



# ENIGMA

## BIPOLAR NEWS AND VIEWS



[www.bipolarotago.balance.org.nz](http://www.bipolarotago.balance.org.nz)

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This newsletter was put together by Teresa Mulligan Mike McAlevey, Jan Idour and Helen Sue with contributions from lots of other people.

**BIPOLAR NETWORK**  
(Otago Mental Health Support Trust)

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OPEN

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10 am – 3 pm

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### Living the High Life

*Fasten your seatbelts. Leeann Scott's life is a tumultuous ride, flying high in more ways than one. I had the privilege to meet Leeann at the Motor Camp where she and partner Mick are the proprietors. Leeann is 43, born in West Auckland to a Tongan mother and kiwi father with Scottish roots. As we talk, her story is sprinkled with hearty laughter and some wistful tears.*

*At a very young age Leeann knew she was different.*

*"From about the time I was nine...I was a little bit...happier than everybody...When I was sad, boy was I sad. My mother commented on it. I actually put a stop to ever having a family because I felt, like there was a part of my life that I wasn't in control OK, right from a young age."*

*Leeann's mother also told her that she had meningitis at three years old and that the doctors warned of possible difficulties from the vaccine in later life.*

*"I had sixteen injections a day...kept breaking the drip...They said at the time...a lot of them were coming out with epileptic fits...manic depression...things like that."*

*Leeann did get a diagnosis of bipolar disorder in her late thirties, but not before a successful career as an international airhostess.*

*"From zero to thirty five I was quite influenced by something that was out of control and yet to a large degree I was using it to my advantage because Air New Zealand required somebody who was upbeat all the time whether you were in somebody else's time zone or not...Everything was on a high no matter whether you were at home or at work because everything was on a different level...you could be somebody different...I hid it with that fact. I hid it with the booze. I really was managing to work in a job that changed your whole chemical balance... On top of that I was coping by drinking because I couldn't sleep...I mean you couldn't sleep for four days...trying to catch up with it...The other thing was...I lived by myself...No-one could actually say hey...well they couldn't say anything, not even my family...Suddenly my money was going nowhere...and I was making a lot of money...and I wouldn't ring them...I still do it now when I'm in a place where I can't look after myself. I cut off all communication, simply because I have to draw in...I hid it with everything...You got more than booze on an aircraft, you had access to anything, and of course I hid that too from everybody else...and it was easy to...When I quit Air New Zealand I quit because I wasn't coping any more...they thought it was just the booze...and I was losing my closest friends and I couldn't tell them what was wrong...So I quit but it was then that everything just went into a slide...but in the meantime I'd just met Mick...he was routine, he was constant, every day, and he turned my life to the point where all I had to do was deal with the drinking, whatever it was that was making me do this...I wouldn't do it on a regular basis but when I did it I did it hard...three casks a day was nothing, but it wasn't getting to the issues...It wasn't until I got here...I'm talking 43, we got here when I was 39. Air New Zealand to me was a big thing...and it was the crowning achievement...yet it was such a big disappointment because that's where I learned people are superficial. They will take whatever they can get."*

## Evening Forum May 7<sup>th</sup> 5.30pm-6.30pm The Roles of mental health Act enforcers explained. DAO, District Inspector, Judge.

*Cont'd from page 1.*

*Leeann's sadness shows when she talks about her family's unwillingness to discuss bipolar.*

"They won't whisper a word of it because they don't understand it, they didn't want to understand it... My father's got it in his side of the family, that they never even mention, she's got it in her side of the family that they didn't even know about...and when they found out about me...You know they still won't say "Was it bipolar?" or "Could we have helped?"

*Leeann's mother did overcome her fears and travelled twice to visit her daughter in the psych ward.*

"My mum was really good. She wouldn't give me any more help, no monetary, no advice, but she was just there...She came all the way down to the hospital twice...Got the room next door so she could stay...cause she's from Coopers Beach... She said, "I don't know what to do." I said, just being here..."

*I asked Leeann what being given a diagnosis of bipolar disorder meant to her.*

"It meant nothing to me because as far as I could see it's always been there. You can't just label it. I mean if it's Leeann Scott that's who it is...OK you have to mention it...because it helps someone else...The reason why I knew about it so much is that my aunty, who is only two years older than me, got diagnosed with it the year before but she told no-one and right up until last year when I said to Mum...your sister's been diagnosed the year before me and she said nobody knows about that... "When you get cancer you let everybody know in your family because it's in their genes...It's just as important as if you got cancer...Cancer used to be a thing you thought oh no they're dead now but now it's just something you cope with and on you go. In the health system we tend to section off things...and put them in a place where we have to...ignore them...and people...because it's much easier to.

"Yeah it wasn't a surprise but then I didn't accept it either...to this day it's still really hard thinking there's something I've gotta take extra care of...It's that there is a starting point...To some degree in subconscious I actually thought I was special...At least I had something that explained what was going on...I actually felt special because...I thought...I've got something I can work with here...people will take notice."

*When Leeann and Mick came to Otago she asked for help from the local mental health unit to try and get her life in order.*

"Jo (not her real name) is my counsellor from the mental health unit...she said to me why did you trust me? And I said because I remembered her telling me the truth about her situation, that she wasn't obligated to tell me...We got to know each other...not on a personal level...but on a level where I could relax enough...The problem she said with me was...every time I knew she was coming I'd have myself in perfect order...She would never see the bad side of me...Even to this day I won't go to the doctors, even if I'm really bad, until I'm looking OK, well enough to get dressed, or comb my hair, and I think that's a real problem with me. We started off with the counselling sessions...then they started dropping off so it was just a casual thing...She would come over and see me when she could...still on a professional...not friendly basis...She was there on the day they hauled me in. From that day which was in January all the way through to the January next year, I was in and out of hospital and I didn't really have time with her then...After that personally I refused to go back there because I thought if I can't...help myself first...That's when I withdrew into the house. Everybody called me a recluse and said there was something wrong with me but all I was doing was getting better...I spent three months doing that. ...She's still there if I ever need to see her. She was there through the worst times...and through the good times.

"When I woke up from that suicide bid...all I could think of was...Where's Mick? That was the only thing that was on my mind. He's left me. And that was the only thing that I thought, if I'm going to get something right, I'm going to get this right. So they were a great help in also repairing our relationship because they got him another counsellor...We had talks with Jo and the male counsellor, all together so we could all sort out what was...actually happening here that was affecting us deeply...She was really good too because she could see that it wasn't really us that was the problem, it was the circumstances surrounding us that were getting to us...I gave up the booze after the suicide bid and...although I was in and out of there five times...We weren't talking so Jo had to come to us...They all helped us on a quieter level, not one...that you would think you could get help for...But on a level that was breaking point for us and I knew that if we split then I'd just leave this earth...because I've got nothing left to live for...he was the greatest help by being here...And even when he was just as mad as what I was with what was going on...Then I had the counsellors, the family court, EPS, all behind me, and I just couldn't lose...But I could never have got that help anywhere else in New Zealand and I know that for a fact.

*Building healthy relationships is essential for Leeann.*

"If your relationships with anything, including yourself, aren't right, you aren't going to get a thing done...In order to work with the rest of the world you've gotta work with yourself so that you've got a relationship there...That's my...bottom line...Then I can work on making sure that the rest of my relationships are healthy. What isn't...I cut it.

*I suggest to Leeann that many relationships are strained to breaking point by bipolar.*

"Yeah we've been there. There was a time when I was drinking when we were just about to murder each other you know...There was a break, and the break was EPS, OK...and that gave me the opportunity to sleep off whatever it was...and then wake up and think...that was a shock...I never thought I'd get to that point...Going to EPS, I don't know what it's like for other people but at the end of it I was pleased...but at the beginning...that was the shock that made me think, hang on, what am I dealing with that I can't even talk my way out of this one...and I couldn't."

*Being detained under the mental health act was a traumatic experience for Leeann.*

"I was woken up out of a stupor, but this was at ten o'clock in the morning, I couldn't see what was wrong. Jo had just come over for a visit and she said "We're going to have to call them in." They read me the riot act...and then I found everything out after that, what they could do, and they did actually do things wrong...They were learning...What made me really angry was, I was in my bedroom, right? They had another nurse there...a male nurse...After the doctor read my rights I said could you please give me a few minutes alone to pack my bags and put something decent on because I only had my singlet and shorts on and they were going to take me like that and I said please Jo, just give me this minute to do it. She said...OK. Will you come with us? And I said OK, I'll get my gear together, and they walked out to call the police. Then the guy walked into my room and told me and said you cannot do that and I said who the fuck are you...Everything turned to mush after that...because they hadn't respected my privacy...I had no idea why I was going in..."

*I asked Leeann about her time in the psychiatric wards.*

"You hear the movies about the mental houses and you hear about Seacliff and stuff...The screams and the voices I heard at night there just...I knew I'd come a long way, but it was desperate there too and it was plastic knives and it was plastic forks and...people who were really really sick...The grounds were good but they weren't being used to the maximum. Yeah, the tennis courts...I think they need a bit of brushing up...Just things like plastic...I can understand why they do it but plastic over the mattresses? And the writings on the wall from people who have been there before...things that make you feel like you're in the gutter. People themselves, yes they were compassionate. They were there to do a job and I don't know how I'd handle some of the people...most of the people who were in that ward, but I didn't feel unsafe, just lonely I guess. Thinking...what am I doing here?"

Like a prison it was, that's how it came to be for me...The day I got there...I couldn't say a word...The nurses sometimes put boundaries up...just a job for them like anything else...Like I'm coming up there with my manic episode saying "I'm starving" and they say "You wait your turn. That's why you're in here and I'm not." When you have people throwing things like that at you, you're just...guttled, absolutely gutted...When you're living with people who are exactly like you, and they're probably even wilder or more depressed than you, OK, there's some camaraderie in there and you're proud of what these people are doing and you think fucking hell, if you can get by like that and you're in a dress and you're a man sort of thing, you know? Where am I? You just look at them and you think, I'm alright man, these people are alright...all your misunderstandings, all your fears actually get played out...in hospital.

"One night I found a guy...I got given my diazepam that night and...half way through the night I found this guy on top of me...he hadn't got quite too far...and I just said in my stupor "Fuck off, I'm already spoken for" and then the next morning I got up...he had got in between the two nurses...on their 15 minute checks so he was watching them...Anyway I went to the head nurse and I said I just had an incident last night...He said well you're lucky. In the last six months we've had five rapes or something like this...I just looked at him and I said what did you do about it? He says there's nothing we could do about it because we didn't see anything."

*Medication has had a big influence in Leeann's life. I asked whether she had to try many drugs before she found something that helped.*

"No, I was pretty lucky but I'm not one to pill pop. Prior to (epilim) I was on lithium, yeah, and that didn't work at all...I'm on tegretol now which has worked for me although...see, the problem was that big old house...She's got no lining...She was minus twelve degrees in the middle of winter you know...I started taking tonic clonic seizures, so for the two years that I lived there, from woe to the moment I moved out, I took tonic clonic seizures. I haven't taken one since so..."

*That was despite taking tegretol?*

"Yes, they upped it...so that's where I am now, on the upped level...that seems to have maybe done the trick but also I've moved out...For my moods tegretol worked...I was taking 500 at first, now it's up to 1000mg. That seems to have put a lid on the...seizures. They came out of nowhere, you know, real hard, head banging stuff, and...I haven't experienced it since but what I have experienced is, like those off balance things, and also some days, I just can't get up. I really have to stay all day in bed because...it's the light, the balance, the moods, and the head...it's hard to explain how it is...when you're heavy...you just want to stay there...you don't want to go to the toilet it's that bad...It only happens now on days of twos or threes... Last year...I was on my back for four days...I didn't know what it was...Is it my tegretol, is it the tonic clonic seizures, is it the bipolar...what is it?...The tegretol seems to help Mick more than me. As long as he can see me taking it he's at peace that everything's gonna be OK no matter what happens.

#### **Office closed!**

Sometimes when you call, our offices are closed. We do not do this readily, but there are times when all staff need to be out at the same time. Please leave a message and someone will get back to you.

“Over the period that I was taking tegretol before I took the tonic clonic seizures I was in there (*hospital*) six times...Then it stopped...I stopped drinking...and so I was able to get a lid on something...The time that I went in there because I just about...quit life, I gave up everything to make sure by the time six months came, if I needed anything, and boy did I need something by then...’cause I just felt my whole body sinking, just the whole physical mental spiritual part, I couldn’t lift it no matter how hard I tried...so I went back on tegretol, just a little bit at first and then I found that I’m OK, and not like epilim. Epilim just kept me right there and I couldn’t feel anything, I couldn’t read a book, I couldn’t focus, you know, like on finishing a book or a magazine, I was just too fuzzy, but tegretol I’m able to go up and down within a degree.”

*So on epilim you were stable mood wise?*

“Like concrete! Not living at all and that’s what Mickey found, and because my weight fluctuated between big and bigger...and I was doing everything in my power...I was swimming...I couldn’t get it together...I couldn’t swim for long...I just seemed to not be able to concentrate. I didn’t recognise this and yet I was on it for seven years you know. But I never thought I had a choice...It just never occurred to me until I got into the mental unit...you know there’s a possibility you’ve got an alternative here...they said there were several...they started me on tegretol...that seemed to work and after it went up it works even better now for me...Now the weight’s normal, you know, it’s constant no matter what I do or what I eat or if I do anything or nothing which is what I’ve known my body to do most of my life...not only was I putting on weight but I was tight, like liquid tight, you know. Everything was sort of swollen...and I just wasn’t there.

“When I tried to commit suicide...that was really embarrassing...Mick argued with them. They were going to put me back on epilim. He said you put her back on epilim and I’ll take her out now. You really had to fight to come off epilim because they thought I was doing OK. And he said she’s not OK. I was just thinking that was me all along, you know, but once you’re in it it’s much like the illness. If you’re not taking the right thing you’ll stick with it...cause you’re too much in it.”

*Leeann still lives with the highs and the lows.*

“Yeah...I get them...The symptoms are slowly differing...Believe it or not the weather down here has a big impression on me...I had to go to the doctors in the last two seasons because my balance is well off...I go into a hole, right, the depression stage, and I can sit here but it’s not only because of the depression, it’s my balance, the brightness and the light and the noise, and it could be a little, little noise and it affects me and those are the symptoms...They are stronger than ever now and it’s also called seasonal affective disorder...and you know that doesn’t make sense to me because when has weather ever affected me...simple things like that...I’ve still got my April/May, November/December...that’s when I go into...and I know it.”

*I asked Leeann who was the most important person in her recovery. She does not hesitate.*

“Mick. I think it’s also because he’s dealing with issues of his own...that use the same health system. I’d have to say Mick and also our health system...the health system for both good and bad reasons.

“It’s all been a journey, really, and each day now instead of being such an effort is an adventure...I don’t plan a thing...I don’t ignore the signs either...like it’s part of me and I really love it because...when I’m in one of those highs and you just feel like you could go forever and you’ve got brilliant ideas I focus, OK...and I’ve learned to do that by...taking my rest when I need it...when it says rest OK...but I’ve also had to make my life suit me, not what the feds say you’ve gotta work 40 to 60 hours a week, I couldn’t possibly do that, you know, so I’ve set myself limitations...

“What’s really calmed me down and got me back into the swing of things, is knowing your own pace, OK? Regardless of anybody else, and knowing that you can take care of yourself first; and the routine. Routine has just been one thing, even if it’s just one thing that I do that I get done, and it doesn’t matter that I sit in front of the TV for the rest of the day or something. I’ve accomplished it you know, in my own time.”

*Leeann talks philosophically about the nature of bipolar and her recipe for a healthy life. I ask whether she considers bipolar to be an illness.*

“No, it’s more like...a part of me. I feel like there’s nothing that can change that, whether you call it bipolar or not, it is my nature, to be like that, OK? That is what I have to deal with, something I can’t change. It just occurred to me one day while I was in the counselling session and everybody was talking around me and...I got the impression that they thought that if I took the pills it would go away...It wasn’t going to go away and I had to deal with the fact that it was part of me...”

“Within (bipolar) there is still sanity, you know...you’re still in the play and you’ve gotta act on that because it’s the only thing, the truth, about any situation.

“Everybody else who’s got whatever they’ve got, whether it be a broken arm or a broken heart, they still have to live...and we have to learn to do that too... We have to deal with something, not suffer from something...We suffer when people, including ourselves, section it off.

“It’s in our nature to do good. To be good to ourselves and eventually when you start getting the balance right...in your life, and it’s only basic stuff, you work a little, you play a little, you rest a little...I often wondered why the peace sign was...split up into threes, and then I started looking at thing like definite depth within me or meditating just so I could get me balanced before I get out there...it’s in threes you know...”

“And something that I noticed, the whole three, the father son and holy spirit and I’m thinking right, spiritual, mental, physical...I mean, it’s always divided in three, meat potatoes veg, you know?...It comes back to the simple things...Get it balanced.

“Work hard, rest hard, play hard. That’s the one. Yeah!”

### What we do.

The Otago Mental Health Support Trust provides information, education, support, referral and advocacy to people with experience of mental illness in the Otago region (with emphasis on Bipolar Disorder).

The Trust has been operating since 1989 and is committed to providing an accessible, high quality service. We believe to do this there must be involvement by clients at all levels. We have established through our policies and constitution a structure that includes at least 50% of current Board members and staff having had personal experience of mental illness. This gives us a unique edge in providing peer support. We consult with clients via meetings and our bi-monthly newsletter about our service with review and quality improvement as our goal.

We have rooms in the centre of Dunedin which have private offices for staff and client meetings as well as communal areas for training meetings. We have a **library of resources; books, videos, newsletters**, leaflets and handouts relating to various disorders and services. We refer people to other services as appropriate. We keep up to date information on entitlements in key areas such as housing, food, clinical and complementary services, legal rights and employment. We assist people to access their entitlements if needed.

**Advocacy and support** are the specialties of our service. We work alongside people to help them overcome whatever is complicating their lives. We help with issues like poverty, stigma and relationships with family or community which can affect a person's recovery process. We ensure that their voice is heard in clinical, bureaucratic or legal settings. We assist people to plan for wellness and crisis- crucial to reducing time spent in hospital or other interventions.

**Education** is provided to individuals, groups, family and friends as and when required. We run one day seminars and a four session evening course which is run once or twice annually not only in Dunedin but also covering the Otago regions of Balclutha, Oamaru and Alexandra. We deliver information and talks to medical students, pharmacy students, nurses, trainee occupational therapists and government agencies plus we participate in Expo's providing information to the wider community

Currently there are 7 staff working for the trust.

All staff are involved in Fieldwork and contribute to education, advocacy, peer /support work.

They are

Teresa Mulligan Team Manager, 30hours Monday - Thursday.

Denise Kent 36 hours Monday -Thursday

Mike McAlevey 30 hours Tuesday -Friday

Helen Sue- 25 hours Tuesday - Friday

Jan Idour 11 hours Monday and Friday

Kate Lindsay 7 hours, working Tuesday

Greg Mcleod 7 hours working Tuesday

## MENSLINE

Mensline is a free and confidential telephone counselling service specifically for men and staffed by male only counsellors.

**Monday to Friday 6.30pm to 10.30pm**

**0800 636 754**

We are **seeking people** who may be interested in joining our Trust Board. The meetings take place on the last Tuesday of every month at midday and run for about an hour. The role is a governance one, overseeing staff reports, responding to requests from staff, being kept up to date about issues in the sector etc. It is a friendly group of people who seem to enjoy the role of administering a staff of about 7 people, committed to helping support people to live well in the community.

We have a policy to maintain an even balance on the Trust Board of people who have personal experience of mental illness, and those who have interest or training in the area. If you or anyone you know would be interested, we'd love to hear from you.

The way it usually works is that you go to the next meeting or two, see how you like it and how it works then the Board can invite you to join.

If you would like to talk to me about the role of the Board members before then give Teresa a call or pop in.

### *New website!*

A brand new website

[www.outoftheirminds.co.nz](http://www.outoftheirminds.co.nz) produced by Mind and Body Consultants, features successful artists, performers and thinkers with experience of mental distress, exploring the value of their experiences, and what comes out of their minds.

The twist is that the artists actually interview themselves. Ben Cragg from The Benka Borodovsky Bordello Band interviews himself as several of his onstage personas. Award winning author, Judith White, interviews herself in a written exchange between her and some impatient characters from her latest unfinished novel.

"Madness is an experience utterly unique to any individual, so it makes sense people speak about it entirely on their own terms. Plus it's more interesting that way. And that's kind of the point - madness and mental distress can of course be really tough, we hear about that all the time, but there's more to it than that, and that's what this site will help show people." says Graham Panther from Mind and Body.

If you'd like to contribute to this site with a profile of your own and you think you fit the bill, contact Graham on [graham@mindandbody.co.nz](mailto:graham@mindandbody.co.nz)

# You said it You said it

In December 2008 the Otago Mental Health Support Trust ran a survey.

After randomly choosing 100 people from our mailing list we conducted the survey by telephone.

Thank you all for the time you took. Your feedback and suggestions are important to us in our endeavors to provide an exemplary service.

## We asked

### When did you last have contact with our service?

25% had contact within the last 4 weeks,  
21% had contact during last year  
12% in the last Month  
10% in the last 2 years  
17% in the last 3+ years

### 2. What method did you use to contact our service?

#### Telephone, mail, email, fax, other

60% of you used the phone  
39% came in to see us or requested a visit

### 3. How did you hear about us?

#### Brochure, newspaper, word of mouth, other.

41% said other, with some walking in off the street.

25% said word of mouth

25% said visited by fieldworker while in hospital

2% evenly divided between brochure, newspaper, and newsletter

### 4. What category did your inquiry fall into?

#### Advocacy, information, peer support, general support, education.

31% information

23% Peer support

15% advocacy

20% General support/family support

11% attended education seminar

### 5. On a scale of 1-5 with 5 being strongly agree

92% agreed the service you received was of a high standard.

7% were in the middle and one person disagreed

### 6. The person that assisted you was knowledgeable and easy to understand.

85% said we were

10% were in the middle and one person disagreed

### 7. The service you received was courteous, respectful and professional.

95% said it was

4% in the middle and 1% said it wasn't

### 8. We asked what changes, if any, we can make to improve our service.

52% said nothing needed to change

12% said they would like more phone or txt

8% said more education

8% said advertise our service more

4% said help with finding a GP

4% said bring back the retreats

4% said more information on wards

2% More clarity about what we do.

### 9, 10, 11, 12.

### We asked have you visited our website. Was it easy to navigate? Was the information on our website comprehensive and of a high standard?

82% hadn't visited our website and those of you that have thought it was a good site.

### 13, 14, 15.

### We asked were you satisfied with our publication Enigma. Is the information in Enigma comprehensive and of a high standard?

96% said it was great.

### 16. We asked what changes, if any, we can make to improve Enigma.

45% said it has great info,

12% said bring back the puzzles and jokes

8% said they wanted more educational articles

8% said they wanted more pages

20% said more personal stories.

We have taken your suggestions on board and this month Mike went off to do an exclusive interview, which tells the journey and story of a person with bipolar. Also we realize that while we know what we do, some of you may be reading Enigma for the first time so we will include a regular slot about our service, that of other mental health services and items of topical interest in the Otago region.

The puzzles and jokes are back, and this is a larger edition.

Please visit our website as we will continually update with new items.

Again thank you to the individuals and organizations that contributed to our survey.

**Question: You are a bus driver. At the first stop of the day, eight people get on board. At the second stop, four get off, and eleven get on. At the third stop, two get off, and six get on. At the fourth stop, thirteen get off, and one gets on. At the fifth stop, five get off, and three get on. At the sixth stop, three get off, and two get on. What colour are the bus driver's eyes?**

**Reminder**—in our office we have both a Benefit Fact File and Legal Resource Manual which have just been updated. Should you need any information regarding either of these, please ask a staff member. We are only too happy to assist.



### **Phobic phone line**

This is a 24 hour a day, seven day a week free phone line staffed by volunteers. It is to help people who are experiencing panic attacks or OCD thoughts and need to talk to someone.

0800 142694389

Letters to Enigma

Dear Editor

We all have experience in some form or other. Our experiences through life and living help make up the person we are today. The highs and lows in our lives have helped refine us. Realising you are special and unique in your own right helps you feel free to be yourself. There is no-one quite like me. My individuality is my uniqueness. In turn we all have something special to offer each other, for example there are some things I can do, others are not able to do.

Accepting that everyone is so unique and special helps one acknowledge we are all part of a giant jigsaw puzzle of life. We all have the humanity factor in common. The difference we make to each other is open to how much we choose to be. For me I value giving real and genuine time to people it is the most special gift you can give someone.

*Mervyn McFadden*

Dear Editor

In my experience there is a major downside to taking St. Johns Wort. I was taking an antidepressant which had significant adverse effects. In consultation with my GP I was weaned of that and started a course of St. Johns Wort. Two months later I was admitted to ward 9 at Wakari Hospital as the finale of the 2 month manic episode which wreaked havoc on my life and the lives of those around me. Recovery was very slow. My GP did not know that St. Johns Wort can cause mania in people with Bipolar disorder.

*Kate*

*If you want to write or make a contribution to Enigma send to*

*Enigma*

*POBOX 5021 Dunedin or email*

[otagomd@ihug.co.nz](mailto:otagomd@ihug.co.nz)

Last year the **OTAGO MENTAL HEALTH SUPPORT TRUST** were the recipients of some Mac computers, kindly passed on to us by the Otago University. **THANK YOU FROM ALL THE PEOPLE THAT RECEIVED THEM**

**FROZEN FUND CHARITABLE TRUST**  
Applications for 2009 CLOSE ON 30<sup>TH</sup> March  
For more information call our office or call in and pick up a brochure

## From the Archives

In 1884 the Seacliff Lunatic Asylum was opened at Seacliff, 28 kilometres up the coast from Dunedin. It provided housing for 500 patients and 50 staff, and at the time was the largest public building in New Zealand. At about 9:45 pm on 8 December, 1942, fire broke out in Ward 5. This ward was a two-storeyed wooden building which had been added on to the original stone building when the hospital was expanded at the end of the nineteenth century. In Ward 5 were 39 women mental patients, all locked into either single rooms or the 20-bed dormitory. Most windows were locked, and could only be opened by a key from inside. It was during the Second World War, and there was a shortage of nursing staff. There was no nurse on duty in the ward at night, although checks were made by staff from other wards every hour. The fire was first noticed by a male attendant who raised the alarm and ran to bring the fire hoses and reels from the small hospital fire station to a fire hydrant near Ward 5. He was able to save one patient by pulling off the grating over her window and dragging her out. Another patient was rescued from the first floor. Both survivors were in rooms which did not have locked shutters on the windows. The hospital's fire fighters tried to put out the fire, but it was too fierce, and within an hour only ashes remained of Ward 5. However they were able to stop the flames from spreading to other wooden buildings. 37 of the 39 patients in Ward 5 died in the fire. Other events and outcomes A commission of inquiry found that the wooden building of Ward 5 was dangerous, and once the fire had started, it spread through the building very quickly. There were no automatic fire alarms in Ward 5, unlike other newer parts of the hospital. Any alarm in the building had to be raised by unlocking a cabinet and pushing a button to start the fire alarm. The commission of inquiry criticised the design of the building and the way in which the windows were shuttered and locked from the inside at night. It recommended the installation of sprinkler systems in all psychiatric institutions. The commission also felt that there was not enough staff on duty to supervise the patients at night. The hospital fire brigade were praised for their action on the night, which prevented the loss of other lives. The cause of the fire was not discovered. A new mental hospital was opened at nearby Cherry Farm in 1954. The Seacliff Mental Hospital fire was the worst in New Zealand until Ballantyne's fire, five years later. Sources

McLean, Gavin. [Fires and firefighting](#). Wellington, 1992

**THE DEMPSEY TRUST**

The Income of this trust is to assist needy patients and former patients of Healthcare Otago institutions and needy children in the care of various institutions. There is no formal application form. A letter of application to the secretary should state fully the reasons for seeking the grant and give as much information as possible. Applications can be submitted through Otago Mental Health Support Trust.

**DISCLAIMER**

The opinions and articles expressed in this newsletter do not necessarily represent the views of the Otago Mental Health Support Trust or anyone associated with the organisation.

**WHAT'S WHAT?**

1. What it is that no one wishes to have, but no one wishes to lose?
2. What it is that everyone believes is always coming, but never really arrives?
3. What is it that you can't hold for half an hour, even though it's lighter than a feather?
4. What is it that's put on the table, cut and passed, yet never eaten?
5. What is it that occurs four times in every week, twice in every month, but only once in a year?
6. What is full of holes, but still holds water?
7. What is the one thing you break when you name it?
8. What is always in front of you, even though you can never see it?
9. What always weighs the same, whatever it's size?
10. What is large enough to hold a pig and yet small enough to hold in your hand?
11. What is it that the person who makes it doesn't need, the person who buys it doesn't want it for himself and the person who uses it does so without knowing it?
12. What is it that everyone, no matter how careful they happen to be, always overlooks?
13. What can be right, but never wrong?
14. What lives on its own substance, but dies the moment it has devoured itself?
15. What is it that has no length, no breadth, no thickness, but when it is given to you, you definitely feel?

- A prize to the 1<sup>st</sup> correct answers

\*\*\*\*\*

**DID YOU KNOW?**

**The Development of New Zealand Standard Time**

New Zealand was one of the first countries in the world to officially adopt a nationally observed standard time. New Zealand Mean Time, adopted on 2 November 1868, was set at 11 hours 30 minutes ahead of Greenwich Mean Time. Greenwich Mean Time was established by British Railways in the 1840s but was not made Great Britain's standard time until 1880.

In 1941, due to emergency regulations in the Second World War, clocks were advanced half an hour in New Zealand. This advance was made permanent by the Standard Time Act 1945. The Act provided that New Zealand Standard Time was set 12 hours in advance of Greenwich Mean Time or Universal Time.

For more interesting facts on Daylight saving go to The department of Internal Affairs

**Sunday April 5<sup>th</sup> - Daylight savings finish**



Photo of Lake Benmore in autumn taken by Mike McAlevey

Many thanks to these people for their support:



Otago University Students' Association

AAW Jones Charitable Trust, ACE Shacklock Charitable Trust, Balance, Dempsey Trust, The HealthCare Otago Charitable Trust, John Illott Trust, Colortronics, University of Otago Marine Science and Nutrition departments.

