



Issue 11 2023
Free

LETSS Get Informed

Lived Experience Telephone Support Service

LETSS Shout Out
Safe Haven

Interview with a...
Psychologist

Things I've learnt...
About Going Back to
Study



**Links to
Wellbeing**

Links to Wellbeing

Counselling and

Mental Health Support

Across Central

Southern Adelaide

Links to Wellbeing is a consortium commissioned by the Adelaide PHN and run in partnership between Neami National, Mind Australia, Skylight Mental Health and Uniting Care Wesley Bowden.



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LETSS GET INFORMED

In this issue, the LETSS team have focused on the value of accessing information and learning. Knowledge is powerful! We have included some articles on different types of therapy and various mental health concepts. We also wanted to remind you of the importance of taking a break, so you'll see some familiar sections focusing on mindfulness and self care. In addition to this, we have included a new section called 'Things I've Learnt', in this issue a Peer Worker shared what they have learnt through tertiary education.

To grow without understanding, is to grow without intention.

Sam - Peer Worker

A photograph of a brown cardboard box with a white rectangular label on top.

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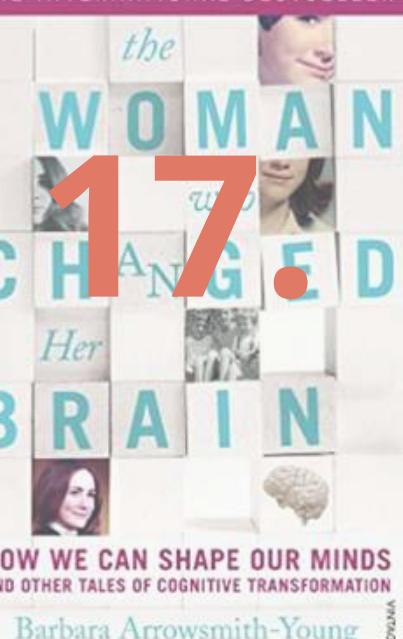
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THE INTERNATIONAL BESTSELLER



LETSSAus



letssaus



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1800 013 755



THINKING ABOUT THINKING

unpacking cognitive distortions

In this article we unpack a few thinking styles, that are very common, but often unhelpful. That's not to say that these thinking styles are inherently 'bad' but just to bring attention to them. Often being aware that we sometimes slip into certain ways of thinking that may increase our distress, is the first step in being able to diffuse and challenge these experiences (where this feels helpful). This article is by no means an exhaustive resource, but we hope there is something here that you find valuable and helpful!

Confirmation bias

Confirmation bias is the tendency of people to favour information that confirms their existing beliefs or hypotheses. For example, if you feel like you are unlikeable and have difficulty connecting with people

you might actively remember examples where you've felt disconnected or out of place in social situations. You might have more difficulty focusing on all the instances where this has not been the case.

Snowballing or Catastrophising

Got something coming up you are a bit concerned about? Find yourself constantly thinking about it and imagining the worst possible outcome? You're not alone! It is the tendency of many of us to spiral into 'a worse case scenario'. For example, 'if I fail this test, I will never pass the subject, fail my entire course and never graduate and be able to find a job....' and on and on. Often times sitting in these thoughts and feelings can also make it feel as though these situations are very likely to happen, when in reality there are lot of other possible (and probable) outcomes.

Should and must statements

Unfortunately it's really easy to become self-deprecating when we are feeling low, especially when related to depression. Let's face it, depression can be very debilitating. I know I have struggled to get out of bed while experiencing major depression. People can become angry at themselves for not going about things in the way they usually do "I SHOULD be able to get up and go out". The reality of the situation is that it becomes even more important to be kind to ourselves, when we're feeling low.

Mind-reading

We all have a tendency to do it, try to read what a facial expression or particular phrase means. Often we wonder if we've done something wrong or if that person is seeing or feeling us negatively. Unfortunately, we get it wrong 99% of the time and the only way to understand what a person means or may be feeling is to ask them. Conversely, many people over-estimate the ability of loved ones to read their thoughts and know how they are feeling. This includes assumptions like "you should know when I'm upset".

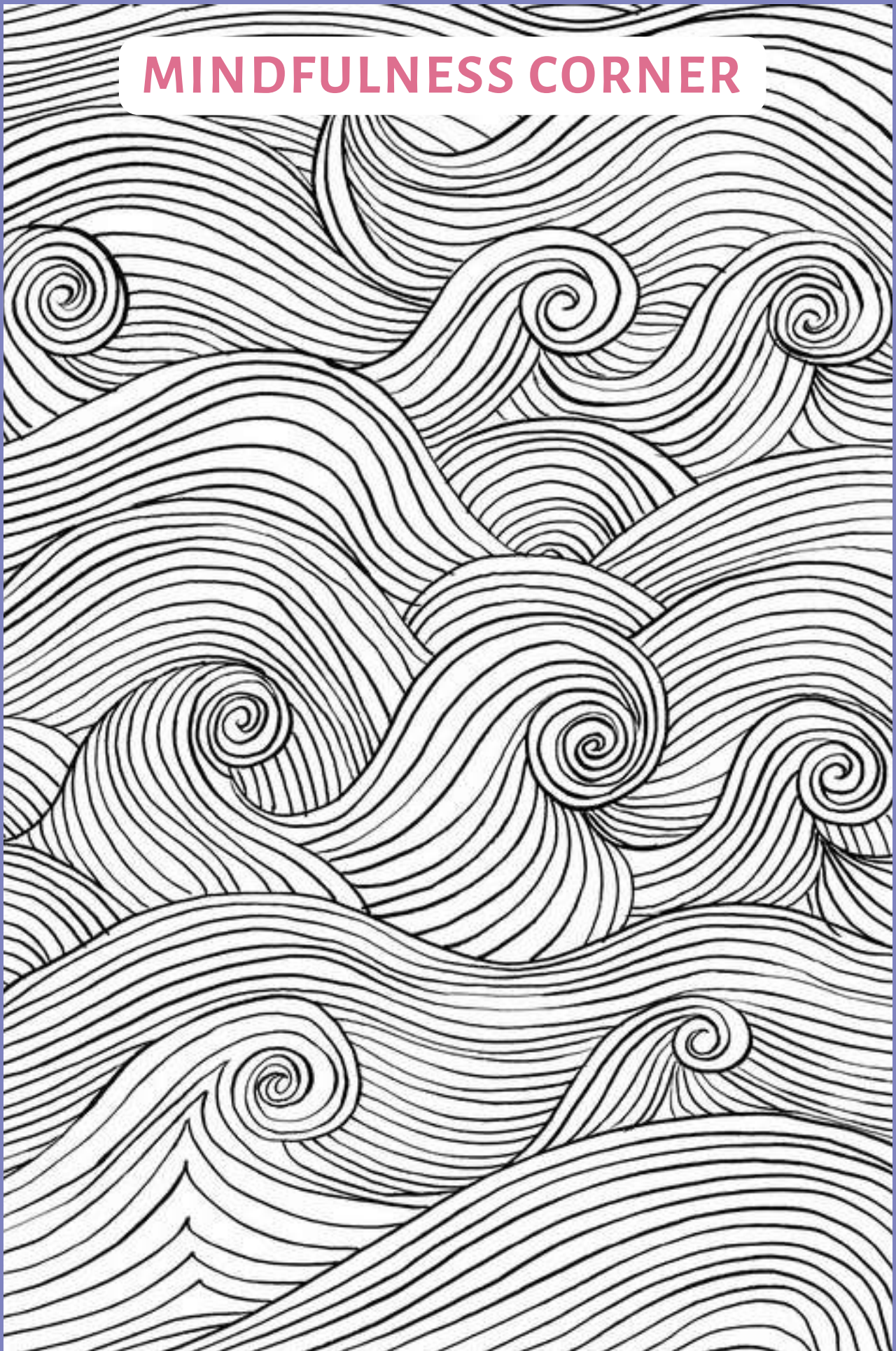
Fundamental attribution error

Fundamental attribution error is when we wrongly attribute characteristics and behaviors to someone based on the impression we have of them when we see them. I.e, thinking someone who is dirty or disheveled is not successful or wealthy, or that when someone is distracted during conversation it's because they're rude or dismissive. It means that someone is less likely to think critically about why someone else is behaving in a particular way and not take into account a range of situational factors that may be contributing to their behaviour. E.g. they may not consider that someone is disheveled because they have had a rough week, or someone is distracted in conversation because they have just received some bad news.



Do you feel like you engage in any of these thinking styles?

MINDFULNESS CORNER







DIFFERENT TYPES OF THERAPY

Let's talk about therapy! First of, what is it? Most of us will have some understanding, but the idea of going to therapy or what it *really* looks like might be a bit confusing/intimidating/unclear. Do you just sit and talk about your feelings? Will your therapist give you life advice and solutions to all the challenging things in your life? Will you be guided through meditation and mindfulness exercises? The answer is yes to all! (Well almost... unfortunately therapists aren't magical people who can instantly 'fix' and 'solve' challenging issues).

We realise this doesn't clear things up much, but we hope the rest of the article will. We're going to unpack a few of the more common types of therapy to hopefully give a bit of a better idea of what to expect and what to look for!

COGNITIVE BEHAVIOUR THERAPY

This is one of, if not *the* most commonly used talking therapy. It's fairly structured in nature and essentially looks at the links between how we think, feel and behave. More specifically, it often involves identifying thought patterns or beliefs that may be 'irrational' and exploring the ways in which these beliefs could be causing distress and impacting our behaviour.

What is it used for?

Cognitive behaviour therapy is very versatile and is used to address a variety of different mental health and emotional concerns. These include but aren't limited to, experiences of depression, anxiety, phobias and low self-esteem and substance abuse.

ACCEPTANCE AND COMMITMENT THERAPY

At its core Acceptance and Commitment Therapy (ACT) encourages people to embrace the thoughts, feelings and experiences they are having rather than fighting them or feeling guilt and shame. While there are many aspects to ACT, there is a focus on encouraging people to live in the present in a way that is mindful and values driven.

What is it used for?

ACT has been shown to be helpful for a whole range of mental health concerns and stressful life experiences. Just some ways that it is utilized is to support individuals struggling with depression, anxiety, obsessive compulsive disorder, urges to drink or use other substances, low self-esteem, grief and experiences of psychosis.

Engaging in ACT might look like....

- Identifying and exploring core values that guide you
- Exploring how to more mindfully navigate through day-to-day life
- Looking at how you can use mindfulness-based tools in distressing situations

NARRATIVE THERAPY

As the name 'narrative' suggests, it looks at exploring the story someone has of their own life, how this story is impacting their experiences and potentially contributing to feelings of distress, and exploring ways to make space for new stories. In essence narrative therapy helps people embrace the concept that they are the expert in their own life, by identifying problem stories and then working to incorporate preferred stories.

What is it used for?

Narrative therapy is fairly flexible in the way that it is used and while it may not be as well known as other therapies, it is still effective for a wide range of things. These include but aren't limited to; anxiety, depression, grief and trauma, post traumatic stress disorder and family and couples counselling.

Some things to consider....

- This type of therapy can be very in depth
- It involves talking about and exploring both problems and strengths
- You'll be encouraged to re-evaluate your judgements of yourself



INTERVIEW WITH A...*Psychologist*

Thank you for sitting down with me today. Could you please explain what the role of a Psychologist is?

Psychologists use evidence-based assessments to determine why someone may be feeling a specific way. The process is collaborative and when the psychologist is confident in their diagnosis they will be able to utilise a range of evidence based techniques to help improve feelings, thoughts and/or behaviours.

This is quite different from sitting down and talking with someone without these skills as a Psychologist will use measures taken at each assessment to ensure improvement is witnessed across a predetermined time frame otherwise a different approach may have to be taken. Psychologist's also have many other roles but this is the most commonly seen one.

Why did you decide to become a psychologist?

After seeking help myself more than a decade ago and being unable to find the right fit for me I started studying the mental health field and realised that many psychologists were quite traditional in their methods. This was off-putting for many and they were considered too 'cold and clinical'.

I decided to get myself into the field so that I could potentially help someone not feel the same way I had too by offering a newer version of psychology that is still able to use the same techniques and tools but in a way that was much warmer and productive.



What do you enjoy about your role?

Far and above, the most enjoyment I get out of my role is being able to see my fellow community members improve their mental health and enter my rooms with a smile which for many is the first meaningful smile they have exhibited for a long time.

Knowing that by improving their mental health will ripple into those around them as well brings great joy.

If you feel comfortable, can you share what the value is that you see in working in the area of Psychology?

For me, the field of Psychology is still developing and improving every day. To be able to contribute to furthering the science whilst simultaneously helping my clients to achieve their dream lives is of great value.

Contributing to research and being able to inform clients of the potential great outcomes provides hope to both of us that we are moving in the right direction.

How has your work changed your perception or views on mental illness?

Prior to studying and working in this field I had quite limited views on mental illness as the majority of my views were based on those of my role models during my development. After researching mental illness and being able to apply that to my practise my views have vastly changed.

Unfortunately mental illness is both 'invisible' and stigmatised so my views since working in mental health have changed from fear of the unwell to being proud of those who refuse to let their mental health stop them from living a life worth living.

How do you look after yourself and balance your own self-care while supporting others?

I use an acronym to manage the basics of my self care which is HALTSS. Hungry, Angry, Lonely, Tired, Sick & Stressed. I make sure that I look after these key factors to make sure I can support myself and be present for others. Getting the right amount of nutritional needs in means I can balance my energy through the day. Looking after my emotions, taking time to process why I am feeling a certain way helps to balance my emotional energy.



“

If something is unhelpful, take the parts that work for you and leave the rest but don't give up on finding a treatment that works for you.

”

Factoring in social time with friends, family, or even strangers in public so that I do not feel lonely helps me feel connected. Ensuring I get enough sleep each night to allow my mind and body to rest and recuperate for the next day.

Giving my body time to rest if I am feeling sick. If I am feeling stressed, making sure I refocus my short term goals on resolving issues that will make that stress less. And last but not least, exercise! Getting the blood moving, working up a sweat is one of the best ways to manage all of these factors!

“I decided to get myself into the field so that I could potentially help someone not feel the same way I had too...”

If there was one thing you could tell people with mental illness, what might that be?

Mental health treatment is not a one size fits all. If something is unhelpful, take the parts that work for you and leave the rest but don't give up on finding a treatment that works for you. Mental health isn't like physical health where we can scan the brain and see exactly what needs to be done.

It will often involve a little trial and error but those errors are what will help ensure your therapist knows what not to do and that is just as important as knowing what to do!

Is there anything else you'd like to share today?

Yes, if you have tried psychology in the past and found that your psychologist was not a good fit for you. Don't give up hope on finding one that is right for you.

We are seeing more and more diversity in the Psychology field but sometimes it takes some time for you to find that right fit. Keep pushing for your mental health, you deserve the best fit for you.



Anonymous



Have an interview topic idea you would like to read about? We would love to hear it! Please let us know at letss@skylight.org.au

This new section of our peer magazine focuses on what Peer Workers at LETSS have learnt from their different life experiences, sharing what they've learnt along the way.



THINGS I'VE LEARNT...

going back to study

Making the decision to study can be one of excitement, but it can also be filled with apprehension and nerves. I know that it took me a long time (a couple of years actually) to make the decision to apply for a course and begin the tertiary application process. Here are some things that I've learnt from recently going through Tafe and Uni courses as a mature aged student:

- Worrying about studying as a mature aged student is really common, and its OK to not like the fact that you're referred to as a mature aged student .
- You are not alone in feeling overwhelmed about beginning this new venture into study.
- Take time to research what you want to study: what pathways are available in the field you want to work in? Is the study available online, in person or a blended model? Part time or full time study load? What job opportunities there are?





- Keep remembering why you've chosen this pathway of study. I had sticky notes of reasons why I chose to study my particular course and kind words that people had said to me to help during times of doubt. Really, it can be anything that is helpful during this time.
 - Some TafeSA courses require you to complete a Core Skills Profile for Adults (CSPA) before admission into the course. A CSPA is a 90minute test with three different parts: reading, writing and numeracy. I was really nervous about this test. Basically, it's all about providing information to TafeSA so that they can see if you need more learning support during your course.
 - Textbooks: you don't necessarily need to purchase textbooks, the library (or online library) at your Uni or Tafe, may have textbooks/e textbooks available. You can also use Google Scholar to find peer reviewed articles when doing research, and you can find second hand text books that other students are selling for cheaper on websites such as studentvip.com.au
 - It's OK to ask questions! It can be awkward, it can also be a relief to ask that question that you've been thinking about.
- Remember that the teachers/lecturers are there to help you learn, and asking questions is all a part of the learning process. You still don't have to like asking questions but it can be helpful to remember that you're investing your time to learn so you may as well get the most out of it!
- What the heck is a USI? A Unique Student Identifier (USI) is an individual number that you get for your education (Tafe and Uni), keep this number recorded somewhere that you can access easily!
 - Take snacks to classes and lectures (online and in person). Even if you're interested in what is being presented, it can be tiring trying to concentrate and having something to snack on now and again can be helpful to keep those energy levels up.
 - Take breaks. Having regular breaks can help to refocus on the task we're working on, and it can just feel good to take a few moments to stretch. I found the Pomodoro Technique to be very helpful with this, have a look at this YouTube clip about it:



L.

LETSS TALK ABOUT

We asked, you told, and we listened! Recently, we asked for some feedback on what you would like to see more of within our LETSS issues. Many people shared that they would like us to cover 'heavier' topics. For instance, topics such as drug use, suicidal ideation, and safe sex just to name a few! So, as part of our commitment to bringing you the content you ask for, we have introduced a new section called "LETSS TALK ABOUT" in which we talk about some of the heavier topics surrounding mental health. However, we acknowledge that this might not be for everyone! So please only read whatever you feel comfortable with and for those who do chose to read ahead, we hope you enjoy and please feel free to provide feedback on the kind of topics you would like to see more of!



Trigger Warning
Please be advised that this section discusses some difficult topics that may be triggering for some readers. If you require support, please reach out to a trusted person or contact LETSS on 1800 013 755

In this issue we cover....

**TALKING
ABOUT SUICIDE -
MYTHS**

**DISCLOSURE IN
THE WORKPLACE**



TALKING ABOUT SUICIDE - MYTHS

There's no doubt that talking about suicide is a challenging thing. It can be really scary, and difficult to know what to say or do when someone shares with you their experiences around suicide. While there's not necessarily a 'right' or 'wrong' way to talk about suicide, there are undoubtedly some very unhelpful myths floating around about suicide and how to engage in conversations around suicide. Today we wanted to de-bunk some of these myths as well as (do our best to) offer some practical guidance on what may be helpful when supporting someone having experiences around suicide. If you feel this is something that you may find helpful and this content feels safe to engage with, please feel free to read ahead.

Myth #1: Asking someone if they are suicidal increases their risk of taking their own life.

This concern is one that does float around a lot. However research has shown that safely bringing up the conversation of suicide absolutely doesn't increase someone's risk of taking their own life. In fact, asking someone directly about suicide can offer some relief and an opportunity for them to speak about

what they're going through. It can show that you're open and willing to listen and offer support, and provide the space for someone to voice feelings and experiences that are often very difficult to bring up.

Myth #2: There are no warning signs that someone may be suicidal.

While there aren't always necessarily glaring and obvious signs that someone is experiencing suicidal thoughts, there are generally some indicators. Someone may not be speaking openly about wanting to end their life but this doesn't mean they're not expressing in other ways that they're struggling. As mentioned in the previous point, it's often extremely challenging to bring up the topic of suicide or any mental health struggles, this makes it all the more important to look out for those close to you and open up the conversation yourself if you're having some concerns. Everyone is different but some common warning signs that someone may be experiencing mental health struggles and suicidal thoughts are (on the next page):

- disinterest in activities they usually find enjoyable
- uncharacteristically reckless behaviour
- lack of interest in the future
- uncharacteristic anger
- uncharacteristic substance use
- giving away valued & sentimental possessions

This is by no means an exhaustive list and if someone is exhibiting these behaviors it doesn't necessarily mean that they're thinking about suicide, but these are good things to look out for.

Myth #3: If someone is talking about suicide they probably don't intend to follow it through.

Most people who take their own life make mention of their intentions, whether it be explicitly or in other ways. Moreover, even if someone is talking about suicide but doesn't have an explicit plan or intention of ending their life, it is really important to listen and offer support. Sometimes, it can be easy to convince ourselves when someone speaks about suicide that there is nothing to worry about (because it's really scary to think otherwise), but it's really important we don't discard or minimize this experience. Talking about suicide is most often an expression of deep pain, and whenever we feel we can, we should offer a space for the individual to talk through what's happening for them and how they're feeling.

Myth 4: suicide is selfish.

People who are experiencing suicidal thoughts are very likely having experiences that are intensely overwhelming and negative. Further to this, these experiences

can be very isolating, and may leave someone feeling like there are no other options. Although this attitude/feeling of suicide being selfish can be really difficult to move through, it's really important that it is challenged and dismantled as much as possible. Societal and personal judgements around suicide make it all the much harder for people having these experiences to feel seen, heard and understood. One of the best ways to do this with anyone close to you who may be struggling, is by listening deeply. Often times by offering someone the space to really unpack and talk through their experience we can gain a better understanding and empathy for what they're going through.

To wrap it up....

This is by no means a thorough or step-by-step guide on how to have conversations around suicide. Rather just some gentle advice on what things may be important to consider. You may have noticed there's a bit of a theme around listening. This really is an extremely meaningful thing you can offer someone having suicidal thoughts and experiences. It may sound really simple, but helping someone feel less alone through such an intense experience, is often the most valuable thing. And if you're finding yourself in a situation where you're supporting someone experiencing suicidal ideation remember to seek support and look after yourself too. These conversations are important, but they're really tough too.

If you are needing support you can contact:

Lifeline 13 11 14

Beyond Blue 1300 224 636

Suicide Call Back Service 1300 659 467

Mental Health Triage 13 14 65



DISCLOSURE IN THE WORKPLACE

The decision about whether or not to disclose your mental health condition to a current or prospective employer can be a stressful one. On the one hand, by discussing your mental health condition with an employer, you are creating the opportunity to destigmatise mental health within the workplace and implement supports you may need to keep yourself well. Concealment may be particularly difficult for people who believe that withholding of information about their mental health condition is dishonest. This may subsequently cause the burden of secrecy to be as stressful in and of itself.

On the other hand, you may be concerned about potential stigma and discrimination in the workplace and the impact on your reputation. Some may have a strong preference for privacy and to separate your personal and professional lives, or may not be ready to disclose your mental health status. Both perspectives are equally valid, and you may position yourself somewhere in between. Ultimately, there is not a universal right or wrong decision and you will need to weigh up the pros and cons as they relate to your unique situation and individual preferences.

However, you may like to factor the following considerations into your decision-making:

- Under the Disability Discrimination Act 1992 it is unlawful for an employer to directly or indirectly discriminate against employees living with a mental health condition. This discrimination could occur during the recruitment process, when determining terms and conditions of employment or considering reasonable adjustments, in selecting or rejecting employees for promotion and through dismissal or demotion.
- You are not generally required to tell a current or prospective employer about your mental health unless it may affect your ability to perform the inherent requirements of the role. As outlined under the Act, your ability to work safely is a requirement of any role, which includes taking care of your own and other's health in the workplace. This means that if your mental health condition could reasonably be seen to create a safety risk in the workplace, then your decision not to disclose could be considered a breach of your mutual obligations under Work Healthy and Safety legislation.

- Employers are also required to ensure your right to privacy. This is a provision under the Privacy Act 1998. As outlined by the Australian Human Rights Commission (2010), "when a worker discloses that they have a mental illness, this information should not be disclosed without their consent." Employers can only use this information for the purpose that it was shared, unless it is "necessary to prevent or lessen a serious and imminent threat to the life or health of the individual concerned or another person, or is...required or authorised by law" (AHRC, 2010).
- Occupational health and safety legislation also requires that employers make reasonable adjustments to ensure the workplace supports the physical and mental health of all employees. This means that if you choose to disclose your mental health condition to a current or prospective employer, they have a legal responsibility, so far as is reasonably practicable, to make changes to your role to support your participation in the workplace.

However, every workplace culture is different, which means the amount of support you receive from a current or prospective employer may vary, as well as their commitment to the above responsibilities. Generally, however, the costs of disclosure will be lower where the workplace culture advocates for inclusivity. Therefore, it may be useful to research your workplace culture, practices and policies that address diversity and discrimination before choosing to disclose.

Talking about your mental health condition can be a vulnerable experience particularly in the workplace. Therefore, if you are considering the decision to disclose your mental health condition, it may be useful to create a plan before talking to a prospective or current employer to ensure the information you share is congruent with your values and conducive to your goals. For example, identifying how much information you would feel comfortable to share, how specific you want to be about your experience, what method of communication you would prefer, what adjustments would benefit you at work, and what you are hoping to gain from the conversation. You may also like to consider examples of personal strengths you have developed through your lived experience of having a mental health condition and how it may advantage your role.

If you are experiencing or have experienced discrimination in the workplace and you are unable to resolve the matter, there is support available. One option is to call The Fair Work Ombudsman on 13 13 94, this service can provide advice, investigate allegations of unlawful workplace discrimination and initiate litigation against an employer for contravening their responsibilities. Alternatively, you may prefer to raise your concern with the Australian Human Rights Commission on 1300 359 711 or your relevant state or territory anti-discrimination body.

Australian Human Rights Commissions (AHRC, 2010).
Workers with Mental Illness: a Practical Guide for Managers.
http://www.humanrights.gov.au/disability_rights/publications/workers_mental_illness_guide.html.



BLISS BALLS

Simple and delicious but you do need a food processor. You can play around with the ratios of ingredients to find what works best for you, but this is a basic recipe to start off with.

LETSS COOK:
vegan edition

Ingredients

- 1 cup of pitted dates
- 1 cup of any of the following or a combination of; hemp seeds, sunflower seeds, pumpkin seeds, peanuts, walnuts, cashew nuts – or combos of other nuts
- You can add puffed rice but may need a little more water or dates
- 1 tablespoon of cocoa powder
- ½ cup of desiccated coconut plus coconut to roll the balls in
- A splash of water

Method

- Put it in the food processor and blitz to a thick paste (add more or less water to your preference).
- Roll into balls and run through the desiccated coconut to coat.
- Enjoy!



VEGAN SAUSAGE ROLLS

Wonderful substitute for an Australian staple.

Note that there is flexibility in what vegetables and garnishes can be used to make the perfect dish for you!

Ingredients

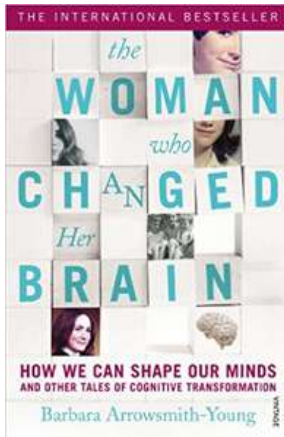
- 1 cup breadcrumbs
- 1 brown onion, diced
- 2 tbsp soy sauce
- 3 tbsp olive oil
- 1/2 tbsp paprika
- 2 cloves garlic, minced
- 2 tbsp tomato paste
- 300g firm tofu, chopped
- 1 tbsp sesame seeds
- 2 sheets of puff pastry

Method

- Preheat oven to 175°C.
- Heat a frying pan with olive oil and fry the diced onions.
- Add the breadcrumbs into a bowl, before blending in the fried onions, tofu, garlic, tomato paste, soy sauce and paprika.
- Lay the puff pastry on the baking tray and spoon the mixture into the middle of each pastry sheet evenly. Roll up the pastry to make one large sausage roll and divide it into 9 smaller pieces.
- Brush olive oil over the pastries and sprinkle sesame seeds on top. Then, bake in the oven for 25 minutes.

LETSS REVIEW

Welcome to LETSS review, where our Peer Workers review books, apps, podcasts and more!



The Woman who Changed her Brain, written by Barbara Arrowsmith-Young. This is an inspiring account of her life with learning disabilities and how she learnt about herself through understanding the

brain and neuroplasticity. This book is an account of her experiences with cognitive exercises and understanding of neuroplasticity to go on to university and the opening of her own school to help others living with learning disabilities.

This is a very empowering account of what determination can look like in the face of challenges. This book is also very informative on how the brain works and the amazing world of neuroplasticity!

L.



Gifted is a charming movie about a girl named Mary who has 'gifted intelligence'. Her uncle supports her as her mother died at a young age and has a cat with one eye that goes everywhere with her. Once people realized

she was 'gifted', a wide range of professionals and her estranged grandmother intervened and wanted to send her to a prestigious academic school. There is a court battle where the custody of Mary is put into question. Mary is upset

because she believes her uncle is best positioned to support what she wants. At one point in the movie Mary states (about her uncle), "he is a good person, he wanted me before I was smart!" I do not want to spoil the ending but I think everyone should watch this movie!

This movie demonstrates a stunning example about how we ourselves and perhaps those close to us, know what is best and should be actively involved in decision-making about our care.

While people from the outside and those trying to support us may have ideas about what might work for us, it is only us who know ourselves best.

I am a firm believer in the saying, "no decision about me without me" (NHS, 2011). I think this movie demonstrates this beautifully and highlights the importance of having someone

you trust be there to advocate alongside you in these large systems. For many of us this means navigating the mental health sector, whereas for Mary it was navigating the education system.

Systems can be extremely challenging to navigate and systems have a tendency to silence those within them, so having someone who can walk the journey beside you and advocate is extremely valuable and important.

Another key take away from this movie is to remember that people care about you as a whole, not just based on your abilities. If you feel alone or like no one cares about you, please call us at LETSS. We have been there and want you to know we care.

A.

NHS. (2011). *Liberating the NHS: No decision about me, without me*. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/216980/Liberating-the-NHS-No-decision-about-me-without-me-Government-response.pdf

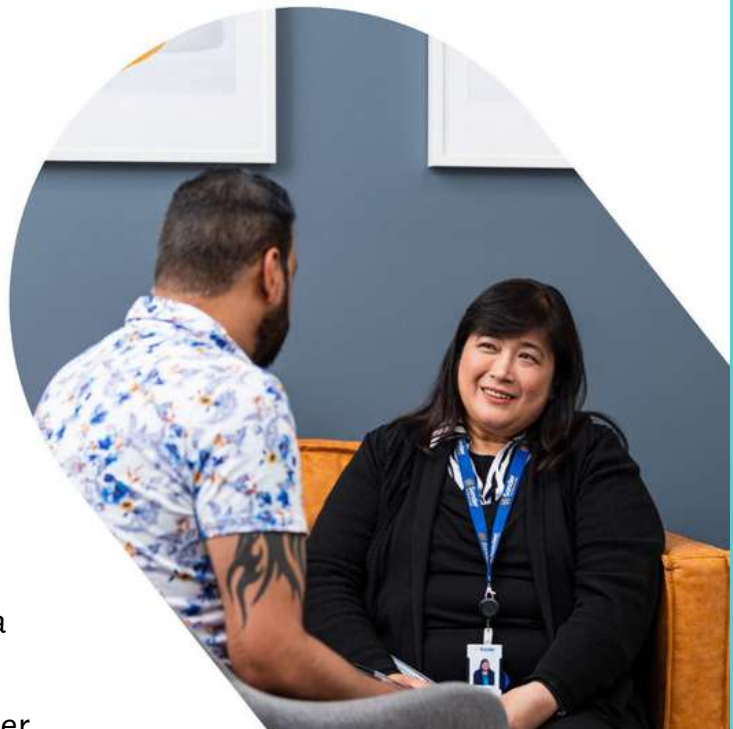
LETSS SHOUT OUT

A big part of LETSS is helping community members navigate the mental health system and find valuable supports. That is why we wanted to dedicate a section to some of the wonderful (and free) services that we refer callers to which they might find helpful.

Safe Haven

Safe Haven is a drop-in service run by Sonder. The drop-in service is for people aged 16yrs + who are feeling overwhelmed, distressed or lonely. Available in Salisbury, Tuesdays to Fridays from 5pm - 9pm.

No referral is needed to access the service, you can simply drop in for a tea of coffee and a chat with non-judgmental and friendly Sonder Peer Practitioners who have their own lived experience with mental health challenges. The drop-in service offers a relaxing environment where you can also play board/card games whilst connecting with others.



**Tuesdays - Fridays from
5pm - 9pm**

**Located at:
9 John Street, Salisbury**

Peer Practitioners can also help people to connect with other services that are available and suitable if needed.

You can find more information at
<https://sonder.net.au/programs/safe-haven/>
or call (08) 8209 0700



WORKSHEET

In our interview section, the H.A.L.T.S.S acronym was used as a way to check in and manage self care by looking into different areas that can affect how we feel. Try using this worksheet to check in with how you are feeling and maybe write down what you can do to meet your needs in these areas, or what you notice when you are feeling a particular way.

Hungry

-
-
-

Angry

-
-
-

Sick

-
-
-

Lonely

-
-
-

H.A.L.T.S.S

Stressed

-
-
-

Tired

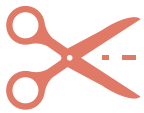
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A wellness toolbox contains all of those things that help keep you well. You may decide to get a physical box and place things inside such as your favourite movie, pictures of you and your loved ones, helpful phone numbers. Alternately you can fill in the boxes below by listing down those things that help keep you well.

When you're not feeling well, choose something from your toolbox to try. Here are some ideas from the peer workers at LETSS:

- play the piano
- wear fidget ring
- watch the Great British Bakeoff



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LETSS Keep Connected!

LETSS is a free, non-crisis, peer support service for people in the Adelaide Metropolitan Region.

Call or webchat us
7 days a week from 5:00pm - 11.30pm
Information | Navigation | Support



1800 013 755



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letss.org.au

Links to Wellbeing is a consortium commissioned by the Adelaide PHN and run in partnership between Neami National, Mind Australia, Skylight Mental Health and UnitingCare Wesley Bowden.