

# Write ON!

A Quarterly E-zine for the Mississauga Writers Group

Spring 2019



## Mental Health



## Table of Contents

**Set Afloat, First Aid for Mental Illness** – Miranda Wong p. 3

**Questions** – Maria Cecilia Nicu p. 5

**Two Real Stories** – Veronica Lerner p. 7

**I Ran Out of Tears** – Elizabeth Banfalvi p. 9

**Comically Depressed** – Asha Ponnachan p. 11

**Mental Health** – Vidya Vasant Gopaul p. 13

**Shouting inside the Silence** – Susan Ksiezopolski p. 16

**Bud in Ice** – Yiren p. 17

**How Does Anxiety Feel?** – Shannon L. Christie p. 18

**Asking for Help** – Lana Alam p. 19

**Mental Health** – Bryn Snow p. 24

**Depression** – Sajeda Manzoor p. 26

**Writing Exercises** p. 30

**Coming Up Next** p. 31

**Write ON! in the Future** p. 32

**We Are the Mississauga Writers Group** p. 33



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## Set Afloat

Decades worn and tethered  
My body frail like shards  
Spirit brittle and tethered  
Befriended by mockery.

Looked on with scorn  
Eye rolls; faces full of distaste  
Derision, disdain and despise  
Ridiculed my mere existence.

Each passing day lived  
In self-doubt and unworthiness.  
No hope in sight and  
Shrivelled in fear,  
I feared to be seen.

Struggles paid off  
Salvation appeared.  
A test confirmed that I was  
A person of learning disabilities.

News set me free  
Afloat as a kite!  
No longer a pest  
My right to exist!

Yet, hard to shed off layers  
Fear and ridicule were life-long;  
Self-esteem shattered  
In a world I hoped was empathetic.



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## First Aid for Mental Illness

Mental illness affects at least 1 in 5 Canadians. Few of us are not touched by mental illness or do not know someone who suffers from it. Some have even lost loved ones to it. According to the Mental Health Commission of Canada, in 2002, mental disorders accounted for an “estimated 985,000 years of life lost due to death and disability.”<sup>1</sup> Also (by the same source) in 2011, the estimated prevalence of mental illness in Canada was 19.8% of the population due to major disorders, 11.75% to mood and anxiety-related disorders, 5.9% to substance use disorders, 2.17% to cognitive impairment and dementias, and 0.61% to schizophrenia.

From my 2-day course in Basic Mental Health First Aid (MHFA) through work, via the Mental Health Commission of Canada, I learned there are five basic actions to take to help someone with mental illness and distress. Remember the acronym ALGEE for these steps:

1. **“Assess the risk of suicide and/or harm”** to the first aider. By the term “assess,” it means to evaluate the situation to determine how best to help. “Risk of harm” refers to the risks from overdose, suicidal

behaviour, panic attack, reaction to traumatic events, or psychotic episode.

2. **“Listen non-judgmentally”** such that the person in distress can talk freely and comfortably without fear of judgment.
3. **“Give reassurance and information”** to help the persons in distress realize that they have a real medical condition, to help them feel hopeful and optimistic about effective treatments, and to encourage them to get that help.
4. **Encourage the persons in distress** “to get appropriate professional help” and to help them identify same.
5. **“Encourage other supports”** and to help them find ways to help themselves “through self-help strategies or by reaching out to family, friends and other supports.”

Use these five steps to help those suffering from mental illness. Having an empathetic, informative, reassuring and encouraging helper can be a very helpful resource and have a calming effect on the sufferer at critical moments of distress.

<sup>1</sup>Mental Health First Aid Basic.

Mental Health Commission of Canada. , June 2017, pp. iii, 4-5, 7.



Maria Cecilia Nicu was born in Bucharest-Romania and became a Canadian citizen in 1980. She has a Masters in Literature and History. She is the author of three published books: a collection of short stories entitled *A plouat cu iguane* (*It Rained with Iguanas*), a novel called *O mie o suta de ani* (*Eleven Hundred Years*), and the book of short stories, poetry and essays *De ce* (*Why*). She is also a columnist for Toronto's Romanian newspaper *Observatorul*, as well as print and digital collaborations in Romania, France, Ireland and USA.

## Questions

She was his older sister. Iustin found her in a broad daylight, hanging by the hook their father used to keep his miner's helmet on.

It was dark when George came home—and even darker in the barn—and he barely saw what was lying down there on his brother-in-law's lap. But Anna's hair had always shone “ca aurul”, her mom used to say. He started to rotate his hat in his hands, and Iustin could see George's shaking hands, his sweaty hair, and Iustin was not sure if the wet face meant tears or only hard work in the mountains.

“This is my mistake, Iustin. I didn't have time, I could say, but it is not about my time. It's about hers, and it looks like she didn't have enough. Not enough for herself, and not enough for us—don't you see?

“I think a man has to be more careful walking the line, you know what I mean? My father used to tell me to walk in a straight line when I got married. ‘It'll be a hell of a job’, he said, ‘to understand you **cannot be yourself** anymore. A woman and kids isn't an easy task.’ And it looks like somewhere

sometime I forgot—or maybe I only wanted to forget.

“My Anna got lost in this maze of confusion that is my life, and she couldn't get out. Six kids, a job, a household of chores and a husband who thought his only responsibility is to put food on the table and work like an ox in a yoke. What for?

“Something is wrong with me, I want to say. The doctor told me she was sick. She has a very severe illness—something in her brain made her unhappy. He wanted to tell me for some time, but she didn't wanted me to know, and I didn't have time to ask her why she asks me to dim the light and she sits keeping her hands in her lap watching me eating, no words in her mouth, only a sad look in her eyes.

“I should've known? Of course, I should've, and I remember what Constandin, your grandfather once told me: ‘Life is not a free ride. You pay for every wrong step you make outside that straight line was given to you...’”

Iustin looks at George with bad eyes. He sits in front of him, like a deluge ready to destroy everything in its way, and keeps thinking how he could punch him in the face and lay him out on the floor. Maybe his heart would start beating again, and he could forget what Anna told him the day before:

“I’m flooded with fear. It’s like a monster wave is crashing my ability to get up... I’m drowning, my brother!”

He stopped thinking.

*©Maria Cecilia Nicu 2019*





Poet, Editor and Freelance Journalist, **Veronica Lerner** is a Romanian-born scientist that came to Canada in 1982. In parallel with her scientific profession, she has pursued her passion for literature by publishing seven books (five in Romanian and two in English), collections of short stories and poems. She is present in numerous Romanian and Canadian anthologies and she works as editor of the award-winning Romanian magazine *Observatorul* in Toronto. For promoting abroad the Romanian language and culture, in July 2018 she was one of the ten recipients around the globe of the medal issued by the Romanian publishing house "Vatra veche" as a celebration of 100 years from the Romania's provinces unification.

## Two Real Stories

### I.

It is a sunny September afternoon in Toronto. M., 26, spends the day with his girlfriend. A few days earlier, he was released from the hospital after an episode of his mental health problem. The medication prescribed by the hospital, which he has to take every day, has an important side effect: it causes depression and suicidal thoughts. Therefore, the patient should be under permanent supervision. Today, the young man is with his girlfriend in the 17th floor apartment that she lives in. She is in the kitchen and sees that he is going out on the balcony, then coming back in, going out and coming back in. Noticing that this is not his usual behavior, she asks him what he's looking for. M. answers that he is just curious to look around. A little later, she needs to go to the bathroom. Coming back after not longer than two minutes, she doesn't see him anywhere. Looking out over the balcony railing, she sees his body lying down on the sidewalk. Dead.

His mother, a close friend of mine, lost her only son.

### II.

A very hot summer day in Trois-Rivières, a quaint little town in Quebec. A., a beautiful and gracious young lady, is 17. My colleague, a very talented technician, lives and works near Montreal. He takes with him his family—his wife, daughter A. and young son—for a visit to Trois-Rivières, to see their relatives. The St. Lawrence River crosses the town, and a large, wonderful bridge is over the river. One night, A. leaves home, goes on the bridge and jumps in the river. As simple as that. She is depressed and taking medication; however, the tragic event could not be prevented.

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Both stories are tragedies about mental health problems. I know the two cases because I know the parents of these two young people. Mental health is a very serious issue and, unfortunately,



there are few medical tests for these problems. Any medication prescribed by doctors are on a trial basis, as individuals are unique in their symptoms. However, the medication has to be taken and, after a while, it can work. If not, the doctor will try another one.

The most important element in treating a mental disorder is for the patient to accept that they have a problem that should be treated. However, is it this acknowledgment enough? Both the above stories are about people that were having treatment. I know the parents: they had been doing all humanly possible effort to help their child. Isn't it also necessary that a bigger effort be made by society, through medical resources allocated to mental health issues? If M. had specialized supervision after being released from the hospital with a medication that has, as a side effect, suicidal thoughts, couldn't have the tragedy been avoided?

I go with M's mother every year, on September 9<sup>th</sup>, to his grave. This happened twelve years ago. His girlfriend, who was with him when the tragedy occurred, just married few months ago. M.'s mother was present at the wedding.

Life will never be the same for the parents who have had such a tragedy in their family. Will my friends—the parents of the two young human beings who committed suicide—be spared from an unbalanced mind? Who knows? It is as difficult to predict as it is to treat.

We are not doctors. We cannot help our friends with medical advice. The only thing we can do is to be with them on the long recovery path and, if need be, gallantly encourage them to seek an authorized evaluation of their mental state.

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**Elizabeth Banfalvi** started writing her meditation series books in 2008 and now has nine in print. She taught Meditation and Stress Relief Naturally topics in the Dufferin-Peel DSB, Peel DSB, Halton CDSB, Brampton Parks and Rec and the Mississauga Library System. She is the President of the Mississauga Writers Group and writes weekly articles for the Peel Weekly News. She is also a Registered Canadian Reflexology Therapist since 1996. [www.elizabethbanfalvi.com](http://www.elizabethbanfalvi.com)

## I Ran Out of Tears

The 1990's were the worst of my life so far. My older son died in December 1992, right before Christmas. He had been a diabetic since he was 14 and his heart failed. We walked into his rented room where he lived after moving back to Brantford and we found him. He had a small artificial tree set up with all our presents underneath it. Not only did we have to take care of his funeral clean up the room he rented, but Christmas was the hardest because we had his presents to open. We left it till the last, and the tears flowed from all of us. My daughter wore his present of earrings for her wedding several months later. So many tears flowed.

In March 1998, I left my long-term marriage. Things hadn't gone well for a long time and I just finally decided to leave. I moved into an apartment close by so I could visit my daughter and grandson who were now living with us after her separation. We had to sell our home but that was delayed till the next spring. I went to pick up our car when I did my workshops at night. We saw a lawyer and my divorce came through 2 days before our anniversary date. I

worked each day and I came home, ate supper and then sat and cried. It was like releasing the pain I had suffered. At times, I ran out of tears to cry.

In May 1999, I was diagnosed with cancer by a very well-known hospital and doctor. I couldn't believe how uncaring she was and, because she was so rough, I refused to have her operate on me. I took the summer off, even though I knew I needed to be operated on and that was the best chance I had of recovering. I went to a homeopath and an acupuncturist because that is what I believed would give me some mental and emotional release. The summer was spent wondering what I was going to do. I didn't tell my children because I knew they would be so upset at what I was doing. Finally, in September, one of my friends recommended another specialist and I went to him.

First question I got asked was, "If you went to the famous hospital, why didn't you get operated on there?" I told him they wouldn't talk to me or listen. So, he sent me to his guru at Sunnybrook Hospital. I went and I got the same



question, and I gave the same answer. There was a chair in the room. This doctor picked it up, placed it right in front of me and told me that we would stay as long as I wanted. We were going to talk as long as I wanted, and he would listen. Finally, I had found my surgeon. He got all sorts of brochures that were available to give me any other answers I needed, but they weren't many and he apologized. I found out later that he was one of the top three surgeons in Canada.

Then I had to tell my children. I told my daughter and she cried. My son was out of the country, but I called him when I was admitted to hospital. I kept saying to him that I would be all right, but how can you explain to your son, you have cancer and he is so many miles away? Luckily, he was with his wife, and he wasn't alone. The next day, I got a big beautiful bouquet of red roses that just said "We love you" from my son. I lived with my daughter and young grandson when I got home, and she cared for me.

I recovered very quickly and made sure I kept moving around to keep myself active. I even started an at-home yoga practice off of the television. I didn't know what I was going to do. I had to take three months off to recover, and then I was back to work. There were still times that I cried, but it wasn't as often now. I was getting better.

I flew out to Cranbrook, B.C. for the New Year because my friend wanted to take care of me. That is how I celebrated the start of the millennium. The mountains and views were spectacular.

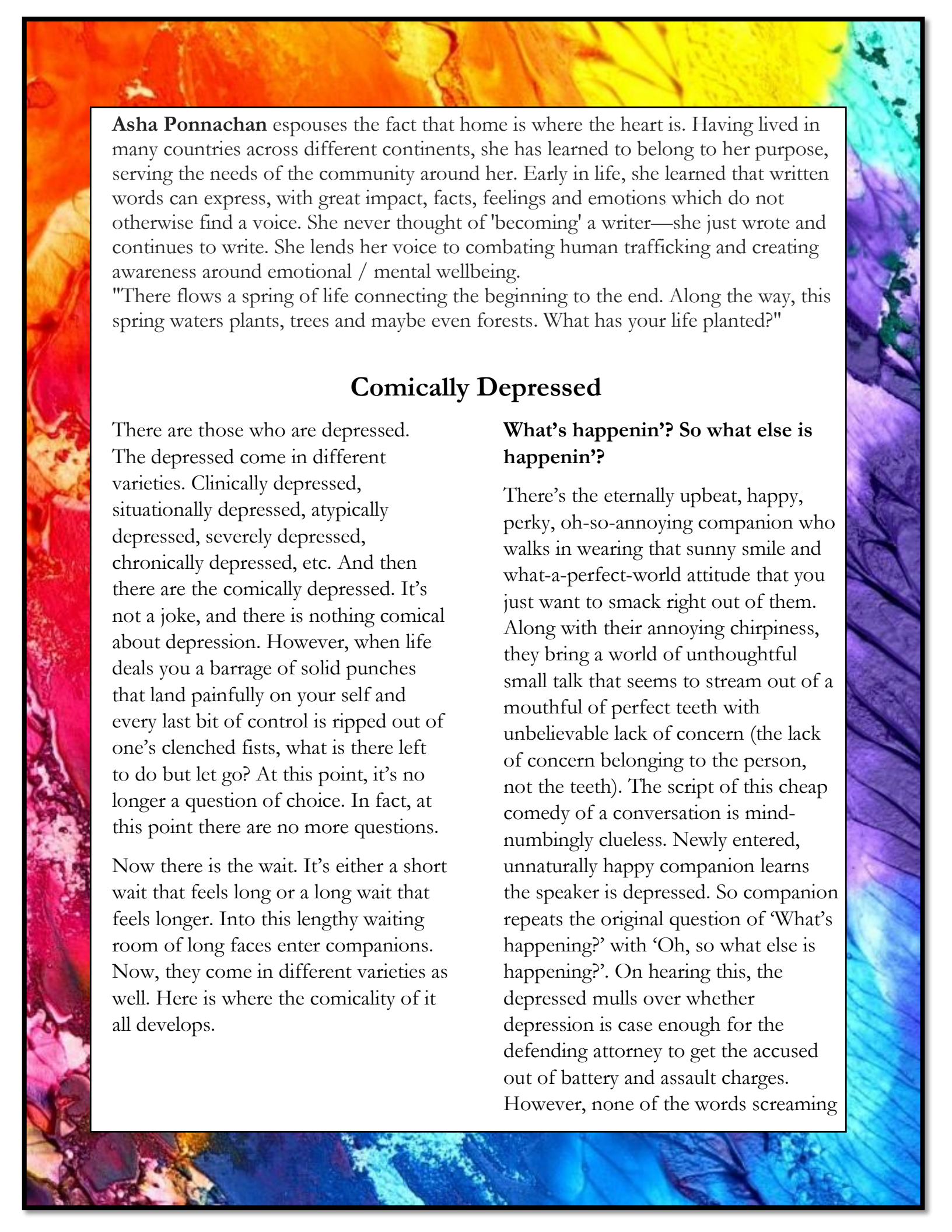
Now, twenty years later, I still don't know how I got through those years, but I did. Some tell me how strong I am but I didn't think so at times. So often I cried and at times, it felt like I ran out of tears so I just had to calm myself and keep moving on, doing what I could. I was on my own and had to pay my expenses. My daughter and I moved in together, and my young grandson was such a delight of my life. Always a smile and laugh when I needed it. I eventually bought a condo and still live in it. Tears are flowing right now as I write this but not like before. So, I keep moving on and life is better now. The fact I can write about it is proof.

Live your life as best as you can and hopefully your tears are all because of happiness.

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**Asha Ponnachan** espouses the fact that home is where the heart is. Having lived in many countries across different continents, she has learned to belong to her purpose, serving the needs of the community around her. Early in life, she learned that written words can express, with great impact, facts, feelings and emotions which do not otherwise find a voice. She never thought of 'becoming' a writer—she just wrote and continues to write. She lends her voice to combating human trafficking and creating awareness around emotional / mental wellbeing.

"There flows a spring of life connecting the beginning to the end. Along the way, this spring waters plants, trees and maybe even forests. What has your life planted?"

## Comically Depressed

There are those who are depressed. The depressed come in different varieties. Clinically depressed, situationally depressed, atypically depressed, severely depressed, chronically depressed, etc. And then there are the comically depressed. It's not a joke, and there is nothing comical about depression. However, when life deals you a barrage of solid punches that land painfully on your self and every last bit of control is ripped out of one's clenched fists, what is there left to do but let go? At this point, it's no longer a question of choice. In fact, at this point there are no more questions.

Now there is the wait. It's either a short wait that feels long or a long wait that feels longer. Into this lengthy waiting room of long faces enter companions. Now, they come in different varieties as well. Here is where the comicality of it all develops.

### What's happenin'? So what else is happenin'?

There's the eternally upbeat, happy, perky, oh-so-annoying companion who walks in wearing that sunny smile and what-a-perfect-world attitude that you just want to smack right out of them. Along with their annoying chirpiness, they bring a world of unthoughtful small talk that seems to stream out of a mouthful of perfect teeth with unbelievable lack of concern (the lack of concern belonging to the person, not the teeth). The script of this cheap comedy of a conversation is mind-numbingly clueless. Newly entered, unnaturally happy companion learns the speaker is depressed. So companion repeats the original question of 'What's happening?' with 'Oh, so what else is happening?'. On hearing this, the depressed mulls over whether depression is case enough for the defending attorney to get the accused out of battery and assault charges. However, none of the words screaming



to get out of her mind actually find a voice. Being a Christian, the depressed decides against a physical course of action and keeps looking mournfully out of the window. At some gracious point in time, happy, perky companion takes annoying self to a set of co-ordinates far away from the presence of the depressed.

### **Console me, you're hurting!**

Enter the epitome of care and concern. That friend who is devastated at the very thought of your sorrow. Sad companion discovers your story and is doubly devastated. Now depressed mind feels guilty over making this epitome of care and concern sad. Therefore, depressed gets busy trying to comfort sad companion. Role reversal having taken place successfully, pretend audience is intrigued at the sudden twist in story. Eventually the companion is bearably comforted and sent out to further the cause of consolation elsewhere in this broken world.

### **Others**

This term of depression is filled with interesting companions. From smiley to grumpy. From hold-me to get-a-life. There are even those with JF syndrome (Job's friends syndrome). There are too many to give each one a paragraph. Whether the depressed mind feels comfort or pain in their presence, most of them mean well. Although, in some cases, their well-meaning-ness would perhaps be more useful in a far away land- that's an LOL statement, not to be taken seriously.

The important thing is, there are many well-meaning, albeit interesting, companions, and this is only a temporary state of mind. Sometimes, this temporary state of mind makes many sequels, however it can be ended. There is, thankfully, an end to this depression, and it ends with a strong and meaningful smile. Meanwhile, the journey brings perseverance, and perseverance builds character, and character gives hope.

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**Vidya Vasant Gopaul** is the author of a novel, *Race the Time*, and a screen play, *Fires of Times*. He is a regular contributor to the publications of Mississauga Writer's Group. He is currently working on other novels.

## Mental Health

*Mental* can be also be described as *intellectual, cerebral, brain, rational, psychological, cognitive, abstract, conceptual* and *theoretical*. It has been said that the brain is a very complex organ in our body and, thus far, we do not completely understand how it operates.

Mental health issues have been in existence since the dawn of civilization, and we were not aware of them because we did not have the tools, means or health care professionals to assist us in dealing with them. In the last two centuries, we have just started trying to understand them and, hopefully, going in the right direction to resolve them.

First, we have to find out the causes of the mental health problems and how to solve them, and then find the ideal method of making a diagnosis. Mental health can be affected by numerous factors: the environment, society, divorce, a split in the family, poverty, wealth, nutrition, bullying... the list goes on. And believe or not, mental health problems are part of our lives and we cannot escape them. Some people may have more mental health problems and some may have less. There is not one single soul out there who will say "I do

not have mental health issue." As long as we have a mind, we have mental health issues.

Our mind acts like what I call a dormant active volcano. Just like a volcano, our mind can erupt or explode at any moment, without any warning. It is active and constantly working behind the scenes at a very high speed, without us knowing it. It is keeping our body temperature at a proper level, monitoring our breathing pattern, regulating our blood, helping our body to balance itself, processing all the information we are seeing, hearing and feeling, and much more. While processing all that information, if our mind does or does not agree with something, then our emotion takes over. *Rational* just does not work at that time. At any moment, one of the two things can happen: either we can burst into laughter or we can erupt into a violent act. As the saying goes, it does not take long for the mind to act or react. Hence, a person bursts into laughter is because something in his or her mind reacts to a jovial act, joke, or even other people laughing. Eventually, it makes him or her happy. On the other hand, if a person turns violent in



a split second, it is because they don't like something, want revenge of some sort, or were offended. Take for example, just last week, in the United States, a man was given two weeks of parole before he was going to be sentenced to prison. During that time, he killed his mother and now he is on the run. He was given the two-week parole because his parole officer thought he would do no such crime since he showed all signs of normalcy. Even the parole officer was dumbfounded as to how he could do such things.

We have to find out what causes someone to be happy or turn violent. To assist with that, we have healthcare professionals, psychologists, and psychiatrists. The methods they use to understand mental issues are psychoanalysis, hypnotism, medication and homeopathy. The results are sometimes successful and sometimes not.

Take another case, that is, autism. An autistic child has all the right information in their brain but does not know how to connect it. To assist these children, parents take them for therapy, but the individuals are not "cured".

What I just described above shows that to deal with mental health (happy or unhappy), we must fully understand the contents of our brain—and what better way to understand the content of our brain than to download the content itself in some form of readable data.

For example, to fully understand the health of our heart, we do an electrocardiogram (ECG). The information is printed on a piece of paper. So how is it that we can transform something inside a heart to something we can see on the paper? If we can do the same thing with the contents of our brain, we will have a better understanding of how we become happy and violent, and all other mental health issues. It is a futuristic idea, but I believe it can be done.

I can go an extra step to compare my theory to the advent of mapping of our DNA. Who would think that a few decades ago we would be able to see the exact blue print of the make-up of our body. Today, we have the tools and know-how to prevent illnesses such as Alzheimer's, diabetes, heart disease, and cancer by manipulating our genes or eliminating the genes that cause those illnesses. Similarly, imagine if we could download the contents of our brain and map them in a such a way that we could determine what causes mental illness and how to prevent it.

In the meantime, the way I resolve my mental issues is to focus on something I love and that gives me happiness. For me, those special someones are my lovely daughter and my two cute grandkids. I try to go back in my memory and find all the things that have made me laugh, touched my heart, and enhanced my mental state and



emotions. That gives me time to settle down from whatever mental issues, either simple or difficult, that I am going through. It gives me time to rethink my strategy to resolve my issues rather than acting quickly, which more often than not results in disaster.

If that is an option not available to you, then try concentrating on some religious symbols; the unselfish, unconditional, and soft love of your mother; a national figure who has suffered for good cause; health-related

brave survivors; or anyone who has made a positive difference in your life at one point or another.

Above all, we have to maintain good physical health in order to have good mental health. For my part, I ride my bicycle for thirty minutes, exercise for fifteen minutes, do gardening in the summer time, do ice-fishing in winter and regular fishing in the summer, travel a lot, eat healthy food and, most of all, write, which really will keep your mental health in excellent order.

©Vidya Vasant Gopaul 2019





**Susan Ksiezopolski** is an award winning published author, speaker, coach and facilitator. Her work has been featured in various anthologies, magazines and on-line platforms. Visit her website [www.mywordsnow.com](http://www.mywordsnow.com) to find out more about Susan and her workshops.

## Shouting inside the Silence

Shout  
Shout out loud  
The silence only feeds the demons  
Hungry for solitude

Reach out from inside  
Where the brokenness  
Tears you to pieces  
Your sparkle  
Snuffed out in the darkness

Put a spotlight on the pain  
That only speaks the language of lies  
Talking the conversation of fear  
Let the light cleanse  
Away the debris of pity

Open the gate  
Let your lost voice  
Get found  
On the rocky path to wholeness  
Talking you to the way home  
Back to your self  
Back to your life

No matter how  
Rocky the path  
It leads to  
Wholeness

Listen to your voice  
Shouting to be heard  
Shouting to connect  
You back to  
Your story

This is where the  
Restorative conversation begins  
In the language of  
Love and forgiveness  
Participating in  
The wholeness of life

*©Susan Ksiezopolski 2017*





Yiren, a translator and interpreter, writes both traditional and modern Chinese poems. Now she is trying her hands on English poem. Poetry is her way to convey her feelings and love for life.

## Bud in Ice

Crystal clear  
ice is around my mind.  
You want to touch it.  
Coldness makes it hard  
And winter wind bitterly winds.

I am the bud,  
tender and alive.  
Please bring with you the sunshine  
and warmth of your love.  
That is the spring I've been longing for.  
I will wake up and come by.



*Photo and poem © Yiren 2019*





**Shannon L. Christie:** The arts are a huge part of my life, being a writer is a new chapter for me. I am an accomplished photographer, artist and a graduate of Sheridan College with a diploma in Interior Design, working in the textiles and merchandising industries.

## How Does Anxiety Feel?

I wrote the following free-flow prose after I was asked to describe how anxiety feels. I decided to write it as an exercise to help understand what happens to my body and mind during an anxiety attack.

Anxiety is like a sneak attack... it catches you off-guard and pounces on you to take you out... out of the game, out of life...

Out of nowhere, you start to get overheated, flushed, your heart starts beating faster and faster... it's trying to escape from your chest... you start feeling twinges of pain that become sharp, piercing chest pains, someone has stabbed you through the heart... you feel nauseated, something in your stomach has awoken and it needs to be expelled from the dark pit... you get foggy and lightheaded, you need to run, you don't know why, you just need to be somewhere else, anywhere else but where you are... the tears start pouring down your face, you can't breathe, what is happening?

I need to get out! Out of this place?  
Out of my head? Out of my skin?

I run, run anywhere that is not here!

I find a place, a place that is safe, I lock the door... I curl up into a ball so tight all my muscles are tense and about to break.

I sit frozen in place, trying to remember to breathe, breathe in... breathe out, breathe in... breathe out...

I am still crying... afraid, afraid of something... I am still breathing, must remember to breathe... breathe in... breathe out... breathe in... breathe out...

Whatever "it" is, "it" won't get me... I am safe in my place, but I am still in my mind and still in my skin...

What is "it" that has caused me so much distress?

**HELP!**

©Shannon L. Christie 2019





**Lana Alam** is a writer from Mississauga. She was born in South Africa and moved to Calgary to complete a BA in English. She is currently editing her first novel.

## Asking for Help

My daughter was born at 28 weeks and 4 days  
She weighed 2 pounds and 7 ounces  
The same weight as my mom's cat  
When she brought her home as a 12-week-old-old kitten

I spent 3 weeks lying in a hospital bed, praying for 3 months  
I learned that sponge baths are anything but dignified  
That people didn't know what to say to me when they visited  
Any more than I knew what to tell them when they asked if I needed anything

I learned that cupcakes and home-cooked meals could taste like love  
That phone calls from my tiny niece could help me feel less alone  
That books, magazines, and cookies were a good distraction  
Between my fearful prayers

My husband and I became an island  
One overrun with competing fear and hope  
Fear and hope in constant motion –  
One heavier than the other – then switching  
Depending on what the doctors and nurses told us

Existence was exhausting

The doctor said that I had an 'incompetent cervix'  
That had we caught it sooner we could have stitched me shut  
I wondered if there were warning signs that I brushed away

How could I not have noticed that I was failing at mothering?

My daughter wasn't quiet when they cut her from my womb

An emergency procedure

There was enough time THEN to tell me what could go wrong



Enough time for me to sign the waiver

Her tiny, cat-like cries shattered my already broken heart

‘Sound has to be a good sign,’ I thought to myself

Trying and failing to quash the fear that threatened to overwhelm me  
Competing with the guilt that it was MY body that had let HER down  
MY body that refused to house HER safely any longer

The nurse holds the tiny bundle up for a second  
And my heart starts to realign the shattered pieces  
To trap the Love that is leaking through the cracks

I say, ‘She is perfect.’

My mind struggles to understand how she can be so small  
My husband brings me photos on his phone  
As the surgeon closes the door to my abdomen with metal spikes

She looks even smaller in the pictures

I often gloss over the 3 months she spent in hospital  
When telling people about her scary entry into the world

I don’t tell them about the mess of wires and cables in her incubator  
The ones making sure she was breathing,  
The tube down her nose for feeding

I don’t tell them about the destats when she forgot to breathe  
I don’t tell them that I know what it sounds like when nurses run  
I don’t mention that I could hear the alarms beeping in my head  
Even when I wasn’t in the NICU  
Even when I slept

I kept necrotizing fasciitis, antibiotics, and PICC lines to myself, as well

Instead, I share anecdotes of the wonderful nurses who mothered her  
When I had to go home to sleep and eat  
I gloss over the calls at 2 a.m. to check up on her  
I don’t mention the crying in the shower



Or the sleepless nights where my company was a breast pump  
And a husband as terrified as myself

We got through those 3 months  
The first night at home  
The scary first year  
So many appointments

We alienated people who didn't understand that her immune system  
Wasn't ready for crowds  
Or visitors with the sniffles  
Or too many questions

Years pass  
Although we never really stop worrying  
It does get easier

It could have been so much worse  
And I cling to the knowledge that it wasn't  
I am grateful and yet  
I still feel more like a survivor than a conqueror

We're pregnant with her baby brother

Doctor visits fly by –

There are so many of them

Now that we know that my body doesn't know how to  
'Woman' safely, we can keep an eye on it

This time they do stitch my cervix  
I feel like a shattered vase, glued back together  
I feel like it's me who is incompetent

I am not a happy pregnant woman  
I'm filled with panic and 'what ifs'  
I worry that my worrying will negatively affect my unborn son

At 24 weeks, we schedule precautionary steroid shots  
I lower my pants slightly, exposing a cheek



The nurse gives the shot  
Ice-cold pain spreads through my body along with panic

Back in my car  
In the parking lot  
My hands white knuckle the steering wheel  
I slam my palms down twice  
And open the gates to my inner mess  
The sound that bubbles up from my fear-filled heart  
Through my chest and out my mouth scares me

I am not ok

It takes a lot longer than it should  
For me to realize

That NOT being OK

Is OK

At the next check-up, I muster every ounce of bravery left in my tired shell

And... I ask for help

I say that the closer I get to 26 weeks, the more fear-filled I become

The doctor nods in understanding  
Says that he will refer me to the  
Women's Reproductive Mental Health Program  
There is no judgment in his voice  
Or his eyes

And I feel lighter already.

I wish I could remember the name of the person I saw  
She helped me escape the spiral of negative 'what ifs'  
She listened, I talked; she talked, I listened  
Then she handed me a sheet of red circle stickers  
Reminders to pause and take a few deep breathes

I had those stuck around my house and even in my car



For years after my son was born

Some days I still need a reminder to pause  
And breathe

And that is ok

Asking for  
And accepting help

May be the hardest thing you can do

But,  
Your future self will thank you for it.

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**Bryn Snow** is a Milton area writer and blogger. She's a recent Master of Divinity graduate – one of her life goals accomplished. She's the mom of three young adults, putters about in the kitchen, tries to exercise, and loves art, film, opera and bluegrass music. She blogs at [brynsnow.com](http://brynsnow.com).

## Mental Health.

It's a key issue for one in five Canadians, and I suspect many more.

In the past nine years, the Bell Let's Talk campaign has highlighted the issue of mental health. Since the early conversations in September 2010, Bell has donated over 100 million dollars to support mental health, according to their Bell Let's Talk website (<https://letstalk.bell.ca/en/results-impact/>).

This work of raising awareness and reducing the stigma of poor mental health is a great beginning. I can remember when the phrase “mental health” was rarely heard. More frequently, you would hear, “she's crazy”, or “she's depressed”. The stigma was huge. It is now acceptable to use the words “mental health issues” as part of a regular conversation.

However, much more work remains to be done, and more funding needs to be made available.

Last summer (2018), the Canadian Association of Mental Health (CAMH) released the latest results of a study the Association runs yearly with teenagers.

Called the CAMH Ontario Drug Use and Health Survey, the study, now in its 40<sup>th</sup> year, examines the behavior of male and female students. In recent years, CAMH has expanded the scope of the study to look at psychological distress.

Five years ago, in 2013, 32% of the girls studied reported they had experienced “significant psychological distress”. Fast forward to last summer, 2018: that number had jumped by almost twenty per cent. Of the female teenagers surveyed, 51% said that they had experienced “an elevated level of psychological distress” in the four weeks prior to completing the survey. (See the following link for more information:

<https://www.camh.ca/en/camh-news-and-stories/why-teenage-girls-are-reporting-high-levels-of-psychological-distress>).

Clearly, these young women could use much more psychological and/or psychiatric support than they are currently receiving.

I finished a Master of Divinity degree at the University of Toronto last spring—



one of my “life goals”. I am many years away from being a teenager, yet in my coffee hour conversations with other students, I heard how difficult it was for them to access counseling. They had to wait for months for an opening.

I have a family member who is a registered psychologist, and she has told me many times that insurance (if people have it at all) may only cover five or six sessions with her. It is so disheartening for her to see people not be able to receive the care they need. In her opinion, five or six sessions only scrapes the surface of what needs to happen for someone to achieve better health. Fees for registered psychologists often hover in the realm of \$200 an

hour – well beyond the limits of what students, or the retired, or the mentally-ill can afford.

Students are suffering. What about the mental health issues faced by retired folks, the recently downsized, or those suffering other illnesses?

We now have a conversation that is taking place (and we can thank Bell for putting its media muscle behind the awareness campaign.) But we need to do much more and relentlessly remind government officials that timely access to comprehensive mental health treatment is a necessity, not an option.

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**Sajeda Manzoor** loves to write about culture, nature, seasons, art and beauty. She writes short stories, haikus and theme-based poems, and believes that to live happily we need to see the beauty of nature and beauty in others. To live humbly and with compassion is the real goal of life. "Life has a beginning and an end nobody can deny".

## Depression

"Mental illness is not a personal failure"  
(HealthyPlace.com)

"Your illness does not define you. Your strength and courage does"  
(HealthyPlace.com)

Mental illness is caused by many factors in life. It is said that 1 in 5 leaders from all over the world at certain point will suffer from some kind of mental illness. The one I will discuss is depression, which is caused by certain changes in life, any chronic disease or relationships.

### Successful Celebrities: Depression and the Creative Types

History tells us many creative types of famous personalities dealt with depression, but not all are depressed. However, many public figures have admitted that, whether because of it or despite it, their process of dealing with depression has helped with the creative process. According to Sarah Glynn in

an article on [www.medicalnewstoday.com](http://www.medicalnewstoday.com), the majority of some psychiatric diseases, such as depression, anxiety syndrome, schizophrenia, and substance abuse, are more prevalent among authors in particular.

### Here are some famous people who achieved their professional goals suffering depression:

- Joan of Arc, French Saint
- Wolfgang Amadeus Mozart, Austrian composer
- John Quincy Adams, American President
- Abraham Lincoln, American President
- Mark Twain, author
- Mother Theresa of Calcutta, Albanian-Indian nun and missionary
- Audrey Hepburn, British actress
- Dick Clark, American entertainer
- Sir Anthony Hopkins, Welsh actor



- Harrison Ford, American Actor
- Michael Crichton, American writer
- Oprah Winfrey, American talk show host
- Ellen DeGeneres, American comedienne
- Simon Cowell, British record producer
- Lady Gaga, American Musician
- Kellie Pickler, American Singer

Depression is curable. There are many website counselling groups that can help one to cope with mental health issues. No matter where you are on your depression journey, you are in charge and can chart your own destiny. Things don't have to end badly. There are many places to turn to and many professional people equipped to help you write your own success story. The key things to always remember are to hang in there, ask for help, and don't give up.

### **Dealing with a depressed person in your life**

Who is the depressed person in your life? Is it a brother, sister, daughter, son, spouse or friend? Who is depressed, and is it hard for them to carry on their daily activities? How do you respond to them? Perhaps it's hard for you not to hold your breath and

wait for the other shoe to drop, so to speak. You don't need to point it out to them or make a huge deal out of it. You can simply help them enjoy being together, like going to the mall, a pool, ice skating, movies, cooking something special, sharing small gifts, praising, and giving encouragement to their accomplishments. It can make huge difference. It might be the first of many good days to come, so just exhale and be happy for the good times you are able to share. At any stage, you can suffer from the same thing, so the attitude you develop can help you to cope with it.

### **Daily affirmation**

Depression can have a negative impact on an individual. It has to be addressed by Cognitive Behavioral Therapy. It is a way to change your negative thinking and behavior. Since a big part of depression can involve negative inner thoughts, one's self-esteem may get low. There are techniques to cope with these feelings. One way is to perform by daily affirmation.

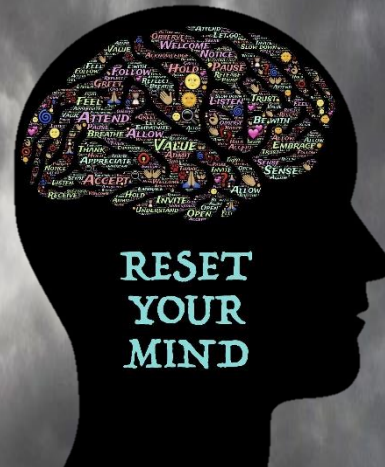
I will mention a TV show that aired in 1991 on Saturday Night Live. A character named Stuart Smalley practiced affirmations in the mirror, ending each skit with the phrases, "I'm good enough." I am smart enough, and doggone it, people like me" The most important part of daily affirmations is



to take a positive look at yourself. I gave this as an example to follow positive steps in a life suffering with depression.

**List of things to deal with mental anxiety and depression:**

- Get yourself dressed nicely
- Go for a walk
- Listen to nice music
- Read books
- Write what you like
- Do what makes you happy
- Talk to people
- Sometimes say to yourself
- I am a nice person
- I am a good person
- I am a good listener
- I am a generous spirit
- I can create things
- I can trust myself
- I am strong



I will end my article with my poem.



## There Is Light

You are a healer  
Of your own  
You can climb  
You can fall  
You can't give up  
You are a human

You choose to live  
You choose to laugh  
You choose to cry  
You have emotions  
You have eyes  
And vision

They can cheer  
They can have tears  
Always dare  
You have to live

Enduring them  
You can begin

It is your path of life  
What do you choose?  
Eventually you become

Never, ever give up  
Try to be a healer of your own  
And others  
You never know  
You will be a victim of it  
Be positive

Reference: *Depression: The Ultimate Teen Guide*, Tina P. Schwartz (Rowman and Littlefield, 2014)

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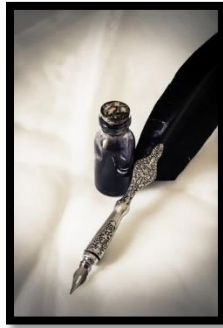
## Writing Exercises

### 1. Imagery

Set your timer for 15 minutes.

What does “mental health”—healthy or unhealthy—look like to you? Describe it as though it were a photograph or a painting. Choose your nouns and verbs carefully, and minimise your use of adjectives and adverbs.

When you’re finished, you (or someone with a pencil and paper) should be able to draw a fairly accurate picture based on your words.



### 2. Symbols

Writing is not about just putting words on a page. It’s important to add those layers of communication, ensuring each reader gets something meaningful from your writing. Symbols are an excellent way to add depth to your writing.

For this exercise, you’ll make two lists of symbols. They’re going to be very personal lists—which, of course, will likely lead to some more writing, so try this exercise when you have a fair chunk of time.

Consider periods of your life where your mental state was at one extreme or another. You can also think of people around you or characters from stories or movies.

My Symbols of Mental Health

My Symbols of Mental Illness

?



## Coming Up Next

Summer 2019

**Music**

deadline May 15<sup>th</sup>, 2019



### **Submission guidelines:**

- electronic submissions only
- send submissions to [sheilavdhc@gmail.com](mailto:sheilavdhc@gmail.com) and [info@mississaugawritersgroup.com](mailto:info@mississaugawritersgroup.com)
- include submission, a short bio (2-3 sentences) and an author's photo
- ensure your submission is relevant to the theme
- content must be in English or include an English translation

**N.B.** Content which contains hate speech or images, extreme violence or explicit sexuality will not be published.



## Write ON! in the Near Future

Not inspired by the theme for the upcoming issue of Write ON? Perhaps you need a different theme. Here are the upcoming themes for Write ON!

Autumn 2019 **The Global Village** deadline August 15th

Winter 2019 **Double Issue: Dystopia/ theme-free** deadline November 15th

Spring 2020 **Sports** deadline February 15th

Summer 2020 **Mystery** deadline May 15th

A reminder that Write ON! also accepts theme-related drawings, paintings and photos by group members.

Please send images in .jpg format



## **We are the Mississauga Writers Group**



We are a group of writers who have established this forum to share our experiences and pursue our dreams through creativity, knowledge and mutual respect. We want to learn from our strengths and talents and have enjoyable and stimulating conversations that only writers can relate to!

We would love to have writers from our community join us. All aspiring and established writers are most welcome. We believe we all have something special inside us. Come explore your talent with the Mississauga Writers Group.

**Website** - [mississaugawritersgroup.com](http://mississaugawritersgroup.com)

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