



Supporting Families/Whānau Taranaki Newsletter



April/May 2016

Circle of Security Update

The first eight week 'circle of security' course in New Plymouth has finished with 6 out of 7 women completing the course and everyone showing some or marked improvement in their maternal attitude questionnaire. Sally Phillips, our facilitator, is just starting in on the first of the monthly follow up sessions that will go on for the next 6 months.

Some comments from the first group of participants:

"My child's tantrums have dropped dramatically from 3 per day to 1 maybe 2 per week."

"I see what my child's needs are and how a parent/child relationship needs to work."

"I am now able to see that being a mum is a beautiful experience and by embracing it my children are feeling my love for them."

We have begun receiving referrals for the next course which will be in Stratford starting on May 11th.



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The four walls of wellbeing

This *autumn* issue of our newsletter hopes to incorporate Te Whare Tapa Whā— A Maori health model which looks at a whanau or individual's four dimensions of wellbeing:

Taba Tinana (physical health): through an article on the brain and stomach connection, recognising that health and wellbeing cannot be separated from the aspects of mind, spirit and family.

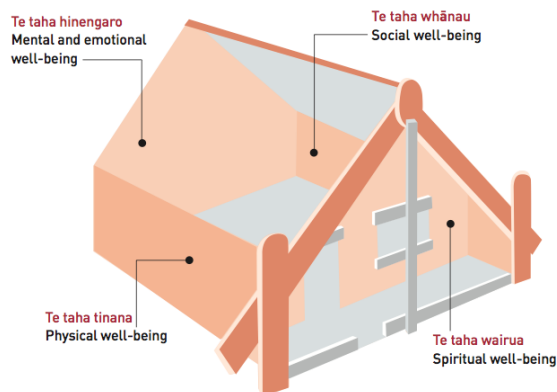
Taba Wairua (spiritual health): through an article on the benefits of music, acknowledging that health can relate to unseen and unspoken energies.

Taba Whanau (family health): through an article on supporting a family member with mental illness, understanding the importance of family in the process of recovery and healing.

Taba Hinengaro (mental health): Thoughts, feelings and emotions are integral to life, to how we see ourselves and our place in the world. Therefore, each article is about mental health.

Each of these four walls of the house are equally important to our wellbeing. When one wall is weakened, it risks pulling down the whole structure. It is therefore important to nurture and strengthen each wall. For this reason SF Taranaki are incorporating the Whare Tapa Whā model into their assessment tools to help guide work with families, and to help gain an overview of families' overall wellbeing.

Each of these four dimensions of hauora influences and supports the others.



Mason Durie (1994) Te Whare Tapa Whā concept of hauora

Supporting a family member with mental illness



Being diagnosed with a serious mental illness can be a shock — both for the person diagnosed and for his or her family and friends. On the other hand, finally obtaining a diagnosis and treatment plan can sometimes help relieve stress in the family and start moving recovery forward.

Family members can be an invaluable resource for individuals dealing with serious mental illnesses. By learning more about the illness, you can support your loved one through diagnosis and beyond.

While symptoms of serious mental illnesses vary, the following signs are among the more common:

- Social withdrawal.
- Difficulty functioning at school or work.
- Problems with memory and thinking.
- Feeling disconnected from reality.
- Changes in sleeping, eating and hygiene habits.
- Alcohol or drug abuse.
- Extreme mood changes.
- Thoughts of suicide.

If you're concerned that a friend or family member is exhibiting these signs, try to stay calm. It's easy to imagine the worst-case scenario, but signs of mental illness often overlap with other problems. Consider whether there are other circumstances that might be affecting the person's mood or behaviour. Did the person recently experience a shock, such as the death of a loved one? Have they recently lost a job or started a new school?

Regardless of your answers to those questions, don't let your fear of a diagnosis prevent you from encouraging your loved one to seek help. Start by talking to him or her. Express your concerns without using alarmist language or placing blame. You might say, "I've noticed that you seem more stressed than usual," or "I've noticed you don't seem like yourself lately." Then back up those statements with facts, pointing out changes in hygiene or daily activities, for example.

Encourage your loved one to talk to a trusted health care provider. If he or she is hesitant to see a mental health specialist such as a psychologist, suggest a visit to their GP. Offer to accompany them to the appointment if they'd like.

If your family member doesn't take you up on your offer, consider alerting his or her doctor's office with your concerns. Though a doctor may not be able to share information with you due to privacy laws, it will give them a

'head's up' to be on the lookout for signs of mental health problems.

If you feel your loved one is in danger of harming himself or herself, or harming someone else, that's an emergency. Don't hesitate to call 111.

It's entirely normal to experience a flurry of emotions when a loved one is diagnosed with a serious mental illness. Guilt, shame, disbelief, fear, anger and grief are all common reactions. Acceptance can take time, both for the diagnosed individual, for you and for other family members and friends. That acceptance happens at a different pace for everyone. Be patient with yourself and others.

One of the most important things you can do to support a family member with serious mental illness is to educate yourself. The more you learn about what to expect, the easier it will be to provide the right kind of support and assistance.

Familiarize yourself with the symptoms of the diagnosis so that you are able to recognize when your family member might be showing signs that his or her illness is not well controlled. Remember, too, that there's a lot of information on the Internet. Find trusted sources of information, and don't believe every horror story.

Remember that you can contact your local Supporting Families' Support Worker for information.

Medications can be helpful for controlling symptoms of many serious mental illnesses. But they might take a while to become effective, and medication alone is often not enough to keep these illnesses in check. **Encourage your loved one to take advantage of other resources, such as peer support groups.** Peer support can be seen as effective for many people moving through difficult situations, due to people with shared experiences better relating to one another and consequently offering more authentic empathy and validation. Peers can offer each other practical advice and suggestions for strategies that professionals may not be able to offer or even know about.

In Taranaki, there are quite a few agencies which offer mental health

peer support, whether it be group support at Progress to Health or one-on-one support with Tui Ora's Consumer Advocacy Peer Support.

When a loved one is living with serious mental illness, it's easy to want to take charge. That's often especially true when the person is your own child or partner. But taking on complete responsibility for him or her isn't healthy for either of you. **Individuals with serious mental illnesses are more likely to thrive when they are allowed to take appropriate responsibility for their own lives.**

Individuals with mental illnesses still have an identity, and they still have a voice. Engage your loved one in open and honest conversations. Ask what they're feeling, what they're struggling with and what they'd like from you. Work together to set realistic expectations and plan the steps for meeting those expectations. Recognize and praise your loved one's strengths and progress. **Research shows that compared to offering positive support, repeatedly prompting or nagging people with serious mental illnesses to make behaviour changes actually results in worse outcomes.**

Unfortunately, people living with mental illness still experience stigma and misconceptions. Stigma refers to negative attitudes (prejudice) and negative behaviour (discrimination) toward people living with mental illness. Your family member may try to hide a mental illness and may not get help because of a fear of how they will be treated by family, friends and the community. Often, even if your family member is honest about mental illness and gets help, he or she may feel shame or have low self-esteem.

Stigma is not reserved only for people living with mental illness. It also affects family members and friends. Sometimes they struggle with the reality of mental illness and may have feelings of embarrassment and regret. Embarrassment may also prevent people from supporting their family member living with mental illness.

Remember that you and your family member are not alone. Mental illness affects at least one in five people. It may benefit you and your family member to share your experiences with people who've "been there" (affected by mental illness).

While that can be a difficult reality, the fact is that people diagnosed today can expect better outcomes than ever before. Medications have improved, and new evidence-based psychotherapeutic interventions can have powerful and positive effects. So try to stay positive. **With new treatments and a better understanding of mental illness, the majority of people living with mental illness will experience recovery. One of the most important things you can do to support a loved one with mental illness is to have hope.**

References for article: <http://www.apa.org/helpcenter/improving-care.aspx>; <http://ourhealthyminds.com/family-handbook/index.html> - *Pieced together by Gareth Andrewes*

SF Taranaki Groups for 2016

Eating Disorder Family Support Group

Wednesdays-fortnightly 6.30pm—8pm

SF Taranaki Office

Family Support Group—New Plymouth

1st Mon of the month 5:30—7pm

TSB Community Trust House

21 Dawson St. NP

Family Support Group—Stratford

1st Mon of the month 7-9pm

Stratford Community House

52 Juliet St. Stratford

Touched by Suicide—Hawera

2nd Thurs of the month 7pm

Summit House, High St.(opp. Warehouse)

Touched by Suicide—New Plymouth

2nd Thurs of the month 7pm

TSB Community Trust House,

21 Dawson St.

Mindfulness—New Plymouth

Every Friday 9:30am—10:30am

@ SF office

50 Devon Street West, 3rd Floor

Family Connections-Stratford

For family members of people with Borderline Personality Disorder or emotional dysregulation (Currently Underway)

Family Connections-New Plymouth

Starting on the 3rd of August, 7-8:30pm

SF Taranaki 06 757 9300

manager@sftaranaki.org.nz

Great Expectations

Often as we travel the path of supporting a person experiencing mental illness we seek to learn about their illness, and in doing so, find out more about ourselves in the process.

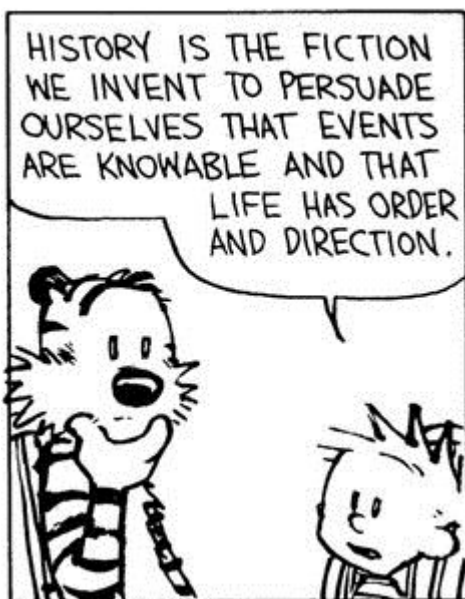
Some things we learn about ourselves we may find comforting, such as discovering your own capacity for compassion. Some things we discover may be more difficult to accept, such as finding that much of the pain we feel at times when supporting a loved one has more to do with our own thoughts about the situation as opposed to the reality of the situation.

**The primary cause of unhappiness
is never the situation
but your thoughts about it.**

--Eckhart Tolle

We have expectations about virtually everything in our lives. Perhaps we believe that expectations can propel us into action and help to manifest future joy. Sometimes expectations help us to prepare for what may come, but more often than not expectations are a slippery slope to disappointment.

Buddhists talk about the “wanting mind” and the power of expectations to create suffering, and that’s certainly true when it comes to our relationships. Expectations, might have a positive influence, and can challenge or motivate people. However, expectations which are unrealistic might not be helpful, and could have a negative impact on our thoughts, feelings and behaviour.



Bill Watterson

At the risk of seeming to challenge optimism, perhaps other people’s difficult behaviours are easier to accept when we expect less from them. Our disappointment, irritation, anger, sadness most often arise because others didn’t respond to us in the way we imagined they would, or wished that they would.

When you consider what might have been, or what could be possible, in contrast to what exists in the present, you may experience disappointment (leading to feelings of irritation, anger or sadness). You might experience being angry with a family member experiencing mental illness or addiction, and that is far easier to feel than your disappointment in the relationship. Disappointment forces you to admit that you did not get what you wished to have, and it is actually easier for you to protest with anger than it is to encounter your sadness about the course of events. Anger is persistent and will allow you to continue idealizing what could have been, while disappointment accepts reality.

So perhaps the way in which to foster resilience is to construct realistic appraisals of what you need, avoid idealizing what could be, and come to terms with what you have. By being fixed on how your loved one once was in the past, and how you expect them to be, it becomes hard for us to change the way we relate to our loved one and to accept where they are with their recovery, as well as their potential to grow and change. - Gareth Andrewes (*North Taranaki Fieldworker*)

Mindfulness for family members of people with mental illness every Friday @ 9.30am.

Each week exploring various components of Mindfulness. This group is about engaging in meditation exercises, exploring useful insights and sharing resources and experiences with one another.

contact gareth@sftaranaki.org.nz for more info and to register.

“Mindfulness means
paying attention
in a particular way;
On purpose, in
the present moment,
and non-judgmentally.”

Jon Kabat-Zinn



Future Forward: *Widening Horizons*

Robert Miller and Ian Soosay bring recent academic research findings and look to future possibilities

Early Intervention in Psychosis and the international debate around Classification Systems of Mental Disorders

When: Friday, May 20th 9.30am - 12.30

Where: New Plymouth TDHB Staff Training Suite

Robert Miller: Re-inventing the description and classification of mental disorders.

The topic is of course relevant to use of the word 'schizophrenia', but is much broader than this. Comprehensive reformulation of systems for describing and classifying mental disorders is now part of an intensifying international debate. It is important to be aware of, and to contribute to this debate, although it may be a challenge to statutory services, which, in many ways are obliged to use 'official diagnoses'.

Ian Soosay: Early Intervention in Psychosis: Where to from here?

Early psychosis services in New Zealand are 20 years old this year. What have we learnt over the past two decades? Early Intervention services are expanding in many countries, with some countries taking very different approaches. In this talk, I will give an overview of the learnings from Early Intervention research over the years and discuss the implications for us here in New Zealand.

And in the evening with families and the community...

Expanding our Horizons: research into schizophrenia and psychoses and building Coalitions for Change

When: Friday, May 20th 5.00pm

Where: TSB Community Centre, 21 Dawson Street

Entry \$25. **Free to members or people currently supported by Supporting Families in Mental Illness Taranaki.**

Ian Soosay: Schizophrenia and psychotic disorders: What do we now know and what do we need to know?

We have learnt a lot about schizophrenia and psychosis in recent years, yet it still feels like we are some way away from understanding the condition. In this talk I will provide an overview of the current genetic, neuroimaging and epidemiological research in schizophrenia, including some of the research that is happening here in New Zealand, and some of the research that still needs to be done.

Robert Miller: Building coalitions in mental health: The agenda for times of change.

In the past, many people have been concerned about mental health issues, but they have been speaking from very different perspectives, and sometimes spend more energy defining their opponents than their allies. Today, I see signs that these tensions are relaxing, and there is the possibility of a broad coalition forming, despite the diversity of views. Such a coalition might become so strong that it could be a critical force advocating for the fundamental change of services, which is needed.

To register for either of these sessions please contact the office on (06) 757 9300

Mental Health benefits of Music

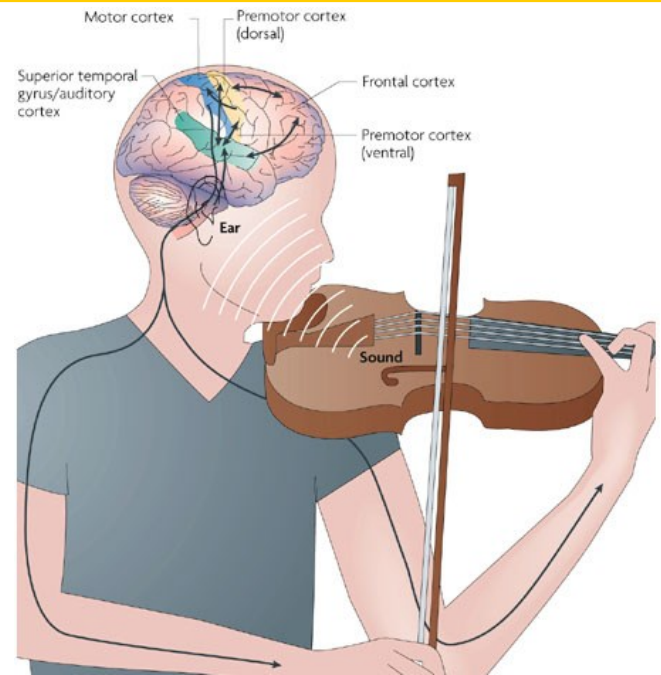
We've all done it. Turned on a love song when we're feeling romantic. Turned on something lively when we're cleaning house. Even cried when certain songs come on with stories that stir our hearts.

Music plays a role in everyone's life to a certain extent. Some more than others. Each of us has our own preferences, some of us a little more eclectic than others. But each of us reaches for music for one reason or another.

Music affects the body in six main ways:

- 1) Music can help manage or reduce the effects of chronic (osteo- and rheumatoid arthritis) and post-operative pain. Music distracts, provides the patient with a sense of control, releases endorphins that counteract pain, and relaxes a person by slowing their breathing and heart rate. It reduces blood pressure, the severity, frequency, and duration of migraines and chronic headaches, and increases the production of immune-boosting hormones and decreases cortisol levels, which can interfere with immune response.
- 2) Music enhances higher brain function such as reading and literacy skills, spatial-temporal reasoning, mathematics, emotional intelligence, memory. Music improves concentration and attention.
- 3) Music improves athletic performance as it helps reduce the feeling of fatigue. It reduces muscle tension, which in turn improves body movements and coordination.
- 4) Music can help energize a person who is feeling fatigued and improve productivity.
- 5) Music calms, relaxes and can help a person fall asleep (as is commonly seen with infants and young children). Music has also been shown to lower cortisol levels which, in addition to boosting the immune system, also reduces stress.

While most of a person's brain functions all the time, many people tend to use one side at a time for any particular task – left brain or right brain. "Left brainers" are more logical, rational, analytical, objective, and tend to look at parts that make up the whole. "Right brainers" tend to prefer randomness, are intuitive and subjective, synthesize and look at information and the world around them as a whole. Generally, those who are left brained are more adept at thinking logically, analyzing, and accuracy, while those who are right brained focus more on the way things look and feel, and are creative.



Music is one of the few activities that involves the use of the whole brain, particularly for those who play an instrument or sing, as opposed to those who just listen (though listening has benefits, too). Using both sides of the brain maximizes learning and retention of information.

It is surmised by researchers at Arizona State University that music affects the levels of oxytocin in the brain. Oxytocin is a hormone that is known as the "love hormone" and is being investigated for its role in social recognition, bonding, and anxiety. "It evokes feelings of contentment, reductions in anxiety, and feelings of calmness and security..."

Music has also been shown to have an effect on serotonin levels. Higher serotonin levels help control memory power, learning, mood, sleep, body temperature, and arousal.

So whatever your mood, listening to the type of music your body craves, or finding the right kind of music to set the kind of atmosphere you need to relax, have a good time, or study, can make the world of difference.

- Bernie Kira (*South Taranaki Field Worker*)



Watch what you eat...

Why? Because what goes into your stomach may have a bigger impact than you realise.

We often take for granted the relationship between our stomach and our brain. Some of us get blind-sided by 'hanger' (hunger causing anger). When we are nervous we get "butterflies in our stomach", we can find emotionally distressing situations or decisions "gut-wrenching", or we may have a "gut-feeling" about something- even our common slang indicates that there is a dance happening between tummy and brain.



Research also shows that we are full of bacteria. We are bugmen! Our bodies are full of 'microbiome', most of which lives in our gut. These residents play multiple roles in our overall health, including disease and brain disorders. Research also tells us that before we are even born we are sensitive to our mother's microbiotic makeup, so much so that it can alter the way our brain develops. Then throughout our lives, our microbiome continues to be vulnerable, as we expose it to stress, toxins, chemicals and various foods.

Within the lining of our stomach can be found a neural network called the enteric nervous system, a complex system of about 100 million nerves. This is why our gut has come to be known as our second brain, and plays a vital role in our physical and mental health. It is recognised that hormones, neurotransmitters and electrical impulses travel through a superhighway of nerves between our two brains (our head one and our tummy one) communicating back and forth.

Food for thought... *sorry about the pun.*

- Gareth Andrewes (*North Taranaki Field Worker*)

Free insulation and installation support

Warm Up New Zealand: Healthy Homes projects provide free ceiling and underfloor insulation to low-income households with people who have health needs related to cold, damp housing.

Who should apply?

You may be eligible for a Warm Up New Zealand: Healthy Homes project if:

- you're a home owner or tenant with a Community Services Card, and
- your house is occupied by someone under 17 years or over 65 years or
- someone in your house has health needs related to cold, damp housing if you live in an area covered by one of our projects.

Although insulation will be free for eligible homeowners and tenants, landlords of the eligible tenants may be asked to make a cash contribution.

Not all areas within Taranaki are covered and availability is becoming limited in some areas. Please check with the listed service providers to find out if they are operating in your location.



Smart Energy Solutions: 0800 888 766 info@smartenergysolutions.co.nz

WISE Better Homes: Healthy Homes Taranaki: 0508 238 837 enquiries@betterhomes.co.nz

If you don't qualify for a Warm Up New Zealand: Healthy Homes project, there may be payment options with local councils and banks to help you with the cost. This includes adding the cost to your rates or as a mortgage top up.

You may be able to get a discount of at least 20% from some service providers if your household is not eligible for free insulation through the Warm Up New Zealand: Healthy Homes programme.

Real time Feedback– *Coming to a DHB near you.*

What is Real Time Feedback?

RTF is an electronic survey that allows Mental Health and Addiction service providers to capture a continuous stream of feedback from service users, family and whānau. This will help ensure that people who use our service can contribute to quality improvement. Questions are completed on a fixed or portable tablet.

Almost all DHBs are implementing this system so we will be able to benchmark our feedback against similar DHBs.

The first question identifies the type of person completing the survey.

I am completing this survey as...

A consumer or service user or person seeking support, family / whānau or friend

So as you can see the opinion of families is being sought so don't think it's just for the person seeing the clinician.

For the next six questions people are invited to click on one of the faces below depending on how happy or unhappy they are with the service they have received.



The questions are about respect, involvement in decision making, clinicians communicating with each other, family inclusiveness in treatment and decision making, support, and over all satisfaction.

The next two questions require a narrative response and ask what people like and don't like about the service.

The system also allows for the service to ask 2 questions of our own. These questions will change depending on the feedback we require at the time. The first two Taranaki only questions we will be asking are:

When I need to see someone the wait time is not too long.

My parenting responsibilities are included in my assessment and treatment. (Will have an N/A answer option)

We chose these two questions because Wait Times and Supporting Parents Healthy Children (COPMIA) are two areas we are working on improving and this is how we can find out if you think we are doing the right thing.

What happens to the information?

Each time a person completes a survey the information is downloaded onto the server and data updated. The statistical data will be immediately available which is why this system is called 'Real Time Feedback'. The Consumer and Family Advisors will be reviewing the feedback. Names or statements in the narrative responses that could identify people will be removed, this currently happens with paper surveys. Reports will be written and submitted to our Clinical Governance Committee with recommendations made for review or improvement. Once we've ironed out any bugs you will be able to view the graphs via the TDHB web site.

Real Time Feedback is NOT:

- A complaints process. People will still need to follow the complaints procedure currently in place if they have issues individual to themselves to address. (This is easy but if you want help to make a formal complaint please contact me.)
- A vehicle for people to give feedback on individual clinicians.

- A replacement for face-face meetings to discuss issues with the Family and Consumer Advisors.

How will I get to fill in the survey?

- Where a person has an Outpatient or Alcohol and Other Drug appointment staff will invite people to complete the survey in the foyer before they leave. The tablets will be located in Mental Health Outpatients reception area and Alcohol and other Drugs reception area. Have your say whilst you are waiting.
- Mobile Community Team and Acute Home Based Treatment Team staff will be rostered to take a device out with them to appointments and invite people to complete the survey. If you are present at a home visit appointment and the clinician has the tablet with them please give it a go.
- People in Te Puna Waiora will be invited to complete a survey prior to discharge and the Consumer and Family Whanau Advisors will make the survey available to people who are in the unit for a longer period of time.

How often should I complete the survey?

Whenever you get the opportunity please do it. Your experience and opinions will probably change over time, so if you see a tablet, have your say.

Will Clinicians Get to see the feedback?

Yes. Feedback will be collated by the Consumer and Family Advisors and the results shared with each team. Positive feedback will be celebrated and any recommendations for change will be made. Clinical staff will get to discuss the feedback and address any recommendations.

Is the feedback anonymous?

Yes. Even if you typed something into one of the narrative questions that might identify you or your family member the Consumer and Family Advisors will censor it by rewording what you typed but keeping your intent.

For example if you typed “My son David” We would alter that to “My son [Name Deleted]”

This is also the case where you might mention specific staff members, even if you want to praise them. If you want to praise a staff member tell them to their face, it'll make their day, or you could write to their boss.

How will I know what to do?

It's incredibly easy. The tablets are touch screen and if you don't write much in the narrative section it takes less than two minutes. If you see one of the tablets you don't need permission to use it, just go for it.

All going to plan we expect to be able to test this system in May and hopefully be running in June.

For more information go to:

<http://hdcrtf.co.nz/>

I first heard about RTF a couple of years ago when it was being trialled and I've been eagerly awaiting the roll out ever since. A similar project was rolled out in Britain which significantly improved the quality of feedback and the amount of feedback. It is one step toward giving the people who use these services greater influence over how these services operate and so better fit what people need.

If you have any questions or concerns call me:

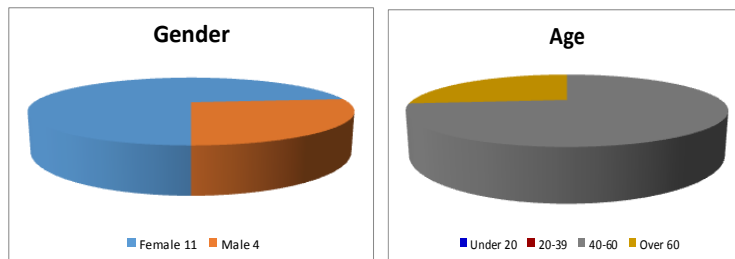
Jim Dickinson
Family Whanau Advisor
Mental Health
Taranaki District Health Board
06 753 7749 Ext 8550



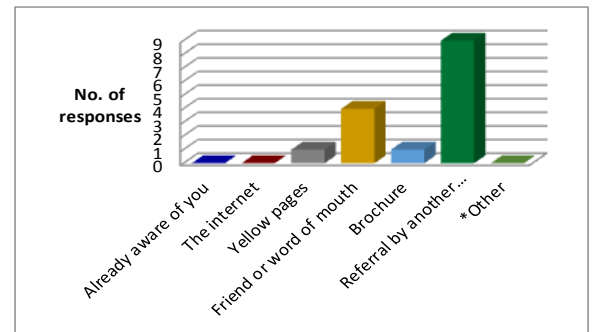
Supporting Families' Survey Results from 2015

Last year a survey was carried out with families who accessed our service by our Mental Health and Addictions Certificate student Shane Martin. We thought it may be interesting to share an overview of the results with you, to be transparent about what we feel were strengths and what could be improved (although we always look to improve).

Gender & Age:

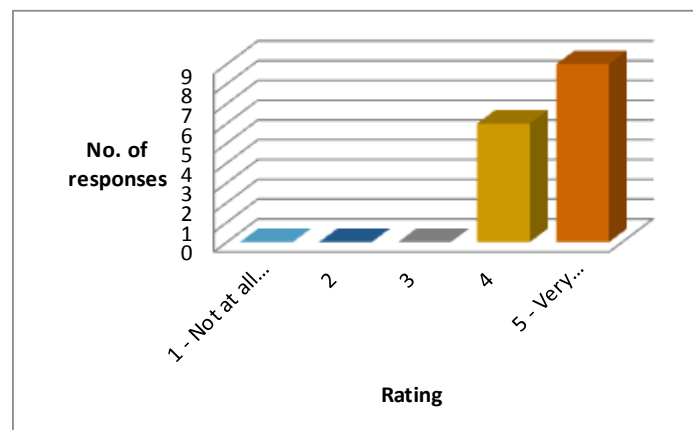


How did you find out about us?:

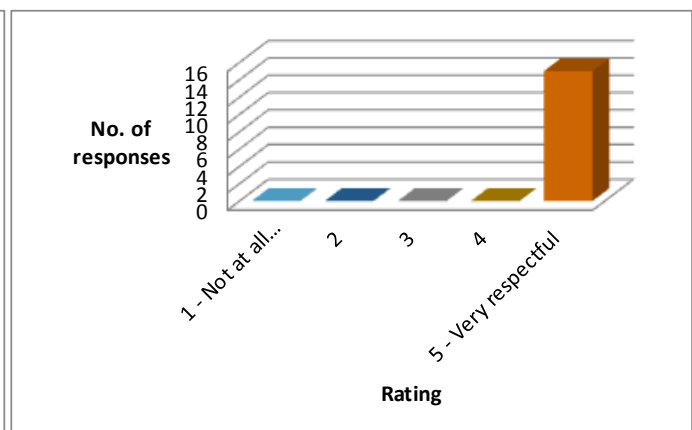


Performance & Attitude of Staff:

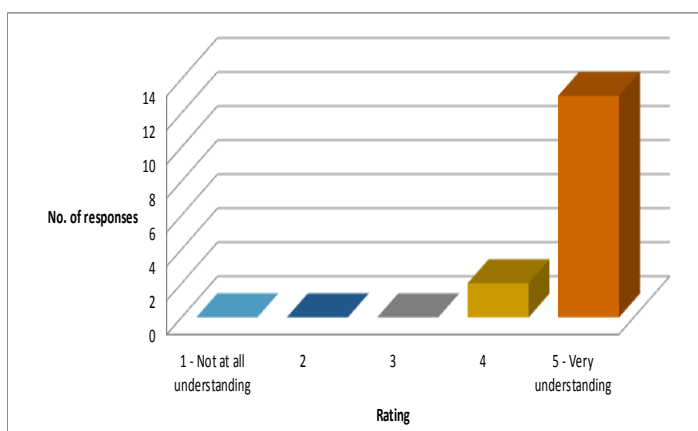
Knowledge:



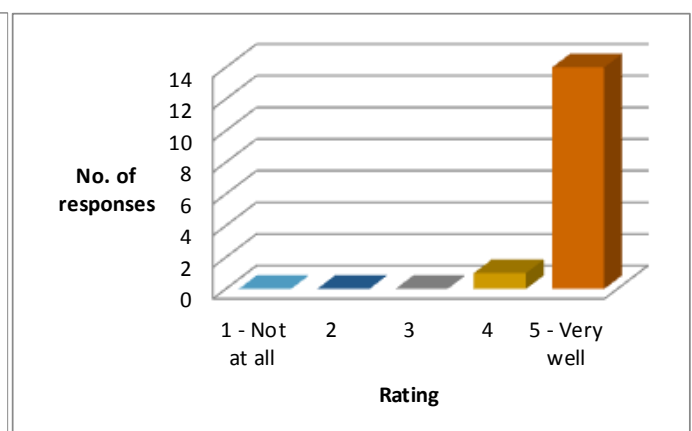
Respect:



Understanding:



Listening:



A huge thank you to all of those who took part in our survey, this will help us to improve the quality of our service!



Some of the feedback from the survey...

"It was useful to discuss with support worker my concerns and to know support was available."

"I was under so much stress and pain, it was nice to have someone to talk to and take my mind off things. I looked forward to the meetings."

"It was the fact they were in contact and were prepared to listen, because we didn't know where to turn. We had been messed around trying to get a diagnosis for our family member."

"They allow you to download your problems and be honest. "

"The support workers, they have empathy, are a breath of fresh air, are understanding & have a fountain of knowledge, which was is invaluable. I wouldn't have been able to cope without them. "

"The support are accepting, supportive, they give opportunities that lead into other things."

"To know they are there. They have a listening ear and hear us out. They may not always be able to help with information but their support is very helpful."

"Their professionalism, helpfulness, friendliness. They listen."

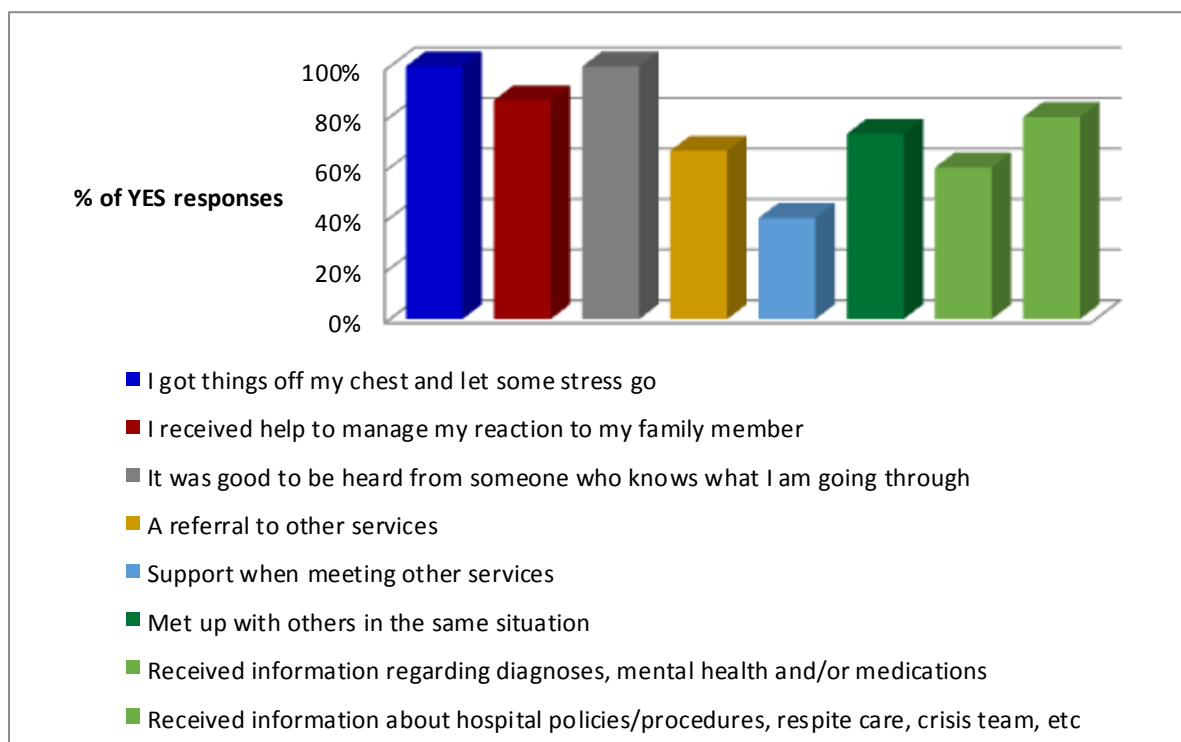
"Someone there who understands and can help." "Very approachable"

"Their honesty about me and the situation I found myself in."

"I clicked with the support worker and could talk about anything."

"They're definitely onto their job. Their kindness. They're respectful."

Which of the following outcomes did you achieve:



Our Mission: To provide a community based service to support, educate, inform and advocate for families, whānau, people and communities affected by mental illness.

<https://www.facebook.com/SFTaranaki>

Level 3 Brougham House 50 Devon Street West., New Plymouth



Find us on:
facebook®

MEMBERSHIP & SUBSCRIPTION APPLICATION

First name:

Last name:

Postal Address:

Work Phone:

Home phone:

Mobile Phone:

Email:

PLEASE TICK TYPE OF MEMBERSHIP (Note: Subscriptions are annual)

Family Membership \$35 ☐

Single Membership \$25 ☐

Community Services Card Holder or Student ID \$15 ☐

Would you like to add a donation to your subscription? Yes ☐ No ☐

Amount: \$ Do you require a receipt? ☐

Please return payment to PO BOX 8291, Central New Plymouth, 4243

Or Online Banking TSB 15-3942-0414737-01/ref SUBS

IF YOU HAVE ANY QUESTIONS PLEASE CALL US ON 06 757 9300

OR EMAIL Manager@SFTaranaki.org.nz

A Coffee morning will be held on
the 1st Tuesday of every month,
10am at the Disabled Peoples Craft Centre, 83
Hine Street, New Plymouth.



Hours Mon to Fri 8.30am- 5pm

06 757 9300

Crisis Team: 0508 277 478

Te Puna Waiora: 0508 292 4672

The views expressed in this publication are not necessarily those of the organisation. If you wish to reproduce any items from this newsletter please contact our office. Comments, letters and contribution on all aspects of mental illness are welcome.