



'supporting people in finding their own solutions to improve well being'

Queensland Self Help & Support Group Sector

News & Information
Bi-monthly

Issue 3
May
2016



Self Help Queensland Office
Located at Sunnybank, Brisbane

Issue 2 Features

- 1 President's Message
- 2 Contact SHQ
3. FSG - Thinking Ahead to NDIS
- 4 NDIS Operating in Qld
- 5 Genetic Matters
- 6 Capacity Building & Change Mngt
- 7 Rare Connect & Midwife Check-in
- 8 New Support Groups
- 8 Eleven Top Household Poisons
- 9 Dealing with Conflict & Go Didgi
- 10 Increase Emotional Intelligence
- 12 Self Help, Support & Peer Groups
- 14 Virtual Dementia Tour
- 15 Brita Futures
- 16 Policy Bank

What We do

Provide free online Directory of Qld self help and support groups across a broad range of health conditions and related issues.

Help people start new self help and support groups.

Give assistance to existing groups to identify needs and work towards achieving them.

Promote benefits of above groups to wider Qld community.

Disseminate information to above groups, organisations and professionals.

Make referrals and provide low cost training to groups as needed.

Auspice above eligible groups.

Free Bi-monthly Newsletter.



Standing for Freedom, Social Justice & Growth.

The SHQ Newsletter is kindly sponsored by FSG

From the President



Joseph Soda

I am pleased to report that we have now completed our Impact and organisational statement. It will now be a working document for us to develop a sustainable future.

For SHQ to continue our good work within the Community we need to place more emphasis in the areas of fundraising, marketing, and publicity. Therefore we are asking for anyone out there who is retired, has experience in these areas and is willing to join our Management Committee to please contact us.

Currently we employ a coordinator part time, and we also need to support this role with a person (or persons) who has website, database, or data entry experience.

Therefore I am encouraging anyone out there reading this who has these skills or knows someone who may be interested to contact us. Please contact our coordinator Trish Fallon, on 3344 6919 or email info@selfhelpqld.org.au

Regards, Joe Soda



Would you consider stepping out of your Business Career, Profession or Government for 2 hours a month to give Community a hand?

Self Help Queensland Needs You!

Are challenges something you thrive on?

Have you got bright ideas lying dormant; untested?

Are your skills going to waste; talents unappreciated?

Would you enjoy contributing your Financial, Change Management, Publicity, Marketing, IT, Fundraising or other skills?

Are you interested in a Legal or Medical advisory role?

Do you value the concept of helping people to help themselves?

Then Self Help Queensland Really Needs You!

To speak with Joe Soda, President of the SHQ Management Committee, please contact info@selfhelpqld.org.au or Ph 3344 6919.

To receive This Newsletter in Hardcopy

Self Help Queensland can no longer afford to distribute a free hardcopy newsletter. The cost of paper, printing, postage and handling has forced us to charge a fee of \$20 per year for 6 issues.

We appreciate that some professionals like to leave them in their waiting rooms, or facilitators take them to group meetings, and we apologise that we are no longer in a financial position to provide this service free.

Please contact Trish if you would like to opt for a hardcopy by post. Ph 07 3344 6919 or Email info@selfhelpqld.org.au

Looking for a Self Help or Support Group in Queensland?

The Self Help Queensland Directory of Self Help and Support Groups is now online and free. To search for a self help or support group follow this link <http://www.selfhelpqld.org.au/> On the Home Page click on 'Search the Directory' and follow the prompts.

Please Register Your Group in the Free SHQ Online Directory

We are aiming to feature all of the Self Help and Support Groups in Queensland under the one roof so they can be found more easily.

Please go to <http://www.selfhelpqld.org.au/> and click on 'Register a Support Group' or call Trish at the SHQ office on 33446 919 or email info@selfhelpqld.org.au for a registration form.

Would you like to promote your group through this Newsletter?

or

Do you have any helpful, practical information to share with other Groups?

or

Do you know of any free or low cost resources, bargains or "good deals", that might benefit other not for profits

Please contact Trish at SHQ Ph 07 3344 6919 or email info@selfhelpqld.org.au so we can share your good news for the benefit of others.



Queensland Government

Thanks to Queensland Health for providing funding to Self Help Queensland to help carry out its activities.

Who We Are

President	Joseph Soda
Secretary	Kathy Thomas
Treasurer	Christopher Spriggs
Committee Members	Val McNamara Rosa Prah Elizabeth Carrigan
Co-ordinator	Trish Fallon
Bookkeeper	Janette Evans

How to Contact Us

Phone:	07 3344 6919
Email:	info@selfhelpqld.org.au
Website:	www.selfhelpqld.org.au
Postal:	PO Box 353 SUNNYBANK QLD 4109
Street:	Sunnybank Community Hall 121 Lister Street SUNNYBANK QLD 4109

Office Hours

Tuesday to Friday 9am - 4.30pm

Disclaimer

The views expressed in this publication are those of the individual authors and not necessarily those of Self Help Qld

The material supplied is for information purposes only, and is not to be used for diagnosis/treatment, or as legal, tax, accounting or any other type of advice. The SHQ newsletter editor reserves the right to edit contributed articles.

We Welcome Your Feedback

We welcome constructive feedback about the newsletter or any of the services we provide. Please phone or email Trish: Phone: 3344 6919 Email: info@selfhelpqld.org.au or

SHQ Policies Available

The SHQ Policies and Procedures Manual is available to view at the SHQ Office. In the interest of greater transparency, we intend to upload them to our website in the near future, starting with our Privacy and Consumer Complaints Policies. for further information contact Trish at the SHQ office on 3344 6919



Thinking Ahead to NDIS...



The National Disability Insurance Scheme (NDIS) is an exciting and welcomed social reform that promises to improve the lives of people living with a permanent and significant disability and their families.

Since the launch in 2013, FSG have eagerly followed the progress in trial sites around Australia, and the feedback from participants to date seems very positive, with people experiencing the freedom to choose when, where and how they want to receive support, and from whom.

The NDIS is a much fairer system, providing individualised funding for supports to eligible people from birth to 65 years old. Taking a flexible, whole of life approach (and changing as needed throughout a person's lifetime), it is designed to empower encourage? people with disability to lead their life the way they want.

As each region (listed in the table below) rolls out into the NDIS, it is important for existing FSGA customers to know that their service will continue as usual until they have an approved plan with the NDIS.

During the last two years, our Executive Management Team have been busy planning, gathering feedback, and building our resources to ensure that FSG Australia is well-positioned to embrace this long-overdue change for people living with a disability.

FSG's culture and values are strong, and we're confident that we are on track. We take pride in listening to what our customers want as experts in their own lives, and then walking alongside them respectfully to fulfil their personal goals and aspirations.

Preparing for the Changes Transition

The NDIS trial sites report that it is very important for individuals and their families to be well prepared for these exciting changes before entering the NDIS planning process.



Visit fsg.org.au for more information

We have responded by forming a Customer Engagement Team dedicated to assisting our customers and community members to be ready for the NDIS. Our Dreamweaving Workshops provide information and facts about the NDIS, increasing understanding of the new terms being used and how to get the most out of the scheme when it comes our way online?.

We are also holding a monthly 'FSG NDIS Conversation Series', and during each session we explore one aspect of the NDIS, allowing time for more in-depth discussions to develop a deeper understanding of what this means for you. Please book into these sessions by contacting us on (07)5564-0655.

We will also be offering customers of FSG Australia the opportunity of a pre-planning session with one of our friendly Dreamweavers.

The NDIS Roll Out in Queensland

For Queenslanders the Bilateral Agreement outlines that the NDIS will roll out progressively across the State over three years from 1 July 2016 to June 2019. Queensland's phased transition will occur on a geographic basis, defined by Local Government Area (LGA) boundaries.

15,000 Queenslanders with a disability will enter the scheme in the first year, more than 16,000 people will join in the second year, and more than 60,000 people will enter in the third year.

To stay up-to-date regarding all the latest news and information straight from the NDIS, visit www.ndis.gov.au. While you're there, subscribe to the official NDIS newsletter.

Read the official NDIS fact sheets: <http://www.ndis.gov.au/people-disability/fact-sheets-and-publications>.



The NDIS Has Started Operating in Queensland

The National Disability Insurance Scheme (NDIS) is the new way of providing individualised support for people with disability, their families and carers.

The NDIS is a big change. It will take 3 years to rollout across the State. Existing service users and new participants will enter the NDIS progressively, depending on where they live.

In the meantime, existing services and supports will continue until the rollout is completed in Queensland by July 2019. Check your area in the timetable below.

Metropolitan Queensland NDIS Rollout		Rollout By
Brisbane	North and south of the Brisbane River	1 July 2018
Gold Coast and Hinterland	Local government area of Gold Coast City	1 July 2018
Ipswich	Ipswich, Lockyer Valley, Scenic Rim and Somerset local government areas	1 July 2017
Logan and Redlands	Local government areas of Logan City and Redland City	1 July 2018
Moreton Bay	Local government area of Moreton Bay, including Strathpine and Caboolture	1 January 2019
Sunshine Coast	The local government areas of Sunshine Coast, Noosa and Gympie	1 January 2019
Regional Queensland NDIS Rollout		
Bundaberg	Bundaberg local government area	1 October 2017
Cairns, Cassowary Coast, Tablelands, Croydon, Etheridge, Cape York and Torres Strait	This covers the local government areas of Aurukun, Cairns, Cassowary Coast, Cook, Croydon, Douglas, Etheridge, Hope Vale, Kowanyama, Lockhart River, Mapoon, Mareeba, Napranum, Northern Peninsula, Pormpuraaw, Tablelands, Torres, Torres Strait Island, Weipa, Wujal Wujal, Yarrabah	1 July 2018
Fraser Coast, North Burnett, South Burnett and Cherbourg	Fraser Coast, North Burnett, South Burnett and Cherbourg local government areas	1 July 2018
Mackay, Isaac and Whitsundays	The Mackay Disability Service Centre area covers the local government areas of Isaac Regional, Mackay Regional, Whitsunday Regional	1 November 2016
Rockhampton	This covers the local government areas of Banana, Barcardine, Barcoo, Blackall Tambo, Central Highlands, Diamantina, Gladstone, Livingstone, Longreach, Rockhampton, Winton, Woorabinda	1 January 2018
Toowoomba and west to the borders	This covers the local government areas of Balonne, Bulloo, Goondiwindi, Maranoa, Murweh, Paroo, Quilpie, Southern Downs, Toowoomba, Western Downs	1 January 2017
Townsville, Hinchinbrook, Burdekin, west to Mount Isa, and up to the gulf	This covers the local government areas of Townsville, Charters Towers, Palm Island, Boulia, Burdekin, Burke, Carpentaria, Cloncurry, Doomadgee, Flinders, Hinchinbrook, McKinlay, Mornington, Mount Isa, Richmond,	1 July 2016

For more information: <http://www.ndis.gov.au/about-us/our-sites/qld>

Genetic Matters

by Professor Kim Summers PhD FRSB

Behind The Hype

Melanie Reid is a journalist for the Times newspaper here in the UK. Six years ago she became tetraplegic following a riding accident. From the first week of her recovery she has painstakingly typed out a weekly column on the trials of being in a wheel chair, her attempts at rehabilitation, her health problems and successes, and the revelations that have come to her as a person with a chronic health condition. Last year she commented on the promises about new developments that are made to people in her situation by doctors and researchers. She requested that these promises should not be worded in such a way as to give false hope of rapid treatments or cures.

As researchers we are under increasing pressure to make our work relevant, to perform “research with impact”, to demonstrate that what we are doing will earn money for the institution or the government and that it will have an immediate benefit to individuals or society. Many granting organisations now expect applications for funding to have an “Impact Summary” where we state the benefits we see arising from our work, and a “Pathways to Impact” section where we describe exactly how we are going to ensure that the results of our work are made available to the various beneficiaries. Impacts can include potential patents and licences, new treatments for common or rare diseases, greater understanding by the general public of the problem we are working on, collaborations and liaisons with other researchers, companies or government entities; any small or large ways in which what we are doing will change lives.

This is of course desirable. There is no justification for spending government or charity funds on science that has no prospect of yielding a desirable outcome. We must see clearly when we propose a piece of research that it has relevance and the potential to lead to a practical outcome.

Unfortunately there are two undesirable outcomes of this approach. Firstly it stifles exploration. If every experiment must have a specific practical goal, there is no opportunity to do something just to see what the outcome will be. Over the years there are many examples of studies that had unexpected spin offs that were not predicted. The mechanism used to transmit light from an octopus eye that is out on a stalk to the light sensitive cells in the octopus body were critical in designing the optical fibres that are so important in communication today. Curiosity about fluorescence of jelly fish in the waters off the west coast of the USA led to discovery of a protein that is now used throughout molecular biology. Basic understanding of cellular processes underlies all developments in clinical treatments, and yet not all of the interactions can be predicted until all the details of a molecular network are known. These kinds of exploratory experiments are hard to justify in the early stages and yet can lead to important discoveries that do have impact.

The second consequence of the focus on impact is that we are all under pressure to “sell” our work. When we submit a grant application we have to write our impact statements; when we make a discovery or publish a research paper, our institutions and our funding bodies, ask for press releases where we talk about the importance of the work. This leads to the kind of false promises that Melanie Reid wrote about. It results in interviews with senior clinicians or researchers where they talk about how their work will lead to new treatments for paralysed people or prevention of dementia or expansion of the world food supply. Research is about plodding through a range of well controlled experiments to understand a very small part of an intricate network. It involves many people building on the discoveries of other people and different groups working in parallel. Some research is very targeted towards new treatments but that is built on the work of many others providing the basic background knowledge required to implement the treatment.

Basic background research may not have obvious impact or immediate treatment potential and we are increasingly urged either to abandon it or inflate its potential. This is what leads to the situation where the media announce a new breakthrough in the treatment of a disease, when in fact realising the impact may take another 20 years. It is unfair to the researchers and to the people suffering from the condition and hoping for a miracle treatment before it is too late. We all do our best to be realistic about our studies but by the time the information has been filtered through the institutional press office and the various media editors it has often been inflated, misrepresented and oversold.

(Continued on Page 6)

(Continued from Page 5)

It is often possible to go to the original research paper that sparked the media storm. Many funding bodies now require all research to be presented as open access. This means that the research paper should be available through an internet search of the authors' names and the subject of the research. While the paper may be quite technical the abstract and discussion sections are likely to have a realistic appraisal of the implications of the results. It is well worth trying to find the research paper (and any that have preceded it) and making your own assessment of the potential. Dig below the media hype and find the true value of the work that is going on in thousands of laboratories across the world aiming to help people with devastating conditions.

(Kim is Professor of Comparative Genetics, The Roslin Institute, University of Edinburgh and Honorary Professor, School of Medicine, The University of Queensland. Kim is also a valued past Committee Member of Self Help Queensland Inc)



Would You Like Useful, Practical Tools, Strategies and Practices to Better Manage Change in Your Community Organisation?

About 70% of organisational change initiatives fail to achieve their goal. That's a huge amount of wasted time, energy and money - especially for not for profits!

Our Sector is facing constant change in attempting to meet the expectations of government and other funding bodies to merge, collaborate, partner and build alliances.

The Victorian Alcohol and Drug Association (VAADA) has developed an excellent guide to help not for profits successfully manage change.

Capacity Building and Change Management – a guide for community services, is also a guide that addresses the challenges posed by funding constraints and increasing service demands.

Designed specifically with health and community care organisations in mind, the guide is an excellent resource for any not-for-profit. The resource offers step-by-step guidance on:

- How to approach change and transition in dynamic environments
- Dealing with resistance to change
- Developing the capacity of your workforce
- Partnerships with other agencies
- Involving consumers, carers and the community

It finishes by offering plans to help your community organisation implement, sustain and monitor your change strategy, and provides practical templates and worksheets to streamline the process.

Download a PDF of the guide for free:

<https://nfppeople.com.au/2016/04/capacity-building-and-change-management-a-guide-for-community-services/>

Suicide Prevention Australia Asks People Impacted by Suicide to Express Their Views

Suicide Prevention Australia (SPA) in collaboration with the University of New England would like to invite you to participate in a national research project investigating the exposure to, and impact of, suicide in Australia. "We believe this is an important opportunity for those who are impacted by suicide to express their views and participate in meaningful research."

The purpose of this survey is to gain a clearer understanding of how individuals are affected by suicide. "This will help inform where we recommend funds and expertise are directed in suicide prevention. Information gathered will remain confidential." Data, not names, will be published. To complete the survey go to: <https://www.surveymonkey.com/r/ExposuretoandImpactofSuicideinAustralia>

A report on the exposure to and impact of suicide in Australia will be published on World Suicide Prevention Day on 10 September 2016, with preliminary results to be presented at the National Suicide Prevention Conference 2016. To receive this report direct to your inbox and related communication from SPA, please submit your contact details to project@suicidepreventionaust.org.



Isolation and a Lack of Access to Quality Information are two of the most common problems facing patients and families living with rare diseases.

For people with rare diseases, finding somebody else with the same disease can be a challenge. Over 6,000 different rare diseases have been identified to date.

Due to the low prevalence of each disease, medical expertise is often rare, knowledge scarce, care offering inadequate and research limited.

RareConnect is a patient driven online social platform developed to connect people with rare diseases around the world. It aims to unite patients and caregivers in online communities to share information and fight against the isolation they often face.

RareConnect which reaches out to a global audience, hosts online patient communities, blogs and discussions to amplify the voice of people affected by a rare disease. Posts are translated across six languages (English, French, German, Italian, Spanish and Portuguese), allowing people to discuss how to manage living with a disease, no matter where they live.

The RareConnect platform partners with over 600 rare disease patient organisation to stimulate conversation across 82 disease specific communities and over 100 discussion groups. It aims to create a safe space in which people can interact and seek support knowing that they are supported by people who have gone through a similar experience, each disease-specific community is moderated by an expert patient advocate.

Connect with Rare Disease Patients Globally: www.rareconnect.org

(Source: Adapted by SHQ from a blog by Jim Luce from the Jay Dudley Luce Foundation, Huffpost Healthy Living Blog, 26 Feb 2016 featured in the Genetic Alliance Australia Newsletter March 2016.)

Genetic Alliance Australia

A contact point for families who are affected by genetic conditions so rare that they do not have their own support groups.

Phone: 02 9295 8359

Email: info@geneticalliance.org.au

Website: www.geneticalliance.org.au



An initiative of Women's Health Queensland Wide Inc

Heard of Midwife Check-in?

- a free information and support program for pregnant women and new mothers in Queensland

The Midwife Check-in offers Queensland women access to free, confidential, untimed telephone calls with a midwife regularly during pregnancy and after birth. It gives women the opportunity to discuss any topic, such as expectations of parenthood, emotional health and wellbeing, or just to have a 'listening ear' at the other end of the phone.

What to do

Sign up to the **Midwife Check-in**. A midwife will call you to see how things are going. If you want her to, the midwife will arrange a time to check-in with you on an ongoing basis.

Call (07) 3216 0376 or 1800 017 676 (toll free outside Brisbane) or complete the online form to sign up at <http://www.womhealth.org.au/services/midwife-check-in/sign-up-form>

"Last year I joined a support group for procrastinators. We haven't met yet."
Anonymous

"Of course I talk to myself; sometimes I need expert advice."
Anonymous

New LGBTIQ Peer Social Group Formed on the Gold Coast

Commencing: 7th May 2016 and meeting on the first Saturday of each month
Time: 9.30am to 11.30am
Venue: MI Hub Southport
Contact: Michelle Phone: 5591 1750 Email: mihubsouthport@mifq.org.au

MI Hubs are an initiative of the the Mental Illness Fellowship of Queensland (MIFQ) Ph: 3358 4424



New Hearing Impaired Support Group Formed in Redcliffe

Next Meeting 21st May and then 2nd Saturday of each month after that (unless advised otherwise)
Time: 1pm to 4pm
Venue: Redcliffe Library, 476 Oxley Ave Redcliffe
Contact: Peter Massey Email: pfg.sandy@gmail.com
 Better Hearing Australia Phone (07) 3844 5065 Email: bhabris@bigpond.com

Visitors Welcome

11 Household Products That Cause The Most Poisonings in Australia

While medicines (both prescription and over the counter) are responsible for about 60% of poisonings in Australia, new data show that household products are responsible for about 40% of toxic symptoms and hospitalisations due to exposure or ingestion.

The information is contained in a new ACCC report that uses information from the NSW Poisons Information Centre from the calls they received over 12-month period.



The main culprits for poisonings in the home are:

1. Batteries (disc/button)
2. Pool chlorine
3. Superglue
4. Oven cleaner
5. Cyalume glowsticks
6. Denture cleaner (mistaken for medication)
7. Hair dye
8. Insecticide
9. Hand sanitiser
10. Dessicant (silica gel) - often found as small bags in amongst consumer packaging to absorb moisture.
11. Eucalyptus oil

For First Aid advice or information contact the Queensland Poisons Information Centre

Poisons Information Centre 13 11 26

For first aid advice http://www.health.qld.gov.au/poisonsinformationcentre/first_aid.asp

180,000 calls are made to Poisons Information Centres across Australia, every year, and almost 2,500 children are admitted to hospital every year following poisonings. The AAA report found that the most serious incidents related to carbon monoxide exposure from heaters and cookers, button batteries, caustic cleaners, pool chemicals, household bleaches and herbicides. (Source: myDr Last Reviewed: 29 March 2016)

Queensland Government Grants Booklet 2016 Available

(Queensland Treasury provides this booklet)

This free booklet is designed to provide information on grants that may be suitable for individuals, small community groups and non-government organisations.

<https://www.treasury.qld.gov.au/publications-resources/pdfs/gg-grants-booklet-january-2016.pdf>

The Booklet does not include the full suite of concessions across Government. Further information on the eligibility requirements and benefits of a range of Government concessions can be found at:

<http://www.qld.gov.au/community/cost-of-livingsupport/concessions/>

Dealing with Conflict

By Doctor Harmony, Psychiatrist

How do you deal with confrontation? Most of us feel uncomfortable with it and can either avoid any topic which could lead to conflict, bottle up our feelings and later explode or change the topic during conversations. Otherwise, we may get defensive and deny that we played any part in what the issue is.

Unfortunately, although it may lead to peace in the short-term, longer-term it often leads to resentment, fear, frustration or awkwardness. Many liken it to "walking on egg shells".

Most of us want to feel heard and validated. Even if you do not agree with what is being said, at least acknowledge to the other person that you have heard them. This will already dissipate some of the anger they may be feeling.

Is it a significant issue? Sometimes conflict over a small issue may actually occur as there has been a build-up of minor issues that have not been addressed earlier. Find out what the actual concern is in the bigger picture. Also, ask yourself- Is it a battle of egos (to see who is right) or a battle for control? Is it worth the stress and energy?

Remember that we are all human. It is inevitable that mistakes will be made. If we manage our mistakes constructively, we can minimise the risk of conflict occurring. It takes courage to take responsibility for mistakes. This means admitting if we made a mistake, apologising about the error and trying to correct it, make amends or prevent it from occurring. Communicate this to those who are affected.

Sometimes conflict occurs because of differences in opinion or in the way things are done. Sometimes it helps to accept that differences can lead to more solutions that we may not have even considered. In addition to this, it may be helpful to ask ourselves "Is it really important that it is done my way? What is the worst case scenario if it is not done my way?" Would you prefer the help, even if it means it is not totally done your way? It may be less stressful to you and others to let go of some of the control.

Here's some tips to be a cool-headed negotiator:

1. Stay calm.
2. Acknowledge the other person's viewpoint. If you are defensive, it fuels the argument.
3. If it is overheated, take time out to calm down and revisit the issue when you are both calm.
4. Use "I" or "we" statements, such as "I feel"... or "We both..."
5. Find out what you want out of the situation. What does the other person want? You may both want the same outcome but have different opinions on how to reach it. Pointing out similarities (such as feelings, outcomes you seek, goals) can reduce the adversarial feelings you both have.
6. See if there can be compromise on both sides. In this case, both sides are winners.
7. Reassure the other person that you still respect them as a person and you are glad you can talk about the differences. It takes trust to be honest with each other.

If you like the tips, check out series one of my Building Resilience books series www.doctorharmony.com. Although it is marketed as children's picture books, it has great tips for children and adults alike.



2016 is the National Year of Digital Inclusion!

Get involved in the Go Digi National Year of Digital Inclusion

2016 is the Go Digi National Year of Digital Inclusion! We're partnering with the Queensland Government, the State Library, universities and other organisations to bring you forums and pop-up digital learning events where you can improve your digital skills.

To learn more about Go Digi or to use our free learning guides visit www.godigi.org.au

If you would like to get involved email Go Digi at hello@godigi.org.au

InfoXchange – Technology for social justice

3 Questions To Increase Your Emotional Intelligence

In the March edition of this Newsletter we featured an article on Empathy – the quality needed to increase Emotional Intelligence. It was adapted from writings by Justin Bariso, founder of Insight, a consultancy that helps organisations think differently and communicate with impact. He was ranked by LinkedIn as one of the top 3 management writers of 2015.

The article below is another we have adapted from Justin's writings on Emotional Intelligence - 3 Questions that will immediately Increase your Emotional Intelligence.

Emotional Intelligence (EI or EQ) describes a person's ability to recognize and understand his or her own and other people's emotions to understand the powerful effect of these emotions, and to use that information to guide thinking, behavior and decision making. It includes demonstrating extremely complex qualities such as empathy, sympathy, and compassion.

Of course, these qualities help us to be better people. But they can also help you break your worst communication habits, so that others receive your message in the best way possible.

For example, have you said something recently that you wish you could take back? For years, I struggled with the weakness of speaking too quickly, without thinking things through.

Curbing that tendency is easier said than done, but there's a quick "three question method" that can prevent you from saying something you'll later regret.

The 3 Vital Questions

I discovered this brilliant strategy through an unlikely source. I was watching an interview with comedian and television personality Craig Ferguson, when he gave some very sage advice:

There are three things you must always ask yourself before you say anything.

Does this need to be said?

Does this need to be said by me?

Does this need to be said by me now?

Ferguson says it took him three marriages to learn that lesson.

Before you dismiss this method as simplistic, think about how many antagonistic comments this would eliminate from social media. Or, we can take it a step further and consider how it might apply at work:

Let's say you're a manager, and you've been working hard to improve the relationships with certain individuals on your team. One day, you witness someone doing something great at work, and you take advantage of the opportunity to commend them. Great job! (Sincere, authentic, and timely praise goes a long way in motivating employees.)

But suddenly, you remember how they messed something up a few weeks ago. "I should bring that to their attention, too," you reason. "Let me tell them before I forget..."

No! Stop! Ask yourself:

Does this *need* to be said?

Does it need to be said by *me*?

Does it need to be said by me *now*?

True, constructive criticism is best delivered soon after a mistake. But you've already missed that boat. If you give that negative feedback now, it will completely destroy whatever goodwill you built with your praise and commendation. The person will think: "So, essentially you just told me something nice to soften the blow of what you really wanted to say. Jerk."

When you ask yourself the three questions, you'll probably conclude one of the following:

- You know, the criticism I wanted to share wasn't so important after all. My opinion may even be changing on this.
- It might be better if I speak to their team leader first. Maybe what I saw a few weeks ago wasn't really the whole picture.

(Continued on Page 11)

(Continued from Page 10)

- I definitely still need to talk to them about the problem I saw. But now's not the right time. Let me set a reminder to schedule an appointment with the person after I'm better prepared.

See how well it works?

This is just one scenario, but practicing these three questions will help you in various situations. Imagine if everyone did it: We would see far fewer (and shorter) emails, shorter meetings, and fewer employee complaints about others' inappropriate remarks...and yes, maybe even a few saved romances.

Keeping It Balanced

Of course, I'm not discouraging speaking up when appropriate. I strongly believe in honest and direct communication, and there are times when the answer to all three questions will be a resounding yes--even when what we need to say isn't comfortable for us or the recipient.

When those times come, the three question method will help you speak with confidence--and learn to be assertive when it counts.

Source: <http://www.inc.com/justin-bariso/these-3-questions-will-immediately-increase-your-emotional-intelligence.html>



Community Flyer

Frail Elderly? Mobility Issues? Younger with a Disability & Carer? Need to get out of the house for business or pleasure?

TransitCare Ltd is a not-for-profit organisation dedicated to providing door-to-door shared community transport in the **Brisbane South and Logan areas**. People are eligible for services if they are transport deprived, frail elderly people with a mobility issue or younger disabled people and their carers.

Clients can access the Community Flyer for any number of transport reasons, such as:

- visiting friends or social events
- shopping or running errands
- to attend local medical appointments

Drivers are highly competent and possess clean driving records. They are also accredited first-aiders and trained in assisting clients and their varying degrees of needs.

A Social Support Program includes friendly home visits, social functions, day trips, lunch dates and shopping assistance. For further information about services, bookings, fees etc please visit www.transitcare.com.au or call 1300 463 593

Similarly, in North Queensland, Totts Community Flyer operates in the **Townsville and Thuringowa areas**. For further information Phone: 1300 389 137 Email: tottsofficestaff@communityflyer.com.au
<http://www.transitcare.com.au/totts-community-flyer/>

Pathology Sector Launches Campaign Against Bulk-billing Cuts

From 1 July 2016, if the bill passes the Senate, the Australian Government intends to take away the fee to bulk bill pathology tests.

At present, pathology tests can be bulk billed - meaning that the government pays a fee to the pathology provider that carries out the tests. Under this bulk billing arrangement, patients do not have to pay for pathology tests.

Pathology tests include blood tests, urine tests, swabs (such as pap smears) and tests on other samples of tissue or body fluids.

"These changes unfairly target frequent users of pathology including the elderly, the seriously ill, pregnant women and mothers with young children," according to the Pathology Australia petition.

Pathologists are asking millions of patients to sign a petition to Australian Senators to vote against bulk billing cuts through their **Don't Kill Bulk Bill** campaign. <http://www.dontkillbulkbill.com/>

Self Help Groups, Support Groups, Peer Support Groups?

- what's the difference and how do they benefit individuals and communities?

Characteristics of a Self Help Group

- made up of peers who share the same issue or condition
- manages itself
- everyone is equal; nobody is more important than anybody else

Characteristics of a Support Group

- made up of peers who share the same issue or condition
- managed/facilitated by someone who is not a peer/does not share the same issue or condition
- the facilitator is perceived to be 'the expert'

"Peer Support Group" is a term generally favoured these days by Government and Service Providers in the context of Mental Health. It refers to Groups directed/facilitated by a Professional or person trained as a "Mental Health Worker". It could refer to other health conditions, but is still the same as a Support Group. If the facilitator is a peer, it is still a Self Help Group.

Self Help and Support Groups Have Positive Impacts on Members and Communities

For many participants, group membership provides benefits which go beyond the support for their condition. These benefits include friendship and emotional support, increased self esteem, improved communication skills, reduced depression and many others listed below.

- For many people, finding out they are 'not the only one' is one of the major benefits of self help groups - a decreased sense of isolation.
- Common ground and a common language help participants 'feel normal' again.
- Self help groups provide a comparative perspective of one's own problems.
- Self help groups are banks of knowledge and wisdom which can assist many people in making informed, responsible decisions and so be more in control of their lives.
- Members of self help groups have day to day, practical knowledge and experience in assisting with self care and the maintenance of wellbeing.
- Self Help Groups provide a safe place to express feelings of anger, guilt, resentment etc
- Unlike services provided by hospitals, clinics, professionals etc support from self help group members is often available 24 hours a day, seven days a week or when urgently needed.
- The help provided by self help groups (for the most part) is free.
- Self help groups provide mutual support – people help each other as they help themselves. There is no distinction between the giver and the receiver.
- Groups are places to learn about research and latest treatments.
- Members of Self Help Groups learn to develop effective coping skills, often learning from observing the coping skills of other members of the group.
- Hope is a positive benefit of addiction and mental health groups - hope of recovery.
- Groups may have a stronger voice than individuals working alone. This often helps to express needs, be heard and get things done.
- Self help groups are in a unique position to collect data for researchers and provide useful information to health planners. Some groups have identified secondary factors in their own condition, thereby leading to further scientific research.
- Social health research confirms that the self help process enhances individual well being, increases community capacity and builds social capital. Self Help is endorsed by the World Health Organisation as an important strategy in its 'Health for All' movement.
- Self help groups are instrumental in keeping people out of expensive levels of care in the health system.¹

(Continued on Page 13)

(Continued from Page 12)

- By any measure, this diverse and committed population of people active in their own well being represents not only a significant contribution to the community and the health sector, but also a potentially powerful political force.

How Professionals Can Help

There are considerable mutual benefits to be gained when self help groups invite professional assistance. The group remains free to conduct its own affairs and make its own decisions without interference – the supportive professional standing to the side, providing their expertise when called upon.

In this context, ‘professionals’ refers to people who become involved with the group because they may have an interest or experience in the issue that is particular to the group. They become involved because of their profession, and do not generally share the issue common to other members. Sometimes it is their workplace that sees value in their supporting the group, thereby providing the opportunity for the professional to lend their support.

The capacity of self help groups to develop and grow can be enhanced by utilising the skills of professionals. Professionals, in turn, benefit from their contact with groups. The expertise of people with a living experience, their feedback on service delivery, knowledge of barriers to accessing services etc is vital information for professionals seeking to be responsive to community needs.

Support that self help groups might seek from Professionals:

- Provide resources eg meeting rooms, help with photocopying, transport
- Use networks for connecting the group to other organisations, resources
- Help group members develop skills such as facilitating meetings, keeping records, producing flyers/newsletters on computer, debriefing, conflict resolution
- Assist with group promotion
- Act as a guest speaker
- Provide information that may be hard to access – professional journals etc
- Act as a sounding board for group ideas
- Help plan strategies
- Act as an advocate for the group
- Help with applying for grants – writing funding submissions
- Write letters of support for the group
- Act as a mediator if conflict arises
- Share tips for meeting activities – icebreakers, energisers etc
- Provide advice on how to use the media

Self Help Queensland acknowledges the wisdom and experience of Self Help and Support Groups that have contributed to this information over 33 years.

To start a group, find a group, promote your group, get help for your group or just have a chat about how things are going with your group, please feel free to call Trish at SHQ.

Phone: (07) 3344 6919

Email: info@selfhelpqld.org

Website: www.selfhelpqld.org.au

Please Really Tell Us What You Think!

Do we explain ourselves well enough?
Do you understand what we do?
What could we do better?
How can we better assist Queensland Self Help and Support Groups?
Any other constructive suggestions?
Email: info@selfhelpqld.org.au
Phone: 3344 6919

Please Help Us by Becoming a Member of SHQ

After 33 years, Self Help Queensland has been forced to introduce a membership fee to help sustain our work. There are three tiers of membership which we have kept to an absolute minimum cost.

Concession: Students, pensioners (\$10)

Support groups and individuals: (\$20)

Professionals and organisations: (\$30)

Membership: <http://www.selfhelpqld.org.au/membership>

If you’ve met one individual with autism, you’ve met one individual with autism”

Stephen M Shore

Professor, Author, Lecturer (diagnosed with Autism himself)

Dementia Support Group In UK Develops ‘Virtual Dementia Tour’

A dementia support group in the UK, have developed what they call “The Mobile Virtual Dementia Tour” which allows people to experience what it’s like to have and experience dementia.

The common misconception is that dementia only affects one’s memory; sadly, that is only one of the symptoms, a point that the Mobile Tour demonstrates by way of a series of social experiments.

These experiments take away and/or alter the participants’ primary senses so they can be subjected to the frustration and fear that dementia can create, even if the subjects’ discomfort is only temporary. It is hoped that the experience will help the public empathise with sufferers and dispel common misconceptions about the disease.

The tour uniquely demonstrates the importance of caring for someone with dementia. Participants experience literally everything real dementia sufferers do on a daily basis. Some of the specific things tour organisers get people to do include:

- Wearing insoles in their shoes and thick gloves to recreate the sensation of having no nerve endings in their feet (hence the tell-tale shuffling gait), and no sense of touch;
- Donning glasses to inhibit their sense of sight and simulate the poor peripheral vision and blurriness caused by a loss of elasticity in the lens;
- Listening to loud, disjointed sounds through headphones, as dementia sufferers often lose the ability to block out unconnected sounds.

All of these tasks represent different symptoms someone living with dementia can experience.

Robbed of their senses, individuals are then asked to complete ordinary tasks like matching socks, and their reaction represents the same frustration and anger that many with dementia experience.

Whilst “The Mobile Virtual Dementia Tour” is currently a UK initiative, Alzheimer’s Australia Victoria’s Virtual Dementia Experience™ (VDE™) employs a similar approach to take participants through a multi-sensory simulation using light, sound, colour and visual content to create a virtual reality experience, immersing people into the world of dementia. Using game technology, the workshop shifts from an information session to an experiential session where participants are exposed to the lived experience of a person with dementia, in turn developing empathy for that person.

For more information on Alzheimer’s Australia Victoria’s Virtual Dementia Experience™ and how you can participate visit <https://vic.fightdementia.org.au/vic/about-us/virtual-dementia-experience>

(Source: ‘Senior Care Connections’ Newsletter of Home Instead March 2016)

New Legislation Ensures Choice & Control Over Home Care Services for Older Australians

On the 3rd March 2016, the Australian Senate passed legislation formally establishing the rights of older Australians to exercise greater choice and control over their home care services.

Stage 1: By the 27th February 2017, consumers will be able to choose what services they need, along with when they receive them and who will deliver them. If the consumer is unhappy with the services they can take their government funded package to a different approved provider of their choice.

Stage 2: Integration of the Home Care Packages Programme and the Commonwealth Home Support Programme into a single care at home programme. The Government intends to introduce the new simplified, integrated programme **from July 2018**.

<https://www.dss.gov.au/ageing-and-aged-care/programs-services/home-care/home-care-packages-reform/increasing-choice-in-home-care>

“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”

World Health Organisation (WHO)
Definition of Health, WHO Constitution 1946

We welcome constructive feedback about the newsletter or any of the services we provide. Please phone or email Trish at info@selfhelpqld.org.au or 3344 6919



BRiTA Futures

Building Resilience in Transcultural Australians

Learning Ways to Make Life Easier, Happier and Brighter

Have you, or have any people you know, come to Australia from a culturally and linguistically diverse background?

Would you or they like to learn ways to make your life in Australia easier, happier and brighter? If you know or work with anyone in this situation please pass on the information below.

Brita Futures is an innovative program for adults and parents from culturally and linguistically diverse backgrounds. Its aim is to strengthen the resilience that adults and parents bring with them to Australia and to learn ways they can live harmoniously within their families and in the community and society.

Workshops discuss the following topics:

- Health and wellbeing
- The migratory process
- The meeting of cultures
- Resilience or inner strength to cope
- Social connections
- Communication skills
- The evolving gender and family roles
- Intergenerational relationships

Cultural issues are woven into each module in terms of:

- **Group Activities (Content & Processes)**
- **Topics to trigger group discussions**
- **Personal Reflection Activities**

Come along to meet other people and talk about things that are important to you. Join this program that takes your culture of origin into consideration. Learn ways to make your life in Australia easier, happier, brighter. There is no cost, and in the spirit of fun and friendship you are invited to 'bring a plate' to share.

The first workshop is now being planned for Brisbane and will be kept to a limit of 10 people. Venue, date, time and duration will be determined once people indicate their interest in registering. For more information, or to register, please contact Haleema on 0422 879 786

Better Living with Your Lung Disease

Patient Seminar Gold Coast 2016

COPD - What is it? And how can it be treated?

Associate Professor Siva Sivakumaran, Medical Director, Respiratory Department, Gold Coast University Hospital

Managing the Activities of Daily Living

Anne Sinclair, Senior Occupational Therapist

Phone: 1800 654 301 before 25th May to secure your booking

Date: Wednesday 1 June 2016

Venue: Currumbin RSL Club, 165 Duringan Street, Currumbin

Cost: \$10 payable on the day

Email: Enquiries @lungfoundation.com.au



Failure to Submit Annual Information Statements to ACNC has Consequences for Australian Charities

Over 2400 charities received a formal notification in February 2016 that their ACNC charity registration would be revoked for failing to submit annual information statements for two years.

Almost half of the charities that received the notification responded by submitting their outstanding statements and updating their charity details, saving their ACNC registrations and charity tax concessions in the process.

There were 1269 charities that failed to submit their outstanding statements despite being sent multiple reminders and warnings. The ACNC registration of these charities has now been revoked.

“The vast majority of registered charities submit their statements on time. This demonstrates a widespread commitment to accountability and transparency in the sector”, said ACNC Commissioner, Susan Pascoe.

“Submitting an annual information statement sends an important signal to the public that a charity is well-governed, compliant and accountable. This helps increase trust and confidence in the charity sector and ensures the public, donors and grant-makers can make informed decisions,” said Pascoe.

Source: Gali Blacher, 29 March 2016, <https://third-sector.com.au/25971-2/>

Not for Profit Organisations Don't Have to Re-invent the Policy Wheel!

Does Your Not for Profit worry about Policies & Procedures - or Lack of Them?

Do You Worry You Might Have to Pay a Consultant a Large Fee to Develop them for you?

Not for Profits do not need to stress about producing all of the Policies generally expected of them in fulfilling today's demands for “Good Governance”.

Why re-invent the Policy Wheel when we already have a bank of excellent policies available to us via Policy Bank!

Policy Bank has a very comprehensive list of policies that are free for any not-for-profit organisation to download and use, so long as it is for a non-commercial purpose and that the organisation is not paying a consultant to carry out this work.

There are excellent templates for a large number of “must have” policies. All you need to do is insert your group or organisation's name, and insert or delete clauses according to what suits your particular group or organisation.

The Policies in Policy Bank have been submitted by Not for Profits. They have been reviewed and revised, and the very best of the best selected for inclusion in the Policy Bank.

For excellent, “ready made, good to go, take-away Policies” - including, Financial Management and Control, Privacy, Values, Volunteers, HR, Governance, Communications and a myriad of others go to:

<https://www.communitydirectors.com.au/icda/policybank/>

Congratulations S.W.I.T.C.H

Brisbane Support Group Celebrates 20 Years

S.W.I.T.C.H - Support With Integrity Thought Care and Humility, is a **Respiratory Support Group** formed in Bracken Ridge, Brisbane, on 24th May 1996. It is one of the longest running groups in the Lung Foundation network, providing education, friendship and support to its members. The group meets on the third Friday of every month at the Bracken Ridge Uniting Church. Ph: 3269 0733



Standing for Freedom, Social Justice & Growth.

This Newsletter Kindly
Supported by FSG Australia