Self Help Queensland

Support & Information Since 1983



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

Queensland Self Help & Support Group Sector

News & Information Bi-monthly

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2018



Self Help Queensland Office Located at Sunnybank, Brisbane



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Self Help Queensland reserves the right to edit articles or information submitted to this newsletter.



The SHQ Newsletter is kindly sponsored by FSG Australia fsg.org.au



From the President Joseph Soda

Welcome to our first newsletter for 2018. I trust you all enjoyed a safe and happy holiday season.

Firstly I would like to thank Val McNamara for her years of service on the Management Committee of SHQ. We are sorry to see you go Val; your experience, managerial skills, common sense and personable manner will be sorely missed by all of us.

This year will be a challenging time for us as we manage our operational activities based on the continued funding from Queensland Health.

On a positive note the continued support from FSG for our Newsletter will ensure that you are kept up to date with activities from our other associated groups.

You will read on Page 4 that we have entered into a partnership with the Australian Pain Management Association (APMA) to determine the training needs of our Sector. Please help us by filling out the survey, and we will endeavour to provide the type of training you request.

Our current partnerships with the Sherwood Neighbourhood Centre, in establishing the Depression and Anxiety Support Group and St. David's Neighbourhood Centre in providing a place for Refugee support groups to learn to sew will ensure that these initiatives will continue to grow and provide successful outcomes for all.

SHQ will be focusing on increasing our use of Social Media to develop relationships and generate new ideas. It will play an important part in increasing our exposure to the wider community.

We recognise that there is a need to secure additional funding if we are going to be able to continue to provide the services to the wider community as well as that required by our contractual arrangement with Queensland Health.

Regards, Joe Soda President

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.

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.



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



Please Like Us! We're Just Getting Started on Facebook.

https://www.facebook.com/SelfHelpQueensland/

Who We Are

President Joseph Soda
Secretary Kathy Thomas
Treasurer Christopher Spriggs

Committee Members Rosa Prahl

Elizabeth Carrigan Melody Edwardson

Co-ordinator Trish Fallon Bookkeeper Janette Evans IT Volunteer: Roy Hanfling

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Postal: PO Box 353

SUNNYBANK QLD 4109

Street: Sunnybank Community Hall

121 Lister Street SUNNYBANK QLD 410

Office Hours: Tues - Friday 9am - 4.30pm

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)

To become a member please click the link below http://www.selfhelpqld.org.au/membership

What We Do

Self Help Queensland (SHQ) supports self help and support groups in Queensland across a broad range of health conditions and related issues. We do this by:

Providing a free, online Directory of self help and support groups in Queensland.

Assisting people to start new self help and support groups where no groups exist.

Working individually with existing groups to build their capacity to improve the wellbeing of their members.

Providing Sector information to individuals, groups, organisations and professionals in Queensland.

Making referrals, providing low cost training, assisting groups with funding applications.

Promoting the benefits of self help and support groups.

Bi-monthly newsletter, website, facebook.



Meet

Athena was always told that permanent, regular employment was probably unachievable. Her disabilities presenting too much of a barrier. She had a wealth of volunteering and work experience but never had the support to turn that into paid employment, until she connected with FSG Australia.



NDIS REGISTER

fsg.org.au 📵 🖪 🖸

Our mission is to provide innovative, responsive and quality community services through our commitment to Freedom, Social Justic and Growth for all people. Get in touch with us to start your journey.

(07) 5564 0655

Goal #1

Just before Athena's 37th birthday, she connected with the FSG to explore her options. The Learning and Development team helped Athena enrol in a SIT20213 Certificate II in Hospitality. With her qualification complete, her warm and friendly smile, and a new found determination, Athena set about achieving her next goal.



Goal #2 SECURING EMPLOYMENT





Athena successfully completed her work placement and now calls San Churro café her employer. For the first time in her life she feels she has options and can make her own choices.



Goal #3 & SELF CONFIDENCE

Athena had the knowledge, the qualification, the job and that warm, beautiful smile. She just needed to believe in herself. She shares, "I hated it in the beginning because I didn't back myself. But with help from FSG's continued contact and the amazing staff at San Churro... I really can't express how much they helped me, working in a place where everyone is so welcoming and on your team!"



Goal #4 FINANCIAL INDEPENDENCE



Athena works eight hours every week and is enjoying a regular income, providing her with money to do more of what she loves!



Kellee, Athena's FSG Employment Advisor, says,

"The success of the first few weeks are crucial for both the new employee and employer. We maintain regular contact to keep confidence levels high and reassure them that they can do this! We're all so impressed with Athena's determination, growth and motivation"

And this is just the beginning...





Please Let Us Know!

What are the Training Needs of Queensland's Self Help Sector?

(Self Help Groups/Support Groups/Peer Support Groups)

Self Help Queensland, in partnership with the Australian Pain Management Association, is looking at providing training for self help groups/support groups/peer support groups.

We would appreciate you filling out this quick survey and submitting it by 28th February so we can tailor the training to meet your needs. Feel free to contact us if you have anything you would like to discuss in relation to the survey. Ph Trish 3344 6919 or email sellfhelpqld.org.au

Please forward this link to any groups you know of in your network. Thank you!

https://www.surveymonkey.com/r/Q5DD8VN



How Readable is Your Document?

Want to Find the Readability Score for Your Word Document?

When you're writing a document, knowing how "readable" it is can be quite useful. There are two common tests that score readability (aka how difficult it is to understand your writing). Microsoft Word can calculate your readability scores right within the program, and it's super easy to set up.

- Type up your document in Word. Then click on the File menu > Options > Proofing tab.
- Under the "When correcting spelling and grammar in Word" heading, you'll see a box that says
 "Show readability statistics." Check this box, then exit out of your options and go back to your
 document.
- Now, run a standard spelling and grammar check just like you would any other time. You will then be able to see readability scores based on two tests: The first is the Flesch Reading Ease test, and the second is the Flesch-Kincaid Grade Level score.
- The higher the score on the Reading Ease test, the easier the document is thought to be, to read. If your document is at least 60, it should be relatively easy to read, although you can aim for higher scores if increased readability is important to you.

The grade level is equivalent to the reading level of students. An 8, for example, would mean that the material is appropriate for an 8th grader. If you hit somewhere between 7 and 8, it should be very readable for the majority of people.

For another way to follow the above steps or view on You Tube go to:

(Source: https://www.bettercloud.com/monitor/the-academy/find-readability-score-word-document/)

Genetic Matters

by Professor Kim Summers PhD FRSB

No smoke without a fire.

In a culture where smoking is frowned upon and smokers are banished to distant secluded outside spots for their morning break, it is unsettling to see smoking rates go up in young people, especially girls. A recent study suggests that women who smoke are likely to have more grandchildren with autism and autism spectrum disorder, so the rising levels of smoking in young females is a cause for concern.

My own mother was a pack a day smoker, who continued smoking through three pregnancies. She had her first cigarette of the day in the shower, having perfected a backwards flex of the wrist that kept the cigarette dry, and her last just before she went to bed. None of her children is autistic. All her grandchildren are intelligent, highly motivated and very sociable. None has been diagnosed with autism or autism spectrum disorder, but reading this report it's hard not to wonder about whether they display any signs.

And that is the problem with this kind of study. The public announcement that smoking in a maternal grandmother increases the risk of autism in a grandchild does not explain the detail of the study, or put the figures in perspective. Firstly, very few of the children in the study had been formally diagnosed with autism; they exhibited some signs on two of four tests that predict an autism diagnosis.

Secondly, could this association be the result of another interaction (a "confounder" in statistics)? Were the maternal grandmother smokers also more likely to be of low socioeconomic status than the non-smokers? Did they have poorer nutrition? Did they consume more alcohol? Were the smoker grandmothers also older or younger than the non-smokers at the birth of their child? Were the mothers and/or fathers also smokers? How accurate is the information on grandparent smoking which relied on the memories of their offspring as grandparents were not involved in the analysis. The authors of the study acknowledge some of these issues and corrected for them where possible.

Thirdly, family studies have not detected any links between the mother smoking in pregnancy and the development of autism, so it is surprising that the grandmother smoking has an impact. Fourthly the increased risk, though marginally significant, is not large. In the study, the granddaughter of a smoker maternal grandmother had a risk 1.67 times higher than the granddaughter of a non-smoker grandmother of showing signs predictive of autism on two of the four tests (statistically, an odds ratio of 1.67), that is less than two times the risk. Grandsons were apparently not at increased risk. In addition, as grandmothers increasing come from generations where smoking is less common, we would expect diagnoses of autism and autism spectrum disorder to decrease with time, rather than the increase we are currently seeing.

If the results are supported by further reports, what might be the mechanism through which the grand-mother's smoking can influence the grandchild's mental development? Two ways to explain the result have been suggested. It might be related to damage to the mitochondria, the cell's energy-producing powerhouse. Mitochondria are transmitted from mother to child so the children have the same mitochondria as their mother's mother. Smoking is known to damage the mitochondrial DNA, so perhaps it is this damage that is causing autism in the grandchildren. But if that is the case there would also be a greater risk to the children and the great grandchildren of a smoker. The researchers are now looking at other generations to test this. The relationship between grandmother smoking and granddaughter having signs of autism might also be related to changes in the genome that do not result in alternation of the fundamental sequence but change the way the DNA is controlled to make the proteins necessary for the cell to function (see SHQ Newsletter of March 2010). These tweaks of the DNA can be passed through several generations.

Many genetic and environmental influences appear to affect a child's risk of developing autism or autism spectrum disorder. (Continued on Page 6)

(Continued from Page 5)

Several regions of the human genome (all the DNA of an individual) have been associated with the condition, and a number of specific genes and DNA changes with good biological validation have been found (see for example SHQ Newsletter of June 2012). The children of older fathers are at greater risk of autism, perhaps through environmental damage to the sperm or shared genetic factors that delay fatherhood.

There are many reasons why smoking is a bad idea. These researchers may now have added another one: the possible risk of having a grandchild with autism. Teenaged smokers be warned: what you are doing now is not just harming yourself, it is likely to harm future generations.

"Kim is a Professorial Research Fellow at the Mater Research Institute - University of Queensland, and Professor of Comparative Genetics, The Roslin Institute, University of Edinburgh. Kim is also a valued past Committee Member of Self Help Queensland Inc. The views expressed are her own and not necessarily those of her employer"



Griffith University Study into Femicide

Queensland Homicide Victims' Support Group Encourages Participation in the Study

Griffith University is reaching out to people who may have been impacted by intimate partner femicide (where the husband/partner or ex partner, takes the life of his partner). QHVSG is excited to be working with Griffith on this world first research project and encourages members who may be interested in participating, to contact the Research Team leader, Dr Samara McPhedron, for more information. Samara can be contacted on 07 3735 1194 or via email: s.mcphedron@griffith.edu.au.

QHVSG Family Support Coordinators Elaine Henderson and Deb Taylor can also chat to you about the study and answer any queries that you may have. We are looking for family and friends who have been impacted by intimate partner femicide to participate in the research project in the hope that findings can help further refine risk factors and assist in the formation of more effective preventative measures for the future.

URL: www.qhvsg.org.au

Freecall: 1800 774 744 Ph: 07 3857 4744

Email: admin@qhvsg.org.au (Source: QHVSG NewsletterFeb 2018)



Head, Neck, and Mouth Cancer Support Group

We are a small group who have been through the treatment for a variety of forms of head, neck and mouth cancer. We offer a safe environment and an opportunity to meet with people who have been, or are currently in a similar situation to yourself. We discuss what to expect, methods of dealing with the diagnosis, treatment and returning to an active life afterwards.

Meeting in Brisbane on the second Tuesday evening of each month at Cancer Council Queensland, 553 Gregory Terrace, Fortitude Valley.

Call the Cancer Council Helpline on 13 11 20 (toll free) or Martin Doyle 0419 708 188 (Group Facilitator)





Does your Group Struggle With Funding Submissions?

Quick Tips, Do's and Don'ts

Small Not for Profit groups and organisations spend a lot of unnecessary time and energy looking for and writing submissions for grants. Competition is growing fierce, with many more players dipping into the same pool.

There is plenty of good information on the internet and workshops to attend to help you: sometimes almost so much it becomes confusing. It can become so hard you give up to return again at a later date.

SHQ offers these few tips, with no apologies for being blunt. (33 years experience has seen us read a lot of unsuccessful applications when groups have asked for help after the event.)

Do:

Search for a grant that gives you the best chance for success - look for as perfect a match as you can. Read the guidelines over and over. Stick to them!

Provide exactly the information you are asked for - padding and waffle is useless to your application.

Write with a combination of both fact and emotion.

Ask for help from experienced others.

Be honest.

Don't:

Think you can con, suck-up, hoodwink or bull.... the members of the funding panel. They are all intelligent, experienced, ethical panellists who can see through this type of approach. You will only hurt your organisation's chances.

Ignore any question or sections of the application. If it's too hard it might not be right for your group.

Bloat your budget to gain extra \$\$ for your group - you will be caught out.

SHQ has written a lengthier fact sheet on Funding, and QCOSS also has an excellent article. Please see both links below. There are many others: just google.

Self Help Queensland Fact Sheet 10 "Funding"

https://www.selfhelpqld.org.au/sites/selfhelpqld.org.au/files/10%20Funding.pdf

Writing a Submission for Funding

By Louise Mullins, Queensland Council of Social Service

https://communitydoor.org.au/blog/writing-a-submission-for-funding

*If you are struggling with an application, feel free to call Trish at Self Help Queensland. We may be able to offer some helpful suggestions, or look over your application as an objective outsider.

Call 07 3344 6919 or email info@selfhelpqld.org.au



Self Help Queensland welcomes feedback on any aspect of our ser-Self Help vice, including this newsletter.

Please feel free to phone or email Trish with any constructive criticism or suggestions.

We are also keen to learn your training needs, so please help us by filling out the quick survey on Page 4.

According to your response, our partner APMA and ourselves will endeavor to meet your requests.

Thank you



SHQ Seeks New MC Member

Self Help We are looking for a skilled person to fill a vacancy on our Management Committee.

The position is for a general Committee Member; someone who enjoys actively contributing their skills and experience to a not for profit community organisation.

We meet monthly at Sunnybank for 1½ hrs. Please ring Trish on 3344 6919 or email info@selfhelpqld.org.au for details.



Family Drug Support Australia (FDSA)

Expanding Support Services in Queensland

FDSA assists families throughout Australia who have been affected by drug and alcohol issues. A range of services is provided by mostly volunteers who have experienced first hand the trauma and chaos of having family members with drug dependency.

Queensland Family Support Group Meetings

Caboolture

2nd Wednesday of the month

Street University, 29 - 31 King St, Caboolure (6:30pm – 8:30pm) (Next to the printing shop at the corner of Beerburrum Rd) Enquiries: Chrissie 0484 002 181 or Head office 02) 4782 9222

Ferny Hills

This meeting has changed locations. Please see Mitchelton listing

Ipswich

3rd Thursday of the month: 15th February, 15th March

EACH, 24 East St, Ipswich (rear parking access via Wharf Street) (6:30pm – 8:30pm) Enquiries: Devushka 0484 000 806 or Head office 02) 4782 9222

Maroochydore

3rd Wednesday of the month: 21st February, 21st March

Community Focus 3/2 Ann-Maree Cl, Maroochydore (7pm – 9pm) Enquiries: Sue or Barry 0419 020 603 or Head Office 02 4782 9222

Mitchelton

2nd Wednesday of the month: 14th February, 14th March

Picabeen Community Centre, 22 Hoben St, Mitchelton 7pm – 9pm) Enquiries: Krystal 0484 002 178 or Head office 02) 4782 9222

Nerang

1st and 3rd Monday of the month: 19th February, 5th & 19th March

Girl Guides Hall, 40 Ferry St Nerang (7pm – 9pm)

Enquiries: Devushka 0484 000 806 or Head office 02) 4782 9222

Northgate

1st & 3rd Tuesday of the month: 6th & 20th February, 6th & 20th March

Northgate Meeting Room, Northgate Hall, Corner Scott & Ridge Sts Northgate (7pm – 9pm)

Enquiries: Krystal 0484 002 178 or Head office 02) 4782 9222

Paddington

1st Monday of the month: 5th March

Paddington Hall Annexe, 10 Moreton St, Paddington (7pm – 9pm) Enquiries: Krystal 0484 002 178 or Head office 02) 4782 9222

Redland Bay

Last Tuesday of the month: 27th February, 27th March

The Cage Community Centre, 882 German Church Road, Redland Bay (7pm – 9pm)

Enquiries: Devushka 0484 000 806 or Head office 02) 4782 9222

Family Drug Support Online

http://www.fdsonline.org.au/

To learn more about what SDSA has to offer go to: http://www.fds.org.au/

PO Box 353 SUNNYBANK, QLD 4109 Ph: 07 3344 6919 Email: info@selfhelpqld.org.au URL: www.selfhelpqld.org.au



Looking for Volunteers

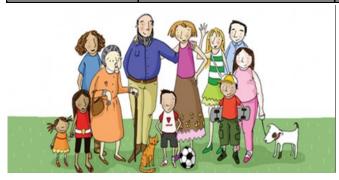
The Australian Pain Management Association (APMA) runs a network of Pain Support Groups (PSGs) in Queensland.

PSGs are a place where participants can learn more about chronic pain, share their own experiences during both difficult and successful times, learn from other participant's achievements and strategies, and find out about the newest trends and evidence-based information related to chronic pain. Additionally, many groups regularly invite educational guest speakers to present to the PSG.

APMA is looking for volunteers to facilitate new PSGs or co-facilitate existing groups. Volunteers will be supported through educational materials, insurance coverage and being part of Team APMA. If you are interested or would like more information, please get in touch with Ellen at ebarnaby.apma@gmail.com or call 0431 393 525. You can also visit our website at http://painmanagement.org.au

You may be interested in attending one of APMA's Queensland Pain Support Groups:

Local Support Group:	Where:	Contact: (let us know which group you would like to attend)
Brisbane Northside	Chermside Community Health Centre	Annette & Therese secretary@painmanagement.org.au
Brisbane Southside	Carindale Library, Westfield Carindale	Gabrielle secretary@painmanagement.org.au
Brisbane SNAP Younger People	Alternates between East Leagues Club, Coorparoo & Stones Corner Hotel, Greenslopes	Amy & Susanne secretary@painmanagement.org.au
Logan	Beenleigh Library	Kaylene secretary@painmanagement.org.au
Gold Coast	Bumbles Café, Budds Beach Surfers Paradise	Gaynor secretary@painmanagement.org.au
Logan	Beenleigh Library	Kaylene secretary@painmanagement.org.au
Bundaberg	Bundaberg Base Hospital, HR Room	Steve secretary@painmanagement.org.au
Townsville	Townsville City Aitkenvale Library	Michelle secretary@painmanagement.org.au



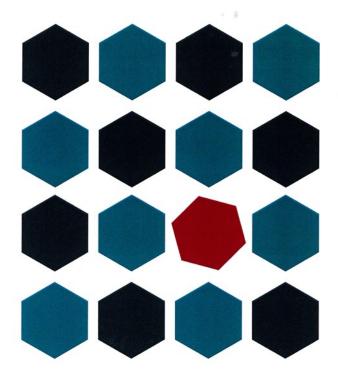
"To me, one of the great benefits of the group is finding out you're not alone.

Whatever your're thinking/deciding/ experiencing, you're not the only person who's been there"

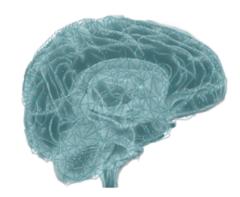
Support Group Member

Obsessive-Compulsive Disorder

Help us find a treatment



Our researchers are embarking on a new clinical trial for a possible OCD treatment that restores the neural connections in the brain, and they are seeking participants.



Information about the study:

- The clinical trial is testing a new intervention for OCD symptoms
- The trial involves the use of transcranial magnetic stimulation (TMS)
- TMS allows for the safe and non-invasive adjustment of brain activity
- The clinical trial aims to assess whether TMS can be used to balance altered communication between brain regions and improve OCD symptoms
- The methods and procedures used in this clinical trial have been approved by the regulatory authorities

If you are interested in participating, ask your clinician to contact the researchers below for an Eligibility Form

Dr Luca Cocchi, Lead Principal Investigator Phone: +61 7 3845 3008

Fax: +61 7 3144 5641

Email: tms.ocd.clinicaltrial@QIMRBerghofer.edu.au

Address: Systems Neuroscience Group QIMR Berghofer Medical Research Institute 300 Herston Road, Herston, QLD, 4006

www.qimrberghofer.edu.au









It's Never too Late to Learn to Read

If you or someone you know wants help with reading and writing please give us a call. We are commencing a free **FREE** tutoring group for adults every Tuesday from 9.30am - 11.30am at The Community Place Wooloowin.

Wish you could read to the child in your life?

Or feel confident reading novels or filling out paperwork? You can! Give us a call. You'll be welcomed in to our small friendly and supportive community program.

Call The Community Place on 3857 1152. Bookings essential.

The Community Place Wooloowin is located at 84 Kedron Park Road





Mother in Law's Tongue (Sansevieria trifasciata 'Laurentii')



Pothos (Epipremnum aureum)



Peace Lily (Spathiphyllum 'Mauna Loa)



English Ivy (Hedera helix)



Florist's Chrsythumu (Chrysanthemum morifolium

Why We Need More Plants in Our Homes and Offices

Particle board, vinyl carpet, synthetic flooring, artificial lighting, plastic and synthetic furniture are just some of the office and household items that give off nasty chemicals that can cause us to become sick or stressed. One of the worst offenders is Formaldehyde, which can cause irritation of the eyes, nose and throat, and can also cause contact dermatitis.

Other harmful chemicals in the home and office may include benzene, ethylbenzene, trichloroethylene, toluene and xylene, and even ammonia from cleaning products.

Indoor plants will purify the air, reducing volatile organic compounds, including formaldehyde. (NASA Clean Air Study)

The NASA study tested common indoor plants for the ability to filter pollutants, and found many are very effective at removing multiple kinds of organic compounds from the air There are already trillions of bacteria in high-rise offices, but only a limited amount come in through open windows and air conditioning from the outdoor environment. Most of the bacteria, fungi and viruses come from people; we leave behind a microbial cloud from our skin wherever we go.

Beneficial bacteria on indoor plants and in their soil are an important addition to the office, stabilising the ecology of the built synthetic environment.

There are a few basic principles for a good office plant. It must be hardy and easy to maintain, and able to survive without water over weekends (or when the regular plant-carer goes on holiday). Many plants will do the most good in cubicles and spaces away from windows, so they need to be adapted to low light.

It's also a good idea to avoid plants that flower extravagantly, which may cause allergic reactions. Check with your colleagues before introducing new plants. There are many beautiful plants that will improve your atmosphere and mood.

Link to the excellent NASA Plant Chart to find high performers for cleaning indoor air. https://en.wikipedia.org/wiki/NASA Clean Air Study

Source: https://en.wikipedia.org/wiki/NASA_Clean_Air_Study http://www.abc.net.au/news/2018-01-08/how-plants-fight-office-stress/9310704



Chinese Evergreen (Aglaonema modestum) (Anthurium andraeanum) (Chamaedorea seifrizii)



Flamingo Flower



Bamboo Palm



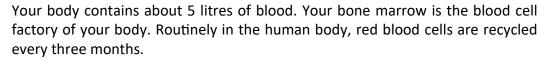
Red-edged Dracaena (Dracaena marginate)

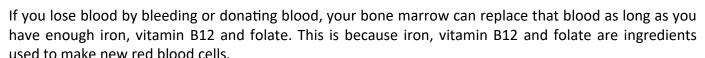


Spider Plant (Chlorophytum comosum)

Tough as nails

How can removing blood remove iron from the body?





After blood is removed by a venesection, some of the iron that is stored in the body moves out of storage and becomes available to help make new red blood cells.

If you have haemochromatosis and are iron-overloaded and have adequate vitamin B12 and folate available, your bone marrow will be able to make new red blood cells every time you have venesection.

A standard 500ml venesection removes 0.25 grams of iron from the body. That is equivalent to the amount of iron in a 50mm nail. It takes 4 venesections to remove 1 gram of excess iron (4 nails). A person with moderate iron overload may have between 4 and 10 grams of excess iron, which will take between 16 and 40 venesections to reduce to normal levels. Severe iron overload may be up to 40 grams of excess iron which will require up to 160 venesections to reduce to normal levels.

You may find that if you are having frequent venesections, extra vitamin B12 and folate (folic acid), either in your diet or through supplements, may be helpful. Your GP, pharmacist or dietitian will be able to provide advice.

You can increase your folate intake if you:

- Eat folate-rich foods—folate is present in a variety of vegetables (such as asparagus, spinach and broccoli) and fruits (such as oranges, bananas and strawberries) as well as legumes (such as chickpeas, dried beans and lentils), cereals, nuts and yeast extracts such as vegemite
- Choose foods that have been fortified with folic acid this includes some breakfast cereals and fruit juices, and most bread
- Take folic acid supplements Good sources of B12 include liver, meat, milk, cheese and eggs, almost anything of animal origin and Vitamin B12

Good sources of B12 include liver, meat, milk, cheese and eggs, almost anything of animal origin and Vitamin B12 supplements.

New research by the Murdoch Children's Research Institute (MCRI) has shown haemochromatosis — the most common genetic disorder in Australia — should be treated even when iron stores are only mildly elevated.

On the basis of the results of the study, researchers from MCRI are recommending that anyone with haemochromatosis and raised body iron levels should be encouraged to have treatment to normalise their iron levels.

The good news is that if haemochromatosis is detected before damage occurs, it can be easily treated – by simply giving blood. To read more about the study refer to Iron Age News Issue 99 Feb 2018 https://haemochromatosis.org.au/wordpress/wp-content/uploads/2018/02/IronAgeNews99-Jan2018-web.pdf

The Collaborative study was published in The Lancet Haematology (December 2017)

Haemochromatosis Australia



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Self Help Queensland supports social enterprises which empower people to take charge of their own health and wellbeing.

We congratulate ARMIA and wish all the participants every success in this new venture. Please let others know and give ARMIA a go.

Some Simple Tips to Help you Improve Your Communication with People with a Disability

by Tanya McCulkin

"Some people can find communicating with people with a disability a bit daunting. They may be worried about appearing patronising or not understanding what's being said. Or even worse – causing offence" says Tanya McCulkin.

Tanya, who has been working with people with a disability for over 18 years, and now heads Disability and Community Services at Endeavour Foundation, made a conscious decision early in her working life to communicate directly with them and not in isolation of them, no matter how hard it was.

Tanya put the following simple tips together to help people improve their communication with people with a disability: We at SHQ think they are easy, practical and helpful.

Speak with respect

Speak to people with a disability the same you would as anyone else, and in your normal voice.

Pay attention to non-verbal signals

Things like eye contact, body movements and tone of voice. All of these signals can convey important information that isn't put into words. A person's overall demeanour is far more telling than a single gesture viewed in isolation.

Ask questions about non-verbal signs

If you are confused about another person's nonverbal signals, don't be afraid to ask questions. A good idea is to repeat back your interpretation of what has been said and ask for clarification. For example, someone may tell you they are happy while frowning and staring at the ground.

Use good eye contact

When people fail to look others in the eye, it can seem as if they are disinterested or not entirely truthful. On the other hand, too much eye contact can seem confrontational or intimidating. While eye contact is an important part of communication, it's important to remember that good eye contact does not mean staring fixedly into someone's eyes. How can you tell how much eye contact is correct? Some communication experts recommend intervals of eye contact lasting four to five seconds.

Talk directly to the person with a disability, not about them

Don't act as if they are not in the room and only speak with their carer, or assume that they can't understand what you are saying.

Give time to process

Sometimes people need a little more time to process what you're saying, for example, if they have an intellectual disability. Give them time rather than repeating yourself.

Use signals to make communication more effective and meaningful

Remember that verbal and nonverbal communication work together to convey a message. You can improve your spoken communication by using body language that reinforces and supports what you are saying as some people rely on visual cues.

Concentrate on your tone of voice when speaking

Your tone of voice can convey a wealth of information, ranging from enthusiasm to disinterest to anger. Observe how your tone of voice affects how others respond to you, and try using tone of voice to emphasise ideas that you want to communicate. (Continued on Page 15)

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Consider context

When the person is trying to communicate with you, always consider the situation and the context regarding what is being said. For example, they may be saying that they did not like their dinner that evening, but if we look at the situation, we might realise that they were sitting with people they did not like, or they have missed their favourite TV show at that time. It may not have been the dinner itself.

Practice, practice

Some people just seem to have a knack for correctly interpreting signals from others. These people are often described as being able to 'read people'. In reality you can build this skill by paying careful attention to nonverbal communication.

Decision making

To enable a person with disability to fully participate in decision making, it is necessary to communicate information to them in a way that is appropriate to their preferred communication mode and format. This may include written or spoken language, signs, symbols or line drawings, photographs or other objects.

Some people may need equipment to help them communicate, such as:

- A letter, word or picture board
- A voice synthesiser or computer and/or
- A hearing loop.

Use appropriate language

Words like 'disabled', 'retarded', 'handicapped' or 'sufferer' can be considered patronising and offensive. These emphasise the disability, not the person. Instead terms like 'person with a disability' or 'person with autism' should be used.

Remember, a disability in itself needn't be disempowering, although often society's response to a person's disability can be.

*Editor's Note. Thank you Tanya! We think your tips are practical, easy to follow, and very helpful. (Source: https://www.endeavour.com.au/media-news/blog/communicating-with-people-with-disability)



Free Programs

English Conversation Class Monday 10am to 12 pm

English Conversation Class Women Only Tuesday 10am to 12 pm

Wellbeing sessions, including: yoga, gardening, craft, table tennis Wednesday 10am to 12pm

> Everyone welcome! 30 Shottery Street, Yeronga, 4104 Ph: (07) 3848 1600



Australian Screenings of "Suicide - The Ripple Effect"

Suicide Prevention Australia (SPA) has announced the film "Suicide - The Ripple Effect" is being shown in a number of locations in Australia next month.

Check out all of the screening locations, dates, times and hosts <u>here</u>. A number of the screenings also feature Q&A with people who have been involved in the film.

Screenings can only go ahead if all of the tickets are sold over the next couple of weeks so book your ticket today!



Report demonstrates rheumatology nurses could be the answer for hundreds of thousands of Australians with inflammatory arthritis.

Currently there is only one rheumatology nurse for every 45,000 people living with inflammatory arthritis – this must increase.

Around 1.7 million Australians suffer with chronic, inflammatory forms of arthritis, yet there is a severe shortage of the specialist nurses who are trained to help care for these patients.

It is estimated inflammatory forms of arthritis cost the Australian health system around \$2.8 billion in 2015.

According to a report commissioned by Arthritis Australia, there is just one full-time rheumatology nurse for every 45,000 people living with painful and disabling conditions such as rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis, gout and juvenile arthritis.

CEO of Arthritis Australia Ainslie Cahill said chronic, inflammatory forms of arthritis are a leading cause of disease burden and are also among the most common causes of disability and early retirement due to ill health in Australia.

"An increase in rheumatology nurses would mean quicker diagnoses, better psychosocial support for patients, improved quality of care, better patient outcomes and reduced health system costs," Ms Cahill said. "Importantly, this research confirms that people who see a rheumatology nurse as part of their care are much more satisfied with all aspects of their care than those who do not."

Source: Ankylosing Apondylitis Australia Newsletter "A Stretch Summer 2017" www.asaustralia.org

The full report can be read at: http://www.arthritisaustralia.com.au/index.php/reports/rheumatology-nurses-adding-value-to-arthritis-care.html

Arthritis Australia Helpline 1800 011 041 - to learn about the services in your state/territory.



For Queensland Residents Only Energy Efficient Appliance Rebates

No Income Test - Simple Requirements - 1 rebate per household

Rebates will apply to **purchases on or after 1 January 2018** for the following household appliances:

\$200 for a 4 star energy rated Washing Machine - This includes a combination washer/dryer but does not include an appliance that is a dryer only.

\$250 for a 4 star energy rated Refrigerator - This includes a combination fridge/freezer but does not include an appliance that is a freezer only.

\$300 for a 4 star energy rated Air Conditioner -This includes ducted, split system and window air-conditioners, but does not include freestanding portable air-conditioners or evaporative air conditioners

Limited funding available so sign up to receive a notification as soon as applications are open. Go to: https://www.qld.gov.au/community/cost-of-living-support/about-energy-efficient-rebate



Neighbour Day is Australia's annual celebration of community, encouraging people to connect with those who live in their neighbourhood.

Whether through a cuppa, a picnic in the park, or a message of support; Neighbour Day is the perfect opportunity to say thanks for being a great neighbour and for being there to lend a hand. The annual theme for Neighbour Day 2018 is: The importance of a supportive neighbourhood for children and young people.

The principal aim of Neighbour Day is to build better relationships with the people who live around us, especially the elderly and vulnerable. Neighbours are important because good relationships with others can transform communities. Social connection also makes us feel better as it helps prevent loneliness, isolation and depression. Neighbour Day brings together like-minded people, resources, and organisations to grow stronger, well connected communities. And make us all feel better about the world!

- Start simply with a smile this can lead to a friendly hello and conversation.
- Share some home cooking as a welcome to a new neighbour or a friendly gesture to neighbours you already know.
- Offer to bring in your neighbour's bins or their mail when they go away.
- Find a common interest do you both have young children or pets? Are you into outdoor exercise?
- Arrange to go for a walk together or organise a playdate.
- Join your local neighbourhood group or association, or volunteer with a local community group.
- Joining a local sporting group is a great way to meet the locals.
- Invite a neighbour over for a cuppa or a barby a good conversation starter is asking how long they have lived in the area.
- If you have a veggie garden share surplus fruits and veggies with your neighbours.
- Try carpooling if your kids go to the same school, or you work/shop in the same area.
- Make a special effort to introduce yourself to older residents and anyone who lives alone. Leave them your mobile or home phone number for use in an emergency.
- Be kind. Offer to help where you are able. Or offer a listening ear or friendly support.
- Introduce yourself or connect with neighbours you find difficult to meet in person with a <u>simple postcard</u> (a friendly message + your name and address) as an icebreaker.
- Exchange phone numbers and let your neighbours know you are happy to be of assistance in case of emergency.
- Offer to help your neighbours out when they are away. You could offer to collect their mail, mow their nature strip and keep a watchful eye on their property.
- Organise a street clean-up or a 'gardening bee' with other neighbours. You could join the local bushcare group.
- Link people you know may appreciate each other's company in your street, or in your neighbour-hood. Communities need more people to make an effort to connect others.
- Take the initiative organise a simple Neighbour Day event and remember that every day can be neighbour day. You can invite new neighbours to join in and meet established neighbours.
- It's important to understand that some neighbours may decline your welcoming approach. Respect their choice and build connections with others living nearby.

Women Wide Network for Share Accommodation



In the July 2017 edition of this newsletter we wrote about a Facebook group called Seniors Share Houses - "A Wonderful Way for Vulnerable Seniors to Find Affordable Accommodation". The founder of the group, Linda Mina, who has a background working in community development, had become concerned with the increasing numbers of older women who were becoming homeless. She has since told SHQ that "mature age women are currently the fastest growing cohort among the homeless in Australia."

Linda had discovered first hand that single rentals were unaffordable on the Gold Coast where she lived.. She started a Facebook group called Seniors Share Houses Gold Coast. This group has grown to over a thousand members since then and has helped many Seniors find share accommodation, or the perfect flatmate to share their home. There are now 15 Seniors Share Houses groups in Australia. Search Facebook for a 'Seniors Share Houses' group in your area. And please pm me if you need one.

More recently, younger single women from around 40+ have asked to join. These are women who would prefer to share with another woman, and age is not a barrier. These younger women don't want to live in a party house. They are looking for a HOME where they can be relaxed and chill.

Taking a further step forward, Linda recently launched Women Wide Network for Share Accommodation. It is a platform for women to:

- connect & communicate
- develop an equitable sharing arrangement
- create an intentional co-tenancy with someone compatible
- or plan a co-housing initiative with a like minded group

Linda's vision for the Women Wide Network is to create a safe place for women to make connections. These are women who are single. Maybe lonely. Probably paying too much for a tiny apartment. Those who are couch-surfing, or even more horrifying, sleeping in their cars. And not forgetting, those who are struggling to pay a mortgage, pay the rates, plus ever-increasing utilities costs, let alone keep up the maintenance and repairs.

Linda believes it is possible to enjoy a shared tenancy. "You just need to find the right person, or people. You then need to negotiate an equitable arrangement. The rest applies to any successful relationship. You need to communicate regularly, and show basic respect and kindness. "

But Linda's vision vision extends further. "Wouldn't it be amazing if the Women Wide Network for Share Accommodation connected women all over Australia, or the Word (dream BIG), so we could house swap for agreed periods of time? Try a new place with a different flatmate? Have a holiday and a change of scene? There is currently an affordable housing crisis and times are tough. But we can, and should, put some joy into our lives. We are all in this together." Link to Women Wide Network for Shared Accommodation. https://www.facebook.com/groups/141556019983279



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"Individuals can resist injustice, but only a community can do justice."

James J. Corbett Boxer, Author, Actor 1866 – 1933

James John "Gentleman Jim" Corbett was an American professional boxer and a former World Heavyweight Champion, best known as the man who defeated the great John L. Sullivan. He has been called the "Father of Modern Boxing" for his scientific approach and innovations in technique.

