

Bipolar Disorder In Canada

By Leif Gregersen

In Canada, the struggle against Bipolar Disorder rages, along with attempts to educate and enlighten the general public about this and all other mental health and addiction issues. The problem is huge, with the cost in Canada of mental health issues topping 14 Billion dollars per year. Four point five million Canadians will experience a mental health problem at some point in their lives, and just one in twenty of those will be for Bipolar (source: the Centre for Addiction and Mental Health website). Four of the ten leading causes of disability in developed countries (which includes Canada) are mental disorders, the Centre's website also states. It is important to note as well that it is estimated by The Mood Disorders Society of Canada that 38% of our far too large homeless population suffers from a mental illness. The mission of bringing knowledge to the public about Bipolar Disorder, and all other mental illnesses rests on the shoulders of many different organizations, some public and some private. Though Canada is a modern and developed nation both industrially and educationally, there is a huge battle yet to be fought to reduce the stigma surrounding mental illnesses, with Bipolar Disorder near the front of the line. The quality of life of many people are at stake, including 1.5 million children and youth, of which less than 20% receive therapeutic intervention, as in my own case. Across Canada, suicide is the leading cause of death for all males between 10 and 49, and the fourth leading cause for women.

Earlier this year (2013) Bell Canada, a Telecommunications Giant, sponsored a program to get people talking about mental health issues and had as it's sponsor a Canadian Olympic athlete who herself suffered from Depression. This initiative raised some 15 million dollars in a single day of promotion to be used towards getting the word out that mental health should no longer be left in the shadows. The attitudes towards those who suffer from mental illness are still entrenched in old ideas in many ways though, for example, here in Edmonton, few people even know of the existence of a Mental Hospital in the area. The facility, "Alberta Hospital Edmonton" also known as 'Oliver' to some, is far off outside of the city and certainly is rarely the subject of a tour of school children, this would simply be too frightening for them, though once a student gets to University, say in a nursing program, a tour is almost a necessity.

I have found that this fact that younger people know very little about mental health issues and older people are more knowledgeable as a whole rings true in that children and youths are much more likely to shun and belittle those who deal with mental health issues, while more mature adults are much more accepting. This factor likely has to do with the fact that as age increases, so does the likelihood that people themselves or someone close to them will be affected by mental illness, culminating in many very serious disorders in the elderly, from depression to Alzheimer's disease, not to mention of course simple maturity in adults as compared

to children or young adults. In my younger days, even in my church group I found that many people felt I had done something wrong such as drug overuse or believing things as ridiculous as demon possession as the cause of my mental illness, and were very ready and willing to treat me as poorly as possible in social situations, while those who were more mature were more focused on me doing what I could to control my illness through proper medical treatment. As mentioned though, Youth and children are not immune to mental health issues. As few as one in four children or youth, compared to one in three adults who suffer from mental health problems will seek and receive treatment according to the mental health commission of Canada's informational pamphlets. The commission goes on to say that Canada is lagging behind many Countries as only seven per cent of each public health care dollar is spent on mental health care, far below the 10 to 11 per cent spent in Countries such as the UK and New Zealand.

In Canada, many organizations exist to assist those who are mentally ill and their families to get through the more difficult parts of daily living that those with Bipolar and other disorders face. At the top of the chain is the Canadian Mental Health Association, which is a voluntary organization that brings together 10,000 workers in over 120 communities to educate and support mentally ill people and their families. I myself have attended their information sessions and social groups, and have found their resources invaluable in getting me through some of my tougher times, not to mention getting me into groups to meet and share my experiences with people like me who suffer. Having people in my life who also have a mental illness is something, which I feel, is key to growth, recovery and learning. The average group of people in society who gather together, whether it be a book club or just a few guys who get together for poker can never give a mentally ill person the support and understanding they require. It is crucial that mentally ill people interact with each other because these other sufferers will not judge or condemn someone as many members of the general public often do.

A great deal of the actual treatment and licensing of workers happens at the Provincial/Territorial Level. In Canada, having 10 Provinces and 3 Territories, regional health boards provide most of the government funded care and treatment from hospitalization to medications for the mentally ill. In the Alberta system where I have received most of my treatment, we have a plan known as Alberta Health Care which covers Doctors visits, hospitalizations and just about everything but medications and ambulances. Many of the people in Alberta with severe mental disabilities are eligible for further insurance benefits, which cover most of these as well, right down to eyeglasses.

At the core of each region's health board is the mental health act for that particular region. In Alberta "The Mental Health Act" covers such things as limits to the powers of Psychiatrists and Doctors to detain patients, which are documented in the admission certificates, how patients who are detained because of a breach of the criminal code, and other matters such as 'community treatment orders' which are documents laying out the stipulations a patient must abide by in order to remain in

the community rather than be hospitalized. No matter where you are in Canada though, your treatment for mental health issues begins with your own General Practitioner and then follows up a hierarchy of mental health workers from there. The first step in getting treatment, something I struggled with, is realizing that there is something wrong and talking to your Family Doctor (GP) about it. This Doctor, which falls under the Canada Health Act and is available free of charge, will discuss your issues at length and then refer you to whatever you need. He is also able to write prescriptions for most Psychiatric Medications, and will most likely try to do the basic work of stabilizing your condition and then possibly treating with anti-depressants as it can be a long wait in some communities to see a Psychiatrist, anywhere from a few weeks, or, if you wish to see a specific Doctor, possibly up to a year. In some of our many remote communities, a General Practitioner might not even be available and one may have to simply consult a local nurse practitioner who will make a decision to either transport the patient to more in-depth care or treat them in the community they are in. I personally know of one Doctor who has his Pilot's license and spends a good deal of his time flying to northern communities setting up and seeing patients in small clinics set up in these places.

In Canada as of late, starting with British Columbia, more emphasis has gone towards treating patients in the community. A fact stated in the Mood Disorders Society of Canada "Quick Facts" pamphlet, mentions that it costs approximately \$170,000 to keep a patient in the hospital for one year while it costs only \$35,000 to support them in the community for the same amount of time. There are exceptions where this cannot work, for example when a person is court ordered to remain in a Forensic Psychiatric Facility for a specific crime or crimes. Such places can be quite harsh, I once spoke to a Doctor who had worked in one and mentioned that the population of our local forensic facility, which is attached to Alberta Hospital Edmonton, contains nearly 80% murderers and many of them will never see the light of day again. In some TV dramas, you often see a person 'getting away' with a crime by pleading insanity, but in Canada, the plea you would have to enter would be 'guilty but insane'. Some may wonder why prosecutors allow people to make this plea and avoid jail, but in fact they often feel this is a better solution for society at large because regardless of your illness, crime or diagnosis, those who plead 'guilty but insane' will end up spending much more time in these secure facilities than they ever would in prison, and also the resources of rehabilitation will be more readily available to patients than to a regular prisoner in a correctional facility.

Many people feel they can easily ignore the problem of mental illness but another fact gleaned from the Mood Disorder's Society Pamphlet states that one in five Canadians will need treatment for a mental illness at some point in their life, and 10% of Canadians will be suffering from a mental illness in any given year. That means just about everyone will either have a mental health problem needing treatment or affecting their loved ones or friends. The percentage of people that suffer from Bipolar though is lower than that overall statistic, only 1% are expected to be diagnosed with Bipolar though many more can have a milder form of the illness known as cyclothymia where they cycle moods but don't have delusional or

psychotic symptoms, or more serious disorders that combine symptoms of Schizophrenia and Bipolar such as Schizoaffective Disorder.

The hard facts of Bipolar can be frightening. Many facts I wasn't aware of but definitely ring true in my life came to light when I was researching this chapter. Again, in the ever-helpful Mood Disorders Society Pamphlet, I learned that some of the most basic things considered necessary to life could be a rarity to those who suffer from Bipolar. For starters, 70-90% of those with the disorder are unemployed or unemployable. Also, people with Bipolar are 2.5 times more likely to be victims of crime, will see an average of 4 Doctors before being properly diagnosed, and will spend an average of 8 years of treatment before any success in treatment is realized. Perhaps the saddest of all facts is that of the 4,000 suicides that occur each year in Canada, 90% of them were people with diagnosable mental illnesses. A fact I learned from another article from the 2011-2012 annual report of the Mental Health Foundation is that 49% of people with mental illnesses don't seek treatment because of the stigma surrounding mental health issues.

It was my intention to try and reach that 49% in writing my book, "Through The Withering Storm: A Brief History of a Mental Illness" (<http://www.amazon.com>). Over the course of 15 years, while trying many different treatments, going through medication after medication and numerous hospital admissions, piece by piece, story by story I recounted my life as best I could, using as much honesty and skill as I could muster, putting together something I hoped could really make a difference in the lives of people who suffer in silence. After having it published, it surprised me that there are a lot of other great resources out there, but I felt my book was special in that it told a story that was personal and real, and both humorous and dark at times. I can see it work in many people's lives too, when I go to book signings and try and explain to people about my book, there is the odd person who sees that the book is about Bipolar and mentions they have the illness or they have a son or daughter or uncle who has the illness. When I sell or give a book to these people, I feel I am doing my small part in sharing the gift I have been given of having control of my illness now for almost 12 years.

But to leave all that aside, I would like to talk more about Bipolar Disorder and how it has manifested itself in Canada. No attempt to explain Canadians can leave out the plight of the aboriginal peoples of Canada. There are many different groups, from the Squamish Natives of the West Coast to the Cree and Blackfoot of the Prairies, all the way to the Mic-Mac Natives of the East Coast. All of these Native people share a sense of loss at what things were like before the Europeans came, because when they did, the Native People of Canada definitely got handed the short end of the stick, and their culture and society still suffers greatly.

One of the greatest mishaps in Canadian history is the forcing of Native children into residential schools. In the guide of quick facts it was stated that 98% of residential school survivors had been diagnosed with some form of mental illness.

Some of the abuses and stressors that Native people went through in those places are even too horrible to mention here. One doesn't have to go far to see the fallout of the mismanagement of the education of the Native people. In the part of town I live in, which is known as the 'Little Italy' section of town, one only has to walk a short distance to see the shattered lives and drug abuse, alcohol abuse and prostitution that plagues the Canadian Native Population seemingly in exclusivity. One of the results of trying to raise Native children separate from their parents in residential schools is that since they were not parented, they never learned to parent, creating a problem that goes on for generations.

One of the startling facts of the Natives in Canada is that their rate of suicide is 5 to 6 times higher than the rest of the population. (This again from the quick facts pamphlet.) A staggering 26.3% of our Native or Aboriginal Population has a substance abuse problem and 26.1% of them have chronic depression. The problem is nearly insurmountable, and it seems that daily more cases of misuse of funds for reserve schools; medical care or addictions treatment programs are being reported in the millions. It seems a horrible downward spiral as the population can't escape their mental health issues, then self-medicates with substances and then spirals further downwards into their depression and ends up committing suicide. A prominent politician in Canada had this to say about the overall situation:

"If I knew then what I know now, mental health issues would have been close to the top of my economic priorities through the period I was in Government. "

-Michael Wilson, former Minister of Finance

Those things being said, I would like to move onto a lighter discussion of Bipolar Disorder in Canada. To begin with, Canadians have something in place, which they have held dear, and with pride, a Universal Health Care system that began in 1962 in the Province of Saskatchewan and was expanded to the whole country in 1968 with the passing of The Medical Care Act. If I were to even have had to pay 1/10th of my income for the treatment I have received for my Bipolar Disorder since I was 14, I would have never been even close to being able to afford it. And, though I wasn't always happy to be confined to a hospital, the food, recreation, support, medications and other necessities of care were all top notch.

Now, living in the community, I still have a number of special needs. Aside from a small income from writing, I am mostly unable to work a regular job. Here in the Province of Alberta, this means I am considered disabled, and I receive a small pension, which provides me with the basics of life and helps me meet my more pressing needs. Part of this pension is Federally Funded through Canada Pension Plan Contributions I made in the years I was able to work, and the remainder is an Alberta Government program called Assured Income For the Severely Handicapped. Many but not all Provinces have plans like this for the mentally ill and other disabled people, though the Canada Pension Plan funding is available across the

board. The second Provincial Pension also covers my medication costs, which would normally be astronomical.

Society's views in Canada are changing towards the mentally ill. Here in Edmonton, I am given the opportunity to use all city facilities free of charge, which means I can swim or lift weights any time I choose. I also get a greatly reduced price for a bus pass, and the bus service here is among the country's best. These services are made available to me simply through the fact that I am eligible for Aish. There are even a number of 'special' recreation facilities that I can take part in, from a store that offer recycled materials from old books to records and craft items free to those with a facilities pass, to free zoo admission, and I even get a substantial discount for our local waterpark. Not long ago I took advantage of this last benefit and went to the waterpark in West Edmonton Mall and filmed myself shooting down the slides then added in music later. I also started a project of filming things like my friends who suffer from similar illnesses and some of the Mental Facilities here in Edmonton, which can be found with a YouTube search for my channel, under my name (Leif Gregersen). In many of these videos, though a few were just made for fun, I try to help people to understand different people with different illnesses and some of the things they go through, from their first psychotic breakdowns right up to the medications that help them and those they don't feel help.

The last and perhaps most important part of the "good mental health equation" in Canada is housing. Many times people with a mental illness try and live outside of the hospital and find it too difficult because they can't manage their money, rents are too high or they have a great difficulty getting proper food. There are also a sad number who not only suffer from a mental illness, but also a substance abuse problem. Once again I am greatly blessed to be in a group home, which is regulated by the Provincial Government. The Group Home I am in provides me with a house to share with 2 other people, and all the meals and household needs for one subsidized price. The care is excellent, because the lady who runs the home feels that we should never get any less than what she would give her own family. We even get to pick out our own Christmas gifts and are often treated to free movies, pizza, or my favorite, fried chicken. The house more than meets my needs and having roommates gives me someone to talk to and interact with who I know will not judge me for having a mental illness because they have one as well. Medications are monitored and handed out each day, recreation programs exist and I end up living in a much better place in a much healthier environment than I could ever provide on my own. Too many times I have lived in private apartments, preferring total independence and freedom to life in a group home and it seems every time I get taken advantage of. The statistic that the mentally ill are much more prone to be victims of crime rings very true for me. In the last place I lived in the caretaker was a former member of a bike gang and was most likely an untreated mentally ill person. He liked the idea of bossing tenants around and resented that the former landlady had rented suites to people with mental health issues. One day I came home to greet him as he was leaving my apartment and re-locking the door, snooping for heaven knows what. In another place I was sharing a house that was

unsupervised and one of my roommates had constant drinking parties and once called the police on me because I ate a slice of a pizza he had left out all night. It was unbearable. I even heard that after I left on a number of occasions this same person who was so ready to give me a criminal record for a cold slice of pizza would get so drunk he would end up urinating right in the living room. I was very glad to leave that place.

My Personal Story

My illness began to manifest itself early in my life. I can recall, as far back as age five having thoughts that one could consider schizophrenic. I have a clear image in my head of looking at a picture of my mother and father and thinking that some government organization had taken me from my real family and set up a 'fake family' that I was now living with for some evil purpose. As the years went past, I was often in a state of depression. My Dad, trying in his own way to help once told me that I had to stop dragging my ass around because I was putting the street sweepers out of work.

My mother at the time was suffering from depression off and on and had to be hospitalized many times. Once I remember coming home to the sight of an ambulance parked in our back yard and learned later that my Mom had tried to kill herself. I didn't understand it at the time, but there had to have been times when I questioned her love for us because of her desire to leave us. Often, for at least 3 months at a time we would have to take a long drive every night to see my Mom in the hospital Psychiatric Ward. I will never forget coming home from one such evening and my Dad telling us that he didn't love our Mother anymore and I was consumed with fear and sadness that she would be left in the hospital to die alone, and part of that fear was that the same thing was going to happen to me one day because I knew I was a lot like her. I was to one day discover that I was even worse.

Not long after my 14th birthday, while I was mired in a world of War Movies, combat clothing and fights and a generally poor attitude, my parents made the decision to have me put under observation in the same Psychiatric Ward my mother had gone to. I was totally heartbroken, I spent an entire week avoiding the school classes they offered, being shuffled from test to test, reading a book I had about the Second World War, and trying to confound the nurses of the ward at every turn. The only good thing that came of it was that I learned how to play pool really well. At the end of the week my family came in for a conference with my Doctor, and I told them what I had thought was the reason for me being there. I had been fighting with my Dad a lot which I thought was due to his alcoholism and, according to what my mom said, if I went in there it might get us both the help we needed. When it came time for the conference though, the one person in the world I thought was on my side, my mom, changed her story and I flew into a rage and a flurry of fists,

screams and tears. The Doctor made the decision at that point to keep me for another week. I often wonder why he didn't take the step of having me taken from my family because of the violence in my home, both from my brother and father but after another week he sent me back, and had me on some prescription that I threw away shortly after leaving. It was an easy thing to do, I don't think my Dad much relished the idea of paying for the pills and he didn't notice I wasn't taking them for some time. As a result of being in there I tried to curb my behavior, wear more normal clothes and made more of an effort to have more 'normal' friends. It worked for a while.

The next few years passed and other than a continuing dependence on alcohol to relax or have any social interactions, things seemed a bit better. I was often plagued with depression though, so severe that I often had to force myself not to think of suicide. My sleep habits were awful, I would often stay up until the wee hours, especially on weekdays watching TV and working out and would sleep just two or three hours, and then drag myself to school unable to get the high grades I had gotten earlier in my school days. This went on for four years.

When I turned 18, the pressure at home became practically unbearable. I had a strong desire to finish high school but my Dad's drinking and anger directed at me was causing so much stress in my life I didn't know what to do. He wanted me out of the house but the job I had paid much less than what I would need for an apartment, much less the car I would need to get to school and work. Finally right on Christmas Eve, my Dad snapped and demanded I get out. I ended up selling my car and trying to find a place but it seemed so overwhelming an undertaking that I ended up literally begging my Dad to let me come back home. He did, which was likely the worst thing that could have happened.

Three months later all the depression, sleeplessness (I was working a night shift job and going to school full time) personal pressures and genetic predispositions came together and I completely snapped. One day a friend came to take me to a volunteer organization in the city and I just all of a sudden walked out, walked across miles of valley to my sister's house, and when her boyfriend wouldn't let me in the apartment, I took off my clothes and started screaming in their hall in protest. I was arrested and beaten by the police and taken to the hospital. As will happen with any person who displays such deviant behavior, a battery of tests were done to assure that I didn't have some kind of organic brain disease, and finally the possibility that I was suffering from a genetic mental illness was discussed. I refused to stay for treatment and wanted to go back to school, which was a complete disaster.

I went back to school and shortly after started a fight, hurt a young boy badly, and was arrested in front of all of my classmates. Nothing could have been more humiliating for me at that time. This time I was asked not to come back to school and spent the next 2 months being medicated and forcibly confined to a mental hospital ward. I hated everything about the place. The walls were greasy from

years of cigarette smoke, the windows were all barred. Any time a staff member felt like it they could throw you in an isolation room as punishment. And I was constantly on the receiving end of violence from both staff members and patients. How I got through it I will never know.

That is basically how I came to be diagnosed as Bipolar. Inside my head were things I didn't share with anyone, somehow my Doctors had to figure out what was going on without my help. I had a lot of delusions of grandeur that made me think a young woman I once knew was in love with me and had millions of dollars and all kinds of property and businesses that I owned and that she was somehow controlling what was happening to me. I even hallucinated that inside the human race there was a sub-race of special people that I had then evolved into being a part of by doing certain things. Basically, it was all a great psychosis, which manifested itself in my sick mind. It is important to note that people who have Bipolar can be psychotic, which means they think or believe or are tricked by their brain into believing false realities, but they are rarely psychopaths, which is a condition where a person has no normal emotions like compassion or empathy and will do evil things without the slightest tinge of conscience. I suffered a lot when people I knew thought I was a psychopath when there was no foundation for it at all other than some Television show that claimed to know better than men of medicine and used devices of fiction to scare people.

As mentioned earlier in this chapter, it takes on average 8 years for a Bipolar person to find success in treatment. For me it took much longer, from the age of 14 to the age of 30, but after all I went through, from years of living in squalor and not having anyone to talk to but my family and one or two friends, constantly suffering from highs and lows, being unable to work or sometimes even leave the apartment, there was a light at the end of the tunnel. I found the place I am living in now and have trained support staff and numerous friends. My medication works for me and I have taken up hobbies that I really enjoy, from photography to writing poetry, and just about all the drastic symptoms of my illness are now under control with medications. I really think that my life is as good or even better than many people my age, and definitely many people in my situation.

I feel that what it takes is a combination of mental, emotional, support, medical/psychiatric and self-disciplinary factors to come together for a person with a mental illness to come into an equilibrium of good mental health. One of the sad things I often see is that many people either give up on their physical health when they suffer, or deal with their psychiatric condition but not their health in totality. It is very common in the group home I live in for cancers and heart disease to claim the lives of perfectly good people who could have prevented the problem that killed them. I feel very grateful to have a combination of proper diet structure, the ability to use fitness facilities, a good part-time job and the mental/emotional support I get. I am also very thankful that I have been given the honor of writing this chapter about Bipolar Disorder in Canada and hope that my book, "Through The Withering Storm: A Brief History of a Mental Illness" can be used as a further resource for

those who suffer to gain insight and understanding of Bipolar and other mental illnesses. The book is available at www.amazon.com under the above title, in both Kindle and Paperback format, and has been hailed as a great resource for anyone seeking a better understanding of Bipolar and mental illness as a whole. As well, those who are not sure if they would like to commit to purchase can read the first chapter of the book for free at www.valhallabooks.com right on the main page.