

# Newsletter

June Quarter

Issue 2. 2007

Self Help Queensland Inc is a network of self help organisations and groups in Queensland. The network was formed by self help organisations to share resources, support each other, assist in the development of new groups, raise community awareness of the importance of self help and provide a strong united voice on issues which affect our members.

### From the President

Sue Smyllie

Hello Everyone

As our regular readers know, I have been harping on about our sector taking responsibility to build our capacity for some time. As I've said before, it's time the community sector had some self generated, powerful conversations to air as many diverse viewpoints as possible, over a long time frame, to generate collective wisdom and action. Our aim should be to develop strong relationships in order for each of us to be able to speak with a 'knowing' voice when the occasion arises, short circuiting any competitive influences imposed on us externally. We need to be stronger as a sector.

The stronger, more knowledgeable and more involved we all are in our lives and that of our community, the better our representatives will need to be. Ultimate power should lie in the hands of the citizen; this is what self help (and democracy) is all about.

SHQ has developed our deep democracy project as our contribution. The Global Institute for Learning and Development is bringing a lady called Kristine Quade over from the USA to do some training programs in Queensland.

The Global Institute for Learning & Development (GILD) designs creative and innovative learning programs to generate both sustainable business results and beneficial social outcomes. Their aim is to develop the capability for learning as the cornerstone of global sustainability.

**Human Systems Dynamics (HSD)** is a way of working which looks at developing innovative and successful organisations in times of rapid and complex change.

Kristine is an accredited HSD consultant and combines her background as an attorney with a Master's degree in Organizational Development from Pepperdine University (USA) with her 20 years of practical experience. Kristine teaches in six international organisational development programs. She has led over 150 varied client system interventions in a wide range of sectors including health care, research, education, retail, food, forestry and a number of government organisations and is the author of a number of books including The Conscious Consultant: Mastering Change from the Inside Out (2002). Please feel free to look her up on the web KrisOuade@quantumchange.us

I am very excited about her visit to Australia. My conversations with her have shown her to be a very caring and skilled communicator, not in the least overawed by her own outstanding track record. Her language and concepts are very accessible. SHQ has some funding we are prepared to designate towards a community workshop during her visit in order to make sure that the community sector in Queensland can take advantage of this training opportunity. Due to Kristine's generous spirit, SHQ will be able to commission a one day workshop that will be available to community members at a minimal price. Details and times are yet to be confirmed. We intend this training to be available for community members who won't be able to afford the full priced events. To that end we will be developing a priority list of (Continued on Page 2)

# Self Help Queensland Inc Management Committee Members

President Sue Smyllie
Secretary Thea Biesheuvel
Treasurer Kathleen Zarubin
Members Jill Metcalfe

Kim Summers Penny Threlfall Bob Wyborn

### **Committee Meetings**

If you would like to attend our meetings, please contact the office for dates and times. Everyone is welcome to attend.

#### **Project Officer**

Trish Fallon

#### **Office**

The office is attended Monday to Friday, 9am to 4.30pm. However, staff are sometimes required to liaise with groups or attend meetings away from the office.

If you wish to call in to use the office facilities or talk to the project officer, please phone first to ensure that someone will be available to meet with you.

#### Office Location:

Sunnybank Community Hall 121 Lister Street (Cnr Gager Street) Sunnybank 4109

### **Postal Address**

P.O. Box 353

Sunnybank QLD 4109

**Phone/Fax:** (07) 3344 6919 **Email:** selfhelp@gil.com.au

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Thanks to Queensland Health for providing funding to Self Help Queensland to help carry out its activities, and for supporting the publication of this quarterly Newsletter.



(Continued from Page 1)

criteria to help us ensure those most interested and most in need can come. We will put our policy in the next newsletter.

In the meantime, GILD and SHQ have developed a potential participant survey to find out just what sort of session people will be most interested in. Please email me if you are interested in attending the community workshop or you think you or your organisation would like some more in-depth training and I will forward more information to you.

This is cutting edge stuff, a great opportunity for the community sector to gain skills, consolidate communities of practice and form stronger relationships. I hope you can join us.

Till next time

Sue Email: ssmylie@bigpond.net.au

#### Please Tell Us What You Think!

We value feedback about any aspect of the services we provide. Please assist us by letting us know how you think we may be able to do things better. Ph 07 3344 6919 or email selfhelp@gil.com.au

SHQ's Policies and Procedures Manual is reviewed annually, and may be seen at the office by contacting Trish on 3344 6919.

#### Contents President's Message 1 SHQ Committee & How to Contact Us 2 **Genetic Matters** 3 New Night Time Cancer Self Help Group 4 5 Saving Lives With a Conversation Siblings Australia 7 Assistance Needed from Support Groups 8 Playback Theatre - Stories of My Life What Do We Know and What Do We Need to Know About Consumer Health Organisations 10 Well Ways Program Queensland Roars Against Racism 11 New Mt Gravatt Carers Support Group 11 **Funding Information** 12 Because I Am A Girl 13 Have Your Say About Deliberate Self Harm 14 \$100 Million Redress Scheme 15 15 AustraliaForAll.com.au An Organisation to Look Up To 16 Setting The Standards: Defining the Values And Beliefs of the Community Sector 18 20 Staying Mentally Healthy 22 **Diary Dates**

## Genetic Matters

by Kim Summers PhD

# Who should be tested for genetic conditions?

Our increasing ability to test for genetic variation which is associated with diseases raises all sorts of questions about the ethics and appropriateness of genetic testing. Testing for carrier status for common genetic conditions and sex-linked conditions and testing for some late onset conditions before symptoms appear is possible, but the implications of testing need to be carefully thought out before it is done.

All of us carry bad versions of a number of genes without knowing it. Since we have two copies of almost all genes, for many the second copy of the gene compensates for the bad one and masks its effects (this is called a recessive condition). People who have one good and one bad copy are said to be carriers. Although they have no symptoms, two carriers are at risk of having a child who gets two bad copies and therefore has the condition. The chance of two carriers becoming partners depends on how many people are carriers. When a condition is very rare, carriers are also rare and unlikely to meet up. But some carrier states are common in some populations and so there have been suggestions that all individuals in those populations should be tested before they have to make reproductive choices.

Carrier testing in some populations at known risk of specific diseases has been done for some time. Ashkenazi Jews have a high frequency of Tay Sachs disease, a devastating neurological condition which results in childhood death, and individuals are encouraged to be tested for carrier status prior to marriage. This program has reduced the incidence of Tay Sachs disease in participating populations. There has also been extensive testing of Mediterranean populations for thalassaemia and a reduction in affected offspring of carrier couples.

Two genetic conditions which are common in Europeans and which could be tested for are haemochromatosis and cystic fibrosis.

Haemochromatosis is a condition where iron

is stored in the soft tissues such as the liver, heart and pancreas. If detected and treated early patients can have normal life span and quality. In our population, the incidence of haemochromatosis is about 1 in 400 making it the most common genetic disease. In fact, 1 in 10 people of European background is a carrier, so marriages between carriers, or between a carrier and an affected person, are not rare.

Cystic fibrosis is another common genetic condition in Europeans. About 1 in 2500 babies born in Brisbane has cystic fibrosis, and the carrier frequency is 1 in 25. Although cystic fibrosis sufferers can now live into their 30s and beyond with current medical approaches, the disease is still debilitating and involves high cost, extensive treatment and potential psychological impact.

Would knowing you were a carrier affect who you would marry? If your partner was also a carrier, each offspring would have a one in four chance of being affected. You might decide not to stay together, not to have children, to have prenatal testing of any pregnancies or to have your children tested at birth so early treatment could be started. This would be cost-effective since only offspring of high risk partnerships would need testing and treatment could be begun early to avoid the major problems.

There have been suggestions that routine screening for carrier status for these two conditions should be started in this country. When should this testing be done? Late high school is the last time when individuals in our population are collected together systematically. So would year 12 be a good time to catch them for testing? Or perhaps year 11, to avoid addition stress in the important final year of school. If testing in the senior high school years was accepted, who should consent? The child or the parents? And who should receive the results? Often the mother is the keeper of health records, but would releasing this result to the mother be a violation of the child's right to privacy? Would a teenager remember that the test had been done and the result by the time he or she was thinking of settling down? When I talk to high school students about these issues, most of them are keen to be tested, but they are not so clear about how the results should be delivered and recorded, or what impact it would have on (Continued on Page 4)

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their lives and reproductive decisions. This is an issue our society will have to decide about as more and more genetic tests for carrier status become available.

The situation for sex-linked (X-linked) conditions is a bit different. Women have two copies of genes on the X chromosome but men have only one. So women can be carriers with their good gene masking the bad one, but their sons may inherit the bad one as their only copy and therefore have the disease. Fragile X linked mental retardation is a relatively common X-linked condition. Testing for carrier females is straightforward. There is no treatment for the condition, so carrier women would have the choice of not having children, or of using some form of prenatal testing to determine which offspring are male and affected. Mums of fragile X boys are keen for their daughters to be tested for carrier status prior to puberty, so that they are aware of their status well before they start thinking about marriage and children. Should this test be done routinely on all girls, for example in year 8 in conjunction with the vaccination program?

Once a test result is available for any of these conditions it has implications for the whole family. This sort of population testing is likely to uncover families who have never had a member with the condition but who will suddenly discover that they are at increased risk. The psychological impact could be immense. Once the risk is known, what are the responsibilities of the carrier people? They can't be compelled to choose non-carrier partners or to have all pregnancies tested. If an affected child is born, who would be responsible for making sure the proper treatment was instituted? For example, a person with haemochromatosis can avoid problems by minimising the intake of iron (for example reducing red meat) and giving a blood donation every three months as an adult. Should the carrier parents be made to attend educational sessions on the condition and perhaps be fined if the child's iron levels increase? Our society would be unlikely to accept this interference, and yet the carrier testing is ineffective if there is no change in behaviour as a result.

The human genome sequencing project has given us insight into many more disease

genes and the associated technology has allowed development of accurate genetic tests for many of these. But the ethical issues associated with genetic testing are still far from clear and extensive education will be necessary before screening of whole populations for carrier status becomes routine.

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# New Night Time Cancer SelfHelp Group Being

elf-help group Established

The Cancer Self-Help Group Inc has provided a meeting place in Brisbane for people with cancer and their carers since 1989. It continues to meet on Wednesdays from 9.30am to 12.30pm at the Uniting Church, Merthyr Road New Farm, and now has a new phone no - 07 3376 1186.

### At the Group you can:

- Ask questions
- Gain information
- Receive encouragement and support
- Communicate your feelings
- Meet with others in similar situations
- Use our library of books and tapes
- Buy books through our bookshop

Future plans include the establishment of a night time Group - initially on a monthly basis - in Middle Park, Brisbane.

Any cancer patients or carers interested in the new Group can phone 3376 1186 for further information. There is an answering machine if the phone is unattended.

### Dalai Lama Free Public Talk

"Compassion & Kindness"

Wednesday 13th June 4pm to 5.30 pm

Brisbane Entertainment Centre Tickets at Ticketek (free + \$5 admin fee) Phone: 132849 or www.ticketek..com.au

# Saving Lives with a Conversation!

How do I become an organ and tissue donor? It's simple really; tell your family, partner and friends that you want to be an organ and tissue donor.

It seems to be a very easy thing to do, but Queenslanders Donate's Kate Stodart said that research indicates that initiating THAT conversation is actually harder than it seems. But it is a conversation that can save or improve the lives of up to 10 people.

"If this topic has been discussed then your family only has to honour your decision, not make the decision for you. It makes it so much easier for them in an already stressful situation," said Kate.

If you are able to be an organ donor, you have died suddenly and unexpectedly – no warning. Your family is in grief, devastated by your death. If they are asked what your donation wishes were and the family discussion had not occurred they are more likely to err on the side of caution and say no.

"On the other hand, if the topic has been raised and discussed and they know of your wishes, be it yes or no, then they can respect that and proceed comfortable in the knowledge this is what you wanted," she said.

Once you've had that family discussion, formalise your decision and record your intention to donate (or not donate) on to the Australian Organ Donor Register. Authorised medical personal are required to check this register before donation begins to see if you have recorded your decision.

Never presume you are too old or to sick to donate – each person is assessed at the time of death to determine their suitability to donate organs and tissues for transplantation.

"The reality is that you are 10 times more likely to require a transplant than become a donor." For more information or for a registration form, contact the Australian Organ Donor Register on 1800 777 203 or <a href="https://www.medicareaustralia.gov.au">www.medicareaustralia.gov.au</a> or go to your nearest Medicare office and pick up a brochure to fill out. (Brochure & form enclosed)



### Thank You Again

- for your newsletters

We've said it before, but it's time to say it again. Thank you for the marvellous response to our request to receive your newsletters. They keep coming in, and never cease to amaze. Congratulations to everyone who has the difficult task of putting out a newsletter time after time and always trying to make it informative and interesting!

We love to receive your newsletters, and as an organisation whose role it is to disseminate information relevant to the Sector, it is really helpful to us to learn what your group is doing. It is also very inspiring.

We would like to fill a truck full of newsletters and tip them all on the lawns at Parliament House to show our pollies what many small community groups are achieving in their own quiet way with no support or kudos - and saving lots of health \$\$ as well!

One of the newsletters which came in for the first time was from the Australian-Baltic Friendship Society Inc. It was newsy, warm, friendly and interesting! For those of you who may not be aware, the Society represents those Australians who have migrated from Estonia, Latvia and Lithuania, many of whom suffered terrible experiences in the refugee camps of Germany.

After reading their newsletter, you couldn't help but think what a great bunch of people, with such a positive outlook - how good would it be to hang out with them for a while and get to know them!

The front page had an uplifting message for all of us. "Be proud of who you are...be proud if you are an Australian with convict connections. Your ancestors faced many challenges in order to make Australia home and to get you where you are. So did we, the Baltics from Lithuania, Latvia and Estonia born before 1950, coming to a then strange land, bringing nothing from our pasts, except our culture and love of life. Our heritage and culture enriches us. Our children were mostly born in Australia. And aren't we proud of them! They have achieved a lot and some are keeping our culture alive and sharing it with others. Life is Beautiful!"



### Wanted!

Young People with Epilepsy to Connect with Others

Epilepsy Queensland would like to hear from young people aged from 10 to 16 who have epilepsy, other disabilities, or a combination of disabilities, who live on the Sunshine Coast in particular, or elsewhere, and who would like to contact other people with disabilities for mutual support, and friendship, via phone, email or in person.

Contact: Carol, Support Lines Coordinator

Phone: 1300 852 853 or email

csugden@epilepsyqueensland.com.au

## Kabuki Syndrome Family Day 2007

### Saturday 15th September

This year the family day is being held at Varsity Lakes, approximately 30 minutes from Surfers Paradise and approximately 10 minutes from the Coolangatta airport.

- Guest speakers
- Indoor and outdoor enclosed play area
- Plenty of activities for the kids
- Catered lunch and snacks

For further information & to RSVP contact:

Val, Joanne & Adrian Herron

Ph: 07 5593 6156 Mob: 0431 150 962

Venue: Varsity Lakes Community Centre, Mattocks Road, VARSITY LAKES QLD

"Mutual help groups are a powerful and constructive means for people to help themselves and each other. The basic dignity of each human being is expressed in his or her capacity to be involved in a reciprocal helping exchange. Out of this compassion comes cooperation. From this cooperation comes community."

Phyllis Silverman, PhD, Dept of Psychiatry, Harvard Medical School, from Introduction to the "Self-Help Sourcebook," 1995, p. 24.

# Attention Parents of Young Children



# Support for Children with Pituitary Issues & their Families

In October 2003, The Children's Growth Foundation (CGF) joined the Australian Pituitary Foundation. We are endeavouring to commence a support group for parents and families of children with pituitary issues to encourage and gain support from one another. This could be in the way of telephone, email or meetings. If you would like to be involved please contact Sue Kozij.

Phone: 07 3376 2083

Email: sue.pituitary@ozemail.com.au

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# Looking for an International Support Group? Need Help to Develop an Online Group?



#### Check Out

The American Self-Help Group Clearinghouse

www.selfhelpgroups.org

The American Self Help Clearinghouse was established in 1993. It is a useful source of information relating to the Self Help Sector and has a helpful article written by its Director, Ed Madera, on how to develop an online support group or website.

There is also a Self-Help Sourcebook Online - a searchable database that includes information on over 1,100+ national, international and demonstrational model self-help support groups, ideas for starting groups, and opportunities to link with others to develop needed new national or international groups. Go to www.selfhelpgroups.org

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Services for brothers and sisters of children with special needs.

### Siblings

- acknowledged, connected, resilient

Siblings Australia is the only organisation in Australia to focus entirely on the needs of siblings of children with special needs. The incorporated body grew out of the work of the Sibling Project, established in 1999 within the Department of Psychological Medicine at the Women's and Children's Hospital. See <a href="https://www.siblingaustralia.org.au">www.siblingaustralia.org.au</a>

The work of Siblings Australia is increasingly recognised nationally and internationally. Our director, Kate Strohm, has presented workshops around the nation and, more recently in Italy, the US, UK and Canada. Her book, Siblings (Wakefield Press) has also been published in the US and UK.

Our work focuses on three main areas; ensuring peer support for siblings, strengthening families through enabling parents to be more able to support siblings, and improving the capacity of organisations to support siblings and the whole family. We do this through web-based services, printed materials and workshops.

### Why Siblings Need Support

There are over 200,000 young people under 25 years in Australia with a severe or profound disability or chronic illness. We can assume that each of these has at least one sibling. We can also assume that these relationships will the longest of any.

Understandably a large amount of time and resources are spent on a child with special needs. As a result, parents and professionals can inadvertently overlook the significant issues that healthy children can face when a brother or sister has special needs.

Siblings can experience a range of feelings and reactions to having a brother or sister with disability or chronic illness and these can vary over time. Often there is confusion about those feelings. On the one hand, a child may feel loving and protective toward their brother or sister. At the same time, they may feel resentment, embarrassment,

guilt, sorrow and fear. Without the cognitive skills and emotional maturity to understand and deal with those feelings, a child's self esteem can suffer. Anger and guilt can turn inward and lead to shame and a sense of worthlessness. Without support, these children can develop a range of emotional and mental health issues.

Support for siblings allows them to feel empowered and less isolated, and it helps them build resilience. As a result, not only will they be more likely to develop to their full potential, but also more likely to contribute support to their brother or sister with special needs.

### Peer Support

The underpinning principle of our work is, 'Creating Connections', not only for siblings but for parents and providers. With regard siblings in particular, we recognise the value of peer support. Many siblings feel isolated and adult siblings say that it would have made an enormous difference if they could have connected with other siblings when they were younger.

......we would also like to establish a Brisbane branch to enable more connections....

We have developed internet discussion groups for siblings of all ages. The adult one has enabled many siblings to connect with others and grow in strength through the sharing of stories. We need more members however to make the group even more valuable. Likewise with our groups for younger siblings we need to attract more members and also explore the best way of providing connections through the internet. Our main hindrance is funding!

In order to increase the number of face-to-face groups available for young siblings we have created a manual for facilitators, Sib-Works, which has received very positive feedback. We also provide training for professionals and run information sessions for parents. We would also like to establish a Brisbane branch to enable more connections to be created. If anyone is interested in finding out more about this or our workshops, or would like to contribute to our work through consultation groups, please contact the office on 08 8361 8361 or email <a href="mailto:info@siblingsaustralia.org.au">info@siblingsaustralia.org.au</a>

### **Assistance Needed**

from

### **Any Support Groups Related to:**

Allergy, especially nasal allergy, eczema, asthma and other respiratory diseases, heart disease, cancer, auto immune diseases, migraine, chronic fatigue syndrome, fibromyalgia, some digestive and liver disorders.

#### **About**

# Multiple Chemical Sensitivity & Disability Access to Hospitals & Health Care

ASEHA Qld Inc is a support group for individuals with allergy, food allergy/sensitivity, chemical sensitivity and other related disorders such as attention deficit hyperactivity disorder, chronic fatigue/fibromyalgia syndrome.

Many members of ASEHA experience ill health on exposure to strong chemicals such as fragrances, essential oils, strong cleaning chemicals, laundry detergents, pesticides etc. In particular, the issue of strong fragrances has become extremely problematic for the more severe members as fragrances now pervade every aspect of our lives and are difficult to avoid.

Some years ago we used fragrances only on special occasions, but fragrances have now become the norm rather than exception. They are present in most commonly used products and it has become difficult to purchase items such as laundry and dishwashing detergents, paper tissue products, toiletries, cosmetics etc that are unfragranced.

Some members are currently struggling to live in their homes because of fragrance and strong chemical fumes that drift across the fence line from neighbouring properties and permeate their homes e.g. fumes from fragranced laundry products, disinfectants, detergents, scented candles, incense and perfume. Pesticides, washing on a clothes line and some fragrances can be smelled as much as five houses away. This is difficult for those with allergy, severe chemical sensitivities, asthma, other respiratory diseases, heart disease, cancer and other health problems to deal with as it can trigger symptoms. In some cases it can cause a medical emergency e.g. life-threatening anaphylaxis or asthma.

Some with severe MCS spend their days locked in their homes in an effort to avoid the damaging fragrance exposures. They are very isolated. One ASEHA member suffers daily migraine and fibromyalgia as a result of perfume exposure from her neighbour's washing. She is never free from severe pain and does a balancing act with medications that are causing further health problems and shortening her life. Her neighbour does not believe that the fragrance is such an issue.

The problem of ill-health caused by exposure to fragrances and strong chemicals is also causing problems with access to buildings e.g. hospitals and allied health care, ambulances, nursing homes, respite, public transport etc.

Disability access to fragrance free health care facilities has become a major issue and individuals who are sensitive to fragrances sometimes have illnesses not related to their sensitivities, they can require health care and hospital admission. They need a fragrance free, low chemical indoor air environment and barrier nursing to protect them from chemical exposures. One ASEHA member passes out on contact with some fragrances. She is generally not believed and has been treated very badly in a hospital setting. At one fragrance exposure she was clinically dead and the hospital staff were surprised that she regained consciousness yet they still expose her to fragrances.

In an effort to achieve disability access to health care facilities and appropriate health care for those with MCS and others who are made ill from exposures to fragrances and strong chemicals, ASEHA Qld Inc met with Oueensland Health on 8th May 2007 to ask them to improve their MCS guidelines (Royal Brisbane and Royal Women's Hospital policy no. 80503ALL) and to advocate for a fragrance free and low chemical hospital environment. We have asked for a fragrance free policy to be implemented in Queensland Health hospitals and facilities as many hospitals in Canada and the USA have these in place. The issue is the same as the no-smoking ban for all the same reasons i.e. air pollution and toxic chemicals that are very damaging to human health. In some cases the same chemicals are involved.

Queensland Health seem to (Continued Page 9)

(Continued from Page 8)

think that there are only two people needing fragrance free access to hospital and in an effort to dispel this thinking we are endeavouring to ascertain how many groups there are in the community that have amongst them members who are chemically sensitive or who are made ill when exposed to fragrances and strong chemicals.

These may include various forms of allergy, especially nasal allergy, eczema, asthma and other respiratory diseases, heart disease, cancer, auto immune diseases, migraine, chronic fatigue syndrome, fibromyalgia, some digestive and liver disorders.

If you are associated with a support group or other organisation and have persons with MCS disability, or other health problems, or individuals who simply become ill following strong chemical/fragrance exposure please write to us at ASEHA Qld Inc PO Box 96 MARGATE QLD 4019 or email: asehaqld@powerup.com.au.

We are interested in gathering statistics if these are available, but the type of support group is also important as we do not have a full list of diseases associated with MCS. Some individuals may simply be affected by strong chemicals/fragrances that may not be associated with any other disease process.

Your help would be greatly appreciated.

Dorothy M. Bowes (Mrs)
President
ASEHA Qld Inc
PO Box 96
MARGATE Q 4019
asehaqld@powerup.com.au.

\*We also have a colour printer that is a give away if anyone is interested. It is a good printer, old but not used much. Does not scan.



Self Help The newsletter is a little longer this time, but it's a nice problem to have when people value it

enough to send articles for publication. Thank you! We'd like to do smaller editions and get the information out more regularly, but our capacity to do so is limited.

### You are invited to a



## PLAYBACK THEATRE PERFORMANCE

### "Stories Of My Life" Friday 8 June 2007

People who experience mental health issues have many stories on their journey. This event is an opportunity to share what is satisfying and meaningful to you. What stops you from living life fully? What enables you? How does being called a consumer affect you?

Share your story or listen to others. Bring your friends, family and allies.

Playback theatre is an improvisational form of theatre. We listen to your stories – stories of happiness and hope, sadness and struggle - and play them back in a respectful way. You can participate as much or as little as you like.

Friday 8 June 2007, 10.30am – 2.30pm Performance will begin at 11.00am New Farm Uniting Church Hall, Merthyr Rd New Farm (Fully Accessible) (Bus number 197, stop number 14)

#### Performance and Lunch are Free!

Please RSVP by June 5 (lunch provided) For further information contact: Jen or Catherine 3832 2600 or 0420978835

**Workshop:** For those interested a short interactive workshop will be held from 1.30 – 2.30 to discuss participation in non government services (the good, the bad and the ugly) so your key points can be raised at the Oueensland Alliance conference.

(A Consumer Participation Program, presented by The Queensland Alliance of mental illness and psychiatric disability groups Inc)

### Wanted!

SHQ is a Statewide organisation and we would welcome articles from Rural and Regional groups to include in our newsletter.

# Do You Care For a Person With a Mental Illness?

### The Well Ways Program Could Help

The Well Ways Program is designed to increase the capacity of families and friends to care effectively for themselves, other family members and their relative living with mental illness.

The Program provides a broad and sensitive perspective to the many issues facing families as they manage the impact of mental illness on their lives. The Program consists of  $8 \times 3$  hourly weekly group sessions plus four follow-up workshops over 12 months.

### Commencing 18th June to 6th August 2007 10am to 1pm each Monday

The workshops are aimed at families, friends and carers of people with a mental illness. The style is informal, and involves group discussions, videos and practical demonstrations.

Venue: Lang park PCYC Castlemaine Street, MILTON (Trains, Buses and free off street under cover parking available, a map will be provided)

The Well Ways Program is an initiative of the Schizophrenia Fellowship of Queensland

For more information, costs and bookings:

Phone: Julene Niemi 07 3358 4424

Email: project@sfq.org.au URL: www.sfq.org.au

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### You are Invited

to

## "Queensland Roars Against Racism" at Suncorp Stadium

The Queensland Roar Football Club and Multicultural Affairs Queensland invite you to the first major event of a three year "Queensland Roars against Racism" campaign.

### **Oueensland Roar**



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### SuperSport United

South African Premier League Team

A family friendly program of entertainment will kick off with music, dance and give-aways at 1pm. Catherine freeman, James Blundell, William McInnes and other celebrities will play in a curtain raiser match to personally support the campaign, before the main game at 3pm.

### Sunday 1st July 2007

Starts 1pm - Kick off 3pm

The aim of the campaign is to send positive messages in support of harmony and social cohesion and to make it clear there is no room for racism in Oueensland.

For further information: Phone 1800 053 739 or URL: www.multicultural.qld.gov.au Tickets available through Ticketek Phone 132849 or www.ticketek..com.au

### Invitation

### To The New Mt Gravatt Carers Support Group

Support Groups allow people with similar interests, difficulties or needs to come together and to support one another. Carer Groups provide support through information, education, emotional support and social activities.

### What will we do at the Carer's Meeting?

- Share friendship and support together
- Plan activities for 2007
- Choose a new name for the Group

Where: 1693 Logan Road Upper Mount Gravatt When: Tuesday 19 June 2007 10.00am – 12.00noon (Meetings held on 3rd Tuesday each month) For further information, assistance with transport please contact:

Brisbane South Carer Services Officer - Mirtha Barboza at Carers Queensland Ph: 07 3843 1401

Nolene at Mt Gravatt Community Centre Ph: 07 3343 9833

# What Do We Know – And What Do We Need To Know – About Consumer Health Organisations?

By Dr Fran Boyle, Senior Lecturer School of Population Health, UQ

The potential of consumer health organisations to enhance people's health, wellbeing and quality of life is a topic that has received little research attention. From the research that is available, we can make a number of observations. First, we know that many community organisations exist. Second, these organisations make an enormous difference to the lives of many people by enhancing their capacity - and often the capacity of carers - to live well with a wide range of health conditions. However, it also seems to be that many people who might stand to benefit through contact with a consumer health organisation don't ever make contact. For some people this might be an informed choice, but it's likely that many others simply never hear of them, don't know how they might be relevant to them personally, or are not encouraged (by their doctor, for example) to make contact. Understanding why people don't connect with community organisations is immensely important - and at least as important as understanding why people do become involved - if our goal is to improve people's access to these organisations.

Recently, a grant from the Australian Primary Health Care Research Institute has meant that colleagues and I from The University of Queensland and Bond University have been able to begin what we believe is some much-needed research into the role of community based health organisations in supporting people in the day-to-day management of chronic conditions. As Clark (2003)<sup>1</sup>, in a review of the literature around self-management in chronic illness, points out:

"... most, if not all, chronic disease requires adequate medical intervention but it is the patients themselves who become the expert managers of their conditions ... it is neither clinicians nor health systems that manage chronic disease, but rather patients themselves ... [and] the success of individual patients is determined in large part by factors

and people – in their social and physical environments".

Community based organisations are – or at least have the potential to be – an important part of that social environment.

Our research has two broad aims. The first is to find out who uses chronic illness focused consumer health organisations, how they hear about them, why they make contact, how they engage with them, and what benefits they report. We have interviewed 323 people who contacted an organisation in July-August 2006 in an effort to shed light on these questions. We are currently in the early stages of analysing the data collected and look forward to presenting the findings, which we hope will be of interest to the self-help sector, as they become available.

The second aim is to develop and evaluate a referral strategy to improve patient access to consumer health organisations through general practitioners. This part of the project, which will also provide information about why people have not made contact with an organisation in the past, is just getting under way. Again, we look forward to sharing the results of this part of the study when available.

#### The research team:

Dr Fran Boyle, with colleagues Dr Allyson Mutch and Dr Julie Dean (from the Health in Communities Unit, School of Population Health, The University of Queensland), Dr Marie-Louise Dick (Discipline of General Practice, School of Medicine, The University of Queensland) and Professor Chris Del Mar (Faculty of Health Sciences & Medicine, Bond University) have a longstanding interest in the role of community organisations in the wider health system and whether there is scope to improve people's access to them.

<sup>1</sup> Clark, N. (2003) Management of chronic disease by patients. *Annual Review of Public Health*, 24, 289-313

### Please Tell Us What You Think!

We value feedback about any aspect of the services we provide. Please assist us by letting us know how you think we may be able to do things better. Ph 07 3344 6919 or email selfhelp@gil.com.au

### Volunteer Small Equipment Grants Now Open

Up to \$3,000 (GST inclusive) is available through VSEG to help not for profit community organisations buy small equipment items to support volunteers whose work contributes to developing stronger families and communities. VSEG funding is for portable, tangible small equipment items that will directly help organisations' volunteers by making their work safer, easier and/or more enjoyable.

There is also a new grant of up to \$3000 called VSEG - Sport, where organisations can apply for funding for sporting items to encourage participation and better health, particularly involving young people.

### Applications close at 5pm Friday 22 June 2007

(Late applications will not be accepted by post or email.)

For eligibility, guidelines, or to register:  $w w w \cdot f a c s i a \cdot g o v \cdot a u / i n t e r n e t / facsinternet.nsf/aboutfacs/programs/sfsc-vseq_2007.htm$ 

For further enquiries relating to the Volunteer Small Equipment Grants 2007 please phone 1800 183 374 (AEST 9am - 5pm Mon-Fri) or email <a href="mailto:vseq2007@facsia.gov.au">vseq2007@facsia.gov.au</a>.

Organisations with special needs (hearing or speech impaired) may contact the De-

### Free Microsoft Software Update

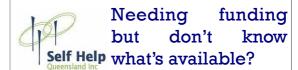
The free Microsoft software that many of us have taken advantage of over the years is still available to eligible non profit community organisations. However, there have been some changes to the way you now apply. Microsoft donations are available in Australia only by registering through the Donortec site (www.donortec.com.au)

#### To register with Donortec:

www.donortec.com.au/user/register

To browse Microsoft donated products: www.donortec.com.au/donors/microsoft

If you look like your passport photo you probably need the trip. *Author unknown* 



Where possible, Self Help Qld will try to assist support groups to access funding. As a subscriber to the "Easy Grants Newsletter" we receive monthly lists of Federal, State and local Government Grants as well as Philanthropic and Corporate Grants.

If you have a project in mind and need to find appropriate funding, give us a call and we can have a look to see what is available.

Generally, the providers of the grant require Incorporation & Deductible Gift Recipient (DGR) status; although not always. If your group is not incorporated, SHQ may be able to auspice an application on your group's behalf. This would be limited to certain funds at present until SHQ achieves DGR status. Please contact Trish on 07 3344 6919 or selfhelp@gil to discuss this further.

# Would your group like free, useful management support?

The "Community Door" website is a onestop shop of tools, resources and information for Qld's community organisations.

### www.qld.gov.au/ngo

The site is user friendly, and offers:

### Management SupportOnline (MSO)

MSO includes templates, sample documents, information sheets and activities on:

- Planning for your organisation
- Managing staff
- Improving services and activities
- Streamling systems
- Maintaining accountability

#### **Workforce Planner**

This interactive tool helps you:

- Work out your staffing needs
- Recruit and appoint staff
- Monitor and evaluate your staffing plan

#### **Online Discussion Forum**

A convenient way for you to connect with other members of the community and disability sectors for collaboration, information sharing and problem solving.

Phone: Claire Rowland 1300 794 611 Email: sngos@communities.qld.gov.au

### Because I am a Girl: The State of the World's Girls 2007

Millions of girls are being condemned to a life of inequality and poverty according to a new report from PLAN International.

Founded during the Spanish Civil War in 1937, PLAN International is one of the largest child-focused non - profit development organisations. Aiding deprived children in developing countries, PLAN International is non-political and has no religious affiliations.

'Because I am a Girl: The State of the World's Girls', highlights the appalling situation in which girls find themselves - sometimes through poverty, sometimes because they are young but often simply because of their gender.

The report is the first in a series of global reports on girls to be published over the next nine years by PLAN. Timed to be released on the United Nation's International Day of the Family, 'Because I am a Girl' raises awareness of the threats and broken promises that blight the lives of millions of girls.

The report presents global statistics highlighting the scale of the problem. For example:

- 62 million primary school-aged girls are not in education
- childhood malnutrition has led to stunted growth in an estimated 450 million women
- more young girls aged 15 to 19 years die from unsafe abortions and birth complications than from any other cause
- more than 100 million girls, some as young as 12, are expected to marry over the next decade despite international legislation outlawing early marriages

### "Morally Indefensible"

"This study shows our failure to make an equal, more just world has resulted in the most intolerable of situations," explains Graça Machel, a leading ambassador for child rights with her husband, former President Nelson Mandela.

"To discriminate on the basis of gender is morally indefensible, and economically, politically and socially unsupportable."

'Because I am a Girl' warns that the Millennium Development Goals, due to be reviewed by the United Nations, are unachievable without a global commitment to enforcing international laws that protect girls' rights.

Included in the report is an eight-point action plan listing straight-forward steps to which every global citizen, organisation and government can contribute to improve girls' lives. By doing so, we can support a better future, not only for them but for the world as a whole.

"Gender equality can't be reached overnight. It's a massive goal that everyone needs to agree to...people just need to get off their behinds and do something about it." Alia, aged 17

The Report can be downloaded (in PDF) from the Child Rights Information Network (CRIN) Website:

http://www.crin.org/resources/infoDetail.as p?ID=13351

### Visit Plan International:

URL: www.plan-international.org/ Email: info@plan-international.org

### Community Building: Critical Voices, Alternative Strategies

National Symposium, Darebin Arts and Entertainment Centre, Melbourne Tuesday 19 June 2007

### Sue Smyllie, Self Help Queensland President, is a Key Speaker

This one-day symposium will bring together community leaders, activists, researchers, policy makers, and workers in community agencies who are interested in authentic community building, critiques of government sponsored community building programs and models, and alternative community building strategies which have a stronger emphasis on empowerment, participation and self-determination.

Enquiries: info@civilsociety.org.au www.civilsociety.org.au Ph: 0425 722 890

# \$100 million Redress Scheme for Children Abused in Queensland Institutions

On 31st May 2007, in a joint statement with the Minister for Communities, Disability Services and Aboriginal and Torres Strait Islander Partnerships, Warren Pitt, Deputy Premier and Treasurer Anna Bligh announced that up to \$100 million was available for distribution by way of ex gratia payments to eligible former child residents of Queensland institutions and detention centres.

To complete its response to the Forde Inquiry, the Queensland Government's Redress Scheme will offer payments of \$7000 to those former residents who experienced abuse or neglect while in care.

A second payment of up to \$33,000 will be available in cases where there is evidence of abuse or neglect that was more serious.

Applications for the Redress Scheme need to be lodged between 1 October 2007 and 30 June 2008.

For further information or to request an application kit, call the Redress Scheme information line on 1300 769 291 between 8 am and 8 pm Monday to Saturday.

www.cabinet.gld.gov.

# Invite your local fire station crew to your home!

- or perhaps you could invite them to talk to your support group!

Safehome is a Queensland Fire and Rescue Service program where firefighters will assist you to recognise fire and safety hazards in and around the home. Once the hazards are identified you can then take steps to eliminate them. As part of the service, firefighters will advise you on the correct positioning and installation of smoke alarms.

This is a FREE service provided by Queensland Fire and Rescue Service in the interest of developing a safer community. You will receive a safety pack and checklist.

To invite your local fire station crew to your home for a Safehome visit call 1300 369 003.

Are you thinking of going on a holiday? Do you have a disability? Would you like accurate accessibility information?



AustraliaForAll.com.au is a new, user friendly national one stop shop for accessible tourism in Australia.

An initiative of the not for profit organisation "Access for All Alliance Inc", it is a national e-service which will allows tourists with disabilities and their families to obtain information about the accessibility of the accommodation and tourist venues which they wish to visit. At the same time it will assist tourist providers within the tourist industry to improve their services and therefore encourage more tourists with disabilities to use them.

The features of this e-service include:

- One Stop Shop for browsing, choosing (and where possible) booking destinations:
- A cross-border service giving access to information and accessible tourism throughout Australia;
- Information that is reliable and can be trusted as it is based on a consensus regarding the criteria levels and standards for accessibility.

AustraliaForAll.com.au will play an important role for travellers with physical, visual and hearing impairments, providing information that has been self assessed and/or professionally verified relating to the accessibility of accommodation and places of entertainment.

The site is continuing to grow and develop. If you know of suitable accommodation that could be assessed for inclusion on the site, the co-ordinator would be pleased to hear from you.

Phone: 07 4125 7771 Fax: 07 4125 7771 www.australiaforall.com.au







## Have Your Say About Deliberate Self Harm!

### For Adolescents

### \$25 for your time

Ever hurt yourself on purpose?

(e.g. cutting, burning, overdose, hitting, strangling, poisoning, and other types of deliberate self harm)

# Aged between 13 and 25? Live in Oueensland?

Tell us about it and how we can do a better job helping young people who self harm.

\$25 for your time and effort if you participate

If this sounds like you, take part in a group interview with between 4 and 10 other young people. We need 40 young people to help us in May/June 2007.

Please contact Tracey Kay (07 3365 5283 or t.kay@uq.edu.au)

- For further information
- To register your interest in taking part in a focus group

Adolescents and professionals living in rural and regional areas are invited to participate via one on one telephone interviews or teleconferencing where possible with groups.

This is a Queensland wide project conducted by The University of Queensland, University of the Sunshine Coast and Monash University.

Tracey Kay is a Senior Research Assistant, Department of Psychiatry, The University of Queensland Mental Health Centre (K Floor) Royal Brisbane Hospital, HERSTON 4029

### For Professionals

Deliberate Self-Harm: Development of a Best-Practice CD Training Tool for Queensland Professionals

Are you a Mental Health Care Professional? Psychiatrist? Police Officer? Paramedic? Social worker? Teacher? Emergency Doctor or Nurse? Psychologist? Youth Worker? Guidance Counsellor? Mental Health Worker or Nurse? Other professional/worker?

Ever come in contact with a young person who has self harmed?

HAVE YOUR SAY about deliberate self harm in either a telephone or face to face one on one interview (10 minute to half hour duration), or a focus group discussion (1 to 2 hours duration).

Please contact Tracey Kay (07 3365 5283 or t.kay@uq.edu.au)

- For further information
- To register your interest
- To indicate how you would like to participate.

The interviews and focus group discussions are designed to look at existing knowledge, attitudes and skill regarding self-harm across a broad cross-section of the Queensland professional community likely to encounter self harm as part of needs analysis for the "Deliberate Self-Harm: Development of a Best-Practice CD Training Tool for Queensland Professionals" project.

**Contact: Tracey Kay** 

Ph: (07) 3365-5283 Fax: (07) 3365-5488

Email: t.kay@ug.edu.au



## An Organisation To Look Up To?

I was researching health information on the internet recently and stumbled across one of the most exciting and inspiring organisations I have encountered in a long time. I think this had a lot to do with the fact that its philosophy reflected much of Self Help Queensland's own - though it's work to improve health and well being for all is carried out on a global scale, and in particular in poorer communities. <sup>1</sup>

The Hesperian Foundation (visit www.hesperian.org/) is a non-profit organisation dedicated to helping people take the lead in their own health care and organize to improve health conditions in their communities. It publishes books and educational materials, and invites the collaboration of other community health organisations and workers from around the world in the process.

The reality is that those communities who most need the health publications are the least able to afford them. Hesperian operates a Gratis Fund, run entirely by volunteers, which allows free distribution of the publications in these cases. Letters come in from rural villages and urban shantytowns around the world. They are sent by religious leaders, community health workers, school teachers and others who are desperate for resources to help them better serve their communities. Testimonials reaffirm that this very low-budget program makes a significant impact in the health of marginalized people around the world.

#### **An Interesting History?**

In the late 1960s and early 1970s, a group of health activists in Ajoya, Mexico compiled a notebook of treatment information for common medical problems in their village. The notebook came into great demand not only in Ajoya, but also among health workers from neighboring communities. In 1973, the notebook was reproduced as a comprehensive and revolutionary health-care manual titled **Donde no hay doctor** (Where There Is No Doctor).

Around this time, an organization was founded in California to distribute the book and begin work on an English version.

"Where There Is No Doctor" was first published in 1977 and is now considered by many to be the "bible" of primary health care for community health workers and villagers in poor countries around the world.

#### **SHQ's Early History**

There is an interesting parallel to Hesperian in SHQ's own history - though on a much smaller scale. In 1975 - 76 a Health Services Research team from Griffith University conducted a survey of over 900 pre-school children and their families who were living in developing outer southern suburbs of Brisbane, and who had no access to Medical Practitioners. The Australian Self Helping Health Care Assoc Inc (now SHQ) was founded as a result of this research. In 1979 the Team developed "A Self-Help Health Care Workbook" to:

- give knowledge to mothers about their own health, childhood illnesses, growth and development and preventative health measures
- To build confidence in the mothers so they could evaluate illness in the family, deal confidently with minor problems at home and wisely choose and change health care
- To improve communication between mothers and general practitioners and health advisors<sup>2</sup>

We live in a world of stark extremes. While those in rich countries benefit from the latest medical technology, millions of people still suffer and die from preventable and curable diseases.

Poor people throughout the world lack basic health care because it is priced beyond their means or because services are too far away. The affordable services that do exist are being threatened by global economic policies that force governments to cut budgets for health, education and social services.

#### **Hesperian Believes**

- Health is a fundamental right for all
- Health information should be shared
- People can and should take the lead in their own health care
- Women and men with little or no formal education can understand, apply and share medical information if it is presented simply and appropriately

(Continued Page 17)

(Continued from Page 16)

- Educational materials are most effective when the people who use them are involved in their development from the beginning stages.
- Health programs should be practical, accessible and respectful of the knowledge, experience and resources already existing in communities.
- To achieve good health, communities must address the underlying causes of poor health, such as: poverty, discrimination, harmful traditional beliefs and unjust social structures.

Hesperian has made a commitment to publish online versions of all its books and to keep those online editions up-to-date.

## The Following Titles are available for Free Download:

- Where There is No Doctor
- Where Women Have no Doctor
- A health Handbook for Women with Disabilities
- A Book for Midwives
- HIV Health and Your Community
- Helping Children Who are Deaf
- Helping Children Who are Blind
- Where There is no Dentist
- A Worker's Guide to Health and Safety
- A Community Guide to Environmental Health
- Women's Health Exchange
- Global Health Watch

There are many ways people can get involved and promote Health for All. Hesperian depends upon a global community of international partner organizations, health workers, volunteers and donors.

You can offer your services to collaborate in the editorial process, participate in a community review, or if you have a special occasion coming up, you can ask your friends and family to give you a "Gift of Health" which will send free life-saving health books in your name to a community that has requested them.

Hesperian Foundation 1919 Addison Street, Suite 304 Berkeley, CA 94704 USA hesperian@hesperian.org (Sourced from: www.hesperian.org/ and <sup>1</sup> SHQ Project Officer & <sup>2</sup> Self Help Health Care Workbook 1978)

### Spice Up Your Life!

(From the USA Kidney Foundation)

# Giving up salt does not mean giving up flavour!

Be creative and experiment for new and exciting flavour. Try the following herbs and spices with the foods listed.

**Allspice** - with beef, fish, beets, cabbage, peas, fruit

**Basil** - with beef, pork, prawns and most vegetables

Bay Leaf - with beef, pork, most vegetables

**Caraway** - with beef, pork, green beans, cauliflower, cabbage, beets, asparagus, and in dips and marinades

Cardamom - with fruit and in baked goods

**Curry** - with beef, chicken, pork, fish, green beans, carrots and in marinades

**Dill** - with beef, chicken, lamb, fish, green beans, cabbage, carrots, peas dips

**Ginger** - with beef, chicken, pork, fish, green beans, cauliflower, and eggplant

**Marjoram** - with beef, chicken, pork, green beans, cauliflower and eggplant

**Rosemary** - with chicken, pork, lamb, fish cauliflower, peas and marinades

**Thyme** - with beef, chicken, pork, fish, green beans, beets and carrots

Sage - with chicken, pork, eggplant and in dressing

**Tarragon** - with fish, lamb, asparagus, cabbage, cauliflower marinades

- Purchase spices and herbs in small amounts. When they sit on the shelf for years they lose their flavour.
- Use no more than 1/4 teaspoon of dried spice (3/4 fresh) per 400gm of meat
- Add ground spices to food about fifteen minutes before end of cooking period and whole spices one hour before.
- Combine herbs with oil or butter, let set for 30 minutes to bring out their flavour, then brush on foods while they cook, or brush meat with oil and sprinkle on herbs one hour before cooking.

(Courtesy of the Kidney Support Network Newsletter Winter/June 2007)

www.kidneysupport.org.au Ph:1800 358 797

# Setting the Standards: Defining the Values and Beliefs of the Community Sector

by Ann-Marie O'Brien

Ann-Marie, a veteran community sector worker, has outlined 10 quality standards for community organisations. It makes for an interesting check list, or a prompt for further discussions within your group:

### 1. The community organisation has a strong identity and clear direction that is quite distinct and independent from legislative and funding directions.

The organisation understands clearly its reason for existing and alters its direction in line with the goals and dreams of the people it supports, not because of government policy.

The community organisation accounts firstly to the people it supports and then to other stakeholders, including government.

# 2. The community organisation has a set of values that guide its development.

These values are known and held by everyone in the organisation, and are referred to in all decision making. These values have been tested by time and collective community wisdom and do not alter.

Although the organisation may accept government funding to assist in the delivery of its services, it is prepared to reject government funding if required to stay true to its vision and values.

# 3. The community organisation delivers a quality service through its commitment to people rather that policy or procedure.

It actively seeks out quality staff and members who share the vision and values of the organisation and who wish to make a difference in this world and then nurtures them in a climate of support and creativity.

It rejects the notion that policy and procedure can guide the wrong people to do the right thing.

# 4. The community organisation has a servant leadership model where leadership is based on a conscious choice to serve others.

Leaders in the organisation are there, first and foremost, to provide service to people who use the organisation's services, and those who work for it.

Leaders accept and recognise others for their unique gift and seek to draw out, inspire and develop the best within others. The organisation values leadership qualities over management skill.

# 5. The community organisation balances leadership with good management practices.

The organisation never loses sight of its core service nor allows red tape to distract it from that core service.

It seeks to develop organisational capacity to be flexible and responsive to the changing goals and circumstances of the people it serves while staying financially viable.

# 6. The community organisation is committed to the right relationships with all people.

The community organisation is first and foremost a community of people who share their lives with each otherand as such seek to treat each other kindly, fairly and justly.

# 7. The community organisation encourages voluntary action from within itself, and from the wider community.

Unlike business and government, community organisations foster an atmosphere of freely given time and energy to reach beyond and achieve more than funding will pay for.

The agenda of a community organisation is far beyond a particular service or program. It extends out to creating a better community and a better world.

### 8. The community organisation works for the common good of the society where citizens participate and are connected.

The community organisation seeks to build social capital – trust, reciprocity and networks between individuals and/or groups in the community.

## 9. The community organisation values personal integrity amongst its members.

Living within the community that is serviced by the community organisation, members (Continued on Page 19) (Continued from Page 18)

and staff walk the talk of community connectedness and right relationships in their own lives.

Living according to these values becomes more than a 9 to 5 job, as those who are served by the organisation share a common community life with those who serve.

# 10. The community organisation works collaboratively with other organisations in the community sector, as well as with others in the business and government sectors.

Unlike a business, a community organisation rejects concepts of "healthy competition" or "marketplace driven agenda" and works collaboratively with others community organisations towards a higher agenda of inclusive and responsive communities.

The community organisation is committed to supporting and sharing resources with other members of the community who are working to address need.

(Courtesy of "Our Community Matters" Newsletter May 2007 www.ourcommunity.com.au)

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## Shoes to Give Away

- with a catch

A popular Australian surfwear brand has an ongoing source of hundreds of shoes per year to give away to a not-for-profit organisation that might be able to use them – the only catch is they come as singles, rather than pairs.

Quiksilver Australia receives up to 100 women's right-foot shoe samples three to four times a year, which they are willing to pass on to a good cause. Sizes vary, however they mainly come in sizes 7 or 8 and are suitable for young women. (There may also be scope to have the samples produced in other sizes and as a mixture of right and left shoes if that would be more useful.)

Amputee support organisations, hospitals or even art projects are among the groups that may have a use for the shoes. Your group can contact Quiksilver Australia's Eloise Gannon by emailing:

Eloise.Gannon@qsilver.com.au



# First Time to be Held Outside the Northern Hemisphere!

12th International Metropolis Conference Melbourne 8 - 12 October 2007

Metropolis 2007 will feature Australian and global leaders and officials, renowned academics and key stakeholders who will gather to examine migration, economic growth and social cohesion. The Conference will bring together some of the world's key migration and diversity experts to discuss key issues and, in particular, to examine:

- the patterns of current and future migration
- the scope for reinforcing its favourable impact on economic growth
- strengthening social cohesion.

Delegates will have the opportunity to experience first hand the cultural diversity of Australian life.

There will be themed tours to specific sites in Melbourne to discuss:

- Language, employment and settlement in action
- Culture and community
- Faith and social cohesion

There will also be cultural events in the evening including a community fair, which will show the many faces of Melbourne's metropolitan city.

More information available on: www.metropolis2007.org

Venue: Sofitel Melbourne, 25 Collins Street

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"It is one of the most beautiful compensations of this life that no man can seriously help another without helping himself."

> Charles Dudley Warner, 1873 American essayist, editor, novelist

# Creative Juices Professional Development Workshops on Offer

Introduction to Community cultural Development: help to build on your skills, develop a body of knowledge about working with communities and their cultures and assist your professional development. This training is relevant to all artsworkers and organizations with an interest in working within a community context. Participants will view a broad range of ccd case studies and engage in stimulating discussions with guest presenters. Reg by: 13 June Training dates: 23 & 24 June 2007 from 9 - 4pm Cost: \$165 for 2 days (incl morning & afternoon tea & lunch)

Community Artist at Work: What knowledges and skills do you need to work respectfully and effectively with communities? Guest ccd practitioners will deliver presentations and work with participants during two days of contact training. This training has been developed to assist Community cultural development practitioners and artsworkers working in community to effectively project manage community activities. Reg by: 13 July Training dates: 21 & 22 July 2007 from 9 - 4pm Cost: \$175 for 2 days (incl morning & afternoon tea & lunch)

Being a Creative Community (3.5 hrs) and Grant Writing (3hrs): Being a Creative Community is a forum and workshop about the state of arts, community and cultural development in your area. Ideally participants will come together from a broad range of arts and community groups, to explore local issues and co-ordinate collaborative and creative responses. The Grant Writing Workshop is suitable for anybody needing help and support to turn an idea into an art project or festival through a successful grant application. It includes handy hints, all you need to know about funding bodies and their structures and decision making processes, project design and planning etc. Reg by: 13 July Training date: 18 August 2007 from 9 - 4pm Cost: A one day package \$65 (incl morning & afternoon tea & lunch)

Presented by Qld Community Arts Network & the Gold Coast City Council Cultural Development Unit.Contact 5581 6075 or <a href="mailto:cscdc@goldcoast.qld.gov.au">cscdc@goldcoast.qld.gov.au</a> or see <a href="http://www.goldcoast.qld.gov.au/cultural">http://www.goldcoast.qld.gov.au/cultural</a>

### Plan to Care for Qld Carers

On 1st June 2007, the Minister for Communities, Disability Services and Aboriginal and Torres Strait Islander Partnerships, Warren Pitt, outlined the Government's plan to care for Oueensland carers.

"The Queensland Government has made a commitment to recognise the often unpaid work carried out by carers and to make an effort to support them in their daily role," Mr Pitt said.

"The number of carers in Queensland is increasing, as is the number of people requiring care, so it is important that we develop responsive and relevant programs and policies to deliver quality services and support for our carers."

One of the key initiatives of the Action Plan that will directly benefit carers is the introduction of the Carer Card. "The Carer Card is a way for the Queensland Government to provide a tangible display of recognition for the valuable role played by carers."

The Carer Card will be modelled on the Seniors Business Discount Card scheme, and will enable eligible carers to access discounts for services and products at participating businesses. It will become operational in 2007-08.

www.cabinet.qld.gov.au

# Women's Health Information Free Seminars

## Identification and Management of Urinary Problems in Older Women

Tuesday 12 June 2007 from 12.15 to 2.00pm Venue: Community Meeting Room, Brisbane Square Library, 266 George St, Brisbane

### Menopause and Healthy Ageing

Tuesday 10 July 2007 from 12.15 to 2.00pm Venue: Community Meeting Room, Brisbane Square Library, 266 George St, Brisbane

#### **Diabetes**

Monday 23 July 2007 from 7.00 to 9.00pm Venue: Chermside Library, 375 Hamilton Road, Chermside

To book: Phone 07 3636 8242 between 8.30am and 4.00pm, Monday to Friday

Presented by Royal Women's Hospital Health Service District & Brisbane City Council



### Staying Mentally Healthy

- Depression in the Aged

Depression can affect your physical health, thinking, behaviour and emotions. When depressed you may perceive situations, yourself or others in a negative way. Low self confidence and self esteem are common and you may avoid the company of others.

Unfortunately, depression can go undetected in older people. Sometimes symptoms of depression which would cause great concern in younger people, such as problems with sleeping, are disregarded in older people as they are simply seen as a normal part of getting older.

Sometimes depression co-exists with dementia and can make the specific diagnosis difficult. For this reason, it is important for older people who may have symptoms of depression to ask their doctor for a thorough assessment.

What are the symptoms?
Common symptoms of depression include:

- Feeling of being a failure, guilt.
- Poor sleep and decreased appetite.
- Tearfulness.
- Loss of interest in activities.
- Avoiding contact with others.
- Poor memory and concentration.
- Physical pains (headaches, backaches or stomach upsets) – ensure there is no medical reason.
- Loss of energy or feeling agitated.
- Suicidal thoughts (immediate help is required).

Your GP is your first point of contact if you are worried that you or the person you care for may be suffering from depression and will make referrals to the appropriate services for treatment options following assessment.

For people accessing the Alzheimer's Association of Queensland's respite or residential services, the Occupational Therapist (OT) who will carry out your initial assessment of needs endeavours to ask screening questions to ascertain whether symptoms of depression or anxiety are present. The OT can then advise regarding seeking specialist assessment and developing coping strategies.

The Alzheimer's Association of Queen-sland's Professional Development Education Program offers a range of courses to provide people with the knowledge and skills to meet the complex needs of an aged person with mental health concerns, including our "Depression in the Aged" course. This program explores the numerous issues surrounding depression in the aged: causes, symptoms, the link between depression and dementia and treatment options.

Please contact our Toll Free Dementia Helpline 1800 639 331 or check our website www.alzheimersonline.org for information regarding the range of services the Alheimer's Association of Queensland provides.

Alzheimer's Association of Queensland Support Groups meet monthly at:

Mitchelton	Redcliffe	Ipswich
Wooloowin	Noosa Heads	Toowoomba
Mt Gravatt	Rockhampton	Hervey Bay
Sinnamon Park	Gladstone	Alzheimer's Association QUEENSLAND

We also offer a monthly telephone support group for geographically isolated carers.

Other useful contacts include: Lifeline 13 11 44 www.lifeline.org.au

Depressionet 1300 13 5542 www.depressionet.com.au

Beyond Blue 1300 22 4636 www.beyondblue.org.au

(Courtesy of "Dementia Matters" Autumn 2007. Newsletter of the Alzheimer's Association of Queensland)

"Although the world is full of suffering ...it is also full of overcoming it".

Helen Keller



# Diary Dates

7 June 2007: Epilepsy Seminar 2000 "Living Well with Epilepsy". Excellent speakers and interesting topics. A must for all people with an interest in Epilepsy. Bookings essential.

Phone: 07 3435 5000 or 1300 852 853

Email: rsvp@epilepsyqueensland.com.au

Venue: Wesley Hospital, Brisbane

4th July - 7th July 2007: 18th Annual Australian Winter School on Alcohol and Other Drugs "Drugs, Lifestyles and Culture - Innovation and Evidence".

**Phone:** 07 3834 0211 **Fax:** 07 3832 5625

Email: winterschool@adfq.orgURL: www.winterschool.info/Venue: Carlton Crest Hotel, Brisbane

6th July 2007: ARAFMI 30th Anniversary Conference & Reunion Dinner "The Art of Caring" Excellent Presenters. RSVP 15 June

**Phone:** 07 3254 1881

Venue: The Ship Inn, South Bank, Brisbane

17th - 20th July 2007: International Feminist Summit - "Women of Ideas: Feminist Thinking for a New Era" Organised by the Coalition for a Feminist Agenda, Women's Studies Centre, James Cook University, and Townsville Women's Services.

URL: www.feministagenda.org.au/Summit/

summitIndex.html

Venue: Townsville, QLD

30th - 31st July 2007: Health Care Reform Summit "Reform in the Australian Health Sector". Conveyned by the Australian Health Care Reform Alliance.

URL: www.healthreform.org.au

Venue: Old Parliament House, Canberra

18th August 2007: Australian Pituitary Foundation Inaugural National Seminar. "Growing Up and Getting On". The focus will be on both children and adults diagnosed with a pituitary condition.

Contact: Sue (07) 3376 2083
sue.pituitary@ozemail.com.au
Catherine (02) 9594 5550
pituitary@bigmond.com

pituitary@bigpond.com
URL: www.pituitary.asn.au

Venue: Westmead Hospital, Sydney

28th - 30th August 2007: 9th Australian Palliative Care Conference "Partners Across the Lifespan" Topics will include trends, strategies, policy and future options focussing on the full range of palliative care issues at national, state, regional and local level.

URL: www.iceaustralia.com/apcc2007Venue: Melbourne Convention Centre, VIC

6th - 8th September 2007: Queensland Community Development Conference "Riding the Winds of Change".

For further information contact:
Debbie Walz, Ph 07 4938 4869
debra.walz@communities.qld.gov.au
Sandy Paton, Ph 07 4939 4504
sandypaton@bigpond.com
John Homan, Ph 0408 211 734
johnhoman@bigpond.com

www.cdqld.org/index.php?categoryid=6

Venue: Rockhampton QLD

11th - 12th September 2007:Regional Symposium on Autism and Asperger Syndrome "Working Towards Positive Outcomes in Regional Queensland" Presented

by Autism Queensland Inc. Enquiries: 07 3273 0000

URL: www.autismqld.com.auVenue: Rockhampton QLD

15th September 2007: Kabuki Syndrome

Family Day 2007

**Enquiries:** <a href="mailto:petal@sakks.org">petal@sakks.org</a> **Venue:** <a href="mailto:varsity-Lakes">Varsity-Lakes</a>, QLD

25th - 30th September 2007: 14th Deafblind (Dbl) International World Conference. International and national speakers. URL: www.dbiconference2007.asn.au Venue: Burswood Casino, Perth, WA

We are keen to include Rural and Regional events in Diary Dates and invite groups to let us know what is happening in their area.



### Still Available!

Inaugural Queensland Directory of Self Help and Support Groups

Copies of our Self Help Queensland Directory of Self Help and Support Groups are still available for sale through the office. Updates are sent quarterly to all who purchase the Directory. Enquiries 07 3344 6919