday Stress

By Lisa Brooks-Kift, MFT, Psychotherapist and Author of *Therapy at Home Workbooks; Mental Health / Relationships*

As wonderful as the holidays are for many – for others, holiday stress sometimes overshadows the good cheer of the season. There are a number of stressors associated with the holiday period but let's focus on a few of the most common – and thoughts about ways to handle them.

**Holiday Preparation:** Do you feel as though your holiday “to do” list is never ending? If you are hosting a Thanksgiving meal there is the planning, shopping and cooking for, possibly, a lot of people. There are holiday gifts to buy and everything around that. It can seem like a lot. For some people, the list of tasks overshadows the joy of the season.

**Holiday Preparation Stress Buster:** How people deal with stress – and how they perceive stress – differs a lot. An important thing to ask yourself is, “Am I creating more stress than is reasonable for the situation?” Once you've taken an honest look at your relationship to stress, you can implement some of the following ideas to help decrease your stress levels:

- Make a to-do list. Number the list in order of importance.
- Examine the items on your list and ask yourself, “Are all of these truly necessary? What's the worst thing that will happen if I don't complete the list?”
- Ask for help. If you are the kind of person who tries to do it all – now is the time to challenge this behavior.

**Family:** As wonderful as bringing families together over the holidays can be, for many it requires navigating through the murky waters of “drama,” politics and expectations. You might be concerned about shaky family relationships going “south” when mixed with excessive alcohol consumption at the Thanksgiving or Christmas dinner table. Others get emotionally triggered around childhood issues with parents that still play out as adults.

**Family Stress Buster:** As much as we might like to at times, we cannot control the behavior of others. If you tend to excessively worry about how people will “be” with each other, challenge yourself to stop taking on other people's “stuff.”

- If there is an issue between two adults, let them work it out. It's not your issue.
- If you are going home to visit family and are concerned about others behavior towards you – set healthy boundaries for yourself and erect your own protective emotional shield.
- Remove yourself from uncomfortable situations. Take a walk – or if it's really bad, simply leave.

When it comes to managing stress, regardless of whether it's around the holidays or the daily grind, it's about awareness of your stress triggers, questioning your stress reaction and most importantly, self care. Self care will look different for everyone but it might be a vigorous walk outside in the crisp Fall/Winter air – or sitting by the fire with a cup of tea. If you have expectations for a stressful holiday, attempt to challenge those and forge a new and positive experience this season.



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## REGINA

### Caring & Sharing Meetings

Are held the last Monday of every month at the  
North East Community Centre in Regina .

Located at 160 Broad Street. (In back of Imperial School)

7:00pm

Phone: 584-2620 for more information

### Regina Schizophrenia Consumer Support Group

This group meets the 1st Wednesday of every month  
2123 Broad Street: Schizophrenia Society of Saskatchewan  
From 7:00—8:00pm

**For more information call (306) 584-2620**

### Saskatoon Schizophrenia Groups

1) **The Recreation Group and Wellness group** meet twice a month in  
Saskatoon. Please call the Saskatoon office at 306-374-2224 for dates, times  
and locations of these events.

2) **A Family Support meeting** is held the third Monday of each month at 7:30  
p.m. at the W.A. Edwards Family Centre – 333 – 4<sup>th</sup> Avenue North.

Everyone is welcome!

We welcome any questions so please call the office for further information.

**For more information on Saskatoon groups please call (306) 374-2224**

Souls Harbour Rescue Mission

## *Invite you to a Christmas Supper*

December 23rd, 2009 at: 5:00—6:30pm

Men, women and children welcome

Entertainment will be provided

At 1836 Halifax Street; **Regina**

**Throughout December, sponsorship  
from our Community Partners will  
also provide for other meals for the  
community.**

Canadian Mental Health Association Regina Branch

## *Invite you to a Christmas Lunch*

**Regina Branch members only**

December 16th, 2009 starting at 12 noon

St Mary's Parish Hall;

2020 Winnipeg Street; **Regina**

## *Holiday Pot Luck*

**All members of the Saskatoon Chapter welcome**

The Past Board of the Saskatoon Chapter will be  
recognized this evening.

**December 14th, 2009 at: 5pm**

YWCA Community Services Village in **Saskatoon**

**Please bring a dish that serves 4.**

If you have any questions please feel free to contact the  
Saskatoon Office at **306-374-2224**

Marion Centre of Regina

## *Invite you to a Christmas Lunch*

December 25th, 2009 at:  
12:00—2:00pm

Men, women and children  
welcome

At 1835 Halifax Street; **Regina**

Mental Health and Addiction Services, Rehab, Crocus Co-op,  
CMHA, Saskatoon Crisis Intervention and Community Clinic

## *Invite you to a Christmas Lunch*

On December 9, 2009 at: 12:00 – 1:30 p.m.

At St. Joseph's Hall; Broadway and 8<sup>th</sup> Street; **Saskatoon**

**Please call Jennifer at 655-0472 prior to December 4, 2009  
to register**

If someone is providing transportation for you at the end of the  
event, please ensure the person is at St. Joseph's Hall by 1:15 p.m.