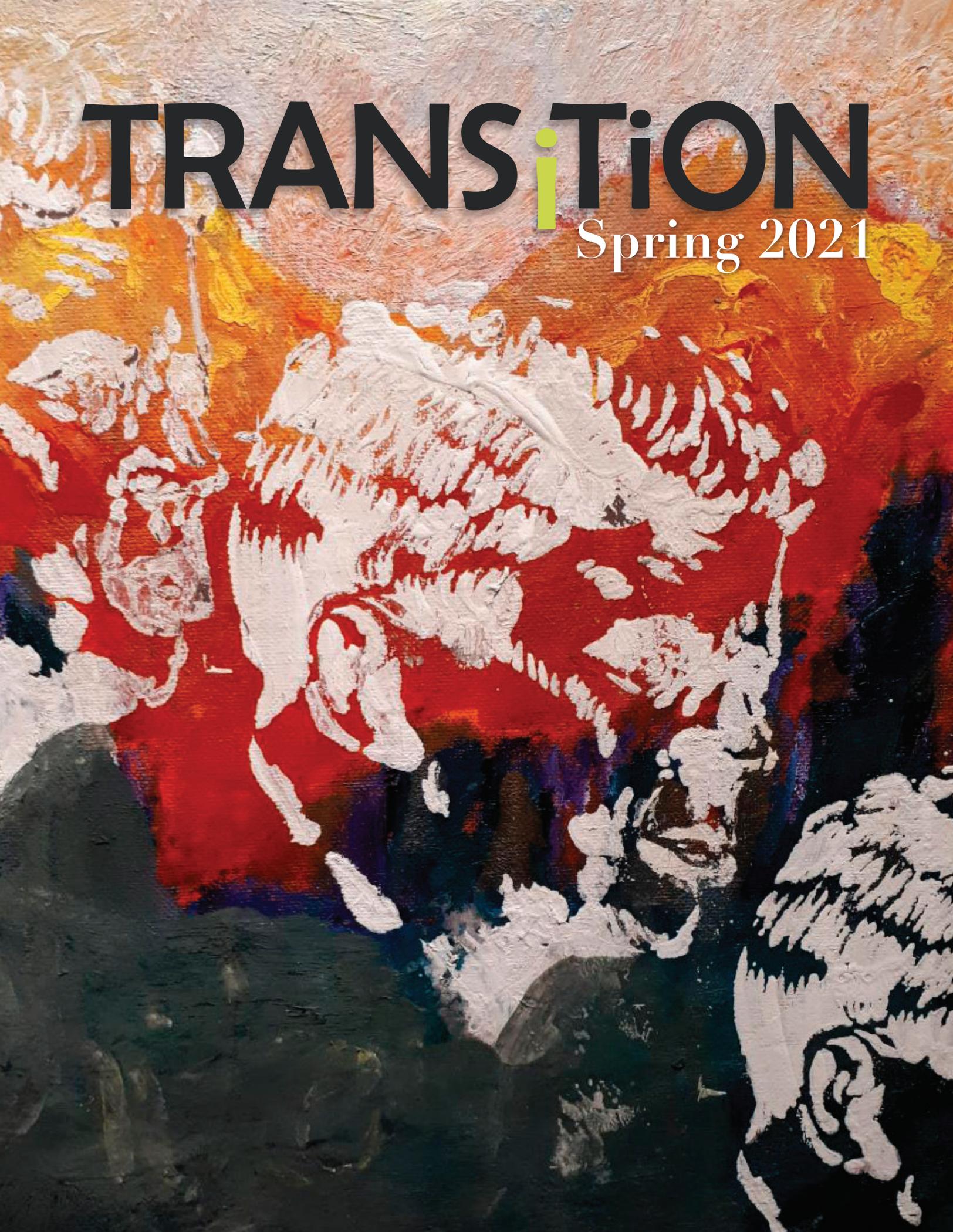


TRANSITION

Spring 2021



TRANSITION

Paulo da Costa

PUBLISHER: Phyllis O'Connor,
Executive Director
Canadian Mental Health Association
(Saskatchewan Division) Inc.

EDITOR: Ted Dyck
EDITORIAL DESIGNER: Daniel Blondeau

Our Mission:

Founded in 1950, The Canadian Mental Health Association (Saskatchewan Division) Inc. is a volunteer-based organization which supports and promotes the rights of persons with mental illness to maximize their full potential; and promotes and enhances the mental health and well-being of all members of the community.

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1. Send original and unpublished articles, fiction, non-fiction, poetry, and visual art that represent current mental health issues and reflect on their impact on individuals.
2. Maximum manuscript lengths: prose – 10 ms pages; poetry – 10 poems or 5 ms pages, whichever is less; visual art – 5 pieces.
3. Unsolicited international contributions, reprints and simultaneous submissions (to several magazines) are not considered.
4. Turnaround time is normally within one issue or up to 6 months: do not send a second submission before the first has been reviewed.
5. Payment is \$50.00 per printed page (\$25/half page); \$40.00 per published visual art work; \$200.00 for cover art; Cap on contributions: \$200/author.
6. Only electronic submissions including full contact information and a brief bio are accepted.
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CMHA PAGES

Ted Dyck:
And How's Your Pandemic..... 0

Phyllis O'Connor:
Executive Director's Report..... 1

Faith Bodnar:
Spotlight on CMHA Saskatoon Branch..... 3

Rebecca Rackow:
C.A.R.E.ing Through Covid-19..... 7

Phyllis O'Connor:
One Year + : Pandemic Fatigue..... 8

John O'Connor:
Resilient Minds..... 10

CMHS Saskatchewan Division:
BounceBack..... 11

CMHA National Office:
Mental Health Impacts of Covid-19: Wave 2..... 12

CMHA National Office:
Is it Time for Universal Basic Income?..... 13

WRITING THE LIFE

FICTION

Robert N. Friedland:
The dark side of the moon..... 15

Arthur Gardiner:
The blue coveralls..... 18

Rolli:
The Great Gaspy..... 20

NONFICTION

Paulo da Costa:
Grandfather swallowed the clouds..... 26

Jason Schreurs:
Ableism is..... 33

Charity Konrath:
Barefoot..... 34

Barry Styre:
Dubious inventions..... 36

POETRY

Colleen Anderson:
Three poems..... 37

Byrna Barclay:
Conference for the birds..... 38

Tillen Bruce:
Ars Poetica..... 39

Jessica Dawson:
Autumn, 1994
Trigger warning..... 40

Catherine Fenwick:
Military strategies..... 41

Beth Goobie:
If You Are A Poem..... 42

Denise Wilkinson:
Bereft..... 43

WRITING FOR YOUR LIFE

Judge's Comments..... 44

EASTEND (Facilitator: Ted Dyck)

Caitlyn McCullam..... 45

Mareike Neuhaus..... 45

PRINCE ALBERT (Facilitator: Lynda Monahan)

Debbie Cochrane..... 46

Sherry Favreau..... 46

Ayami Greenwood..... 47

Wendel D. Guedo..... 47

Holly Knife..... 48

Paige Peekeekoot..... 48

REGINA (Facilitator: Lyn Hynes)

Jayne Melville Whyte..... 49

SASKATOON (Facilitator: Jeff Park)

Stephen Dunster..... 50

Samantha Hansen..... 51

Cory Wiebe..... 52

Naomi Doell..... 52

Larry Lauder..... 53

Derek Sarazin..... 53

James Skelton..... 54

Brenda Stretch..... 54

Jim Snyder..... 54

WEYBURN (Facilitator: Tasha Collins)

Jennifer Morin..... 55

Kevin Prokepetz..... 55

Ivan Robb..... 56

Eric Valentine..... 56

Barry Styre..... 57

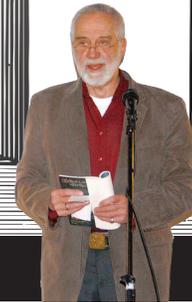
NOTES ON CONTRIBUTORS..... 58



**Canadian Mental
Health Association**
Saskatchewan
Mental health for all

AND HOW'S YOUR PANDEMIC

Editorial By Ted Dyck



I don't know about you...
but I'm tired of mine. Masking.
Social distancing. Quarantining.
Cocoons. Bubbles. Lockdowns.

I flipantly tossed off the thought of an endemic pandemic in the title of my Fall 20 editorial. Forgive me, I had no idea ...

It turns out that there may be no end to pandemics ... perhaps there's never been a first pandemic, either.

Almost any communications website today notes a most significant change that COVID19 is engineering in its world – it's rapidly becoming **ZOOM BABY ZOOM** – or nothing.

Now, I've spent a lifetime doing communication – speaking, teaching, reading, writing, editing – or, as I sometimes crassly put it, my thing is words. And the change in my life in words is that the 4-D tetrahedron (triangular pyramid of four sides) of speaker/writer, text, and hearer / reader in real time has been flattened onto a 2-D screen flickering in internet-time.

(Exercise: Draw a tetrahedron.)

Don't get me wrong – like most other, ahem, “communicators,” I've long been transitioning (ha!) part of what I do in four dimensional space-time into two dimensions of space in time – and I'm grateful for possibilities the internet has opened up. Just the other day I accepted a contract to do an FID writing workshop on ZOOM. See what I mean?

Sorry, I don't need to belabor the point – either we feel in our bones what I'm talking about, or we've become arthritic during the past year. No matter how we spin it, something integral to communication has been radically diminished. It's called The Real.

Of course, one utterly new thing has emerged: this pandemic, this virus called COVID19, which is transforming itself into new variants as it takes over the world. and dominates this spring issue of this magazine.

Finally, I want to thank Lynn Hill for her many years of dedicated service and for her excellent “eye.” And I welcome our new layout editor, Daniel Blondeau – I think you will enjoy his work as much as I.

EXECUTIVE DIRECTOR'S REPORT

Submitted by Phyllis O'Connor,
Executive Director, CMHA SK. DIV.

2020 was certainly a wild ride.

We started the year full of hope and in anticipation of exciting new initiatives like the H.O.P.E. Learning Centre, the further expansion of our OSI-CAN PTSD support program in the western provinces, and our first “We’re Only Human – Promoting Workplace Wellness” Conference. Then in March COVID-19 raised its head and everything changed in an instant.

During 2020 CMHA Saskatchewan Division and all of our branches proved just how nimble a community-based organization can be. Almost overnight we started to develop new ways of delivering our presentations and programs.

Concern for the wellbeing of our clients, staff and our communities was foremost in our minds. Branches set up schedules to check in on their clients and some started to do their meal programs on a “take out” basis, providing another avenue to check in on people. CMHA Saskatchewan Division, with support from **SaskTel** and the **South Saskatchewan Community Foundation**, established the Wellness Response Lines which were meant to run for a short time to address the anxiety around COVID-19, but which are still running today and which will continue well into 2021. During the period this program has been in operation, we have taken over 1,000 calls from people looking for mental health supports, system navigation, or just a friendly voice to talk to.



As restrictions eased somewhat during the summer, once again our branches adjusted to provide programming on a scheduled basis with fewer clients at a time and observing all the health and safety protocols. As the pandemic has ramped up again in the second wave, branches once again have had to adjust. Some branches have had to close, but staff are still available to take calls and help clients navigate through this very difficult time.

The H.O.P.E. Learning Centre has had to move to virtual programming. Even though we can't have people attend training in person, the programming has continued. One very successful venture is our Mental Health Bytes. Each Tuesday at noon there is a one-hour presentation on a variety of topics which individuals can access free of charge. To find out dates, times and topics visit our website at **www.skhopelearningcentre.ca**

One exciting development is the expansion of the Talk Today program to include players in the SJHL. For a couple of years now our branches have been supporting WHL players providing safeTALK training and acting as mental health coaches. While the SJHL season is on hold right now, CMHA branches will be ready to make connections with these teams to provide mental health support once their season is able to start. We are also very excited to announce the

Executive Director's Report

expansion of the Resilient Minds program for firefighters here in Saskatchewan. You will find a report on this exciting program which has officially launched January 2021. We look forward to being able to help professional and volunteer firefighters in our province build their resiliency in the face of the mental health challenges they face in their work.

We are pleased to report that our OSI-CAN program is now expanding into British Columbia. This means there will now be active groups throughout the provinces of Saskatchewan, Manitoba, Alberta and British Columbia. We look forward to working with other CMHA Division to further expand this important program. Our vision is that no matter where a member of our target demographic may go, they will be able to find an OSI-CAN support group to help them on their recovery journey.

I also want to express our sincere appreciation for our many donors, both corporate and individual, who have so generously supported us through this challenging year. As people recognized the impact COVID-19 was having on the mental health of individuals, the people of Saskatchewan really stepped up to make sure we could continue with our work. We have seen an increase in donations and our Cash Calendar and 50/50 fundraising campaign was

a huge success. Thank you so much Saskatchewan! We couldn't do it without you.

Finally, I want to express my personal thanks to all of our amazing staff at CMHA Saskatchewan Division Office and all of our branches. They really stepped up to address the need in our province and I couldn't be prouder of all that they have accomplished this year.

COVID-19 will not be with us forever and with the increasing availability of a vaccine we hope 2021 will be the year when things turn around. In the meantime, please recognize that anxiety is a normal response to events such as we have experienced in 2020 and it's okay to not be okay. If you are struggling, please reach out for help.

Control what you can and let the rest go. Take things day by day.....or moment by moment. Be compassionate with yourself. Be creative about finding things to look forward to. Find reasons to laugh. Look back, but carefully. Times have been tough, but turn around and see how far we have already come. We can get through this.

Wishing you the best of mental health in 2021.



H.O.P.E.
Learning Centre

Helping Others thru Peer Education



SPOTLIGHT

ON CMHA SASKATOON BRANCH

By Faith Bodnar,
Executive Director CMHA Saskatoon

It's been quite a year! And that's an understatement for sure. It's hard to even begin to capture all the changes, adjustments and issues we have been confronted with. The emerging impacts of the pandemic expose and exacerbate gender, racial, and economic inequities; and gaps in programs; and compel us to develop new approaches and more and different services.

The One good that has come from this devastating pandemic can might be embracing the fact that all of us need support to maintain and restore our mental health and create hope for the future. And in many significant ways, it has taken a pandemic to bring mental health out of the shadows and into the mainstream of everyday life, not for some but for us all.

As pandemic restrictions were put in place, the ways we connect with each other and our families, friends, neighbours, and colleagues shifted drastically. At times, the speed of change made it difficult just to keep up. But in all of what has happened since March 2020, we have also demonstrated our adaptability and strength as

1,000,000 Steps!
#MillionStepsForMentalHealth



people and communities and agencies.

What stands out for all of us at CMHA Saskatoon is the resilience of our city, those we support, and our Board and staff. We have been called to respond quickly, adjust, pivot, change and then do it all over, again and again. And we have risen to the challenges, as difficult as it's been. We looked

Spotlight On CMHA Saskatoon Branch

at everything we do, changing to meet the needs in new ways. So, we can't talk about what we do, without first taking into account how the pandemic has changed us.

At CMHA Saskatoon, the pandemic resulted in a wholesale shift to virtual services and a three-fold increase in our contact with our clients since last March 2020. In addition, our partnership with CMHA Saskatchewan Division on the Wellness Support Line has brought many new people to us, seeking support, a listening ear, connection, and assistance in navigating COVID, while maintaining mental wellness. All this while making sure people received timely, relevant, and meaningful support. While we adjusted and readjusted to new ways of delivering our programs and services, we have been mindful that many of the changes we are making will become a permanent part of what we will do into the future. In fundamental ways CMHA Saskatoon has been transformed by COVID.

Even with the pandemic, at CMHA Saskatoon our work remains focused on:

1. Employment Services, Mental Health Supports, and Labour Consultation
2. Education and Awareness
3. System Navigation
4. Partnerships and Special Initiatives

Supporting people to get and maintain work sounds simple enough, but we know that this begins with helping people believe they have skills, important things to contribute, and that with the right support they can work. The journey to work is very much unique to each person and can include mental health supports, workplace accommodation, assessing skills and goals, additional training and education, and work-based life skills. Working with employers is key in this process, in supporting helping them to understand they can accommodate people with mental health needs.

Wellness Support Response Line Directory

Prince Albert	1-306-940-7678
The Battlefords	1-306-441-5746
Saskatoon	1-306-270-3648
Rosetown	1-306-831-4083
Swift Current	1-306-741-5148
Moose Jaw	1-306-630-5968
Regina	1-306-535-4292
Weyburn	1-306-861-4951
Provincial Div.	1-306-421-1871



life is just better with burritos.

FROM MARCH 1 - 31ST
 \$2 FROM EVERY BURRITO SALE GOES TO MENTAL HEALTH PROGRAMMING AT THE CANADIAN MENTAL HEALTH ASSOCIATION IN SASKATOON!

and your burrito just made a difference in someone's life.

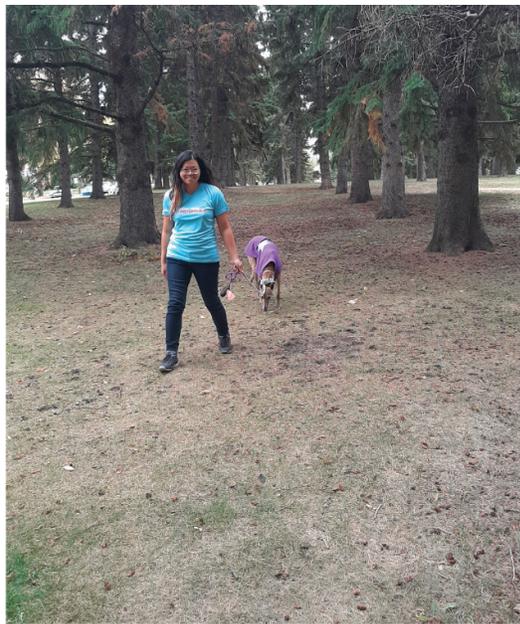


Spotlight On CMHA Saskatoon Branch

Prior to COVID, we provided vital, in-person education and training to over 4500 people / per year. This included in workplaces and for community and sports groups, professionals, students, educators, post-secondary institutions, and members of the public. Knowing how important this work is and given the impacts of the pandemic, we quickly moved to online education, realizing early on that we needed a more systematic and effective way of virtual delivery. We were able to secure a grant and are looking forward to launching the online CMHA Saskatoon Wellness institute this March. With the

shift to online learning, we are excited to launch what will be a growing catalogue of workshops and learning opportunities that ensure easy access and anytime learning. This allows us to further expand and customize our content, accessing experts in different fields, linking to other courses, as well as delivering our own interactive sessions.

The old saying, “one thing always leads to another,” certainly holds true for CMHA Saskatoon. With the new Wellness Institute and the shift to online social connections, our website became an urgent priority.



Spotlight On CMHA Saskatoon Branch

We had known for a while we needed to update it, and the pandemic made it an imperative. So we are looking forward to launching a new, modern, and interactive website in March. If anything, the pandemic has underscored the need for us to be on top of the ways people connect with each other and CMHA Saskatoon.

We've always been a central hub for people searching for mental health services for themselves and their loved ones. Our focus is to be there when people need us, to listen, and to help them access what they require. Navigating services are is a challenge at the best of times, but when you're struggling it can feel impossible. We field inquiries from families, professionals, and government with the goal to help people advocate for what they need and connect them to best resources.

A December 2020 highlight was our first ever Holiday Hamper project. We knew that the holidays were going to be challenging and wanted to reach out and offer a hamper full of activities and ways to stay

healthy at a time when many struggle. The pandemic made it even more important than ever that people knew someone cared. With a theme of the 12 days of Christmas, we delivered 75 wellness hampers to people across Saskatoon. It was a first come, first served, no conditions gift. Each hamper included self-care products and projects, indoor and outdoor activities, and gifts. With the overwhelming response, we are already planning next year's Holiday Hamper.

Partnerships and special initiatives are how we test new programs and approaches and raise awareness about mental health. By bringing attention to issues like domestic violence, poverty, lack of affordable housing, the need for more mental health services, isolation and loneliness, suicide prevention, and working with our community partners, we build strength, hope for the future, and momentum for lasting progress.

We also are privileged to be able to have some fun. Whether that be an online give-away, contests to engage people in mental health, special events like the Shoppers Drug Mart Run for Women, or the Workplace Excellence Awards, creating awareness also means celebrating accomplishments and even having fun while staying healthy.

As a member of CMHA Saskatchewan Division and along with over 300 other local branches across Canada, our connections with other communities and provincial and national leadership adds tremendous value and capacity to what we do. As part of a movement for human rights and full citizenship for people with mental health needs, we join together as a force for change that has shaped Canadian society for more than 100 years, helping build a country where everyone belongs and is welcomed for who they are.



C.A.R.E.ing Through Covid-19

By Rebecca Rackow
CARE Program Director

During this pandemic time, the C.A.R.E. program has been busier than ever. We were highlighted in the Rexall Drugs sale of circles to display in-store across the province as their chosen CMHA program supporting the needs of caregivers. This reflected the heightened awareness to the need for supporting caregivers during the pandemic times. There have been many requests for short webinar sessions that include caregivers Nationally, with the Muscular Dystrophy Association of Canada, Extencicare in Saskatchewan who have been hit hard with Covid-19 cases, our own Mental Health Bytes, and many other events requesting some clarity about how caregivers, who are extremely overworked and overstressed, can take care of their mental health.

We have been addressing questions such as:

- How can you take time for yourself when there is nowhere to go out?
- Does self-care have to cost money?
- How much time does someone need to do effective self-care?
- How do I make self-care a priority when no one else can help care for my person?
- How do I use self-care effectively without it becoming just another chore that is on my long list of things to do?

There have also been a lot of caregivers who are working extra over-time because the strict rules of not coming into work sick had many people staying at home.

During times like this present pandemic time, it is easy to see all of the things that make caregivers important to our world and be grateful for all of the essential things that they do and stressors that they face even as it may effect their own health. That sense of sacrificing themselves for others is a trademark way of thinking for caregivers and it is because of this way of thinking that caregivers need to be reminded that they are important and essential and needed in their top form, so taking care of themselves and their mental wellness has to be a priority.

If you have caregivers in your life, please let them know how important they are. If you think that they would benefit from learning more about maintaining their own wellness, have them call me at CMHA, Saskatchewan Division office and I would be glad to arrange some time for them.



Caregiver
Affected
Recovery
Education

TO ALL OUR FRONT LINE WORKERS,
THANK YOU



ONE YEAR+ :

PANDEMIC FATIGUE

By Phyllis O'Connor
Executive Director CMHA SK. Div.

We have now passed the one year mark since COVID-19 reared its ugly head and quite frankly, we are all getting tired.

An Angus Reid study painted a picture of a country whose optimism and resilience has become “literally depressed” by the pandemic. This year, the percentage of Canadians who can be categorized as The Desolate, those who suffer from both loneliness and social isolation, has increased from 23 per cent of the population to 33 per cent. Further, the percentage suffering from neither has dropped by nearly half, from 22 per cent to 12 per cent. As Canadians have become more isolated, many are voicing concerns about their mental health. Last year, two-thirds (67%) said their mental health was good or very good; this year just 53 per cent say the same. One-in-five (19%) now share that their mental health is either poor or very poor, with three-in-ten young women (30%) reporting this.

Isolation, Loneliness, and COVID-19: Pandemic leads to sharp increase in mental health challenges, social woes - Angus Reid Institute

Social isolation has certainly played a large part in this increase in people reporting declining mental health. Along with that is the fact that we are all just tired of having to cope with this pandemic. People are suffering from mental fatigue,

crisis fatigue, compassion fatigue, online fatigue and moral/decision fatigue.

The human brain is much like a gas tank. We have a limited amount of energy and as we make decisions through the day, that resource becomes depleted and fatigue ensues. The difference now is with the pandemic we are not just making a lot of decisions, but now we are making high-stakes, moral decisions. It seems a lifetime ago that the simple decision to gather with friends for a meal or hop into the car and go to visit Grama were simple. We now have to think through potential implications in a way we never had to before because our decisions can affect others. We are making difficult ethical decisions where there might not be a clear right answer. All of this causes moral fatigue and it is exhausting!



One Year + : Pandemic Fatigue

Crisis fatigue is our human response to unrelenting stress which can make us feel both physically and emotionally exhausted. We are feeling overwhelmed and stressed. Most of us have no experience of going through an event like this pandemic so we don't have experience to support our coping and resiliency skills. This is like navigating through uncharted waters. This chronic stress can have very real effects mentally and physically.

The pandemic has also been extremely stressful for parents and caregivers. They now have to juggle day-to-day work responsibilities which also caring for children at home. Parents also have to help support their children in understanding and coping with changes brought about by the pandemic.

We have probably all heard of "Zoom fatigue" or online fatigue. There is a scientific reason for this. In face-to-face interactions we experience what is called high fidelity interactions. It is easy to gather a lot of good information from facial expressions, body language. Pitch and intensity of language and emotions are easily detected. When we are interacting online what we receive is low-fidelity information which means our brains have to work much harder to get not just the up front information but to read the cues that come easily to us when we interact in person. We feel tired because we are actually working much harder.

So what can we do to control or cope with this exhaustion?

Be aware of your feelings and talk to others about it.

Try to have some compassion for yourself and others. Understand that everyone is trying to do the best they can under very difficult circumstances. Don't focus on things outside of your control. Focus on what you can do.

Limit news and social media exposure. Having the information you need to make good choices is good but a constant flow of bad news is harmful to our mental health. Make sure your news sources are reliable. There is a lot of misinformation out there.

Limit your online meetings and take regular breaks. Avoid multitasking. We need to learn to optimize our online experience as we will probably going to be working this way for some time yet.

Take things day by day.....or even moment by moment.

Be creative about finding things to look forward to and find reasons to laugh. Laughter really is the best medicine.

Exercise. This can be difficult when you are feeling exhausted but even a small amount of exercise can go a long way to increasing our feelings of wellness.

Look back, but carefully. Don't dwell on pre-covid times, but look back to see how far we have come so far.

Reach out for help if you are feeling overwhelmed. Feelings of anxiety and depression or just being overwhelmed are normal in this situation. There is no shame in reaching out for help.



RESILIENT MINDS

Steve Fraser, Vancouver Fire & Rescue Services

GIVING FIRST RESPONDERS A TOOLBOX
FOR MANAGING STRESS & TRAUMA

By John O'Connor
Resilient Minds Program Director

Resilient Minds launched in Saskatchewan in December of 2020. Its goal is to support fire fighters by promoting healthy behaviours and helping to save the lives of first responders.

Founded in 2015, Resilient Minds started as a partnership between Vancouver Fire and Rescue Services (VFRS) and the Canadian Mental Health Association to develop a program in response to the concerning experiences of fire fighters and stress-related injuries. VFRS had recognized a skill deficit and gap in education centered around managing stress and trauma responses, which was resulting in an increase of psychological distress and illness across all fire staff.

Resilient Minds was created and piloted in Vancouver, BC to the 800 members of VFRS. Fire Fighters were directly involved with the development process to create a training program that addressed the unique needs for fire and rescue service.

The Resilient Minds team engaged Arbor

Educational & Clinical Consulting Inc., an independent researcher to assess the program. The primary goals of the assessment were to understand how the course was experienced by fire fighters, their ability to cope with occupational stressors and if there was a positive shift in workplace culture. The results of the assessment were that 100% reported learning new knowledge about resilience and stress management and 100% reported learning new knowledge about psychological trauma and/or mental health.

What is Resilient Minds?

It is Innovative and Evidence-Informed – Resilient Minds is a skills and resilience development training course designed by and for fire fighters using the latest literature on resilience, stress and stress-related injuries.

Fire Fighters Train Fire Fighters

Using a peer-to-peer model of instruction, the Resilient Minds curriculum is taught by fire fighters to fire fighters. It reflects the experiences and culture of the fire fighters.



Whom does it serve?

Resilient Minds is the only training program designed to train both career and volunteer fire fighters and takes into consideration the differences in experience and resources available to the two groups. Resilient Minds is the only training program designed to equip both career and volunteer fire fighters, considering the need for differences in experience and resources available between the two groups. According to the National Fire and Paramedic Association (NFPA), more than 80% of Canada's fire fighters are volunteer-based, with significant less access to training and development opportunities afforded to career fire fighters.

By using the training methods taught, Resilient Minds has shown that it will increase the ability to: Recognize the effects of psychological stress/trauma in self and peers.

Communicate effectively with peers who may be struggling with the effects of stress/trauma. Respond promptly, safely and appropriately to distressed citizens.

Apply personal strategies for managing stress, mitigating trauma, and boosting resilience.

The Canadian Mental Health Association is committed to support fire fighters in a way that is specific to their occupational stressors.

For questions or to learn more, please email phands@cmhask.com

The CMHA National BounceBack program is now available to residents of Saskatchewan thanks to the generous support of Bell Let's Talk.

BounceBack is a free, guided self-help program that helps adults and youth 15+ learn to manage low mood, mild to moderate depression, anxiety, stress or worry. Through telephone coaching and skill building workbooks, participants can learn ways to overcome their symptoms and improve their mental well-being.

Based on cognitive behavioural therapy, BounceBack has been shown to reduce depressive and anxiety symptoms by 50%. BounceBack has been operating in British Columbia, Ontario and parts of Manitoba where it has been tremendous success. Thanks to the support from Bell Let's Talk, it has now been expanded across Canada.

COVID-19 is here now but and its impacts will be felt for some time. BounceBack can help people build new skill and the resilience to adapt to the challenges we are all facing.

BounceBack is available in English and French and is free to all participants. Participants are guided by trained BounceBack Coaches who are overseen by clinical psychologists. They can be referred by their family physician or can self-refer by filling out an online registration form.

We are also in the planning stages to roll out BounceBack for Youth in the early spring of 2021. Follow our social media for the announcement when it becomes available.

To find out whether BounceBack is right for you, visit www.cmha.ca/bounceback

Mental health impacts of COVID-19: Wave 2

Scan for link!



In late 2020 CMHA National and the University of British Columbia undertook a research project in partnership with Maru/Matchbox to examine the mental health impacts of the second wave of COVID-19.

These results were broken down by province and the following is a summary of findings for Manitoba/Saskatchewan.

SELF-REPORTED CHANGE TO MENTAL HEALTH

Mental health has deteriorated since the onset of the pandemic	40%
--	-----

EMOTIONAL RESPONSES TO COVID-19

Anxiety/worry	50%
Stress	41%
Sadness	23%
Depression	21%
Calm	19%
Hopeful	16%
Empathetic	15%
Content	11%

EXPERIENCES OF STRESS OR WORRY

Worried about: Second Wave of the Virus	64%
A loved one or family member dying	59%
Contracting the virus	56%
Being separated from family and friends	53%
Vaccine safety and effectiveness	46%
Finances	41%
Vaccine availability	27%
Job loss	22%
Having enough food to meet family's needs	20%
Being safe from domestic violence	5%

HEALTHY AND UNHEALTHY COPING STRATEGIES

Increased substance use as a way to cope	18%
Increased alcohol use	18%
Increased cannabis use	15%
Increased prescription medication use	6%
Exercising outdoors	62%
Connecting virtually with family and friends	26%
Maintaining a healthy lifestyle	41%
Connecting in person with those in their "bubble"	32%
Having a supportive employer	14%
Using virtual mental health resources	4%
Government benefits and supports	9%

To view the full report go to:

<https://cmha.ca/news/despair-and-suicidal-feelings-deepen-as-pandemic-wears-on>

CMHA believes everyone should have enough to live, all the time. Mental health depends on it.



Is it Time for Universal Basic Income?

Position Paper: CMHA National Office

With all of the economic upheaval that has occurred as a result of the COVID-19 pandemic, attention is once again turning to some type of universal basic income.

Income is one of the important social determinants of health. The three most significant determinants of mental health are social inclusion, freedom from discrimination and violence, and access to economic resources, including access to a stable source of income. Evidence points to a causal effect between income and health. Those with lower incomes generally report poorer physical and mental health than those in the higher income brackets.

There are several different definitions of “basic income” but it is generally understood to be an unconditional payment from the government to individuals or families to ensure a minimum income

level. There typically would be no strings attached. Individuals receiving this payment are not required to work, look for work or participate in education or training to receive the payment. In a universal basic income program, benefits are paid to everyone no matter what their income. This is a model that could be supported by Canada’s income tax system where benefits are “recovered” from households with higher levels of income.

Provinces across the country have different income support programs and some are more generous than others. Along with these programs come strict regulatory frameworks. These frameworks dictate who can access the programs and usually include punitive measures if the frameworks are not adhered to. Basic income could actually replace the current policing, control and monitoring functions.

Hon. Hugh Segal noted in his discussion paper

Is it Time for Universal Basic Income? Position Paper: CMHA National Office

Finding a Better Way: A Basic Income Pilot Project for Ontario, the key measure of success of a basic income plan must be intricately connected to whether such a plan is able to reduce poverty more effectively, encourage employment, reduce the stigma associated with a physical or mental health-related disability, and produce better health outcomes and improved quality of life as determined by the recipients themselves. ¹

During these uncertain times, the Government of Canada has taken a progressive step forward and provided the Canada Emergency Response Benefit (CERB) to thousands of Canadians who were impacted by the loss of income as a result of the COVID-19 pandemic. For many Canadians, this support was critical for them to make it through. This type of universal basic income should carry beyond the pandemic to become a cornerstone of our society.

CMHAs across Canada have had a long history of supporting initiatives such as poverty reduction, overhauling social assistance, increases to minimum wage, homelessness prevention and improving access to affordable housing while fostering an environment that addresses stigma, promotes economic and social inclusion, and builds equity and fairness for all.

1. Ontario Government Archives. (2016). *Finding a Better Way: A Basic Income Pilot Project for Ontario*. A discussion paper by Hugh D. Segal Retrieved from: <https://www.ontario.ca/page/finding-better-way-basic-income-pilot-project-ontario>

Scan for link!



**A universal basic
income would
protect our mental
health.**



The dark side of the moon

By Robert N Friedland

My wife, Jane, was an epileptic.

I was reminded of this, once a month, whenever I refilled her prescription for Dilantin, a drug that prevents and controls seizures. Otherwise, it came to mind only when she had a seizure.

For many years, Jane had seizures in her sleep, in bed. About once a year or so.

When Jane had a seizure in her sleep, I would have also been sleeping, right beside her. I would be awakened by the shaking of the bed, and a buzzing, humming sound, coming from her head. When I gathered my wits, I would sit up in bed beside her and say calming things.

We had been married for many years, with six children, three boys and three girls. It was then that I learned that Jane had a second, very different personality. I only saw it, just the once.

Jane was a good wife, a good partner in life, and a good mother. She worked, first full-time, and then, later, part-time, as a registered nurse at the local hospital. She was highly valued by her employer, and well liked by her co-workers.

Jane was not a prude, not overly prim, nor improper. We had a rich, rewarding, and active life of sexual intimacy, with few, if any, acts or configurations, off limits. Jane liked the occasional glass of wine, but I had never seen her inebriated. Jane had lasting friendships

with men and women, but was never unfaithful, as far as I knew, or had any reason to suspect.

One night, I was awoken by one of Jane's seizures. I sat up beside her and tried to calm her. However, there was something different about this night, about this seizure. By her posture and demeanor, it was evident that the woman beside me was not Jane, but a woman with a completely distinct personality.

Jane appeared flushed, wanton, slatternly, and sexually provocative. She was sitting half up, her blue and white flowered flannel nightgown pulled up to her waist, with her knees raised, her legs spread, her white thighs exposed, and her blue eyes glowing, on fire. She was beckoning me with outstretched arms and hands, beckoning me to enter her. I tried to calm her, to speak gently, to encourage her to lie down and rest, but she would not. Nor would she answer to her name.

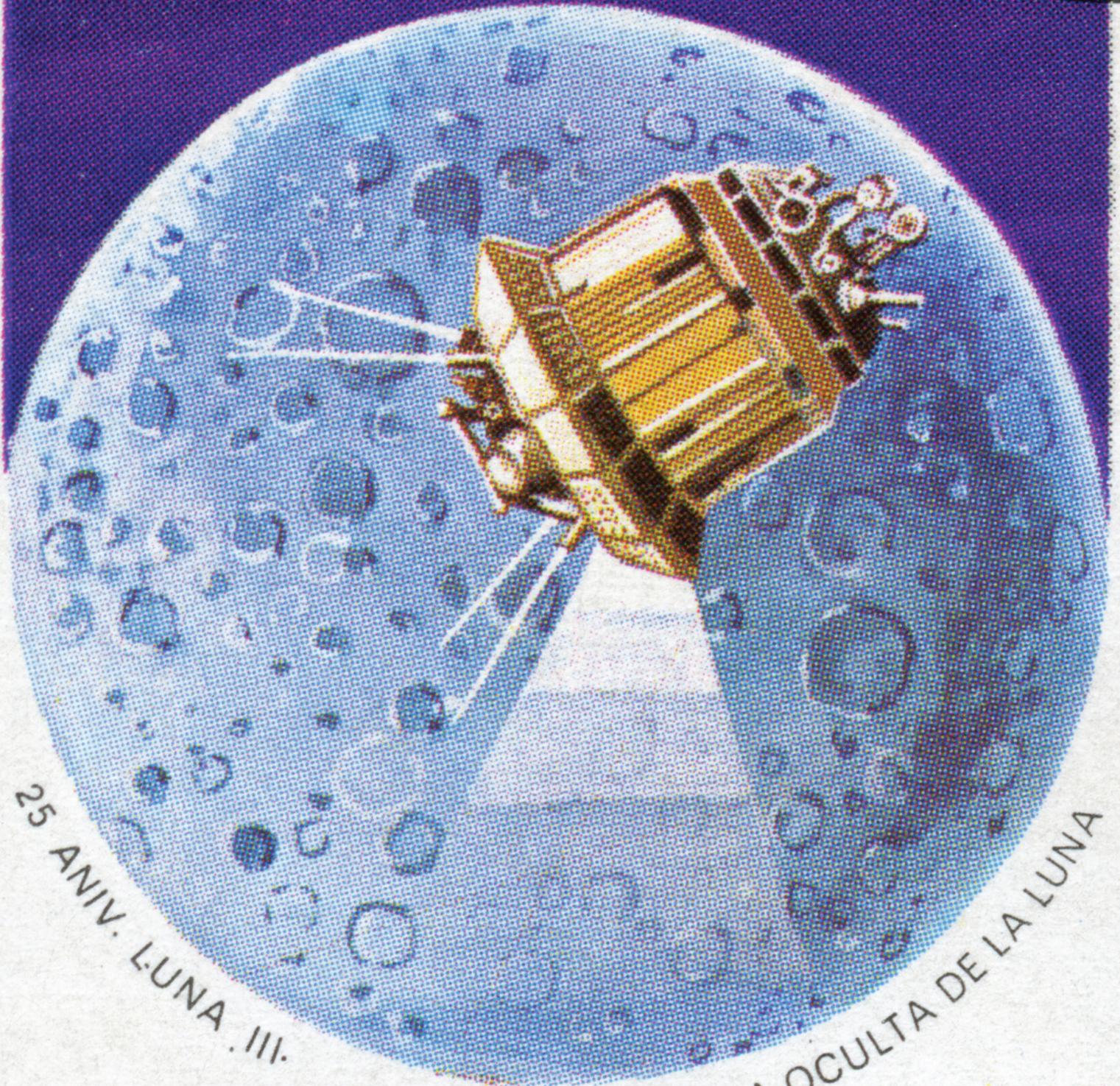
Jane said nothing, or, more accurately, said no words that were recognizable, as words.

I know this isn't about me, or shouldn't be. But it was a terrific surprise. Who was this woman that I had been sleeping with for more than a dozen years? Where was she hiding when she was not present?

Hiding may be unfair. It implied a motive, when there was no reason to think there was a motive. But where was she? It made me think, what did I

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The Dark Side Of The Moon

really know about her life before we met?

Was this an historic behaviour? If not, how was it learned? Could it possibly be a genetically coded response to a perceived threat? I did not see any fear in her eyes.

An old girlfriend once told me that women lied to avoid physical violence at the hands of much bigger, stronger, male partners. She said that it was an ancient, even a pre-historic, defense mechanism. It seemed to me like a reasonable course of action for a woman to take.

Years ago, another woman told me that she was coming home with her new beaux and as they entered her apartment, my voice message to her was playing. She told me that, "It happened so quickly. I didn't have time to think of a lie."

Then, I thought, maybe it was just Jane's mind replaying a scene from a motion picture. A movie in which a vamp seduces a hapless male. Like Theda Bara in "The She Devil" or "Cleopatra". Maybe Jane had somehow internalized those storylines and the actress's roles.

The worst part, please don't judge me, is that I found this woman sexually stimulating. Very sexually stimulating. There was no question but that I resisted Jane's, or her other personality's sexual temptation. But it was arousing. I was aroused. More aroused than I had ever been aroused by Jane, before.

I wondered, was I married to Jane's other personality?

Would I, one day, know that other woman?

The next day, or next evening, when Jane had pretty much regained most of her calm and normal composure, and we were talking in bed, I told her about the other personality. Maybe I should not have. Jane did not believe me. Would not believe me. I dropped the subject, but the episode created a distance between us that had not previously existed.

I can't say that it was what had led to our divorce. But I also can't say that it did not. It was an unbridgeable gap.

Sure, I looked it up on the internet. Turns out that a revealed second personality in epileptics was not uncommon. A number of researchers commented on the wanton sexual presentation, as well, although none explained it.

I wondered, too, was Jane the Vamp the expression of a repressed sexuality? As I mentioned, we had an active life of physical intimacy in which we were open to almost any sexual acts. Had our repertoire been circumscribed by my own inhibitions? Did Jane want other partners? Multiple partners? Women partners? Sex with dogs? What do we really know about another person's secret inner life?

Because the moon takes just as long to rotate around its own axis as it does to revolve around its long term partner, we never see the dark side of the moon. On October 7, 1959, the former Soviet Union's Luna 3 took the first photographs of the dark side of the moon. It was always there, but we just couldn't see it before.

THE BLUE COVERALLS

By Arthur Gardiner

The pain! As agony increased, the resident-in-charge of internal medicine and the duty surgeon conferred in low tones at the foot of my bed, then called in a nurse, who had been hovering like a ghost on Halloween. After one or two significant glances towards me, further murmured consultations, serious studies of charts and screens, a nod to the nurse, a excruciating tap of recognition on my injured leg, the physicians evaporated.

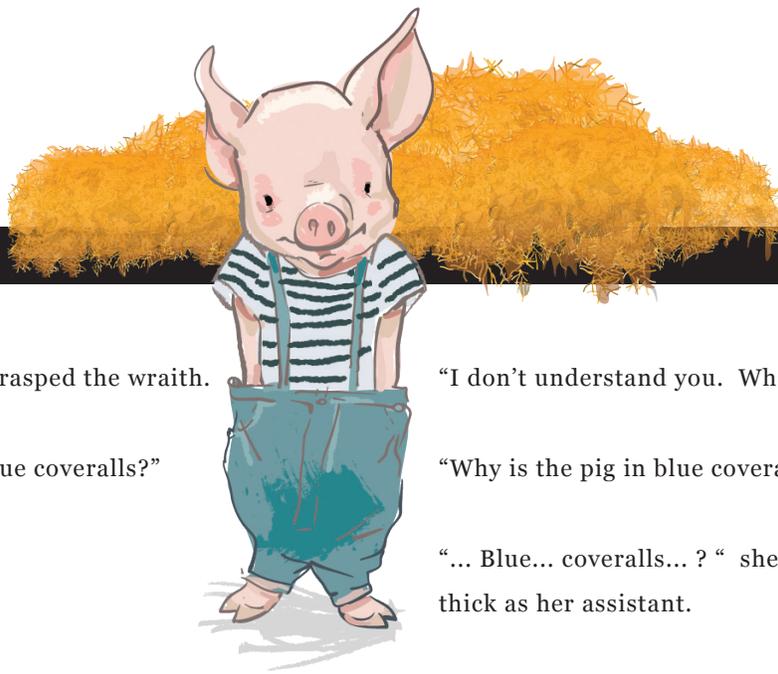
Was anyone going to do nothing for the pain? In despair, frantic as I heard the clipped shuffle of the departing shoes of the nurse, I searched for the call button. Before I found it, she reappeared, accompanied by a flatulent phantom. While the assistant tidied the bed cover, the nurse tut-tutted as she measured my blood pressure. She motioned her assistant to the far side, then both heaved me up towards the head of the bed. A small vial, another vial, much larger this time, appeared; then a syringe with a thick steel hypodermic that would terrify a horse. The needle and syringe became one hollow blade that was stabbed into the head of one vial, then into the other. With care, the innards of the vials were swallowed by the syringe in two practised gulps.

Then the nurse faced me. With great reluctance, in cruel distress, I turned from her, pulling up the inadequate gown to expose my adequate bum, bracing for the inevitable. She ignored the bum, stabbing instead the port of the IV bag above my head. After squeezing the bag a couple of times, to guarantee that the concoction was well mixed into the saline drip, the nurse twiddled the valve; as

much to reinforce her authority over me as to ensure a measured rate of flow. Then her clip-clipping shuffle told me she had departed, as the nurse's aide loosed a maggot-choking cushion creeper, smoothed me and the bedcover as one; then left, flicking off the lights as the door closed.

On the wall opposite my bed was a copy of one of Monet's haystack series. The torture of trying to cough, yet trying not to cough, began to ebb when the first drip of the nurse's cocktail seeped into my brain. While the agony subsided, so the haystacks began to swell. As they grew, I worried that someone should be doing something about their size, before they expanded so much that they filled the room. I need not have had that concern; for, pausing only to take an occasional nip from his hip flask, the pig was already onto it. Dressed in neat blue coveralls, he set to clearing the excess hay with a pitchfork. That really struck me as odd, for I was unable to figure out where the pig would have obtained blue coveralls. It was not so much the coveralls that mattered, but the fact that they were blue that really troubled me. White, orange or yellow I could have accepted; but blue really did seem strange. However, I am not one to criticize, so I pressed the call button.

When the nurse's aide wafted into the ward, the pig stopped working, leaning on his pitchfork like a municipal employee, as he listened to our conversation. From a crumpled packet of Marlboro in his bib front pocket, he pulled a cigarette with his lips, struck a match on the sole of one boot, then took a long draw on the smoke.



“What’s the problem?” rasped the wraith.

“Why has the pig got blue coveralls?”
I demanded.

“Say what?”

I repeated the question. The flatulent apparition stared at me as if I were crazy, like I was on drugs or something. It was a simple enough question; it required a simple enough answer.

“I’ll go ask the nurse.”

As soon as the nurse’s aide drifted out, the pig extinguished his cigarette on the sole of his boot, then set to pitching hay again. In the background, the traffic began thickening up, as rush hour approached. Some of the cars nipped off the highway where there was a blockage, skirting the far haystack as they did so, making a right mess of the field. As the flatulent aide, blew back in again, the pig downed tools once more, to sip on a vente latte from Starbucks.

“She’s coming.” the ghost assured me, straightening the covers once more. “Now, please, just lay back and relax.”

The pig merely shrugged, continuing to sip his latte, as he nodded to a passing rabbi.

“What seems to be the problem?” asked the clip-clip nurse, shuffling in.

“Why’s the pig wearing blue coveralls?”

“I don’t understand you. What are you asking?”

“Why is the pig in blue coveralls?”

“... Blue... coveralls... ? “ she pondered, obviously as thick as her assistant.

Then she realized what I had asked her, for she brightened up, smiling at me.

“Oh! ‘Why has the pig got blue coveralls?’ Well, er, the green ones are in the wash. Now please try to sleep.”

I’d not thought of that. It was obvious, wasn’t it; but why had the farting fury hidden that information from me? The clip-clip nurse shuffled away, but her aide hung back, watching me suspiciously for few moments before departing. The pig set to with a will again, dodging the occasional car that strayed too far from the motorway. I thought it was an unequal battle, for the haystacks kept moving, changing locations as they pulsed larger and smaller, multiplying and dividing; yet the pig seemed up to the task. Confident that he could handle it, I allowed myself to drift into dreamless sleep.

My faith in him was rewarded, for when I awoke late next morning, the haystacks were neat and tidy once more, back where they had started. There was no further sign of the motorway, nor of the pig, nor of his coveralls, green or blue; although the malodorous memory of the nurse’s aide still lingered.

The Great Gaspy

Written & Illustrated By Rolli



I finished my twenty-somethingth cup of coffee that day, then ran to the emergency room.

My brain didn't connect these events. Not initially. Not for ten years. It should've been obvious.

I have been oblivious to the obvious, my entire life.

I want that to be my epitaph.

I've been a drinker, a coffee drinker, since I was nine or ten. Two cups a day—initially. That pair had rabbitly morals. Two became six, a dozen. By age twenty, I was drinking as many cups of coffee every day. Though I was pacing on the paper mache bridge over oblivion, I was well-hydrated.

One morning, not long after my twenty-fifth birthday, I woke feeling... I couldn't put my finger on it. My finger was quivering, my index finger. I felt like opening the window, inhaling all the fresh air, and jumping. Instead, I made coffee.

A couple cups later, *both* my index fingers were quivering. So I went for a walk. The fresh air, I thought, would do me good.

It didn't. Bewildered, I brewed some more coffee, read a newspaper (there were still newspapers in those days), swallowed a sleeping pill (I've been a poor sleeper since I was nine or ten), and went to bed early.

A little after midnight, I woke up, gasping. I sat up. *I couldn't breathe.* Or I could—but felt I couldn't. For some reason.

It was a fifteen-minute jog to the hospital. I should've called an ambulance. But I thought the fresh air and exercise would do me good.

The woman at the triage desk was eating a sandwich. "I can't breathe," I told her.

"Take a number," she said.

It looked like an egg salad sandwich.

I took a number and sat down.

There weren't any magazines I liked. I don't like magazines. There was a paperback copy of *Babylon Revisited*. Not the sort of book one reads in an Emergency Room. I stuffed it in my jacket pocket.

I waited six hours.

The Great Gaspy

I fell asleep. A sleeping pill takes its job pretty seriously. When I woke up, a woman was sitting next to me, in a wheelchair. She was sucking on a tongue depressor. She took the tongue depressor out of her mouth. “I’m an idealistic 69-year-old,” she said—and popped the tongue depressor back in.

Someone called my number, eventually. As I stood up, the idealist winked at me. And bit the tongue depressor in half.

I walked into Examination Room 3, closing the sliding door behind me. The solo feature of the room was a bed. There was also a chair next to the bed, a green chair. Also—a glass door. Now and then, individuals in lab coats, on the other side of the glass door, walked busily to and fro, waving clipboards. Doctors, I concluded. They could’ve been pharmacists.

The bed wasn’t comfortable-looking. Nor was it comfortable. I fell asleep on it anyway.

A robust young man in a lab coat was squeezing his way into the room as I regained consciousness. He’d opened the glass door a quarter of the way, only, and was forcing himself through the resulting aperture like a kidney stone.

“We need to get that fixed,” he said, heaving the door closed behind him.

He dropped his clipboard.

Pharmacist, I thought.

“I’m Dr.—” He said something that sounded like “Nightindale” but probably wasn’t. He recovered the clipboard and took a seat in the green chair.

Closer up, Dr. Nightindale looked even younger. He looked twenty.

When he asked me to remove my jacket, *Babylon Revisited* plopped onto the floor.

The young doctor’s eyebrows jumped to their feet.

“Have you ever read *The Beautiful and Damned*?” he asked, passing *Babylon* back to me.

“No,” I said.

“It’s damned beautiful,” he said.

He slapped me on the back.

“What’s the trouble?”

I explained my breathing issues. The Great Gaspy, I opted to call myself. The avuncular young doctor didn’t laugh. Instead, he utilized his stethoscope. There’s no other way of saying it. He utilized his stethoscope roughly a half-dozen times.

“Strange,” he said.

“Isn’t it?” I said.

“You’re breathing just fine.”

I found that troubling. That wasn’t my interpretation of events.

The Great Gaspy

“Pulse is a little quick. Fear of doctors, eh?” He laughed—and smacked me on the knee with a rubber hammer. The other knee, too.

Then the first one again.

“Has anyone ever told you you’re a little unbalanced?”

I commenced preparation of a mental list.

“Your reflexes, I mean.”

As I discarded the old list and started a fresh one, the young doctor practiced his hammering. The left leg definitely jerked a little harder than the right. Probably.

For a minute, Dr. Nightindale seemed lost in thought. For several minutes.

He was only staring at my feet, I realized. At my socks.

I was wearing mismatched socks. I’d only just noticed. In my haste to dress that morning, I’d made a critical error in judgment.

The doctor looked up at me, at last. Wherever avuncularity goes when it dies, that’s where it went. He looked at me gravely.

“There’s a specialist on hand who may be able to help you.”

“How long will I have to wait?” I asked.

But Dr. Nightindale had already squeezed back through the aperture.

This time, when I woke up, a man with bags under his eyes, gripping a black bag, was standing across from me.

“I’m Dr. Alexopolous,” he said.

“Irish name?” I asked.

He frowned and said: “I’m a child psychiatrist.”

I must’ve looked like a popped balloon because he softly added: “There aren’t any adult psychiatrists on duty.”

Dr. Alexopolous took a small notepad out of his enormous bag. I wondered what else he had in there.

“Do you hear voices?” he asked.

I nodded.

He leaned forward. His dark eyes sparkling.

“What sorts of voices?”



The Great Gaspy

“Your voice,” I whispered, after a minute. “Just yours.”

Dr. Alexopolous sighed. A little building in his chest collapsed. A garden shed. He reached into his bag again—and produced a teaspoon.

“Turn around,” he told me.

I swung my legs over the other side of the bed.

Eventually.

“I’m going to trace a number on your back with the spoon handle. I want you to tell me what number you think it is.”

It sounded reasonable.

I couldn’t guess the first number. I was laughing too hard.

“I’m ticklish in that spot,” I explained.

He retraced the number. Lower down, this time.

I laughed even harder.

Dr. Alexopolous sighed even harder. In the chambers of his heart, a tiny thrift shop and ice-cream parlour toppled.

Per his orders, I turned back around and observed him extracting a rubber hammer from the black bag.

He hit me a few times with it. On the knees. He looked frail, but wasn’t.

“You seem quite balanced,” he said. “That’s good.”

He set down the hammer—and retrieved his notepad.

“What seems to be the trouble?”

“I can’t breathe,” I told him.

Dr. Alexopolous sighed. The sigh stirred the pages of his notepad. The supermarket and hotel/casino in his heart burst into flames and quivered into a pile of ash. That’s all that was left.

“You don’t need a psychiatrist,” he said, putting the spoon, hammer and notepad back in the black bag.

He shook his head.

He shook my hand.

He shook his head again.

He snapped the black bag shut.

He opened the glass door a crack and breezed right through it.

He looked like a white ship riding a current of sighs.

I want that to be my epitaph.

Without a timepiece to regulate them, hours gather. They loiter. And there’s no getting rid of them.

I’m not sure how long I nodded on the bed before a woman opened the glass door just enough to admit her head. Her orange hair had a shock of rose in it. Her eyes had a shock in them, too. After she saw me.

“I’m so sorry,” she said.

The Great Gaspy

“It’s alright,” I said.

“I am so, so sorry.”

I shrugged.

“I’m so terribly sorry.”

Then she withdrew her head, shocks and all.

The contemplation of what she could possibly be so sorry about consumed the next thirty minutes of my life like a minor apartment fire.

I just about nodded off.

The hours piled up in front of the door.

I was just about famished. I looked around the room.

I was so hungry, I could’ve eaten the green chair. If there’d been a filing cabinet, I could’ve eaten that, too. I was about to devour the dedication page of *Babylon Revisited* when a fat man in a lab coat forced his way into the room via the glass door. It took him a few minutes.

“Hello, doctor,” I said.

“I’m a pharmacist,” he said.

He fished a key from his pocket, retrieved a bottle from a locked cupboard, re-locked it and swore as he charged back through the door.

There were cupboards all along the one wall. I hadn’t noticed them, until then. I guess they were too obvious.

All the cupboards were locked except one. But the only thing in that cupboard, alas, was a box of tongue depressors. At the very least, I was hoping for soda crackers.

I was waist-deep in a stream-of-thought flavor-comparison of soda crackers and tongue depressors when an enormous voice said, “You’re free to go.”

I looked around. There was no one else in the room. There was an intercom by the door. I’d only just noticed it.

The voice came from the intercom, I decided. Hopefully.

I slipped my jacket back on, stuffed *Babylon Revisited* into my pocket, and opened the sliding door.

The idealistic sixty-nine-year-old was still sitting in the waiting room. Chatting amiably with a grass-stained eighteen-year-old, her hand on his knee. He was holding his shoulder and wincing.



The Great Gaspy

She didn't even make eye contact with me.

As I walked out the hospital door, I thought: "I could really use a coffee."

From time to time, over the years, the great gaspiness returned—for an hour or two, here and there. A day. A week. I never bothered going to the emergency room again. Though I did stop wearing socks altogether. As a precaution.

But one morning, not too long ago, drinking my ninth or tenth coffee while browsing the web (there are no newspapers, nowadays), I chanced on an article about caffeine intoxication. And discovered the symptoms of caffeine intoxication—trembling, breathlessness, rapid pulse—identically matched those of my own recurrent malady. My brain jumped to its feet. *Caffeine intoxication*. I would've figured it out years ago. If it hadn't been so obvious.

As I swallowed the dregs of my coffee, I knew that the only sensible thing to do, of course, going forward, would be to dramatically slash my caffeine intake.

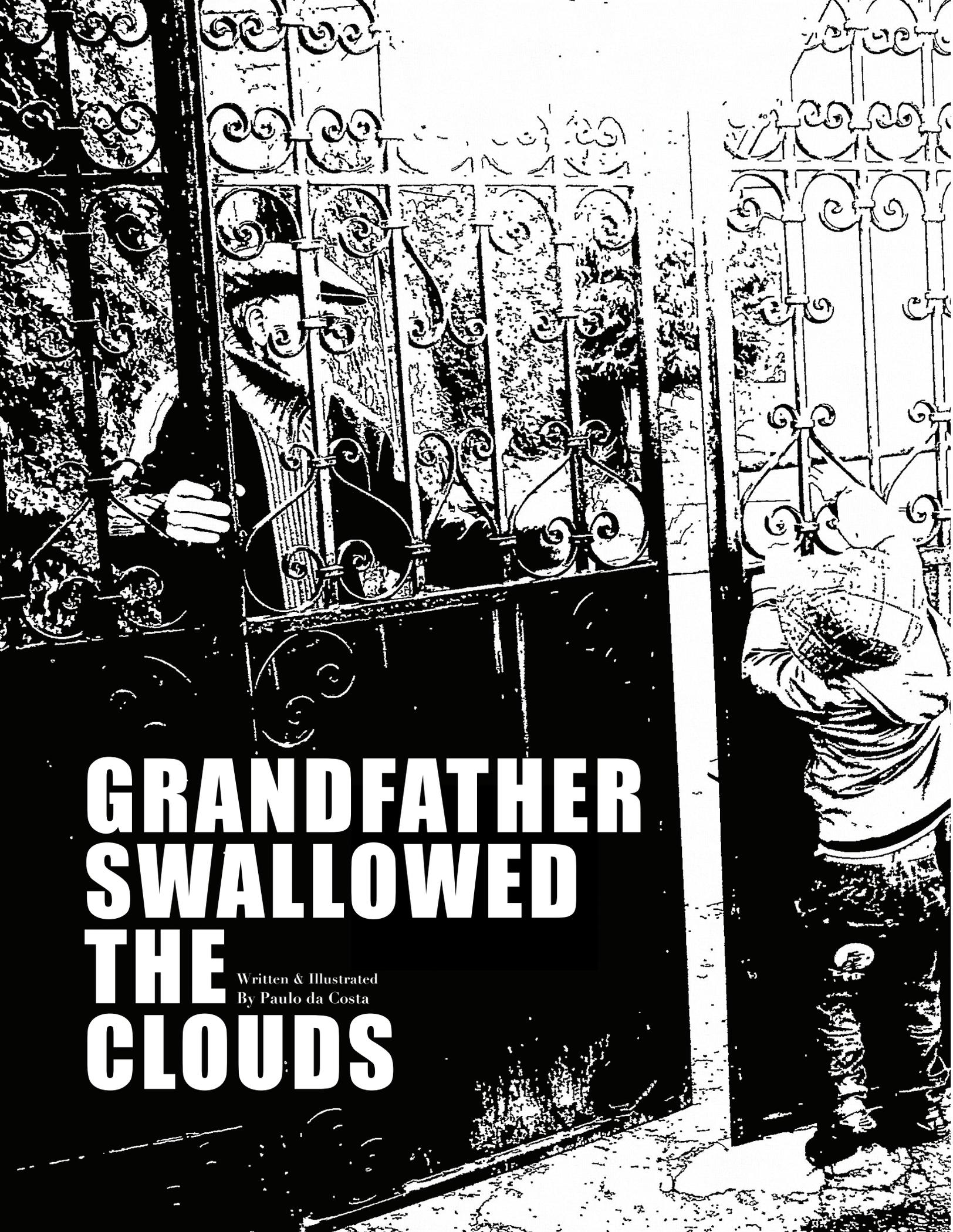
I didn't bother.

It's no overstatement to say that I enjoy coffee more than life itself. And that I'd rather drop dead than drink fewer than twenty-five cups of coffee per day. Also—having a vice that threatens to end one's life at any moment lends piquancy to existence.

However wretched and brief, the overcaffeinated life is the only life for me.

I want that to be my epitaph, too. If there's room.





GRANDFATHER SWALLOWED THE CLOUDS

Written & Illustrated
By Paulo da Costa



You run into the tiled kitchen, trailing the scent of daffodils, and invite your grandfather Agosto outside. “Come, come. Let’s play hide-and-seek.” Your small hand finds his calloused fingers under the wool blanket, pulling the arm away from the vinyl couch, where he lies for most of the day. He says he can’t, he fears the cold drafts, fears the sun’s intensity. In his eighties, he is afraid of most things. Wide-eyed, you assure him the outside cannot possibly hurt him. “The sun only tickles your skin a little. It’s nice.” Your grandfather avoids your expectant eyes, and seals his again. Disappointed, you accept his refusal, yet today is not a day you will sit on the couch with him as he changes the channel to cartoons; though that sitting in each other’s company, without talking, would still be a type of blessing.

Your grandfather Agosto fears death, and unlike your grandmother Micas, who prays the rosary nightly and attends mass once a week, he has not found a spiritual cane to aid his mind in those last steps toward stillness. In view of the tightly shut lids and the frown on his face, he is again traveling through his landscape of worries. Declining your invitation to play will become another heaviness in his endless inventory of panics, failures and inadequacies of old age; it will make him slip further down his well of darkness. He remembers himself differently, as others in this valley do. He remembers himself without weight on his bones or mind, free to run with your aunt Marina and me on the beach, and bodysurf the ocean breakers. He is unable to shake the unexplainable weight in his mind by riding the fresh, spring wind that you are, by basking in the glowing and bright smile that never fades.

Grandfather Swallowed The Clouds

Your four-year-old limbs seek movement, speed and the quivering of laughter. In such moments I am reminded of the consequences of my belated parenthood. I show you a younger avô Agosto and avó Micas in a portrait before my existence, and you do not recognize them. Your mischievous grin tells me you file this moment in the father's joker list, as when I point to the invisible dinosaur bones in the bare field-terraces on your return from school. "Can you see the Tyrannosaur jawbone?" I say, pointing high on the embankment, "Higher up, over there." Naturally, no one can see it, except your cousin Simão, who does not like to lose face even while seeking an invisible bone.

One day I will tell you that grandpa and grandma were not always the octogenarians you will

remember them as. You arrived late, yet not too late. On the other hand, I arrived too late for a grandmother who left early with stomach cancer. Life is made of these absences and unmeetings. I encountered her through the stories, the way you now meet your once younger grandparents through my accounts while looking at their corrugated frowns slowing their thoughts. Soon you will be able to imagine other lives for them, even though you are not a character in those earlier tales.

Today, it is your grandmother Micas who, hearing your plea to play, joins us at hide-and-seek. She leaves behind her reinforced kitchen chair. Trembling, she will walk stiffly away from her advanced Parkinson's illness and overweight body, away from her diabetes and litany of other ailments.



Grandfather Swallowed The Clouds

Mostly, she will stand in a corner, or behind the imported cedar tree, highly visible. She will require help getting back to her feet when she kneels behind a rose bush. You will understand and help in the same way you make those allowances for one-year-old Amari, unstoppable in her tiny steps and continuous stumbles.

Only seven years ago your grandfather Agosto spent his days pushing your cousin Tomás in his plastic four-wheel jeep; endless laps around the courtyard, or occasionally exiting the gates for a next door visit to Ti Fernanda and Ti Zé's farm. When your cousin Tomás learned to walk, the two would kick a football back and forth. For three years, your aunt Marina arrived from her bank job eager to play with her son, only to tuck your already asleep cousin in bed. Then his brother Simão was born, and Tomás entered kindergarten. The cycle had again begun.

Tomás was a gift to your grandfather's empty days, and a return to a semblance of parenthood he had missed, as most working fathers do. This time together wove a unique and enduring bond between Tomás and your grandfather Agosto. It is still a common bond in this valley where grandparents, if retired, take over the task of parenting from their over-worked adult children. Your aunt Marina was absent for excessively long hours, working in another city, an hour away on a lucky traffic day. This is the new world of progress that expects loyalty to corporations first, and where, despite legislation for parental leave, workers understand they cannot enjoy full rights or they will lose their jobs. Every week, in exchange for sixty-hours of her life, your aunt can choose the brand and colour of a fancy stroller, a room full of toys, a gigantic flat screen TV.

In his seventies then, timing and circumstance gifted your grandfather Agosto with a surrogate fatherhood at an age when he could barely summon enough energy to match the exuberance of a young child. "Now, it is a different story," he confided in the tone of an excuse and a sorrow, looking at you chasing a fly around the kitchen table, "Each new decade now arrives weighing as much on my bones as a whole new century."

In this Cambra valley, the presence of uncles, aunts and grandparents in a child's universe is taken for granted. It causes me to ponder the empty clan legacy you will experience in Canada.

You will live most of your life without grandparents in your day to day. You will live most of your life without a father and mother. Your children, if you



Grandfather Swallowed The Clouds

choose to have them, will likely live without at least one set of grandparents, as you did. If I am fortunate enough to meet those grandchildren, they will still lose me too young to remember me as a grandfather.

The transmission of family lore and values to grandchildren is achieved in short time windows, and I'll miss important seasons of life cycles as an absent elder. The side-by-side modeling that allows the young to learn by osmosis, and to move through the planet in the family bosom, will not be feasible for us, son. I suggest you adopt substitute parents and grandparents for the emotional balancing the elderly occupy in the psyche of an extended family. It is an underestimated elixir of wisdom when such a relationship is healthy, loving and inspiring.

It is another afternoon after kindergarten and, for a moment, you look puzzled by your grandfather's sad face as he declines another invitation to play. "Vovô won't play with me." You drag your feet toward me, shoulders wilted. Unbeknownst to you, it is the clouds he has swallowed that have darkened his days. These clouds now block his once visible radiance. They obstruct the light breeze that could air his mind and sweep away the heaviest trapped thoughts. Clouds gone unswept for a decade have transformed my jovial and playful father into an absent grandfather whose main profession is to worry and to complain. Your grandfather worries that sneezes are an early cancer warning, that a light bulb left on will bankrupt him, and he worries that a counting mistake in the daily home delivery of bread buns signals Armageddon. He swallows many colourful pills and asks his doctor for more. Unknowingly, like many, he seeks the blue-green pill

of happiness, that chimera of science that promises to deliver, without effort, the memory of where he dropped the light that once illuminated his path. Your grandfather Agosto struggles with an ailment most cannot see, although you can feel it.

You have met only one of your grandfather's many lives and seasons. You will meet his other selves in the stories yet to surface as you grow up. You already seek these stories at bed time, and marvel at the black-and-white photos of him in military airplane cockpits and heavy flight gear that make him resemble an astronaut.

"Did vovô fly to the moon?"

I smile. "Just to the clouds."

In admiration, you nod and raise your gaze, attempting to measure the height. The low ceiling cuts short the flight of your gaze.

When your grandfather Agosto closes his eyes to you on the kitchen couch, the facial tension and teeth clenching draw a picture of pain I do not recognize from his good-natured days that were brightened by his sparkly dark pupils. You can teach anyone to laugh with your trickster-mind, yet even you cannot move someone invested in their unhappiness. You look at me and shrug. It is not you, I know. Your grandfather has unlearned how to laugh.

I toss the ball. It bounces off your shoulder. "You're it," I say, running out the kitchen door and into the yard. You follow in nimble leaps that catch up to your favourite freeze-tag handball game. You laugh for a continuous hour as we play in the yard, and you

Grandfather Swallowed The Clouds

roll on the grass after every tag, dramatizing the fall.

Nevertheless, day after day, you do not give up on your grandfather and continue to pick a wildflower from the fields on your way back from school. Then you run to him, stretched out on the kitchen couch, “Smell, smell it. It’s delicious.” He stirs from his slumber, and lets you bring the flower to his nostrils. He agrees, and attempts a smile. You delight in his agreement. I already admire your resilience in relationship and imagine that this rare trait of not giving up on people will bring you much love and esteem.

The tulips and daffodils have begun to trust the bluer skies and open their petals when your grandfather comes out of the kitchen. He joins us as we sit in the warm tiled portico, enjoying the after-school picnic with your cousins and Amari. In his hand he carries a solid, lead-cast de Havilland Chipmunk model as if it were flying in midair. This is the plane he first piloted in the Portuguese Air Force missions of the sixties. He painted the model true to its red nose on the grey body, down to the

white coat of arms with its seven castles on the tail. He keeps the model in the cork-insulated TV room next to his portrait in full uniform—a hat and suit decorated with medals—which always manages to stop you in your tracks despite the rush to your hide-and-seek games. Your grandfather remembered your earlier request to see, “the real plane vovô used to fly.” I know you had been hoping for the full-size aircraft, so you could jump to the commands and mimic the growl of Ti Zé’s tractor next door, shifting gears, your body in full stretch to reach the pedals. You smile, “It’s heavy.” Your grandfather is pleased with your fascination with his Air Force flying times, the high point of his life, and that you ask for stories. He stays a little longer, until a breeze arrives and he retreats, afraid the wind might steal him forever away from his grandchildren.

The last bite of the after-school snack of crisp bread and sheep’s cheese still churning in your mouth, we step outside the dark kitchen to play, while your grandfather Agosto snoozes on the couch.



Grandfather Swallowed The Clouds

Your laughter is the loudest bird call in the yard, as we play freeze-tag handball and occasionally roll on the grass to catch our breath, staring at the blue sky. The high-pitch of pleasure brings the curious crows to the camellia tree top. The birds join-in and caw. The kitchen door opens. The low afternoon spring sun dares to enter the doorway. Your grandfather Agosto draws a chair to the pool of light and rolls up his pant legs, letting the marble-coloured, thin limbs be kissed by the warmth. He rotates the chair a little so he may follow our game, and eavesdrop on the laughter pouring into the kitchen. I catch your attention and nod toward the door. Only his glowing white legs

show in the dark of the kitchen. You giggle. I wink. Your grandfather has arrived, cautious as a curious fox in the forest, willing to learn laughter again. It is the only trick that will fool death.

I point at the sky, "Here comes a spitfire-dragon." Distracted by my call you look up. I toss the ball. It bounces off your forehead. Squish. You screech, tricked again, and for a moment pretend to be mad, before we bean-roll on the grass, chasing and being chased, holding onto our bellies, lest they run away from us in jolts of laughter.



Ableism Is

By: Jason Schreurs

Ableism is sympathy. Ableism is pity. Ableism is being told to hurry up. Ableism is being told you are too loud. Ableism is being told you are getting too excited. Ableism is mocking people. Ableism is sideway glances. Ableism is when your family contacts you twice a week before your diagnosis, and once a month after. Ableism is seeing fear in their eyes. Ableism is being told you have to use a computer. Ableism is being told you have to use social media. Ableism is googling “mental health” and not knowing where to start. Ableism is googling “[blank] and mental health” and not getting anywhere. Ableism is being told an essay about having a disability is “not a good fit.” Ableism is saying, “Watch it! Are you blind?” Ableism is saying, “Hello? Are you deaf?” Ableism is watching the entertainment industry tokenize disabled celebrities. Ableism is putting disabled celebrities on a pedestal. Ableism is inspiration porn. Ableism is overcompensating for mobility challenges. Ableism is making too much space for wheelchairs. Ableism is rug sweeping. Ableism is muzzling. Ableism is not talking. Ableism is chastising. Ableism is in a schoolyard circle, laughing and pointing. Ableism is falling out a tree, breaking your back and some kid saying, “Get up, loser. You’re not hurt.” Ableism is someone pushing your wheelchair into the wall as a joke. Ableism is guilt. Ableism is shame. Ableism is sadness. Ableism is anger. Ableism is a struggle. Ableism is a fight. Ableism is a battle. Ableism is a war. Ableism is the biggest challenge of your life. Ableism holds us down. Ableism hoists us up. Ableism is unreasonable Halloween costumes. Ableism is venues without ramps. Ableism is venues without quiet places. Ableism is venues without relief from strobe lights. Ableism is venues where no one can help. Ableism is venues where no one knows how to help. Ableism is venues where no one understands. Ableism is stairs. Ableism is a sneer. Ableism is a snicker. Ableism is using the words crazy, insane, retarded, bonkers, cripple, handicapped, cuckoo, stupid, daft, deformed, deranged, simpleton, lame, idiot, feeble, stupid, lunatic, dumb, imbecile, loony, mongoloid, madman, maniac, invalid, cretin, mental, mental case, midgit, obese, spazz, moron, psycho, psychopath, special needs, wacko, nuts, mouth breather, delusional, schizo, and bipolar.

I’m so bipolar.

BAREFOOT

By Charity Konrath

By the time they are taking off their clothes, it's too late. The signs were there all along, but we're helpless bystanders waiting for them to cross the line. There was nothing we could do until they were walking naked down the middle of a busy street.

There were signs with my brother. But the doctor said until John was a danger to himself or others, it was out of his hands. So, I stood there offensively, a nosy neighbour on his life. Dutifully and with fear, I waited for him to fall apart.

John refused to take medication.

"I'll be so addicted to being normal, I'll be at the mercy of whoever is in charge of my supply," he said from a warm place. My brother and I were clinging to rays of the sun setting on his life as we sat on the back porch.

It came to a head when John came home barefoot. It was the middle of the night when he woke us up by causing a commotion at the back door. Mom got to the door first to unlock it. Her presence slowly receded as John walked inside, and it felt as though it was only John and me in the kitchen. His mind wasn't registering our proximity as he swayed and rambled in the dark.

Painted by Charity Konrath



Making sense from John's mumbling was like looking for a still leaf in a storm. I convinced John to move to the living room and sit on the couch. He would be more comfortable there. Reluctantly he agreed.

Before I even could ask him what happened, John was whispering about being at a party and walking home through Victoria Park. He came across an idling cab and got into the back seat. The driver joined him and started touching him.

My brother's story halted, and I sensed there was more, but John lurched up from the couch and fell back down again. His body was tired, but his mind couldn't stop trying to run.

We were not to call the police! John ordered us.

Then what?

He agreed to go to the hospital. We would have to call a cab as Mom didn't drive.

Put these on.

I handed him a pair of socks and shoes, trying to make him presentable before we left. Fear came over me as the cab pulled into our driveway, the headlights obscuring the driver's face.

The sexual assault unit arrived at the hospital, saints who are woken in the middle of the night. John, Mom, and I sat awkwardly in the room. Time ticked, and questions were asked. John's voice wavered. The truth became apparent to everyone, except maybe John, that he had never been touched in the back of a cab. But John held the reins of his hallucination until his last word.

Did you even get into a cab? Where are your fucking shoes? Why can't you tell us what happened? I wanted to ask him. Scream at him! Shake some sense into him!

I flushed with embarrassment and broken relief as the assault team concluded the interview and sent us on our way. Still, I wanted to believe John's story. Maybe I was hoping John would be admitted and get help, any help. If only I hadn't made him put on socks and shoes before we went to the hospital.

I woke up early the next morning and walked through Victoria Park.

I was looking for answers.

I was looking for shoes.

DUBIOUS INVENTIONS

By Barry Styre

Disclaimer: The opinions expressed in the following are those of the individual and do not necessarily represent the views or opinions of others.

“Ideas that never got off the ground or ideas that did get off the ground but later on proved to be impractical, unusable or ineffective.”

I. Deep Pile Shag Rugs or Carpets

Soft to walk on, but a nightmare to vacuum or have cleaned and expensive to have cleaned too!

II. Water Beds

A chore to fill with water (the water had to be heated somehow). Algae could form inside one of these and if one of them sprang a leak it would be a challenge to try to contain, repair or tackle the problem, and once filled with water they were very heavy.

III. Electric Toilets

This kind of toilets worked O.K, but the bad odor was a problem that they should have guessed would happen when they thought up this idea.

IV. A Bicycle Built for Two

My best friend and I rode one of these when we were younger. I sat on the back seat. I had no control over anything, not even the pedals, steering, balancing, or anything.

V. All-Terrain Vehicle (ATV) The Three Wheel Variety

This type of conveyance was very easy to tip over or to flip upside down because of a poorly overlooked

center of gravity and they were like riding an unwieldy tricycle, having only three wheels when there should have been four.

VI. The Veg-Omatic

A dicer, slicer, chopper for making french fries, etc. They were a real chore to clean.

VII. Treatments or Cures for Baldness

For bald headed men or those losing their hair.

Their claim was that their product and/or gimmick they were advertising would stimulate or cause hair growth on bald or partially bald men. The problem: it didn't work.

VIII. Lectric Shave (pre-shave lotion)

The idea was you were supposed to apply this lotion on your face prior to shaving: it was supposed to make your stubble or facial hair (whiskers) stand up for a smoother cleaner shave. My uncle asked me to try it, so I did. I applied it to my face, then shaved with an electric razor. After I was done the inside of my razor was all gummed up with whisker hairs and the “Lectric Shave” lotion. Perhaps I was supposed to shave the old-fashioned way with razor blades. If so, why was it called “Lectric Shave”?

FAMILY PHOTO

Grandmother watches over me
with grandfather also just a tale
the oval frame holds the dusty photograph
a wedding picture, flowers painted white

The paint has smeared with age
neither grandparent smiles
as if they knew how little time they had
before the wheezing coughs consumed her
and the girls grew bereft
of mother and what that might mean

Yesterday I thought I saw tears
running from my grandmother's eyes
from where she overlooked the bed
It was only shadows

BLACK DOGS

We dream of breaking through
From avenues mute as ghosts
Confused in aged grey mazes
As black dogs hound our heels

We plot to break the bars
Unlock the drab walls' doors
Each jackhammering our misery
As black dogs hunt our trails

We have smashed through the silence
Joined hands to bring us home
Rejoiced against oppression
Black dogs still lurk in shadows

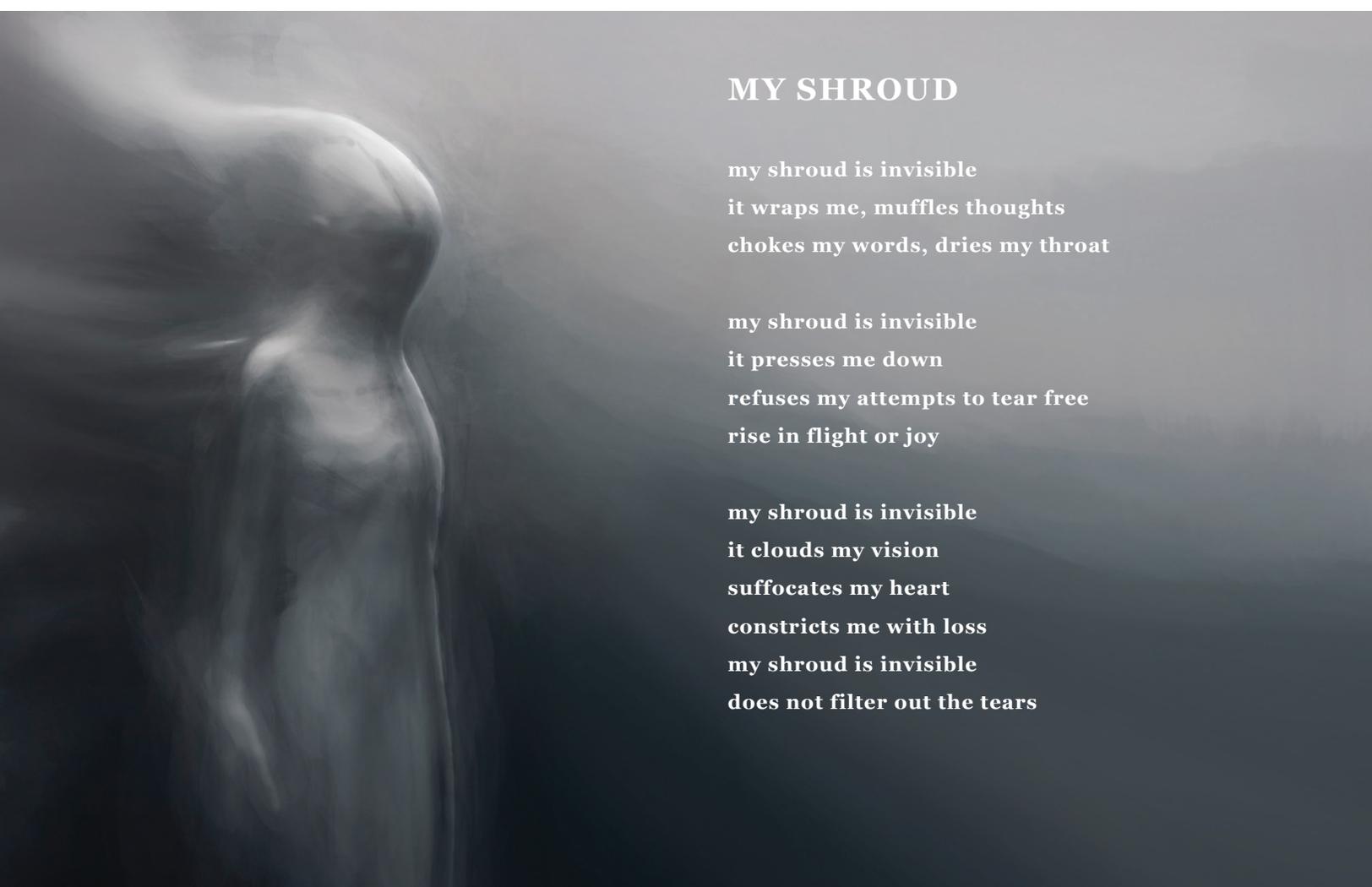
Three Poems By Colleen Anderson

MY SHROUD

my shroud is invisible
it wraps me, muffles thoughts
chokes my words, dries my throat

my shroud is invisible
it presses me down
refuses my attempts to tear free
rise in flight or joy

my shroud is invisible
it clouds my vision
suffocates my heart
constricts me with loss
my shroud is invisible
does not filter out the tears





CONFERENCE* FOR THE BIRDS

By Byrna Barclay

In the tiered gathering place university students call The Pit,
 conference participants arrange themselves
 in a pecking order,
 psychiatrists preening at the top,
 looking down at psychologists looking down at social workers
 and at the bottom, token consumers of services,
 those whose songs have yet to be heard.

The recorder, a mother of one of the unsung,
 I may be the only one who sights
 through the wall of windows
 stretched out on a cottonwood limb
 a white Bengal tiger
 licking the scar on her paw
 once caught in a trap.

All morning, while the professionals trumpet
 I, the recorder, take notes on the session
 about families and type seventy-two times
 the word dysfunctional
 while the tiger paces.

Those in The Pit, silenced, hang their heads,
 not really listening. Never asked for their opinion,
 most turn inward and listen to voices lifted
 in songs only they and the tiger and I can hear.

The swing of the tiger's head
 prompts me, the recorder, to rise and speak:

Believe me, there is nothing so highly functional
 as a family in crisis, with no time for anything
 except acting swiftly to find help.

Silence prevails in the upper tiers.
 And then a voice is heard as harsh as a raven's cry
 when it swoops down on its prey:
 The mentally ill are animals
 and must be locked up.

The stalking tiger crouches,
 ready to spring. That massive head swings
 from side to side. Those in The Pit cringe.
 The crisis worker beside me, the recorder,
 the guy with the odd name of Cleave,
 slumps to one side, as if struck down
 by a suddenly hurled spear. The birds
 at the bottom of The Pit cannot topple
 and fall any lower. Perhaps they too
 now see and hear the stalking tiger.

If you believe that
 then return to the wilds
 of whatever country that spawned you.

And the tiger closes down on her limb,
 and licks her reopened wound.

**CMHA SK Conference circa 1989*

Ars Poetica

By Tillen Bruce

Alone on the platform and waiting,
while others, also alone, do their own
waiting, and then the train whistle
loads the air with expectation.

One bag, lets make it a valise,
because the word has charm.
No compartment, not even
the comforts of second class.

Coach is all you have earned
and now the words come, each
one a question packed with
doubt, guilt and remembered hurts.

The clack of the track like the ticking
off of a list. It is for the drama you are
endlessly dramatizing, because you can't
get past the self, the self...the self...you cry.

The tunnel and its darkness are unexpected.

Alone on the platform and waiting
while others, also alone, do their own
waiting, and then the train whistle
loads the air with expectation.

More accepting of the discomfort
now, of endless sitting, and of course

a book, the latest best seller that cannot,
for all its back-jacket praises, hold your

attention. Tonight you look outside
and imagine yourself chasing the train
through a recently mowed hay field,
let's say on horse back, and waving

of course, because that is your sunny
self, your best self out there on
horseback, and not the one that has
trapped you here in this carriage.

The car bucks and sways, bucks
and sways, in the transition
from track to trestle
and you lose sight of yourself.

You wish the boy would come back
with the horse, ride alongside the
train—how swift the horse, the boy—
and motion for you to leap from the door.

The tunnel and its darkness are unexpected.

You wake up on the platform alone and
waiting, while others, also alone, do their
own waiting, and then the train whistle
loads the air with expectation.

Autumn, 1994

By Jessica Dawson

Many years ago the photos fell out of my photo album
 reality breaking into shards with synapses misfiring
 I walk for miles seeking someone to help to me find them
 shepherds closing their eyes along with the hirelings

Reality breaking into shards with synapses misfiring
 the fabric of time misdirecting me from guidance
 shepherds closing their eyes along with the hirelings
 unable to speak I sit in a bricked room in silence

The fabric of time misdirecting me from guidance
 a flock of sheep each one going in a different direction
 unable to speak I sit in a bricked room in silence
 I frightenedly gaze into nothingness without expression

A flock of sheep each one going in a different direction
 I walk for miles seeking someone to help to me find them
 and frightenedly gaze into nothingness without expression
 Many years ago the photos fell out of my photo album

Trigger Warning

Riverview Psychiatric Hospital, 1995

Thousands of blades of grass
 cluster together like stitches
 in a rolling Turkish carpet,
 where minds unravel within—
 three dramatic stories of red brick.

The grandiose
 of tall white pillars stand
 like guards at the entrance
 and visitors see the estate-like grounds
 with ponds, trees, and pathways,
 where the rich are written to live
 in a Charles Dickens story.

Inside its walls
 the ghosts of yesterday
 walk with or without flesh.

And I can still see her:
 she is lying on a table
 with arms stretched out, Christlike,
 while an intravenous drip
 pauses, then starts, like a leaky faucet
 and runs into her bloodstream.

Shadowy figures move
 around the tethered surface in the cold room,
 until a mouth-guard is placed

between her teeth.

The outer walls seem dark
 against the bright lights,
 like a performance on a stage
 to an invisible audience.

Hands strap her head to her jaw—
 an injection is shot
 into the line, so frozen
 it feels like a knife travelling
 from her wrist to her shoulder.

She hears herself scream
 until the room goes black, in a moment,
 unaware of electricity travelling
 through her starving body.

She awakes and sees
 the glassed-in smoke-room
 with characters exhaling clouds.

She, in time, rises from the wheel-chair
 and catatonia to see
 packages of condoms in the washroom
 with ceramic tiles
 and glossy painted stalls
 where no one is in their right mind
 to give consent.

MILITARY STRATEGIES

By Catherine Fenwick

"I'm fed up to the ears with old men dreaming up wars for young men to die in."

~ George McGovern

Arms race acceptable
 Battle cry bumblefuck
 Collateral damage
 Direct fire
 Embrace the suck

Friendly fire

General orders

High value target

Infantry capability

Junior officer

Killed in action

Loudership - a screaming leader

Missing from the mission

Non-cooperative encounter

Obey orders muckle on

Puzzle palace - HQ Pentagon

Questions not authorized

Regimental reset

Same as last year

Tactical objective

Unknown terrain

Vanquish vanguard

Warning shot - wound you later

X marks the take point

Yield to the yoke

Zipper your thoughts



IF YOU ARE A POEM

By Beth Goobie

If you are a poem awaiting your next line,

a melody humming the base of the brain;

if you are a gas tank revving its dreams

beside a highway sign marked Anywhere Else,

ready to accelerate into the electric wave field of your thoughts,

If choices feel like pieces in an unfinished puzzle

and you like open spaces in pictures of your face;

if $a + b$ does not equal c , and x and y argue with z ;

if friendship is an opportunity to boogie

to rhythms that invite you to step out of your skin,

If edges are crossroads rather than precipices

and standing still takes you on the deepest journey;

if a stereotype is an answer someone gave

before complications fluttered onto the scene,

exquisite as butterflies travelling meridians from elsewhere,

If rain means joy under a yellow umbrella

and the full moon is a big fat note singing sky;

if the way chickadees settle onto hydro wires

teaches you a secret name of god

that can be decoded only by minds with tiny wings,

If you are a fallen angel who enjoys falling;

if your seventh chakra isn't a crown but a baseball cap;

if you've shaved your head to discover

whether you're a blockhead, an alien, a lightbulb in disguise,

and found out you're peeled-potato ordinary,

If the older you get, the lower your neckline celebrates

and hope keeps asking you for the next dance;

if a chance to smile is a chance to include

anyone who wants to be part of this poem –

let me welcome you into the next line.

bereft

By Denise Wilkinson

bereft

sun is gone
moon too
dim night mirrors false light

a shadow-lake of leaves
flows from above,
soggy bones tumbling off branches
too soon for the charnel house

dreichy air
slows then stops my breath
no trill of bird
no cricket chirp
just silence bereaved
by monsoon gasp
heaving on fall's light



JUDGE’S COMMENTS

This was a mixed bag of poems, all written against the sonnet, liberally interpreted.

Most poems worked through Rule 1: (a) $8+6=14$ or (b) $3 \times 4 + 2 = 14$. Others ignored it, choosing instead $2 \times 7 = 14$ and even one $9+6=15$ structure. All departures arrived at the same station, a sonnet-like poem that was deemed acceptable.

Rule 2 was treated similarly: lines varied in length within many poems. Other poems had uniform line-lengths, shorter or longer or even about 5 beats.

Rule 3 was perfectly observed: every poem was on topic, and each of the twenty-three poems submitted had its own original take on that topic.

An optional rule, number 4, was, well, treated optionally, as required.

The major rule, so dominant and integral to this contest that it wasn’t even identified as such – to write against the sonnet – was vigorously carried out.

Kudos all!

THE WFYL SPRING 2021 CONTEST

Sponsor: Anonymous

Creator & Judge: Ted Dyck

WRITING AGAINST THE SONNET

Rule 1.

Write a 14-line poem in ONE of the following two forms (structures), (a) or (b):

(a) Two parts (stanzas): The first stanza is 8 lines; the second is 6 lines;

(b) Or four parts (stanzas): The first three stanzas are each 4 lines; the last is 2 lines.

Rule 2.

Keep each line about the same length (about the same number of beats or stresses).

Rule 3.

The topic for this contest is a Saskatchewan pandemic.

OPTIONAL:

You can go further, if you wish, using an additional rule:

Rule 4.

Use your chosen form (structure) to develop your poem’s topic (into a message, theme, argument, ...):

Form (a) might develop a topic this way: A; on the other hand, B.

Form (b) might develop a topic this way: A, or B, maybe even C – oh, whatever!

First Prize \$100

Jayne Melville Whyte

Good Morning, Mirror

A fully realized poem, so scrupulously written against the sonnet that it becomes a model of the form.

Second Prize \$75

Stephen Dunster

[It is December...]

A stunning first line (read it aloud); using a $9+6=15$ structure to present a vivid image in support of a stoical conclusion.

Third Prize \$50

Samantha Hansen

“The Heart Essence of the Pandemic”

A gentle poem evoking a melancholic nostalgia for what has not yet happened (see *saudade*).

Honorable Mention \$25

Mareike Neuhaus

The Enemy Within

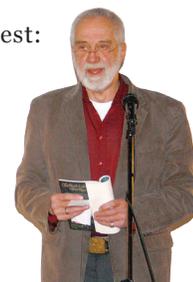
A precise sonnet that deserves more, but falters on two grammaticisms.

ANNOUNCEMENT

The WFYL Fall 2021 Contest:

Write a flash fiction

Judge and details TBA



~~Saskatchewan~~ Pandemic? ~~Pandemic~~

By Caitlyn McCullam

Hey, what's the Zoom link? click. admit. chat. type
load....stretch....binge. again. sob....overextend...scroll

Helsinki develops lead mole

three-ply, baby yeast, kayaks, next hype

Forget Masks are Tripe

pre-apocalypse. wear pants then manager's full
privilege wandering with the northern magnetic pole.

Does anyone still use Skype?

Malaria is..... full stop

Mental health crisis is moving

my face, my house, my crop

forever grooving

Work beginning, take heed... the clock

birds and deer are perusing

THE ENEMY WITHIN

By Mareike Neuhaus

it moves through air invisibly
weaving itself into the system
wherever it enters it is uninvited
triggering a cascade of crises

you cannot fight it on the battlefield
it doesn't leave no soldiers dying
in the trenches shell-shocked and
the earth tinted in crimson blood

oh no! this enemy is not alive
it is not a person you can strike
in the name of country and fatherland
there's no glory to be had once this is done

but what does it mean then, this virus?
it's life, that's all, gasping for a breath

#19

By Debbie Cochrane

How did it start
 Killing like a war
 Come to us to fight
 Gone most not knowing
 if it was Covid or not
 Justin said a better future
 Is that really right?

Just stop think you in line
 That won't stay home
 And now your children gone
 Choose not to see the dead
 Pray for those now gone
 Hope they're in a better world
 Hope this won't be long

Humbled

By Sherry Favreau

I am on my knees, head bowed,
 hands clasped, I am now humbled
 as never before
 Please, dear God, heal us
 and save us all
 Our peace is gone
 Sickness has overcome the world

I envision a large angel, wings spread
 A blue/white light surrounding our planet
 Bringing us all to our feet
 We are healed and now we are all brothers and sisters
 Start all over again
 And so we support one another as never before
 And we rebuild together



A Wheel of Fortune

By Ayami Greenwood

We're on a wheel, a wheel of fortune
 What goes down must come up
 Every valley is followed by a rise
 Demise is no surprise
 It is wise to learn as we turn
 We feel hope against the foe
 We can cope with this pandemic.
 Here in Saskatchewan, we are fearless!

We are brave warriors
 We do not cave into sickness
 It appears we've earned blessings
 We know this pandemic is real
 But we deal with whatever comes our way,
 Day by day, a wheel of fortune
 Soon, the rise from above will descend,
 End the war and send in love, healing.

I Do Not Surrender

By Wendel D. Guedo

Its nothing Saskatchewan
 Its nothing universe
 A certain set
 of fears &
 Panic
 Anxiety
 Let alone
 Stress
 Do not cry wolf
 Unless there
 Is a wolf
 If there is
 a wolf
 God help us all



Jellyfish Life

By Holly Knife

I went to throw attention to this invention
 I have to mention it all came tumbling down
 Not to mention time came like a paradox
 the clocks that chimed and rang
 At certain times throughout the day
 And come what may I must not forget
 to mention all the tension

Life now is like a jellyfish
 We pulsate in one place
 to the beat of these movements
 We take part in similarly
 Jellyfish in water and us in air
 Where jellyfish pulsate in the ocean
 We pulsate in our life

Inner Struggles

By Paige Peekeekoot

Yeah, I guess I am self-aware.
 I can self destruct into despair.

Burning bridges when I'm mad.
 I'm seen as toxic when I'm sad.

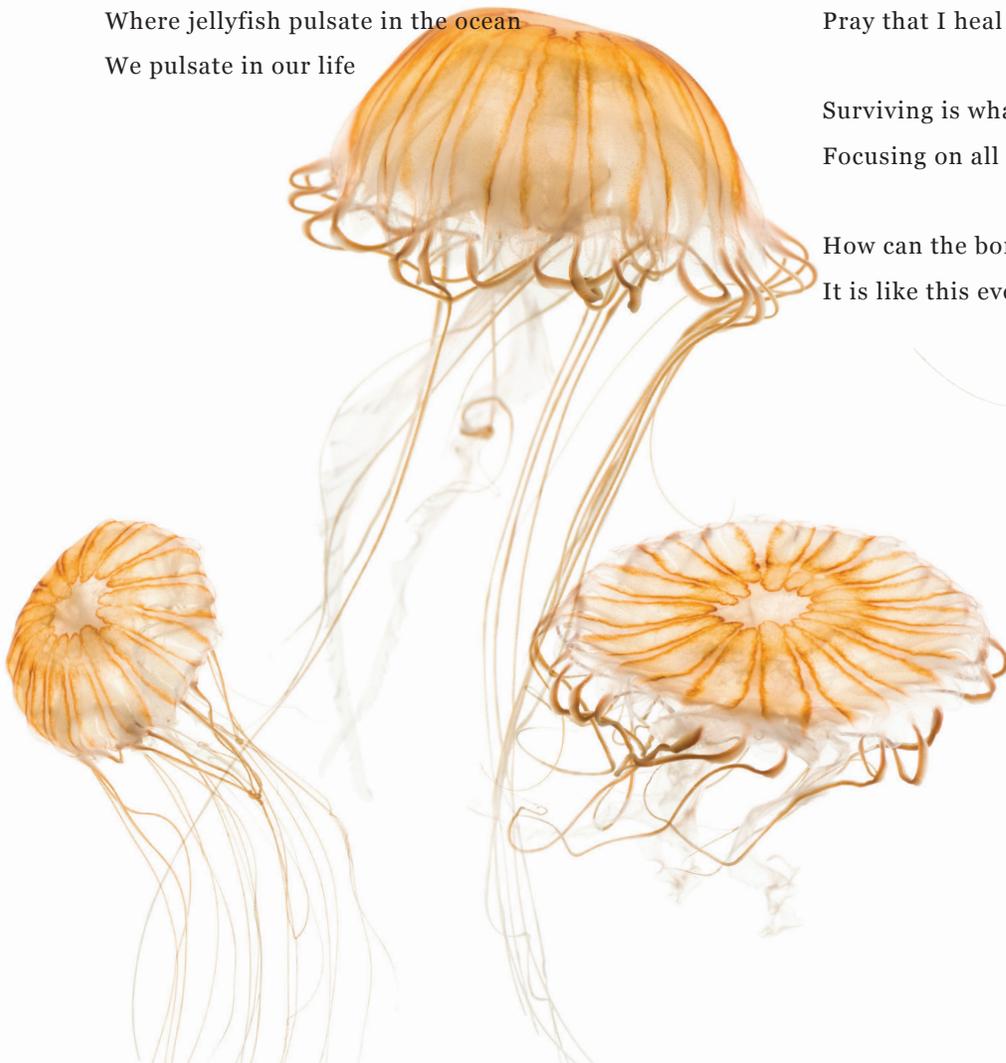
I understand nobody's perfect.
 I fight to stay above the surface.

My addictions stuck inside me.
 A daily struggle to stay happy.

I will continue to try feel loved.
 Pray that I heal and rise above.

Surviving is what's on my mind.
 Focusing on all that is so kind.

How can the boredom go away?
 It is like this every night and day.



Good Morning, Mirror

By Jayne Melville Whyte

Pandemic mirror responds in silence.
Smile and worry lines write conversations,
carving curved brackets around the mouth,
as quotation eyebrows embrace my view.

No hair bang curls, like commas, decorate
the furrows of an open page forehead.
Headband lockdown tames salt and pepper hair -
wispy doodles in margins of the cheeks.

Lips pout, purse, point, and preserve the silence
while I review my autobiography
printed in bold font. Familiar symbols
written on years of full calendar pages.

In COVID lockdown, my mirror's greeting
reflects a face to challenge each new day.



[*It is December...*] By Stephen Dunster

It is December and there is still snow in the streets from November
It is grey out, but its still not bad, not too cold
December 8; forty years since John Lennon was shot
This covid crisis is more than nine months old now
It started slow and grew rapidly into loss and grief
Remember when toilet paper was king and line-ups were long?
Life goes on as it must 
My friend Mimi is confused and crying
She's had two strokes; I've had four small ones, but I get up and go on

Mimi sits in the lobby and talks about strangers in her apartment.
Life goes by hour after hour, minute by minute; whole days
Friends were worried about Mimi and called social services
I got up that day, another day. What would it bring?
Mimi was visited by social services and had her evaluation
I carry on, and that is my salvation.



The Heart Essence of the Pandemic

By Samantha Hansen

We are gently shifting,
And gentleness becomes us,
As we learn to handle ourselves
With a kinder heart.
We see our needs,
Our breaking hearts,
And we whisper to ourselves
The truth of love.

We are wholly loved
In our wounding and pain.
It lends us to see ourselves,
It lends us to see others,
Through the lens of compassion too.
We are all connected and all need love.



[THERE IS NOT A LOT OF DIFFERENCE]

By Cory Wiebe

There is not a lot of difference
 During the pandemic for me.
 Chronic pain is my life,
 Everyday I deal with it.
 Even without the pandemic
 I am locked away in isolation.
 The pandemic doesn't change much for me.
 More distance between me and others.

On my walks.
 Uncomfortable masks to wear,
 But mine is cute with a hummingbird on it.
 I feel changes in life soon.
 The pandemic for others and chronic pain for me.
 An end to pain and grief will be great!

Saskatchewan Pandemic

By Naomi Doell

Count your blessings.
 Name them one by one.
 One of which is living in Saskatchewan
 According to the news.
 Someone is dying every 8 or 9 minutes somewhere else.
 Sure we can't see our loved ones or friends.
 It's a small price to pay.
 There are those that claim masks don't work.
 Just look at the numbers.
 One can't even say the virus doesn't like the cold.
 For it's been crazy warm for Saskatchewan.
 Sure it's not business as normal.
 I'm not saying let's have a party.
 However, we don't have it that bad.



*I am in big trouble
with the pandemic*

By Larry Lauder

I am in big trouble with the pandemic
This is what it seems
For all of this is pathetic
I had to go on and dream

I guess there is medicine for it
And that it's now ready to use
It only takes time to get it
That's all they say, it's true

If you come out of the sickness
You will be better off
They laugh at your weakness
And we are nice and soft

This is a sickness- Covid-19
But we should be off in a quiet dream

[For the first time in history]

By Derek Sarazin

For the first time in history,
We've uncovered the mystery,
Of who we are.
Stopped dead in our tracks,
We can't look back,
The shift has already begun.
Coming out of the emotional dark ages,
We started to feel the light of genuine kindness.

Covid has changed
The way we treat each other,
We are becoming more
Like sisters and brothers,
Thinking more about loving one another
More than we ever did before.

SASKADEMIC

By James Skelton

So, be it common these blues?
 Sick and tired again
 Once in the grip, little trues
 Sounds of Suffering, Sounds of Pain
 A fiscal cliff and the eternal what-if
 When there's no tomorrow
 Something must go beyond this trip
 Waves of Tears, Waves of Sorrow
 It's about Time; it's about Place
 Given the facts - must not complain
 Allow Respect and Dignify Grace
 Familiar Paths, Familiar Terrain
 One time One space One mind
 An elusive solution that's ill-defined

I AM: I WAS

By Brenda Stretch

I'd like to be away from the dark recesses of my mind.
 Away from planet earth, away to another galaxy.
 The dark recesses of my mind that Covid 19 has caused.
 The isolation, the fear of surrendering my soul
 to the complexities of a fathomless disease of covid.
 I was an outgoing and spontaneous individual.
 Covid has made me withdraw.
 Loss of sleep, and very few contacts.

I withdraw away from society into a disjointed nightmare of wakefulness.
 I'm lonely and disheartened, my smile masked.
 How can we read a masked man?
 The eyes shift, making one weary.
 It's concerning and perplexing to cope with Covid.
 Freedom limited.

What does covid mean to me? Or take a deep breath of fresh air

By Jim Snyder

Corona virus called on me
 As what we sow we reap
 Taking us on this path to heaven
 All is fresh as we mesh
 Together our writing and song
 Putting our sights on what we write
 Our masterpieces we leave with you
 Our band of brothers extraordinaire
 All the poison we ingest is spit out
 The happy heart is like a good medicine
 Our taste of life, a celebration of love
 Further up the road to Calvary
 Jesus releases us all day long
 Be thankful for him, unspeakable gifts
 This is what covid means to me:
 Take care of each other.



Bears and Humans VS. Covid-19

By Kevin Prokopetz

Some of us are bears in captivity,
We strive to protect our cubs,
Killing the virus protects our kind,
Animals with masks pretend to be blind
Our wild ancestors become infected
They are later antidote injected
Now they are held captive,
Us bears can now roam free!

Now us humans have to sterilize,
Because covid-19 is on the rise
We also have to wear masks
Because of the masters of disguise
Indoors we stay six feet apart
Working to kill the monster

Prairie Pandemic

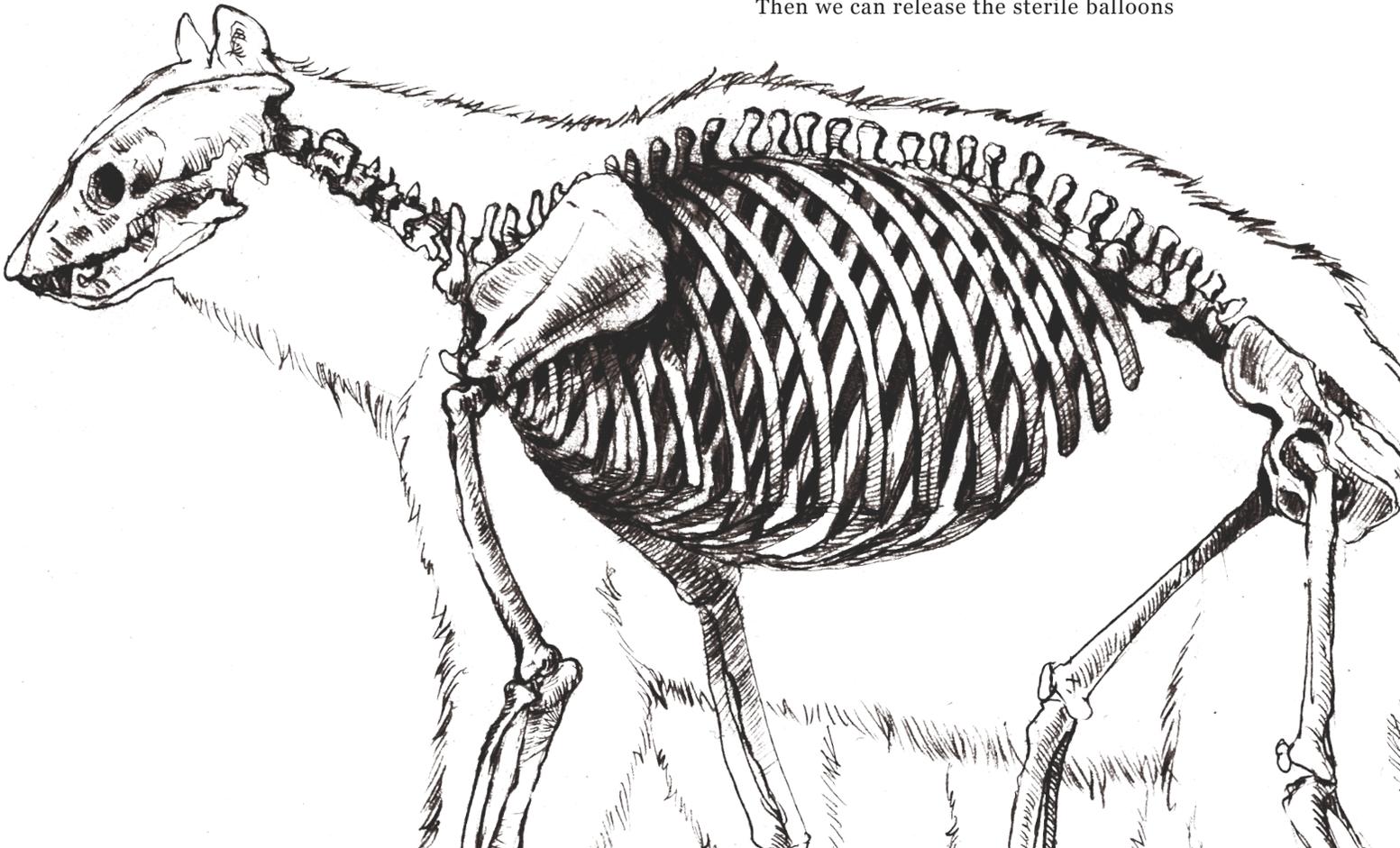
By Jennifer Morin

And so we are told to stay at home
Long lines at stores to buy toilet paper
Wash your hands with alcohol foam
With gloves and masks it is a caper

Please stay home if you have a fever
If you cough, you will isolate
Non- believers will come with a cleaver
Is the fake news just click bait?

What will happen when we get locked down?
Social distancing doesn't help with free love
Will someone report me and get knocked down
But only if you're wearing gloves

This will be over very soon
Then we can release the sterile balloons



[It came in silently...]

By Ivan Robb

It came in silently like a prowling cat
 It came like a swarm of bees
 It came in and caught me flat
 It makes everybody sneeze

Nobody can enjoy leaning on trees
 When nobody has the keys for a cure
 Come up with a cure please
 With team work we can do-er

The cases of Covid get higher
 And spread just like a wildfire
 The cure we need to acquire
 Diffusing it will go to the wire

Will someone send it around the bend
 So it will end, then our heath can mend

[The Pandemic
spread like wildfire]

By Eric Valentine

The Pandemic spread like wildfire
 This pandemic is serious
 Some people got it
 Others didn't

Some people got tested
 Many have recovered
 I got tested, and had to stay in my room
 It came back negative

Now I hear there is a vaccine
 I would like to get it done
 To prevent the spread
 People would like to know how it started

Rumour has it; the virus affects seniors the most
 I answer truthfully when asked about symptoms



The Pandemic Pandemonium

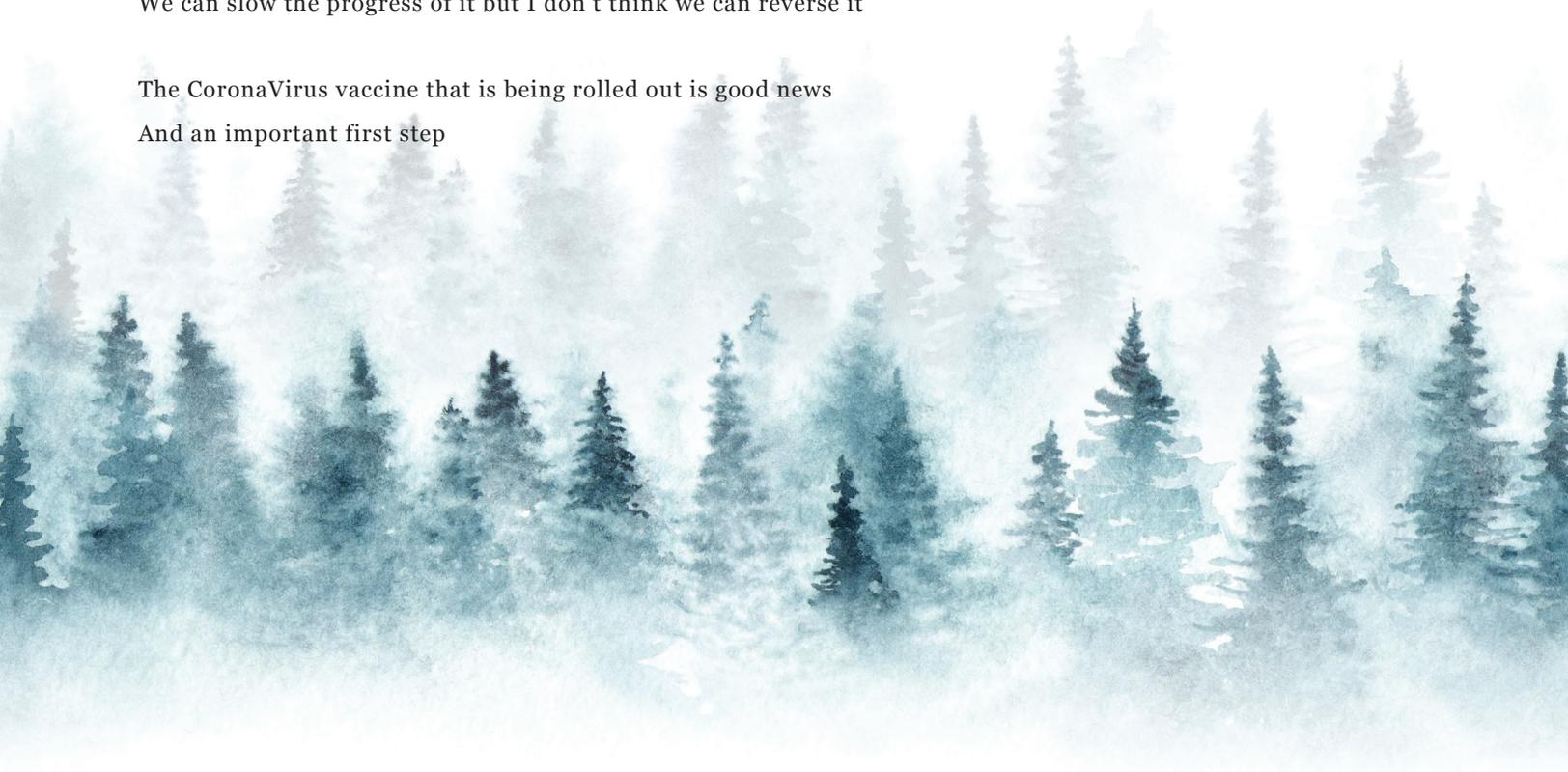
By Barry Styre

In Sask. we are hand washers, mask wearers and 6 feet aparters
We read, talk and listen to all things Covid
We compare this pandemic with the Spanish flu of 1917 and
The Black Plague that decimated Europe in the mid 1300's

The Corona Virus is a wicked mistress,
She sets her sights on humanity, prince of pauper alike.
She shows no favouritism. Can we be good health warriors
Being kind to each other despite stress and uncertainty

Here in S.E. Sask, I think we are one of the last places in the country
We have fewer infections then other places in Canada
Disease of Death does not take a holiday in the lands far and wide
We can slow the progress of it but I don't think we can reverse it

The CoronaVirus vaccine that is being rolled out is good news
And an important first step



Colleen Anderson

Vancouver writer of prose, poetry, fiction, and nonfiction. Author of dark stories, *A Body of Work* (2018). Collection of poetry, *I Dreamed a World*, due out fall 2021.

Byrna Barclay

Well-known Regina writer, former editor *TRANSITION*, now publisher at Burton House Books. Working on a long overdue collection of poems about “Women In Their Place.”

Tillen Bruce

Perfectionist out of Saskatoon. Author *Horse Sense* (1995) and several unpublished but eminently publishable novels.

Paulo da Costa

Writer, editor, translator now living in Canada. Poetry and fiction widely published and translated. Author short story collections, *The Scent of a Lie* (2003) and *The Midwife of Torment* (2017).

Jessica Renee Dawson

Vancouver Island poet still dealing with past lived experience of mental illness. A former Stand Up For Mental Health comedian and an award-winning artist.

Catherine Fenwick

Regina author widely published in magazines, academic journals, anthologies. Currently working on a poetry manuscript.

Robert N. Friedland

Widely published writer (fiction and nonfiction) and political commentator practicing human rights and administrative law in BC.

Arthur Gardiner

Midway through his eighth decade, after living and working all over the globe, quietly retired in Calgary with one wife and two dogs. Perhaps his first literary publication.

Beth Goobie

Author of 25 books. Latest collection of poetry, *breathing at dusk*, won two 2018 Saskatchewan Book Awards. Enthusiastic poetry slammer and community band percussionist from Saskatoon.

Charity Konrath

Uses writing and painting as tools to navigate existence. Background in healthcare. Lives in Ontario with her husband and three children.

Rolli

Regina-based author, cartoonist, songwriter, and regular contributor. <<https://rollistuff.com/>>.

Jason Schreurs

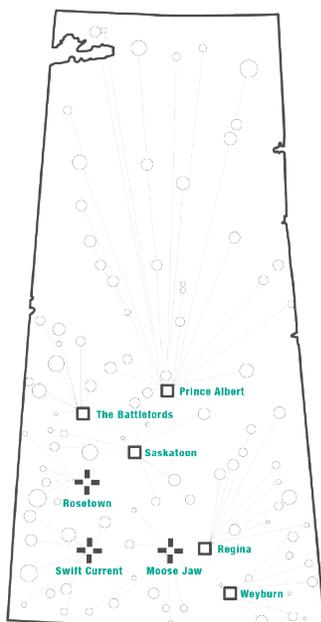
BC writer, punk rocker, and podcast host diagnosed with bipolar disorder 2018. Facilitates mental health support groups and does health coaching.

Barry Styre

Writer and member Weyburn WFYL Group. Frequent contributor to *TRANSITION*.

Denise Wilkinson

Prince Albert SK teacher (English), meditator, walker (with husband and dog), and mother (two almost-men). Member Sans Nom poetry group currently working on her mask collection.



Canadian Mental
Health Association
Saskatchewan
Mental health for all



Wellness Support Response Line

Prince Albert	1-306-940-7678	Moose Jaw	1-306-630-5968
The Battlefords	1-306-441-5746	Regina	1-306-535-4292
Saskatoon	1-306-270-3648	Weyburn	1-306-861-4951
Rosetown	1-306-831-4083	Provincial Div.	1-306-421-1871
Swift Current	1-306-741-5148		

Canadian Mental Health Association Saskatchewan Branches

Battlefords

1011 - 103rd Street
North Battleford, SK, S9A 1K3
Call: 306 446-7177
Cell: 306 481-7817
Fax: 306 445-7050
Email: jane.cmhanb@sasktel.net

Rosetown

Box 1376 (1005 Main St. Rm 52) Rose-
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Phone: 306 882-1232
Cell: 306 831-7560
Email: carmenl@cmhask.com

Moose Jaw

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Moose Jaw, SK, S6H 5E6
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Cell: 306 513-8261
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